

COVID-19: impacts for LGBTIQ communities and implications for services

A Research Briefing Paper by
Rainbow Health Victoria

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Gay and bisexual men have higher prevalence rates for HIV, but there is no evidence that people

Beyond the immediate impact on health, the social and economic consequences of COVID-19 are far-reaching and leave no one untouched. Media commentary and policy responses have so far focussed on the mental health impacts of social distancing and concerns about an increase in family violence – issues which affect all communities, but perhaps some more so than others.

In this briefing paper, we aim to summarise current research knowledge that may be relevant to understanding how COVID-19 might impact on lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) health and wellbeing. The key issues presented here are relevant for all those commissioning, coordinating or delivering health or community services in the current context.

Are LGBTIQ communities 'at risk'?

Health status

What we know about COVID-19 is that older people and those with underlying health conditions are at a greater risk of poor outcomes.

People from LGBTIQ communities generally report a lower rating of self-perceived health than the general population¹, and are known to have health disparities that might influence disease outcomes. These include a greater risk for certain cancers, asthma, obesity and cardiovascular disease^{2,3,4}. Smoking also appears to be a significant risk factor for COVID-19 (given the higher risk for lung and chest infections in general), and some sections of LGBTIQ communities have higher smoking rates than the general population. This is especially the case for lesbian and bisexual women⁵.

living with HIV who are on treatment and have an undetectable viral load are at any greater risk at this stage. This does make it even more important to promote testing and early access to treatment for those undiagnosed, and continuing access to HIV treatment and care.

As data collection at health service level and coronial reporting does not capture LGBTIQ identities, it will be very hard to assess the health impacts on LGBTIQ communities in the short term. This is a major issue.

Mental health

Mental health is a concern across the community, both in terms of anxiety about the disease itself and the impact of social distancing.

There is a significant body of evidence, in Australia and internationally, to suggest that LGBTIQ people experience anxiety and depression at higher rates than their heterosexual peers and are at greater risk of suicide and self-harm^{6,7,8}.

Young people, bisexual people, and trans and gender diverse people are at an even higher risk^{9,10,11,12}.

Some studies have found significant levels of self-harm and suicidality among people born with variations in sex characteristics. Participants identified unnecessary medical interventions and other people's attitudes as drivers of reduced mental health and wellbeing, rather than the intersex variation itself¹³.

Connection to community and peer support have been found to have an important protective effect for LGBTIQ people^{14,15}. These will be disrupted with community venues closed and face-to-face interaction severely limited.

Family violence

Concerns have been raised by the family violence sector about an increase in intimate partner and family violence for women and their children, and an increase in the severity and intensity of violence and abuse. This is compounded by reduced access to services and support when isolated at home.

LGBTIQ people have largely been absent from this discussion, despite the very real possibility that their experiences may also deteriorate in the current climate. Overall, long periods of time spent at home can put pressure on relationships and immediate families. LGBTIQ people will be impacted like everyone else, but also have some unique vulnerabilities.

Intimate partner violence

Intimate partner violence is reported at similar rates in same gender relationships to heterosexual relationships^{16,17,18,19,20}. Some studies have found even higher rates, particularly for bisexual women and trans and gender diverse people^{21,22,23,24}. Unfortunately, there is little research that examines the experiences of intersex people²⁵.

Family of origin violence

Many LGBTIQ people, particularly young people living at home, hide their identities from their 'families of origin' out of fear and shame. In 'coming out' within families, LGBTIQ people can be subject to rejection, abuse and violence^{26,27,28}. Intersex people also report family rejection and abuse, especially when they identify in ways other than their birth-assigned gender²⁵.

Experiences of rejection are linked to significant negative mental health impacts. By contrast, family acceptance has been shown to have a significant positive impact on mental health and wellbeing for young people^{29,30,31,32}.

In the context of COVID-19, LGBTIQ people may be separated from friends and 'families of choice' not in their household. These connections have been shown to be important protective factors for health and wellbeing^{12,33}.

Harassment and violence

LGBTQ people generally report high levels of harassment, verbal and physical abuse, violence and sexual assault. This occurs in public and in all areas of their lives^{33,34,35}. It is unclear whether these experiences will worsen in times of widespread social stress.

