

Comparative Study

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

Tanisha Bhatt^{1*}, Kanak Thapliyal²

ABSTRACT

In India, the LGBTQIA+ community continues to face systemic barriers to inclusion in society. Although legal reforms and policies exist, their implementation remains limited, resulting in persistent discrimination and social exclusion. The study aimed to evaluate and compare the difference in resilience and sociogenic need satisfaction (SNS) between LGBTQIA+ individuals and heterosexual individuals in the Indian urban population. Convenience sample of 120 young adults (aged 20–30 years) was collected from across India, consisting of 60 cis-heterosexual and 60 LGBTQIA+ participants. Data were obtained through Google Forms using two standardized tools: the Sociogenic Need Satisfaction Scale (SNS; Chauhan & Dhar) and the Multi-dimensional Scale of Resilience (MDRS; Singh & Khullar). Independent sample t-tests were employed to analyze group differences across three variables: negative SNS, positive SNS, and resilience. LGBTQIA+ participants reported higher negative SNS and lower positive SNS compared to cis-heterosexuals. Resilience was significantly lower in the LGBTQIA+ group ($M = 146.65$, $SD = 16.29$) than in cis-heterosexuals ($M = 157.37$, $SD = 23.49$; $t = 2.90$, $p = .004$). Correlational analyses indicated small, non-significant negative associations between SNS dimensions and resilience in both groups. These concise results highlight pronounced need-satisfaction and resilience disparities, guiding targeted support and future intervention research.

Keywords: *LGBTQIA+, cisgender heterosexual, resilience, sociogenic need satisfaction, gender disparity*

The 21st century has witnessed reforms in technological, social, cultural, and political areas that reshaped the conversation around identity, rights, and inclusion. Just 7 years back, i.e., in 2018, Section 377 was abolished by the Supreme Court in the Navtej Singh Johar v. Union of India case. Before the decriminalization of homosexuality, it was definitely a taboo topic, but even after, it still remains a hush-hush topic. LGBTQ+ identifying individuals are still ostracized, harassed, and looked down upon in society. For some, it is a daily occurrence.

Sexual orientation, according to the American Psychological Association, is the sex of the people one is emotionally and sexually attracted to. On the other hand, gender identity is

¹Department of Psychology, Doon University, Dehradun

²Department of Psychology, Doon University, Dehradun

*Corresponding Author

Received: December 01, 2025; Revision Received: January 17, 2026; Accepted: January 22, 2026

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

about who you are: female, male, genderqueer, etc. Culture, society, and one's relationship with oneself all influence gender. Thus, it includes more introspective and sentient experiences than a person's assigned sex at birth (The Trevor Project, 2021).

Previous research has revealed that LGBTQIA+ people are more likely to experience mental health problems, such as self-harm and suicidality (Haas et al., 2011; Pandya, 2014; Skerrett, Kolves, & De Leo, 2015). Furthermore, up to 40% of caregivers first reject or are intolerant of their LGBTQIA+ child's identification, and criticism, unresponsiveness, and rejection have been associated with an elevated suicide risk (D'Augelli, 2003; Klein & Golub, 2016; Mustanski & Liu, 2013). Such social stressors can significantly impact sociogenic needs and resilience in LGBTQIA+ individuals. Despite all of this, the LGBTQIA+ group can demonstrate resilience through strong identity formation, social support networks, and a sense of community.

With an emphasis on two important factors—**sociogenic need satisfaction** and **resilience**—this study examines it in LGBTQIA+ people in relation to their straight counterparts. Given the ongoing stigma, discrimination, and mental health inequalities LGBTQIA+ people experience in society, knowing these aspects might help one better understand their coping strategies, assets, and weaknesses. The importance of this paper lies in its attempt to close a significant gap in literature. According to two review studies, the focus on resilience among LGBTQIA+ people has primarily been on the individual level (e.g., self-efficacy, self-esteem, and personal mastery), with relational, sociogenic needs receiving less attention (De Lira & de Morais, 2018; Gahagan & Colpitts, 2017). (Alvarez et al, 2022) There are particularly few studies on resilience among transgender and gender non-conforming (TGNC) youth. TGNC are either underrepresented in or not included in several studies on resilience among LGBTQIA+ kids. Furthermore, to our knowledge, no thorough reviews or scoping studies have explicitly examined the sociogenic requirements and resilience of cis-heterosexual and LGBTQIA+ people.

