



## **COVID-19 and the increase of domestic and gender-based violence against lesbian and bisexual women and non-binary, trans and intersex persons**

*Submission to the Special Rapporteur on violence against women*

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## Executive Summary

This submission describes the increase of domestic and gender-based violence against lesbian and bisexual women and non-binary, trans and intersex persons (LBTI women/persons\*).

It overviews the general situation with gender-based violence against LBTI women/persons and identifies specific factors contributing to this situation. These factors include the usage of the COVID-19 crisis to blame LGBTI persons and to increase social hatred and negativity; new restrictions affecting LBTI women/persons introduced during the pandemic; the delay in several important court proceedings which may improve the situation of LBTI women/persons; and the gender-based curfew laws and policies specifically affecting trans and gender non-conforming women/persons.

The submission considers in more detail three forms of gender-based violence faced by LBTI women/persons during the COVID-19 pandemic, namely domestic violence, including from family of origin and from partners; hate crimes; and police abuse.

It also provides an overview of problems with accessing health care by LBTI women/persons in general, and by specific groups, such as trans persons, intersex persons and sex workers in particular.

Finally, the submission describes good practice implemented by civil society and state authorities in different regions in order to support LBTI women/persons affected by gender-based violence during the pandemic.

## 1. General information

LBTI women/persons are affected by the general increase in gender-based violence increased during the COVID-19 pandemic.

For example, in **Egypt**, LBTI women/persons who often experience a wide range of oppression and violation based on their SOGIESC, were already vulnerable before the crisis of the COVID-19 outbreak; they are now dramatically struggling to survive after applying the precautionary measures. LBTI women/persons include persons who live at the margins of society and work in the informal economy like street vendors, care and sex workers, women with disabilities and those who living with HIV among other chronic illnesses, and gender non-conforming people. The measures taken by the Egyptian government fail to reach all women, because they are not gender-sensitive toward all gender identities, sexual orientation, gender expressions and sex characteristics. LBTI women/persons are isolated from the services and resources, and they have few opportunities to distance themselves from their abusers (family members, partners, etc.).

In **Argentina**, during the period of mandatory isolation, there was an increase in the number of LGBT+ women/prisoners.

In **Australia**, there were instances of neighbours complaining to police about trans people going out for legitimate purposes – a double effect, given initial transphobia from neighbours and then transphobic police behaviours.

At the same time, gender-based violence against LBTI women/persons is exacerbated due to additional factors specific for this populations.

First, in different countries **the COVID-19 crisis has been used to blame LGBTI persons and to increase social hatred and negativity** towards them. As the pandemic has grown, many have sought to scapegoat the

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\* This submission is aimed at highlighting the situation of lesbian and bisexual women and non-binary, trans and intersex persons (LBTI women/persons). However, when a source of information referred to another composition of populations, we use abbreviations related to the respective population groups: LGBT (lesbian, gay, bisexual and trans), LGBTI (lesbian, gay, bisexual, trans and intersex), LGBT+ (lesbian, gay, bisexual, trans and other), LGBTQ (lesbian, gay, bisexual, trans and queer), LGBTIQ (lesbian, gay, bisexual, trans, intersex and queer), LGBTIQ+ (lesbian, gay, bisexual, trans, intersex, queer and other), LBTQ (lesbian, bisexual, trans and queer), LGBTQI2S (lesbian, gay, bisexual, trans, queer, intersex and Two-Spirit).

LGBTI community and place blame for the virus on marginalized communities. Various States have used the pandemic to espouse homophobic or transphobic rhetoric.

In **Egypt**, the current Pope of Alexandria and Patriarch of the See of St. Mark mentioned in one of his ceremonies that Corona Virus is a punishment from God for same-sex relationships. This statement contributed to the increase in the rate of violence among Christian queer women.

In the **United States**, there have been numerous instances of people blaming the pandemic on what they claim to be "sexual sins"<sup>1</sup> and utilizing homophobic rhetoric to protest stay-at-home mandates.<sup>2</sup>

Similarly, in **Iran**, one academic has also blamed the LGBT community for the pandemic.<sup>3</sup>

The head of the Directorate of Religious Affairs agency in **Turkey** publicly insinuated that COVID was a punishment for homosexuality.<sup>4</sup>

In **Poland**, religious leaders are also citing coronavirus as a divine punishment for homosexuality and abortion.<sup>5</sup>

In **South Korea**, due to a cluster of coronavirus cases being traced back to Itaewon, an LGBT-friendly neighborhood, there has been a rise in stigmatization and the false association between testing positive for COVID-19 and being LGBT.<sup>6</sup>

Second, during the COVID-19 crisis **a number of states introduced new restrictions affecting LGBTI women/persons**. Such restrictions were either directly justified by the pandemic situation, or were adopted or discussed during the COVID-19 crisis.

In **Egypt**, the Public Prosecutor announced on 2 May 2020 the activation of the cyber-crime law to fight immorality behaviours that occur on cyber spheres; this included debauchery cases (LGBTI individuals). The Egyptian Public Prosecution announcement gives rise to online surveillance and monitoring persons' behaviour online, and prosecutes immoral acts that do not fit Egyptian society's values and traditions.

In **Hungary**, the government implemented a law preventing trans people from legally changing their gender after President Orban received extraordinary power for the duration of the pandemic under the "Enabling Law".<sup>7</sup>

Similarly, in **Poland**, the President Andrzej Duda, has increased his anti-LGBT rhetoric over the last three months and has pledged to implement a number of anti-LGBT policies as the upcoming presidential election gets closer. Included in his "Family Card" proposal, a document of pledges to uphold "traditional family values", these promises contain a plan to prohibit the teaching of LGBT issues in schools as well as a pledge to prevent same-sex couples from marrying or adopting children in Poland. <sup>8</sup> The Polish presidential elections, originally scheduled for the beginning of May, were pushed back to the end of June in response to safety concerns regarding COVID-19.<sup>9</sup> Although the anti-LGBT promises are not a direct response to COVID-19, Duda made them following the election extension that enabled his main competitor, Rafal Trzaskowski, to enter the race.<sup>10</sup>

Additionally, in **Russia**, a series of constitutional amendment was proposed to limit marriage to a heterosexual relationship between a woman and a man.<sup>11</sup> While the amendment is not a direct response or result of COVID-19, the pandemic and concerns of contracting the virus will affect the Russian peoples' ability to vote on the amendment.

