

Understanding the Impact of COVID-19 Pandemic Measures on the LGBTI Community in the Western Balkans

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¹ For more information, see www.LGBTI-era.org.

² These are: EGAL Serbia; Centre for Social Group Development, Kosovo; Geten, Serbia; LGBT United Tetovo, North Macedonia; Da Se Zna, Serbia; YUCOM, Serbia; Belgrade Pride, Serbia; Regional Info Center, Serbia; Labris, Serbia; Subversive Front, North Macedonia; XY Spectrum, Serbia; Trans-Akcija, Slovenia; Alliance LGBT, Albania; Institute for Human Rights, North Macedonia; Come Out, Serbia; Skuc-LL, Slovenia; Queer Anarchiv, Montenegro; Spectra, Montenegro; Legebitra, Slovenia; LGBTI Social Center, Montenegro; Women's' Alliance, North Macedonia; Helsinki Committee for Human Rights/LGBTI Support Centre, North Macedonia; CURE Foundation, Bosnia and Herzegovina; Crisis Response and Policy Center (CRPS), Roma Women's Center, Rromnjako Ilo, Serbia; Dugine Obitelj, Croatia; and Tuzla Open Center, Bosnia and Herzegovina.

Executive summary

The unparalleled disruption of public life due to COVID-19 in Albania, Bosnia and Herzegovina, Croatia, Kosovo, Montenegro, North Macedonia, Serbia and Slovenia is having devastating impacts on economies, the delivery of services, and the ability of already marginalized groups to access essential services. Lesbian, gay, bisexual, trans, and intersex (LGBTI) people are among the most marginalized groups in Southeastern Europe, often facing discrimination and exclusion from the labor market and key services, including health services. The challenges this presents are both immediate and longer term, as the impacts of the pandemic are likely to be felt long after the health crisis is brought under control.

As the COVID-19 pandemic unfolded globally, international human rights organizations recognized early on that LGBTI people were among those particularly vulnerable to the crisis and that governments should ensure that LGBTI people are considered and their voices heard when steps are taken to address the pandemic.³ This rapid assessment aims to provide a detailed overview of the impact of the COVID-19 pandemic and the measures to address the health crisis on the lives of LGBTI people. It is largely based qualitative information gathered through a small online survey of, and interviews with, 31 LGBTI organizations in the region as well as a desk review of local and regional research, media reports, government and international community statements, and other relevant resources. The assessment focuses on four key areas: 1) the LGBTI community's access to health care and services during the COVID-19 pandemic, 2) the impact of preventive and compulsory isolation measures and social distancing on LGBTI people, 3) the potential that existing socio-economic disparities between LGBTI people and the general population will increase, and 4) the pandemic's impact on the LGBTI civil society organizations.

Finally, this paper provides recommendations focused on ensuring sexual and gender minorities have access to essential services, especially health services, during the pandemic. Recent surveys in the region reaffirmed that discrimination, exclusion, and violence continue to impact the day to day lives of LGBTI people. Low trust in public institutions, inadequate access to health services, and increased risk of underlying conditions make LGBTI people more vulnerable to COVID-19 morbidity and mortality. The economic shocks resulting from lockdowns will have long term negative effects on all vulnerable populations, including LGBTI people. Engaging effectively with LGBTI people and CSOs will be key to ensuring our efforts focused on "Saving Lives, Scaling-up Impact and Getting Back on Track"⁴ address the specific needs and vulnerabilities of LGBTI people in Southeastern Europe so that relief and recovery efforts do not

³OHCHR, "COVID-19 AND THE HUMAN RIGHTS OF LGBTI PEOPLE" (online), April 17, 2020, <https://www.ohchr.org/Documents/Issues/LGBT/LGBTIpeople.pdf>

⁴ World Bank, "Saving Lives, Scaling-up Impact and Getting Back on Track" (online), June 2020, <http://documents1.worldbank.org/curated/en/136631594937150795/pdf/World-Bank-Group-COVID-19-Crisis-Response-Approach-Paper-Saving-Lives-Scaling-up-Impact-and-Getting-Back-on-Track.pdf>

exacerbate existing vulnerabilities. Especially in times of a global pandemic, governments should ensure LGBTI people have access to adequate health services without fear of discrimination, including access to HIV/AIDS care, treatment, and prevention and transgender health care. Governments should therefore consider increasing efforts to train and sensitize health care providers on SOGI non-discrimination while expanding financial support to CSOs to fill critical gaps in health service provision. The governments should work with CSOs to provide these services and other key services (i.e. psycho-social support, HIV testing, etc.) in a safe and accessible manner. Ministries of Health and other relevant public health authorities should work closely with LGBTI CSOs to ensure relevant information on COVID-19 reaches sexual and gender minorities, including engaging these groups in the design and development of vaccination programs. As the focus shifts from the immediate health response to saving livelihoods and rebuilding better, it is necessary to ensure that the basic needs of all marginalized communities are met. For LGBTI people this includes among other things access to food and shelter programs, other social protection programs, and economic opportunity. Governments should place emphasis on inclusive recovery programs in order to build back better, increase trust in institutions, and access the full economic potential of all parts of society.

1. Introduction

This rapid assessment aims to provide a detailed analysis of the impact of the COVID-19 pandemic and the measures to combat it on the lives of lesbian, gay, bisexual, trans, and intersex (LGBTI) people in the Western Balkans⁵, Croatia, and Slovenia.⁶ The Equal Rights Association for Western Balkans and Turkey (ERA), a regional LGBTI umbrella organization, prepared this report for the World Bank. The assessment is largely based on qualitative information gathered through an online survey of, and interviews with, ERA member organizations as well as a desk review of local and regional research, media reports, government and international community statements, and other relevant resources. While this assessment provides a concise overview of the impacts of the COVID-19 pandemic on LGBTI people in the region, it does not aim to provide a complete and representative overview of the situation.

Twenty ERA member organizations from Albania, Bosnia and Herzegovina, Croatia, Kosovo, Montenegro, North Macedonia, Serbia and Slovenia were interviewed in May 2020⁷ and 31 responded to the COVID-19 questionnaire in May and June, providing detailed information on the impact of governments' COVID-19 measures on the LGBTI community. These impacts include: the interruption of essential health services by state institutions, organizations increasingly unable to provide essential community services, heightened levels of homelessness, increased incidents of domestic violence, the closure of LGBTI businesses, a significant loss of jobs, and rising mental health problems. The pandemic response has also had a negative impact on LGBTI civil society organizations (CSOs), which report losses in funding, the closure of community centers, the cancellation of services and advocacy and visibility activities, and a general shift toward emergency humanitarian work for LGBTI people in need.

Regional surveys conducted in 2017⁸ and 2019⁹ revealed a distressing reality for the LGBTI community in the Western Balkans, which continued to face discrimination, harassment, hate speech, violence, and low visibility. The community also described a low trust in public institutions, inadequate access to health services, and a poor government response to their plight. The research showed disparities not only

⁵ The Western Balkan countries include Albania, Bosnia and Herzegovina, Kosovo, Montenegro, North Macedonia, and Serbia.

⁶ Croatia and Slovenia are also included in the analysis, given their geographic proximity and similarities to the Western Balkan countries.

