

COVID-19 impacts on LGBTI communities in Europe and Central Asia: A rapid assessment report

19 June 2020

COVID-19 and the resulting measures to contain and combat the virus are generating complex challenges and risks. While the virus does not discriminate per se, it is very clear that it hits marginalised communities in our societies disproportionately harder. In addition, social distancing and other prevention measures, as needed as they are, can have unwanted negative impacts on the lives of marginalised groups.

The purpose of this rapid assessment report is to provide specific references to the impacts of COVID-19 on LGBTI people, organisations, and communities in Europe and Central Asia, based on inputs from a survey of ILGA-Europe members, direct communications with members, as well as publicly accessible reports and webinars from members and organisations in the region. The survey was open from 1 to 18 June 2020, and received 52 responses from national and local LGBTI organisations from 30 countries, and direct communications were received from an additional 7 countries. Public reports produced by NGOs from 3 additional countries were also incorporated; citations for these are included as footnotes.

Future versions of this report may include more information on direct communications and survey submissions. For direct communications and survey responses, please contact ILGA-Europe using the email address at the end of this report for details or to be put in touch with organisations, pending their consent.

The report includes information on impacts in 7 specific areas:

1. Health and access to health
2. Hate speech by political and religious leaders
3. Domestic violence
4. Access to public relief programmes, including housing, food, and subsistence
5. Access to justice, registration, and other legal processes
6. Ability of LGBTI organisations to do advocacy and engage with policymakers
7. Other types of impacts

The report also includes reference to **good practices** (Section 8), as reported by LGBTI people and communities, and a list of **general recommendations to States** (Section 9).

This report should be viewed as a rapid assessment; updated editions may be released, as well as a more formal report based on the data collected throughout these times.

Additionally, Organisation Intersex International Europe (OII Europe) will soon conduct an intersex-specific survey of COVID-19 impacts; findings from their work will be incorporated into future analysis.

1. Health and access to health

LGBTI people have significantly lower health outcomes due to stigma and discrimination, biases held by healthcare providers, and lower socioeconomic status, often linked with lower access to comprehensive health insurance, and are therefore more vulnerable. ILGA-Europe received or observed reports from **30 countries** of impacts on access to health overall in Europe and Central Asia from across Europe and Central Asia, showing how pre-existing limitations in LGBTI-affirming healthcare were exacerbated as healthcare systems redirected their resources, targeted mental health services were interrupted or experienced radical increases in demand after moving online during confinement, and access to sexual and reproductive health was negatively impacted.

In **Greece**, an LGBTI NGO reported that the mental health services that they regularly provide were shut down due to restrictions on NGO operations. In **Belgium**,¹ where a mental health hotline run by an NGO was able to continue running, they experienced a significant increase in mental health calls, and a 4-fold increase in instances where the caller was contemplating suicide. In response to increased need during the crisis, an NGO in **Russia** has also been providing mental health support for LGBTI community members, and an NGO in **Kyrgyzstan** developed a focused document for community members on LGBTI people and COVID-19. In the **Netherlands**, an NGO-run trans health clinic had to close during the pandemic, though they were able to move consultations online.

In **Spain**, NGOs reported that mental health and endocrinology have been subject to delays in access. Organisations from **Ireland** report poor access to LGBTI-affirming healthcare, including housing for seniors, dementia networks, and hospices. Similarly, organisations in **Azerbaijan, Kyrgyzstan, and Uzbekistan** report an exacerbated lack of LGBTI-friendly providers and specialists due to the crisis and increased homophobia from medical personnel. NGOs report mental health services being heavily curtailed, cancelled or postponed in **Germany, Montenegro and Serbia**. An organisation in **Serbia** also reported that all continuing care for chronic conditions was impacted due to pharmacies being overwhelmed during the crisis. There were reports of suspension of assisted reproduction services **Sweden**. In **Russia**, NGOs report that some individuals were denied access to abortions, medications, and medical services.

Transition-related medical care, which is life-saving care for trans people, was largely deemed non-urgent and postponed or cancelled in the light of COVID 19. In **26 countries** in this report, organisations report about limitations being placed on transition-related healthcare, including access to continuity of care for ongoing treatments. Many intersex people, both those who identify as cis and as trans, need access to continuing care for hormones and other treatments related to their sex characteristics variations. While the OII Europe survey is still ongoing, we are likely to see the same experiences of gaps in care being reported there.

Delays or postponements of appointments and gaps in access to ongoing care were reported in **Armenia, Azerbaijan, Belgium,² Bulgaria, Croatia, Estonia, Germany,**

¹ Çavaria (2020). De impact van COVID-19 op LGBTI-personen.

² Ibid.

Hungary, Ireland, Italy, Kyrgyzstan, Malta, Moldova,³ Montenegro, the Netherlands, North Macedonia, Norway, Portugal, Serbia, Sweden, Spain, Tajikistan, Turkey,⁴ and Ukraine, as well as in the **United Kingdom** and **Scotland**, where all Gender Identity Clinic appointments have been postponed. For trans people, this has the additional impact of delaying access to legal gender recognition procedures in countries in Europe where transition-related medical care is required; this was reported specifically in **Sweden**.

