



# **The Essential Briefing on the Impact of COVID-19 on LGBT Communities in the UK**

**April 2020**

The Coronavirus disease 2019 (COVID-19) has had an unprecedented effect on the daily lives of everyone in the UK. The impact of the virus is widespread; however individuals from marginalised or disadvantaged groups who already experience poorer outcomes in healthcare may be disproportionately affected by the current situation. This briefing paper focuses on the impact of COVID-19 on lesbian, gay, bisexual and trans (LGBT) communities. It is also important that decision makers consider the impact on other minority identities such as disabled people and Black, Asian and Minority Ethnic people.

## **1. Health Implications**

There is still a great deal that is not known about COVID-19, including exactly how it is spread and what the risk factors are. Additionally, there is no robust evidence to demonstrate that LGBT people are more likely to catch COVID-19 or that mortality rates are higher in LGBT communities. However due to a number of health inequalities that LGBT people experience, some sections of LGBT communities may be at higher risk from being severely affected by the virus.

### **1.1 HIV**

HIV disproportionately affects gay and bisexual (GB) and other men who have sex with men (MSM). In 2018, 51% of the people who were diagnosed with HIV were GB men.<sup>1</sup> Trans women are also thought to be disproportionately affected although there is a lack of data on prevalence in the UK<sup>2</sup>.

The majority of people living with HIV should not be at higher risk as people on HIV treatment with a good CD4 count (anything over 200) and an undetectable viral load do not have a weakened immune system.<sup>3</sup> However, Avert has stated that researchers can speculate with confidence that the risk of severe COVID-19 may be greater in people who are not on antiretroviral treatment and are not immunosuppressed. This includes people with low CD4 counts or who are not virally suppressed.<sup>4</sup> Additionally BHIVA advises that people living with HIV with a CD4 count of under 50 or people who have been diagnosed with an opportunistic infection

<sup>1</sup><https://www.tht.org.uk/hiv-and-sexual-health/about-hiv/hiv-statistics>

<sup>2</sup><https://www.avert.org/professionals/hiv-social-issues/key-affected-populations/transgender>

<sup>3</sup><https://www.tht.org.uk/news/coronavirus-covid-19>

<sup>4</sup><https://www.avert.org/coronavirus/covid19-HIV>



**Achieving  
Equality**



**Encouraging  
Wellbeing**



**Promoting  
Safety**

in the last 6 months should stay at home at all times and avoid face to face contact for 12 weeks.<sup>5</sup> This means that trans people with HIV are potentially more likely to be at risk as 2016 data revealed that trans adults with HIV were twice as likely as other adults to be diagnosed late with a CD4 count of <350 mm.<sup>6</sup>

## 1.2 Long Term Conditions

Research has shown that LGBT people are more likely to be living with long-term health conditions. For example, a 2019 study found that LGBT people aged 50+ have poorer self-rated health and are more likely to have other conditions that impact their health and wellbeing.<sup>7</sup> It is well documented that having certain long-term conditions makes people at higher risk of getting seriously ill from COVID-19.

## 1.3 Physical Activity

Research has found that 55% of GBT men, 56% of LGBT women and 64% of non-binary people are not active enough to maintain good health, compared to 33% of men and 45% of women in the general population. Physical inactivity is responsible for up to 40% of many long-term conditions<sup>8</sup> and certain long-term conditions are known to increase the risk of being severely affected by COVID-19. Experts from the Centre for Perioperative Care at have said that regularly exercising can make it less likely that people will be admitted to intensive care with COVID-19.<sup>9</sup>

## 1.4 Smoking

LGBT people are more likely to smoke compared to the general population. 18.8% of heterosexual people smoke, this compares to 27.9% of lesbian women, 30.5% of bisexual women, 23.2% of gay men and 26.1% of bisexual men.<sup>10</sup> A 2012 study found that 19% of trans people in the UK and Ireland smoke.<sup>11</sup> This means a higher proportion LGBT people are at more risk as a systematic review of evidence related to COVID-19 and smoking concluded that '*smoking is most likely associated with the negative progression and adverse outcomes of COVID-19.*'<sup>12</sup> Sharing cigarettes, which is something that particularly common among the most disadvantaged

<sup>5</sup> <https://www.tht.org.uk/news/coronavirus-covid-19>

<sup>6</sup> <https://sti.bmj.com/content/94/5/318>

<sup>7</sup> <https://ilcuk.org.uk/dismay-as-new-report-reveals-that-health-inequalities-continue-to-disadvantage-older-lgbt-people/>