⁷ Equal Rights Association for Western Balkans and Turkey (ERA), "ERA Open Letter for Donors and Supporters on our Response to the COVID-19 Pandemic," ERA, March 26, 2020, <https://www.LGBTI-era.org/news/era-open-letter-donors-and-supporters-our-response-covid-19-pandemic>; and ERA, "LGBTI Activists from ERA Region on FRA Survey Results," ERA, May 25, 2020, <https://www.LGBTI-era.org/news/LGBTI-activists-era-region-reflect-fra-survey-results>.

⁸ World Bank, "Life on the Margins: Survey Results of the Experiences of LGBTI People in Southeastern Europe" (Washington, DC: World Bank, 2018), <https://www.LGBTI-era.org/one-stop-shop/life-margins-survey-results-experiences-LGBTI-people-southeastern-europe>; and World Bank, "A Comparative Analysis of the Socioeconomic Dimensions of LGBTI Exclusion in Serbia" (Washington, DC: World Bank, 2019), <https://www.LGBTI-era.org/one-stop-shop/comparative-analysis-socioeconomic-dimensions-LGBTI-exclusion-serbia>.

⁹ European Union Agency for Fundamental Rights (FRA), "A Long Way to Go for Equality" (Vienna: FRA, 2020), https://fra.europa.eu/sites/default/files/fra_uploads/fra-2020-LGBTI-equality_en.pdf.

between LGBTI people and the general population but also within the community itself, with trans and intersex people disproportionately affected in all areas of life. As concerns about COVID-19 emerged, international human rights organizations recognized early on that LGBTI people were among those particularly vulnerable to the crisis and that governments should ensure that LGBTI people are considered and their voices heard when steps are taken to address the pandemic.¹⁰

Keeping in mind the recent negative trends concerning LGBTI rights across Eastern Europe, particularly in Poland and Hungary,¹¹ and the economic impact of the COVID-19 pandemic more generally,¹² there is reasonable fear that the economic, social, and human rights of LGBTI people could further regress in the countries of the Western Balkans. In North Macedonia, for example, the Constitutional Court recently repealed the Law on Protection from Discrimination.¹³ Though the Court's decision was based on the fact that the law was adopted without the required majority, its repeal leaves LGBTI people unprotected before the law and potentially marginalizes them further. The country also postponed its parliamentary elections, which were to take place in April 2020. As a result, it may be some time before a new parliament has the opportunity to vote on this law again, which effectively leaves LGBTI people without legal protection from discrimination for the foreseeable future.¹⁴

This assessment focuses on four key areas: 1) the LGBTI community's access to health care, 2) the impact of preventive and compulsory isolation measures and social distancing on LGBTI people, 3) the potential that existing disparities between LGBTI people and the general population will increase, and 4) the pandemic's impact on the LGBTI movement. It concludes with a set of important recommendations for governments, donors, and other development partners on i) how to mitigate the impact of the pandemic on LGBTI people and ii) how to avoid similar mistakes and confront related challenges in the face of possible future lockdowns and containment measures. The evidence and information on the impacts of COVID-19 on LGBTI people can help governments and development partners in designing, implementing, and evaluating more inclusive measures to combat the pandemic.

¹⁰OHCHR, "COVID-19 AND THE HUMAN RIGHTS OF LGBTI PEOPLE" (online), April 17, 2020, <https://www.ohchr.org/Documents/Issues/LGBT/LGBTIpeople.pdf>

¹¹ ILGA-Europe, "Rainbow Europe 2020" (online), <https://www.ilga-europe.org/rainboweurope/2020>; and M. G. Sirotnikova and others, "Democracy Digest: Clashes Accelerate over LGBT, Gender and Civil Rights," *Reporting Democracy*, June 19, 2020, <https://balkaninsight.com/2020/06/19/democracy-digest-regional-politics-face-off-lgbt-gender-and-civil-rights/>.

¹² Organisation for Economic Co-operation and Development (OECD), "The COVID-10 Crisis in the Western Balkans: Economic Impact, Policy Responses, and Short-Term Sustainable Solutions" (Paris: OECD, 2020), <https://www.wb6cif.eu/wp-content/uploads/2020/05/COVID-19-Crisis-Response-Western-Balkans.pdf>.

¹³ ERA, "Constitutional Court of North Macedonia Repealed the Law on Prevention of and Protection Against Discrimination," ERA, May 15, 2020, <https://www.LGBTI-era.org/news/constitutional-court-north-macedonia-repealed-law-prevention-and-protection-against>.

¹⁴ ERA and ILGA, "ERA and ILGA-Europe Joint Statement on the Decision of the Constitutional Court of North Macedonia to Repeal the Law on Prevention of and Protection against Discrimination," ERA, May 29, 2020, <https://www.LGBTI-era.org/news/era-and-ilga-europe-joint-statement-decision-constitutional-court-north-macedonia-repeal-law>.

2. Access to health care

It is already known that LGBTI people face many barriers in access to health services in the Western Balkans region. Recent research shows that 39 percent of LGBTI people have experienced discrimination when using or attempting to access health care services, and 12 percent have foregone medical treatment because of fear of discrimination or intolerant reactions. Challenges are even greater for trans and intersex persons, 40 percent of whom have struggled to find LGBTI-friendly health practitioners.¹⁵ Attitudes of health practitioners toward LGBTI people remain an important factor, as research shows that they often have no knowledge or understanding of their needs.¹⁶ The examples below show that the measures taken to combat the COVID-19 pandemic have further increased the barriers for LGBTI people to accessing health services, particularly for those living with HIV/AIDS, trans and intersex people requiring specific ongoing treatment, and the considerable number of (particularly young) LGBTI people suffering from psycho-emotional stress and trauma caused by the lockdown measures, the loss of jobs, evictions from apartments, domestic violence, separation from loved ones, and other difficulties.

a) People living with HIV/AIDS

LGBTI people living with HIV/AIDS or requiring HIV education and prevention services faced many challenges in the region even before the pandemic,¹⁷ and the hard-won gains of the past 20 years are in danger of being reversed by the current crisis measures.¹⁸ The region is still struggling with a concentrated HIV epidemic among men who have sex with men (MSM) and trans persons, insufficient community testing, limited or non-existent access to Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP) as successful prevention measures, and in some cases, such as in Albania,¹⁹ a failure to treat existing patients. Even before the pandemic, local CSOs reported a distressing situation of continuously interrupted services, inefficient treatment plans and procurement mechanisms, and a lack of transparency and communication by the relevant authorities.²⁰

¹⁵ World Bank, "Life on the Margins," 48.

¹⁶ K. Voko, "Access to Health Services and Quality of Care for LGBT Persons in Albania: Technical Report" (Tirana: Avokatii Popullit [Ombudsman], 2013), 20,

<https://www.avokatipopullit.gov.al/media/manager/website/reports/ACCESS%20TO%20HEALTH%20SERVICES%20AND%20QUALITY%20OF%20CARE%20FOR%20LGBT%20PERSONS%20IN%20ALBANIA.pdf>; and S. Stojisavljevic, B.

Djikanovic, and B. Matejic, "The Devil Has Entered You: A Qualitative Study of Men Who Have Sex With Men (MSM) and the Stigma and Discrimination They Experience from Healthcare Professionals and the General Community in Bosnia and Herzegovina," *PLoS One* 12, no. 6 (2017), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5462409/>.

¹⁷ ERA, "Fighting HIV in the Western Balkans: a Forecast for 2020," ERA, February 28, 2020, <https://www.LGBTI-era.org/news/fighting-hiv-western-balkans-forecast-2020>.

