



# 2024 Perú National Survey on the Mental Health of LGBTQ+ Young People



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# EXECUTIVE SUMMARY

The Trevor Project's 2024 Perú National Survey on the Mental Health of LGBTQ+ Young People amplifies the experiences of more than 4,500 LGBTQ+ young people ages 14 to 24 across Perú. This survey gives a voice to LGBTQ+ young people at a time when their existence is unfairly at the center of political debates and ongoing anti-LGBTQ+ policies.

In the United States, The Trevor Project has conducted five annual national surveys since 2019, underscoring that anti-LGBTQ+ victimization is associated with higher rates of suicide risk among LGBTQ+ young people and that many who want mental health care are unable to access it. For the first time, this survey similarly collected data from a diverse sample of LGBTQ+ young people across Perú. Importantly, this research points to ways we can all support the LGBTQ+ young people in our lives by highlighting protective factors, including access to LGBTQ+-affirming people, spaces, and communities.

We hope this survey will equip fellow researchers, policymakers, and other youth-serving professionals and organizations with the data necessary to celebrate and uplift LGBTQ+ young people and advance policies that support their health and allow them to better lead the happy, healthy lives they deserve.

## Key Findings

- 55% of LGBTQ+ young people seriously considered attempting suicide in the past year, and 37% made an attempt. Rates were higher among transgender and nonbinary young people compared to their cisgender peers.
- 45% of LGBTQ+ young people who wanted counseling in the past year were not able to get it.
- More than half (53%) of trans and nonbinary young people said their caregivers, parents, siblings, and other relatives in their family were unsupportive of their gender identity.
- 14% of LGBTQ+ young people reported that their homes were LGBTQ+-affirming.
- Nearly two in five (39%) LGBTQ+ young people in Perú said they lived in a community that was accepting of LGBTQ+ people, and those from accepting communities were less likely to report a past-year suicide attempt.

# Methodology Summary

A quantitative cross-sectional design was used to collect data through an online survey platform between October 24, 2022 and December 12, 2022. The survey was offered in Spanish. A sample of LGBTQ+ individuals aged 14 to 24 who resided in Perú was recruited via targeted ads on social media. The survey consisted of 71 questions, covering a range of topics related to mental health and exposure to risk and protective factors. The analyses in this report were based on a final analytic sample of 4,643 LGBTQ+ young people.

# Recommendations

There is a critical need for accessible mental health services for LGBTQ+ young people in Perú, underscored by the high rates of suicide attempts and ideation, particularly among younger individuals and those identifying as transgender or nonbinary. Significant funding and accessibility gaps in mental health services exacerbate this issue. Additionally, the lack of supportive social networks highlights the importance of creating affirming environments, which have been linked to lower rates of suicide attempts. The persistence of conversion therapy, amid legislative inaction, calls for urgent advocacy and legal protections against such harmful practices. Moreover, further research is essential to fully understand the unique mental health needs of LGBTQ+ young people and to address the broader mental health challenges faced by the young people in Perú.

# BACKGROUND

In Perú, LGBTQ+ young people encounter numerous forms of discrimination including individual, systemic, and structural. Peruvian society is not accepting of sexual and gender minorities, and these couples do not have the right to marry or have civil unions (Cabrera & Barrueto, 2023). Over time, such discrimination can cause minority stress, a process by which chronic discrimination results in high levels of stress for minority communities, including LGBTQ+ populations (Meyer, 2003; Moloney, 2019). Minority stress can also contribute to the development of mental health issues such as post-traumatic stress disorder, substance use, anxiety, and depression (Meyer, 2003; Tomicic, et al., 2021; Turban et al., 2020). In addition, minority stress can increase the risk of suicide, suicide ideation, and attempts, which are more common among LGBTQ+ individuals compared to their heterosexual, cisgender peers (Bostwick et al., 2014; D’augelli, 2002; Liu & Mustanski, 2012; Marshal et al., 2012; Moskowitz, Stein, & Lightfoot, 2013; Mueller, James & Levin, 2015; Reisner et al., 2015; Russell & Joyner, 2001; Williams & Chapman, 2011).

The World Health Organization (WHO) has prioritized suicide as a critical public health problem, noting it as the fourth leading cause of death among individuals aged 15 to 29 (World Health Organization, 2021). Their 2021 report highlights the need to focus on suicide in low- and middle-income countries. However, little has been done to characterize groups at increased risk of suicide or understand their mental health needs. Most existing research has been conducted in high-income countries, with little research outside of these settings. Additionally, much of the existing data is of poor quality, including the data on suicide from Perú (WHO, 2021). In Perú, only one national survey has been conducted with LGBTQ+ individuals, primarily addressing human rights and identities, rather than LGBTQ+ health and well-being (Institut Public de Sondage d’Opinion Secteur, 2019).

Although there has been recent implementation of mental health services within the primary health system in Perú, people still struggle to access these services due to long wait times and limited personnel (Marquez & Bayona-Garcia, 2019; Save the Children, 2020). Most readily available services are in the private sector. Furthermore, health care and mental health services for young people are generally limited for individuals under the age of 18, unless they seek care with their parents or through their parents. The mental health needs of LGBTQ+ young people have been documented in other global contexts, however this information is not available in Perú.

# METHODOLOGY

The content and methodology for The Trevor Project's 2024 Perú National Survey on the Mental Health of LGBTQ+ Young People were approved by independent Institutional Review Boards in both the United States and Perú. To ensure cultural and linguistic competency of this work, our local research partners worked with a community advisory board of 11 LGBTQ+ young people in Perú to obtain feedback and adapt the survey and other study materials accordingly.

A quantitative cross-sectional design was used to collect data through an online survey platform between October 24 and December 12, 2022. A sample of individuals ages 14 to 24 who resided in Perú was recruited via targeted ads on social media. No recruitment advertisements were posted onto The Trevor Project's website or social media accounts. Respondents were defined as being LGBTQ+ if they identified with a sexual orientation other than heterosexual, a gender identity other than cisgender, or both. Recruitment was monitored to ensure adequate sample sizes with respect to age, region, gender identity, and sexual orientation. Qualified respondents completed a secure online questionnaire that included a maximum of 71 questions. Questions on considering and attempting suicide in the past year were taken from the Centers for Disease Control and Prevention's Youth Risk Behavior Survey. Each question related to mental health and suicide was preceded by a message stating, "If at any time you need to talk to someone about your mental health or thoughts of suicide, please call:" ("Si en algún momento necesitas hablar con alguien sobre tu salud mental o pensamientos suicidas, consulta esta lista de recursos:") and a list of several Perú-based, LGBTQ+-affirming psychological chat and hotline services.

There were 12,425 respondents who consented to start the survey, whom we identified as unique respondents based on IP address and reported age, province of residence, sex assigned at birth, gender, sexual orientation, and race/ethnicity. Of those, 989 were ineligible based on age (younger than 14 or older than 24 years) and country of residence (i.e., outside of Perú). An additional 1,494 respondents were pathed out, or excluded, for not meeting demographic requirements. 1,768 did not complete the demographic questions on sexual orientation and gender identity, and 687 were not LGBTQ+. This resulted in an eligible sample of 7,487 LGBTQ+ young people. We excluded any youth who did not reach the midpoint validity check on the survey (n=2,415), failed the validity check (n=378), or indicated that they had responded to almost none or only some of the questions honestly (n=51). The final analytic sample was **4,643 LGBTQ+ youth aged 14 to 24 years who resided in Perú.**

Chi-square tests were used to examine differences between groups. Comparisons are statistically significant at  $p < 0.05$  unless otherwise noted, which means there was a  $< 5\%$  likelihood of the results occurring by chance.

