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Research Paper



The Role of Social Connectedness in the Resilience of LGBTQ+ Individuals

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ABSTRACT

Social connectedness is considered as a significant source of resilience for all individuals. Previous researches have shown that experiencing a higher level of connectedness and belonging can help people reach out more and adopt functional and adaptive ways of coping thereby enhancing their resilience. The objectives of the study were as follows: a) to explore the relationship between social connectedness and resilience among LGBTQ+ individuals in India; b) and to investigate the role of social connectedness on the resilience of LGBTQ+ individuals in India. A correlational study design was used where 160 LGBTQ+ Individuals (aged between 16 years-53 years) completed measures of social Connectedness and resilience. Pearson's correlation revealed a significant positive relationship between social connectedness and resilience in the sample. This indicates that when social connectedness is high, resilience is also high. Social connectedness explained significant proportion of variance in resilience for the entire sample. The study implications are discussed.

Keywords: Social Connectedness, Resilience, LGBTQ+ individuals, Indian LGBTQ+ community; LGBTQ+ mental health; Sexual and gender minority

ender and sex are two terms often used interchangeably when they are two different terms carrying completely distinct meanings. Gender is a social construct encompassing roles, behaviors, and expressions, while sex refers to the biological attributes such as gene expression, hormone levels, and reproductive anatomy (Canadian Institute of Health researches, 2020).

Gender identity and sexual identity are two significant, distinct and associated terms. Gender identity refers to how an individual identifies or labels themselves, as a woman, man, or genderqueer (Cosker- Rowland, 2023). It can be seen as a spectrum or a continuum that is neither binary (men and women) nor static. Sexual identity instead encompasses identity (the way one conceptualizes oneself or thinks about oneself in terms of whom they are romantically or sexually attracted to), sexual behaviour (the sexual acts they engage in) and sexual orientation (an individual's romantic or sexual attraction towards a person, which can be towards the same gender, opposite gender, more than one gender or to no gender at all) (Reiter, 1989; Roselli, 2018).

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LGBTQ+ is a combination of letters that represents all the gender identities and sexual orientations outside of the cis gender and heterosexual categories. The acronym can be expanded to lesbian, gay, bisexual, transgender, queer or questioning identities, as well as other gender and sexual orientations. The complex process of development of gender and sexual identity presents unique challenges for individuals who identify as such (Sevelius et al., 2021). In a society where their identities are not recognized and accepted but instead, they receive criticism and bitterness, being comfortable in one's gender identity and sexual orientation is a difficult journey that often leaves the individual with many psychological issues (Rosario et al., 2006).

Even though there has been a significant change (overturning of section 377, legal provision for sex reassignment surgery, cohabitation of same sex couple) over the decades in the way LGBTQ+ individuals are viewed in India, they still face and experience a lot of stigma and discrimination in all areas of their lives. The Transgender Persons (Protection of Rights) Act that was passed in 2019 has large scale negative implications for the Transgender community as they are denied the right to self- determine their transgender status (Kirpal, 2020). Change is happening but it is not enough or warranted as can be understood from a survey conducted by the Edelweiss Tokio Life Insurance in 2019. The survey results revealed that approximately 54 % of Indians from 12 major metropolitan cities as well as some small cities were against people from the LGBTQ+ community donating organs ("Life after life: state of organ donation in India", 2019).

The lack of support and prejudiced attitude they experience detrimentally affects their mental health and pushes them to psychological disorders, risky behaviours, self- harm and even suicide. In a study by the Centers for Disease Control and Prevention, LGBTQ+ individuals who experienced family rejection were compared with those who had supportive families, and they found that the former group was significantly more likely to have attempted suicide, experienced depression, and engaged in behaviors such as substance abuse and unsafe sex (Centers for Disease Control and Prevention, 2016). All of this indicates that mental health concerns experienced by the LGBTQ+ population are significantly high and they are not adequately addressed.

Nowadays the prominence of social media and various online platforms have spearheaded an era of change. A quick glance at platforms like Twitter, Instagram and Facebook reveals number of groups and pages that are devoted to the upliftment of the LGBTQ+ community and spread awareness. The support and belongingness that they don't receive from their families, relatives and the society is offered to them in these spaces (Gordon et al., 2023). Studies have shown that the wellbeing of LGBTQ+ community can be determined by their social networks or the groups they are a part of (McLaren, 2009; Lin & Israel, 2012; Frost & Meyer, 2012). In fact, many individuals view these groups of people as their families and this connection helps them thrive better in this still homophobic world (Power et al., 2014)

Research, still, though is very few and doesn't really delve into many of the psychological resources that the LGBTQ+ community can make use of. Thus, such researches can be considered as a crucial tool in becoming a catalyst in the change process that India needs.

Social Connectedness

Humans spend a lot of time trying to develop or maintain a sense of belongingness by forming new friendships and social bonds, maintaining existing relationships, engaging in social activities, grieving over broken relationships or loss of loved ones. This instils a sense

of connection from within to the world around oneself and a lack of it can cause significant psychological distress in the individual. This type of belongingness was called as social connectedness by Lee et al. (2001) and is defined as an "attribute of the self that reflects cognitions of enduring interpersonal closeness with the social world in toto". It is "a type of relational schema or a cognitive structure representing regularities in patterns of interpersonal relatedness" (Baldwin, 1992).