In **Scotland**, the adoption of gender recognition legislation was delayed because of the COVID-19. As evidenced by Scott Cuthbertson, *Equality Network*:

*Updates to our gender recognition law, which saw a considerable anti-LGBTI effort against, have been delayed during the crisis – a move we support – but which has caused anxiety within our trans communities. The UK Government's Women & Equalities Minister appears to be taking an anti-trans agenda further with comments suggesting restricting access to transition healthcare for trans teenagers and to single-sex services. Mobilizing against this will be challenging.<sup>12</sup>*

Third, **the pandemic paused several important court proceedings which may improve the situation of LBTI women/persons.**

Efforts to effect changes to legislation that is discriminatory, such as laws criminalizing consensual same-sex sexual relations, including between women, or fails to protect people of diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC) are experiencing delays. Access to justice also has become harder, as courts adapt to restrictions to movement, physical distancing and other new regulations.

In **Botswana**, *LeGaBiBo* have reported that their decriminalisation court case appeal, which was due to be heard in July, is unlikely to take place until next year and that they cannot communicate or advocate as planned.

The *Eastern Caribbean Alliance for Diversity and Equality* launched constitutional challenges to buggery and indecency laws in **Antigua and Barbuda, Barbados, Grenada, Saint Lucia and St Kitts and Nevis** last year which are now delayed because of the new emergency measures in place in the respective countries.

In **Pakistan**, NAZ had submitted a petition to the Lahore High Court to address gaps in the Trans Protection Acts, including sections of the act which impair trans people's right to love and right to matrimony. However, the project under which the petition is funded ends in December and because of the disruptions, they anticipate cases will go into next year – but will no longer have the funds to pursue it.<sup>13</sup>

Fourth, **trans and gender non-conforming women/persons were specifically affected by gender-based curfew laws and policies.**

Gender-based curfew laws and policies have reportedly condemned gender-diverse persons to permanent seclusion while making trans individuals targets for humiliation and violence when going out.<sup>14</sup>

In response to COVID-19, numerous Latin American countries have established gender-separated days where individuals can go outside. Known as "separation by sex" or "peak and plate" policies, these mandates have created extremely tenuous situations for trans and non-binary individuals.

In **Peru**, a number of trans women were detained by the police when they tried to go out on the "women-only" days.<sup>15</sup>

In **Colombia**, many trans persons have been denied access to stores<sup>16</sup> or even attacked by police and non-state actors when they went outside.<sup>17</sup>

Similar harms and attacks have also occurred in **Panama**.<sup>18</sup>

Fortunately, many of the states with these policies have recently reversed or replaced them with non-gendered curfews to ensure protections for the trans communities.<sup>19</sup>

When experiencing gender-based violence, **LBTI women/persons frequently do not have access to helplines run by either civil society or state entities.**

As stated in a report by *OutRight Action International* on the effects of the pandemic on LGBTIQ people, "while many countries have established various forms of helplines to offer support, very few are geared to the specific issues facing LGBTIQ populations."<sup>20</sup>

Nivendra Uduman, a psychologist and ally to the LGBTIQ community in **Sri Lanka**, noted that there is a national COVID-19 counselling hotline provided by the National Institute of Mental Health staffed by nurses, as well as three private hotlines. While a positive resource for many, he stated that although private hotline counsellors have received some basic orientation on LGBTIQ issues, government hotline counsellors have not been trained. Interestingly, though, he said, "Transgender people are more likely to call the government hotline, so counsellors are more familiar with their calls, and they are also more visible, so issues may be discussed. But LGB people are not spoken about." As has always been the case, this means that communities themselves must develop their own mechanisms of support.<sup>21</sup>

In **Argentina**, helplines are available but they are not fast and effective. There are toll-free numbers but they often do not answer or give a busy line.

In **Egypt**, the National Council of Women's hotline receives calls to report violence against women. The Council is affiliated with the state as a governmental institution. The lack of clear anti-discrimination policies and the risks of being outed while talking freely with the hotline agents prevent LGBTI women/persons from approaching this service.

In **Luxembourg**, some NGOs working in the field of domestic violence have launched a special helpline for victims of domestic abuse and to some extent for victims of family violence. According to local LGBTI activists, '[w]e know from experience, that their communication is meant to be "neutral" regarding gender identity, which would mean, that this helpline is available to every person, regardless of gender and sexuality. But in reality, it is not adapted to take into account specific experiences of violence experienced by sexual and gender minorities.'

In **Australia**, there are some hotline services, but it is not clear if their workers are adequately trained, especially regarding intimate partner violence experienced by LGBTI women/persons.

There are also **other obstacles encountered to prevent and combat violence against LGBTI women/persons during the COVID-19 lockdowns.**

In **Luxembourg**, there are difficulties related to the lack of reliable data on violence. There is no systematic data collection which integrates LGBTIQ+ realities. LGBTI women are simply invisibilized and therefore excluded from measures and grants aimed to prevent violence against women. The *LGBTIQ+ Centre CIGALE* and the *Pink Ladies* group already pointed out these problems in the CEDAW report 2018.<sup>22</sup>

According to activists from **Argentina**, '[t]he isolation meant that many people were unable to leave their homes and provide help.'

In **Egypt**, the whole problem of gender-based violence exists in the conservative context in the country. Hetero-normative, homophobic, and transphobic society may condone violence against LGBTI women/persons, and sometimes it happens without any interventions from the police. On the contrary, police play a negative role in violence against women in general, and they can ensure the authority of parents over the bodies of women. With LGBTI women/persons, the police contribute to the violence by declining case reporting or by committing violations against victims in detention places. In some cases, local human rights defenders documented the cooperation of police officers to bring back lesbian and bisexual women to their parent's house once the father reported her escape even if she is not under his legal guardianship "adult"; and the escape usually came after long years of domestic violence and house confinement.

Law is also one of the main obstacles, The Egyptian state prosecutes LGBTI persons despite the absence of an explicit legal statute. In most trials, Law 10/1961 on Combating prostitution is used. Transgender/transsexual women are the most vulnerable group to be arrested by the police for their gender identity, and the police held them in unsuitable detention conditions where they are mostly detained in men detention places/prisons.

Adding to this, the legislative system does not recognize the right for protection of LGBTI women/persons. Egypt has significant deficiencies in legislation that protect women from social violence, domestic violence or violence based on SOGIESC.

The financial status of LGBTI women/persons is considered a huge obstacle because they are obligated to live or work with the people who violate them due to their financial needs.

