

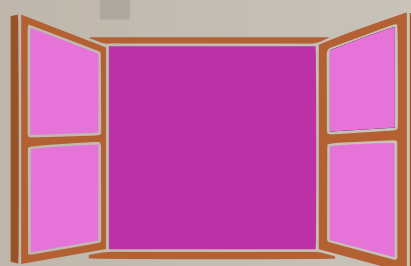
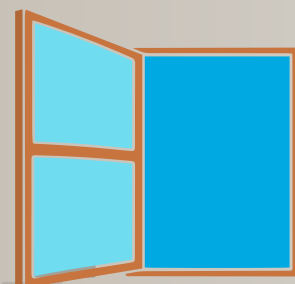
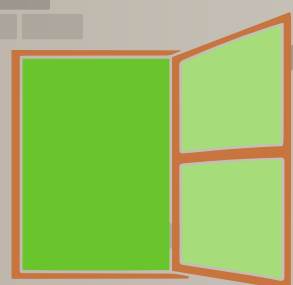
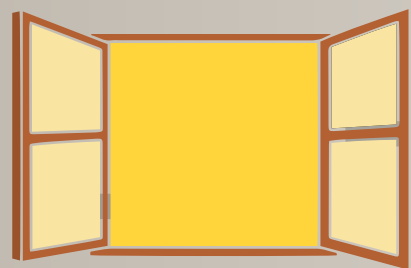
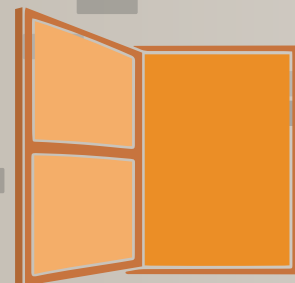
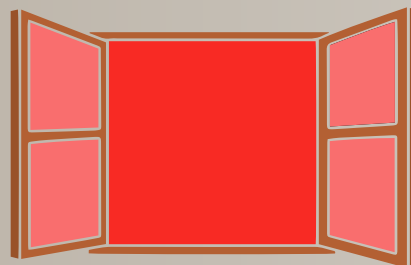
BeLonG To Youth Services

LGBTI+ Life in Lockdown: 1 Year Later **Key Findings**

The Impact of Covid-19 Restrictions
on LGBTI+ Young People in Ireland

belong^{TO}

Supporting LGBTI+
Young People in Ireland



One year later, the situation remains stark.

The global crisis of Covid-19 caused unprecedented upheaval experienced by people all over the world, with serious implications for both physical and mental health. The pandemic poses a greater risk to marginalised and vulnerable groups, including LGBTI+ young people. Even before Covid-19, LGBTI+ young people experienced a significantly increased risk of depression, anxiety, and suicide ideation. The global pandemic has heightened these mental health challenges, and for many LGBTI+ young people, the past year has been a lonely, anxious time.

At the beginning of the pandemic in 2020, we sought to understand the effect of the global health crisis on LGBTI+ young people in Ireland and conducted the research report *LGBTI+ Life in Lockdown*. These findings were devastating, demonstrating that 93% of LGBTI+ young people struggled with anxiety, stress, or depression during the Covid-19 restrictions, compared to 53% of the general youth population¹.

One year later, we identified the need for current data and conducted the study again to understand the experiences of LGBTI+ youth as this crisis continues to affect their lives and wellbeing. Over 2,000 LGBTI+ young people shared their experiences with us – the largest sample of LGBTI+ young people to participate in any of our research to date in this all-island survey. It is clear from the volume and nature of the responses that the need for young people to have a place to share what is going on for them is acute. Here, their voices are heard as we share with you the key findings.

Sadly, our latest research shows that the experiences and wellbeing of LGBTI+ young people have deteriorated during the last year. Nearly all of our respondents (97%) told us of their struggles with anxiety, stress, and depression during the past 12 months (2020: 93%). Many LGBTI+ young people are confined to unsupportive home environments due to lockdowns and physical distancing. This has increased anxiety levels, particularly among trans and non-binary youth, as many hide their authentic selves to maintain safety.