<sup>8</sup> <https://www.nhs.uk/conditions/coronavirus-covid-19/advice-for-people-at-high-risk/>

<sup>9</sup> <https://www.bbc.co.uk/news/uk-52076856>

<sup>10</sup> <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthinequalities/adhocs/009373theoddsfsmokingbysexualorientationinengland2016>

<sup>11</sup> [https://www.gires.org.uk/wpcontent/uploads/2014/08/trans\\_mh\\_study.pdf](https://www.gires.org.uk/wpcontent/uploads/2014/08/trans_mh_study.pdf)

<sup>12</sup> <http://www.tobaccoinduceddiseases.org/COVID-19-and-smoking-A-systematic-review-of-the-evidence,119324,0,2.html>



smokers, LGBT people included, is a way in which the virus is spread person to person.<sup>13</sup>

## 1.5 Alcohol and Drug Use

LGBT communities have higher rates of recreational drug and alcohol use. In 2013/14, 28.4% of LGB adults had taken drugs in the last year, including 33% of GB men and 22.9% of LB women. This compares to 8.1% of heterosexual adults.<sup>14</sup> A 2018 survey found that 1 in 6 LGBT people drank alcohol almost every day compared to 1 in 10 adults in the general population.<sup>15</sup> People with drug and alcohol dependency may struggle to follow distancing and isolation guidelines and find clean drug-using equipment. They may need additional support to withdraw safely at home. Drugs that are smoked with tobacco are likely to contribute to similar risk factors to smoking. Smoking drugs like crack cocaine or heroin is an aggravating factor for COPD, methamphetamine use can cause pulmonary damage, and intravenous drug users are at higher risk of HIV hepatitis and liver cancers – all leading to weakened immune systems.<sup>14</sup> Additionally experts from the Centre for Perioperative Care have recommended that having alcohol free days could reduce the likelihood that people will be admitted to intensive care.<sup>16</sup>

## 1.6 Homelessness

LGBT people are more likely to be homeless. 24% of homeless people aged 16-24 are LGBT<sup>17</sup> and 18% of LGBT people have been homeless at some point in their lives, including 25% of trans people.<sup>18</sup> Homeless people are more likely to be in poor health, less likely to be able to self-isolate effectively, and many will face barriers to accessing primary care without a fixed address.

## 1.7 Chest Binding

Chest binding (compressing breast tissue to give the appearance of a flatter chest, often done by trans men and some non-binary people) can increase the risk of being severely affected. Clinical Lead of the National Gender Service, Dr Karl Neff, has advised, “*binding is not expected to put you at higher risk of infection. However, if*

<sup>13</sup> <https://blogs.bmj.com/bmj/2020/03/20/sharon-cox-risky-smoking-practices-and-the-coronavirus-a-deadly-mix-for-our-most-vulnerable-smokers/>

<sup>14</sup> <https://www.gov.uk/government/publications/drug-misuse-findings-fromthe-2013-to-2014-csew/drug-misuse-findings-fromthe-201314-crime-survey-for-england-and-wales>

<sup>15</sup> [https://www.stonewall.org.uk/system/files/lgbt\\_in\\_britain\\_health.pdf](https://www.stonewall.org.uk/system/files/lgbt_in_britain_health.pdf)

<sup>16</sup> <https://www.bbc.co.uk/news/uk-52076856>

<sup>17</sup> <https://www.akt.org.uk/Handlers/Download.ashx?IDMF=c0f29272-512a-45e8-9f9b-0b76e477baf1>

<sup>18</sup> [https://www.stonewall.org.uk/sites/default/files/lgbt\\_in\\_britain\\_home\\_and\\_communities.pdf](https://www.stonewall.org.uk/sites/default/files/lgbt_in_britain_home_and_communities.pdf)



*you become infected, binding could accelerate the symptoms and infection. This is not proven to be the case but is reasonable to assume.”<sup>19</sup>*

## 1.8 Accessing Healthcare

LGBT people are more reluctant to access healthcare and may delay/ avoid getting treatment due to fears of encountering LGBTphobia. A Stonewall survey found that 14% of LGBT people have avoided treatment for fear of discrimination because they are LGBT. This rises to 37% of trans of people and 33% of non-binary people.<sup>20</sup> This may mean that LGBT people with severe COVID-19 symptoms may delay accessing healthcare or may not access healthcare at all.