## 2. Domestic violence

As noted in the OHCHR paper on COVID-19 and LGBTI people, “[d]ue to stay-at-home restrictions, many LGBTI youth are confined in hostile environments with unsupportive family members or co-habitants. This can increase their exposure to violence, as well as their anxiety and depression.”<sup>23</sup>

While contributing to the fight against the pandemic by staying at home, LGBT children, youths and elders are forced to endure prolonged exposure to unaccepting family members, which exacerbates rates of domestic violence and physical and emotional abuse, as well as damage to mental health.<sup>24</sup>

One of the main themes identified in a report by *OutRight Action International* on the effects of the pandemic on LGBTIQ people was the elevated risk of family or domestic violence:

*LGBTIQ people who face discrimination from family members due to actual or perceived gender identity or sexual orientation are at higher risk of domestic violence during a time of lockdown and quarantines. Indeed, interviewees reported either feeling at increased risk themselves or knowing others at increased risk of violence and abuse within their homes due to forced cohabitation with unsupportive family or abusive partners.*<sup>25</sup>

In response to COVID-19, nearly every nation has imposed strict stay-at-home and quarantine mandates on their populations. These orders have resulted in LGBT persons having to spend extended periods of time in their homes, often with family that may not accept their sexual orientation, gender identity or gender expression. With very little personal privacy being stuck indoors all day, many have either been inadvertently outed to their families, been forced to hide their identities by not expressing their sexuality or gender how they normally would or have had to spend all day with homophobic or transphobic family members.<sup>26</sup>

Many LGBT individuals have experienced domestic violence<sup>27</sup>, and these instances are growing, as people are required to stay at home.<sup>28</sup>

In **Nigeria**, a study conducted by *WHER* revealed an increase of human rights abuse especially towards LBTQ women isolating with their families and other relatives. Even though they avoid LGBTIQ-related subjects and try to conceal their sexual orientation and gender identity, 53.7% out of the 71.2% of the women who had to return home to friends, families and other relatives due to the pandemic reported of having being abused financially and 23.4% are being abused emotionally and psychologically.<sup>29</sup>

The confinement with the family of origin may be particularly problematic. As evidenced by an intersex person from **Argentina**:

*I find myself in the search of what the doctors did with my body, it is a quite complex situation since I live with people who lied to me most of my life, this situation is aggravated since I cannot leave my house because of the obligatory isolation that rules in the country, and I have to endure some situations to make the coexistence as peaceful as possible. The isolation produced a very important feeling of anguish that is aggravated by the lie discovered and the refusal to hand over my medical history by a doctor who operated on me in my adolescence.*

With many shelters closing due to the virus, LGBT persons have been forced to choose between staying in harmful housing situations or having to sleep in various friends' homes or on the streets.<sup>30</sup>

COVID-19 has exacerbated the tensions between many LGBT persons and their homophobic relatives and created a heightened risk of interpersonal violence by preventing individuals from escaping harmful spaces or homes they share with abusers.

At the same time, most of the states **do not collect domestic violence statistics disaggregated by SOGIESC** in general, and in the COVID-19 situation. This is the case for countries from different regions, from **Luxembourg**, where statistics includes only men/women, to **Egypt**, where LGBTI persons' identities are not recognized.

At the same time, individual cases or community members' evidences show that LBTI women/persons specifically suffer from domestic violence during the COVID-19 crisis.

For example, a 24-year old transwoman from **Saint Lucia** shared that her mother insisted she wear male clothing and cut her hair while in her mother's house, or her mother will put her out during curfew, which would mean that she would be arrested and sent to jail to face greater dangers.<sup>31</sup>

A bisexual woman from **China** told about her experience during the COVID-19:

*My relationship with my family is very oppressive. Because of my sexual orientation, my mother started to force me to get married to a man. Because I'm bisexual, they think they could correct my SOGIE. As a result, we fought many times and I threatened to leave home...There was a lot of psychological violence... Also, I was not able to meet my partner who is in another country. This has created a lot of problems for our relationship. My mother found out and she was very happy and kept on insulting my relationship. I was very upset. I also feel very lonely because I'm trapped at home, and I have no friends in this city. It is a very isolating experience and I feel depressed.<sup>32</sup>*

A queer woman from **Singapore** moderating a Facebook chat group described the situation in her community: 'There have been several emergency requests for housing by lesbians who are scared to live at home because of emotional and physical violence from their parents. They are asking friends if they have spare rooms to take them in.'<sup>33</sup>

Unfortunately, LGBTI women/persons **may have no access to shelters and other forms of support** in case of domestic violence committed against them.

For instance, in **Argentina**, a young trans woman Celeste was left on the street in the city of San Miguel de Tucuman because she could not afford to pay the rent. Different organizations tried to help her and find a temporary residence for her. However, a municipal shelter refused to admit Celeste saying that 'she was not a woman and could not stay in the same ward as the other ladies'.

In **Luxembourg**, a local group noted that as the question of intimate partner violence in same-sex relations is a taboo, victims would not consult either the LGBTIQ+ Centre, or a domestic violence shelter. Young LGBTIQ people may be living without resources and without income, being forced to live in families who do not accept their sexuality or identity. For young people who have not yet come out, being away from their support community or structures that can offer comfort and help, means having no trusted person and not being able to outsource their felt: painful confinement within confinement.<sup>34</sup>

As noted by activists working in **Egypt**:

*LGBTI women/persons face different forms of social and family violence e.g. corrective therapy, forced marriage, marital rape, forced confinement inside homes and deprivation from education, work and travel. LGBTI women/persons in light of the COVID-19 impact experience domestic violence during lockdown, which disproportionately affects those who have been forced to stay with unfriendly family members or flatmates. If violence is to happen, the options for those women/persons are severely restricted by the lack of essential care, legal and health services. There are no specialized shelters for LGBTI persons. Egyptian state under Ministry of Social Solidarity has initiated many shelters for women who face GBV, however these shelters does not have internal anti-discrimination policies which raise concerns among violence survivors within LGBTI women/persons so they regret to approach these shelters.*

*However, some LGBTI organizations support those who seek shelters in times of social violence and crisis. Specialized emergency programs are created for relocation inside the country with providing living expenses and legal intervention. But these programs are limited in terms of capacity, resources and vulnerable to security threats.*

### 3. Access to health services

As noted in the OHCHR paper on COVID-19 and LGBTI people,

*LGBTI people regularly experience stigma and discrimination while seeking health services, leading to disparities in access, quality and availability of healthcare. Laws that criminalize same-sex relations or that target trans persons die to their gender identity or expression, exacerbate negative health outcomes for LGBTI people, as they may not access healthcare services for fear of arrest or violence. Examples of health care discrimination can elevate the risk for LGBTI people from COVID-19...*