This age group is quite essential because it signifies the adolescents' to young adults' transitioning period, something that is very critical for the persons at this age due to the development of identity, social, and societal influences. The main thing is to find out the differences between the two groups in regard to how their social and emotional needs are being met, and to what extent, given the peculiar problems encountered by LGBTQIA+ people, their level of resilience can be compared.

LITERATURE REVIEW

A study conducted by Surabhi Gupta, Anamika Rai, & Houshou Suzen (2025) titled '*Role of Sexual Orientation in Resilience and Self-Esteem of Young Adults*' examined how sexual orientation impacts resilience and self-esteem. 112 participants from the age group 18–24 were assessed on the Sexual Orientation Scale along with the Resilience Scale (Wagnild & Young, 1993) and the Rosenberg Self-Esteem Scale (1979).

The study concluded that hetero vs. homosexual groups differed significantly on both resilience ($p < 0.05$) and self-esteem ($p < 0.05$). Bisexual respondents in the study also possessed significantly higher resilience than homosexuals ($p = 0.047$).

A study by Athira Babygeetha and Dr. Padiri Ruth Angi conducted in 2024 titled "*The Role of Social Connectedness in the Resilience of LGBTQ+ Individuals*" investigated the relation

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

between social connectedness and resilience among LGBTQ+ individuals in India. A sample of 160 LGBTQ+ persons between the ages of 16 and 53 years were assessed on three tools—the Social Connectedness Scale-Revised (Lee et al., 2001), the Connor-Davidson Resilience Scale (Connor & Davidson, 2003) and the Socio-Demographic Data Sheet. A positive relationship was shown in the results, revealing that higher social connectedness levels among LGBTQ+ individuals were linked to increased resilience ($r = .16, p < .05$).

Researcher Shreya Khatri (2024) conducted a study on sociogenic need (acceptance) titled *“Perceived family acceptance, relationship satisfaction, and self-acceptance in homosexual and heterosexual couples.”* The study consisted of 101 participants in romantic relationships (41 in same-sex relationships and 60 in opposite-sex relationships) among the age group of 18-26 years. The scales used in the research were the Perceived Acceptance Scale, the Relationship Assessment Scale, and the Unconditional Self-Acceptance Questionnaire. The study concluded that there is a significant difference in perceived family acceptance among homosexual and heterosexual couples, with heterosexual couples showing higher perceived family acceptance than individuals in same-sex romantic relationships.

In another study done by Avanika Sinha and Yashvi Badani in August 2024, titled *“Pride and Prejudice: Exploring the experiences of discrimination, psychological distress, and resilience amongst the individuals of LGBTQ community in India,”* it was found out that there is a strong negative correlation between psychological distress and resilience in the LGBTQ community in India.

Indrajeet Bordoloi and Fariza Saidin (2024) conducted a study titled *“A Quest into Resilience between LGBT and Heterosexual Individuals.”* A sample size of 40 (heterosexual=24, LGBT=16) participants residing in Guwahati, India, was taken. The paper showed a similar resilience level among individuals of different sexual orientation, with no statistically significant difference between LGBTQ+ and heterosexual individuals. Age emerged as a contributing factor, as older individuals typically showed higher levels of resilience.

Srivastava, Advani, and Kumar (2023) published research on resilience titled *“Adverse Childhood Experiences and Resilience among Cisgendered Heterosexual and LGBTQIA+ Individuals in India.”* The study constituted a sample of 81 participants, 48 cisgender heterosexual individuals and 33 LGBTQIA+ individuals within the age range of 18-25 years. Using the ACE questionnaire and the Brief Resilience Scale (BRS), the researchers concluded that the LGBTQIA+ population is more exposed to adverse childhood experiences as opposed to cisgendered heterosexual counterparts, which lowers their resilience levels.

