



KALEIDOSCOPE
INTERNATIONAL TRUST



**The Commonwealth
Equality Network**

INTERSECTIONALITY

**HELPING DEVELOP A MORE INCLUSIVE
APPROACH TO POLICYMAKING**



INTRODUCTION

The LGBTI+ community is made up of multiple cross sections and several intersecting identities in social categories, including sex, gender, disability, age, ethnicity/race, indigenous or minority status, caste, property ownership, health status, national origin, urban/rural location, and other socially embedded hierarchies. In other words, each lived experience is unique and must be understood as such. According to a statement from human rights experts on the International Day Against Homophobia, Transphobia and Biphobia (IDAHOBIT), in the times of the COVID-19 pandemic, these wide-ranging social identities have also amplified the vulnerabilities of LGBTI+ people.¹

Human rights experts have urged States to consider the diversity within LGBTI+ communities when designing, implementing and evaluating measures to combat the impacts of the pandemic.² However, the failure to respect and uphold right-to-life obligations of LGBTI+ people – and a lack of appropriate measures adopted by States to comply with principles of equality and non-discrimination, inclusion, and accountability – has pushed many LGBTI+ people further into the margins of society. A recent report by the Global Philanthropy Project (GPP) found that LGBTI+ people were excluded from categories of ‘at-risk’ populations in the top five donors and top 20 recipients of COVID-19 humanitarian response funds, highlighting the community’s ongoing invisibility within the international humanitarian system.³

Additionally, for LGBTI+ people, territorialisation of private and public spheres by cisgender and heterosexual norms has predominantly led to social and institutional exclusions that negatively reinforce various aspects of their lives. These exclusions are often based on perceived or anticipated difference in their sexual orientation, gender identity and expression, and sex characteristics (SOGIESC). The COVID-19 pandemic has exposed old and new prejudices against LGBTI+ people, and studies show that globally they are bearing disproportionate health and socio-economic costs.^{4 5 6 7 8}

Current policies aimed at supporting at-risk and vulnerable populations during the COVID-19 pandemic have largely been ineffective at addressing the specific needs of LGBTI+ people. This is because they do not address intersectional identities and often ignore the fact that inequalities from specific social locations of injustice can deny the visibility of certain people to policymakers. As will be outlined in detail below, this paper will argue for an intersectional approach to policy-making that emphasises the need for nuance and that factors in the multiplicity of experiences and identities within any LGBTI+ population across the globe. A multi-layered and concurrent intersectional approach will enable policymakers to better address inequalities experienced by LGBTI+ communities and mitigate the extent of the socio-economic consequences facing the community as we move forward into a post-pandemic world.

¹ Council of Europe (2020, June 29). COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States. Commissioner for Human Rights. <https://www.coe.int/en/web/commissioner/-/covid-19-the-suffering-and-resilience-of-lgbt-persons-must-be-visible-and-inform-the-actions-of-states>

² United Nations Human Rights Office of the High Commissioner [UNHR] (2020). COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States. Statement by human rights experts on the International Day against Homophobia, Transphobia and Biphobia. Available from: <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25884&LangID=E>

³ Global Philanthropy Project (2021). WHERE ARE THE GLOBAL COVID-19 RESOURCES FOR LGBTI COMMUNITIES? <https://globalphilanthropyproject.org/wp-content/uploads/2021/01/Mapping-COVID-Report-2021-Final-1.21.21.pdf>

⁴ Human Rights Campaign & psb. (n.d.). The Economic Impact of COVID-19 on the LGBTQ Community. HRC. Retrieved March 4, 2021, from <https://www.hrc.org/resources/the-economic-impact-of-covid-19-on-the-lgbtq-community>

⁵ Safer World (2020, August 20). “I was not worried about COVID-19... only my next meal” <https://www.saferworld.org.uk/resources/news-and-analysis/post/895-ai-was-not-worried-about-covid-19-only-my-next-meal-how-covid-19-is-affecting-lgbti-communities-in-nepal>

⁶ The World Bank (2020, May 15). El estigma no está en cuarentena: ¿cuál es el impacto de la covid-19 en la comunidad LGBTI? <https://www.worldbank.org/en/news/feature/2020/05/15/estigma-cuarentena-covid-lgbti>

⁷ ILGA Asia (2020, July 2). Impact on mental health and quality of life in time of COVID-19 for YKP and YPLHIV. <https://www.ilgaasia.org/news/2020/7/2/impact-on-mental-health-and-quality-of-life-in-time-of-covid-19-for-ykp-and-yplhiv>

⁸ Kaleidoscope Trust (2020). LGBTI+ in the Commonwealth in the COVID-19 Era. <https://www.commonwealth-covid19.com/>