¹⁸ Joint United Nations Programme on HIV/AIDS (UNAIDS), "UNAIDS Urges Countries to Stay Focused on HIV Prevention During the COVID-19 Pandemic," UNAIDS, May 6, 2020,

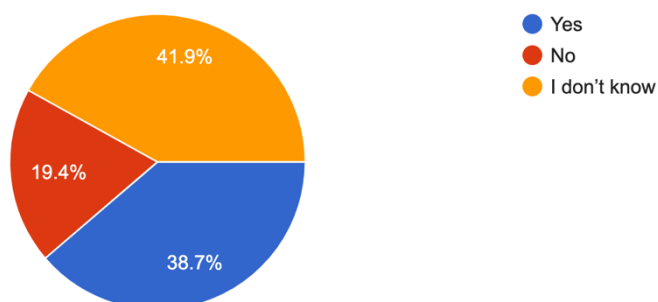
https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2020/may/20200506_prevention

¹⁹ ERA, "Shocking and Unacceptable: in 2020, Albania Fails its HIV/AIDS Fight," ERA, February 26, 2020, <https://www.LGBTI-era.org/news/shocking-and-unacceptable-2020-albania-fails-its-hiv-aids-fight>.

²⁰ Ibid.

Figure 1: Challenges for People Living with HIV/AIDS

Do you know if LGBTI people living with HIV/AIDS in your country have faced challenges receiving their regular health services in this period?



Source: "Questionnaire Impact of COVID-19 Measures on the LGBTI Community in the Western Balkans", ERA, May-June 2020

The survey of ERA member organizations²¹ indicates that the measures to combat COVID-19 have further amplified these problems. The result has been more limited access to HIV/AIDS treatment and less testing, with the potential that HIV infections will increase. As many as 38.7 percent of the member organizations claim that LGBTI people living with HIV/AIDS have faced challenges in receiving their regular health services during this period (see figure 1).

In Serbia, the Rainbow Association reports that all medical institutions, from primary health care to other more specialized facilities, have shifted their focus to the diagnosis and treatment of COVID-19. Infection clinics that were involved in HIV treatment have been transformed into COVID-19 clinics, and interventions, such as testing for viral load, CD4, and so on, have been postponed. Services are being provided only to HIV persons with emergency conditions. An additional challenge has been the retrieval of anti-retroviral treatment (ARV), which is usually collected at or delivered by designated pharmacies. Picking up the medication has proved difficult for people living in smaller towns and rural areas, as public transportation is suspended for extended periods of time. Delivery services are challenging for people with a low income and also raise the issue of privacy, considering that many people prefer not to disclose their HIV status.²² In Serbia, qualitative research by EGAL and Loud & Queer shows that 20.8 percent of LGBTI people have had a problem finding AIDS medication, other forms of long-term therapy, and/or mental health-related

²¹ "Questionnaire: Assessing the Impact of COVID-19 Pandemic Response on the LGBTI+ Community in the Western Balkans," ERA, May-June 2020.

²² Ibid.

services, and as many as 15.7 percent claim to have had difficulties both in finding chronic therapy and in scheduling checkups and controls.²³

In Albania, COVID-19 measures have limited access to health care services, including sexual health. The number of HIV and sexually transmitted infections (STIs) tests performed throughout the pandemic has decreased due to limited opening hours, a lack of protocols, and the absence of community outreach.²⁴

In Montenegro, actions against COVID-19 have also affected at-risk populations, and local CSOs have made efforts to expand and modify the range of HIV prevention services. This has included efforts to deliver services to hard-to-reach communities, distribute basic supplies to targeted areas, launch mental health services, and raise awareness with the media, especially with regard to confidentiality and the prevention of stigma.²⁵

In Slovenia, the association Legebitra reported a temporary suspension of testing for HIV and other STIs of MSM and serious cutbacks in medical activities that provide treatment for HIV and other STI patients. This could increase the risk of new HIV infections and other STIs in the months following the epidemic.²⁶ In Slovenia, non-European Union (EU) residents who live with HIV and were forced to stay in the country due to border closures have also had difficulties accessing medicines and health services.²⁷

b) Trans and intersex people

Research shows that trans and intersex people in the Western Balkans face many health-related challenges caused by, among other reasons, a lack of legal protections, the absence of awareness and expertise among health professionals, the low visibility of trans and intersex communities, their low trust in health institutions, and so on.²⁸ Across the region, both communities experience significant challenges in accessing general and specific health services even in normal times, regardless of whether they are legally protected or not. These services are also often very costly, as treatments and medications are available only in a few capitals in the region and thus not equally accessible to all trans and intersex persons.

²³ B. Milićević and A. Čeh, "COVID-19 and LGBTI Community in Serbia" (Belgrade: EGAL and Loud & Queer, 2020), 16, <https://www.LGBTI-era.org/sites/default/files/pdfdocs/ENG%20L%26Q%20i%20EGAL%20Analysis%20Covid%2019%20and%20LGBTI%20community%20in%20Serbia.pdf>

²⁴ "COVID-19 Impact: What We Know So Far – Albania," International Planned Parenthood Federation, April 7, 2020, <https://www.ippf.org/blogs/covid-19-impact-what-we-know-so-far-albania>.

²⁵ "Community Initiatives Map" (online), <http://act.inyourpower.life/?lang=en>.

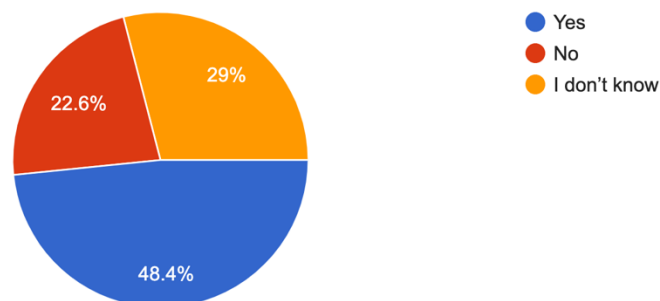
²⁶ "Impact of the COVID-19 Epidemic and Prohibition of Movement on the LGBTI population" (Ljubljana: Legebitra, 2020), 2.

²⁷ Ibid.

²⁸ World Bank, "Life on the Margins," 48.

Figure 2: Challenges of Trans Persons

Do you know if trans persons in your country have faced any challenges accessing health services in this period?



Source: "Questionnaire Impact of COVID-19 Measures on the LGBTI Community in the Western Balkans", ERA, May-June 2020

The measures against COVID-19 have further exacerbated the particular challenges that trans persons face. Many have been required to stop hormone therapies and postpone surgeries and other physical health treatments and as a result, have experienced increased anxiety and mental health problems. As many as 48.4 percent of ERA member organizations that responded to the survey²⁹ claim that transgender people have faced challenges accessing health services due to the COVID-19 pandemic (see figure 2). In Kosovo, because of the absence of legislation and the appropriate medical services, transgender people are forced to go abroad to receive hormone prescriptions and treatments, mainly to Skopje or Belgrade. As borders have been closed for several months, people have had to stop their treatment. They have also faced challenges in visiting their health care providers.³⁰ A similar situation has been reported in Bosnia and Herzegovina, where transgender persons have had to go to Belgrade or Zagreb for treatment. Many of the ERA members report a lack of clarity as to when the services will resume, resulting in increased uncertainty and concern among many transgender people.