It provides a personal sense of identity as well as a sense of place in one's community and society (Kohut, 1984; Wolf, 1988, as cited in Lee et al., 2001; Miller, 1992). Expressions of social connectedness of an individual can be observed through their need fulfilments and social behaviours which involves trying to interact with others to avoid feeling lonely, asking others for suggestions or advice, preventing relationships from being damaged or broken or to simply making an effort to socialize (Baumeister & Leary, 1995, as cited in Holmberg, 2014)

While defining and explaining the concept of social connectedness Lee and Robbins had drawn on the self-psychology theory by Kohut which bears an important theoretical background to the construct (Lee & Robbins, 1995). Kohut's theoretical perspective underscores the importance of the dynamic interplay between the self and self-objects, which represent an individual's cognitive perceptions of others and their actions directed towards the self. According to him, there is a third need in addition to the two major needs proposed (idealization and grandiosity). It is the need for belongingness (Kohut, 1984, as cited in Lee & Robbins, 1995).

Kohut posited that the sense of connectedness develops from an early stage of one's life and transcends to the entire life span. He didn't elaborate on this need for belongingness further, but many other researchers did and proposed that belongingness is composed of three components: companionship, affiliation and connectedness. Companionship, is the initial sense of security and likeness that develops as a result of the attachment between the child and the parent or the primary caregiver. As one grows into an adolescent, peer groups and memberships in other groups provides them the opportunity to identify with people who has the same interest, ideologies and talents as them, hence forming affiliations. Finally, adulthood is the time where all these present as well as past experiences are integrated into one's sense of self and results in the development of a sense of psychological connectedness. When this process of development is affected by any reasons resulting in failure to satisfy these needs it tends to create problems in belongingness and negatively affects an individual's ability to function well in life (Detrick, 1985; Dupont, 1989; Wolf, 1988, as cited in Lee & Robbins, 1995; Strozier et al., 2022).

Social connectedness is both intrinsically and instrumentally important resource for human beings and it has been generally proved to benefit both physical and mental wellbeing (Martino et al., 2017). A better sense of belonging also has been shown to reduce the risk of suicide as the lower their connectedness the lower the chance of individuals isolating themselves in difficult times (Seppala, 2014).

The LGBTQ+ population is a sexual and gender minority, and being a minority group their experience of these aspects might be even more crucial and intense (Gordon et al., 2023). It is evident that proper development of a sense of belonging begins from early years of life. But in the case of people belonging to the LGBTQ+ community, their exposure to negative experiences while growing up, could have a significant impact on their subjective sense of

belongingness to the world. At the same time, it is also evident that belonging to groups or affiliations with other people (through NGOs, social media groups, and pride events) tends to positively impact their future and life. It could be considered as an important resource for the betterment of the LGBTQ+ community (Gonzales et al., 2020; Berger et al., 2022)

When an individual perceives a higher sense of belonging to the outside world, they tend to trust more and find it easier to reach out to others for support. This seems to be an effective tool against succumbing to the consequences of challenges and difficulties, thereby enhancing resilience (Nitschke et al., 2020). Similar to social connectedness resilience is a crucial determinant of the ability to function well in life.

Resilience

Resilience comes from a Latin word 'resilire' which means 'to leap back' (Soanes & Stevenson, 2006, as cited in Fletcher & Sarkar, 2013). It is not a static construct but rather a function of an individual's development and ongoing interaction with their environment. (Kim-Cohen & Turkewitz, 2012, as cited in Southwick et al., 2014). According to the American Psychological Association (2012) resilience is "the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress". Connor and Davidson (2003) gave a definition with a similar idea, that "resilience is the personal qualities that enables one to thrive in the face of adversity".

A conceptual model for community and youth resilience was proposed by Brennan (2008) which states that community agency is an instrumental factor that plays a significant role in facilitating the resilience and thereby wellbeing of communities and youth. They put forth the theory on the premise that youth and communities have a higher vulnerability to many difficulties and that this builds an environment requiring significant social support, which community agencies can offer.

In fact, several researches have shown that resilience benefits the LGBTQ+ population by allowing them to better regulate their emotions in times of stress and challenges and foster hope and optimism to maintain their psychological health (Kwon, 2013). Developing resilience helps LGBTQ+ individuals build a strong sense of identity and pride in the society thereby improving their physical and mental health (Elijah & Nealy, 2008). The incidence of mental health problems are comparatively higher in the LGBTQ+ population and exploring and developing factors that can enhance wellbeing like resilience is one way in which it can be addressed and dealt with (Wandrekar & Nigudkar, 2020).

A meta-analysis of studies done among the LGBTQIA+ population in India within the decade 2009-2019 was done by Wandrekar and Nigudkar (2020). The findings of the research are thought to be varied and crucial in determining the future research among the community in India. It was revealed that certain sects of the LGBTQ+ population, particularly gay men, transgender women and hijras are the most represented in researches whereas the other sects of the community like asexuals, lesbian women, bisexuals and transmen are underrepresented. Then similar to what has been predicted by the literature the experiences and exposure of individuals belonging to the LGBTQ+ community are different from the cis gender and heterosexual individuals because of the challenges they face in identity formation, relationships, disclosure and acceptance from the society.