## 2. Impact of Safety Measures Related to COVID -19

Inequalities faced by LGBT communities may mean that the impacts of measures such as social distancing and self-isolation are particularly detrimental to LGBT people. This section outlines some of these impacts.

### 2.1 Mental Health

There is a wide range of research to show that LGBT people are disproportionately more likely to have poor mental health. A 2018 study found that 52% of LGBT people had experienced depression in the year preceding the survey. Additionally, 46% of trans people and 31% of cis LGB people thought about taking their life in this time. This compares to 1 in 20 adults in the general population.<sup>21</sup>

Factors related to COVID-19 such as having to staying inside, having normal routines disrupted, being unable to see loved ones, and anxiety around health are having a detrimental effect on the mental health of many people. These detrimental effects will disproportionately affect those living with long-term mental health conditions. People may be unable to access professional support for poor mental health, in particular face-to-face support. From 16<sup>th</sup> March to 5<sup>th</sup> April 2020 LGBT Foundation’s helpline saw 13% more calls about mental health compared to the period 24<sup>th</sup> February to 15<sup>th</sup> March 2020.

### 2.2 Social Isolation

LGBT people, and in particular older LGBT people, are more likely to be socially isolated. Research conducted on LGB people aged 50+ in Greater Manchester found that half had experienced feelings of isolation and 12% said they had no-one

<sup>19</sup> <https://gcn.ie/guidelines-chest-binding-covid-19/>

<sup>20</sup> [https://www.stonewall.org.uk/system/files/lgbt\\_in\\_britain\\_health.pdf](https://www.stonewall.org.uk/system/files/lgbt_in_britain_health.pdf)

<sup>21</sup> [https://www.stonewall.org.uk/system/files/lgbt\\_in\\_britain\\_health.pdf](https://www.stonewall.org.uk/system/files/lgbt_in_britain_health.pdf)



**Achieving  
Equality**



**Encouraging  
Wellbeing**



**Promoting  
Safety**

to turn to if they needed support.<sup>22</sup> This is incredibly concerning at a time when, more than ever, vulnerable people are in need of emotional and practical support. We know that LGBT people are already feeling the effects of social isolation as over the last two weeks LGBT Foundation's helpline has seen an increase of 64% in calls about isolation.

LGBT people are more likely to have a 'chosen family'. Chosen family describes people viewing their close friends as their family, often due to family rejection. People may be less likely to live with their chosen family compared to their biological family so may be separated from those closest to them at this time at this time.

### **2.3 LGBTphobic Family**

An issue that is particularly affecting LGBT young people is that many have found themselves isolating in a house with LGBT-phobic parents and family members. A recent [BBC News article](#) highlighted the issue, giving an example of Sam who has had to move back in with his parents after he lost his job. He said "*I saw the career I love disappear overnight, and now I'm stuck in isolation with homophobes.*"

From 16<sup>th</sup> March to 5<sup>th</sup> April 2020 LGBT Foundation's helpline saw 70% more calls about transphobia and 36% more calls about homophobia compared to the period 24<sup>th</sup> February to 15<sup>th</sup> March 2020.

People having LGBTphobic parents and carers is still a huge problem in the UK, akt found that 77% of homeless LGBT young people said that being LGBT was a causal factor in rejection from home.<sup>23</sup> A 2019 survey found 11% of parents who responded would feel uncomfortable living at home with their child if they came out as LGBT.<sup>24</sup>

akt have recently recommended that LGBT young people 'pause' coming out. akt CEO Tim Sigsworth has said "*you can't predict at these completely unprecedented times how your parents will react. They, like you, are under a lot of stress and they may not react in a positive way.*"<sup>25</sup>

### **2.4 Domestic Abuse**

LGBT people are more likely to face domestic abuse. A 2018 study found that 11% of LGBT people have faced domestic abuse from a partner in the last year in comparison to 6% of women and 3% of men in the general population.<sup>26</sup> Social

<sup>22</sup> <https://s3-eu-west-1.amazonaws.com/lgbt-media/Files/8e1ae51d-2562-4992-8988-f3e17452a39a/State%2520of%2520the%2520City.pdf>