This report uses "trans and nonbinary" as an umbrella term for all non-cisgender young people. This includes trans and nonbinary young people, as well as genders beyond the cisgender binary (e.g., genderqueer, agender, genderfluid, gender neutral, bigender, and androgynous, among others).

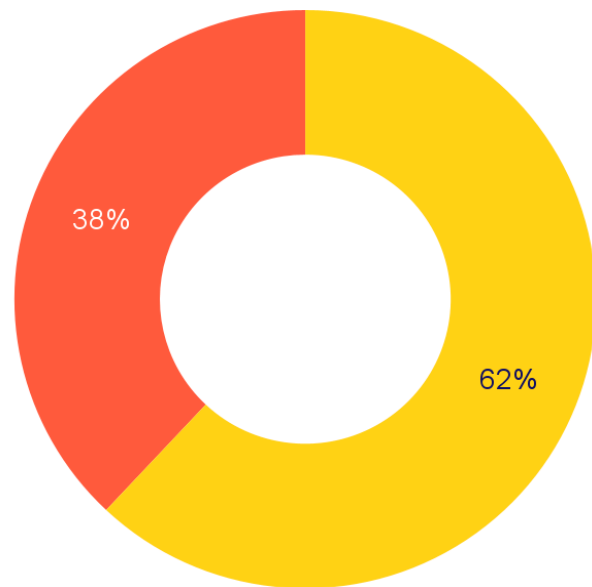
All analyses on family affluence in this report uses a quintile Family Affluence Scale (FAS). The raw composite FAS score (0-9, where 0 is least affluent and 9 is most affluent) is categorized uniformly into five groups: 0-1 (least affluent), 2-3 (less affluent), 4-5 (affluent), 6-7 (more affluent), and 8-9 (most affluent).

Geographic regions are coded as followed: “North” included Áncash, La Libertad, Piura, Cajamarca, Lambayeque, and Tumbes; “South” included Arequipa, Apurímac, Puno, Moquegua, Cusco, and Tacna; “Central” included Ica, Junín, Ayacucho, Pasco, Huancavelica, Huánuco, and Lima Provincia; “Jungle” included San Martín, Amazonas, Loreto, Ucayali, and Madre de Dios; “Lima” included Lima Metro and Callao.

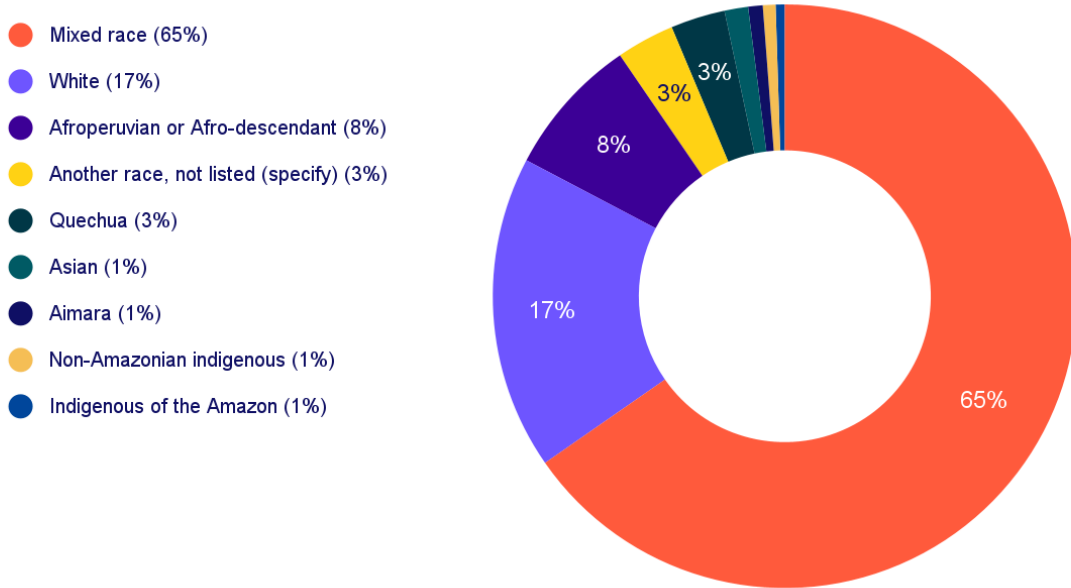
## DEMOGRAPHICS

### Age Among LGBTQ+ Young People in Perú

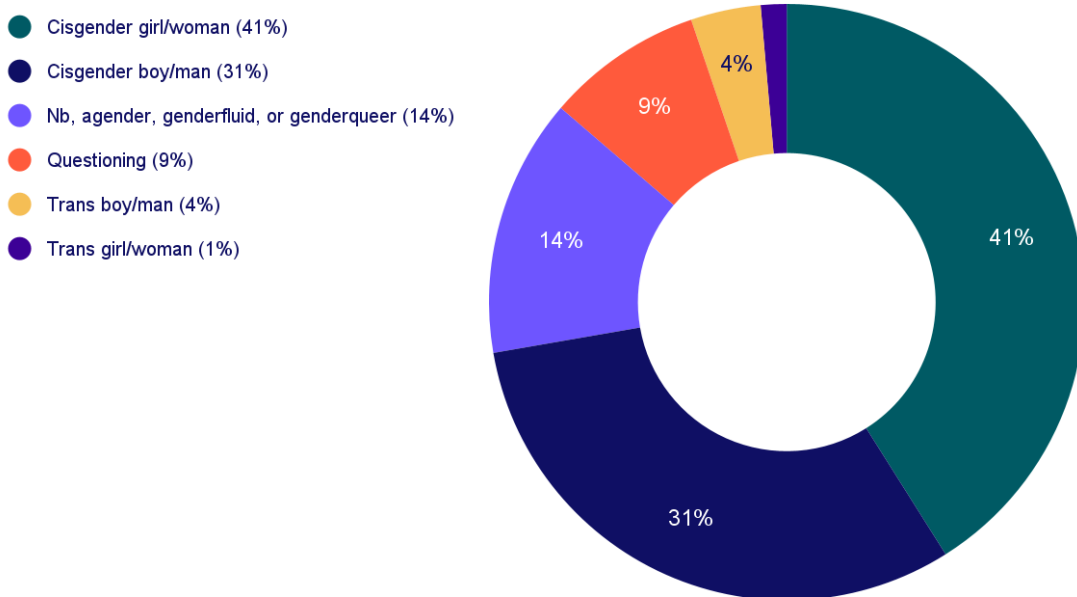
- Minor (14-17 years) (62%)
- Adult (18-24 years) (38%)