More than half (56%) of LGBTI+ young people surveyed in 2021 said they were not fully accepted in their home environment. Family rejection, feeling unaccepted, and a denial of identity can result in loneliness, stress, anxiety, and more complex mental health challenges. Additionally, rejection at home can also increase the risk of homelessness. Notably, 119 LGBTI+ young people reported experiencing homelessness in the last year.

Additionally, many formal and informal safety nets, supports, and services are also out of bounds because of lockdowns and increased social isolation, exacerbating risks for young LGBTI+ people. The public health measures needed to control the virus have resulted in the loss of social connections and support systems that protect LGBTI+ youth from self-harm and suicide ideation. For instance, many young people have lost access to friends, peers, and supportive adults due to space closures. This is reflected in our findings as 83% of LGBTI+ youth reported that they are experiencing acute loneliness (2020: 60%) and 75% of young people surveyed said that 'missing friends' was their biggest challenge during the pandemic.

The global pandemic has compounded the already existing challenges for LGBTI+ youth, and we saw demand for our frontline support services soar in 2020 by 113%. In response, we innovatively and rapidly responded to meet the needs of LGBTI+ young people during 2020 by providing digital youth work, including online LGBTI+ youth groups and text, email, and phone support services. Many of the actions we took to adapt our services were based on the findings of our 2020 *LGBTI+ Life in Lockdown* report.

In 2021 this research is a resource for service providers, allies, policymakers, and members of the LGBTI+ community to help protect and empower these young people by including them in our response to crises and programme adaptations. We need to let LGBTI+ young people know that they are not alone. By working together, we need to show LGBTI+ young people across Ireland that there is a space for them to come together, be who they are, and receive support.

To achieve this, we need the support of those passionate about ensuring LGBTI+ young people have their needs met, and their voices heard. We are sure that whatever lies ahead, the impact of Covid-19 will be with us for years to come. Our commitment is to continue to understand how this affects LGBTI+ young people, share that evidence to ensure that their needs are not forgotten, and be here for every LGBTI+ young person who needs us.

Moninne Griffith (she/her)
CEO, BeLonG To Youth Services



1. Young Social Innovators Covid-19 Youth 'Check In' Survey 2020.

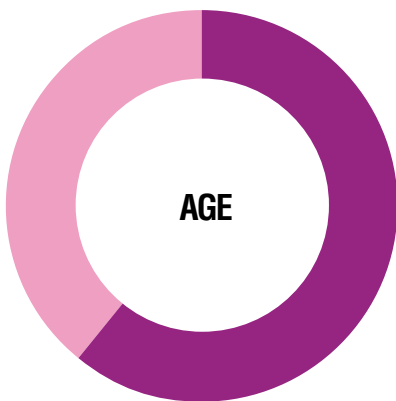
About the survey

This is the second iteration of the BeLonG To Youth Services *LGBTI+ Life in Lockdown* survey. This survey was conducted online from April 29th-May 10th, 2021, to assess the impact of the Covid-19 restrictions on LGBTI+ young people in the Ireland.

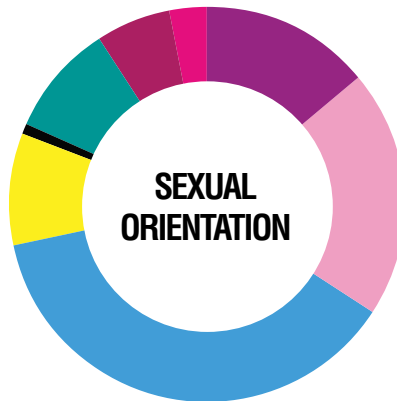
This research sought to capture the potential changes and consistencies in young people’s experiences since our initial study during the first few months of the Covid-19 pandemic in Ireland in 2020. To obtain a representative national sample of LGBTI+ young people, we conducted outreach through national, regional, and local organisations that provide services to or advocate on behalf of LGBTI+ youth.

The survey consisted of 37 questions and was hosted on the verified survey site GetFeedback. The survey was anonymous for the safety and comfort of LGBTI+ young people. Some 3,194 young people started the survey. A number of respondents fell outside of the inclusion criteria and 16 responses (including homophobic and transphobic rhetoric) were removed. The final sample consisted of a total of 2,279 LGBTI+ young people between the ages of 14 and 24 years. Participants were from all 32 counties in the Republic of Ireland and Northern Ireland. Quotes throughout are from LGBTI+ young people in response to open-ended questions in the survey.