Amandeep Kaur and Dr. Soni Kewalramani (2023), published research titled *“Mental Well-Being, Self-Acceptance, and Frustration-Tolerance Among Homosexual and Heterosexual Adults.”* The study consisted of a total of 80 participants. The results concluded that self-acceptance negatively impacted mental well-being in the heterosexual group but positively impacted mental well-being in the homosexual group. In both groups, self-acceptance positively impacted frustration tolerance.

Kanika Mohan in 2022 published research titled *“Indian LGBTQ+ Youth: The ‘Invisible’ Orientations and Mental Health.”* This research paper is based on a qualitative review

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

methodology, which analyzed the findings from already existing research papers, government reports, and media articles. Data indicates that 43% of non-binary individuals in the United States have attempted suicide, and up to 50% of pansexual and bisexual individuals who reached out to mental health helplines had suicidal ideation. This study also suggests some therapeutic approaches proven to be effective with sexual and gender minorities, such as affirmative therapy, narrative therapy, art therapy, family therapy, group therapy, and drama therapy. With this paper, Kanika Mohan concluded that Indian mental health professionals must be better equipped to support diverse LGBTQ+ identities, particularly those who are marginalized.

METHODOLOGY

Sample

This study employs a convenience and snowball sampling technique to select a total of 120 participants. The sample consist of

- 60 lgbtq+ individuals
- 60 cis-heterosexual individuals

The sample (**N=120**) for the present study consisted of LGBTQ+ and cis-heterosexuals from across India, including both aged between **20 and 30 years**. The sample distribution across categories was as follows: **cis-heterosexual (n1 = 60), lesbian (n2 = 10), gay (n3 = 9), bisexual (n4 = 27), asexual (n5 = 3), queer (n6 = 9), and others (n7=2)**.

Inclusion criteria:

Individuals who self-identify as either cisgendered heterosexuals or as members of the LGBTQIA+ community.

- Age range of the participants must be between 20 and 30.
- Residents of India to maintain contextual consistency.

Exclusion criteria:

- Individuals younger than 20 or older than 30 are excluded.
- Individuals not residing in India.
- Individuals who do not clearly identify or are confused about their sexual orientation.

Objectives

- Compare sociogenic needs between LGBTQIA+ and cis-heterosexual individuals aged 20–30.
- Examine differences in resilience between LGBTQIA+ and cis-heterosexual individuals.
- Analyze the relationship between sociogenic needs and resilience in both groups.

Hypothesis

- **H01:** There is no difference in the positive sociogenic need satisfaction levels between LGBTQIA+ and cis-heterosexual individuals aged 20-30.
- **H02:** There is no difference in the negative sociogenic need satisfaction levels between LGBTQIA+ and cis-heterosexual individuals aged 20-30.
- **H03:** There is no difference in resilience between LGBTQIA+ and cis-heterosexual individuals aged 20-30.

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

- **H04:** There is no significant relationship between positive sociogenic need satisfaction and resilience in individuals aged 20-30 belonging to the LGBTQIA+ community.
- **H05:** There is no significant relationship between negative sociogenic need satisfaction and resilience in LGBTQIA+ individuals aged 20-30.
- **H06:** There is no significant relationship between positive sociogenic need satisfaction and resilience in cis-heterosexual individuals aged 20-30.
- **H07:** There is no significant relationship between negative sociogenic need satisfaction and resilience in cis-heterosexual individuals aged 20-30.

Variables

The independent variable for the study was Sexual Identity Group (LGBTQIA+ vs. Cis-Heterosexual), and the dependent variables were Sociogenic Need Satisfaction and Resilience.