In North Macedonia, the association Coalition Margins reports that trans sex workers are one of the groups most affected by the loss of access to trans-specific health services, as they often do not have the funds for medications, hormone therapy, or other basic resources.³¹ In Serbia, trans persons report that services at the Cabinet for Transgender Conditions of the Clinical Center of Serbia are temporarily unavailable.³² In Slovenia, the organization Legebitra reported that due to the suspension of health services for non-life threatening conditions, access to procedures, such as hormone therapies, surgeries for people in the early stages of transition, and further specialized treatment for those already in transition, has become difficult or almost impossible to

²⁹ "Questionnaire."

³⁰ Ibid.

³¹ Ibid.

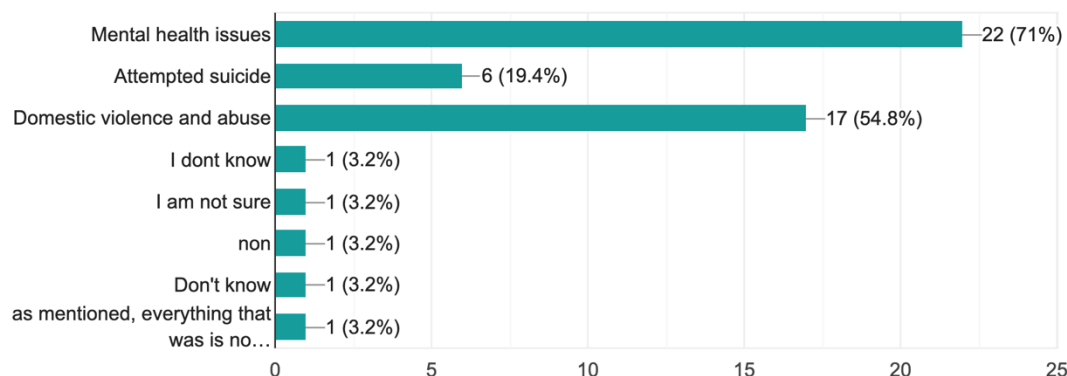
³² Milićević and Čeh, "COVID-19 and LGBTI Community in Serbia," 14.

obtain.³³ XY Spectrum from Serbia reports that medical examinations for post-operative trans people (and for intersex children) have stopped during the pandemic, and several medications/hormones have become unavailable.³⁴

c) Other health issues

Figure 3: Health issues of LGBTI people

Do you know if LGBTI people in your country have been affected by other health related issues that they could not get help from medical professionals? Please choose the options relevant to you.



Source: "Questionnaire Impact of COVID-19 Measures on the LGBTI Community in the Western Balkans", ERA, May-June 2020

As seen in figure 3, ERA member organizations across the region report that the COVID-19 pandemic and the measures to confront it have had a negative impact on the physical and mental well-being of LGBTI people, especially with regard to a) mental health issues, b) suicide attempts, and c) increased incidents of domestic violence and abuse.³⁵ Members report also that the situation has further impacted the ability of health institutions to provide LGBTI-specific health services. Egal's research in Serbia³⁶ reveals the same concerns, and they argue that the number of LGBTI people who will need basic health services in Serbia will increase even further as the economic and social consequences of the crisis escalate. In North Macedonia, ERA member organization LGBTI Support Center argues that LGBTI people who do not have a job or who have lost their job cannot access psychological services, as these are closely linked to health insurance based on employment.³⁷

In Serbia, according to ERA member Come Out in Novi Sad, access to all public services, including all non-COVID-19-related health services, were postponed until after the state of emergency. A police curfew put people in lockdown and left them

³³ "Impact of the COVID-19 Epidemic and Prohibition of Movement on the LGBTI population," 2.

³⁴ "Questionnaire."

³⁵ Ibid.

³⁶ ERA, "Research on the Impact of COVID-19 Pandemic on LGBTI Community in Serbia Published," ERA, May 26, 2020, <https://www.LGBTI-era.org/news/research-impact-COVID-19-pandemic-LGBTI-community-serbia-published>.

³⁷ "Questionnaire."

without the needed social support. All public spaces were closed, leaving people isolated and negatively impacting their mental and physical health. Upon re-opening when the ban was lifted, some people found that their scheduled medical appointments had not been postponed but canceled, thus forcing them to restart a process that for some has lasted an entire year.³⁸

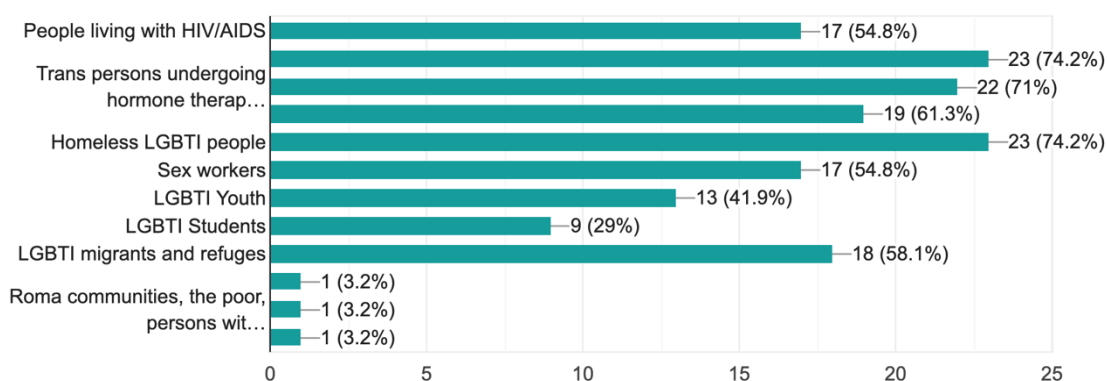
3. Impact of preventive and compulsory isolation measures and social distancing

LGBTI people in the Western Balkans have always been marginalized and socially ostracized.³⁹ Low visibility and poor support from family, schools, and governments have led the community to seek and create smaller and inter-dependent circles of support, evolving around LGBTI community centers, bars and clubs, dating apps, and so on.

ERA member organizations testified that the isolation and current social distancing measures have had—and will continue to have—a tremendous impact on the LGBTI community, particularly with regard to receiving essential services from CSOs at drop-in centers as well as from state institutions. They have faced psychological and physical violence at home or in other settings where they have been forced to stay during the pandemic, and they have lost jobs and fallen into extreme poverty. They also need urgent help in securing basic supplies, such as food, medication, clothes, and other necessities, and are experiencing deteriorating mental health conditions stemming from increased loneliness, depression, and so on.

Figure 4: Most affected communities

Please select the communities which have been mostly affected by the social distancing and isolation policies:



Source: "Questionnaire Impact of COVID-19 Measures on the LGBTI Community in the Western Balkans", ERA, May-June 2020

³⁸ Ibid.

³⁹ World Bank, "Life on the Margins."

