

Attitude Towards Lgbtiq+ Community and Its Associated Factors Among Undergraduate Students in Dhangadhi Sub-Metropolitan City, Nepal

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Abstract

Introduction: Every person has different attitudes toward other people and their lifestyles, with different levels of acceptance, understanding, and behavior. The LGBTIQ+ community faces a variety of obstacles due to other people's attitudes towards them and the increased incidence of drug misuse, depression, anxiety, and suicidal thoughts and behaviors among adolescents. By finding out the associated factors that influence the attitudes of people, we can change people's views towards LGBTIQ individuals. Everyone should be treated equally, regardless of gender, preference, or sexual orientation.

Objectives: To assess the attitude and associated factors towards the LBGTQI+ community among undergraduate college students in Dhangadhi Sub-Metropolitan City, Nepal.

Methodology: A cross-sectional study was undertaken, with a sample size of 392 undergraduate students. The probability proportionate to size strategy was used to build strata, followed by a simple random sampling procedure to choose the study's sample. Data were collected using a self-administered questionnaire. The acquired data was entered into EPI 3.1 and analyzed with SPSS 25. A p-value <0.05 was judged as statistically significant.

Findings: The study found more than half of respondents (54.6%) expressed negative attitudes toward LGBTIQ+ people, and more than half (55.6%) had insufficient understanding of LGBTIQ+ community members. In contrast, less than half of respondents (44.9%) reported enough interaction with LGBTIQ+ community members. Furthermore, nearly one tenth (9.2%) reported having appropriate social support, and less than two-fifths (39.3%) indicated favorable peer impact. Less than half of the respondents (46.9%) held a positive stereotype about the LGBTIQ+ community. Socio-demographic characteristics such as age ($p = 0.001$), ethnicity ($p = 0.0018$), and educational level ($p = 0.001$) were found to be significantly associated with attitudes towards LGBTIQ+ community members. Socio-demographic characteristics such as religion ($p = 0.001$) and ethnicity ($p = 0.0013$) were found to be significantly associated with level of knowledge towards the LGBTIQ+ community. Knowledge about LGBTIQ+ issues ($p = 0.001$) and interaction with LGBTIQ+ individuals ($p = 0.001$) were found to be significantly associated with attitudes. Peer influence, social support, and stereotypes did not reveal any kind of association.

Conclusion: The survey revealed that over half of respondents held negative attitudes towards the LGBTIQ+ community, with many lacking knowledge and interaction. Socio-demographic characteristics influenced these attitudes, suggesting that enhancing awareness and engagement could promote greater acceptance among undergraduate students in Nepal.

Keywords: LGBTIQ+ community, Attitude, undergraduate students, Discrimination

Abbreviations: IRC: Institutional Review Committee, LGBTIQ+: Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and +, NDHS: Nepal Demographic and Health Survey, SEAR: South East Asian Region, WHO: World Health Organization, SPSS: Statistical Package for Social Science

Introduction:

The increasing prevalence of negative attitudes towards the LGBTIQ+ community represents a significant challenge in modern society, particularly among youth. Globally, the World Health Organization (WHO) has reported alarming trends regarding LGBTIQ+ individuals. A survey indicated that 36% of LGBTIQ+ youth experienced bullying in schools, with higher rates in those countries where acceptance is less. Additionally, 42% of over 16,000 respondents in an international poll reported experiencing harassment or discrimination within educational settings. These figures highlight the widespread effects of discrimination against LGBTIQ+ people, including in settings that should promote growth and acceptance. In Asia and Southeast Asia, beliefs toward LGBTIQ+ people vary greatly. About 66% of respondents in Indonesia and 59% in Malaysia had a negative attitude toward homosexual men and lesbians as neighbors. On the other hand, Thailand and Vietnam have more accepting attitudes. This gap emphasizes the importance of cultural norms, religious beliefs, and personal experiences in shaping society's acceptability [1].

LGBTIQ+ individuals often encounter discrimination and stigma, leading to adverse mental health outcomes such as depression, anxiety, and suicidal ideation. Despite legal advancements in many regions, including Nepal's anti-discrimination laws established in 2015, societal acceptance remains limited.

