

SEXUAL MINORITY UNIVERSITY STUDENTS HAVE HIGHER SUICIDAL IDEATION

Los estudiantes universitarios de minorías sexuales tienen mayor ideación
suicida

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ABSTRACT

University students have high rates of mental disorders, and this prevalence is higher in sexual minorities. This study aimed to analyze the association between sexual orientation and suicidal ideation in university students. The study population was composed of undergraduates of the State University of Londrina (UEL), located in Paraná, Brazil, members of the GraduaUEL project (2019). The outcome variable was suicidal ideation, and the predictor was sexual orientation. Multinomial logistic regression analyses were performed, with Odds Ratio (OR) calculation and 95% confidence interval (CI). A total of 2,958 students were evaluated, the majority female (68.8%). Overall, 7.4% of the sample reported being homosexual and 14.7% bisexual. Suicidal ideation was identified in 32.1% of students, with 7.8% reporting these thoughts weekly or daily. Adjusted analysis indicated a significant association between sexual minorities and weekly/daily suicidal ideation in the general student population (homosexual: OR= 1.87; 95% CI 1.10-3.17; bisexual: OR= 2.63; 95% CI 1.83-3.79) and in females (homosexual: OR= 2.37; 95% CI 1.07-5.27; bisexual: OR= 2.80; 95% CI 1.86-4.20), when compared to heterosexuals. It can be concluded, with this study, that sexual minority students, especially females and bisexuals, are more likely to have suicidal ideation, when compared to heterosexual students.

Keywords: Sexual orientation, sexual minorities, suicidal ideation, students, university.

RESUMEN

Los estudiantes universitarios tienen altas tasas de trastornos mentales, y esta prevalencia es mayor en las minorías sexuales. Este estudio tuvo como objetivo analizar la asociación entre orientación sexual e ideación suicida en estudiantes universitarios. La población de estudio estuvo compuesta por estudiantes de pregrado de la Universidad Estadual de Londrina (UEL), ubicada en Paraná,

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Brasil, miembros del proyecto GraduaUEL (2019). La variable de resultado fue la ideación suicida y el predictor fue la orientación sexual. Se realizaron análisis de regresión logística multinomial, con cálculo de Odds Ratio (OR) e intervalo de confianza (IC) del 95%. Fueron evaluados un total de 2.958 estudiantes, la mayoría mujeres (68,8%). En general, el 7,4% de la muestra declaró ser homosexual y el 14,7% bisexual. Se identificó ideación suicida en el 32,1% de los estudiantes, y el 7,8% informó estos pensamientos semanal o diariamente. El análisis ajustado indicó una asociación significativa entre las minorías sexuales y la ideación suicida semanal/diaria en la población estudiantil general (homosexual: OR= 1,87; IC 95% 1,10-3,17; bisexual: OR= 2,63; IC 95% 1,83-3,79) y en mujeres (homosexual: OR= 2,37; IC 95% 1,07-5,27; bisexual: OR= 2,80; IC 95% 1,86-4,20), en comparación con heterosexuales. Se puede concluir, con este estudio, que los estudiantes de minorías sexuales, especialmente las mujeres y los bisexuales, tienen más probabilidades de tener ideas suicidas, en comparación con los estudiantes heterosexuales.

Palabras clave: Orientación sexual, minorías sexuales, suicidal ideation, ideación suicida, universidades.

RESUMO

A conceituação de caso é uma ferramenta importante para identificar e descrever o comportamento problemático de um cliente, planejar o tratamento e aumentar a probabilidade de sucesso. Investigações empíricas das conceituações divulgadas na FAP são necessárias para encontrar evidências da qualidade, precisão e profundidade das informações, uma vez que preocupações foram recentemente levantadas na literatura sobre os danos das descrições comportamentais que podem ser distorcidas pelo uso de termos moderados e a questionável diminuição dos componentes funcionais da FAP. Informações importantes são fornecidas sobre conceituações baseadas em pesquisas verificáveis que apoiam as necessidades, pontos fortes e fracos das conceituações publicadas.

Palavras-chave: Psicoterapia Analítica Funcional, FAP, Conceituação de Caso.

INTRODUCCIÓN

Data from the World Health Organization (2021) estimated a total of 322 million people with depression in 2015, which represents an increase of 18.4% from 2005. Young adulthood, between the ages of 23 and 30, was the most common period for developing depression and anxiety (Kessler et al., 2012).