As seen in figure 4, ERA members report that people most affected by the isolation and prevention measures are those who need psycho-emotional support, homeless LGBTI people, trans persons undergoing hormone therapy, elderly LGBTI people, and people living with HIV/AIDS.

a) Psycho-emotional stress and needs

In Serbia, Egal's community research found that one-quarter of LGBTI respondents mentioned the psychological impact of the pandemic in their answers, and one-third expressed panic and anxiety about the future.⁴⁰ The organization Come Out in Serbia reports that the LGBTI youth they work with have had regular contact with youth workers and therapists related to mental health issues, attempted suicide, and increased incidents of domestic violence and abuse. With no other services available, the young people have had to rely exclusively on Come Out's online accessibility. Those who seek this support are between 15 and 25 years old and study in Novi Sad or some other town in the Vojvodina region; many live in poverty. They have all had to return home, hide their identity, or tolerate a homo/bi/transphobic atmosphere within their families. In several cases, family members have problems with alcohol abuse, which has made the situation even more difficult.⁴¹

As an already marginalized group, trans people are particularly vulnerable to psycho-emotional stress.⁴² In North Macedonia, the organization Subversive Front reports the case of an unemployed trans woman from a town in the country's central region who, just before the start of the pandemic, came out to her family members. She was subjected to harassment, ridicule, shaming, and emotional and economic blackmail. While receiving mental health and psychological support from Subversive Front, her need for socialization with other community members could not be met during the pandemic, which has led to feelings of loneliness and a loss of self-confidence.⁴³ In Slovenia, the organization Legebitra reports a rising number of cases of anxiety, sexual dysphoria, and depression among young people whose parents do not accept their sexual orientation or gender identity, leading to worsened family relations and more incidents of domestic violence.⁴⁴

b) Homelessness

Community research in Serbia has shown that every tenth LGBTI person has had to move out during the coronavirus crisis, primarily due to the inability to pay rent. The same research shows also that 5 percent of the LGBTI community and their family

⁴⁰ Milićević and Čeh, "COVID-19 and LGBTI Community in Serbia."

⁴¹ "Questionnaire."

⁴² Human Rights Campaign (HRC), "How Transgender and Non-Binary Communities around the World are Being Affected by COVID-19" (online), HRC, April 17, 2020, <https://www.hrc.org/blog/how-transgender-and-non-binary-communities-are-impacted-by-COVID19-globally>.

⁴³ "Questionnaire."

⁴⁴ "Impact of the COVID-19 Epidemic and Prohibition of Movement on the LGBTI Population," 2.

members are at risk of homelessness due to the economic challenges caused by the COVID-19 pandemic crisis.⁴⁵ The main reasons for the evictions are the inability to pay rent and/or the lack of privacy in the place where they lived. In Serbia, two-thirds of those evicted were students; of particular concern were the evictions from school and university dorms, which indicates that information about alternative housing options was inconsistently and insufficiently communicated.⁴⁶

In Slovenia, the organization Legebitra was approached by a large number of students who were forced to move out when the government's COVID-19 prevention measures led to the shutdown of student dorms. Many could not return home because of the very difficult relationships with their families, forcing them into homelessness. Dorms eventually reopened after complaints from student organizations. Secondary school student residences, however, have remained completely closed, forcing LGBTI youth to return to their often-hostile families.⁴⁷

c) Elderly LGBTI people

The COVID-19 pandemic is having an even greater impact on the elderly, who are not only at greater risk of contracting the virus and dying from it, but are also much more vulnerable to the lockdown measures, as many already face neglect and decreased social and economic well-being.⁴⁸ In Serbia, the lockdown measures required all people aged 65 or older to remain at home, with some exceptions allowing them to go to supermarkets and pharmacies. As a result, many elderly LGBTI people were left alone, without friends, family members, and often partners. The organization XY Spectrum reports of one elderly person who was separated from her partner and alone during the whole state of emergency.⁴⁹ Activists⁵⁰ in Novi Sad reported on several elderly lesbian women whom they have been assisting in their city. One has been completely isolated throughout the crisis. Even though the Serbian government has set up a volunteer system to help the elderly, many of these lesbian women are afraid to communicate with strangers as they fear lesbophobia. Another woman told them that she could no longer collect her pension because only she or a family member can collect it, and she has no family.⁵¹

⁴⁵ Milićević and Čeh, "COVID-19 and LGBTI Community in Serbia," 3.

⁴⁶ *Ibid.*, 8.

⁴⁷ *Ibid.*, 1.

⁴⁸ United Nations, "Policy Brief: the Impact of COVID-19 on Older Persons" (New York: UN, 2020), <https://unsdg.un.org/sites/default/files/2020-05/Policy-Brief-The-Impact-of-COVID-19-on-Older-Persons.pdf>.

⁴⁹ "Questionnaire."

⁵⁰ Dragana Todorović from ERA and her partner Milena Marković, a nurse who has been serving at the Novi Sad COVID-19 hospital during the pandemic.

⁵¹ "D. Todorović and M. Marković, "When Sh*t Hits the Fan, Lesbians are There!" (online), EuroCentralAsian Lesbian Community, May 8, 2020, <https://europeanlesbianconference.org/dragana-todorovic-and-milena-markovic-when-shit-hits-the-fan-lesbians-are-there/>.

d) Unemployment and Increased poverty

Community research in Serbia shows that one-third of the LGBTI community has suffered economic consequences as a result of the pandemic, including half of the businesses owned by LGBTI persons. Approximately two-thirds of those who have suffered economically currently have no income at all. More than two-thirds of the country's LGBTI community have had trouble satisfying at least one of their basic needs, such as food, housing, livelihood, and/or employment. According to the same study, urgent economic support is required by more than 20 percent of LGBTI people.⁵²

Alliance LGBT in Albania reports that many young LGBTI people make their living working as waiters, assistant cooks, or call-center operators or in other entry-level jobs. The government's closure of all businesses on March 12, with the exception of supermarkets, pharmacies, and banks, left most of these young people out of a job and unable to pay their bills. The fact that many cannot return home due to difficult family relations exposes them to additional challenges and barriers compared to their non-LGBTI peers.⁵³

The European Lesbian organization EL*C reports that during the COVID-19 pandemic, many young lesbian women have lost their jobs, as they were employed in the services sector, such as in bars or restaurants. Many can no longer pay their rent and in some cases have had to return to their (often lesbophobic) families, where they are subject to discrimination and violence. Through its reporting platform Locked-Down Lesbians Listening,⁵⁴ EL*C is in contact with more than 50 lesbians in similarly difficult situations throughout the Balkans, but as the organization reported: "who knows how many lesbians dare not contact us. Some only call us when it is really a matter of life and death."⁵⁵

e) Domestic and other forms of violence

One-fifth of LGBTI people in Serbia are currently living in fear of violence during the pandemic. More than one-third suffer from a lack of privacy, which has exposed them to violence and harassment in the home environment.⁵⁶ According to Association Rainbow in Serbia, mental health support and care for victims of domestic violence are generally insufficient for the entire population, and in any case, the pandemic has made access to such services even more difficult. The community is also faced with insensitive authorities and service providers, which forces many LGBTI people to avoid seeking support services altogether.⁵⁷ In North Macedonia, the association Coalition

⁵² Milićević and Čeh, "COVID-19 and LGBTI Community in Serbia," 3.

⁵³ "Questionnaire."

⁵⁴ "Locked-Down Lesbians Listening," <https://www.facebook.com/events/online-space-zoom/locked-down-lesbians-listening-III/250624172732035/>.

⁵⁵ Todorović and Marković, "When Sh*t Hits the Fan, Lesbians are There!"

⁵⁶ Milićević and Čeh, "COVID-19 and LGBTI Community in Serbia," 3.

⁵⁷ "Questionnaire."