These findings suggest a need for conducting researches with more inclusive samples from larger parts of the country. Only very few researches exist on variables like self- esteem, life

satisfaction and most of the other positive psychology variables have not been explored yet in the LGBTQ+ community in India. Findings obtained from studies on positive psychology variables from the cis- het population cannot be generalized to the LGBTQ+ community because of the gross difference in their lived experiences. So, it indicates a need to investigate such variables in the LGBTQ+ community in India in order to understand how the community experiences them and where the focus needs to be channelized in order to improve their present condition in the society.

Social connectedness and resilience are two such variables which has been researched extensively in association with wellbeing. Social connectedness seems to play a significant role in protecting against negative physical and mental health consequences thereby promoting resilience (Nitschke et al., 2020). They can be considered as valuable resources which are crucial determinants of an individual's wellbeing. So this study attempts to investigate these variables among the LGBTQ+ community in India to understand their level of connectedness and resilience; whether and how they are related to each other in the present context among the sexual and gender minority groups and to bring to light this information so that the current and future policy makers, mental health professionals, researchers and any other stakeholder can make effective use of it to develop policies, interventions and spearhead further investigations.

REVIEW OF LITERATURE

Detrie and Lease (2014) conducted a study assessing the mental health status of 218 LGB individuals by exploring the relationship between social support, social connectedness, collective self- esteem and psychological wellbeing and found that social connectedness and collective self- esteem had a significant and strong contribution in the resilience of the LGB individuals. According to DiFulvio (2011) the safe spaces with like-minded people or 'family of choice' where they feel like they belong helps LGBTQ people make sense of their identities as well as deal better with discrimination and negative experiences. Along the same tenet Kwon (2013) found that social support plays the role of a resilience factor in LGB individuals and helps in decreasing their reactivity to discrimination and prejudice.

In India, Virupaksha and Muralidhar (2018) conducted a study on the resilience of Transgender individuals and the results revealed that, in an overall sense they have low levels of resilience. But certain factors seem to indicate a change, i.e., resilience was found to be higher in transgenders who has a higher education, who are staying with their family and who are employed in a mainstream job. So this suggests that improving the provisions for these factors could benefit the mental health of gender minorities and pave a better life for them.

Albert (2014) explored the relationship between social connectedness, self — esteem and resilience among street involved youth. The results revealed that there is a significant positive correlation between resilience and social connectedness and self- esteem. They also found out that a higher level of resilience and social connectedness corresponded to a lower-level depression, hopelessness, suicidality and substance abuse. It was understood through this research that improving social connectedness could help in facilitating resilience despite facing adverse conditions. In the same population another study conducted by Rew et al. (2001) showed that resilience is negatively associated with social connectedness, loneliness, self- injury and hopelessness.

Basak and Can (2018) assessed the relationship between self- compassion, social connectedness, optimism and psychological resilience among low-income university students. The findings pointed out that self- compassion and social connectedness predicted psychological resilience where optimism serves as the mediating factor. Similar associations between resilience and social connectedness were obtained in a study conducted on adults in the age group 18-77 where self – efficacy served as a mediating factor (O'Neill et al., 2020). Nitschke et al., (2020) conducted a study on the impact of social connectedness in stress, fatigue, resilience and wellbeing of people during Covid 19 lockdown and found out that social connectedness was associated with resilience and helped enhance it by protecting against the negative physical and psychological effects of the pandemic. In a study conducted in Germany during the COVID pandemic revealed that covid and lockdown impacted the mental health of the LGBTQ+ community but it was mediated by loneliness and social support. This implies that promoting social support and connectedness are important tenets when it comes to their overall mental health (Firk et al., 2023).

METHOD

Aim

The aim of the study is to find the relationship between social connectedness and resilience among LGBTQ+ Individuals.

Objectives

- To find out whether there is any relationship between the social connectedness and resilience among LGBTQ+ Individuals in India.
- To find out whether social connectedness has any significant impact on the resilience of LGBTQ+ individuals in India.

Hypotheses

- There will be a significant relationship between social connectedness and resilience among LGBTQ+ Individuals in India.
- There will be a significant impact of social connectedness on resilience among the LGBTQ+ individuals in India.

Research design

The current study aims to understand the social connectedness of LGBTQ+ individuals and its relationship with resilience. It also attempts to find out how social connectedness impacts resilience in the sample. In order to accomplish these objectives, a correlational design was adopted in the study.