Measures

- **Sociogenic Need Satisfaction Scale (SNS) by Prof. N.S. Chauhan and Dr. Upinder Dhar:** The scale relates to the measurement of a specific kind of need satisfaction. Needs exist as basic strivings common to people that help us to understand divergence of behavior. These needs are classified into four dichotomous dimensions—each having a positive and negative pole: Identification vs. Differentiation, Acceptance vs. Rejection, Cooperation vs. Isolation, and Dominance vs. Submission. The SNS consists of 40 items, divided equally among the eight end areas (5 items per area). It is a self-report tool where participants respond to each statement based on a 5-point Likert scale. For each item, the respondent's rating and the item value are multiplied by the area value to determine the score. The reliability of the scale was assessed using test-retest methods and showed coefficients ranging from 0.42 to 0.87 across different age groups (children, adolescents, adults, and senescent). Validity was established by correlating scores with peer ratings, with validity coefficients ranging from 0.40 to 0.72, indicating strong psychometric properties.
- **Multi-dimensional Scale of Resilience (MDRS) by Swati Singh and Dr. Sangeeta Khullar:** Resilience is defined as the ability to “bounce back” and positively adapt in the face of adversity. The MDRS-H aims to capture resilience as a dynamic and trainable quality through culturally appropriate protective factors relevant to Hindi-speaking individuals. The scale includes 46 self-report items across 10 resilience dimensions: internal locus of control, self-acceptance, assertiveness, hardiness, forgiveness, sociability, optimism, emotional maturity, humor, and mindfulness. Each item is rated on a 5-point Likert scale ranging from Strongly Disagree (1) to Strongly Agree (5) for positive items, with reverse scoring for negative items. The total score ranges from 46 to 230, with higher scores reflecting greater resilience. Concurrent validity was confirmed through a significant positive correlation ($r = 0.658$) with the Psychological Hardiness Scale (PHS-SA). The scale also showed high internal consistency with a Cronbach's alpha of 0.816 and split-half reliability of 0.798 (Spearman-Brown) and 0.796 (Guttman). Norms were developed across age groups (18–35, 36–45, and 46–65 years) and genders based on a sample of 484 urban participants (male = 241; female = 243).

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

Procedure

Data was collected online using a structured questionnaire prepared on Google Forms. An informed consent was presented to each participant before data collection, ensuring confidentiality and voluntary participation. The form included demographic details (age, gender identity, sexual orientation, etc.), followed by standardized scales measuring sociogenic need satisfaction and resilience. The link to the questionnaire was distributed through social media platforms, community networks, and personal contacts to reach LGBTQIA+ and cis-heterosexual individuals aged 20–30 years across India. The participants were given the following instructions:

1. You must click on the option that seems most appropriate to you
2. There are no definitively correct or incorrect answers.
3. Do not think much about any statement.
4. Your results will be kept confidential
5. You can always opt out of the study

The collected data was then organized and subjected to appropriate statistical analyses to determine any significant differences in resilience and SNS between the two groups.

Statistical analysis

An independent sample t-test was used to find comparative differences in the sociogenic need satisfaction and resilience between LGBTQIA+ and cis-heterosexual individuals. Additionally, Pearson correlation was employed to examine the relationship between sociogenic need satisfaction and resilience across LGBTQ+ and heterosexual populations.

RESULTS

H01: There is no difference in the positive sociogenic need satisfaction levels between LGBTQIA+ and cis-heterosexual individuals aged 20-30.

Table 1: Difference in Positive SNS between LGBTQIA+ and Heterosexual individuals

Group	N	Mean	SD	SEM	t-value	p-value
LGBTQ individuals	60	163.88	36.94	4.74	2.1773	0.0314
Heterosexual individuals	60	176.52	25.43	3.31		

df = 118 ; p < 0.05

LGBTQIA+ individuals reported considerably lower levels of positive SNS (mean = 163.88) compared to heterosexual individuals (mean = 176.52). The results depict a statistically significant difference in the positive SNS of LGBTQIA+ (\bar{x} = 163.88 and SD=36.94) and heterosexual individuals (\bar{x} = 176.52 and SD = 25.43) [t = 2.1773, p = 0.0314]. Since the P-value is less than the 0.05 level of confidence, the null hypothesis is rejected. The positive sociogenic need satisfaction of LGBTQ+ and heterosexual individuals is not remotely the same.

H02: There is no difference in the negative sociogenic need satisfaction levels between LGBTQIA+ and cis-heterosexual individuals aged 20-30.