## Race and Ethnicity Among LGBTQ+ Young People in Perú

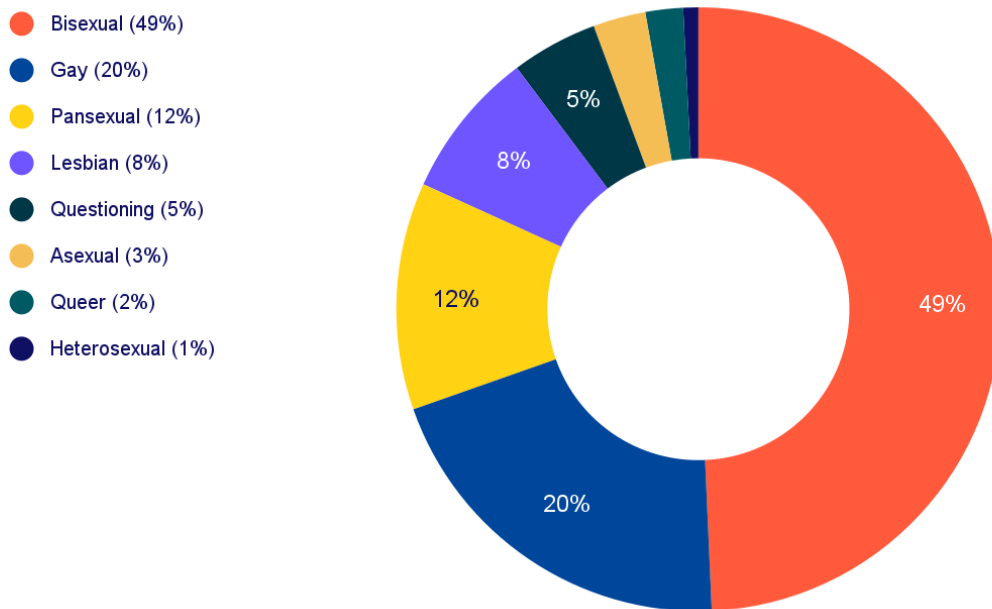


## Gender Identity Among LGBTQ+ Young People in Perú

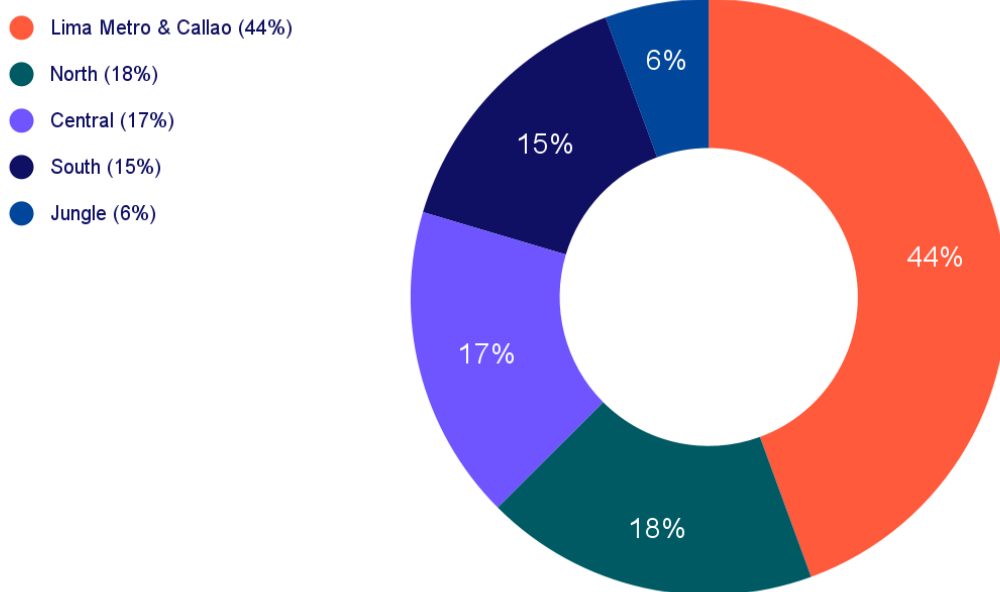




## Sexual Orientation Among LGBTQ+ Young People in Perú



## Regions Among LGBTQ+ Young People in Perú



● **North:** Áncash, La Libertad, Piura, Cajamarca, Lambayeque, Tumbes.

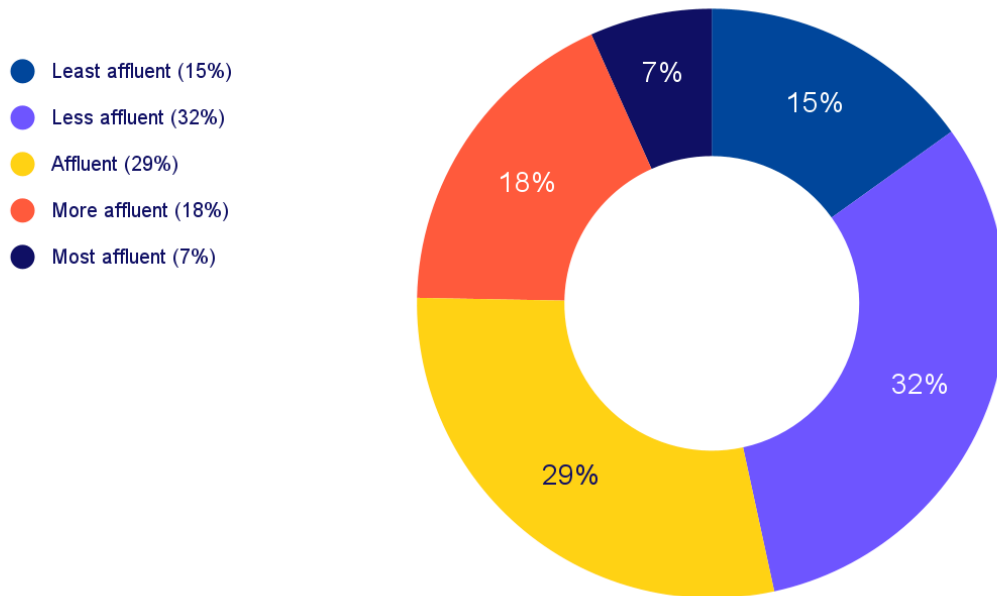
● **South:** Arequipa, Apurímac, Puno, Moquegua, Cusco, Tacna

● **Central:** Ica, Junín, Ayacucho, Pasco, Huancavelica, Huánuco, Lima Provincia

● **Jungle:** San Martín, Amazonas, Loreto, Ucayali, Madre de Dios

● **Lima:** Lima metro and Callao

## Family Affluence Among LGBTQ+ Young People in Perú



## RESULTS

### Mental Health & Suicide Risk

#### Suicide Risk

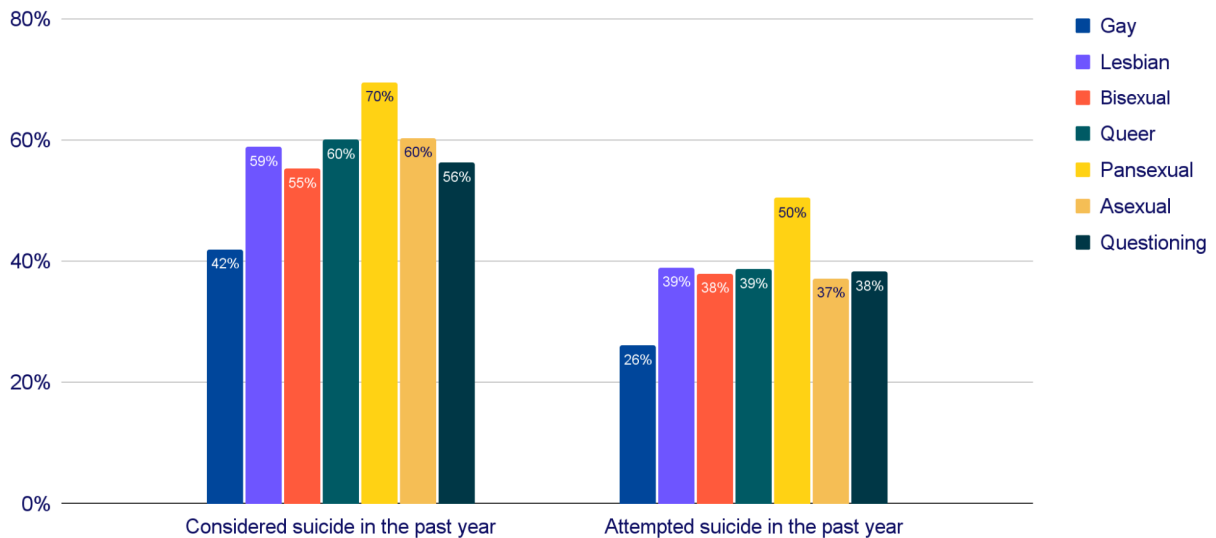
More than half (55%) of LGBTQ+ young people in Perú seriously considered suicide in the past year, including more than two-thirds (69%) of trans and nonbinary young people and nearly half (48%) of cisgender young people. More than 1 in 3 (37%) LGBTQ+ young people attempted suicide in the past year, including half of trans and nonbinary young people (50%) and nearly 1 in 3 cisgender young people (31%).