In **Scotland**, transition-related surgeries have also been cancelled and the waitlist in the Gender Identity Clinic has been suspended; **Malta** and **Estonia** report similar issues for trans people wishing to start transition-related healthcare processes. In **Croatia**, NGOs report that access to testosterone became limited and therefore more expensive, and legal gender recognition processes stopped because the National Health Council stopped having meetings and transition-related surgeries were completely halted. In **Armenia, Montenegro, and Tajikistan,⁵** many trans people order their hormones online, and deliveries were suspended. Additionally, in **Bulgaria**, trans people access binders online because no local companies produce them; while postal services were restricted, online purchasing was impossible and it appears likely that orders placed and shipped at the start of the crisis were lost. In **Tajikistan,⁶** hormones were subject to price increases of 30-60% during the pandemic. In **Kyrgyzstan**, trans people who were unable to work due to the pandemic were thus unable to afford continuing hormone therapies. An NGO in **Serbia** fundraised to help trans people afford their hormones. In **Bulgaria**, prior to the crisis, trans people were able to access hormones due to low enforcement of prescription requirements. As a result of COVID-19, however, pharmacies increased enforcement of prescription requirements. However, providers continuously refused to formally prescribe hormones, and as a result, access has all but ceased. In **Ireland** and **Portugal**, State guidelines were to move appointments to telehealth or online services, but trans people report that they were not able to access continuing care via this avenue. Non-nationals in **Portugal** who were unable to travel home to access continuing transition-related care in their home country reported being unable to access hormones. NGOs had to suspend peer support groups in **Germany, Russia, and the United Kingdom** when online meetings were not feasible or not fit to purpose.

³ Положение трансгендерных людей в Армении, Грузии, Молдове и Таджикистане в период пандемии COVID-19 (The situation of transgender people in Armenia, Georgia, Moldova and Tajikistan during the COVID-19 pandemic) by Trans* Coalition in the Post-Soviet Space, available from: <https://www.transcoalition.net/trans-and-nonbinary-people-in-armenia-georgia-moldova-and-tajikistan-during-a-pandemic-2020/#more-11056>

⁴ Tar, Yildiz (17 April 2020), "How does the Covid-19 pandemic affect LGBT+ community in Turkey?" Available at: <https://tr.boell.org/en/2020/04/17/how-does-covid-19-pandemic-affect-lgbti-community-turkey>

⁵ Положение трансгендерных людей в Армении, Грузии, Молдове и Таджикистане в период пандемии COVID-19 (The situation of transgender people in Armenia, Georgia, Moldova and Tajikistan during the COVID-19 pandemic) by Trans* Coalition in the Post-Soviet Space, available from: <https://www.transcoalition.net/trans-and-nonbinary-people-in-armenia-georgia-moldova-and-tajikistan-during-a-pandemic-2020/#more-11056>

⁶ Ibid.

Issues accessing sexual health and HIV services were reported in 12 countries: **Armenia**,⁷ **Cyprus**,⁸ **Italy**, **Malta**, **Montenegro**, **Serbia**, **Spain**, **Sweden**, **Switzerland**, **Turkey**,⁹ the **United Kingdom**, and **Uzbekistan**, with reports of cancellation of HIV testing programmes as well as check-up appointments for people living with HIV, suspension of new prescriptions of PrEP, and PrEP trial cancellations. Research in **Belgium**¹⁰ found that many appointments for PrEP and for people living with HIV were postponed and about 1 in 10 PrEP users were worried about running out of medication. HIV/AIDS centers were closed in **Switzerland** and **Uzbekistan**. In **Sweden**, some STI clinics now only work with clients who have been contact-traced for exposure to STIs, including HIV, or those presenting with active symptoms, so regular testing protocols have been suspended. There are also reports of people living with HIV being afraid to visit hospitals due to the pandemic in **Italy**. In **Armenia**¹¹ and **Moldova**, NGOs fundraised to pay for and/or distributed antiretroviral drugs for people living with HIV as governments failed to ensure continued access during the pandemic; a similar programme is being developed in **Russia**. In **Kyrgyzstan**, an NGO opened a free delivery service for condoms and HIV self-tests and provided delivery for antiretroviral drugs to those with travel limitations. Additionally in **Malta**, government instructions for people living with HIV were inconsistent, and ultimately created circumstances where they would have to disclose their status to employers to be able to isolate or risk job or income loss. For additional information specifically about HIV and the COVID-19 pandemic, see reports from EATG.^{12,13}

Sex workers in the region experienced unique hardships in access to health, with a report from the International Committee on the Rights of Sex Workers in Europe (ICRSE) and the Sex Workers' Rights Advocacy Network (SWAN) reporting problems in accessing ongoing hormone therapy and HIV prevention and treatment, as well as to COVID-19 testing and personal protective equipment and supplies for those who were required to continue working in **Armenia**, **France**, **Georgia**, **Greece**, **Kazakhstan**, **Kyrgyzstan**, **North Macedonia**, **Norway**, **Poland**, **Russia**, **Sweden**, **Turkey**, and **Ukraine**. ILGA-Europe received similar reports from **Germany**. For more on this, see the report from ICRSE and SWAN.¹⁴

⁷ Ibid.