<sup>23</sup> <https://www.akt.org.uk/Handlers/Download.ashx?IDMF=c0f29272-512a-45e8-9f9b-0b76e477baf1>

<sup>24</sup> <https://www.akt.org.uk/news/akt-yougov>

<sup>25</sup> <https://news.sky.com/story/coronavirus-lgbt-charity-says-young-people-should-pause-coming-out-in-lockdown-11968551>

<sup>26</sup> [https://www.stonewall.org.uk/sites/default/files/lgbt\\_in\\_britain\\_home\\_and\\_communities.pdf](https://www.stonewall.org.uk/sites/default/files/lgbt_in_britain_home_and_communities.pdf)



isolation means that many are trapped inside with abusive partners or family members and domestic abuse is on the rise. The National Domestic Abuse helpline has seen a 25% increase in calls and online requests for help since the lockdown.<sup>27</sup> As LGBT people are more likely to experience domestic abuse this rise is likely to be disproportionately affecting LGBT people, this disproportionate impact may be being further exacerbated by the fact some LGBT people are isolating with LGBTphobic family members or roommates.

In Greater Manchester, many domestic abuse victims are now being housed in hotels, this is concerning as the national strategy to house victims of domestic abuse in hotels omits LGBT victims and instead focuses on cis straight women and children. This may mean that the issue of a lack of support and acknowledgment for LGBT domestic abuse victims is exacerbated during this time.

## 2.5 Being Unable to Access Confidential Support

Many LGBT people live with people who are LGBTphobic and/or are not out to those they live with. LGBT people need to be able to access confidential support in order to be safe during lockdown. Through LGBT Foundation's wellbeing services, we are seeing more people concerned about the lack of confidential spaces available for people to speak freely with us. It is incredibly important that LGBT people are able to access confidential support at this time.

This can be challenging for LGBT charities. Mermaids, a charity that supports gender-variant children and their families, recently added a quick exit button on their homepage to help young people at risk of transphobic abuse and violence receive anonymous support online. This received criticism in the Mail on Sunday who reported that '*a transgender charity has been accused of exploiting the coronavirus crisis by helping children who look at its website to hide their activities from parents*'.

## 2.6 Trans and Non-Binary Health

There are a number of concerns related to COVID-19 for trans and non-binary communities.

LGBT Foundation has received numerous reports from trans and non-binary people who have been denied access to prescribed and scheduled hormone injections, with some being told that these are 'non-essential'. The World Health Organisation guidelines on essential services include the provision of medications for ongoing mental health conditions<sup>18</sup>, which these injections would fall under.

---

<sup>27</sup> <https://www.bbc.co.uk/news/uk-52157620>



**Achieving  
Equality**



**Encouraging  
Wellbeing**



**Promoting  
Safety**

LGBT Foundation reached out to a number of Pride in Practice Champion GPs for additional advice. This included:

- RCGP guidelines say that practices should aim to continue essential injections (including testosterone) regardless of the scale of the virus outbreak. Where appropriate, practice staff may consider teaching patients to self administer<sup>19</sup>.
- Other options include the changing to longer acting injections if possible. For example, Nebido testosterone injections can be given in 3 month form. If the risk of coming in for testosterone injection is considered too great then topical preparations such as Testogel could be substituted.
- Routine blood monitoring can wait but should not delay the administration of hormone therapy.

Additionally GP Dr Kamilla Kamaruddin has said *'many trans patients are not getting their hormone injections during this COVID-19 crisis & this might increase their dysphoria. I appeal to all health care professionals to continue their treatment. By wearing adequate PPE this can be done safely'*. GP Dr Philippa James has described hormone injections as *'one of the essential services we are providing'*.

Gender Identity Clinics have frozen their waiting lists and other services, such as gender affirming surgeries, have been cancelled. This will be very distressing for many, especially considering that under normal circumstances the average waiting time for a first appointment with a Gender Identity Clinic is 18 months and can be as long as two and a half years.<sup>28</sup>

Trans and non-binary people are more likely to be disabled and living with long-term conditions. These communities may be impacted particularly severely by the crisis and may be more in need of support.<sup>29</sup>

Another concern for trans and non-binary people is that scoring for ventilators has sex-based factors, the impact of this on trans patients and the clinical risks for trans and non-binary people have not been explored.

