Managing Anxiety and Depression in LGBTQ Populations During COVID-19

LGBTQ ANXIETY & DEPRESSION

Before 2020, LGBTQ communities carried a heavier burden of mental health challenges, especially depression (MDD), anxiety (GAD), PTSD, eating disorders (ED), substance misuse (SUD), and suicidal thoughts and actions.¹

During the novel coronavirus pandemic, LGBTQ people have shown higher rates of both anxiety and depression than any other population group surveyed.²

![Graph showing mental health America self-initiated screening results for different populations.]

UNIQUE COVID-19 STRUGGLES

Prior to the pandemic, LGBTQ communities already faced higher rates of unemployment, housing instability, and serious health challenges.³ These pressures have intensified for everyone, but LGBTQ populations have been disproportionately impacted.

In addition, lockdown restrictions may be particularly dangerous for transgender and gender diverse people cut off from necessary medication or surgery, for sexual and gender minority youth living in hostile homes, or for socially isolated LGBTQ Elders.⁴

FINANCIAL COLLAPSE

Coronavirus closures have been an economic crisis for LGBTQ workers, who are twice as likely as the general population to work in one of the top five COVID-impacted industries:

- Hospitality/Food Service
- Colleges and Universities
- K-12 education
- Health care
- Retail

COVID-19 health disparities for LGBTQ people are known, but uncalculated. Data on sexual orientation and gender identity (SOGI) are not collected, blocking valuable guidance on differences in transmission risks, trends, and severity of disease.

However, we know LGBTQ people are likely at increased risk due to higher rates of smoking and chronic illnesses like HIV and cancer, as well as barriers to care like poorly trained providers and mistrust of medical systems. In addition, LGBTQ Americans more frequently simply lack access to care or adequate health insurance — a literal life-and-death danger during a pandemic.

**SUICIDE RISK: ASSESS & ASSIST**

If someone says they are considering suicide, believe them. Listen with warm acceptance and encourage them to keep talking with you about their distress.

**INCREASING LEVELS OF DANGER**

**PLAN** – Threat of suicide is increasing if the person knows how they will take their own life. The more detailed, the more dangerous.

**MEANS** – The person has obtained the pills, gun, rope, or whatever means they need to die.

**TIME SET** – Plan is in motion; the time has been decided.

**SAFE FOR NOW: BUILD RESILIENCE**

- Emotional Self-Regulation
- Toolbox of Coping Skills
- Strong Social Network
- General Health Maintenance
- Sense of Purpose & Focus
- Manage Reactivity (limiting news/media diet can help)
- Take Control of What You Can Control
- Creative Projects
- Find Joy (or Absurdity) & Laugh

**IN CRISIS: GET SAFE**

- Don’t leave the person alone until they are safe
- Call or text a crisis line
- Help them make a safety plan with numbers to call in a suicidal emergency
- Call 9-1-1 if no other option – understand that some police may not be safe for all LGBTQ people, especially transgender folks and/or people of color
- Emergency safety concern overrides confidentiality