⁸ Information from webinar with Cyprus LGBTI activists "Impact of the COVID-19 pandemic on the LGBTI+ community and EU Action". Watch: <https://www.queercyprus.org/en/impact-of-the-covid-19-pandemic-on-the-lgbti-community-and-eu-action/>

⁹ Tar, Yildiz (17 April 2020), "How does the Covid-19 pandemic affect LGBT+ community in Turkey?" Available at: <https://tr.boell.org/en/2020/04/17/how-does-covid-19-pandemic-affect-lgbti-community-turkey>

¹⁰ University of Antwerp Institute of Tropical Medicine, çavaria, & Sensoa (2020). Preliminary results of PROMISE project study.

¹¹ Положение трансгендерных людей в Армении, Грузии, Молдове и Таджикистане в период пандемии COVID-19 (The situation of transgender people in Armenia, Georgia, Moldova and Tajikistan during the COVID-19 pandemic) by Trans* Coalition in the Post-Soviet Space, available from: <https://www.transcoalition.net/trans-and-nonbinary-people-in-armenia-georgia-moldova-and-tajikistan-during-a-pandemic-2020/#more-11056>

¹² EATG (2020). EATG Rapid Assessment COVID-19 crisis' Impact on PLHIV and on Communities Most Affected by HIV, Issue 1, available from: <https://drive.google.com/file/d/1Fhv4dMkfGg3Bb4NWhvDxGVQiZAedJtP4/view>

¹³ EATG (2020). EATG Rapid Assessment COVID-19 crisis' Impact on PLHIV and on Communities Most Affected by HIV, Issue 2, available from: https://drive.google.com/file/d/1x_cSX8vpBsAzhYBNCygu4sJ_2Uh9-ddG/view

¹⁴ ICRSE & SWAN (2020). COVID-19 crisis impact on access to health services for sex workers in Europe and Central Asia, available from:

2. Hate speech by political and religious leaders

Recent years have seen a rise in divisive and hateful rhetoric in election campaigns and public discourse, with minorities being scapegoated. And this is translating into real hate in the streets, not only homophobic and transphobic hate, but on all grounds. Reports of targeted hate speech from political and/or religious leaders were received from **12 countries** in Europe and Central Asia and confirm that in many countries across the region the current public health crisis is being used as yet another opportunity by religious leaders and hostile politicians and governments to blame LGBTI people for societal problems, in this case COVID-19, further stirring up hatred against LGBTI people.

ILGA-Europe received reports of religious leaders blaming LGBTI communities for the pandemic from **Bulgaria, Germany, Georgia,**¹⁵ **Italy,**¹⁶ **Moldova, Montenegro, North Macedonia, Poland, Russia, Turkey,**¹⁷ and **Ukraine.**¹⁸ A hate speech complaint has been filed in **Ukraine**, but is being blocked from proceeding by procedural means.

Politicians in **Turkey**¹⁹ echoed the language of blaming LGBTI communities for the pandemic, and since the removal of COVID-19 restrictions in early June, LGBTI organisations report a spike in LGBTI-phobic hate-crimes that appear to be related to the current wave of hate-speech by officials. Heads of Provincial Directorates of Education instructed school principals to ban the use of the global community action of school children drawing rainbows during the pandemic.²⁰

In **Bulgaria**, news of LGBTI people being blamed for COVID-19 by Turkish President Erdogan was shared in the mainstream media. This led to widespread LGBTI-phobic comments in the media and on social media from people agreeing with Erdogan's statement.²¹

Additionally, political leaders also blamed LGBTI-related public gatherings, and thus the causes for those gatherings, for the spread of COVID-19 in **Spain**.

http://www.sexworkeurope.org/sites/default/files/userfiles/files/Covid19_SWAN%26ICRSE_Final_Interactive%20%281%29.pdf

¹⁵ Eastern European Coalition for LGBT+ Equality. (2020). *Open letter of the Eastern European Coalition for LGBT+ Equality in relation to Covid-19 pandemic and its effects on our communities*. Women.ge. Retrieved 10 June 2020, from <https://www.women.ge/en/news/newsfeed/280/Open-letter-of-the-Eastern-European-Coalition-for-LGBT--Equality-in-relation-to-Covid-19-pandemic-and-its-effects-on-our-communities>.

¹⁶ <https://www.isnews.it/occhi-puntati/68007-coronavirus-sdegno-di-dio-per-vigano-e-colpa-di-aborti-sodomiti-e-matrimoni-gay.html>

¹⁷ KAOS GL. (2020). *What happened after the hateful khutbah of the Religious Affairs Administration of Turkey?*. Kaosgl.org. Retrieved 10 June 2020, from <https://www.kaosgl.org/en/single-news/what-happened-after-the-hateful-khutbah-of-the-religious-affairs-administration-of-turkey>.