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

Table 2: Difference in Negative SNS between LGBTQIA+ and Heterosexual individuals

Group	N	Mean	SD	SEM	t-value	p-value
LGBTQ individuals	60	126.96	32.01	4.13	3.1013	0.0024
Heterosexual individuals	60	108.38	33.60	4.34		

df = 118 ; p < 0.05

LGBTQIA+ individuals reported considerably higher levels of negative SNS (mean = 126.96) compared to heterosexual individuals (mean = 108.38). The results depict an extremely statistically significant difference in the negative SNS of LGBTQIA+ (\bar{x} = 126.96 and SD = 32.01) and heterosexual individuals (\bar{x} = 108.38 and SD = 33.60) [t = 3.1013, p = 0.0024]. Since the P-value is less than the 0.05 level of confidence, the null hypothesis is rejected. The negative sociogenic need satisfaction of LGBTQ+ and heterosexual individuals is not remotely the same.

H03: There is no difference in resilience between LGBTQIA+ and cis-heterosexual individuals aged 20-30.

Table 3: Difference in Resilience between LGBTQIA+ and Heterosexual individuals

Group	N	Mean	SD	SEM	t-value	p-value
LGBTQ individuals	60	146.65	16.29	2.10	2.9043	0.0044
Heterosexual individuals	60	157.37	23.49	3.03		

df = 118 ; p < 0.05

LGBTQIA+ individuals averaged a score of 146.65 (mean), whereas heterosexual individuals scored 157.37 (mean). The results depict an extremely statistically significant difference in the resilience of LGBTQIA+ (\bar{x} = 146.65 and SD = 16.29) and heterosexual individuals (\bar{x} = 157.37 and SD = 23.49) [t = 2.9043, p = 0.0044]. Since the P-value is less than the 0.05 level of confidence, the null hypothesis is rejected. The resilience of LGBTQ+ and heterosexual individuals is not remotely the same.

Correlation Findings

To examine the proposed hypotheses, correlations were conducted between sociogenic need satisfaction and resilience across both groups. For LGBTQIA+ individuals, **H0 4** predicted no significant relationship between positive SNS and resilience, which was supported ($r = -.115$, $p = .382$). For **H0 5**, there was a non-significant small positive relationship between variables ($r(58) = .101$, $p = .442$); thus, H0 5 cannot be rejected. Among cis-heterosexual individuals, similar findings were seen. **H0 6** resulted in no significant relationship between positive SNS and resilience ($r = -.092$, $p = .483$), and **H0 7** also predicted no significant relationship between negative SNS and resilience ($r = -.187$, $p = .154$).

In all cases, the null hypotheses were retained, indicating that resilience was not significantly associated with either positive or negative sociogenic need satisfaction in this sample.

DISCUSSION

Despite the fact that the concept of resilience has been thoroughly examined across different populations, the linkage of SNS to resilience in LGBTQIA+ communities, particularly in India, is still under-researched. A significant number of LGBTQIA+ people face such

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

situations that life for them turns into a chain of stigmatization, discrimination, and marginalization, resulting in shrinkage of their social support circles, and consequently they are less capable of adapting to the challenges. This research aimed to investigate if SNS, both positive and negative, had any relationship with the resilience of LGBTQIA+ individuals as opposed to their heterosexual, cisgender peers.

LGBTQIA+ individuals reported significantly lower levels of positive sociogenic need satisfaction compared to cis-heterosexual individuals ($p < .05$). This indicates that their experiences of social approval, belongingness, and affirmation may be comparatively limited. Such disparities are likely influenced by minority stressors, including stigma, discrimination, and exclusion, which can restrict access to validating social environments. This pattern aligns with Meyer's Minority Stress Theory (2003), which emphasizes the cumulative effect of social stressors on the mental and emotional health of sexual and gender minorities. Similar findings have been documented by Caitlin Ryan, Rafael M. Diaz, Jorge M. Sanchez, and Laura E. King (2010), who observed that LGBTQIA+ individuals often lack consistent sources of acceptance and relational security. These results highlight the urgent need for inclusive social structures and affirming community practices that support the sociogenic well-being of diverse identities.

LGBTQIA+ individuals reported significantly higher levels of negative sociogenic need satisfaction compared to cis-heterosexual individuals ($p < .01$), suggesting more frequent experiences of rejection, social exclusion, or conditional acceptance. This disparity reflects the enduring challenges LGBTQIA+ individuals face in forming secure and affirming social bonds. Such findings are consistent with Munoth (2022), who found that LGBTQIA+ participants in South India experienced lower levels of social connectedness and overall quality of life. Similar patterns were reported by Toomey et al. (2013), who highlighted that sexual minority youth experiencing greater social stress and peer victimization were more likely to report negative psychosocial outcomes. Together, these findings highlight the pressing need for systemic and interpersonal efforts to reduce social alienation and improve inclusive environments for LGBTQIA+ individuals.