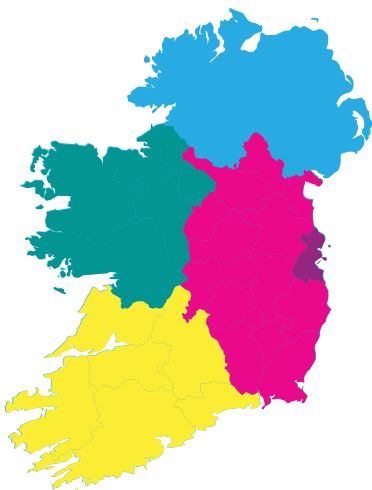
Who responded to the survey?



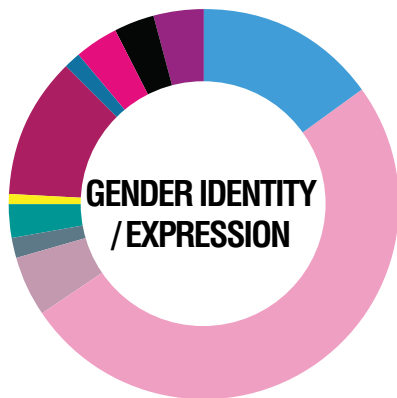
14-17 Years: 61%
18-24 Years: 39%



Gay: 14%
Lesbian: 20%
Bisexual: 37%
Queer: 9%
Straight/Heterosexual: 1%
Pansexual: 9%
Questioning: 6%
Other: 3%



Dublin: 31%
Leinster (excl. Dublin): 27%
Munster: 24%
Connacht: 10%
Ulster: 7%



Cisgender man: 15%
Cisgender woman: 50%
Transgender man: 5%
Transgender woman: 2%
Trans masculine person: 3%
Trans feminine person: 1%
Non-binary person: 12%
Agender person: 1%
Gender non-conforming person: 4%
Genderqueer: 3%
Other: 4%

Key Findings: Mental Health

The global pandemic has exacerbated existing mental health challenges experienced by LGBTI+ young people resulting from stigma, prejudice and discrimination. These findings present an increase in rates of depression, self-harm, and suicide ideation since 2020.

97% of LGBTI+ young people are struggling with anxiety, stress, or depression (2020: 93%).

63% of LGBTI+ young people are struggling with suicide ideation (2020: 55%).

50% of LGBTI+ young people are struggling with self-harm (2020: 45%).

83% of young people are feeling acute loneliness throughout the pandemic (2020: 60%).

58% of young people described their mental health as "bad" or "very bad" (2020: 48%).



I can't see friends, I'm estranged from family so being on my own all the time has messed with my head.

There has been an increase in the number of LGBTI+ young people experiencing suicide ideation (2021: 63%; 2020: 55%) and engaging in self-harm (2021: 50%; 2020: 45%). For some young people, ongoing isolation and struggles with mental health prompted them to resume self-harming during the pandemic and to struggle with suicide ideation and attempts to take their life. Additionally, some young people who had never self-harmed prior to the pandemic began to self-harm or considered self-harming. For many this was as a direct result of loneliness, isolation, and a lack of access to safe and supportive spaces during the pandemic. Respondents named a lack of support and resources to help them cope with suicide ideation.

Over 75% of trans young people who responded to the survey spoke about experiencing suicide ideation. These participants named the lengthy waiting time they experience to access gender-affirming healthcare in Ireland as one of the causes of their distress. Prior to the pandemic, healthcare provision for trans and non-binary people was



I have spent the entire year of this pandemic at least somewhat suicidal, to the point of very active suicidal planning at times. This resulted in me attempting to end my life.

often inadequate, with average waiting times of two to three years for an initial appointment. These problems have worsened during this crisis and in 2020, the Gender Identity Development Service UK (GIDS/UK/Tavistock) ceased operating in Ireland for new referrals. This is incredibly distressing for young people who have had to wait years to get an appointment. Due to ongoing issues with gender affirming healthcare provision, many of the trans and non-binary young people who responded to our survey feel that their healthcare is being viewed as 'non-essential', creating huge concerns that access to trans specific healthcare will continue to be deprioritised. While actions are being taken to fulfil the recommendations of the report submitted by the National Trans Healthcare Steering Committee, many young trans and non-binary people continue to wait to have their needs met by the service.