Sample

Table 1 Distribution of socio demographic characteristics of participants (n=160)

Variables	n (160)	%	
Age			
16- 25 years	119	74.4%	
26- 37 years	31	19.4%	
38-51 years	9	5.6%	
51 years <	1	0.6%	
Gender/ Sexual Orientation			
Lesbian	11	6.9%	
Gay	53	33.1%	

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Variables	n (160)	%
Bisexual	32	20%
Transgender	25	15.6%
Queer	17	10.6%
Employment Status		
Yes	50	31.4%
No	109	68.6%
Relationship Status		
Single	118	73.8%
Committed	39	24.4%
Married	3	1.9%
Residence		
With Family	125	78.1%
Separate from family	35	21.9%

The sample for the present study consisted of LGBTQ+ individuals in India. Sample was collected from all over India. The number of samples obtained from each of the categories Lesbian, Gay, Bisexual, Transgender, Queer and others were 11, 53, 32, 25, 17 and 22 respectively. All of them were in the age ranges of 16 years to 53 years (M= 23.98, SD= 6.942). Purposive sampling was the chosen method for sampling in this study. The sample size included a total of 160 individuals.

Tools used for data collection

The tools used for the study were:

- Social Connectedness Scale- Revised (Lee et al., 2001)
- Connor Davidson Resilience Scale (Connor & Davidson, 2003)
- Socio- Demographic Data Sheet

• Social Connectedness Scale- Revised (SCS-R)

The SCS-R was developed by Richard M Lee, Mathew Draper and Sujin Lee in 2001 to measure social connectedness which is considered "an attribute of the self that reflects cognitions of enduring interpersonal closeness with the social world in toto" (Lee et al., 2001). It measures "the degree of interpersonal closeness an individual experiences in their social world as well as the difficulty they experience in maintaining and establishing a sense of closeness." (Lee& Robbins, 2000). It is a 20 item self-report measure that is rated on a six point Likert scale. The response ranges are strongly disagree (1), disagree (2), mildly disagree (3), mildly agree (4), agree (5) and strongly agree (6). The SCS-R has excellent psychometric properties with an internal consistency of 0.86, content validity of 0.80 and structural validity of 0.62 (Cordier et al., 2017).

Out of the 20 items, 10 items are negatively worded and the rest are positively worded. To compute the total score for the scale, the negatively worded items are reverse scored and then combined with the positively worded items. The resulting score can range from 20 to 120. The higher the score the greater the sense of social connectedness.

• Connor Davidson Resilience Scale (CD-RISC)

The Connor Davidson Resilience Scale was developed by Kathryn M Connor and Jonathan R.T. Davidson in 2003 to measure psychological resilience, which refers to "the personal qualities that enables one to thrive in the face of adversity." It consists of 25 items rated on a

five-point Likert scale. The response categories are not true at all (0), rarely true (1), sometimes true (2), often true (3), and true nearly all of the time (4). The authors have also identified a five-factor structure in the scale, which are personal competence, trust in one's intuition and tolerance of negative effect, positive acceptance of change and secure relationships, control and spiritual influences respectively. The first factor had the highest loading with 8 items followed by 7, 5, 3 and 2 items respectively for the next factors. The internal consistency coefficient for the entire scale was found to be satisfactory at 0.89 and the item- total correlations ranged from 0.30- 0.70. The CD-RISC also has satisfactory content validity, test- retest reliability and construct validity (Gonzalez et al., 2015).

The total score ranges from 0-100 and higher score corresponds to greater resilience.

• Socio- Demographic Data Sheet

The sociodemographic data sheet was used to collect the basic details from the participant like age, education, how they identify themselves, employment status, relationship status, place of living and whether they are staying with their family.

Procedure of data collection

The data was collected through both online and offline survey and it was collected from LGBTQ+ individuals across many states in India. The sociodemographic sheet was prepared and the instruments relevant and appropriate to the objectives were selected. A few participants belonging to the community were contacted through social media and telephone and the purpose of the study, objectives, risks and benefits were explained to them. They then gave the contacts and referrals of other individuals as well online LGBTO+ groups. In addition to this an NGO was contacted and direct data collection of some members were done after establishing rapport and following the appropriate procedures as mentioned above. Informed Consent was obtained from all individuals before sharing or administering the questionnaires either in hardcopy or google form format. All participants were assured with the confidentiality of their responses, as well as of their right to withdraw from the study at any point of time. For offline survey the hardcopy of the questionnaires were distributed and for online data collection google forms were circulated through email, WhatsApp, Instagram, Facebook, Twitter and LinkedIn. In both modes it only took around 15-20 minutes to give the responses. Once all the data was collected, it was analyzed using the appropriate statistical analyses.

Statistical analysis

Statistical Analysis was done using SPSS v 21. Pearson Product Moment Correlation was used to assess the relationship between social connectedness and resilience. Simple regression was used to find the impact of social connectedness on resilience among the sample.

RESULTS
Table 2 Mean (M) and Standard deviation (SD) of the variables Social Connectedness and
Resilience

Variables	n	M	SD	
Social Connectedness	160	73.95	9.17	
Resilience	160	93.21	16.45	

Table 3 Pearson's Product Moment Correlation between Social Connectedness and Resilience.

Variable	Resilience	
Social Connectedness	.16*	

^{*}*p*< 0.05

Relationship between social connectedness and Resilience

Pearson Product moment correlation was used to investigate the relationship between social connectedness and resilience. Table 3 shows that there is a significant positive correlation between the two variables, r(158) = .16, p < .05, which indicates that higher level of social connectedness is associated with higher levels of resilience in the sample.