The findings reveal a significant difference in resilience between LGBTQIA+ and cis-heterosexual individuals, with LGBTQIA+ participants scoring lower ($M = 146.65$, $SD = 16.29$) than their heterosexual counterparts ($M = 157.37$, $SD = 23.49$). On the other hand, analysis revealed no significant relationship between negative sociogenic need satisfaction and resilience among LGBTQIA+ individuals, with a small positive correlation ($r = .101$, $p = .442$). This is similar to a study conducted in Puducherry, India, that found low to average resilience among transgender individuals, reflecting the psychological toll of marginalization (Chavada et al., 2021). Additionally, Babygeetha and Angiel (2024) demonstrated that social connectedness significantly enhances resilience in LGBTQ+ individuals, emphasizing the importance of inclusive support systems.

The analysis found no significant relationship between positive sociogenic need satisfaction and resilience among LGBTQIA+ individuals. Although a slight negative correlation was observed, it was not statistically significant ($r = -0.115$, $p = .382$). Nigudkar and Wandrekar (2025) emphasized the effectiveness of the *SAAHAS* intervention model in fostering resilience among LGBTQIA+ individuals in India, noting that resilience development often occurs independently of external validation.

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

The present findings indicate no significant relationship between positive sociogenic need satisfaction and resilience in cis-heterosexual individuals aged 20–30 ($r = -.0924$, $p = .483$), suggesting that for this group, experiences of social approval, belongingness, and affirmation may not directly influence their resilience levels.

Lastly, no significant relationship was found between SNS and resilience in cis-heterosexual individuals aged 20–30 ($r = -.187$, $p = .154$). Research by Southwick and Charney (2012) highlights that resilience in general populations is often shaped more strongly by internal factors—such as optimism, cognitive flexibility, and meaning-making—than by interpersonal stressors alone.

CONCLUSION

The results of the research highlighted statistically significant differences across the three measured variables: positive SNS, negative SNS, and MDRS (resilience). LGBTQIA+ individuals reported higher scores in negative SNS, revealing profound experiences of unfulfilled and negative social needs. In contrast, they demonstrated lower scores in both positive SNS and resilience, expressing obstacles in achieving their social needs positively and in sustaining psychological strength when faced with adversity.

These results underline the impact of societal stressors and structural barriers on the LGBTQIA+ community. Experiencing the challenges stemming from systemic exclusion, prejudice, and minority stressors may add to decreased social need satisfaction and resilience levels. This suggests the need for mental health interventions, equitable social policies, and community support programs designed to improve the well-being of LGBTQIA+ individuals.

Limitations

- The sample size employed in this study is considered small (120 participants).
- Socioeconomic status, education level, and urban vs. rural residence were not taken into consideration, which can impact the results as well as limit the scope for future research.
- The scale was only administered in English, which could limit the homogeneity of the sample.

Implication and scope

- The elevated need-satisfaction scores among LGBTQIA+ individuals suggest that tailored stress management and mental health support could be highly beneficial.
- Disparities in positive need fulfillment and resilience underscore the importance of inclusive policies and supportive environments.
- Recognizing these differences can help young adults choose workplaces and communities that truly nourish their well-being.
- These findings lay a foundation for future research to test targeted interventions and uncover the factors that build resilience.
- Highlighting resilience gaps reminds us of the value of personalized self-care strategies to maintain balance and thrive.