CONTEXT

Recent data indicates that levels of acceptance for LGBTI+ people have increased globally, but the COVID-19 pandemic threatens to undo progress that has been made. It is worth noting that government and institutional responses to the pandemic have exacerbated existing levels of social exclusion, discrimination and violence against the community.¹⁰

For example, studies indicate that LGBTI+ people are more likely to suffer the associated health and economic impacts of the COVID-19 pandemic. An April 2020 report from the Human Rights Campaign in the United States found that 30% of LGBTI+ Americans had their work hours reduced, compared to 22% of the general population. The same report found that 20% of LGBTI+ people say their personal finances are 'much worse off' compared to only 11% percent of the general population.¹¹ Moreover, both Kaleidoscope Trust and Outright Action International have observed that LGBTI+ people worldwide are facing growing food and shelter insecurity, devastation of livelihoods, disruption in access to healthcare, elevated risk of family or domestic violence, myriad forms of social, economic and institutional exclusions, as well as violence, scapegoating, and discrimination.^{12 13}

While there is a lack of disaggregated data in public health surveillance on COVID-19 among LGBTI+ people, research indicates that LGBTI+ people are more at risk of exposure to the virus due to employment and/or living conditions and they face a higher risk of mortality due to underlying health conditions such as HIV and asthma.¹⁴ Studies also suggest that mental health conditions including trauma, social isolation, depression and anxiety are worsened by the COVID-19 pandemic, especially impacting sub-populations within the LGBTI+ community that face systemic and structural vulnerabilities.^{16 17 18 19} Furthermore, it has been documented that selective policing of public health measures such as curfews and stay-at-home orders were disproportionately punitive against the LGBTI+ community in several parts of the world.^{20 21}

⁹ Loyal, thisisloyal.com (2020, June 9). Social Acceptance of LGBT People in 174 Countries. Williams Institute. <https://williamsinstitute.law.ucla.edu/publications/global-acceptance-index-lgbt/>

¹⁰ United Nations General Assembly, Madrigal-Borloz, V. (2020, July). Protection against violence and discrimination based on sexual orientation and gender identity. <https://undocs.org/A/75/258>

¹¹ Human Rights Campaign & psb. (n.d.). The Economic Impact of COVID-19 on the LGBTQ Community. HRC. Retrieved March 4, 2021 from: <https://www.hrc.org/resources/the-economic-impact-of-covid-19-on-the-lgbtq-community>

¹² Bishop, A. (2020). VULNERABILITY AMPLIFIED The Impact of the COVID-19 Pandemic on LGBTIQ People. www.outrightinternational.org. https://outrightinternational.org/sites/default/files/COVIDsReportDesign_FINAL_LR_0.pdf

¹³ Kaleidoscope Trust (2020). LGBTI+ in the Commonwealth in the COVID-19 Era. <https://www.commonwealth-covid19.com/>

¹⁴ Ruprecht, M. M., Wang, X., Johnson, A. K., Xu, J., Felt, D., Ihenacho, S., Stonehouse, P., Curry, C. W., DeBroux, C., Costa, D., & Phillips II, G. (2020). Evidence of Social and Structural COVID-19 Disparities by Sexual Orientation, Gender Identity, and Race/Ethnicity in an Urban Environment. *Journal of Urban Health*, 98(1), 27–40. <https://doi.org/10.1007/s11524-020-00497-9>

¹⁵ Ibid

¹⁶ ILGA Asia (2020, July 2). Impact on mental health and quality of life in time of COVID-19 for YKP and YPLHIV. <https://www.ilgaasia.org/news/2020/7/2/impact-on-mental-health-and-quality-of-life-in-time-of-covid-19-for-ykp-and-yplhiv>

¹⁷ Moagi, M. M., van Der Wath, A. E., Jiyane, P. M., & Rikhotso, R. S. (2021). Mental health challenges of lesbian, gay, bisexual and transgender people: An integrated literature review. *Health SA = SA Gesondheid*, 26, 1487. <https://doi.org/10.4102/hsag.v26i0.1487>