We found significant differences among subgroups:

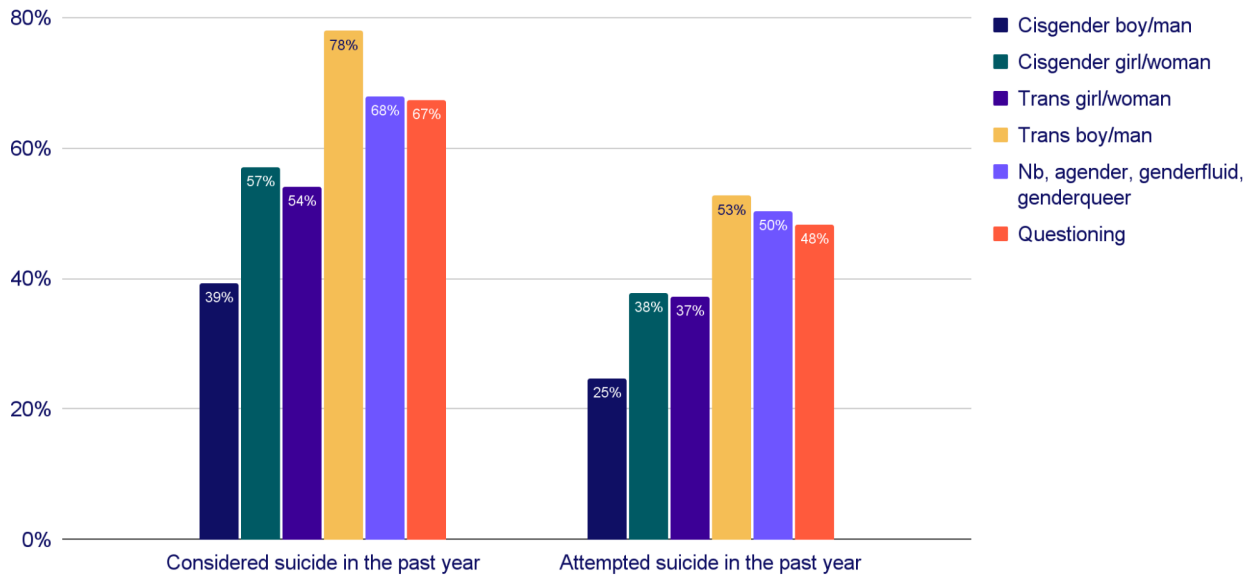
- By age, LGBTQ+ young people in Perú ages 14 to 17 reported significantly higher rates of seriously considering suicide in the past year (61%) and attempting suicide in the past year (44%), compared to their older peers ages 18 to 24, who reported lower rates (45% seriously considering suicide and 26% attempting suicide in the past year).
- By race/ethnicity, Asian LGBTQ+ young people in Perú reported the highest rates of seriously considering suicide in the past year (70%) and attempting suicide in the past year (54%), although it is important to note that the sample size of Asian young people was relatively small (n = 53).

- In terms of sexual orientation, pansexual young people reported the highest rates of seriously considering suicide in the past year (70%) and attempting suicide in the past year (50%).
- Across gender identity, trans boys/men reported the highest rates of seriously considering suicide in the past year (78%) and attempting suicide in the past year (53%).
- Geographically, LGBTQ+ young people living in the Central region and the Jungle region reported the highest rates of attempting suicide in the past year, at 41% and 40%, respectively.
- Finally, considering family affluence, LGBTQ+ young people from the least affluent families reported the highest rate of seriously considering suicide in the past year (62%) and attempting suicide in the past year (46%).

### Considered or Attempted Suicide by Sexual Orientation



## Considered or Attempted Suicide by Gender Identity



## Mental Health

Among LGBTQ+ young people in Perú in our sample, 58% reported symptoms of depression, including more than two-thirds of trans and nonbinary young people (68%) and more than half of cisgender young people (54%). Overall, 55% of LGBTQ+ young people reported symptoms of anxiety, including nearly two-thirds of trans and nonbinary young people (64%) and more than half of cisgender young people (51%).

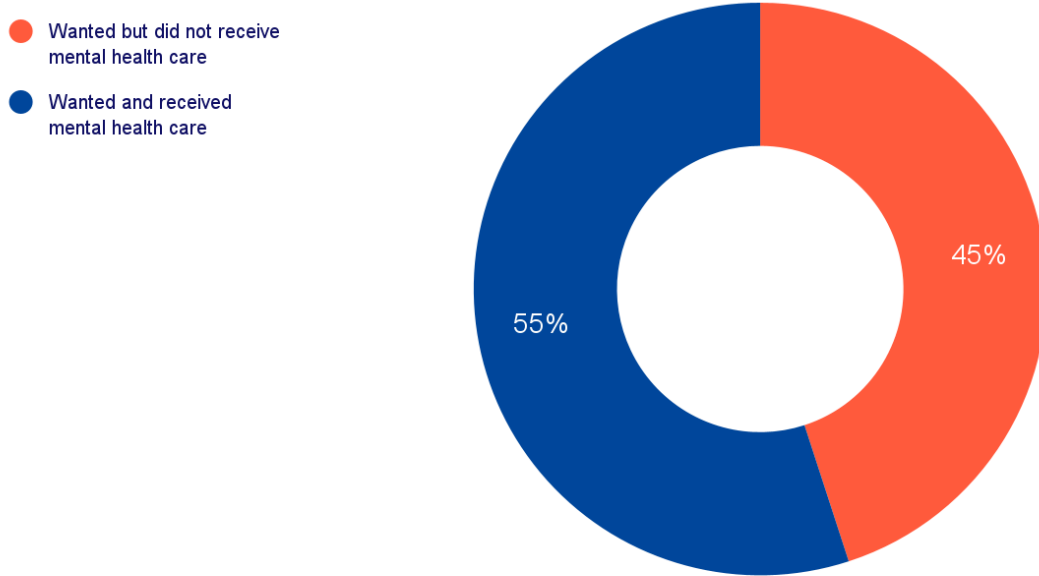
There were significant differences among subgroups:

- By age, LGBTQ+ young people in Perú ages 14 to 17 reported significantly higher rates of symptoms of depression (61%) and symptoms of anxiety (58%), compared to their older peers ages 18 to 24 (53% reporting symptoms of depression and 50% reporting symptoms of anxiety).
- By sexual orientation, pansexual and asexual young people reported the highest rates of symptoms of depression at 68% and 67%, respectively. Furthermore, pansexual young people reported the highest rate of symptoms of anxiety at 65%.
- By gender identity, trans boys/men reported the highest rates of symptoms of depression and anxiety at 76% and 71%, respectively.
- By region, LGBTQ+ young people living in the North, South, Central and Lima Metro Callao reported similar rates of symptoms of depression. However, LGBTQ+ young people living in the Jungle region reported significantly lower rates of symptoms of depression (49%) compared to all other regions.
- By family affluence, LGBTQ+ young people from the least affluent families reported the highest rate of symptoms of depression at 65%.