¹⁸ Kelleher, P. (2020). *Landmark lawsuit launched against preacher who claims coronavirus is 'God's punishment for same-sex marriage'*. PinkNews - Gay news, reviews and comment from the world's most read lesbian, gay, bisexual, and trans news service. Retrieved 10 June 2020, from <https://www.pinknews.co.uk/2020/04/14/ukraine-patriarch-filaret-orthodox-church-kiev-patriarchate-homophobia-insight-lawsuit-coronavirus/>

¹⁹ See <https://www.hrw.org/news/2020/05/01/turkey-criminal-case-opposing-homophobic-speech>

²⁰ <https://www.pinknews.co.uk/2020/05/06/turkey-erdogan-children-rainbows-coronavirus-ramadan-homophobia-islam-lgbt/>

²¹ See <https://dnes.dir.bg/comments/v-turtsiya-homoseksualnite-sa-vinovni-za-koronavirusa>

3. Domestic violence

Social distancing has proven to be particularly difficult for those who have been rejected by their families, are not out with their families or might face LGBTI-phobia from their family members, and are now forced to be in confinement with them.

The issue of increased incidence of domestic violence towards LGBTI people was striking in putting together the rapid assessment, with reports coming from 23 countries: **Armenia, Azerbaijan, Bosnia and Herzegovina, Bulgaria, Cyprus, France, Greece, Georgia,**²² **Germany, Ireland, Italy, Kazakhstan, Montenegro, Moldova, the Netherlands, Portugal, Romania, Russia, Serbia, Spain, Sweden, the United Kingdom, and Uzbekistan.** It is important to keep in mind in this context, that experiences of family rejection significantly impact on the mental health and stress levels of LGBTI people and can lead to harassment and, in worst case scenarios, to violence from family members. Furthermore, those exposed to domestic violence were often unable to leave home due to confinement, and thus unable to report as easily or to request help.

LGBTI organisations in **Spain** reported concern with the lack of LGBTI-specific measures in the context of domestic violence, especially against domestic violence against transgender people and LGBTI youth. In **Azerbaijan**, due to the loss of employment, many LGBTI youth could not pay their rent and were evicted. They returned to living with their families which in many cases led to increased domestic violence. It was reported that the state does not offer any support to LGBTI victims of domestic violence and LGBTI victims of violence can only rely on support of their close support network. Activists from **Armenia** identified domestic violence as one of the major issues during the crisis, creating immediate needs for accommodation, food and access to medical care. They pointed out the lack of expertise of children organisations on LGBTI rights and the special vulnerability of LGBTI children. Due to lack of governmental measures in **Armenia**, financial and material support is provided by LGBTI organisations.

In the **United Kingdom**, an LGBTI organisation highlighted that domestic violence was reported the most by young LGBTI people and LGBTI people with disabilities. Organisations from **Romania** deplored the lack of governmental measures and specified that young LGBTI are particularly at risk of violence. At least two suicides were reported in the community and one case of severe physical violence by the family. An NGO in **Belgium** reported that through their helplines, many LGBTI youth expressed feeling unsafe at home during quarantine.

In **Georgia**, the State is currently only providing support to victims of domestic violence against women, even though organisations have notified and provided information on increased domestic violence against LGBTI people to the government. LGBTI organisations from **Kazakhstan, Kyrgyzstan, and Ukraine** reported that there is no response to domestic violence against LGBTI people being implemented by the government, and the NGO-run LGBTI domestic violence shelter was unable to accept new people or provide transportation

²² European Network of Equality Bodies. (2020). *Equinet's Response to COVID-19: NEBs data on COVID-19*. Retrieved 10 June 2020, from <https://equineteurope.org/covid-19-response/#data>.

for relocation in **Kyrgyzstan**. It was also reported that all domestic violence shelters in **Ukraine** were closed due to the pandemic.

In **Montenegro**, an LGBTI organisation working with victims of domestic violence reported an almost 300% increase in demand for support from people experiencing domestic violence and abuse since the implementation of "stay home" policies and other COVID-19 related measures. Similar increases were reported in **Italy** and in **France**, where an LGBT+ youth shelter²³ reported a dramatic increase in the number of calls to its emergency hotline. In **Northern Cyprus**, calls to an NGO-run emergency hotline are already double that of 2019.²⁴ In **Serbia**, an LGBTI organisation reported that calls to support centers for victims of domestic violence tripled during the curfew. At the same time, extremely low rate of reporting to the police was highlighted by the organisation in **Montenegro**.

In **Greece**, an LGBTI organisation highlighted that asylum seekers are at higher risk of being subjected to domestic and other forms of violence due to being locked up in refugee camps. Similarly, in the **Netherlands**, asylum reception centers and shelters for undocumented migrants were closed and they were left to sleep in the streets.

4. Access to public relief programmes, including housing, food, and subsistence

ILGA-Europe received reports of problems accessing basic needs, public assistance, support, and service programmes from **Albania, Armenia, Azerbaijan, Bulgaria, Georgia, Germany, Greece, Hungary, Kyrgyzstan, Ireland, Italy, Malta, Montenegro, the Netherlands, Romania, Russia, Serbia, Spain, Turkey**,²⁵ **Tajikistan**,²⁶ and **Ukraine**. This points to the greater than average rate of LGBTI people being unemployed and in precarious jobs, and living on very limited and unstable financial resources. An estimated 25-40% of young people experiencing homelessness are estimated to identify as LGBTI. In order to respond to the extreme vulnerability of people in precarious job and housing situations, including questions of access to social protection and access to healthcare services, in many of these States, LGBTI organisations reported having shifted their previous plans and budgets to cover humanitarian aid gaps within the State response to the crisis.