Margins reports that many people have asked for shelter services and free psychological support. Moreover, information received from local community support centers shows that many cases of domestic violence are not reported to the authorities.⁵⁸ Well before the pandemic, World Bank research conducted in 2017 showed that LGBTI people had very low trust in institutions and that only 17 percent—less than one-fifth—had reported serious incidents to the police.⁵⁹ In Serbia today, younger people aged between 19 and 29 report the most cases of domestic violence, showing their vulnerability in the face of lockdown measures, both economic and social.⁶⁰ In Albania, the association Alliance LGBT reports that many people from the community have lost their jobs and some cannot pay rent, forcing them to go back home and live with their parents. Due to poverty and the lockdown measures, many LGBTI people have reported anxiety and panic attacks and many others have been victims of domestic violence.⁶¹

In Slovenia, trans activists are worried about how self-isolation could be a “death-knell” for their community as people are cut off from their support structures and forced to remain under lockdown in hostile environments.⁶² The World Bank regional survey of 2017 found that the transgender community stood out as the most vulnerable group, as every second trans individual (55 percent) had been a victim of physical and/or sexual assault or threatened with violence in the previous five years.⁶³

f) Sex work

Many LGBTI people work in the entertainment industry, and others are in more precarious occupations, such as the sex trade. Alliance LGBT in Albania reports that trans people, who already face extensive discrimination and exclusion, are being particularly affected by the pandemic measures, especially trans sex workers. Sex work is illegal in Albania, yet for many trans people this is the only possible way to make money. In face of lockdown measures, many are now exposed to even greater dangers, including violence from clients, prosecution from the police, exposure to COVID-19, and others.⁶⁴ During April and May, the number of people who required food, shelter, essential medications, and other services from Alliance LGBT and LGBT Shelter tripled. The lack of legal gender recognition, a poor social services system, and low trust in institutions makes it impossible for this marginalized community to benefit from social services in Albania. Trans sex workers reported similar problems in North Macedonia, where the number of people seeking shelter has increased exponentially. CSOs in North Macedonia have faced considerable challenges due to

⁵⁸ Ibid.

⁵⁹ World Bank, “Life on the Margins,” 73.

⁶⁰ Milićević and Čeh, “COVID-19 and LGBTI Community in Serbia,” 5.

⁶¹ “Questionnaire.”

⁶² Ibid.

⁶³ World Bank, “Life on the Margins,” 66.

⁶⁴ “Questionnaire.”

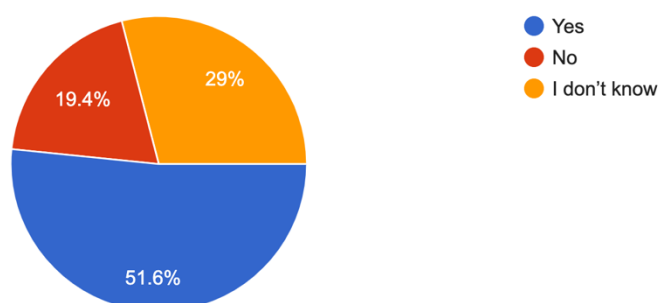
limited space in the shelters there and a lack of the required funds from the Ministry of Labor and Social Work.⁶⁵

4. Potential increase in existing disparities

There is a risk that the current disparities in employment, health, and other areas of life for LGBTI people will deepen as a result of the COVID-19 response. Half of our respondents believe that the COVID-19 pandemic will intensify these existing inequalities.

Figure 5: Deepening of existing inequalities as a result of the COVID-19 pandemic

Do you think the COVID-19 pandemic and the response in your country will deepen the existing inequalities between LGBTI people and the rest of the population? If yes, could you elaborate how?



Source: "Questionnaire Impact of COVID-19 Measures on the LGBTI Community in the Western Balkans", ERA, May-June 2020

a) Employment

In Serbia, one-third (29.4 percent) of LGBTI respondents were unemployed before the pandemic, and a considerable number of that group (21.2 percent) had been unemployed for more than six months, indicating that they faced a difficult economic situation even before the start of the crisis. The pandemic has led to many layoffs, reduced incomes, and a decrease in the amount of unpaid leave, which means that the number of unemployed LGBTI people will increase significantly.⁶⁶ Given that LGBTI people are under-represented in the public sector, which is the only sector in Serbia that has been relatively unaffected by unemployment during the pandemic, we can argue that LGBTI people are being disproportionately affected by the layoffs there.⁶⁷ In North Macedonia, the crisis has also resulted in mass layoffs of workers, leading to a loss of income for countless people and pushing many into poverty. For many LGBTI people, this means returning to unaccepting families or requesting shelters and support services provided by CSOs.⁶⁸

⁶⁵ Ibid.

⁶⁶ Milićević and Čeh, "COVID-19 and LGBTI Community in Serbia," 10.

⁶⁷ World Bank, "A Comparative Analysis of the Socioeconomic Dimensions of LGBTI Exclusion in Serbia."

⁶⁸ "Questionnaire."

The CURE Foundation in Bosnia and Herzegovina argues that just as in any other crisis, women will pay the biggest price, especially those considered “invisible” by the state because they work as nannies, caretakers, and so on. Many lesbian and trans women who are in safe houses will remain there for even longer periods as employment opportunities will now be scarcer. For example, a woman in Banja Luka was going through the final preparations to start employment right before the COVID-19 pandemic. The factory has now closed and she has lost hope that she will retain the job.⁶⁹ In Slovenia, many LGBTI community members had already reported economic problems, which have been exacerbated by the pandemic. Even in normal times, many LGBTI people are forced to apply for precarious or unreliable work, which, under the pandemic, has become completely unavailable.⁷⁰

b) Health

The Joint United Nations Programme on HIV/AIDS (UNAIDS) argues that the COVID-19 epidemic may increase the vulnerability of people living with HIV. The widespread loss of livelihoods and fewer employment opportunities could mean that transactional sex, sex work, and sexual exploitation will increase, putting people at greater risk of contracting HIV unless they have the means to protect themselves.⁷¹ In Serbia, Association Rainbow, which works on HIV/AIDS, has been severely impacted in its ability to provide services to the targeted population in the ways that it was first designed. They have had to adapt their services in accordance with the state of emergency regulations as well as their clients’ needs. Work methods and regulations on how to meet and provide consultations to clients have been modified. The only services that they have been able to provide to their target groups during the pandemic in Serbia have been the communication and distribution of information to clients via phone, social media, dating apps, and online counseling. They have also translated the most important messages given by relevant international organizations such as UNAIDS into the local language and distributed them widely.

At the very beginning of the epidemic, the group provided social support services, including the delivery of basic supplies of food, hygiene products, and humanitarian assistance for vulnerable people in the community. Since venues and spots where the MSM population used to gather are now closed due to the state of emergency, the group had to arrange a specially suited safe space for both clients and staff, which included a mobile medical unit and a spacious meeting center. All appointments had to be booked in advance and only one client per appointment was able to stay in the facility at one time. Since the start of the pandemic, work methods have been modified

⁶⁹ V. Džekman, “Employment office like the salvation or utopia of the workers’ rights” (online) (Sarajevo, Cure Foundation, 2020), http://www.fondacijacure.org/index.php?do=article&article_id=1154 (Biro za zapošljavanje kao spas ili utopija radničkih prava).

⁷⁰ “Impact of the COVID-19 Epidemic and Prohibition of Movement on the LGBTI Population,” 2.