*Given overloaded health systems, treatment of LGBTI people may be interrupted or deprioritized, including HIV treatment and testing, hormonal treatment and gender affirming treatments for trans people.<sup>35</sup>*

The reallocation of health resources due to the COVID-19 crisis has created or exacerbated shortages of antiretrovirals for those living with HIV, while also impacting the ability of trans men and women to receive hormonal therapy or gender-affirming care. Gender-based curfew laws and policies have reportedly condemned gender-diverse persons to permanent seclusion while making trans individuals targets for humiliation and violence when going out.<sup>36</sup>

The disruptions in health care access and the reluctance to seek care were also mentioned among the main themes identified by *OutRight Action International* in their report on the effects of the pandemic on LGBTIQ people:

*The COVID-19 pandemic has overwhelmed even relatively functional health systems around the world, which have been plagued with shortages of personal protective equipment, test kits, and specialized equipment such as ventilators. In countries where health systems are weak and already overwhelmed, the prospect of effectively addressing the COVID-19 pandemic is daunting. Even in the absence of a pandemic, LGBTIQ people around the world face discrimination, stigma, refusal of services, and confidentiality breaches within health services. It is no wonder, then, that LGBTIQ people may be reluctant to seek care now, even when the situation is dire.<sup>37</sup>*

During the pandemic, *Human Rights Watch* has documented health care discrimination based on sexual orientation and gender identity in countries including the **United States, Tanzania, Japan, Indonesia, Bangladesh, Russia, and Lebanon**.<sup>38</sup>

Research studies conducted in some countries confirm this problem as well.

In **Canada**, *Egale Canada*, in partnership with *INNOVATIVE* and *Lucid*, issued a report on the effects on COVID-19 on the local LGBTQI2S community, based on an online survey conducted among 2,610 Canadian adults from 24 to 29 March 2020. The survey found that LGBTQI2S community reported greater current and expected impacts of COVID-19 on their physical and mental health, and overall quality of life. 29% of LGBTQI2S people are living with a chronic health condition, compared to 15% of non-LGBTQI2S people. 42% of the LGBTQI2S community reported significant impacts on their mental health in the current situation compared to 30% of non-LGBTQI2S people. The expected significant impact on mental health in two-month time rises to 58% for the LGBTQI2S community compared to 42% of non-LGBTQI2S people. 21% of LGBTQI2S people with chronic illnesses report a significant impact on their physical health right now. The expected significant impact on physical health in two-month time rises to 43%, compared to 30% for non-LGBTQI2S people.<sup>39</sup>

Being able to afford and access medical care is essential to testing for COVID-19, as well as treating the symptoms of the disease.

In the **United States**, the *Human Rights Campaign*, in partnership with *PSB Research*, issued a report on the economic impact of COVID-19 on the LGBTQ community. The report found that in the United States, LGBTQ people are more likely than their non-LGBTQ peers to lack health coverage or the monetary resources to visit a doctor, even when medically necessary. According to HRC Foundation's analysis of the 2018 BRFSS, 17% of LGBTQ adults do not have any kind of health insurance coverage, compared to 12% of non-LGBTQ adults. Furthermore, 23% of LGBTQ adults of colour, 22% of transgender adults, and 32% of transgender adults of colour have no form of health coverage. This can lead to avoidance of medical care even when medically necessary, and to severe economic hardship when medical care is ultimately accessed.<sup>40</sup> In addition, many

LGBTQ people face a higher risk of having various illnesses that either increase the risk of contracting COVID-19 or amplify complications after contraction.<sup>41</sup>

Additionally, many LGBT individuals delay seeking medical treatment out of fear of discrimination from healthcare providers, which puts them at a greater risk of death when experiencing severe coronavirus symptoms.<sup>42</sup> This is further exacerbated in states that allow healthcare workers to deny treatment to LGBT patients for personal or religious beliefs, as it is the case for example in the legislation introduced by the U.S. Trump administration.<sup>43</sup>

In **Egypt**, access to healthcare for LGBTI women/persons is particularly sensitive and difficult even under normal circumstances, as homosexuality is repressed through charges of debauchery, and trans and intersex people's identities are pathologized. This results in institutional violence, torture, discrimination and arbitrary detentions, and therefore LGBTI women/persons might not even seek medical and psychological assistance, which puts them at higher risk. Moreover, neither official nor private sectors in Egypt offer sexual and reproductive health services specifically designed for LGBTI women/persons where they can access securely.

The pandemic is also having a heavy impact on the mental health of many LGBT persons. A study conducted in **Israel** found that the trauma of living in threatening homes with no chance to get outside and find relief has led to increased reports of depression and suicidal ideation amongst LGBT teens in particular.<sup>44</sup> The limited access to healthcare and mental health providers is only further compounding these issues.

Trans and intersex persons, as well as sex workers, are particularly vulnerable to discrimination in health care during the COVID-19 pandemic.

With the global pandemic pushing hospitals to their brink of capacity, many so-called "elective" procedures have been postponed indefinitely, including gender-affirming surgeries in the **United States**<sup>45</sup> and other places.

According to the results of the survey conducted by the *Asia Pacific Transgender Network*, 43.2% of the respondents, trans and gender diverse people, had no or limited access to gender-affirming care during the COVID-19 crisis; 67.1% of the respondents do not have national health insurance, and 72.9% do not have private health insurance.<sup>46</sup> As one of the respondents mentioned, 'I might not be able to access gender affirming health services. My biggest fear is growth of facial hair. It will not only make me feel more dysphoric but also make me prone to social violence and stigma.'<sup>47</sup>

In **Russia**, there were several cases reported where trans people who had become sick with coronavirus-like symptoms had not sought out care, but rather were isolating in their homes:

*They are terrified of ending up in hospitals, in isolation units where their gender identity is not respected, where they have no access to any kind of support, which is amplified under quarantine conditions with levels of transphobia high, and the possibility of leaving basically being zero. The hospitals in which people are isolated in conditions of a pandemic are more like penal colonies and prisons. People have no exit, no visitation, and face high levels of transphobia and possible abuse. This is incredibly frightening.*<sup>48</sup>

One transgender man from **Kenya** evidenced:

*Previously, to access my hormones, I had to travel from Kisumu to Nairobi. Now, due to the increased risk of contracting the virus and my financial situation, I can no longer make the journey. The hormones are not available in the only pharmacy we have in Kisumu, and they are not sure if they will be able to procure them in the future. They referred me to another hospital, but the price has increased from Ksh 1700 to over 2100. I am thus unable to stock up on hormones and wonder how I will manage if the situation escalates. On top of this, due to shortness of breath being a symptom of the coronavirus, I have had to take a break from using chest binders, which has caused me terrible body dysphoria.*<sup>49</sup>

In **Liberia**, a transwoman noted that since health facilities started restricting their attendance to 30 people per day, many people living with HIV are having difficulty accessing their ARVs. She would like to be able to negotiate three or four-month prescriptions, but she said, '[There is] always an issue with limited access to

medications within the country... because they also don't have access. So, those who have access to their medications also have to share them with others who do not have access...It is a huge challenge.'<sup>50</sup>

In **Chile**, despite a gender identity law in place, no health policy to go with it. '[As a result] we have always had problems getting hormones for trans people. Now the hospitals are focused only on the COVID-19 situation. They have already put aside everything they normally do. One of the things that will be left out almost entirely are plans for trans people. People say they can't go get their hormones, and hospitals say that they don't have them.'<sup>51</sup>

A transwoman from **Brazil** described the challenges of sex workers who have no choice but to continue working the streets but are likely to face discrimination within health care services:

*Most of them go to the street and are much more vulnerable to contracting the virus, and to suffer prejudice in the health service, which is already something that happens. If trans people have viruses and go to a hospital, people will be discriminatory, people will not choose to save trans lives when people have to choose who lives. I do not doubt that we are the people who will be discarded from medical care.'*<sup>52</sup>

In the **Netherlands**, trans people face problems while trying to purchase medication. According to one trans woman, "The pharmacy refused to provide me with my hormone treatment, as it is not deemed a priority in such a situation. I had to fight with my pharmacy and health insurance to get the medication. I'm scared that trans people will face problems in the future if the situation gets worse, and that they will not be able to get their hormone treatments."<sup>53</sup>

Transition-related medical care, which is life-saving care for trans people, may be deemed non-urgent and postponed or cancelled in the light of COVID 19. However, two specific components of transition-related medical care must not be considered non-urgent: continuation of ongoing hormonal therapy and surgical aftercare for previously-conducted surgeries. For these procedures, delays or cancellations of care can lead to infection, surgical scarring and re-injury sometimes requiring additional surgical correction, chronic pain, hormone imbalances, osteoporosis, migraines, and de-transition, among others. Physical consequences are coupled with psychological consequences, such as depression, anxiety, heightened dysphoria, self-harm, suicidal ideation, and suicide attempts. Many intersex people, both those who identify as cis and as trans, need access to continuing care for hormones, and risk similar consequences when this care is suspended.<sup>54</sup>

Intersex people, who often have histories of hypermedicalisation, complex medical histories, and non-consented procedures, often need to travel long distances to access specialised care with a trusted provider. Lockdowns and travel restrictions severely limit this access.<sup>55</sup>

An intersex person from **Europe** evidenced:

*"I know of cases here in Europe that people had go to hospitals to get treatments to repair damaged genital mutilation in childhood...Hospitals are not the safest place to be right now...If you're bleeding from your genital mutilation scars, and you're not going to bleed out, you are not a priority...What happens if your doctor doesn't answer your calls because he is busy, you can't get prescription renewals, pick up hormones at the pharmacy, or you have to make that extra trip when you're supposed to be isolating or social distancing?"*<sup>56</sup>

In **Kenya**, intersex people face problems related to health care as well:

*Intersex persons have had bad experiences with medical service providers, and any trust we may have had in them is broken. As a result of medically invasive procedures and diagnoses to intersex persons, the hormones many of us have been prescribed and had to take have resulted in compromised immunity among much of the community. Therefore intersex people are more susceptible to the virus if we are exposed. And because of the negative experiences with health care providers, and the discrimination we face, we likely won't be able to attain emergency services. Most of us won't even try to go to hospital because of the questions we are asked and the discrimination that leaves us vulnerable and feeling like the services are not for us.'*<sup>57</sup>

For LGBT individuals living with HIV, the pandemic poses an even starker risk. Across the world, individuals living with HIV are having greater difficulty accessing lifesaving medications as hospitals, pharmacies, and clinics either shut down, run low on medication, or become testing and treatment sites for the virus, forcing many to have to risk a greater threat to COVID-19 exposure in order to access their medication.<sup>58</sup>

## 4. Hate crimes

For some LGBTI women/persons confinement during the COVID-19 pandemic means less risk to experience hate-motivated violence from strangers. However, trans and gender non-conforming people may be attacked on streets, and sex workers are especially vulnerable because of the changed conditions.

In **Argentina**, in the province of Buenos Aires, Gabriela H. survived an attempted transvesticide in her own home in the early morning of 13 April 2020. Unable to do sex work in the streets because of the isolation measures, she served in her private home. The attacker grabbed her by the neck and stabbed her and her friend who lived in another room several times.<sup>59</sup>

In **Egypt**, lesbian and bisexual women experience online and offline violation by heterosexual men resulted from using dating applications, where violators pretend to be women to meet LGBTI women. Such incidents are under reported by survivors fearing backlash. With the increase of using online platforms during the pandemic this increased the reported cases of cyber violence.

## 5. Police abuse

The existence of criminalization laws in many countries makes LGBTI women/persons more vulnerable to police abuse and arbitrary arrest and detention in the context of movement restrictions and curfews.<sup>60</sup>

Policing of emergency measures can involve discrimination by the police as regards SOGIESC, in particular when making judgements about who lives in a household, disrespecting same-sex partnership and LGBTI families, which is often worsened by intersecting factors such as race. Furthermore, many trans people are unable to access identity documents presenting their correct name, gender marker, or photo, and increased police identity and paperwork checks can expose them to increased harassment, discrimination, and violence in this context. Increased police interactions also have exaggerated impacts on migrants, asylum seekers, and refugees, as well as racial and ethnic minorities.<sup>61</sup>

In **Barbados**, '[t]he police are being more disrespectful when community members call to report abuse, threats, harassment or even eviction, not assisting, making derogatory statements, slurs and even threats to community members.'<sup>62</sup>

An activist from **Cameroon** reported that '[o]ur service users are scared to come to the office because of the fear of being arrested or beaten by the police for not wearing face masks which they cannot afford to purchase. We have been forced to go door to door just to provide services and the space we have at our refuge is very small. Our work is very risky.'<sup>63</sup>

In the **Philippines**, police have been forcing a group of LGBT people to do push-ups, dance, and kiss one another on digital livestreams as punishment for allegedly breaking the country's COVID-19 curfew regulations in April 2020. Human rights defenders have spoken out against the "humiliation" and called on authorities to investigate the case.<sup>64</sup>

In **Luxembourg**, one case was reported to local human rights defenders. A lesbian couple was not considered a couple by a policeman when they were taking a walk at the beginning of confinement. Fortunately, there was no major incident after they explained their situation to the police officer.