On occasions such as stress and grief, depressive feelings are common and expected. The problem arises when these symptoms turn into a chronic and disabling situation, becoming a mental disorder: major depressive disorder (MDD) or simply depression (Penninx et al., 2013). Depression is usually a sine qua non condition for suicidal ideation and suicide attempts (Cremasco & Baptista, 2017). According to the WHO, more than 700,000 people commit suicide every year, disregarding the number of suicide attempts. In 2019, suicide was the fourth leading cause of death

among 15- to 29-year-olds worldwide, which is the prevailing age group of university students (World Health Organization, 2021).

When compared to the general population, university students have a higher frequency of depressive symptoms and suicide-related outcomes. Recently, a meta-analysis of studies on undergraduates' mental health demonstrated a 25% pooled prevalence of depression (12 studies) and a 14% combined prevalence of suicide-related outcomes (13 studies) (Sheldon et al., 2021). Possibly, this situation is due to the large number of academic and personal demands, high stress level, age group susceptibility to these conditions, distance from family, tests and exams, financial difficulties, frustration or disappointment with the chosen course and low academic performance (Fernandez et al., 2016, Cuijpers et al., 2019). Thus, the factors that influence the transition to adulthood make university students a group that deserves attention in mental health promotion policies.

In addition, undergraduates have their first sexual experiences, as well as self-identify as sexual minorities during this period of life. These minorities, who identify as a part of the LGBTQIA+ (lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual, and others) community, can experience countless instances of violence, whether physical, symbolic, or psychological. This situation leads to suffering, intensifying the feeling of not belonging, incomprehension and exclusion, which leads to several social, psychological, and emotional problems, such as depression and even suicide attempts (Ghorayeb, 2007).

1. THERE ARE STUDIES SHOWING THAT BELONGING TO A SEXUAL MINORITY GROUP IS ASSOCIATED WITH MENTAL HEALTH PROBLEMS, SUCH AS DEPRESSION, ANXIETY, AND SUICIDAL IDEATION (MEYER ET AL., 2014, SPITTLEHOUSE ET AL., 2020). HOWEVER, BRAZIL LACKS STUDIES FOCUSED ON SEXUAL MINORITIES AND THEIR RELATIONSHIP WITH MENTAL HEALTH (PLÖDERL & TREMBLAY, 2015, WILLIAMS ET AL., 2021). THUS, THIS STUDY AIMS TO ANALYZE THE ASSOCIATION BETWEEN SEXUAL ORIENTATION AND SUICIDAL IDEATION IN STUDENTS AT A PUBLIC UNIVERSITY IN LONDRINA, BRAZIL).

METHODS

Setting and participants

This is a cross-sectional epidemiological study, with a quantitative approach, part of the "GraduaUEL: Analysis of the Health and Life Habits of Undergraduate Students at UEL" project,

which aimed to analyze health-related aspects, exposure to violence, and life habits of university students.

The population was composed of undergraduates from the State University of Londrina (UEL), located in the state of Paraná, Brazil, regularly enrolled in the first semester of 2019, aged 18 years or older, and who voluntarily agreed to participate in the study. The participants were distributed among 51 undergraduate courses (50 face-to-face and one distance learning). For this study, students up to 30 years of age were included.

Instruments and procedure

The data collection instrument was based on the literature, using validated instruments or questions developed by the research collaborators, which were analyzed by researchers with expertise in epidemiology. A pre-test was conducted at a private university in Londrina, as well as a pilot study at a public university around Londrina, Brazil. The pre-test and the pilot study allowed us to adapt the questionnaire, to test its insertion in the chosen electronic platform, and to verify the platform's support during simultaneous access. Data collection was conducted online between April 29 and June 28, 2019, via a previously structured questionnaire on the Google Forms® digital platform.

Variables

The present study had suicidal ideation as the outcome variable, obtained from the Patient Health Questionnaire-9 (PHQ-9) (Santos et al., 2013). To gauge suicidal ideation, the last question from the PHQ-9 instrument ("Have you thought about hurting yourself in any way or that it would be better to be dead?") was used, which referred to the previous two weeks. The answer possibilities were: not at all; less than a week; a week or more; almost every day. For this study, this variable was recategorized into no suicidal ideation; suicidal ideation at least once a week; weekly or daily suicidal ideation.