Materials and Method: This descriptive cross-sectional study was carried out among undergraduate management students of Dhangadhi Sub-Metropolitan City. The sample size was calculated using the z^2 relation pq/d^2 whereas prevalence 5% with the reliability coefficient as 95% and 10% non-response, the total needed sample size was 392. For the sample size, simple random sampling was conducted. Firstly, All three of the public colleges of management faculty running the BBS program were selected in Dhangadhi Sub-metropolitan city. Stratified random sampling, in the second stage, used strata from each college to confirm the representativeness of the survey data. In the third stage, participants were randomly selected using simple random sampling until they reached the required sample size for that stratum.

Pretesting was carried out in a college which had similar characteristics of study population to ensure reliability and validity. Necessary modification was done before data collection.

Data were collected by using a self-administered questionnaire after taking approval from respective colleges. Students aged above 18 and willing to participate in the study were included. The data is verified soon after from students to minimize errors. The information obtained was checked to reduce duplication and entered in EPI Data version 3.1 and transferred to SPSS version 25 for analysis. A descriptive analysis was done to find out frequency and percentage, depending on the nature of variables. The association between dependent and independent variables was obtained by using the chi-square test. The ethical approval was taken from the Institutional Review Committee (IRC: 080/81/345) of Nobel College before the commencement of the study.

3. Result

Table 1: Socio-demographic characteristics of Respondents

Variables	Frequency(n=392)	Percentage (%)
Age Group		
18-25	328	83.7
26-33	64	16.3
Sex		
Male	182	46.4
Female	210	53.6
Religion		
Hindu	317	80.9
Buddhist	50	12.8
Christian	25	6.4
Ethnicity		
Barhman	150	38.3
Chettri	165	42.1
Janjati	67	17.1
Dalit	10	2.6
Marital Status		
Unmarried	352	89.8
Married	40	10.2
Family Type		
Joint	230	58.7
Nuclear	132	33.7
Extended	30	7.7
Educational Level		
1st year	155	39.5
2nd year	139	35.5
3rd year	61	15.6
4th year	37	9.4

Table no. 1 shows the majority of the respondents (83.7%) fall within the age group of 18-25 years and 16.3% were within the age group of 26-33 years. More than half of the respondents were female (53.6%), and 46.4% were male respondents. Eight out of ten (80.9%) respondents follow the Hindu religion, and the remaining were Buddhist (12.8%) and Christian (6.4%). The largest ethnic group among respondents was Chhetri (42.1%), with other significant ethnic groups including Brahman (38.3%), Janjati (17.1%), and Dalit (2.6%). Nine out of ten of the respondents were unmarried (89.8%), while a smaller portion of respondents were married (10.2%). More than half of the respondents lived in a joint family (58.7%); only 33.7% and 7.7% lived in extended and nuclear families, respectively. A significant portion of respondents were 1st-year students (39.5%), and about 35.5%, 15.6%, and 9.4% were 2nd, 3rd, and 4th-year students, respectively.

Table 2 : Attitudes of the respondents towards LGBTIQ+ Community

Variables	Strongly Disagree (n/%)	Disagree (n/%)	Neutral (n/%)	Agree (n/%)	Strongly Agree (n/%)
Homosexuality is immoral	191 (48.7)	163(41.6)	22(5.6)	12(3.1)	4(1.00)
Most homosexual men and women want to be heterosexual	39(9.9)	76(19.4)	108(27.6)	157(40.1)	12(3.1)
Heterosexuals generally have high sex drive than do homosexuals	26(6.6)	107(27.3)	97(24.3)	148(37.8)	14(3.6)
The homosexual population includes a greater proportion of men than of women	40(10.2)	127(32.4)	101(25.8)	113(28.8)	11(2.8)
Homosexuals are usually identifiable by their appearance or mannerism	28(7.1)	76(19.4)	51(13)	218(55.6)	19(4.8)
Homosexuals does not make good role model for children and would do psychological harm to children with whom they interact as well as interfere with the normal sexual development of children	128(32.7)	158(40.3)	50(12.8)	45(11.5)	11(2.87)
Heterosexual men tend to express more hostile attitude towards homosexuality than do heterosexual women	41(10.5)	91(23.2)	112(28.6)	135(34.4)	13(3.3)
Gay man is more likely to be victim of violent crime than the general public	13(3.3)	74(18.9)	84(21.4)	194(49.5)	27(6.9)
If the media portrays homosexuality or lesbianism as positive, this could sway youths into becoming homosexual or desiring homosexuality as a way of life	74(18.9)	205(52.3)	57(14.5)	45(11.5)	11(2.8)