In **Argentina**, in the province of Jujuy, located in the north of Argentina, police arrested a young trans woman for violating the quarantine and sexually abused her. The victim was 19-year-old Delfina D. The police arrested her and took her to an open field where she was abused.<sup>65</sup>

In **Egypt**, those who identify themselves as women and do not comply with social norms of the Egyptian society, are subjected to police abuse that frequently resulted in arrest. Gender non-conforming, queer and trans women can be charged by virtue of debauchery, publicizing an invitation to induce debauchery, and incitement to debauchery.<sup>66</sup> The debauchery cases reached five cases since the government announced lockdown measures in Egypt in March 2020. Throughout the first three months of 2020, three debauchery cases of foreigners living in Egypt have been documented; one of the persons affected is already deported after receiving a fine sentence. This went through an exceptional emergency trial, and the other two persons, including a trans woman who received a final sentence of three years in jail, are still in detention. More recently, in June 2020, three trans women have been arrested under debauchery law.

In **Uganda**, the police arrested over 20 people staying in a LGBT shelter under the guise of social distancing violations.<sup>67</sup> Abuses have continued once in jail, with LGBT individuals living with HIV being denied medication and instances of beatings being common.<sup>68</sup> Following their detainment for over fifty days, the Ugandan Courts ordered their release and freedom in mid-May.<sup>69</sup>

In **El Salvador**, law enforcement has targeted LGBT individuals and arrested and detained them for testing, although many remained in custody without ever receiving a coronavirus test.<sup>70</sup>

The pandemic not only makes the police violence more difficult for LGBTI women/persons, but also limit their access to justice in such cases.

For example, as evidenced by Caleb Orozco, United Belize Advocacy Movement, **Belize**, “[w]e have two civil suits pending and ongoing investigations into police brutality cases. These are all currently stalled.”<sup>71</sup>

In **Egypt**, since the beginning of the partial confinement, the government has banned all visits to prisons, including for defending lawyers; detainees’ relatives have been prevented by prison authorities from sending sanitizing tools such as soap to their imprisoned family members. It is worth mentioning that the majority of detainees in Egypt are frequently subjected to poor detention conditions, such accessibility to sunlight, clean settings and sufficient ventilation. These poor conditions often result in their health severely deteriorating during detention, especially in such pandemic time.<sup>72</sup>

Since last March, the individuals who got arrested have to be placed in detention places due to Egypt’s judicial institutions decision of suspending court trials nationwide due to the COVID- 19 pandemic, according to a statement issued by the Ministry of Justice. On the other hand, there is a spike in the online entrapment that target trans women and other gender non-conforming women. The decision of suspending courts gives rise to prolong the detention period without trails and fair judicial representation.<sup>73</sup>

The authority did not respond to demands by local and international organizations of releasing prisoners, after detainees’ s death raised concerns on conditions of prisons in Egypt.<sup>74</sup>

## 6. Good practices

### 6.1. Civil society

The COVID-19 crisis affected civil society groups supporting LGBTI communities. **Restrictions on gathering, as well as financial decrease limited their abilities to support LGBTI women/persons facing gender-based violence during the pandemic.**

According to a report by the *Commonwealth Equality Network & Kaleidoscope International Trust*,

*At a time when there is clear and escalating need, some TCEN member organisations – nearly half of which have no reserves – have reported decreases in or loss of current or potential income, as donations*

*have slowed and new funding opportunities have been put on hold indefinitely. Coupled with new restrictions on movement, the ability of member organisations across the Commonwealth to carry out essential human rights advocacy, provide lifesaving services and assistance such as shelter and food to LGBTI+ people, or even to survive, is under threat like never before.*<sup>75</sup>

Milly Moses from the *United and Strong (Saint Lucia)* evidenced: “Many homeless LGBTI+ young adults depend on United and Strong for their vital needs, however during this pandemic we are forced to close our doors to protect staff and visitors. Sadly, the state does not make specific provisions for LGBTI+ persons who are most vulnerable.”<sup>76</sup>

For this reason, **urgent funding opportunities** provided by a number of funders, are crucial for LGBTI organizations and LGBTI women/persons supported by them.

For example, *Funders for LGBTQ Issues* published a list of 29 community funds providing rapid response funding for LGBTQ organizations addressing COVID-19.<sup>77</sup>

Among these funds, *OutRight Action International* providing grants from \$2,500 to \$10,000 to LGBTQ organizations addressing urgent issues: healthcare for LGBTQ populations impacted by COVID-19; food and housing to LGBTQ people impacted by coronavirus; emergency services for LGBTQ survivors of domestic violence; and documenting spikes in homophobic and transphobic violence in this time of crisis. So far, 57 grants have been distributed to LGBTQ organizations in 46 countries and additional grants will be released as new funding becomes available.<sup>78</sup>

The *Eurocentralasian Lesbian\* Community (ELC)* provided small grants (500 to 3,000 EUR) to lesbian groups that in urgent need of financial support due to the COVID-19 crisis. The grants could cover support to lesbian communities, such as direct support and services (food, shelter, psychosocial support, etc.); advocacy activities (e.g., advocating for COVID-19 response measures that are inclusive of lesbian needs and interests); communication and campaigning activities (e.g., social media campaigns, press clipping, online tools, etc); and operating costs (office costs, rent, utilities, etc).<sup>79</sup>

Despite the operational and financial changes, LGBTI groups around the globe **continued to collect data and support LGBTI women/persons facing gender-based violence and related issues during the COVID-19 crisis.**

#### (a) Global focus

*ILGA World* launched a postcard campaign to support LGBTI communities during the COVID-19 crisis. A list of resources for LGBTI activists has been compiled and published on the organization’s website. It also organized a series of advocacy webinars and online roundtables for LGBTI activists.<sup>80</sup>

The *OutRight Action International* published a thematic report on the effects of the pandemic on LGBTQ people: “Vulnerability Amplified: The Impact of the COVID-19 Pandemic on LGBTQ people”.<sup>81</sup> For the purpose of this report, OutRight conducted a literature review and in-depth interviews with 59 LGBTQ people from 38 countries to characterize how the global COVID-19 pandemic and the public health measures being taken to curb transmission are affecting LGBTQ lives and movements in real time. The report maps the strategies and interventions being used to strengthen resilience, solidarity, and disease response. OutRight has also launched an Emergency Response Fund for grassroots civil society organizations and a series of webinars on the impact of COVID-19 on LGBTI movements globally.