Key Findings: Mental Health

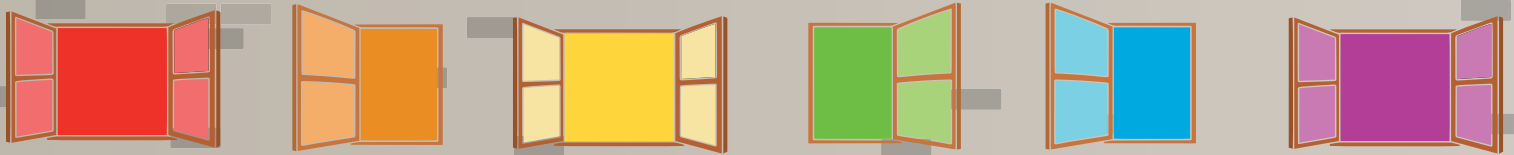
Although the survey did not specifically ask about eating disorders, open-ended questions relating to mental health, physical activity and self-harm elicited responses around eating disorders and body dysmorphia. Some LGBTI+ young people described their eating disorder as a form of self-harm that they struggled with continuously, while others related their feelings of body dysmorphia and restrictive and compulsive eating habits to their physical health and wellbeing.



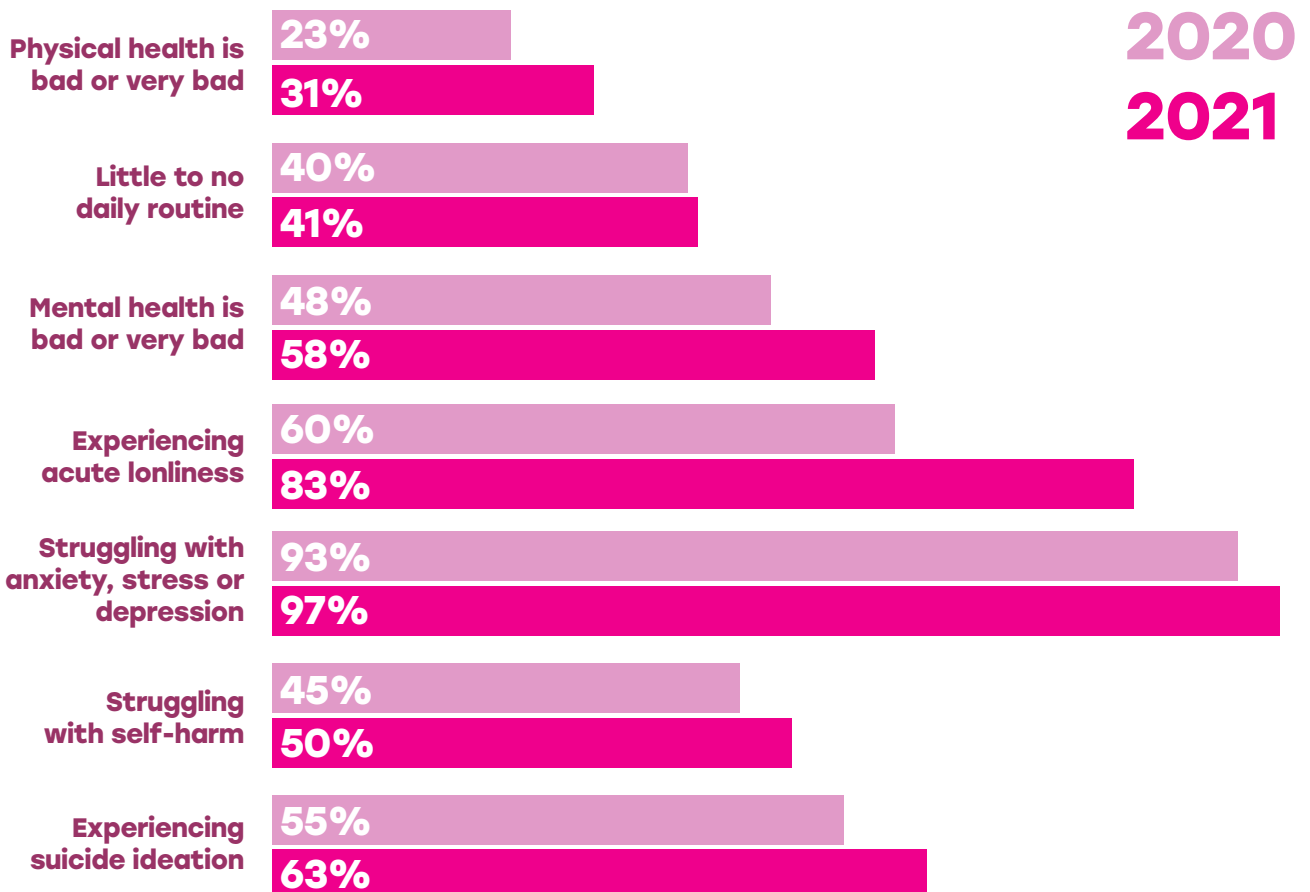
I've had thoughts of self-harm almost daily for the first time in five years.