Table 4 Summary of simple Regression Analyses for Social Connectedness predicting Resilience in LGBTO+ Individuals (n=160)

Criterion	C	В	SEB	β	t	SE	R ²	F	p
Resilience	72.01	.29	.14	.16	6.86	16.29	.03*	4.14	<.05

Note. Predictor: Social Connectedness; C= Constant; B= Unstandardized Beta Coefficient; SEB= Standardized error of Beta; β = Standardized beta coefficient; t = t vales of beta; SE= standard error of the estimate; R^2 = Coefficient of Determination; F = F value; p = significance level. *p < .05.

Impact of Social Connectedness on Resilience

Simple linear regression was used to assess the impact of social connectedness on resilience among LGBTQ+ Individuals (n= 160). The results are given in Table 4.

It can be seen from Table 4 that social connectedness explained statistically significant (3 %) proportion of the variance in resilience, $R^2 = .03$, adjusted $R^2 = .02$, F (1, 158) = 4.14, p < .05. The relationship between social connectedness and resilience was positive, $\beta = .16$, p < .05, with an increase in social connectedness being associated with increase in resilience among LGBTQ+ Individuals.

DISCUSSION

The LGBTQ+ community in India has long faced discrimination, criticism, and unjust treatment, which has had a negative impact on their psychological wellbeing. To address this issue, the present study aims to examine the relationship between social connectedness and resilience among LGBTQ+ individuals in India.

The study's first objective was to determine if a relationship exists between social connectedness and resilience among LGBTQ+ individuals in India. The findings confirm that there is a significant, positive correlation between the two variables. This suggests that as the level of social connectedness increases, so does the level of resilience among the participants (DiFulvio, 2011).

One possible reason for this relationship could be the various organizations and NGOs that work for the betterment of the LGBTQ+ community in India. These groups offer a sense of connectedness and belonging that instills a sense of trust and interpersonal closeness among individuals, which helps them cope with and overcome discriminatory experiences (Berger et al., 2022; Parwani & Talukdar, 2023).

The second objective of the study was to explore whether social connectedness has a significant impact on the resilience of LGBTQ+ individuals. The results suggest that social connectedness significantly explains 3% of resilience in the sample. This could be because feeling accepted and having interpersonal closeness with others boosts self-confidence, enhances hope, and facilitates self-esteem, which are all associated with increasing resilience (Lee et al., 2008; Lee et al., 2001; Williams & Galliher, 2006; Lee & Robbins, 1995; Lee & Robbins, 1998).

A theoretical support for the influence of social connectedness on resilience was given by Brennan's conceptual model for community resilience. According to it community agencies that can offer a sense of support and connectedness enhances resilience and psychological wellbeing of individuals. This can be understood in the context of the LGBTQ+ population in India, who are able to live a good life overcoming the struggles, suffering and discrimination that are a part of their life, because of their associations with the families they choose and the organizations and NGOs that they belong to (Brennan, 2008).

Another reason for this relationship is that social connectedness facilitates self-compassion. Previous research has shown that feeling connected with others plays a role in one's ability to be self-compassionate, which promotes healthy behavior, enhances motivation, elevates confidence, and instills a sense of responsibility to oneself. The sense of meaning in life that is facilitated by experiencing an affiliation and closeness to others may also be an important source of resilience for LGBTQ+ individuals in India (Bloch, 2018; Whitlock et al., 2021; Cohen & Wills, 1985; Debats, 1995).

Finally, while the present study has found a significant relationship between social connectedness and resilience among LGBTQ+ individuals in India, the strength of this relationship remains weak. This may be due to the persistent discrimination and denial of basic rights and opportunities experienced by the LGBTQ+ population in India, which undermines their ability to thrive in society. Meyer (2003) posited that people belonging to a minority group experience significant stressors that can includes the fear of rejection, discrimination, and internalized homonegativity. The prevalence of these factors could significantly impact their ability to cope and affect their mental health in general.

CONCLUSION

The current study aimed to examine the role of social connectedness in resilience among the LGBTQ+ individuals in India. The first objective was to determine whether there is any relationship between social connectedness and resilience in the sample. The study results confirmed this objective. The relationship was positive and weak. The second objective was to find out the extent to which social connectedness impacts resilience in the sample. Social connectedness accounts for 3% variance in the resilience among the sample. Thus, social connectedness plays a significant predictive role in resilience among LGBTQ+ Individuals in India, however the results also suggest that there might be other factors or variables that has more of a predictive power than social connectedness.

Implications

This study has two broad implications for the betterment of the LGBTQ+ community. Firstly, the finding that social connectedness significantly influences resilience can inform interventions aimed at enhancing social connectedness among LGBTQ+ individuals. It can also create awareness among the larger society about the importance of social connectedness for LGBTQ+ individuals to live a better life. Secondly, the study suggests that other factors

such as lack of laws and policies that support the community and denial of equal opportunities may affect their resilience, so it is necessary for the larger society to work towards changing this situation.

Research on the LGBTQ+ community in India has primarily focused on understanding the factors contributing to psychological disorders, rather than exploring psychological factors that can enhance their lives and well-being. Additionally, there is a dearth of research exploring positive psychological variables among all sects of the LGBTQ+ community in India. Thus, this study aims to address this gap in literature and encourage further research in this area.

