



COVID-19 Survivor Impact Briefs

LGBTQ+

The National Resource Center for Reaching Victims conducted a series of listening sessions to unearth the impact the COVID-19 health crisis is having on underserved victims of crime and better resource the crime victim services field to respond to those needs.

This brief summarizes the issues and strategies that emerged from listening sessions on LGBTQ+ survivors.

Introduction

LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, and/or Queer) communities and the victim service providers who offer opportunities for healing, support and justice to them, have been deeply impacted by the COVID-19 pandemic. LGBTQ+ survivors have historically faced barriers to services due to systemic homophobia, biphobia, transphobia; federal, state, and local laws and policies that deny or limit access to services; and/or pervasive fears of mistreatment from prior negative experiences. LGBTQ+ communities also experience higher health disparities than some other population groups, placing them at higher risk of contracting COVID-19 or successfully combatting the illness if infected. The intersections of barriers, health disparities, survivorship and many other factors, and COVID-19 create new challenges and opportunities for victim service providers to continue to improve services in new and innovative ways. This brief explores some of those needs and creative solutions shared during listening sessions, strategy sessions, and conversations with survivors.

Unique Impacts

Positive Ramifications of "Safer at Home" for Some LGBTQ+ Individuals

- LGBTQ+ youth may actually be experiencing less victimization while sheltering in place and not at school or extracurricular activities with their peers. Many LGBTQ+ youth do live in affirming households, where they may be receiving more acceptance and celebration of who they are, than when they were at school surrounded by micro-aggressions, systemic discrimination, and anti-LGBTQ bullying, physical and verbal violence, and sexual assault.
- Similarly, many LGBTQ+ adults may be experiencing less stalking and harassment on the streets (for example "walking while trans" or the impact of stop and frisk laws); workplace harassment, discrimination, physical or verbal violence; or micro-aggressions with co-workers, supervisors, or interactions on the way to and from the workplace.
- LGBTQ+ seniors are not reporting a dramatic shift in their levels of isolation (which were already high prior to COVID-19). While this may not be considered a "positive," it may not be an additional layer of challenge on top of the existing difficulties of isolation.

The Impact of COVID-19 May Increase Barriers and Fears

- LGBTQ+ communities/survivors often live with high levels of fear, anxiety, depression, and post-traumatic stress disorder. During the COVID-19 pandemic, these emotional realities are heightened for most survivors. The uncertainty of how the virus is transmitted, the health implications (and possible need of getting health care), as well as the economic impact, is increasing the existing mental health realities for many LGBTQ+ survivors.
- Many LGBTQ+ people have experienced barriers and negative interactions with healthcare providers in the past. Many LGBTQ+ survivors may have additional layers of past negative experiences with healthcare providers specifically related to their victimization. These prior experiences may influence care-seeking, which may have dire results. Similarly, many survivors fear the loss of control in any setting. The possibility of seeking emergency care, which may escalate to needing to be placed on a ventilator or be hospitalized without their support team, may feel too overwhelming, resulting in survivors not seeking medical care at all.

LGBTQ+ Specific Medical Concerns and Interruptions in Medical and Mental Health Care

- For those LGBTQ+ individuals who do require hospitalization for COVID-19, many are expressing fears that they will be de-prioritized if there are too many patients for the available ventilators. Those who live at the intersections of multiple identities are experiencing deep fears of others being selected over them for access to ventilators and other urgent care. This is particularly true for those who are LGBTQ+ and living with disabilities, undocumented, older, visibly queer or trans, low income or without insurance.
- LGBTQ+ survivors who are Deaf or Hard of Hearing rely heavily on seeing peoples' faces and lips, which will be impossible during this time when medical and non-medical individuals are wearing face masks. Individuals who need interpreters, have service or support animals, or rely heavily on support people, may not have access to those key people/animals while service systems are not allowing "visitors" to be present during in-person interactions.
- While not directly crime-centered, many trans people are not able to access trans-related medical services, including routine office visits to maintain hormone prescriptions and lab tests. All "elective" surgeries have been canceled, which has resulted in all trans-related surgeries being canceled or postponed. Many trans people wait literally over a year for surgery dates. For many, surgery – specifically top surgery – relates to physical safety.
- Similarly, many trans and LGBTQ+ individuals are having other medical care impacted. For example, many are unable to maintain regular appointments with their health care provider for the continuation of hormones, PrEP, or other medications. For many, lack of consistent access to hormones or PrEP can be both emotionally devastating (and increase PTSD and other symptoms related to prior victimization), as well as can literally put their health in danger (especially for those who are continuing to survive in the street economy or who are living with an abusive partner – resulting in ongoing sexual contact with others).

Historical Resonance to the AIDS Epidemic

- Many individuals who lived through the height of the AIDS epidemic in the '80s and '90s are re-experiencing the horror of losing their friends, being concerned about illness for themselves and for their loved ones, and knowing that if they or their loved ones are hospitalized they will not be able to visit or be with the people they care about. Coupled with concerns about how health care and systems will treat them as LGBTQ+ people, the reminders and traumatic memories of the AIDS crisis is resonating for many. For survivors of violence, the comingling of these traumatic resonances of the AIDS crisis can elevate trauma symptoms related to their victimization.