I have spent the entire year of this pandemic at least somewhat suicidal, to the point of very active suicidal planning at times. Eventually this resulted in me attempting to end my life.



Wellbeing of LGBTI+ Young People



Key Findings: Home Environment & Housing

HOME ENVIRONMENT

56% of LGBTI+ young people said they are not fully accepted in their home environment.

During the pandemic, many LGBTI+ young people are spending their days confined to homes that are unsupportive of their sexual orientation and/or gender identity. Some 56% of LGBTI+ young people told us they were not fully accepted in their home environment (2020: 42%).



It is hard being misgendered all the time, the passing homophobic or transphobic jokes that are being made that I try tell my family not to make.

The relationship between LGBTI+ young people, their home environment, and those they are living with is complex. In analysing the responses, it emerged that many young people who felt somewhat accepted in their home environment had made a conscious decision not to come out as LGBTI+ at home. This was often due to uncertainty of how their family would respond or based on a pre-existing knowledge that their family is unaccepting of LGBTI+ identities. Many young people stated that while their family accepted their sexuality, they were unaccepting of their gender identity/expression. This demonstrates the ongoing challenges LGBTI+ young people face in gaining acceptance from their families, particularly if they have a gender identity/expression that is not cisgender.



I have found being around my family so much kind of hard. I think it has made me internalise their homophobia more. I used to be more accepting of my sexuality.

HOUSING

6% of young people who responded to the survey had experienced some form of homelessness.

Our research found that 6% of young people who responded to the survey experienced some form of homelessness. Of the 119 LGBTI+ young people who had experienced homelessness in the last year:



I was kicked out of my mother's house during the first lockdown, which was a terrible place for me.

34% were forced to stay with friends that they would not usually live with due to being forced to leave their homes or following an experience of domestic abuse.

32% were forced to stay with family that they would not usually live with.

14% were forced to stay in temporary accommodation e.g., hotel or Airbnb.

8% were forced to stay in emergency accommodation and/or a family hub.

13% were forced to sleep outdoors.

For some LGBTI+ young people who experienced homelessness, this occurred as a result of being forced out of home by family members who did not accept their sexual orientation or gender identity. For others, it was a result of financial instability. As our recent qualitative study on LGBTI+ homelessness with Focus Ireland and University College Dublin indicates², many homelessness services, supports, and spaces are not safe, nor do they provide adequately for the needs of LGBTI+ youth.



I was illegally evicted in March 2021. This destroyed my life I had built in Dublin, and I now do not have the money to rent, so I have to live with my family again.

2. Quilty, A. & Norris, M (2020) *A Qualitative Study of LGBTQI+ Youth Homelessness in Ireland*. Dublin: Focus Ireland, BeLONG To Youth Services.

Key Findings: Physical Health & Sexual Health

PHYSICAL HEALTH

73% of LGBTI+ young people say that their physical health had been negatively impacted by Covid-19.

31% of LGBTI+ young people regard their physical health as very bad or bad.