Gay men and lesbian women have an increased incidence of anxiety and depression compared to heterosexual men and women	11(2.8)	55(14)	86(21.9)	200(51)	40(10.2)
The homosexuals usually disclose their sexual identity to friend before their parent	49(12.5)	83(21.2)	58(14.8)	163(41.6)	39(9.9)
The experience of love is similar for all people regardless of sexual orientation	24(6.1)	89(22.7)	56(14.3)	165(42.3)	58(14.8)
LGBTIQ community people shouldn't be treated in same room with other people	94(24)	185(47.2)	20(5.1)	71(18.1)	22(5.6)
LGBTIQ community people get what they deserve	31(7.9)	92(23.5)	54(13.8)	168(42.9)	47(12)
Positive Attitude	178(45.4)				
Negative Attitude	214(54.6)				

The majority of the students strongly disagreed that homosexuality is immoral (48.7%); homosexuals don't make a good role model for children and would do psychological harm to children with whom they interact as well as interfere with the normal sexual development of children (40.3%); LGBTIQ community people shouldn't be treated in the same room with other people (22.7%); and the majority (42.9%) of them agreed that LGBTIQ community people get what they deserve. The majority of study participants agreed that homosexuals are usually identifiable by their appearance or mannerism (40.1%); gay men were more likely to be victims of violent crime than the general public (49.5%).

The scores on the Likert scale were added. A score of less than 34 was considered a negative attitude, and a score of more than or equal to 34 was considered a positive attitude. Therefore, more than half of the respondents, 54.3%, express a negative attitude towards the LGBTIQ+ community, while 45.7% hold a positive attitude.

Table 3 : Knowledge of the respondents towards LGBTIQ+ Community

Variables	Strongly Disagree (n/%)	Disagree (n/%)	Neutral (n/%)	Agree (n/%)	Strongly Agree (n/%)
Homosexuality is a disease	142(36.2)	172(43.9)	37(9.4)	38(9.7)	3(0.8)

Homosexual person's identity does agree with his/her biological sex	40(10.2)	84(21.4)	72(18.4)	182(46.4)	14(3.6)
In the world as a whole, the most common mode of transmission of HIV virus is through gay male sex	56(14.3)	145(37)	71(18.1)	107(27.43)	13(3.3)
Sexual orientation is usually well established by adolescent	18(4.6)	87(22.2)	69(17.6)	196(50)	22(5.6)
Boys breast typically grows during puberty	7(1.8)	81(20.7)	89(22.7)	187(48.7)	28(7.1)
Testosterone is the hormone responsible for the growth of pubic hair on girls	24(6.1)	90(23)	125(31.9)	141(36)	12(3.1)
Sex education offered in schools increase the amount of sexual activity among adolescents	20(5.1)	122(31.1)	56(14.3)	143(36.5)	51(13)
In the last 25 years there has been increase in homosexuality	17(4.3)	86(21.9)	64(16.3)	200(51)	25(6.4)
Adequate Knowledge	174(44.4)				
Inadequate Knowledge	218(55.6)				

The majority of students agreed that homosexuality is a disease (43.9%), the most common mode of transmission of the HIV virus is through gay male sex (37%), and the majority of students agreed that sex education offered in schools increases the amount of sexual activity among adolescents (36.5%).

Likewise, a score of less than 18 was considered as inadequate knowledge, and a score of more than or equal to 18 was considered as adequate knowledge. Hence, 44.4% had adequate knowledge about homosexuality, and 55.6% had inadequate knowledge.