LGBTIQ communities have also historically experienced criminalisation and negative relationships with police³⁶, so some aspects of the enforcement of social distancing may be distressing and difficult.

Drug and alcohol use

There is strong evidence to suggest that many LGBTIQ people use alcohol and illicit drugs more commonly than the general population^{37,38}. In the current context, there may be an increase in individuals struggling to manage their use of alcohol or drugs to the point where this has a negative impact on their lives. During a period of social distancing, individuals may also have less access to resources or support networks to help them manage their alcohol or drug use more safely.

Homelessness and economic disadvantage

Growing evidence suggests that a higher proportion of LGBTIQ people have experienced homelessness than the general population³⁹. Discrimination can also lead to lower incomes and higher unemployment, particularly for trans and gender diverse people^{40,41}. It is unclear how COVID-19 will impact already marginalised populations in relation to security of housing and income.

Why does this happen?

In Australia, legal recognition and protections for LGBTIQ people have improved significantly in the last decade, although important gaps remain for trans and gender diverse people, and people with intersex variations.

However, LGBTIQ people still regularly experience inequality and devaluing of their identities and relationships. Experiences of homophobia, biphobia and transphobia are undoubtedly associated with poorer health, and the other economic and social disparities described here.

Implications for services

Australian and international studies show that LGBTIQ people under-utilise health services and delay seeking treatment due to actual or anticipated experiences of stigma and discrimination from service providers^{34,42,43}. Trans and gender diverse young people, in particular, report encountering inexperienced or transphobic service providers, and long waiting lists to see 'trans-friendly' providers. Feeling isolated from services has been found to have a significant negative impact on mental health¹². These issues may be heightened right now due to stress and social distancing.

A major barrier for LGBTQ people seeking mental health care has been found to be the lack of an affirmative provider^{6,43}. This means feeling safe and supported by staff and other clients, but also being valued and affirmed as LGBT by the service⁴². It is crucial that health and community services are affirming of sexuality and gender identity, and attentive to the particular pressures experienced by LGBTIQ people.

Community and advocacy organisations in Australia have voiced concern that trans and gender diverse people may be reluctant to access medical support for COVID-19 due to a fear of discrimination or feeling unsafe in shared care spaces. This may be particularly acute if hospitalisation is required and the ability to advocate for oneself, or to have someone else present to do so, may be greatly diminished.

All of these issues may be further compounded when considering other identities and experiences

that intersect with being LGBTIQ. For example, LGBTIQ people who experience disabilities may be especially affected in the context of COVID-19, especially in terms of accessing safe and affirming social care.

What can be done?

There is an urgent need to secure and enhance LGBTIQ community-controlled health and community services to meet heightened needs. The role of these trusted and skilled services in the context of COVID-19 is more important than ever. There is also an expanded role for these organisations in fostering connection and community to build individual and collective resilience.

In addition, a focus on LGBTIQ inclusion in mainstream service delivery and initiatives is also required. The scale of anticipated need, and the limited availability of community-controlled services, means that LGBTIQ people require access to mainstream services that are LGBTIQ-inclusive. Many services across the country have taken profound steps in organisational change to enable culturally safe service delivery, including 40 organisations that have now received the Rainbow Tick. These services, and others with a commitment to work towards the Rainbow Tick, should be encouraged to expand their role in service provision for LGBTIQ communities.

Rainbow Health Victoria recommends that all those commissioning, coordinating or delivering health and community services do the following:

- Acknowledge the potential for COVID-19 to have a disproportionate impact on the health, mental health and wellbeing of LGBTIQ communities
- Promote and enhance LGBTIQ community-controlled and LGBTIQ-inclusive service delivery
- Develop messages about community resilience and increase initiatives to provide community support through adaptive means
- Share experience and knowledge in order to develop understanding of the impacts on LGBTIQ communities in real time and effective ways to respond rapidly through research, policy, resources and programs.

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About Rainbow Health Victoria

Rainbow Health Victoria is a program that supports lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) health and wellbeing through research and knowledge translation, training, resources, policy advice and service accreditation through the Rainbow Tick. We are located at the Australian Research Centre in Sex, Health and Society at La Trobe University, and are funded by the Victoria Government.

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