In **Armenia**, many LGBTI people who lost their income were not able to access dedicated governmental funding due to the fact that they had fake employment contracts. Most LGBTI people concerned became aware of the falsification upon rejection of their request for

²³ Information from webinar with FEANTSA on "Combatting LGBTIQ Youth Homelessness". 28 May 2020. Watch: <https://www.feantsa.org/en/event/2020/01/16/feantsa-youth-webinar-series>

²⁴ Information from webinar with Cyprus LGBTI activists "Impact of the COVID-19 pandemic on the LGBTI+ community and EU Action". 01 June 2020. Watch: <https://www.queercyprus.org/en/impact-of-the-covid-19-pandemic-on-the-lgbti-community-and-eu-action/>

²⁵ Tar, Yildiz (17 April 2020), "How does the Covid-19 pandemic affect LGBT+ community in Turkey?" Available at: <https://tr.boell.org/en/2020/04/17/how-does-covid-19-pandemic-affect-lgbti-community-turkey>

²⁶ Положение трансгендерных людей в Армении, Грузии, Молдове и Таджикистане в период пандемии COVID-19 (The situation of transgender people in Armenia, Georgia, Moldova and Tajikistan during the COVID-19 pandemic) by Trans* Coalition in the Post-Soviet Space, available from: <https://www.transcoalition.net/trans-and-nonbinary-people-in-armenia-georgia-moldova-and-tajikistan-during-a-pandemic-2020/#more-11056>

support. Similar documentation barriers were reported in **Kyrgyzstan**. In **Germany**, access to support programmes was severely limited for trans sex workers, and forms for accessing assistance only had binary gender marker options, making it difficult for those with non-binary legal gender markers to access programmes.

In **Greece**, LGBTI organisations that were previously organising food distributions and provision of other services had to stop these services due to the pandemic, leaving those who were dependent on NGO services without support.

In **Albania, Armenia,**²⁷ **Azerbaijan, Georgia, Hungary, Moldova,**²⁸ **Montenegro, North Macedonia, Romania, Russia, Serbia, Ukraine, and Uzbekistan**, LGBTI NGOs provided basic support services to LGBTI people, due to gaps in the government responses. To finance these services, NGOs redirected existing funding where possible or conducting targeted fundraising campaigns. Funds and resources for these measures were unable to meet the needs of the communities, according to most reports. In **Moldova**, when assessing community needs, an NGO also asked respondents to a survey if they knew of anyone in need of services who did not have access to the internet, so that this barrier did not leave individuals unserved; to serve LGBTI people around the country, they coordinated with local partner organisations to secure and distribute supplies. Whilst organisations in **Georgia** communicated with the government and submitted comprehensive information about the needs of the LGBTI community, the government has not adopted any specific measures to address the specific vulnerability of the community. In **Turkey**,²⁹ LGBTI organisations reported that LGBTI people experienced unemployment, loss of social security, lack of state support and lack of any financial support from families. Many LGBTI people are therefore struggling to meet basic needs such as healthcare and housing.

Organisations from **Ireland, Italy, Serbia, Spain and Sweden** reported that gaps in services and basic needs were a reality for the entire population, including LGBTI people.

In **Georgia and North Macedonia**, the most pressing needs for support concerned trans sex workers, who completely lost income and often their place to stay during the pandemic as brothels and other workplaces were closed, and NGOs attempted to fill the gaps for this community. Trans sex workers were unable to work in **Montenegro**, which lead to risk of hunger, poverty and homelessness for this community. Sex workers were required to choose between protecting their own safety from the virus and earning enough money to provide for their basic needs, and some were harassed by their landlords. Similar issues occurred in the **Netherlands, Kyrgyzstan, Tajikistan**,³⁰ and **Turkey**. In **Kyrgyzstan**, a trans sex worker was extorted by police due to violations of quarantine restrictions. In the **Netherlands**, migrants and sex workers were unable to access any State support.

²⁷ Ibid.

²⁸ Ibid.

²⁹ Tar, Yildiz (17 April 2020), "How does the Covid-19 pandemic affect LGBT+ community in Turkey?" Available at: <https://tr.boell.org/en/2020/04/17/how-does-covid-19-pandemic-affect-lgbti-community-turkey>

³⁰ Положение трансгендерных людей в Армении, Грузии, Молдове и Таджикистане в период пандемии COVID-19 (The situation of transgender people in Armenia, Georgia, Moldova and Tajikistan during the COVID-19 pandemic) by Trans* Coalition in the Post-Soviet Space, available from: <https://www.transcoalition.net/trans-and-nonbinary-people-in-armenia-georgia-moldova-and-tajikistan-during-a-pandemic-2020/#more-11056>

5. Access to justice, registration, and other legal processes

Legal, judicial, and administrative processes that secure the rights of LGBTI people and rainbow families were impacted by the crisis. Due to the closure or curtailment of these processes in many States, ILGA-Europe received reports of problems with family and relationship registration, which is directly linked to family reunification during the crisis. LGBTI people in **Poland** reported that residency permits for same-sex partners were significantly slower than the usual process. In **Italy**, an NGO from **Italy** reported the sense that the federal government had “forgotten” about LGBTI people, with all State measures focusing on a heteronormative family model. Rainbow Families are unable to register in **Italy**, so there was no access to parental leave within same-sex-headed households. In **Ireland**, NGOs reported delays in the processing of guardianship and parentage declarations for rainbow families.