The *Global Action for Trans\* Equality (GATE)* launched the COVID-19 community survey to document irregularities and human rights violations that trans, gender diverse and intersex people experience as a result of the pandemic. Some preliminary data of the survey were presented in a video published by the organization.<sup>82</sup>

## (b) Africa

In **Egypt**, a number of grass-root LGBTIQ organizations and groups offered mental health support services and information tailored for LGBTIQ persons, including advice on sexual health, digital security, protection from family violence, and enhancing economic situation from home.

In **South Africa**, organizations like the *Scalabrini Centre*, are assisting LGBT migrants and asylum seekers who do not have access to food, government aid, or other forms of essential goods.<sup>83</sup> Additionally, organizations like *Femme Projects*, are fundraising to help support shelters and buy goods, such as sanitizers, toiletries, and food, to be delivered to those in need.<sup>84</sup>

The *Urgent Action Fund for Women's Human Rights* is providing grants to support collective and health care to communities across Africa.<sup>85</sup>

## (c) Asia

The *Asia Pacific Transgender Network (APTN)* created a survey with the aim to gather data about the changes trans and gender diverse groups and organisations are undergoing, the challenges they are facing, and the decisions they are having to make in the time of the COVID-19 pandemic.<sup>86</sup> The results of the survey were published on the organizations' website.<sup>87</sup>

The same group has organized COVID-19 Community Support Fund, which provides funding to community groups and trans human rights defenders across Asia and the Pacific to help meet community realities and sustain their organizations' operations and functions.<sup>88</sup> Among the Asian groups supported by the fund are organizations from **India, Indonesia, Malaysia, Nepal, Pakistan, the Philippines, Sri Lanka, Thailand** and **Viet Nam**.<sup>89</sup>

In **Thailand**, the *Foundation of Transgender Alliance for Human Rights* released a guide on how LGBT individuals can protect themselves. The guideline, available in both Thai and English, provides information about the virus, and advises trans individuals to consider postponing or cancelling hormone therapy and surgery at this time in order to avoid going to the hospital. There's also a section in the guideline aimed at healthcare providers advising them to be sensitive regarding their patients' gender identity. Moreover, it encourages those who have experienced gender-based discrimination to contact the Department of Women's Affairs and Family Development or the National Human Rights Commission of Thailand for assistance.<sup>90</sup>

## (d) Europe

A group of civil society organizations in the **United Kingdom** developed advice and guidance for friends and/or family who are worried that the LGBT+ person they know is being victimised by their partner or is using violent/abusive behaviour towards their partner.<sup>91</sup>

*Galop*, the LGBT+ anti-violence charity, launched an online survey to better understand how COVID-19 lockdown restrictions impacted your relationship with family members or intimate partners.<sup>92</sup>

In **Ireland**, numerous NGOs are providing remote and online services such as healthcare recommendations and resources, self-care and support groups, as well as educational initiatives.<sup>93</sup>

In **Slovenia**, organizations *Legebitra* and *Transakcija* are also providing remote resources such as counseling and therapy.<sup>94</sup> Similar work is also being done by organizations in **Catalonia**.<sup>95</sup>

In **Rome**, the Catholic Church has also stepped in to provide aid, with Cardinal Konrad Krajewski providing funds and donations to a group of transgender sex workers.<sup>96</sup>

Additionally, in **France**, the collective *ToutSEXplique* provides accommodations for young LGBT adults who have been rejected by their families or are facing other forms of discrimination.<sup>97</sup>

## (e) Latin America

In **Argentina**, LGBT+ organizations from all over the country worked together to help and respond to the extremely urgent needs faced by the LGBT+ population, by providing food aid in community kitchens, locating

vulnerable populations, bringing in goods and disseminating government and non-government telephone numbers for access to support. There was also the opening of LGBT+ housing for people who are displaced from their homes and those who cannot work and find it difficult to pay rent. NOA Intersex, a network that brings together intersex people from northern Argentina, worked with the trans community to collect non-perishable food and disseminate contact information for LGBT+ support.

In **El Salvador**, the *Trans Culture Collective* monitors and tracks LGBT individuals who have been incarcerated to provide support to them where possible.<sup>98</sup>

In **Mexico**, the NGO *Trans Enseñada, Una Lucha Con Valor* assists trans sex workers who have been unable to work due to the pandemic by providing medical care and financial support.<sup>99</sup> Another organization, *Casa Frida*, created a shelter for LGBT persons who are facing violence and discrimination in their households during the pandemic.<sup>100</sup>

In **Colombia**, *Red Comunitaria Trans* has created an emergency fund to assist trans sex workers who have lost their jobs.<sup>101</sup> So far, the fund has helped 250 sex workers in the city of Bogota and has assisted trans women who have also been detained. The group also offers free psychological support to trans persons, cisgender women, and LGBT persons.<sup>102</sup>

Similar groups are working in **Ecuador**<sup>103</sup> and **Brazil**<sup>104</sup> to provide relief funds to LGBT individuals in need.

#### (f) North America

In **Canada**, the *Gay Straight Alliance* has maintained programming online in their school chapters. Such school clubs are meant to provide safe spaces for LGBTQ students and their allies. Students, teachers and community groups are working to ensure that support is still available as the COVID-19 pandemic keeps kids out of school.<sup>105</sup>

In the **United States**, the *Transgender Legal Defense and Education Fund* has created an online guide for transgender and non-binary individuals providing information on how to stay safe during the pandemic. The guide covers concerns dealing with employment, housing, and healthcare and provides a list of health and advocacy resources.<sup>106</sup>

In **Puerto Rico**, numerous organizations are providing assistance remotely, collecting donations and funds to assist those in need, providing necessary healthcare, medication, HIV/STI services, and online educational and counseling services.<sup>107</sup>

#### (g) Oceania

The APTN COVID-19 Community Support Fund provided funds to support local groups working with trans and gender diverse people in **Fiji, Papua New Guinea, Samoa** and **Tonga**.<sup>108</sup>

In **Australia**, the *Gay & Lesbian Rights Lobby* surveyed its membership and the New South Wales LGBTIQ community to determine how COVID-19 had impacted them. As a result of the survey, a report has been published covering specifically issues related to violence, including domestic violence, and access to health care.<sup>109</sup>

## 6.2. Governments

### (a) Africa

Many countries in Africa, such as **Egypt**, do not recognize diverse sexual orientations and gender identities and therefore do not organize any activities or projects to prevent or combat violence and discrimination against LGBTI women/persons in the context of the COVID-19 pandemic.