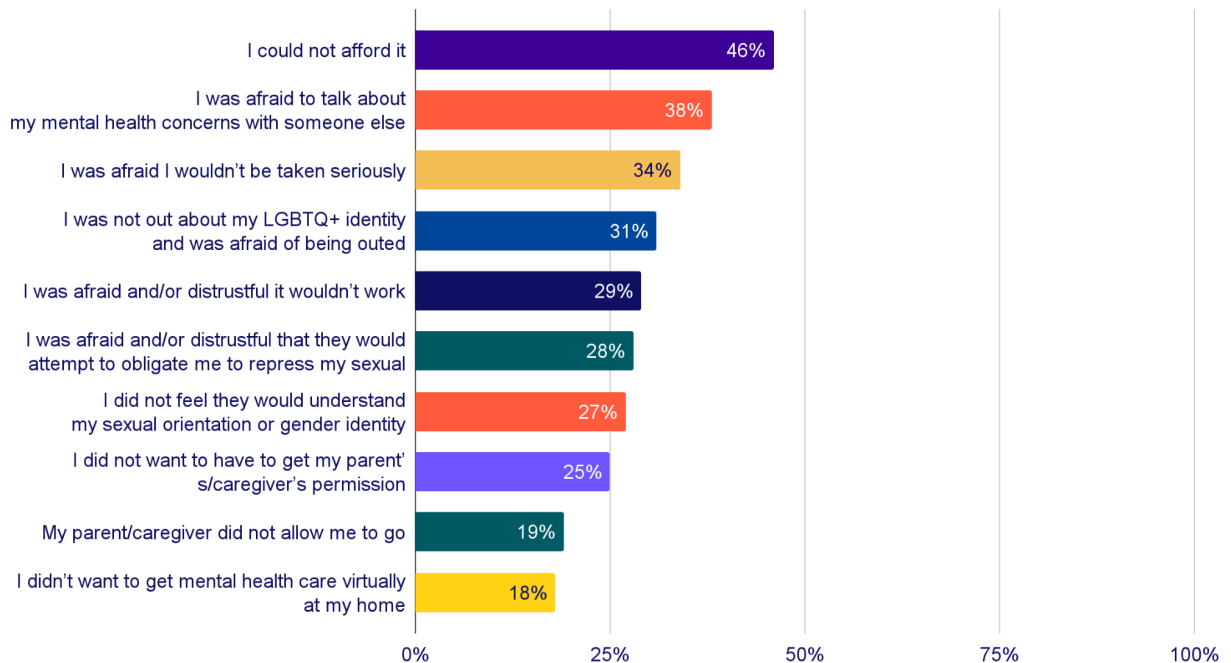
# Access to Mental Health Care

Overall, 46% of LGBTQ+ young people in Perú reported wanting mental health care in the past year. Among these, 45% reported not receiving the mental health care they desired, with nearly half (46%) indicating “I could not afford it” as the reason.

## LGBTQ+ Young People and Desired Mental Health Care



## LGBTQ+ young people in Perú who wanted mental health care but could not get it, cited these top ten reasons



Furthermore, LGBTQ+ young people in Perú who reported wanting but not receiving mental health care reported significantly higher rates of attempting suicide in the past year (50%), compared to their peers who reported wanting and receiving mental health care (40%) and those who reported not wanting any mental health care (31%).

There were significant differences among subgroups:

- By age, those between 14 to 17 years reported a significantly higher rate of wanting but not receiving mental health care in the past year (48%), compared to their older peers ages 18 to 24 at 42%.
- By gender identity, nonbinary, agender, genderfluid, and genderqueer young people reported the highest rate of wanting but not receiving mental health care at 51%, followed by young people who identified as questioning at 50%.
- By region, LGBTQ+ young people living in the Central region reported the highest rate of wanting but not receiving mental health care at 53%.
- Finally, by family affluence, LGBTQ+ young people from the least affluent families reported the highest rate of wanting but not receiving mental health care at 56%.

## Anti-LGBTQ+ Victimization

LGBTQ+ young people who experienced anti-LGBTQ+ victimization – including being physically threatened or harmed, discriminated against, threatened or subjected to conversion therapy, or being kicked out or forced to run away from their homes – reported significantly higher rates of attempting suicide in the past year compared to those who did not have any of these anti-LGBTQ+ experiences.

### Physical Harm

Regarding threats and experiences of physical harm due to their LGBTQ+ identity, 15% of LGBTQ+ young people in Perú reported being physically threatened or harmed due to their sexual orientation, and 26% of trans and nonbinary young people in Perú reported being physically threatened or harmed due to their gender identity. Overall, nearly a third (31%) of all LGBTQ+ young people in the sample reported ever being physically threatened or harmed due to either their sexual orientation or gender identity, and over half (51%) of those threats and harms occurred in the past year.

Significant differences among subgroups were noted:

- By age, LGBTQ+ young people in Perú ages 14 to 17 reported a significantly higher rate of having been physically threatened or harmed due to their sexual orientation (17%), compared to their older peers ages 18 to 24 (12%). Similarly, trans and nonbinary young people in Perú ages 14 to 17 reported a significantly higher rate of having been physically threatened or harmed due to their gender identity (29%), compared to their older peers ages 18 to 24 (21%).
- In terms of sexual orientation, gay and pansexual young people reported the highest rates of having been physically threatened or harmed due to their sexual orientation, at 20% and 19%, respectively.

- Across gender identity, trans girls/women reported the highest rates of having been physically threatened or harmed due to their sexual orientation (29%) and due to their gender identity (39%).
- Geographically, LGBTQ+ young people living in the Jungle region reported the highest rate of having been physically threatened or harmed due to their sexual orientation (20%).

## Discrimination due to LGBTQ+ Identity

Forty-eight percent of LGBTQ+ young people in Perú reported having experienced discrimination due to their sexual orientation. Furthermore, more than half (57%) of trans and nonbinary young people in Perú reported having felt discriminated against due to their gender identity. Overall, slightly less than two-thirds (66%) of LGBTQ+ young people in Perú reported ever feeling discriminated against either due to their sexual orientation or gender identity, and three-quarters (75%) reported that the discrimination occurred in the past year.