ILGA-Europe received reports about problems with accessing legal gender recognition from **8 countries, Bulgaria, Germany, Italy, Portugal, Serbia, Spain, Sweden, and the United Kingdom**. In many cases, not accessing legal gender recognition lead to further problems such as impacting individuals’ ability to access goods and services and even to travel safely outside of the home in contexts of increased policing. Additionally, reports from **Sweden** were of delays to transition-related healthcare, which resulted in delays in legal gender recognition processes as well. In **Bulgaria**, there is a report of a trans person who is no longer able to pay the court fees to continue their legal gender recognition process due to the crisis, which creates a situation where gaining employment is impeded by not finishing legal gender recognition, and legal gender recognition is impossible to complete due to lack of income.

In **Portugal** and **Spain**, judicial services were limited to those deemed “essential” during the pandemic, which means that legal gender recognition processes were stalled due to being classified as “non-essential”. In the period between mid-March to 1 June 2020, no legal gender recognition procedures progressed in any way in the country. Similarly, in the **United Kingdom**, public courts were closed with very few running virtual court proceedings online. In **Italy** and **Serbia**, all administrative services were suspended. Legal gender recognition procedures were also reportedly suspended in **Germany**.

In **Scotland**, the reform process of the Gender Recognition Act was placed on hold by the government due to COVID-19. Similarly, in **Malta**, the pandemic slowed processes for the development of the Equality Bill, the Equality and Human Rights Commission Bill, and legal reform of the sex work laws.

In **Kyrgyzstan**, the government attempted to ban a women’s rights march, which did not happen with other types of marches or gatherings, and march organisers were charged; activists and journalists were not allowed to attend hearings due to COVID-19, even though hearings of this nature should be open to the public.

In **Greece, Italy, and the Netherlands**, asylum services were closed due to the pandemic, and in **Germany**, refugees had difficulty renewing their residency permits. In **Kazakhstan**, there is a report of a gay man who was attempting to flee a violent home situation, who has been unable to migrate due to lockdown.

In **Turkey**, refugees were some of the first to lose their jobs. Refugees stuck at the border with Greece were escorted to quarantine centres, where many human rights violations were reported. According to a report published by Amnesty International, at least 2 individuals were killed on 2 and 4 March 2020 at the Turkey-Greece land border.³¹ LGBTI refugees were among those waiting in quarantine centres. Refugees have difficulty in accessing food, sanitation and healthcare, and LGBTI refugees are often excluded by others.

In **Ukraine**, investigations into LGBTI-phobic violence were suspended due to the crisis and have not resumed at the time of this report.

6. Ability of LGBTI organisations to do advocacy and engage with policymakers

Reports of decreased access to policymakers and advocacy opportunities were reported in **Bosnia and Herzegovina, Bulgaria, Cyprus, Germany, Greece, Hungary, Ireland, Kyrgyzstan, Moldova, Montenegro, North Macedonia, Norway, Russia, Serbia, Spain, Sweden, Ukraine, the United Kingdom, and Uzbekistan**. This is particularly concerning given the gaps in service provision and the human rights violations reported by community members. LGBTI people and organisations were caught in a closed-loop: while many members of LGBTI communities were unable to have their basic needs met, organisations charged with promoting their human rights were also blocked from advocacy spaces which are vital to ensuring that those basic needs are met or that voices of LGBTI people were heard by government representatives. In addition, many LGBTI organisations shifted their focus from advocacy and policy work to direct service provision and humanitarian aid for the community to address gaps discussed in the previous sections; this shift further impacted the ability of those organisations to engage with policymakers as well.

Closing of advocacy spaces and opportunities according to reports ILGA-Europe received is a result of several intersecting problems, including that government institutions were closed or ceased their own activities (**Bosnia and Herzegovina, Cyprus, Serbia, Spain, Ukraine**), planned in-person events including conferences and working group meetings were impractical to move online or not to purpose virtually and had to be cancelled (**Bosnia and Herzegovina, Bulgaria, Cyprus, Germany, Norway, Russia**), and existing contacts were non-responsive (**Austria, Germany, Italy, Serbia, Spain**).