⁷¹ UNAIDS, “UNAIDS Urges Countries to Stay Focused on HIV Prevention During the COVID-19 Pandemic.”

and special precautionary measures have been in place during the provision of services, such as the use of protective masks, gloves, and visors (for staff and clients), as well as the application of disinfectants before and after each intervention.⁷²

In Novi Sad, the organization Come Out expects further social isolation, greater mental health challenges, and a lower economic status for LGBTI people. For the Serbian intersex organization XY Spectrum, social distancing has made intersex people even more invisible. An important element of understanding intersex issues is to be visible and to share personal stories. The COVID-19 pandemic increases the fear of the unknown.⁷³ The organization TransAkcija, the first trans-specific organization in Slovenia, warns that the COVID-19 crisis has been highlighting and deepening the gap between the privileged center (straight and cis people) and marginalized communities, arguing that "...the anti-crisis measures have been drawn up in such a way that most of them require a certain privilege from the get-go, so that a conscientious citizen could heed them. #StayHome for example, sure, naturally, but what if one does not have a home, or lives in an extremely toxic environment? They argue that only a handful of places in Ljubljana are available to the LGBT+ community and almost zero elsewhere and that the temporary loss of personal space and rejections experienced in primary environments have exacerbated mental health problems for some, with LGBTI+ persons being more likely to struggle with mental health in general."⁷⁴

Women's organizations in Bosnia and Herzegovina report that COVID-19 measures have significantly diminished the space between women who are victims of violence and their perpetrators. This is shown also in the low number of women reporting incidents of violence, due to the fact that they cannot find the space and/or time to report it. Although specific data on lesbian, bisexual, and queer (LBQ) women have not been reported, we can assume that they are just as much in danger of violence from perpetrators, and when we take into account the LBQ communities' low trust in institutions and general invisibility, we can argue that this problem is largely hidden.⁷⁵

⁷² "Questionnaire."

⁷³ Ibid.

⁷⁴ "LGBT+ Community Losing Safe Spaces Due to Coronavirus," *STA Agency*, May 1, 2020, <https://english.sta.si/2758260/lgbt-community-losing-safe-spaces-due-to-coronavirus?fbclid=IwAR1rLi0DghTKG5dr7DzcouxYrteWgNODcdLSHqq6Oic1GMg5JKdzqZPXakM>.

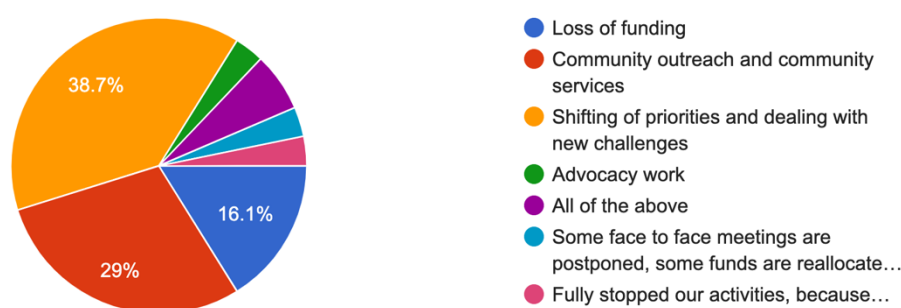
⁷⁵ "COVID19 – When house is not a home," Women Citizens for Constitutional Reform, April 8, 2020, <https://gradjankezaustavnepromjene.wordpress.com/2020/04/08/covid-19-kada-kuca-nije-dom/> (Kada kuća nije dom).

5. The impact of the COVID-19 pandemic on the LGBTI movement

LGBTI organizations often play an important role as bridges between LGBTI people and their governments. Additionally, they provide essential community services, advocate for LGBTI rights, and raise public awareness. The COVID-19 pandemic has had a significant impact on these organizations' ability to operate, particularly with regard to reduced service delivery, loss of funding, and required priority shifts.

Figure 6: Effects of the COVID-19 pandemic on organizations

How has the COVID-19 pandemic and related measures affected your organisation?



Source: "Questionnaire Impact of COVID-19 Measures on the LGBTI Community in the Western Balkans", ERA, May-June 2020

As shown in figure 6, LGBTI organizations in the Western Balkans have been affected mainly by the need to a) shift priorities and deal with new challenges (40 percent), b) focus more on community outreach and services (26.7 percent), and c) contend with a loss of funding (16.7 percent).

a) Shifting priorities

Organizations across the region have redesigned, canceled, or postponed their activities, while most advocacy work has been halted completely. Many organizations have had to reallocate a part of their resources to the delivery of aid packages for people most affected by the pandemic (LGBTI Roma, trans people, sex workers, homeless youth, and so on). Most services, such as free legal aid, have been interrupted.⁷⁶

b) Loss of funding

The organization Come Out in Novi Sad reported a loss of funds, even for projects that were in the middle of implementation, risking the closure of the community center.

⁷⁶ "Questionnaire."

The Pride march, which takes place each May, was also cancelled. Another negative impact was the loss of human resources due to financial shortfalls and general burnout. The organization Labris in Serbia also reported a loss of funding, as funders are not replying to e-mails and the group has not received responses on the grants they have applied for—everything is on hold. In Slovenia, Legebitra reported that working remotely has left a huge administrative and financial burden on the organization. More worryingly, the government’s recent plan to cancel or reduce funding for CSO programs—especially those affiliated with the LGBTI community—is expected to have a negative impact on the functions of the organization. The impossibility of organizing for-profit and gainful events, such as trainings, which are a substantial part of the organization’s income, has also added new challenges.⁷⁷

6. Conclusions and recommendations

Ministries of Health and other relevant public health authorities:

- Take immediate steps **to reestablish pre COVID-19 levels of HIV/AIDS testing, information and care services for LGBTI people**. Specific efforts are necessary to increase the accessibility of services for people living in smaller towns and rural areas during the lockdown measures, as public transport might be limited. Health authorities across the region should work closely with CSOs to ensure that HIV/AIDS services are not interrupted, including testing, counseling, prevention efforts, harm reduction measures, and so on.
- **Ensure pre COVID-19 levels of trans specific health services are reestablished quickly** and work with LGBTI CSOs to identify and address gaps in the provision of treatments and services that are necessary in the transition process and for the overall well-being of transgender people. Countries that have no trans-specific health services should consider **training health practitioners on such issues and importing essential medications** in order to allow trans people to seek the care they need in their home country.
- **Develop targeted outreach strategies and information campaigns for sexual and gender minorities on COVID-19 risks and prevention measures** in cooperation with LGBTI CSOs.
- The COVID-19 pandemic has demonstrated that while governments rightly rushed to impose lockdown measures, they did not have any efficient mechanisms in place to address issues pertaining to mental health, domestic violence, or homelessness. **Ministries of Health and other relevant government agencies should adopt appropriate procedures to enable the delivery of mental health and victim support services during future lockdowns in an accessible manner**; for example, through telephone and video counseling. Governments should also consider allowing certain service providers, such as mental health and victim support providers, to continue operating as essential businesses during future

⁷⁷ “Impact of the COVID-19 Epidemic and Prohibition of Movement on the LGBTI Population,” 2–3.

lockdowns and governments are further encouraged to work with CSOs to ensure that these services reach the most vulnerable segments of society.

- The COVID-19 pandemic has shown how many of the important services for the LGBTI community (especially, but not limited to, those relating to HIV/AIDS and trans people) are centralized in the capital cities and thus essentially inaccessible to communities in the rest of the country while travel is restricted. **Efforts should be made to decentralize services for the LGBTI community and make them accessible across the country** by working with CSOs to provide those services to marginalized communities.
- **Train health practitioners on SOGI sensitive care and non-discrimination** to ensure health services, including COVID-19 information and care are accessible to sexual and gender minorities.
- **Engage LGBTI CSOs in the design and development of COVID-19 vaccination campaigns** early on.