The predictor variable was sexual orientation, categorized as: heterosexual, homosexual, and bisexual. Students who checked the options "other sexual orientation", "do not know" or "I prefer not to answer" were excluded from the study. As characterization and adjustment variables, we used: age (continuous); skin color (white/yellow, black/brown/indigenous); diagnosis of depression, through the question contained in the questionnaire: "Have you ever been diagnosed with depression by a doctor?" (yes, no); diagnosis of anxiety, through the question contained in the questionnaire: "Have you ever been diagnosed with anxiety by a doctor?" (yes, no); body image satisfaction (very low, low, moderate, high), and reporting insults, teasing or feeling humiliated in

the academic environment (yes, no). Satisfaction with body image was assessed from the reduced version 8B of the Body Shape Questionnaire and was categorized into quartiles (Silva et al., 2016).

Statistical analysis

Statistical analyses were performed using the Statistical Package for the Social Sciences® (SPSS) version 19.0 for Windows®. Categorical data were presented as absolute number (n) and percentage (%), and continuous data as mean and standard deviation, stratified by sex (male and female). Pearson chi-square tests was employed to compare the characteristics the sample stratified by sex. The study was stratified by sex to characterize the study population, and the observed differences of the distributions were tested using the Pearson's chi-square test. The association between suicidal ideation and the predictor variable - sexual orientation - was measured by multinomial logistic regression analysis with Odds Ratio (OR) calculation and 95% confidence interval (CI). The response "no suicidal ideation" was used as the reference category. Crude and adjusted analysis by age, skin color, diagnosis of depression, diagnosis of anxiety, body image satisfaction and reporting insults, teasing or feeling humiliated in the academic environment were conducted. Results with p-value < 0.05 were considered statistically significant.

Ethical questions

The present study was approved by the Ethical Committee on Human Experimentation of the State University of Londrina (Protocol number 04456818.0.0000.5231; approved on December 20, 2018). The participants were informed about the objectives of the research and the Informed Consent Form was presented on the initial page of the questionnaire. Only those who voluntarily agreed to participate proceeded with the completion.

RESULTS

In the first semester of 2019, UEL had 12,536 regularly enrolled students aged 18 years or older. Out of these, 3,252 filled out the instrument. However, 12 did not inform their age, two did not answer correctly, 159 were over 30 years old, and 121 answered the question about sexual orientation as "other", "do not know" or "I prefer not to answer", totaling 2,958 students (24.86 % of the university population) for this study.

The median age from the analyzed students ($n=2,958$) was 21.0 years, with an interquartile range (IQR) of 3.0. Among women the median was 21.0 (IQR=3.0) and among men also 21.0 (IQR=4.0). About 70.0% (N=2,032) of the students were women, with the majority having white or yellow skin color (75.7%).

From those evaluated, 77.8% reported being heterosexual. The prevalence of homosexuals among men (15.4%) was higher than among women (3.8%), in contrast to the prevalence of bisexuals, which was

higher among women (17.5%) than men (8.7%) ($p < 0.001$). There was a higher proportion of women diagnosed with depression and anxiety compared to men ($p < 0.001$). Furthermore, it was identified that the prevalence of worse satisfaction with body image was also higher in women ($p < 0.001$) (Table 1).

Table 1

Distribution of students according to sociodemographic and mental health characteristics. GraduaUEL, 2019. (n=2,958)

Independent and adjustment variables	Total N (%)	Sex		p-value*
		Female N (%)	Male N (%)	
Sexual orientation				
Heterosexual	2,302 (77.9)	1,600 (78.7)	702 (76.0)	<0.001
Homosexual	220 (7.4)	78 (3.8)	142 (15.3)	
Bisexual	436 (14.7)	356 (17.5)	80 (8.7)	
Skin color (N=2,954)**				
White/yellow	2,235 (75.7)	1,548 (76.2)	687 (74.5)	0,327
Black/brown/indigenous	721 (24.3)	485 (23.8)	236 (25.5)	
Diagnosis of depression (N=2,956)**				
Yes	322 (10.9)	253 (12.5)	69 (7.5)	<0.001
No	2,634 (89.1)	1,779 (87.5)	855 (92.5)	
Diagnosis of anxiety				
Yes	889 (30.1)	698 (34.3)	191 (20.7)	<0.001
No	2,069 (69.9)	1,336 (65.7)	733 (79.3)	
Satisfaction with body image (N=2,904)**				
Very low	729 (25.1)	376 (18.9)	353 (38.8)	<0.001
Low	670 (23.1)	437 (21.9)	233 (25.6)	
Moderate	751 (25.9)	568 (28.5)	183 (20.1)	
High	754 (26.0)	613 (30.7)	141 (15.5)	
Reporting insults, teasing or feeling humiliated in the academic environment				
Yes	944 (31.9)	1,366 (67.2)	648 (70.1)	0,108
No	2,014 (68.1)	668 (32.8)	276 (29.9)	