Table 4 Interaction with LGBTIQ+ Community

Variables	Strongly Disagree (n/%)	Disagree (n/%)	Neutral (n/%)	Agree (n/%)	Strongly Agree (n/%)
I have friends and family member who are open towards LGBTIQ+ Community people	13(3.3)	65(16.6)	82(20.9)	215(54.8)	17(4.3)
I have frequently interact with people who identify as	23(5.9)	101(25.8)	51(13)	189(48.2)	28(7.1)

LGBTQI+ Community people					
My interaction with LGBTQI+ Community people occur mainly in social media	19(4.8)	98(25)	65(16.6)	199(50.8)	11(2.8)
I have witnessed discrimination/social stigma behaviors towards LGBTQI+ Community people	13(3.3)	60(15.3)	41(10.5)	239(61)	39(9.9)
I feel comfortable intervening when I witnessed discrimination against LGBTQI+ people	43(11)	215(54.8)	41(10.5)	71(18.1)	22(5.6)
My interaction with LGBTQI+ people are generally positive	8(2)	32(8.2)	44(11.2)	242(61.1)	66(16.8)
Adequate Interaction	176(44.9)				
Inadequate Interaction	216(55.1)				

More than six out of ten students agreed that they had witnessed discrimination/social stigma behaviors towards LGBTQI+ community people (61%), and more than half (54.8%) of students disagreed that they felt comfortable intervening when they witnessed discrimination against LGBTQI+ people.

Likewise, a score of less than 16 was considered as inadequate interaction, and a score of more than or equal to 16 was considered as adequate interaction. Hence, 44.9% had adequate interaction with LGBTQI+ community people, and 55.1% had inadequate interaction.

Table 5 : Social support towards LGBTQI+ community

Variables	Strongly Disagree (n/%)	Disagree (n/%)	Neutral (n/%)	Agree (n/%)	Strongly Agree (n/%)
My friends provide me with emotional support when I talk to them about LGBTQI+ issues	6(1.5)	44(11.2)	59(15.1)	259(66.1)	24(6.1)
My Community encourages me to participate in LGBTQI+ advocacy initiatives	14(3.6)	66(16.8)	65(16.6)	228(58.2)	19(4.8)
In my social network, I have no trouble friendly support and knowledge	5(1.3)	40(10.2)	65(16.6)	264(66.67)	22(5.67)

about LGBTQI+ community people					
Educators are responsive and open when talking about LGBTQI+ issues in the classroom	11(2.8)	28(7.1)	39(9.9)	288(73.5)	26(6.6)
The people in my religious group are supportive of the right of LGBTQI+ people	22(5.6)	49(12.5)	51(13)	258(65.8)	12(3.1)
It is my belief that my desire to publicly advocate LGBTQI+ right is influenced by the social support receive	9(2.3)	43(11)	55(14)	265(67.6)	20(5.1)
Adequate Social Support	36(9.2)				
Inadequate Social Support	356(90.8)				

The majority of students agreed that their friends provide them with emotional support when They talk to them about LGBTQI+ issues (66.1%). More than six out of ten The majority (67.6%) of students agree that it is Their belief that Their desire to publicly advocate for LGBTQI+ rights is influenced by the social support they receive.

Likewise, a score of less than 18 was considered inadequate social support, and a score of more than or equal to 18 was considered adequate social support. Hence, only 9.2% had adequate social support with LBTIQ+ community people, and 90.8% had inadequate social support..

Table 6 : Peer Influence of respondents towards LGBTIQ+ Community

Variables	Strongly Disagree (n/%)	Disagree (n/%)	Neutral (n/%)	Agree (n/%)	Strongly Agree (n/%)
Most of my peer Speak positively about LGBTQI+ people	6(2)	48(12.2)	30(7.7)	274(69.9)	32(8.2)
Most of my peer Speak positively about LGBTQI+ people	9(2.3)	37(9.4)	71(18.1)	233(59.4)	42(10.7)
I avoid expressing strong support for LGBTQI+ people around my friends	30(7.7)	69(17.6)	52(13.3)	219(55.9)	22(5.6)
My friends often share information or news related to LGBTQI+ issues with me	19(4.8)	70(17.9)	46(11.7)	230(58.7)	27(6.9)