The study's findings regarding the importance of social connectedness in resilience can validate existing theories on the subject and also provide valuable information for future research. It could lead to further exploration of this area of psychology and contribute to theory building.

In conclusion, this study's findings can be useful in improving the psychological well-being of the LGBTQ+ community in India by promoting social connectedness and encouraging further research in this area.

Limitations

- Since the study took place during the Covid 19 pandemic and restrictions were imposed on many places, accessibility to the participants proved to be difficult.
- Recently criticisms has also been raised by the LGBTQ+ community regarding being mere data for researches. So this attitude among them has also affected the number of responses received.
- Even though the sample included almost all sects of the LGBTQ+ umbrella, the number of responses were not equal in each, i.e. the number of responses obtained for lesbian, gay, bisexual, transgender and queer sects were disproportionate to each other.
- The age of the participants ranged from 16 to 53, i.e. from adolescence to middle adulthood. The differences in the participants due to their developmental periods could not be accounted for in the study.
- Data was collected from LGBTQ+ population all over India and hence the cultural differences among the participants due to this aspect could not be accounted for in the study.
- Since the data collection was done using questionnaires, there is a good chance that significant qualitative information regarding the items in the questionnaires has been missed out.

Future Directions

- Future researchers can include samples where all sects of the LGBTQ+ community are equally represented.
- The sample size of the present study was small, and hence future research can consider collecting data from more number of people to ensure better reliability of results
- The current study explored the variables of social connectedness and resilience as such. Much richer source of information can be obtained by conducting researches

- with tools which explores the domains of these variables and how they influence each other.
- Future researchers can also try to explore any mediating variables or factors in the relationship order to facilitate better understanding.
- The study suggests that there may be other variables may wield a greater influence on the resilience among the sample than social connectedness alone. Future investigations may benefit from exploring additional variables such as optimism, childhood trauma, perseverance, creativity and other personality traits, which could also contribute to resilience.
- Future research can also make use of in-depth interviews along with the questionnaires as well as other qualitative methods to get a richer source of information and more insights into their psychological functioning.

REFERENCES

- Albert, K. (2014). The relationship of resilience with social connectedness and self-esteem in street involved youth: a secondary analysis [Master's Thesis, Ryerson University]. Digital Repository. https://digital.library.ryerson.ca/islandora/object/RULA%3A364
- American Psychological Association. (2012). *Building your resilience*. https://www.apa.org/topics/resilience#:~:text=Psychologists%20define%20resilience%20as%20the,or%20workplace%20and%20financial%20stressors.
- Baldwin, M. W. (1992). Relational schemas and the processing of social information. *Psychological Bulletin*, 112, 461-484. https://doi.org/10.1037/0033-2909.112.3.461
- Basak, B. E., &Can, C. (2018). The relationships between self-compassion, social-connectedness, optimism and psychological resilience among low-income university students. *Ilkogretim Online*, *17*(2), 766-785. https://doi.org/10.17051/ilkonline.2018. 419299
- Berger, M. N., Taba, M., Marino, J. L., Lim, M. S. C., & Skinner, S. R. (2022). Social Media Use and Health and Well-being of Lesbian, Gay, Bisexual, Transgender, and Queer Youth: Systematic Review. *Journal of medical Internet research*, 24(9), e38449. https://doi.org/10.2196/38449
- Bloch, H. (2018). Self-compassion, social connectedness, and interpersonal competence. *Graduate Student Theses, Dissertations, & Professional Papers*. 11224. https://scholarworks.umt.edu/etd/11224
- Brennan, M. A. (2008). Conceptualizing resiliency: An interactional perspective for community and youth development. *Child Care in Practice*, *14*, 55–64. https://doi.org/10.1080/13575270701733732
- Canadian Institutes of Health Research. (2020). What is gender? What is sex? https://cihrirsc.gc.ca/e/48642.html
- Centers for Disease Control and Prevention. (2016). *Stigma and discrimination*. https://www.cdc.gov/msmhealth/stigma-and-discrimination.htm
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310–357. https://doi.org/10.1037/0033-2909.98.2.310.
- Connor, K.M. & Davidson, J.R.T. (2003). Development of a new resilience scale: the Connor- Davidson resilience scale (CD-RISC). *Wiley InterScience*, 18, 76-82. https://doi.org/10.1002/da.10113
- Cordier, R., Milbourn, B., Martin, R., Buchanan, A., Chung, D., & Speyer, R. (2017). A systematic review evaluating the psychometric properties of measures of social inclusion. *PloS one*, *12*(6), e0179109. https://doi.org/10.1371/journal.pone.0179109

