COVID-19 Guide for Journalists





LGBTIQ+ IN THE PANDEMIC

The COVID-19 pandemic has brought existing prejudices to the surface in our communities, in some contexts, social media is being used to increase stigma and discrimination.

While COVID-19 doesn't discriminate, these existing vulnerabilities can put some people at a higher risk of contracting the virus, serious illness, or suffering the impact of the social and economic implications of the pandemic. As journalists, it's important to ensure that our reporting reflect the reality of the communities where we live.

We should consider both the different information needs that people in our community may have, and ensure that our reporting represents all voices.

No one is safe from the pandemic until we all are, which is why inclusion is so important during this crisis and more diverse reporting should always be encouraged. Even if people who identify as lesbian, gay, bisexual, transgender, intersex, and/or queer (LGBTIQ+) face many COVID-19 challenges that are similar to other communities, they can also experience impacts of the pandemic as a result of discrimination and the disparities and inequalities that often accompany this population because of their sexual or gender identity.

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These disparities include, but are not limited to:

Health

LGBTIQ+ communities already face many challenges in evaluating inclusive and culturally appropriate health care. During COVID-19, where some healthcare systems may be under stress, this increases the likelihood that this population will have difficulty accessing the treatment they need.

Healthcare workers can, either consciously or unconsciously, make decisions to deny or delay the treatment depending on the condition and sexual orientation of the patient. This can be due to the prejudice attitudes, unconscious prejudices, lack of consideration or lack of understanding of specific health needs that certain LGBTIQ+ populations. Fear of discrimination can also prevent some people from providing contact tracing information for fear that their sexuality or relationships will be exposed.

The Colombian State recognizes health as a fundamental right, however, not all people have equal access to services and being registered in the contributory or subsidiary system does not guarantee access to health services. The organization Colombia Diversa's research confirms that daily acts against the LGBTIQ + population continue to be committed, ranging from subtle to brutal expressions of discrimination, violence and exclusion.



Mental Health

Higher rates of depression and suicide put LGBTIQ+ people at risk when faced with measures of physical distancing. Greater isolation and a sudden loss of community or professional support and cultural spaces can contribute to this risk.

There are many LGBTIQ+ people who before the pandemic had lost some of their ties because of their sexual orientation, gender identity or for other reasons, and what this situation did was increase the feeling of loneliness, depression or anxiety.

Stigma

Vulnerable groups can be singled out and blamed for spreading the virus. For example, in South Korea there was evidence of how gay people were blamed for the second wave of COVID-19 infections. The infections occurred after restrictions were relaxed in early May and traced to nightclubs in the Itaewon area of Seoul, known to be a hangout for gay people.

In Colombia, some people use social networks to place blame on the migrant population, including LGBTIQ+ migrants, for being propagators of the virus COVID-19.

Access to Social Services

LGBTIQ+ youth often face an increased risk of homelessness due to rejection within the family home. The confinement measures can put them at greater risk of domestic violence.

The pandemic has required both organizations and public entities to rethink how to continue providing their usual services, as well as how to anticipate and respond to situations that have not yet happened.

Mobility restrictions, confinement in our homes and prejudices around LGBTIQ+ people have aggravated the violence they experience. Although the norms for the protection from and punishment against violence have not changed, it is necessary to better dissemination information about what referral channels people can use to hold to account the people violating their rights.

This combination of impacts and consequences can be further aggravated and magnified for those with additional needs based on other attributes, such as disability or age.

Many LGBTIQ+ people may also face significant economic disparities compared to their non-LGBTIQ+ peers, meaning that they more often lack the resources they need to stay afloat during the COVID-19 crisis.

Migrant Population

There are migrants from the LGBTIQ+ community for whom it has been more difficult to receive health care because they are not nationals and do not have the Special Permit to Stay. The LGBTIQ+ rights organization ConPazes has denounced to the media that in cities like Bucaramanga "doors have been closed to LGBTIQ+ migrants in places where they previously received aid."

According to the organization, Caribe Afirmativo, LGBTIQ+ people in migration processes must not only live with acts of discrimination based on their nationality, but also based on their sexual orientation, gender identity and expression, which making their situation of vulnerability even more acute.



Violence against LGBTIQ+ people during the pandemic

According to the Colombian Ombudsman's Office, during the pandemic, cases of violence due to prejudice have increased and about 64 homicides and femicides have been committed against LGBTIQ+ people. The Ombudsman's Office report reveals that the main types of violence against LGBTIQ+ people that it has documented (388) since January 2020 are: psychological (154), physical (58) and sexual (26) violence.

According to this Office, 167 transgender people were victims of violence throughout the country during 2020, as were 58 lesbian women, 130 gay men; 17 bisexuals and 16 people with LGBTQI+ identities.

Among the registered cases of violence against the LGBTIQ+ population, 97% (36 cases) were carried out by the National Police.

This year the Ombudsman's Office monitored 1,617 cases of gender-based violence in the departments of Arauca, La Guajira, Norte de Santander, Ocaña, Putumayo and Santander, of which 31% (515 cases) correspond to refugees, migrants and asylum seekers. Of this population, 12% correspond to people with Diverse Sexual Orientation and Gender Identity (OSIGD).

Caribe Afirmativo points out that there is a growth of more than 100% in the cases of homicides identified, especially given that the crimes were committed in their family nucleus or the neighborhood where they live. The organization identified a new form of violence during mandatory confinement as well: the denial of access to humanitarian services to LGBTIQ+ Venezuelans.