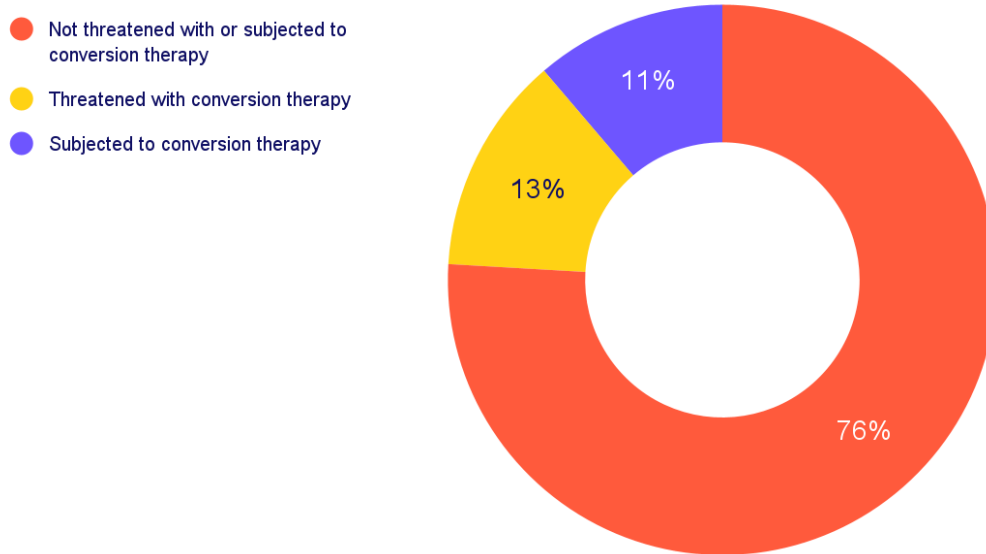
Significant differences were noted among subgroups.

- By age, LGBTQ+ young people in Perú ages 14 to 17 reported a significantly higher rate of having felt discriminated against due to their sexual orientation (49%), compared to their older peers ages 18 to 24 (46%).
- By sexual orientation, gay and lesbian young people reported the highest rates of having felt discriminated against due to their sexual orientation, at 60% and 56%, respectively.
- Finally, by gender identity, cisgender boys/men and trans girls/women reported the highest rates of having felt discriminated against due to their sexual orientation, at 57% and 56%, respectively. Additionally, trans boys/men reported the highest rate of having felt discriminated against due to their gender identity, at 77%.

## Conversion Therapy

Regarding conversion therapy, 24% of LGBTQ+ young people in Perú reported that they had either been threatened with or subjected to conversion therapy. This included 19% of cisgender young people and 34% of trans and nonbinary young people. Among these, those who reported they had ever been subjected to or threatened with conversion therapy reported higher rates of past-year suicide attempts, compared to young people who reported that they had never been subjected to or threatened with conversion therapy.

## Among LGBTQ+ Young People in Perú



There were significant differences among subgroups:

- By race/ethnicity, Asian young people reported the highest rate of ever being subjected to conversion therapy at 19%, although this is based on a relatively small sample ( $n = 53$ ).
- By sexual orientation, lesbian and gay young people reported the highest rates of ever being subjected to conversion therapy, at 16% and 15%, respectively.
- By gender identity, trans boys/men reported the highest rate of ever being subjected to conversion therapy at 18%, closely followed by nonbinary, agender, genderfluid, and genderqueer young people at 17%.
- Geographically, LGBTQ+ young people living in the Jungle region reported the highest rate of ever being subjected to conversion therapy at 15%.

### Being kicked out or running away

Eighteen percent of LGBTQ+ young people in Perú reported having to run away or being kicked out by their parents/caregivers, including 17% of cisgender and 24% of trans and nonbinary young people. Among the LGBTQ+ young people who had to run away or were kicked out, 37% reported it being due to their LGBTQ+ identity. LGBTQ+ young people who reported ever having to run away or being kicked out by their parents/caregivers reported significantly higher rates of attempting suicide in the past year (56%), compared to their peers who never had these experiences (31%). Similarly, LGBTQ+ young people who reported ever having to run away or being kicked out due to their LGBTQ+ identity reported significantly higher rates of attempting suicide in the past year (59%), compared to their peers who never had these experiences (35%).



Significant differences among subgroups were noted:

- Among age groups, LGBTQ+ young people in Perú ages 18 to 24 reported a significantly higher rate of ever having to run away or being kicked out due to their LGBTQ+ identity (8%), compared to their younger peers ages 14 to 17 (6%).
- Across sexual orientation, gay young people reported the highest rate of ever having to run away or being kicked out due to their LGBTQ+ identity at 11%.
- In terms of gender identity, trans boys/men reported the highest rate of ever having to run away or being kicked out due to their LGBTQ+ identity at 12%. In contrast, cisgender girls/women reported the lowest rate of ever having to run away or being kicked out due to their LGBTQ+ identity at 3%.
- By family affluence, LGBTQ+ young people from the least affluent families reported the highest rate of ever having to run away or being kicked out due to their LGBTQ+ identity at 11%.

## Outness about Sexual Orientation and Gender Identity

Overall, 20% of LGBTQ+ young people in Perú reported they were out about their sexual orientation to all or most of the people they know. Additionally, 17% of trans and nonbinary young people in Perú reported being out about their gender identity to all or most of the people they know.

The following were the significant differences noted among subgroups:

- By age, LGBTQ+ young people ages 18 to 24 reported a significantly higher rate of being out about their sexual orientation to all or most of the people they know (28%), compared to their younger peers ages 14 to 17 (16%).
- By race/ethnicity, Indigenous and Native young people reported the highest rates of being out about their sexual orientation to all or most of the people they know (32%), although it is important to note this sample size is relatively small (n = 50).
- By sexual orientation, gay and queer young people reported the highest rates of being out about their sexual orientation to all or most of the people they know, at 34% and 33%, respectively.
- By region, LGBTQ+ young people living in the Lima Metro Callao and the Jungle regions reported the highest rates of being out about their sexual orientation to all or most of the people they know, at 24% and 23%, respectively.
- By family affluence, LGBTQ+ young people from the most affluent families reported the highest rates of being out about their sexual orientation to all or most of the people they know at 26%.

While we recognize that 'outness' could also potentially put young LGBTQ+ individuals at higher risk of discrimination, it can also offer its own benefits.

## Gender Affirmation

Only 11% of trans and nonbinary young people in Perú reported that all or most of the people they know respected their pronouns. Regarding gender-affirming hormones, 3% of

trans and nonbinary young people in Perú reported currently taking them, whereas 43% reported wanting but not currently taking them. Furthermore, 58% of trans and nonbinary young people reported wanting but not having access to shapewear.

Having people in their lives who respected their pronouns was associated with lower rates of seriously considering suicide in the past year among trans and nonbinary young people in Perú.

There were significant differences among subgroups:

- By age, trans and nonbinary young people ages 18 to 24 reported a significantly higher rate of having all or most of the people they know respect their pronouns (26%), compared to their younger peers ages 14 to 17 (15%). Similarly, trans and nonbinary young people ages 18 to 24 reported a significantly higher rate of having access to shapewear (31%), compared to their younger peers ages 14 to 17 (22%).

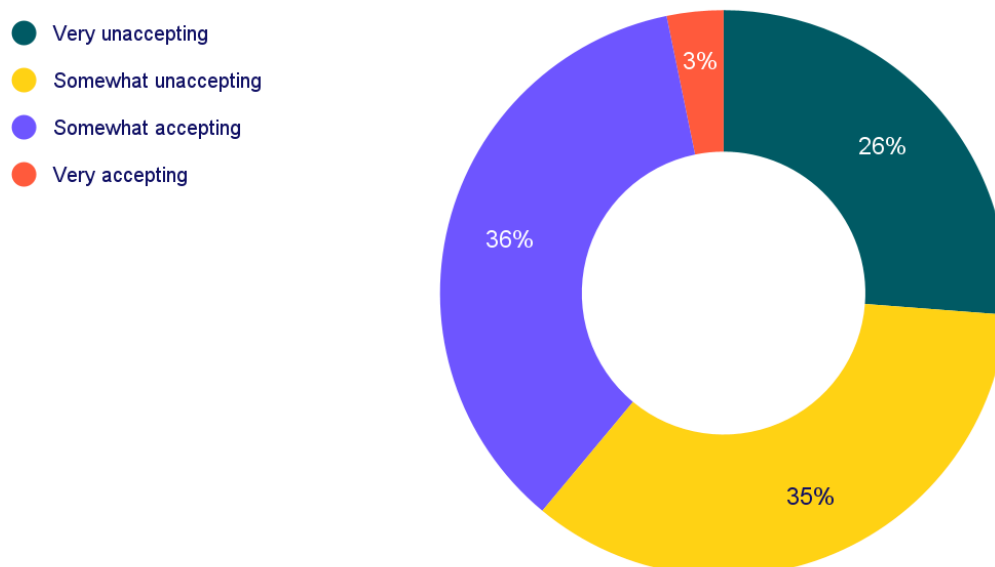
## Ways to Support LGBTQ+ Young People

LGBTQ+ young people report lower rates of attempting suicide when they have access to LGBTQ+-affirming people and spaces, and when they report their communities are supportive of their identities.