Housing Challenges are Heightened for LGBTQ+ Survivors During COVID-19 Pandemic

- Shelters have been extremely taxed during this time. Throughout the country, different shelters have changed their policies related to admission of new clients/survivors into their residential settings. Some have been working to try to find more permanent re-housing options or shelter that is not communal. For LGBTQ+ individuals, there are additional layers of complications with shelter, since many LGBTQ+ people have historically had substantial challenges in admission to shelters in the best of times. A large number of shelters continue to prioritize individuals with children or those who identify as female (and often those who are cisgender vs. those who are trans).
- For homeless LGBTQ+ youth, many continue to live on the streets and/or in transient forms of housing – shuffling from one home/shelter/hostel to another. This is increasing their (and others,) exposure to COVID-19, as well as causing additional stress and strain to youth who have already experienced victimization which led them to their place of housing (and food) insecurity. [Note: 40% of homeless youth are LGBTQ+.]

Access to Public Benefits May Not be Equal for LGBTQ+ Survivors

- Similar to LGBTQ+ youth who are homeless are the substantial portion of trans people who have not held jobs that result in their ability to file taxes and/or receive public benefits or stimulus checks. Many may be undocumented, work in the street economy, work for payment "under the table," and/or work under more than one name. For this population, who have often had multiple prior victimizations – but strong survival skills/strategies – they may continue to work in ways that impact their mental and physical health. (For example, continuing work in the street economy, which may increase their risk of physical violence and sexual assault, as well as exposure to COVID-19.)

Fewer LGBTQ+ Survivors are Seeking or Receiving Services, Coupled with Decreased Safety of Services

- Victim service providers who focus on LGBTQ+ populations (or mainstream organizations who have an LGBTQ+ active presence) have noted they have experienced a LOWER call/contact rate than prior to COVID-19. The presumption is that many survivors of Intimate Partner Violence (IPV) are living with their abuser and are not able to call or contact without their abuser's knowledge. Most are concerned about the deep and potentially deadly impact of LGBTQ+ survivors living with their abusive partner or family member (or other individuals they are living with).
- Many victim service providers that have shifted their services to online are either 1) using online portals that have lower technology safety or 2) requiring survivors to access services through pre-registering or using passcodes. While there is always a balance between providing highly secure services that are mindful of victim safety, the barriers that some providers are placing on LGBTQ+ survivors is discouraging care seeking.

Providers are Losing Opportunities for Continuing Education

- Many victim service providers – especially mental health, social workers, legal staff – are having difficulty fulfilling their CEU (Continuing Education Unit) requirements due to training event cancellations. The conversion of in-person events to online has not always resulted in CEUs being offered through online trainings.

Promising Strategies

LGBTQ+ Communities Have a History of Relying on Each Other

- Mutual aid projects focusing on LGBTQ+ populations have emerged to support community members during this time. Many are grassroots-led, as well as many initiated by faith communities.
- In addition to the emergence of mutual aid initiatives, LGBTQ+ people who have circles of family-of-choice may have multiple people they can depend on – for support with grocery delivery, emotional support, and help with any technology challenges they might be experiencing.
- LGBTQ+ survivors who have previously developed safety plans can often use those skills and plans during this new time of crisis. For many, their safety plans include relying on the non-abusive people in their lives who are steady and supportive.

Online Services Offer More Support Options

- Although many victim service providers are overwhelmed with the changes and requests for services/support, the use of video conferencing has allowed survivors and providers to create a unique bond that perhaps had not been possible in face-to-face advocacy/services. In some ways, virtual connection has removed one barrier: the logistical challenges of transportation and time, as well as some of the possible nervousness or apprehension associated with in-person services.
- Many LGBTQ+ individuals already rely heavily on connecting online, so the shift to online services and support (peer and professional) may be a smoother transition.
- Virtual connections have also removed the logistical challenges of transportation and time – which has allowed enhanced peer-to-peer interactions, in addition to provider-survivor contact.

New Funding Opportunities Offer Support for Changing Times

- There have been multiple new funding opportunities that have rapidly emerged for small businesses and non-profits, as well as funds for individuals in need. Many providers have explored these options in order to better serve marginalized populations, like LGBTQ+ survivors.

New Resources Are Quickly Developng

- Several LGBTQ+ groups have established robust national resources. For example, the Family Equality Council has “a virtual hub for LGBTQ+ families” with many available online activities at <https://www.familyequality.org/neighborhood/>. Another initiative is [SAGEConnect](#), which connects LGBTQ+ elders nationwide with telephone buddies.
- Many organizations have quickly created LGBTQ+ specific documents, videos, and other supportive resources. While they are not directly linking survivorship within these resources, they are COVID-19-specific and LGBTQ+-population-specific.



About the National Resource Center for Reaching Victims

The National Resource Center for Reaching Victims (NRC) is a clearinghouse for victim service providers, culturally specific organizations, criminal justice professionals, and policymakers to get information and expert guidance to enhance their capacity to identify, reach, and serve all victims, especially those from communities that are underrepresented in healing services and avenues to justice. For more information about the NRC, visit the NRC's website at <http://reachingvictims.org>.

About FORGE

FORGE is the nation's leading organization focused on violence against transgender/non-binary individuals, founded in 1994. Since 2009, FORGE has held multiple federal contracts to provide direct services nationwide to transgender/non-binary victims of crime and to provide training and technical assistance to the victim service providers who work with transgender/non-binary victims and loved ones. FORGE provides professionals with a wide range of support, including one-to-one technical assistance, virtual trainings, presentations at conferences, customized in-person intensives, and site visits to increase cultural competency. In addition to recorded trainings, FORGE has created and hosts a large, free, online library of publications, fact sheets, and other printable resources for providers. For more information about FORGE, visit FORGE's website at <https://forge-forward.org>.

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