If my views LGBTQI+ people is different from those my friends I feel uncomfortable to discuss	10(2.6)	83(21.2)	56(14.3)	216(55.1)	27(6.9)
In my friends groups, everyone respect different opinion about LGBTQI+ Community people	6(1.5)	43(11)	44(11.2)	261(66.6)	38(9.7)
Positive Peer Influence	154(39.3)				
Negative Peer Influence	238(60.7)				

The majority of students agreed that they avoid expressing strong support for LGBTQI+ people around their friends (55.9%); the majority (55.1%) of students agree that if their views on LGBTQI+ people are different from those of their friends, they feel uncomfortable discussing them.

Likewise, a score of less than 17 was considered as positive peer influence, and a score of more than or equal to 17 was considered as negative peer influence. Hence, 39.3% had positive peer influence, and 60.7% had negative peer influence.

Table 7 : Stereotype about LGBTIQ+ Community

Variables	Strongly Disagree (n/%)	Disagree (n/%)	Neutral (n/%)	Agree (n/%)	Strongly Agree (n/%)
Many lesbians are associated with having short hair, wearing baggy clothes and playing sports	27(6.9)	123(31.4)	53(13.4)	185(47.2)	4(1)
Many lesbians dress in more masculine manner than other women	24(6.1)	105(26.8)	61(15.6)	186(47.4)	16(4.1)
Gay’s men are associated with feminine speaking tones	17(4.3)	112(28.6)	89(22.7)	172(43.9)	2(0.50)
Homosexuals are more exposed to unprotected sex	25(6.4)	97(24.7)	82(20.9)	172(43.9)	16(4.1)
Gay men are more likely to use alcohol and illicit drugs than heterosexual men	47(12)	104(26.5)	70(17.9)	166(42.3)	5(1.30)
Most of the time Gay men are consider as sexual pedophiles (disorder)	29(7.4)	120(30.6)	92(23.5)	132(33.7)	19(4.8)
Bisexual people are often seen as being in a transitory or experimental phase	21(5.4)	101(25.50)	99(25)	166(41.90)	9(2.30)

between heterosexual and homosexual					
Bisexual people are incapable of having steady or long-term relations	31(7.9)	122(31.1)	66(16.8)	163(41.6)	10(2.6)
Bisexual people are most likely to transmit STDs	23(5.9)	113(28.8)	69(17.6)	171(43.6)	16(4.1)
Most of the Transgender are engaged in prostitution	32(8.2)	122(31.1)	65(16.6)	160(40.8)	13(3.3)
Intersex is just another word for Transgender	27(6.9)	102(26)	83(21.1)	168(42.9)	12(3.1)
To some extend members of LGBTIQ community are trying to convert others	40(10.1)	128(32.7)	68(17.3)	168(42.70)	12(3.1)
Being Trans means having surgery	27(6.9)	114(29.1)	65(16.6)	171(43.6)	15(3.8)
Gay people more likely working in arts and media	17(4.30)	98(25)	72(18.4)	190(48.5)	15(3.8)
LGBTIQ community people are mostly abandoned by their families	10(2.6)	27(6.80)	37(9.30)	261(66.6)	57(14.5)
Positive Stereotype	184(46.9)				
Negative Stereotype	208(53.1)				

The majority of students agreed that lesbians dress in a more masculine manner than other women (47.4%), gay men are associated with feminine speaking tones (43.9%), homosexuals are more exposed to unprotected sex (38.1%), bisexual people are often seen as being in a transitory or experimental phase between heterosexual and homosexual (41.90%), LGBTIQ community members are mostly abandoned by their families (66.6%), and (40.8%) agreed that most transgenders are engaged in prostitution. Likewise, a score of less than 16 was considered a positive stereotype, and a score of more than or equal to 16 was considered a negative stereotype. Hence, 46.9% had positive stereotypes, and 60.7% had negative stereotypes.