The most vulnerable LGBTIQ+ community during the pandemic

The monitoring carried out by Caribe Afirmativo over twenty-one weeks in 2020 of LGBTIQ+ people from different municipalities of the country, reveals that "sex workers such as those who work as informal workers survive thanks to a daily production that, at this time, is no longer possible income due to the restrictions of circulation and mobility. For these people, staying at home - if they have to- is a death sentence because if they don't work, they have no way of getting food or covering their basic needs".

Sex and Informal Workers

Trans People

People who lives with HIV/AIDS

People without housing

Migrant and Refugee Venezuelan Citizens

Women who identify as Lesbian, Bi or Trans

Source: <u>Recomendaciones para reducir el</u> <u>déficit de derechos de las personas LGTBI en</u> <u>medio de la pandemia – p.13</u>

Most recurrent effects on LGBTIQ+ people in the midst of the pandemic

The Office of the United Nations High Commissioner for Human Rights (OHCHR, 2020) urged that:

Governments around the world ensure that emergency measures taken in the context of COVID-19 do not exacerbate inequalities and structural barriers faced by people with diverse sexual orientations and gender identities, and that they do not lead to an increase in violence and discrimination against these people.

Increase in violence

Labor Insecurity

Food Insecurity

Housing Insecurity

Reduced Access to Health Services

Psychosocial Effects

Source: <u>Recomendaciones para reducir el</u> <u>déficit de derechos de las personas LGTBI en</u> <u>medio de la pandemia – p.19</u>



What to report and how to address the LGBTIO+ perspective? The easy answer is... to ask! All good quality reporting should start with the voices and opinions of the community you are talking about. If you are new to reporting on this topic, a good place to start is by contacting an LGBTIQ+ organization in your municipality, or city. It is important to consider both the information needs of LGBTIQ+ people in this pandemic and the information you could provide to the wider community about LGBTIQ + people to combat prejudice and stigma, and build solidarity. While social organizations can provide an excellent introduction to some of the issues that affect LGBTIQ+ people, remember that each community is made up of people with diverse backgrounds. It is pertinent to remember not to generalize in your reports as all LGBTIQ+ people have particular challenges and feel differently. Similarly, the problems that affect LGBTIQ+ people in your city may be very different from other areas within or outside your country.



Investigation

Clear Concepts and Terminology: It's important to make sure you understand the proper concepts and terminology by seeking the advice of a local LGBTIQ+ organization to create working reporting guides to gather resources and agree on terminology that is inclusive and respectful.

Preliminary Interview: This involves informing your guest about the format of the interview, checking the facts, perhaps outlining what territory it will cover, discussing how they would like to see it presented to them, and asking if there are any topics that they are not comfortable discussing.

Identification: In addition to obtaining the person's consent, it is important that you, as a journalist, also understand and carefully consider the legal and social implications for the person if the story identifies them and their sexuality.

This doesn't mean you shouldn't report the story, but you might consider protections like removing or changing identifying information (such as name, occupation, or location) if the person is likely to be in danger if identified. This all depends on the context and how safe it is for the subject of your story.

Equilibrium

It is important for journalists to distinguish between opposing views on LGBTIQ+ issues and ideas and opinions that fuel prejudice and discrimination. While slanderous comments may be newsworthy, they should not be used simply to provide "balance" in a news item. Another consideration is how to portray LGBTIQ+ people, make sure your stories provide insight into the myriad of experiences people can have, not just highlighting their vulnerabilities or 'differences'.

It's important to:

Think carefully before mentioning a person's sexuality or identifying LGBTIQ+ communities in your report. In most cases, the sexuality or gender will not be relevant to the story at all. Think about the implications of targeting a vulnerable group in your reports. Ask yourself, are you reinforcing discrimination or damaging stereotypes or contributing to greater understanding in our community?

IDEAS TO INFORM

- Are special initiatives or efforts being made to educate or inform healthcare providers on how to address the urgent needs of LGBTIQ+ people during the COVID-19 pandemic?
- This could include a focus on physical and mental health services. Given the additional pressures of the COVID-19 pandemic, how are healthcare providers ensuring the continued provision of important treatments such as antiretrovirals, hormone therapy, testing for STIs, and blood-borne viruses?
- How are LGBTIQ+ companies and/or employees doing during the COVID-19 pandemic? In some contexts such as the United States, 40% of LGBTIQ+ people are employed in the restaurant and food service, hospital, education and commerce industries retail, all lines of the economy that were particularly affected by the restrictions of COVID-19 prevention measures.
- Are there groups that do not access health services for fear of discrimination or criminalization? What can health services do to reduce this problem? These may be changes in practices within clinics or health promotion entities that reach the patient at home or in a safe space.
- Look at the statistics for your municipality or city.
 What statistics are there on LGBTIQ+ people?
 Would a better understanding of the size of the community encourage policy makers to make changes? What are the community-led solutions to these problems?
- When people feel they cannot access government services, such as healthcare or housing, these groups often turn to their own community for support. Are there examples from your context where ideas for reform or solutions to problems come from within the community itself?



Some examples of journalistic reporting to keep in mind:

- https://www.france24.com/es/2020041
 5-pico-y-genero-trans-restriccionbogota
- https://ladiaria.com.uy/coronavirus/artic ulo/2020/5/america-latina-unica-regionen-el-mundo-que-restringe-lamovilidad-por-genero-en-plenapandemia/







More information: http://eepurl.com/hkvBC5

Sources:

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- https://colombiadiversa.org/
- https://internews.org/covid-19-resources-and-guides
- https://www.hchr.org.co/index.php/covid-19-y-su-dimension-de-derechos-humanos/469-especiales/covid-19/covid-19-y-ddhh/seguimiento-de-noticias-covid-19/9365-situacion-de-la-comunidad-lgbt-durante-la-pandemia-de-covid-19
- http://library.fes.de/pdf-files/bueros/kolumbien/16524.pdf