*Chi-squared test.

**There was a smaller number of participants because null answers were identified.

A total of 950 students (32.1%) reported having suicidal ideation, 7.8% of whom reported having these thoughts weekly or daily. Suicidal ideation was significantly higher among women (34.0%) when compared to men (28.2%) ($p = 0.004$).

Table 2 shows that the prevalence of suicidal ideation was higher in homosexual and bisexual students in both the general population and in female and male students, when compared to heterosexual students.

Table 2*Prevalence of suicidal ideation among undergraduate students according to sexual orientation, by sex.**GraduaUEL, 2019. (N=2,958)*

Sexual orientation	No suicidal ideation N (%)	Suicidal ideation At least once a week N (%)	Weekly or daily N (%)
General population			
Heterosexual	1,658 (72.1)	505 (21.9)	139 (6.0)
Homosexual	129 (58.6)	68 (30.9)	23 (10.5)
Bisexual	221 (50.6)	145 (33.3)	70 (16.1)
Females			
Heterosexual	1,128 (70.5)	365 (22.8)	107 (6.7)
Homosexual	41 (52.6)	27 (34.6)	10 (12.8)
Bisexual	175 (49.2)	122 (34.3)	59 (16.5)
Males			
Heterosexual	530 (75.5)	140 (19.9)	32 (4.6)
Homosexual	88 (62.0)	41 (28.8)	13 (9.2)
Bisexual	46 (57.5)	23 (28.7)	11 (13.8)

Table 3 shows that in both the crude and adjusted analysis, homosexual and bisexual orientation were associated with suicidal ideation among the general study population and female students. In general population, the chance of suicidal ideation among bisexuals was higher than that of homosexuals, when compared to heterosexuals. In the male gender, although in the crude analysis there was a significant relationship between sexual orientation and suicidal ideation, in the adjusted analysis, only the fact that bisexual orientation had a greater chance of weekly or daily suicidal ideation remained significant.

Se ha planteado la necesidad de indagar por la información descrita en las formulaciones publicadas, no solo en pro del mejoramiento de las publicaciones en sí mismas, sino del impacto que llegase a tener la promoción de prácticas que modelan el ejercicio profesional e investigativo desde una conceptualización consistente y coherente de la conducta del cliente, sustentada en los principios del análisis funcional y basada en evidencia (Kuei et al., 2019). Por lo tanto, si se encuentra que la conceptualización es incompleta o inconsistente con las posiciones teóricas, indica deficiencias éticas en la práctica de la psicología como disciplina, incrementando la brecha entre la ciencia y la práctica clínica, y justifica una corrección urgente para el próximo contenido a publicar en la conceptualización de caso en FAP. Así, se puede sintetizar que el beneficio y la contribución de estudiar empíricamente las conceptualizaciones publicadas, prevendría el riesgo de legitimar prácticas no basadas en la evidencia, y que éstas se alejen de: primero, las premisas conductistas radicales sobre las que se basa FAP (Kohlenberg & Tsai, 1991), segundo, de los

métodos científicos mismos, y por último, de la posibilidad de abordar la actualización, validación, confiabilidad del modelo de conceptualización en FAP (Kanter et al., 2009). Por lo tanto, se considera importante ejecutar una revisión previa a la publicación de los estudios, haciendo énfasis en la calidad de sus procesos con el fin de obtener requisitos más rigurosos para futuras conceptualizaciones, corregir deficiencias que se puedan encontrar a nivel funcional o topográfico, y, de esa forma, señalar las mejoras científicas urgentes, cabe destacar que no se trata de criticar o competir, sino construir (a través de la colaboración) un camino sostenible para la expansión de la FAP.