Table 8 Association between socio-demographic characteristic and attitude towards LGBTIQ+

Variable	Attitude towards LGBTIQ+		Chi-Square	p-value
	Positive Attitude (n/%)	Negative Attitude (n/%)		
Age				
18-25	128(71.9)	198(92.5)	28.554	0.001*
26-33	49(27.5)	16(7.5)		
Sex				
Male	85(47.8)	98(45.8)	0.150	0.699
Female	93(52.2)	116(54.2)		

Religion				
Hindhu	135(75.8)	181(84.6)	4.766	0.092
Buddhist	28(15.7)	22(10.5)		
Christian	15(8.4)	11(5.1)		
Ethnicity				
Barhman	57(32)	94(44.1)	9.959	0.022*
Chettri	80(44.9)	80(37)		
Janjati	33(18.5)	33(15.5)		
Dalit	8(4.5)	6(3.4)		
Marital Status				
Married	17(9.6)	22(10.3)	0.058	0.810
Unmarried	161(90.4)	192(89.7)		
Family Type				
Joint	101(56.7)	131(61.2)	1.172	0.557
Nuclear	67(36)	67(31.3)		
Extended	16(7.3)	16(7.5)		
Education Level				
1st Year	48(27)	106(83.8)	49.140	0.001*
2nd Year	61(34.3)	77(36)		
3rd Year	33(18.5)	28(13.1)		
4th Year	36(20.2)	3(1.4)		

Findings shows that age, ethnicity, and level of education were statistically significant with the attitude of students towards LGBTIQ individuals ($p < 0.05$), whereas family type, religion, marital status, and sex showed no significant association with the attitude of students towards LGBTIQ individuals.

Table 9: Association between socio-demographic characteristic and knowledge towards LGBTIQ+ Community

Items	Knowledge		Chi-Square	p-value
	Adequate Knowledge (n/%)	Inadequate Knowledge (n/%)		
Age				
18-25	141(81)	186(85.3)	1.28	0.257
26-33	33(19)	32(14.7)		
Sex				
Male	76(43.7)	107(49.1)	1.318	0.251
Female	98(56.3)	111(50.9)		
Religion				
Hindhu	148(85.1)	168(77.1)	13.263	0.001*
Buddhist	11(6.3)	39(17.9)		
Christian	15(8.6)	11(5)		
Ethnicity				

Brahman	75(42.6)	70(29.9)	12.608	0.013*
Chettri	62(35.2)	105(49.7)		
Janjati	31(17.6)	36(16.2)		
Dalit	8(4.5)	8(4.2)		
Marital Status				
Married	21(11.9)	19(8.6)	1.169	0.28
Unmarried	155(88.1)	201(91.4)		
Family Type				
Joint	111(63.1)	122(55.5)	2.518	0.284
Nuclear	52(29.5)	81(36.8)		
Extended	13(7.4)	17(7.7)		
Education Level				
1st Year	61(68.9)	94(86.1)	5.069	0.167
2nd Year	63(35.8)	76(34.5)		
3rd Year	29(16.5)	34(15.5)		
4th Year	23(13.1)	16(7.3)		

Table 9 shows that ethnicity and religion were statistically significant with the attitude of students towards LGBTIQ individuals ($p < 0.05$), whereas family type, age, level of education, marital status, and sex showed no significant association with the attitude of students towards LGBTIQ individuals.

Table 10 Association between Attitudes and knowledge towards LGBTIQ+ community

Items	Attitude		Chi-Square	p-value
	Positive Attitude (n/%)	Negative Attitude (n/%)		
Knowledge				
Adequate Knowledge	107(57.3)	72(33.6)	22.014	0.001*
Inadequate Knowledge	76(42.7)	142(66.4)		

Finding demonstrates a significant association between knowledge and attitudes regarding the LGBTIQ+ population ($p = 0.001$).

Table 11 Association between attitude and interaction towards LGBTIQ+ community

Items	Attitude		Chi-Square	p-value
	Positive Attitude (n/%)	Negative Attitude (n/%)		
Interaction with LGBTIQ+				

Adequate Interaction	98(55.1)	78(36.4)	13.600	0.001*
Inadequate Interaction	80(44.9)	136(63.6)		

Finding demonstrates a significant association between interaction with LGBTIQ+ and attitudes regarding the LGBTIQ+ population (p =0.001).