Public actions, demonstrations, protests, and pride events were also impossible to hold in **Bulgaria, Germany, Hungary, Russia, and Sweden**, and organisations reported not having the resources to move their advocacy work online or struggling to adapt to online work (**Portugal and Spain**) or being forced to close or terminate segments of their work (**Montenegro**). In circumstances with already difficult advocacy contexts, the pandemic worsened these problems (**Hungary, Ireland, Kyrgyzstan**). In **Kyrgyzstan**, a hearing on a law regarding NGOs took place in Parliament in May, and activists were denied access to

³¹ Amnesty International (2020), Siyasi Bir Oyunun Ortasında Kalanlar. Available from: <https://amnesty.org.tr/public/uploads/files/S%C4%B0YAS%C4%B0%20B%C4%B0R%20OYUNUN%20ORTASINDA%20KALANLAR-FINAL.pdf>

the hearing. In **Italy, Montenegro, and Serbia**, organisations report that policymakers told LGBTI organisations that LGBTI issues were not a priority in the context of the pandemic.

7. Other types of impacts

In addition to the above areas, ILGA-Europe also collected information about other impacts, which related to organisational issues, workplace discrimination, family reunification, and others.

In particular, ILGA-Europe has been monitoring closely measures adopted by States which notified a derogation from the European Convention on Human Rights, namely **Albania, Armenia, Estonia, Georgia, Latvia, North Macedonia, Romania, San Marino and Serbia**. These States, like all the others, remain legally responsible before regional and international jurisdictions, and they are legally obliged to protect vulnerable groups. Besides, some core fundamental rights cannot be derogated from. The responses compiled in this report show that most States failed to comply with their obligation to protect vulnerable groups like the LGBTI community, including with respect to the enjoyment of their non-derogable rights.

In **Armenia**, whilst LGBTI organisations were able to maintain their offices open to the community for psychological support, the authorities required that visitors be registered, which is usually not the case in normal conditions to ensure anonymity and thus safety of the individuals. The anonymity of the beneficiaries could thus not be guaranteed, creating the risk of them being outed and putting them in danger.

In **Bulgaria**, LGBTI organisations reported that the crisis was instrumentalised to disguise abusive discriminatory dismissals from work solely based on sexual orientation or gender identity under the cover of exceptional economic circumstances. At least 2 same-sex couples composed of Bulgarian and non-Bulgarian citizens who married or entered into civil partnership abroad, were prevented from entering the country together due to non-recognition of their status.

In **Estonia**, the cancelation of Baltic Pride has posed a huge financial challenge for LGBTI organisations as sponsorships around Pride also help financing other activities and ongoing work. Similarly, activists in **Romania** pointed out the financial vulnerability of civil society organisations, as they were not eligible to the support provided by the government to other sectors of the economy. For more details on specific financial impacts please request our COVID-19 financial impact report using the email address provided at the end of this document.

In **Romania**, an LGBTI organisation reported about at least 2 same-sex couples composed of Romanian and non-Romanian citizens who married or entered into civil partnership abroad also faced border-crossing issues because of the non-recognition of their status. This translated into either both members of the couple being prevented from entering the country or the non-national member being impeded from entering the country to join and live with their partner. Besides, abusive identity checks led to trans-people being fined when their gender expression did not match the gender on their identity document. There were also reports of abuses by the police, including a gay couple from Iran being beaten up by the

border police and a beneficiary stopped and fined by the police while on the way to picking-up food from an LGBTI organisation.

LGBTI organisations in **Spain** reported concern with the lack of LGBTI-specific measures in the context of this crisis, including that the new “universal basic income” measures do not specifically address the needs of LGBTI people, the specific legal and political emergencies of LGBTI people are not being addressed in strategy or assessment, and basic needs not covered.

In **Malta**, an NGO received reports that, due to instability of the situation during confinement, recently adopted children, who often depend on a clear routine to ease the transition into a new home, were significantly impacted in terms of their home lives and mental health. Additionally, trans children and youth reported losing their supportive network at school.

8. Good practice examples

Moving forward in the response to COVID-19, as well in thinking of future preparedness for crises, ILGA-Europe also collected good practice examples.

ILGA-Europe received reports of active adoption by civil society of online services, support programmes, and event planning from **Azerbaijan, Belgium,³² Bulgaria, Germany, Greece, Russia, Ireland, Italy, Kyrgyzstan, Malta, Montenegro, the Netherlands, Scotland, Serbia, Switzerland, Tajikistan, the United Kingdom, and Uzbekistan**, which is seen as a good practice. In particularly difficult contexts, online events can be even more secure than in person and all LGBTI people in rural and remote areas to participate, such as in **Russia**. Additionally, a trans organisation in **Spain** ran an online empowerment campaign for trans youth. An NGO in **Bulgaria** started an online psychological support programme focused on the crisis and dealing with lockdown facilitated by a friendly mental health provider and moved existing support groups online, which also allowed LGBTI people living outside the capital city to participate. In **Uzbekistan**, an LGBTI group moved their entire programme online and was able to continue their movement-building work this way. Activists in **Kyrgyzstan** opened LGBTI-specific domestic violence shelters to support victims and survivors during quarantine.

In **Sweden**, an organisation in one city organised safe outdoor activities for older LGBTI people on a weekly basis.

In **Azerbaijan**, there was limited direct support from private donors to individuals for basic needs during the crisis, which were shared with the community.