En resumen, identificar la necesidad de conceptualización será el punto de partida para crear una línea de investigación sobre formulación, fortalecimiento de la comunidad conectada a varios grupos de trabajo colaborativos a nivel nacional e internacional, y construir una columna vertebral consistente para la enseñanza conceptual de casos de análisis funcional proporciona una mayor garantía para que los lectores encuentren la información procesable que desean comprender en los estudios de casos.

Finalmente, la atención hacia las conceptualizaciones publicadas desde FAP, se sustenta en el interés por apoyar la evolución de FAP en dirección hacia sus premisas originales que dieron lugar a su nacimiento (Kohlenberg et al., 1993; Kohlenberg et al., 1999), previniendo así el deterioro o reducción en la calidad de sus publicaciones y fortaleciendo el desarrollo de una tecnología de la conducta (Skinner, 1986).

Table 3*Unadjusted and adjusted models (multinomial regression) of the association between sexual orientation and suicidal ideation in undergraduate students. GraduaUEL, 2019.*

Sexual orientation	Suicidal ideation at least once a week				Suicidal ideation weekly/daily			
	Crude OR (95%CI)	p-value	Adjusted OR* (95%CI)	p-value	Crude OR (95%CI)	p-value	Adjusted OR* (95%CI)	p-value
General population (N=2,900)								
Heterosexual	1.00	.	1.00	.	1.00	.	1.00	.
Homosexual	1.73 (1.27-2.36)	0.001	1.72 (1.24-2.38)	0.001	2.13 (1.32-3.42)	0.002	2.21 (1.34-3.64)	0.002
Bisexual	2.15 (1.71-2.72)	<0.001	1.78 (1.39-2.27)	<0.001	3.78 (2.74-5.20)	<0.001	2.88 (2.03-4.08)	<0.001
Females (N=1,990)								
Heterosexual	1.00	.	1.00	.	1.00	.	1.00	.
Homosexual	2.04 (1.24-3.36)	0.005	2.43 (1.43-4.11)	0.001	2.57 (1.25-5.28)	0.010	3.52 (1.65-7.52)	0.001
Bisexual	2.15 (1.66-2.79)	<0.001	1.85 (1.40-2.43)	<0.001	3.55 (2.49- 5.07)	<0.001	2.94 (2.00-4.32)	<0.001
Males (910)								
Heterosexual	1.00	.	1.00	.	1.00	.	1.00	.
Homosexual	1.76 (1.17-2.67)	0.007	1.71 (0.97-3.01)	0.269	2.45 (1.24-4.84)	0.010	1.63 (0.78-3.43)	0.196
Bisexual	1.89 (1.11-3.23)	0.019	1.38 (0.89-2.15)	0.626	3.96 (1.87-8.37)	<0.001	2.88 (1.22-6.79)	0.016

*Adjusted by age (continuous), skin color, diagnosis of depression, diagnosis of anxiety, body image satisfaction and reporting insults, teasing or feeling humiliated in the academic environment.

DISCUSIÓN

The present study identified an association between suicidal ideation and sexual orientation in the general student population (not stratified by sex), even after adjusted by age, diagnosis of depression, diagnosis of anxiety, and perceived mental health. When stratified by sex, only women retained an association between sexual orientation and suicidal ideation after adjustments, in addition to bisexual men presenting greater weekly or daily suicidal ideation. Therefore, this study shows that belonging to sexual minorities (homosexual and bisexual) is associated with suicidal ideation, both at a frequency of at least once a week and weekly or daily, especially among females.

A meta-analysis conducted in 2016 found that diagnosis of depression was more frequent in individuals with suicidal ideation, compared to those without it (May & Klonsky, 2016). Furthermore, studies in young population, such as that of Silva et al. (2015), showed that the prevalence of depression, suicidal thoughts, and suicidal behaviors is high among university students and even higher among adolescents and young adults belonging to sexual minorities. Other studies that also demonstrate this association (Spittlehouse et al., 2020, Guz et al., 2021, Duba et al., 2020, Sacramento et al., 2021) corroborate the results obtained in the present study.