4. Discussion

Attitude towards LGBTIQ+ Community:-

More than half of the respondents (54.1%) had a negative attitude toward LGBTIQ+, which aligned (55.7%) with the study conducted in Indonesia in the year 2018 and contradicts a cross-sectional study conducted by Sabita Dangi et al, who found that only 12.8% of respondents had a negative attitude. This might be due to the different educational backgrounds of the respondents[2],[3].

This study found a significant association (p=0.001) between attitude and education level, which is identical to the study conducted by Judith B. Cornelius and Jennifer Carrick's in the year 2015(p < 0.01) [4].

In this study about 40.6% of respondents agreed with the statement that most homosexual men and women want to be heterosexual which aligned (43%) with the study in Indonesia in 2018[2].

In this study, approximately 32% of respondents strongly disagree that homosexuals do not make good role models for children and would do psychological harm to children with whom they interact as well as interfere with the normal sexual development of children. This finding lines up with a study by Sabita Dangi et al. (36.1%)[3].

Females (52.2%)showed a more positive attitude toward LGBTIQ+ people than males(47.8%), which aligns with a descriptive study undertaken by Prekshya Shakya Kabita Raj Kadel and Also another multicenter, cross-sectional study conducted between May 2015 to January 2016, using a data collection tool composed of three validated questionnaires and a socio-demographic form of Carlo Della Pelle et al shows similar findings(p < .001)[5], [6].

Ethnicity reveals an association with attitude toward LGBTIQ+(p=0.019), which is comparable to the study conducted by Sabita Dangi et al(p=0.001)[3].

This study shows that there is association between Knowledge and attitudes towards LGBTIQ+ community (p- value = 0.001) and (chi-square value=22.034) which contradict with the study conducted Philippine state university in 2023 by no correlation (Spearman rank r = 0.094, p = 0.081) between nursing students' knowledge and attitude about LGBTIQ+[7].

Knowledge of respondents towards LGBTIQ+ Community:-

This study showed that 55.6% of students had inadequate knowledge on LGBTIQ+, similar to a cross-sectional study conducted by Sabita Dangi et al (43.5%). Similarly, it also aligned with a study that Italian nurses had low knowledge of homosexuality, scoring 12.97 (±3.01) on the Understanding about Homosexuality Questionnaire. Similarly, a 2023 study conducted at a Philippine public university revealed 55.4% [3],[6],[7].

About 36.55% respondents strongly disagree that homosexuality is an illness which is aligned (55.6%) to the results seen in a study conducted in Kolkata in 2018 and Gujarat in 2015[8],[9].

Females (56.3%) showed adequate knowledge towards LGBTIQ+ Community than males (43.8%) . which is similar to the study was conducted between May 2015 to January 2016 which showed that Greater knowledge was associated with the female gender ($p = .042$)[6].

Religion and ethnicity showed an association with the level of knowledge of the LGBTIQ+ community since (p -value 0.013) and (p -value=0.01) which is aligned with the cross-sectional study of Sabita Dangi et al[3].

In the world as a whole, the most common mode of transmission of HIV virus is through gay male sex in this statement about 27 % of respondents agreed, which is aligned with the study of Indonesia in 2018[2].

Stereotype towards LGBTIQ+ Community:-

This research showed a positive stereotype of the LGBTIQ+ group was 46.9% which is quite similar to the study of Sabita Dangi et al (50.4%). And about 46.7% of respondents agreed that many lesbians dress in more masculine manner than other women which is quite similar to cross-sectional study of sabita dangi et al (39.5%)[3].

A study conducted in Kolkata in 2018 showed 70.8% agreed that homosexuals were capable of forming stable relationships which is similar to our study 31.1%[9].

Others Variables (interaction, social support and peer influence)

The limited social support and peer influence reported in this study (only 8.9% had sufficient social support) suggest that fostering supportive environments is crucial, which, aligned with research, indicates that positive peer relationships can significantly impact attitudes towards marginalized groups[10].