Some other African states, however, do intervene to mitigate the specific harms facing by their LGBT populations.

In **South Africa**, the State extended visas temporarily for migrants and asylum seekers during the national lockdown to ease some of the obstacles facing those seeking work with expiring documents. This can particularly help trans people who are refugee or seek asylum.<sup>110</sup>

#### (b) Asia

In **India**, local and national government agencies have implemented policies to assist at-risk LGBT individuals. The Ministry of Social Justice and Empowerment has provided stipends to trans individuals<sup>111</sup> and has opened a counseling service for LGBT communities dealing with mental health issues. However, individuals who would like to receive the aid must have proper documents and identification or nominate someone with proper identification to receive the relief on their behalf. This requirement excludes many who lack the necessary documents, including undocumented workers, and leaves many without access to the relief measures. Additionally, many of the forms to receive the aid are in English, further excluding individuals who do not speak English or lack access to someone who can translate on their behalf.

In the Indian state of Manipur, local government has established quarantine centers and facilities for trans individuals who are returning to the state and must self-isolate to ensure that they can receive safe and non-discriminatory housing.<sup>112</sup> The government of Tamil Nadu is providing financial aid and special services to trans individuals.<sup>113</sup> Additionally, the state government of Kerala, has provided food kits to trans individuals who are food insecure to ease the economic burden of COVID.<sup>114</sup>

In **Pakistan**, one police department is working to set up a specific department to deal with issues that are affecting the trans community and have hired a trans woman to assist it.<sup>115</sup>

#### (c) Europe

In **Spain**, the Department of Equality and Social Welfare has collaborated with non-governmental organization *Roja Directa LGTBI* to launch an online platform to provide advice and support to individuals in need during confinement. The platform will provide assistance and recommendations on social, psychological, legal, and health issues.<sup>116</sup>

In **France**, the Secretary of State for Equality between Women and Men has implemented plans to address the hardships facing by the LGBT communities. These plans include allocating funds to allow LGBT people housing in hotels to escape homophobic violence in their homes as well as reopening an emergency hotline for victims of abuse.<sup>117</sup>

#### (d) Latin America

**Peru**<sup>118</sup>, **Panama**<sup>119</sup>, and **Colombia**<sup>120</sup> have all lifted their gender separated quarantine laws in response to trans activists' concerns about the danger they inflict on the trans community.

**Argentina** has taken steps to protect the rights of LGBT communities. The Minister of Gender and Diversity created a guideline outlining the rights of trans and non-binary individuals seeking assistance, including the requirement that any detained individual be placed in a room that corresponds to their gender identity and that hormone treatments be guaranteed and continued.<sup>121</sup> Additionally, the Ministry is taking efforts to disseminate information regarding access to medication, mental and sexual healthcare, and contact numbers for assistance inquiries.<sup>122</sup> The Argentinian government is also creating exceptions to its stay-at-home orders for LGBT individuals who need to escape domestic violence situations at home and thus violate the quarantine. The exception allows individuals to leave home to file complaints, reflecting an awareness by the State of the heightened risk of domestic violence that the quarantine is creating.<sup>123</sup> The State is also extending welfare and aid programs to include transgender individuals to ensure that those affected by COVID are protected.<sup>124</sup> At the same time, according to local human rights defenders, '[t]he state tries to provide responses [to the COVID-19 pandemic], but many times these strategies are not fast or effective.'

In **Venezuela**, Tamara Adrián, the deputy to the National Assembly, has presented a draft agreement to guarantee equality in the law for LGBT people. This draft was created specifically as a response to violence and discrimination in health care and housing faced by LGBTIQ+ people due to the COVID-19 crisis.<sup>125</sup>

In **Peru**, the Ministry of Women along with the Ministry of Justice and Human Rights has created a booklet in celebration of the International Day against Homophobia, Transphobia, and Biphobia (IDAHOBIT) that provides a guideline to help protect LGBT people during the pandemic. The document provides guidance on how to contribute to the promotion and protection of the rights of LGBT persons. It gives information on how to aid LGBT victims of violence and discrimination, how to support LGBT persons within the family and how to advocate for their acceptance and respect inside the family. It also mentions that the COVID-19 pandemic has exacerbated the discrimination faced by LGBT persons.<sup>126</sup>

In Manizales, **Colombia**, the Women and Gender Equity's Secretariat, with the support of the Technology and Communications Secretariat, launched a pilot project to help sex workers, and in particular trans sex workers, to continue doing their job through the internet during the COVID-19 lockdown.<sup>127</sup>

Additionally, in **Mexico**, the National Council for the Prevention of Discrimination (Conapred) created an LGBT inclusive guiding document for healthcare workers.<sup>128</sup> The document aims at instructing medical staff on how to treat LGBT persons in an inclusive manner in order to create an environment of trust and inclusivity that facilitates the decision-making processes of LGBT persons in regard to their health issues, particularly amidst the COVID-19 pandemic.

#### (e) North America

In the **United States**, some positive measures were taken by individual states to support LGBTI women/persons during the pandemic.

In Florida, after the remote learning platform utilized by schools presented students' deadnames that had not been changed in the administrative system, one local school district changed the platform to enable their trans students to use their preferred name in online learning settings and prevent deadnaming.<sup>129</sup>

The U.S. federal government also released numerous LGBT asylum seekers and those living with HIV who had been incarcerated in immigration detention centers due to their heightened risk of COVID-19.<sup>130</sup>

In Pennsylvania, Governor Wolf expressed government plans to collect data on sexual orientation, gender identity and gender expression when studying the coronavirus to ensure that the specific needs of the LGBT communities were taken into account when formulating policy.<sup>131</sup> This plan was implemented in response to the Pennsylvania's Health Disparity Task Force which sought to address the needs of vulnerable populations.

Finally, recognizing the disproportionate risks LGBT individuals face from COVID-19, a number of U.S. legislators have put pressure on the Trump administration to include protections for LGBT individuals in the U.S.'s aid abroad.<sup>132</sup>

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