In some cases, good practice also came from service providers and governments directly. In **Spain**, doctors working with people living with HIV proactively reached out to their patients online to continue health services. In **Malta**, the government made HIV self-testing kits available due to closure of the local clinic. In **Portugal**, some health services contacted LGBTI NGOs for guidance on working with LGBTI people or asked to share their contacts,

³² Çavaria (2020). De impact van COVID-19 op LGBTI-personen.

and the National Health Line added psychologists to their providers, in addition to nurses and other doctors previously involved, and asked LGBTI organisations to be on the referrals list for the service. In the **United Kingdom** and **Italy**, the pandemic also served to bring attention to the issue of homelessness among LGBTI people, including LGBTI youth; municipal housing was made available to LGBTI people during the pandemic in **Italy**. Additionally, the government prepared targeted online resources for LGBTI people during the COVID-19 crisis in **Spain**. Some domestic violence safe houses in **Italy** were opened to LGBTI people as well.

In **Sweden** and **France**, NGOs reported that their governments allocated special funds to support organisations providing support services to LGBTI victims of domestic violence to meet increased or changing needs for support amid COVID-19 measures. In **North Macedonia**, a funding stream was opened for NGOs to deal with the crisis, though it was not LGBTI-specific.

9. General recommendations on alleviating impact of COVID-19 on LGBTI people

As this report documents, LGBTI people are particularly vulnerable to a variety of impacts of the COVID-19 crisis and responses to it. What follows are recommendations for States to address these impacts, alleviate inequalities, and ensure full and equal access to fundamental human rights for LGBTI people and communities.

- Ensure equal and non-discriminatory **access to testing, treatment, and care**
- **Ongoing hormone treatments and other vital care** needs to be guaranteed also in times of emergency.
- For non-vital transition-related medical care, **derogations of rights must be implemented in a non-discriminatory manner**, such that trans people are not subjected to them unduly and comply with the human rights protections and principles set out in the International Health Regulations and the United Nations' Siracusa Principles. This includes a clear time limitation on derogations. Governments should set out how they will support people facing serious problems delaying planned medical procedures, due to economic problems as well as due to lost medical and personal leave
- Access to **HIV-related medications** must remain consistent and uninterrupted.
- Classify **continuing hormonal treatment as vital** and ensure that it remains uninterrupted, including, when necessary, through administration of injections in healthcare facilities, including via pharmacies and clinics. When it is not possible for a healthcare provider to administer injections, ensure that trans people have sufficient information and resources to self-inject.
- Proactively ensure full respect of human rights of all when **returning to a state of normalcy**, including by taking specific protective measures concerning vulnerable populations like the LGBTI community.
- Ensure that all **emergency measures** adopted in the face of the pandemic as well as emergency support and compensation and socio-economic support measures **leave no one behind**, but take the particular vulnerability of the most marginalised in society into account, including specific vulnerabilities of parts of the LGBTI community.

- In support efforts, pay particular attention to support to **those working in informal and insecure settings**, including ensuring access to social protection and health care, as well as basic needs.
- Closely **monitor the impact on human rights** of LGBTI people as a result of emergency measures, whether as a result of official derogations or internal national guidelines. **Call out any abuse** of these derogation measures and stand ready to fully re-establish the human rights framework coming out of the crisis. Monitor that no measures adopted in times of derogation to HR law will be implemented in a discriminatory manner against any minority, including the LGBTI community.
- In order to achieve prompt and full return to a situation of normalcy, States have a heightened obligation to **ensure the protection of rights linked to physical integrity**, especially for the LGBTI community which is more at risk in situations of crisis.
- The **principle of legality and the rule of law must be guaranteed** at all times, and effective domestic remedies must allow alleged LGBTI victims of discriminatory measures vindicate their rights before independent and impartial domestic courts.³³
- Speak out and **condemn any wrong information and hate** being spread, blaming the LGBTI community or other minorities for the pandemic
- All specific initiatives in tackling the problem of a rise of **domestic violence** should also take the **increased risk of LGBTI people**, and especially young people, being exposed to domestic violence into account. In the long run, expanding definitions of domestic violence to include violence of family members towards LGBTI people would help preventive measures being inclusive and help ensure that policies designed to tackle domestic violence also do not leave LGBTI people who are physically or emotionally abused by their family members when living with them behind.
- Focus on **non-discrimination in policing** as they relate to emergency measures.
- Any quarantine legislation and controls should **allow people to choose their place of quarantine**, rather than basing it strictly on resident registration. This will allow people who suffer or are under threat of suffering from domestic violence to quarantine in a safe space.

ILGA-Europe are an independent, international non-governmental umbrella organisation bringing together nearly 600 organisations from 54 countries in Europe and Central Asia. We are part of the wider international ILGA organisation, but ILGA-Europe were established as a separate region of ILGA and an independent legal entity in 1996. ILGA itself was created in 1978. www.ilga-europe.org

To request more information on any specific points discussed in this rapid report, please contact Cianán Russell at cianan@ilga-europe.org and Akram Kubanychbekov at akram@ilga-europe.org

³³ ILGA-Europe (2020). Obligations of states in the field of human rights in the context of COVID-19. Available from: <http://www.ilga-europe.org/sites/default/files/COVID19%20-%20STATES%20OBLIGATIONS%20IN%20THE%20FIELD%20OF%20LGBTI%20HUMAN%20RIGHTS.pdf>