5. Limitation of the study

Study was limited to undergraduate students studying in government college .The research was done in Dhangadhi, which may have different social dynamics compared to other regions in Nepal.Discussing LGBTIQ+ (sensitive) issues can make some participants uncomfortable, possibly affecting how they answered questions.

6. Conclusion

More than half the respondent held negative attitude towards LGBTIQ+ Community and majority of respondent had inadequate knowledge. Less than half of the respondents reported having adequate interaction with LGBTIQ+ individuals. Nearly up to 10th only respondents received adequate social support, whereas about nine in eleven experienced inadequate social support. More than half of the respondent got negative peer influence. Socio-demographic factors like age, ethnicity, and education level were significantly associated with attitudes. Knowledge and interaction were also found to be significantly associated with attitudes

By addressing these factors, it may be possible to promote greater acceptance and inclusivity towards the LGBTIQ+ community among undergraduate students in Nepal.

Bibliography

1. “Manalastas_Et_Al_2017_Homonegativity_Se_Asia.Pdf.”
2. A. Universitas Negeri Padjadjaran. Fakultas Kedokteran, R. Wisaksana, and E. Rohmawaty, “Althea Medical Journal.,” *Althea Med. Univ. Negeri Padjadjaran. Fak. Kedokt. A, Wisaksana R, Rohmawaty E. Althea Med. Journal. [Internet]. Althea Med. Journal. 2018 [cited 2019 May 5]. 179–186 p. Available from <http://journal.fk.unpad.ac.id/index.php/amj/articl>, vol. 5, no. 4, pp. 179–186, 2018,*

- [Online]. Available: <http://journal.fk.unpad.ac.id/index.php/amj/article/view/1519/1245>
3. S. Dangi, A. Bist, and A. Acharya, "Attitude of Nursing Students towards LGBTIQ Individual and its Associated Factors in Kathmandu Metropolitan City," *J. Public Heal. Int.*, vol. 6, no. 3, pp. 17–28, 2023, doi: 10.14302/issn.2641-4538.jphi-23-4412.
 4. J. B. Cornelius and J. Carrick, "A survey of nursing students' knowledge of and attitudes toward LGBT health care concerns," *Nurs. Educ. Perspect.*, vol. 36, no. 3, pp. 176–178, 2015, doi: 10.5480/13-1223.
 5. TESE, "No Title العربية اللغة العربية," *Экономика Региона*, no. May 2014, p. 32, 2012.
 6. C. Della Pelle, F. Cerratti, P. Di Giovanni, F. Cipollone, and G. Cicolini, "Attitudes Towards and Knowledge About Lesbian, Gay, Bisexual, and Transgender Patients Among Italian Nurses: An Observational Study," *J. Nurs. Scholarsh.*, vol. 50, no. 4, pp. 367–374, 2018, doi: 10.1111/jnu.12388.
 7. R. M. F. Oducado, "Knowledge and attitude towards lesbian, gay, bisexual, and transgender healthcare concerns: A cross-sectional survey among undergraduate nursing students in a Philippine state university," *Belitung Nurs. J.*, vol. 9, no. 5, pp. 498–504, 2023, doi: 10.33546/bnj.2887.
 8. G. Banwari, K. Mistry, A. Soni, N. Parikh, and H. Gandhi, "Medical students and interns' knowledge about and attitude towards homosexuality," *J. Postgrad. Med.*, vol. 61, no. 2, 2015, [Online]. Available: https://journals.lww.com/jopm/fulltext/2015/61020/medical_students_and_interns__knowledge_about_and.7.aspx
 9. A. Kar, S. Mukherjee, A. Ventriglio, and D. Bhugra, "Attitude of Indian medical students towards homosexuality," *East Asian Arch. Psychiatry*, vol. 28, no. 2, pp. 59–63, Jun. 2018, [Online]. Available: <https://search.informit.org/doi/10.3316/informit.707840703163222>
 10. P. Subedi and A. Jha, "Status of Healthcare in LGBTQI+ Community in Nepal: Challenges and Possibilities," *J. Nepal Med. Assoc.*, vol. 61, no. 257, pp. 95–97, 2023, doi: 10.31729/jnma.7948.