REFERENCES

- Álvarez, R. G., Parra, L. A., Brummelaar, M. T., Avraamidou, L., & López, M. L. (2022). Resilience among LGBTQIA+ youth in out-of-home care: A scoping review. *Child Abuse & Neglect*, *129*, Article 105660. <https://doi.org/10.1016/j.chiabu.2022.105660>
- Babygeetha, A., & Angiel, P. R. (2024). The role of social connectedness in the resilience of LGBTQ+ individuals. *International Journal of Indian Psychology*, *12*(3), 458–472.
- Bordoloi, I., & Saidin, F. (2024). *A quest into resilience between LGBT and heterosexual individuals* [Figshare]. <https://doi.org/10.6084/m9.figshare.27800214>
- Bowes, L., & Jaffee, S. (2013). Biology, genes, and resilience: Toward a multidisciplinary approach. *Trauma, Violence, & Abuse*, *14*(3), 195–208.
- Chavada, M., Chinnakali, P., T. S. S., & Roy, G. (2021). Level of resilience among transgenders in selected areas of Puducherry, India: An exploratory research. *Cureus*, *13*(10), e18895. <https://doi.org/10.7759/cureus.18895>
- Cleofas, J. V. (2024). Communal and national resilience as predictors of happiness among young Filipino LGBTQ+ undergraduates: The mediating role of mental well-being. *Journal of Human Behavior in the Social Environment*, *34*(8), 1243–1259.
- D'Augelli, A. R., Grossman, A. H., Salter, N. P., et al. (2005). Predicting the suicide attempts of lesbian, gay, and bisexual youth. *Suicide and Life-Threatening Behavior*, *35*, 646–660.
- Fergus, S., & Zimmerman, M. A. (2005). Adolescent resilience: A framework for understanding healthy development in the face of risk. *Annual Review of Public Health*, *26*(1), 399–419. <https://doi.org/10.1146/annurev.publhealth.26.021304.144357>
- Firk, C., Großheinrich, N., Scherbaum, N., et al. (2023). The impact of social connectedness on mental health in LGBTQ+ identifying individuals during the COVID-19 pandemic in Germany. *BMC Psychology*, *11*, 252. <https://doi.org/10.1186/s40359-023-01265-5>
- Gupta, S., Rai, A., & Suzen, H. (2025). Role of sexual orientation in resilience and self-esteem of young adults. In N. Pant (Ed.), *Psychology of Sexuality & Mental Health* (Vol. 2). Springer. https://doi.org/10.1007/978-981-97-8971-9_7
- Haas, A. P., Eliason, M., Mays, V. M., Mathy, R. M., Cochran, S. D., D'Augelli, A. R., ... & Clayton, P. J. (2010). Suicide and suicide risk in lesbian, gay, bisexual, and transgender populations: Review and recommendations. *Journal of Homosexuality*, *58*(1), 10–51.
- Hancock, K., Alie, L., Cerbone, A., Dworkin, S., Gock, T., Haldeman, D., et al. (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *American Psychologist*, *67*(1), 10–42.
- Harvey, J., & Delfabbro, P. (2004). Psychological resilience in disadvantaged youth: A critical overview. *Australian Psychologist*, *39*(1), 3–13.
- Honor, G. (2017). Resilience. *Journal of Pediatric Health Care*, *31*(3), 384–390.
- Huppert, F. A. (2009). Psychological well-being: Evidence regarding its causes and consequences. *Applied Psychology: Health and Well-Being*, *1*(2), 137–164.
- Jurček, A., Keogh, B., Sheaf, G., Hafford-Letchfield, T., & Higgins, A. (2022). Defining and researching the concept of resilience in LGBT+ later life: Findings from a mixed-study systematic review. *PLOS ONE*, *17*(11), e0277384. <https://doi.org/10.1371/journal.pone.0277384>
- Kaur, A., & Kewalramani, S. (2023). Mental well-being, self-acceptance, frustration-tolerance among homosexual and heterosexual adults. *International Journal of Current Science*, *13*(2), 679–686.