41% of LGBTI+ young people have little or no daily routine.



I go on more walks, but I don't enjoy them as much as I might because I get harassed by boys my age because I am queer.

The impact of physical health and routine on health and wellbeing is paramount. While some young people have good physical health, others are struggling. Almost half of LGBTI+ youth have little to no structure to their days which negatively impacts emotional, physical, and mental wellbeing. Some young people reported mental health affecting their ability to be physically active. Other LGBTI+ youth stated that ongoing struggles with body image, body dysmorphia, and eating disorders were also barriers to healthy and holistic participation in physical activity. For LGBTI+ young people placed at greater health risk due to Covid-19 and young people with disabilities, the services and supports necessary to facilitate their engagement with physical activity are limited and insufficient in addressing their needs. For trans and non-binary young people, transphobic harassment and gender dysphoria are a consistent barrier to their participation in physical activity. In addition to these barriers preventing LGBTI+ young people from engaging in physical activity, 41% of young people said they had little to no daily routine, which affected their wellbeing, motivation, and physical and mental health.



I simply do not leave my bed most days.

SEXUAL HEALTH

46% of LGBTI+ youth over the age of 18 have been sexually active during Covid-19.

51% of these LGBTI+ young people used protection.

76% of LGBTI+ young people who are sexually active did not access a sexual health check-up during Covid-19.

Young people over the age of 18 were asked about their sexual activity, access to relevant sexual health services, and any barriers they have experienced accessing sexual health services. Our research has found that there is limited knowledge that people can still access sexual health services and a lack of information about which sexual health services are open during the pandemic. This means that people are not accessing services despite urgently needing to.

Sexually active LGBTI+ young people experienced the following barriers to accessing sexual health services:

Closure of Services: 24% of sexually active LGBTI+ young people could not access sexual health check-ups specifically due to the closure of the Gay Men's Health service and other key service providers being closed within their local areas.

Lack of Knowledge: 21% of sexually active LGBTI+ young people could not access sexual health check-ups due to a lack of information on safe and supportive LGBTI+ services available and how to access them.

Fear of Being Outed: 12% of sexually active LGBTI+ young people said they were unlikely to attend a clinic due to fear that the clinics might be unaccepting of LGBTI+ identities. This was compounded by a lack of services in rural areas and a reluctance among young people in discussing their sexual health with their local GP in such a small community as they feared it would out them.

Cost: The cost of accessing sexual health services since the closure of college health services was a barrier for 13% of sexually active LGBTI+ young people.

Our Recommendations

LGBTI+ young people have shared their painful experiences over the past year, and now we must learn from these experiences and continue to meet their growing needs.

We recommend for our allies, funders, and policymakers to join us to:

1. Raise awareness about the increased vulnerability of LGBTI+ young people during this time.
2. Prioritise the reopening of in-person youth services in line with public health advice.
3. Make suitable outdoor spaces available for LGBTI+ youth groups during the Summer months until it is safe to bring youth work indoors.
4. Provide an interim Gender Identity Service to trans and non-binary young people under 18 until the new service is up and running.
5. Provide parents and guardians with accessible online and offline resources and information on understanding LGBTI+ identities, particularly gender identity, and how to support young people who choose to come out to their families.
6. Maintain vital services made available through one-off state funding during Covid-19, including free counselling for young people struggling with identity-based trauma and Youth Workers experiencing vicarious trauma resulting from their work.
7. Reopen sexual health clinics as a matter of priority in line with public health advice, particularly those clinics which cater to the LGBTI+ community, including a full reopening of the Gay Men's Health Service.
8. Amend the 2001 Mental Health Act to allow young people under 18 to access to mental health services without parental consent and to permit those under 18 to assent their own mental health care and treatment when mental health professionals deem it appropriate.
9. Implement robust legislation to combat hate speech and hate incidents online and offline, including the Criminal Justice (Hate Crime) Bill 2021, The Online Safety Bill 2021, and The Digital Services Act (EU).



Supporting LGBTI+
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Rialtas na hÉireann
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An Roinn Leanai, Comhionannais,
Míchumais, Lánpháirtíochta agus Óige
Department of Children, Equality,
Disability, Integration and Youth