- Cosker-Rowland, R. (2023). Recent Work on Gender Identity and Gender. *Analysis*, 83(4), 801–820. https://doi.org/10.1093/analys/anad027
- Debats, D. L. (1995). Experiences of meaning in life: a combined qualitative and quantitative approach. *British Journal of Psychology*, *86*, 359-375. https://doi.org/10.1111/j.2044-8295.1995.tb02758.x.
- Detrie, P.M., & Lease, S.H. (2014). The relation of social support, connectedness, and collective self-esteem to the psychological well-being of lesbian, gay, and bisexual youth. *Journal of Homosexuality*, *53*(4). https://doi.org/10.1080/0091836080210344
- DiFulvio, G. T. (2011). Sexual minority youth, social connection and resilience: from personal struggle to collective identity. *Social Science & Medicine*, 72(10), 1611–1617. https://doi.org/10.1016/j.socscimed.2011.02.045
- Edelweiss Tokio Life. (2019). *Life after life: state of organ donation in India*. https://www.edelweisstokio.in/images/OrganDonation/Organ_Donation_Research_v.1_ CMYK_Low_Res.pdf
- Elijah, C., & Nealy, M. (2008). Fostering resilience in LGBT communities. https://www.na swnyc.org/page/44#:~:text=Resilience%20studies%20have%20provided%20data,of%20identity%20and%20pride%20in
- Firk, C., Großheinrich, N., Scherbaum, N., & Deimel, D. (2023). The impact of social connectedness on mental health in LGBTQ+identifying individuals during the COVID-19 pandemic in Germany. *BMC psychology*, *11*(1), 252. https://doi.org/10. 1186/s40359-023-01265-5
- Fletcher, D., & Sarkar, M. (2013). Psychological resilience: a review and critique of definitions, concepts and theory. *European Psychologist*, 18(1), 12-23. https://doi.org/10.1027/1016-9040/a000124
- Frost, D., & Meyer, I. (2012). Measuring community connectedness among diverse sexual minority populations. *Journal of Sex Research*, 49(1), 36–49. https://doi.org/10.1080/00224499.2011.565427
- Gonzalez, V.B.A., Sierra, M.T.C., Martinez, B.A., Martinez- Molina, A., &Ponce, F.P. (2015). An in-depth psychometric analysis of the Connor-Davidson resilience scale: calibration with Rasch- Andrich model. *Health and Quality of Life Outcomes*, *13*. https://hqlo.biomedcentral.com/articles/10.1186/s12955-015-0345-y.
- Gonzales, G., Loret de Mola, E., Gavulic, K.A., McKay, T., & Purcell, C. (2020). Mental health needs among lesbian, gay, bisexual, and transgender college students during the covid-19 pandemic. *The Journal of Adolescent Health: Official Publication of the Society for Adolescent Medicine*, 67(5), 645-648. DOI: 10.1016/j.jadohealth.2020.08. 006.
- Gordon, J.D., Whitfield, D.L., Mammadli, T., & Escobar- Viera, C. (2023). Social support-seeking strategies on social media at the intersection of lesbian, gay, bisexual, transgender, and queer identity, race, and ethnicity: insights for intervention from a qualitative study. *JMIR Formative Research*, 7. https://doi.org/10.2196%2F51702
- Holmberg, L. (2014). Seeking social connectedness online and offline: does happiness require real contact? [Bachelor's Thesis, Orebro University]. http://www.divaportal.org/smash/get/diva2:736737/FULLTEXT01.pdf
- Kirpal, S. (2020, July 12). The state of LGBTQ+ rights: India does not have anti-discrimination code. *Business Standard*. https://www.business-standard.com/article/current-affairs/the-state-of-lgbtq-rights-india-does-not-have-anti-discrimination-code-120071200179_1.html
- Kwon, P. (2013). Resilience in lesbian, gay and bisexual individuals. *Personality and Social Psychology Review*, 17(4). https://doi.org/10.1177/1088868313490248
 - © The International Journal of Indian Psychology, ISSN 2348-5396 (e) ISSN: 2349-3429 (p) | 470