## **2.7 Substance Misuse**

LGBT people are more likely to misuse alcohol and take illicit drugs.<sup>30</sup> Issues related to self-isolation and social distancing such as stress, being unable to access usual

<sup>28</sup> <https://www.bbc.co.uk/news/uk-england-42774750>

<sup>29</sup> [https://secure.manchester.gov.uk/downloads/download/6603/research\\_study\\_into\\_the\\_trans\\_population\\_of\\_manchester](https://secure.manchester.gov.uk/downloads/download/6603/research_study_into_the_trans_population_of_manchester)

<sup>30</sup> <https://s3-eu-west-1.amazonaws.com/lgbt-media/Files/b9398153-0cca-40ea-abe-b-f7d7c54d43af/Hidden%2520Figures%2520FULL%2520REPORT%2520Web%2520Version%2520Smaller.pdf>



support, being isolated and being bored may be triggering people to misuse substances.

LGBT Foundation's substance misuse team have seen two service users who have relapsed after their longest time abstinent and attribute this directly to COVID-19. For our service users, boredom and loneliness are two of the most commonly cited triggers. This period will be challenging, and in some cases incredibly detrimental, for those who have faced substance misuse issues.

## 2.8 Sexual Health

As well as being disproportionately impacted by HIV, 96% of those on the PrEP trial are men who have sex with men (MSM).<sup>31</sup> There has been a significant amount of misinformation shared about PrEP and COVID-19, with some people stopping taking PrEP, and others unable to access their usual PrEP source or prescription. We know that syphilis and gonorrhoea are rising amongst MSM, and that women who have sex with women (WSW) are 21% more likely to receive a positive diagnosis at a GUM clinic than heterosexual women.<sup>32</sup> COVID-19 safety measures often mean that sexual health drop-ins are unavailable. Many LGBT people will avoid healthcare settings they do not feel safe in, and are far more likely to access LGBT-specific services for support with their mental health and sexual health.

Sex workers – a group in which LGBT people are overrepresented - are more likely to experience social exclusion factors at this time. These include low income, unemployment, health problems, housing problems, discrimination and stigma, and lack of social support - all of which may contribute to higher risk of contracting COVID-19, and to poorer outcomes when unwell.

## 2.9 Employment and Wages

A 2019 survey found that LGBT employees in the UK take home on average £6,703 less per year compared to non-LGBT people, which equates to a pay gap of 16%.<sup>33</sup> The National LGBT Survey found that only 63% of trans people had a paid job at any point in the last 12 months,<sup>34</sup> compared to 75% of the general population.<sup>35</sup> This places LGBT people at increased financial risk during COVID-19.

## 2.10 Migrants and those Seeking Asylum and Refuge

---

<sup>31</sup>PrEP IMPACT Trial updates, NHSE Commissioning, 2020

<sup>32</sup>Beyond Babies & breast Cancer: Table 6: Number of STI Diagnoses & Services in England 2009-2012, Public Health England, UK, 2013 (data available at <http://www.hpa.org.uk/stiannualdatatables>)

<sup>33</sup><https://www.linkedin.com/feed/news/the-uk-hasan-lgbtq-pay-gap-4702500>

<sup>34</sup> <https://www.gov.uk/government/publications/national-lgbt-survey-summary-report>

<sup>35</sup> Office for National Statistics, 'Summary of labour market statistics', Dataset, 15 May 2018



LGBT asylum seekers and LGBT migrants are likely to experience significant financial hardship, poor mental health, insecure housing and social exclusion, particularly if their request for asylum or settled status is uncertain. Asylum seekers and refugees are unable to engage with legitimate employment and therefore may be forced into areas of work with fewer legal or financial protections, making lay-offs more difficult. This is a community who often struggle to navigate healthcare, and therefore may delay seeking medical assistance or may not seek it at all. Many members of this community have experienced significant trauma and need ongoing support, which will be harder to access during lockdown. From 16<sup>th</sup> March to 5<sup>th</sup> April 2020 LGBT Foundation's helpline saw 260% more calls about asylum and refuge compared to the period 24<sup>th</sup> February to 15<sup>th</sup> March 2020.

### **3. Further Reading:**

[British HIV Association – Covid-19 Guidance](#)

[Clinical Outcomes for Trans people accessing HIV Care in England](#)

[Prepster – Covid19 Tips & Tricks](#)

[NHS Advice on mental health issues if you're gay, lesbian, bisexual or trans](#)

Immigration advice regarding immigration and COVID-19 can be found [here](#).