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

- Khatri, S. (2024). Perceived family acceptance, relationship satisfaction and self-acceptance in homosexual and heterosexual couples. *International Journal of Interdisciplinary Approaches in Psychology*, 2(5), 469–497.
- Klein, A., & Golub, S. (2016). Family rejection as a predictor of suicide attempts and substance misuse among transgender and gender nonconforming adults. *LGBT Health*, 3, 10.1089/lgbt.2015.0111. <https://doi.org/10.1089/lgbt.2015.0111>
- Masten, A. S. (2014). Global perspectives on resilience in children and youth. *Child Development*, 85(1), 6–20. <https://doi.org/10.1111/cdev.12205>
- 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>
- Mohan, K. (2022). Indian LGBTQ+ youth: The ‘invisible’ orientations and mental health. *International Journal of Indian Psychology*, 10(2), 429–445.
- Munoth, A. (2022). Self-esteem, social connectedness and quality of life among the LGBTQIA+ community in South India. *International Journal of Indian Psychology*, 10(3), 296–305.
- Mustanski, B., Greene, G. J., Ryan, D., & Whitton, S. W. (2015). Feasibility, acceptability, and initial efficacy of an online sexual health promotion program for LGBT youth: The Queer Sex Ed intervention. *Journal of Sex Research*, 52(2), 220–230.
- Nigudkar, A. S., & Wandrekar, J. R. (2025). Building individual and community resilience for LGBTQIA+ individuals in India: A pilot study using the SAAHAS intervention model. *Indian Journal of Social Psychiatry*, 41(1), 35–42. https://doi.org/10.4103/ijsp.ijsp_143_23
- Ryan, C., Russell, S. T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family acceptance in adolescence and the health of LGBT young adults. *Journal of Child and Adolescent Psychiatric Nursing*, 23(4), 205–213.
- Rutter, M. (2012). Resilience as a dynamic concept. *Development and Psychopathology*, 24(2), 335–344.
- Sapienza, J., & Masten, A. (2011). Understanding and promoting resilience in children and youth. *Current Opinion in Psychiatry*, 54(4), 474–487.
- Sinha, A., & Badani, Y. (2024). *Pride and Prejudice: Exploring the experiences of discrimination, psychological distress and resilience amongst the individuals of LGBTQ Community in India* [Preprint]. Authorea.
- Skerrett, D. M., Kølves, K., & De Leo, D. (2016). Factors related to suicide in LGBT populations. *Crisis*, 37(5), 361–369. <https://doi.org/10.1027/0227-5910/a000423>
- Southwick, S. M., & Charney, D. S. (2012). *Resilience: The science of mastering life's greatest challenges*. Cambridge University Press.
- Srivastava, L., Advani, P., Kaur, H., Khattar, S., Saxena, A., & Kumar, S. (2023). Adverse childhood experiences and resilience among cisgendered heterosexual and LGBTQIA+ individuals in India. *Journal of Psychosexual Health*, 5(3), 152–158.
- Stevens, S., Haverly, K., & Powell, C. (2020). Improvements in self-acceptance for LGBTQ+ and straight allied youth and young adults enrolled in an affirming system of care program. *Children and Youth Services Review*, 118, Article 105382. <https://doi.org/10.1016/j.childyouth.2020.105382>
- The Trevor Project. (2021a). *Understanding gay and lesbian identities*.
- Toomey, R. B., Ryan, C., Diaz, R. M., Card, N. A., & Russell, S. T. (2010). Gender-nonconforming lesbian, gay, bisexual, and transgender youth: School victimization and young adult psychosocial adjustment. *Developmental Psychology*, 46(6), 1580–1589. <https://doi.org/10.1037/a0020705>

Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals

- Ungar, M. (Ed.). (2011). *The social ecology of resilience: A handbook of theory and practice*. Springer.
- Ungar, M., Ghazinour, M., & Richter, J. (2013). Annual research review: What is resilience within the social ecology of human development? *Journal of Child Psychology and Psychiatry*, 54(4), 348–366.
- Vora, P. V., & Prabhu, V. V. (2022). Differences in resistance to change, optimism and perceived social support among individuals with different sexual orientations. *Indian Journal of Mental Health*, 9(2).
- Yadegarfar, M., Ho, R., & Bahramabadian, F. (2013). Influences on loneliness, depression, sexual-risk behaviour and suicidal ideation among Thai transgender youth. *Culture, Health & Sexuality*, 15(6), 726–737.

Acknowledgment

The authors appreciate all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

How to cite this article: Bhatt, T. & Thapliyal, K. (2026). Comparative Study of Sociogenic Need Satisfaction and Resilience between LGBTQIA+ and Cis-Heterosexual Individuals. *International Journal of Indian Psychology*, 14(1), 239-250. DIP:18.01.021.20261401, DOI:10.25215/1401.021