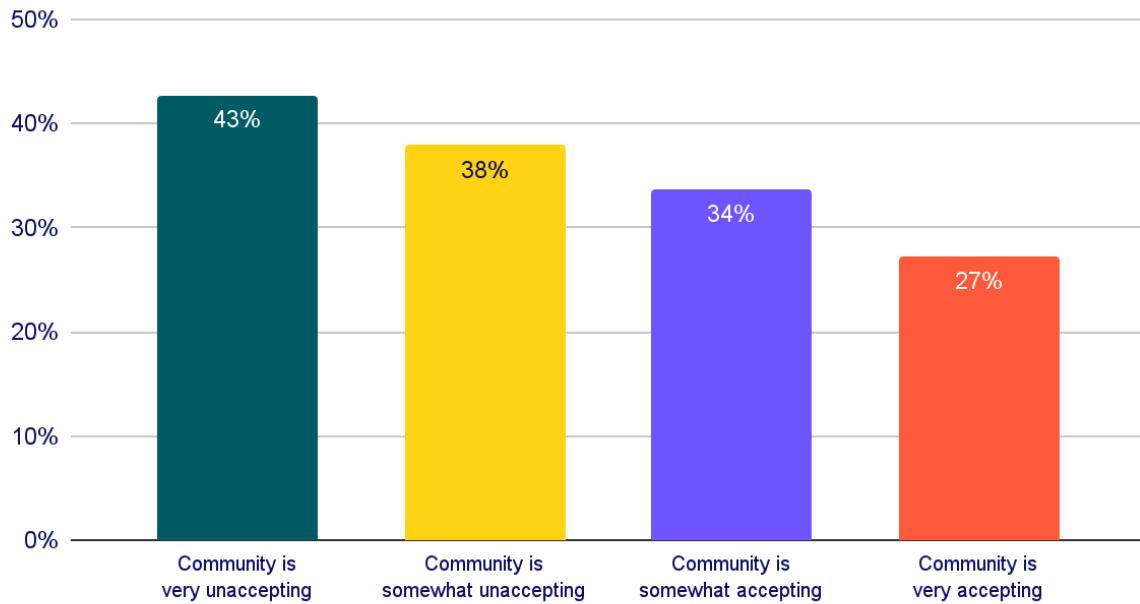
### Community Acceptance

The majority (61%) of LGBTQ+ young people in our sample reported experiencing a lack of acceptance from their communities. Those residing in less accepting environments reported a higher risk of attempting suicide in the past year, compared to their peers in more accepting environments. Furthermore, symptoms of anxiety and depression were more commonly reported by LGBTQ+ young people in Perú living in communities that were unaccepting of LGBTQ+ people.

### Community Acceptance of LGBTQ+ People



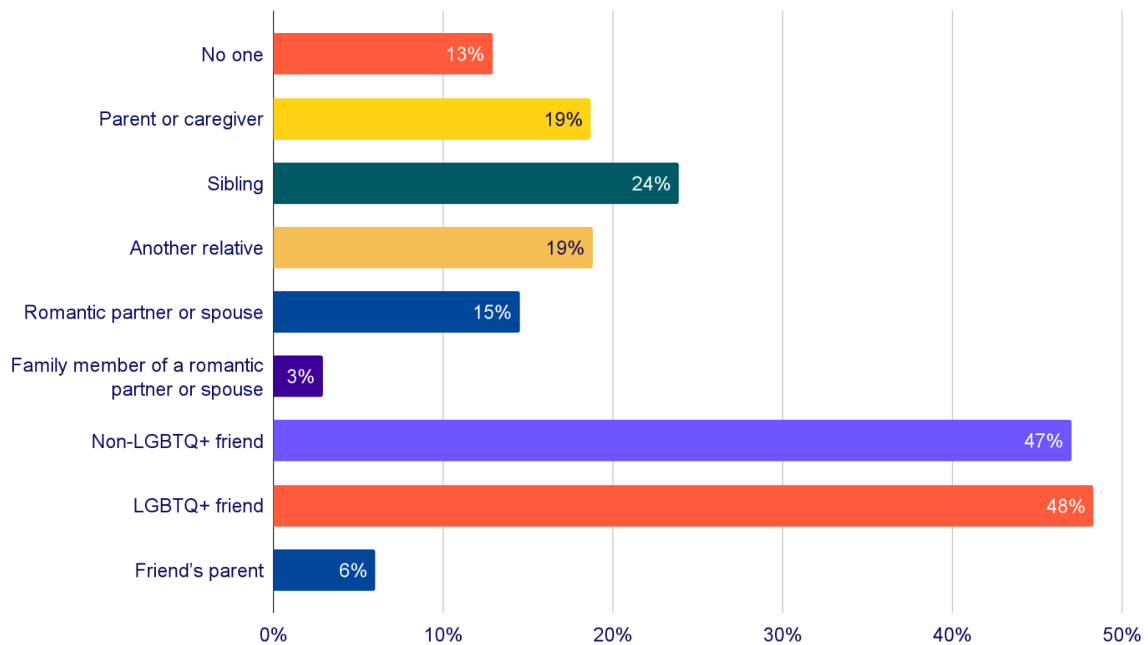
## Past Year Suicide Attempt Rate by Community Acceptance



## Support for Sexual Orientation and Gender Identity

For LGBTQ+ young people in Perú, friends have been identified as the most supportive source for their sexual orientation, with 48% reporting support from an LGBTQ+ friend and 47% from a non-LGBTQ+ friend.