Governments at large:

- **Governments should work toward the digitalization of information and service provision** (i.e., reporting violence, obtaining information, providing social services). The public health system should improve its communications and service delivery systems to be better prepared for future health crises. While further digitalization of service provision is desirable, governments should consider finding complementary ways to provide services to the poorest and most marginalized who often lack access to a cell phone and internet.
- **Governments should pay special attention to the unique needs of elderly LGBTI people** by equipping LGBTI CSOs with the tools and resources needed to provide specific help to those in need, keeping in mind that many older LGBTI people are afraid to be open about their identity.
- The pandemic has underscored the importance of community and the ability to connect to networks of peers. Governments, CSOs, donors, and development partners should consider ways they **can strengthen local communities to become more accessible and inclusive for marginalized communities**.
- **Governments should work closely with LGBTI CSOs to provide basic food and health packages to the communities most in need** that they cannot otherwise reach, for example, young homeless LGBTI people, trans people, and so on.
- **Governments should not use the COVID-19 pandemic as an excuse to reduce funding for LGBTI CSOs.** Doing so at a time when funding for marginalized groups from traditional sources might also diminish will put crucial community services at risk of termination and could force CSOs to close entirely. Since many countries rely entirely on local CSOs to reach out to the LGBTI community, the impact would be extremely damaging and long lasting.
- **Governments should consult with all relevant stakeholders, including LGBTI CSOs, to ensure that legal and policy changes during the pandemic do not**

adversely affect vulnerable and marginalized communities. Effective monitoring measures should be put in place to allow for timely changes.

Donors and development partners:

- **Donor agencies should ensure financial support to LGBTI CSOs is continued and increased where necessary to address the needs of sexual and gender minorities effectively.** Since many countries rely entirely on local CSOs to reach out to the LGBTI community, a gap in funding would have long lasting negative impacts on LGBTI people.
- **Donors should communicate more efficiently with organizations and better assess their needs.** Institutional grants and core funding should be prioritized at a time when organizations are faced with issues of survival rather than ordinary concerns involving the delivery of advocacy and awareness projects. Trans and intersex organizations—already financially vulnerable even before the pandemic—report a loss of funding and are at risk of shutting down, as many are smaller and **cannot access funding from major donors.**

	Non-discrimination in access to health care services	Inclusive economic response	Meaningful stakeholder engagement
Ministries of Health	<ul style="list-style-type: none"> • Reinstate, at a minimum, pre COVID-19 levels of HIV/AIDS testing and care • Reinstate, at a minimum, pre COVID-19 levels of trans-specific health services including access to medication and counseling • Expand access to mental health and victim support services for LGBTI people i.e. by expanding phone counseling hotlines • Decentralize health services (i.e. HIV/AIDS, transgender care, mental health services) for the LGBTI community and make them accessible across the country • Train health practitioners on SOGI sensitive care and non-discrimination 		<ul style="list-style-type: none"> • Work with LGBTI CSOs to identify and address gaps in HIV/AIDS testing, counseling, prevention efforts, and harm reduction measures • Develop targeted outreach strategies and information campaigns for sexual and gender minorities on COVID-19 risks and prevention measures together with LGBTI CSOs • Work with LGBTI CSOs to identify and address gaps in mental health services and victim support services for LGBTI people • Engage LGBTI CSOs in the design and development of COVID-19 vaccination campaigns early on
Governments at large		<ul style="list-style-type: none"> • Ensure social protection, cash transfer programs, and other basic needs support is accessible to LGBTI people in need by training relevant public servants on non-discrimination • Pay particular attention to the needs of marginalized communities are address in recovery and rebuilding efforts 	<ul style="list-style-type: none"> • Work with LGBTI CSOs to ensure sexual and gender minorities are aware of existing social protection programs and empower them to seek services when necessary • Work with LGBTI CSOs to identify and address the needs of elderly LGBTI people who often lack family support systems • Ensure continued funding of LGBTI CSOs and other organizations providing critical services to the community
Donors and development partners			<ul style="list-style-type: none"> • Ensure continued funding of LGBTI CSOs and other organizations providing critical services to the community • Communicate effectively with LGBTI CSOs and other CSOs to ensure the needs of the most vulnerable are met

7. Strengthening SOGI Inclusion in the World Bank's COVID-19 Response

With the robust funding commitments to help clients respond to COVID-19, there are opportunities to address the needs of sexual and gender minorities and limit the impacts described above. These include:

Health and Health Services

- Ensure existing health needs of sexual and gender minorities, including access to HIV/AIDS treatment and prevention and access to hormonal treatments for transgender people, are met and not suspended during the response to the pandemic.
- Enable providers of mental health and victim support services to continue operating by providing the necessary legal framework and resources to for example provide counseling services by phone or video.
- Provide reliable health information and government guidance in accessible and appropriate formats and work together with sexual and gender minority CSOs to reach the community effectively.
- Allow community organizations to resume their support programs in a safe and responsible manner and where necessary provide additional support (i.e. expand access to community support services through support telephone lines or food donation programs).
- Ensure privacy and patient confidentiality standards are maintained.
- Monitor impacts on sexual and gender minorities by collecting disaggregated data for prevention, preparedness, and community-based disease surveillance by sexual orientation and gender identity where possible to do so while maintaining standards of safety, confidentiality and anonymity of individuals.⁷⁸ This should include data on differentiated rates of infection, economic impacts, barriers to access to essential services and support programs.
- Train health workers, including community health workers or volunteers in rural communities, government officials, emergency planners, and other stakeholders on SOGI issues.

Education

- Ensure that sexual and gender minority youth have access to food, internet/radio, school supplies, etc. and that they are able to participate in distance learning.

⁷⁸ <https://aidsaction.org.au/images/resource-library/LGBTIQ%20Inclusive%20Data%20Collection%20-%20a%20Guide.pdf>

- Support sexual and gender minority youth and their families in returning safely to school.

Economic and Employment Impact

- Ensure the unemployment resources and economic stimulus efforts explicitly provide resources for sexual and gender minorities who lose their job or are furloughed as a result of social mitigation measures.

Social Protection and safety nets

- Strengthen social security and other social protection, particularly for people in the informal sector and gig economy (i.e. many sexual and gender minorities, including those who rely on sex work).
- Support, where possible, clients in providing food and other basic essentials to the most marginalized sexual and gender minorities. Argentina and Peru for example provide food packages to transgender people living on the streets and who rely on sex work as their only source of income.

In addition to these sector-specific responses, there are also critical multi-sectoral and broad policy efforts that the World Bank and its clients can work on to improve SOGI-inclusion in their COVID-19 responses, including:

- Ensuring non-discrimination requirements set forth in the ESF and related SOGI Good Practice Note⁷⁹ are implemented and monitored effectively.
- As legislative frameworks related to SOGI, as well as the resources sexual and gender minorities have access to, can vary greatly between countries, such differences should be taken into account when designing and implementing COVID-19 response projects.
- Strengthening SOGI-disaggregated data collection to address and mitigate risks to sexual and gender minorities during outbreak situations.
- Ensuring sexual and gender minorities as well as other marginalized populations such as persons with disabilities or Indigenous Peoples can participate in consultations and citizen engagement as part of COVID responses, as well as economic recovery programs in ways that ensure the safety and privacy of the participants. Where possible these organizations should also be included in third party monitoring frameworks to ensure that COVID-19 response projects are inclusive and limit the possibility of SOGI-based discrimination.

⁷⁹ World Bank. 2019. [Good Practice Note Non-Discrimination: Sexual Orientation and Gender Identity \(SOGI\)](#).