A study of monozygotic and dizygotic twins of different sexual orientations showed that belonging to a sexual minority was related to an increase of approximately 50% in the chances of self-harm and/or suicide in adolescents, when compared to their heterosexual twin siblings. Thus, it shows that the environmental factor – belonging to a sexual minority – is more related to suicide than the genetic factor (O'Reilly et al., 2021). Other recent studies (Meyer et al., 2014, Silva et al., 2015) reinforce that belonging to sexual minorities is one of the factors that leads young people to commit suicide.

To date, the main framework for explaining disparities in mental health and suicide based on sexual minority status is the minority stress theory (Meyer et al., 2014, Meyer, 2003). This theory states that discrimination, violence, and victimization arisen from a pervasive homophobic culture cause minority stress and are key drivers of mental health problems and suicide in this population. An extensive body of work shows a link between suicide and stress experienced by sexual minorities (Aranmolate et al., 2017). For example, perceived stigma (Lea et al., 2014); homophobic abuse, harassment, or victimization (Lea et al., 2014, Bouris et al., 2016, House et al., 2011); homophobia or internalized shame (Skerrett et al., 2016); and family or peer rejection (Pompili et al., 2014, Puckett et al., 2017) were associated with suicidal ideation or suicide attempts.

Recently, Fulginiti and colleagues (Fulginiti et al., 2020) sought to integrate the minority stress theory and the interpersonal suicide theory to better understand the high suicide rates among

sexual minority youth. They identified that sexual minority stress was significantly associated with perceived burdensomeness (i.e., the belief that its own life worths less than its die) and frustrated belonging in models that predict suicidal ideation and suicide attempt. Furthermore, minority stress had a direct effect on suicide attempt and an indirect effect on both suicidal ideation and suicide attempt as a consequence of perceived burdensomeness.

In the general population, the results of the adjusted analysis show higher odds of weekly/daily suicidal ideation in the bisexual group (OR = 2.88) than the homosexual group (OR = 2.21) when compared to the heterosexual group, although both comparisons were significant. A similar result was observed among men, in which only bisexuals showed a significant relationship with suicidal ideation, in the adjusted analysis. Systematic reviews have shown that bisexual individuals have higher odds of suicide when compared to homosexuals (Pompili et al., 2014, Plöderl & Tremblay, 2015). This is possibly due to the fact that bisexual individuals are the most likely to experience mental health difficulties (Bostwick et al., 2014), in view of their exposure to a double stigma effect (Pereira & Costa, 2016), as well as the bisexuality erasure in society and the lack of a community that provides bisexual affirmative support (Gilmour, 2019).

In addition, studies show a higher prevalence of depressive symptoms and suicidal ideation in females, possibly due to factors that contribute to the discrepancy between the sexes. Furthermore, women are twice more likely to be affected by depression than men (Penninx et al., 2013) and are socialized to place greater importance on interpersonal relationships than men (Rose & Rudolph, 2006), which makes them more prone to suicidal ideation as they are more strongly impacted by interpersonal challenges (Batterham et al., 2018). Additionally, it appears that gender issues are also permeated by sexism (Nuñez et al., 2016), as the relationship between gender identity and suicidal ideation seen in this study was more robust among women than men.

The present study has limitations, especially regarding the response rate, which was about a quarter of the enrolled students. Also, the fact that some students marked "do not know" or "I prefer not to answer" in the question about sexual orientation shows that it can be still difficult to understand and embrace their own orientation. The same goes for "other" sexual orientation, that were excluded from this study for statistical reasons (small number of respondents). Despite the challenges, this is a study with high magnitude, as it evaluated students from all undergraduate courses and obtained a much higher study population than other Brazilian studies dealing with sexual orientation and suicidal ideation.

Thus, even if depression's rising rates are due to increased awareness of seeking a diagnosis or the increase in incidence, it is clear that this is an important and impactful problem in the

university setting (Cooper et al., 2020). Mental health problems can lead to more serious events, such as suicidal ideation and, later, suicide attempts, a situation that is more evident in sexual minorities, especially females.

Therefore, university policies aimed at promoting and improving the mental health of the entire university community are necessary, especially for homosexual and bisexual women, in order to train professionals who have good mental health and quality of life, besides having good technical and scientific qualification. Moreover, it is crucial to properly welcome sexual minorities to improve their quality of life, as the university should be a reference in the fight against all kinds of violence and discrimination in our society.

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