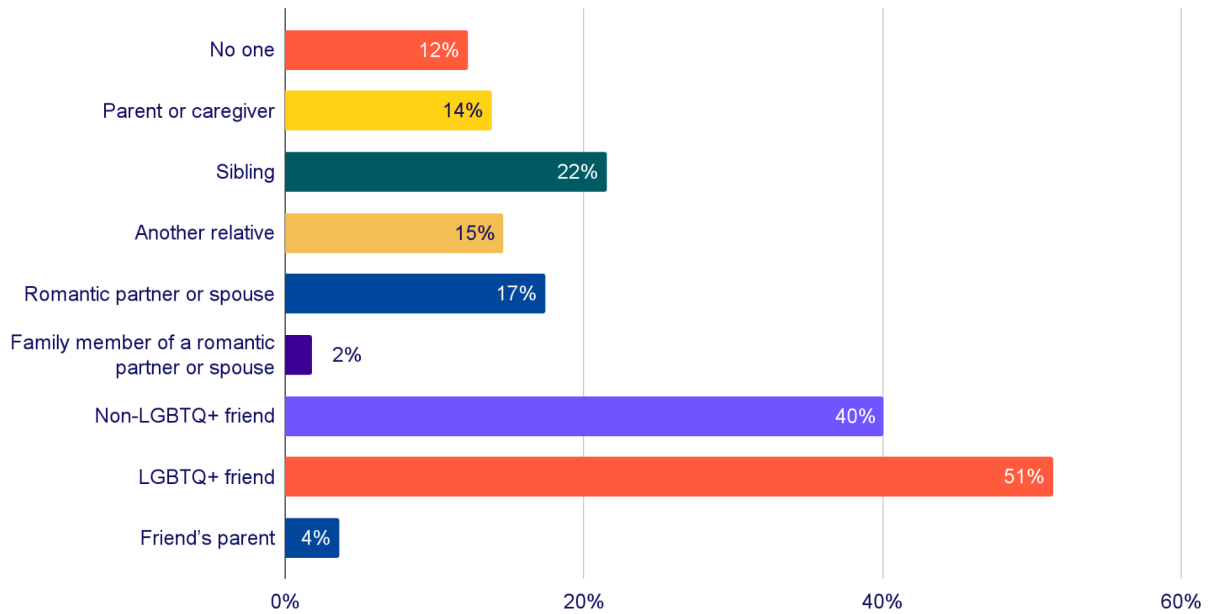
## For LGBTQ+ young people in Perú, who has been supportive of their sexual orientation?



Family support of their sexual orientation is protective against symptoms of depression for LGBTQ+ young people in Perú. LGBTQ+ young people whose family support their sexual orientation reported significantly lower rates of symptoms of depression (56%), compared to their peers whose family did not support their sexual orientation (62%).

Once again, for LGBTQ+ young people in Perú, friends have been identified as the most supportive of their gender identity with 51% reporting an LGBTQ+ friend being supportive and 40% reporting a non-LGBTQ+ friend being supportive.

## For trans and nonbinary young people in Perú, who has been supportive of their gender identity?

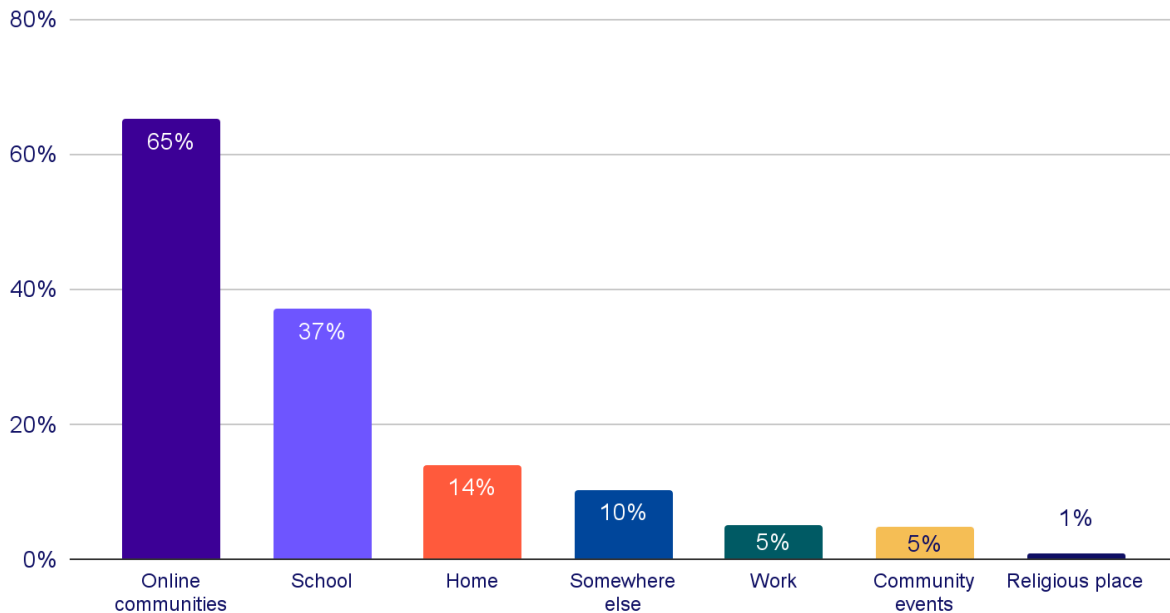


Similarly, support from friends about their gender identity is protective against past-year suicide attempts for LGBTQ+ young people in Perú. LGBTQ+ young people with friends supportive of their gender identity reported significantly lower rates of past-year suicide attempts (47%), compared to their peers without such support (57%).

### Affirming Spaces

Access to an affirming home is protective against depression, anxiety, and suicide for LGBTQ+ young people in Perú; however, only 14% reported having access to an affirming home.

## LGBTQ+ Young People in Perú & Affirming Spaces



For LGBTQ+ young people who were employed, access to an affirming workplace offers similar protective benefits against suicide and depression; however, only 5% reported having access to an affirming workplace.

## RECOMMENDATIONS

**There is a clear and urgent need for mental health services and support specifically tailored to the unique needs of LGBTQ+ young people in Perú.** This recommendation arises from the high rates of suicide attempts and suicidal ideation reported by survey participants. Factors such as younger age and a transgender or nonbinary identity were associated with higher rates of suicide attempts and suicidal ideation. However, there is a lack of funding for mental health services, which could help address the demonstrated need. It should be noted that existing services are often not LGBTQ+ friendly, and individuals under the age of 18 often have to seek care through their parents, complicating matters for those with unsupportive families.

**The lack of mental health services for LGBTQ+ young people in Perú must be addressed.** Our results showed that almost half of the young people seeking care in the past year were unable to access care. Among these, half reported that they were not able to access care due to financial constraints. This highlights an unfortunate reality: although Perú's Ministry of Health is providing more mental health services, these are insufficient to cover the existing need. Additionally, while the need for mental health services is

recognized in general, little attention has been paid to the specific needs of marginalized groups such as LGBTQ+ young people (Saavedra & Galea, 2021).

**Concerted efforts are needed to provide social support for LGBTQ+ young people.** Our results indicate a dire lack of support for LGBTQ+ young people in Perú, but also highlight how beneficial support can be when available. More than half of trans and nonbinary participants reported their social networks were unsupportive of their gender identity. However, LGBTQ+ young people who reported having affirming families, friends, and communities were less likely to report suicide attempts.

**As in other parts of the world, LGBTQ+ young people in Perú are subjected to harmful conversion therapy - this practice must be stopped.** In 2019, a Peruvian congressman put forth a law to ban these so-called “therapies,” but this was not advanced by Congress, and no further legislation has been proposed since (Más Igualdad Perú, 2023). Despite being considered degrading and harmful, conversion therapy primarily occurs outside of health care settings (Trispiotis & Purshouse, 2022). While some countries have banned medical practitioners from conducting this practice, most places in the world including Perú have no legislation overseeing or banning this harmful practice. Advocacy and laws should work to ban this practice and to protect LGBTQ+ individuals, and especially young people from this practice.

## About The Trevor Project

The Trevor Project is the leading suicide prevention and crisis intervention organization for LGBTQ+ young people. Trevor offers 24/7 crisis services, connecting highly trained counselors with LGBTQ+ young people whenever they need support. To drive prevention efforts, The Trevor Project also operates robust research, advocacy, education, and peer support programs.

If you or someone you know needs help or support, The Trevor Project’s trained crisis counselors are available 24/7 at 1-866-488-7386, via chat at [TheTrevorProject.org/Get-Help](https://www.thetrevorproject.org/Get-Help), or by texting START to 678678.

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