- Lee, R. M., & Robbins, S. B. (1998). The relationship between social connectedness and anxiety, self-esteem, and social identity. *Journal of Counseling Psychology*, 45(3), 338-345. https://doi.org/10.1037//0022-0167.45.3.338
- Lee, R.M., & Robbins, S.B. (1995). Measuring belongingness: the social connectedness and social assurance scales. *Journal of counseling Psychology*, 42(2), 232-241. https://doi.org/10.1037/0022-0167.42.2.232
- Lee, R.M., & Robbins, S.B. (2000). Understanding social connectedness in college women and men. *Journal of counseling and development*, 78, 484-491. https://doi.org/10.1002/j.1556-6676.2000.tb01932.x
- Lee, R.M., Dean, B.L., & Jung, K.R. (2008). Social connectedness, extraversion, and subjective well-being: testing a mediation model. *Personality and Individual Differences*, 45, 414-419. https://doi.org/10.1016/J.PAID.2008.05.017
- Lee, R.M., Draper, M., & Lee, S. (2001). Social connectedness, dysfunctional interpersonal behaviours and psychological distress: testing a mediator model. *Journal of Counseling Psychology*, 48(3), 310-318. https://doi.org/10.1037/0022-0167.48.3.310
- Lin, Y. J., & Israel, T. (2012). Development and validation of a psychological sense of LGBT community scale. *Journal of Community Psychology*, 40(5), 573–587. https://doi.org/10.1002/jcop.21483
- Martino, J., Pegg, J., & Frates, E. P. (2015). The Connection Prescription: Using the Power of Social Interactions and the Deep Desire for Connectedness to Empower Health and Wellness. *American journal of lifestyle medicine*, 11(6), 466–475. https://doi.org/10.1177/1559827615608788
- McLaren, S. (2009). Sense of belonging to the general and lesbian communities as predictors of depression among lesbians. *Journal of Homosexuality*, *56*, 1–13. https://doi.org/10.1080/00918360802551365
- Meyer I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychological bulletin*, *129*(5), 674–697. https://doi.org/10.1037/0033-2909.129.5.674
- Miller, I. J. (1992). Interpersonal vulnerability and narcissism: A conceptual continuum for understanding and treating narcissistic psychopathology. *Psychotherapy*, 29, 216–224. https://doi.org/10.1037/0033-3204.29.2.216
- Nitschke, J.P., Forbes, P.A.G., Ali, N., Cutler, J., Apps, M.A.J., Lockwood, P.L., & Lamm, C. (2020). Resilience during uncertainty? greater social connectedness during COVID-19 lockdown is associated with reduced distress and fatigue. *British Journal of Health Psychology*. https://doi.org/10.1111/bjhp.12485
- O'Neill, E., Clarke, P., Fido, D., & Vione, K. C. (2020). The role of future time perspective, body awareness, and social connectedness in the relationship between self-efficacy and resilience. *International Journal of Mental Health and Addiction*. Advance online publication. https://doi.org/10.1007/s11469-020-00434-6
- Parwani, S., & Talukdar, A.S. (2023). Mental health of Indian LGBT+ community: role of coping self-efficacy and social inclusion. *Mental health and social inclusion*. http://dx.doi.org/10.1108/MHSI-01-2023-0003
- Power, J., Schofield, M.J., Pitts, M., Brown, R. (2014). Social connectedness among lesbian, gay, bisexual, and transgender parents living in metropolitan and regional and rural areas of Australia and New Zealand. *Journal of Community Psychology*, 42(7). https://doi.org/10.1002/jcop.21658
- Reiter, L. (1989). Sexual orientation, sexual identity, and the question of choice. *Clinical Social Work Journal*, 17(2), 138–150. https://doi.org/10.1007/bf00756141 4

- Rew, L., Taylor-Seehafer, M., Thomas, N. Y., & Yockey, R. D. (2001). Correlates of resilience in homeless adolescents. *Journal of Nursing Scholarship*, *33*(1), 33-40. https://doi.org/10.1111/j.1547-5069.2001.00033.x
- Rosario, M., Schrimshaw, E.W., Hunter, J., & Braun. L. (2006). Sexual identity development among gay, lesbian, and bisexual youths: consistency and change over time. *The Journal of Sex Research*, *43*(1), 46-58. https://www.ncbi.nlm.nih.gov/pm c/articles/PMC3215279/
- Roselli C. E. (2018). Neurobiology of gender identity and sexual orientation. *Journal of neuroendocrinology*, 30(7), e12562. https://doi.org/10.1111/jne.12562
- Seppala, E. (2014). *Connectedness and health: the science of social connection*. http://ccare.stanford.edu/uncategorized/connectedness-health-the-science-of-social-connection-infographic/
- Sevelius, J. M., Chakravarty, D., Dilworth, S. E., Rebchook, G., & Neilands, T. B. (2021). Measuring Satisfaction and Comfort with Gender Identity and Gender Expression among Transgender Women: Development and Validation of the Psychological Gender Affirmation Scale. *International journal of environmental research and public health*, 18(6), 3298. https://doi.org/10.3390/ijerph18063298
- Strozier, C.B., Pinteris, K., Kelley, K., & Cher, D. (2022). The new world of self: Heinz Kohut's transformation of psychoanalysis and psychotherapy. Oxford University Press. https://doi.org/10.1093/oso/9780197535226.001.0001
- Southwick, S.M., Bonanno, G.A., Masten, A.S., Panter- Brick, C., & Yehuda, R. (2014). Resilience definitions, theory, and challenges: interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5. https://doi.org/10.3402/ejpt.v5.25338
- Virupaksha, H.G., & Muralidhar, D. (2018). Resilience among transgender persons: Indian perspective, *Indian Journal of Social Psychiatry*, *34*(2), 111-115. https://www.indjsp.org/text.asp?2018/34/2/111/235658
- Wandrekar, J.R., & Nigudkar, A.S. (2020). What do we know about LGBTQIA+ mental health in India: a review of research from 2009 to 2019. *Journal of psychosexual health*, 2(1), 26-30. https://doi.org/10.1177/2631831820918129
- Whitlock, J., Mai, T., Call, M., Epps, J.V. (2021). *How to practice self- compassion for resilience and wellbeing*. Accelerate University of Utah Health Curriculum. http://accelerate.uofuhealth.utah.edu/explore/how-to-practice-self-compassion-for-resilience-and-well-being
- Williams, K.L., & Galliher, R. V. (2006). Predicting depression and self-esteem from social connectedness, support, and competence. *Journal of Social and Clinical Psychology*, 25, 855-874. https://doi.org/10.1521/jscp.2006.25.8.855

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Conflict of Interest

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