¹⁸ LGBT Foundation (2020). Hidden Figures: The Impact of the Covid-19 Pandemic on LGBT Communities. Available from: https://www.lgbt.foundation/coronavirus/hiddenfigures?_cf_chl_jschl_tk__=dd4a57072d2bb2e4e8e690722cc2e6bd944e5ab0-1618988186-0-AWtxdROOliWUXMcNF8gzLZUjh8zjbxsdIvmfCwbrCZaPl0XxOAXuvKhh0kVVzYbhZD2gYi8QZT-N1FGxerKv7avvc2DQCUSXcraE0uEQDPWhB3qU12hgileHptnNgf0y_2d-ltaiNEurK20op75GxmOatGDGB3etL5T3FCn6xYvIIMB5pP1dKcMNKh2ball4_Jmht0JNWJwvJD4bbIbuBiyYvJNWkrO_A4lWDcdxSIQ2FGUMb9ivrWfJcZ8PwLcNrmZjkUWB2tyDwRSq_ek3_M4Ej8vRWRe5ErPHAJuM_xCfVqhC1Mi7oKkSenDDyUHQeCj1vwGMTvmcm1LDp-bqhA816bCgHL9NJM9kZUvzs469QmmmUYYPscstL_Brt-HZ-VUfJ4bqw_BUt4XWTuEHfm4W0hYUNTYrZa9yV-6C0DD

¹⁹ Allwood, L., Bell, A. (2020). COVID-19: Understanding inequalities in mental health during the pandemic. Available from: https://www.centreformentalhealth.org.uk/sites/default/files/2020-06/CentreforMentalHealth_COVIDInequalities_0.pdf

²⁰ Ruprecht, M. M., Wang, X., Johnson, A. K., Xu, J., Felt, D., Ihenacho, S., Stonehouse, P., Curry, C. W., DeBroux, C., Costa, D., & Phillips II, G. (2020). Evidence of Social and Structural COVID-19 Disparities by Sexual Orientation, Gender Identity, and Race/Ethnicity in an Urban Environment. *Journal of Urban Health*, 98(1), 27–40. <https://doi.org/10.1007/s11524-020-00497-9>

²¹ Council of Europe (2020, June 29). COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States. Commissioner for Human Rights. <https://www.coe.int/en/web/commissioner/-/covid-19-the-suffering-and-resilience-of-lgbt-persons-must-be-visible-and-inform-the-actions-of-states>

These studies underscore the reality that the conditions of LGBTI+ people have been akin to or worse off than the experiences of other minority groups during the pandemic. However, they fall short of explaining the degree of marginalisation faced by LGBTI+ people who are also part of other minority groups or social identities as listed at the outset of this paper. When we factor in multiple forms of marginalisation faced by LGBTI+ people during the pandemic together with how their intersecting identities exacerbate existing vulnerabilities, we begin to see the real impact of the pandemic. It is important to steer away from a unidimensional analysis of the experiences of LGBTI+ people and adopt an intersectional approach to policymaking and implement comprehensive and impartial policies that address an array of social inequalities and exclusions.

WHAT IS INTERSECTIONALITY?

Intersectionality is a term coined by Kimberlé Crenshaw,²² an American lawyer, to describe how multiple forms of oppressions operate simultaneously in social and institutional structures. Crenshaw has defined intersectionality as 'a lens, a prism, for seeing the ways in which various forms of inequality often operate together and exacerbate each other.'²³ Further, systems of exclusion are linked and interdependent on one another, creating an imbricated and complex intersecting system of oppressions, which the sociologist Patricia Hill Collins termed a 'matrix of domination.'²⁴

In applying this term to the LGBTI+ community, the ways in which identities of LGBTI+ people are created and recreated through interactions with social structures and institutions that are guided by cisgender and heterosexual norms become evident. These biased structures, in tandem with other systems of exclusion, discursively set the parameters and the extent of marginalisation faced by LGBTI+ people. As identity is fluid and in flux, an intersectional approach allows us to examine the overlapping and concurrent forms of discrimination in the various factors listed in the introduction. In turn, this will allow us to understand the multi-layered discriminations that operate simultaneously and compound the experiences of discrimination.

Contemporary policy analysis can risk focusing on the impact of COVID-19 in terms of absolute difference (LGBTI+ vs the rest) – but would lack nuance by doing so. By utilising an intersectional approach to policymaking that factors in multiple forms of marginalisation for LGBTI+ people with cross-sectional identities, the extent of the impact of the pandemic on LGBTI+ people can be fully realised and, consequently, addressed by informing more inclusive government policies. The following case study provides an example of an LGBTI+ person in Nepal with multiple, intersecting identities, whose experience in this cross section illustrates the extent of social and economic marginalisation during the pandemic.

²² Crenshaw, K. (1995). Mapping the margins: Intersectionality, identity politics and violence against women of colour. In *Critical race theory: The key writings that informed the movement*, ed. Crenshaw K., Gotanda N., Peller G., Thomas K., 357-83. New York: New Press

²³ Steinmetz, K. (2020, February 20). She Coined the Term 'Intersectionality' Over 30 Years Ago. Here's What It Means to Her Today. *Time*. <https://time.com/5786710/kimberle-crenshaw-intersectionality/>

²⁴ Collins, P.H. (1990). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. Boston: Unwin Hyman.

CASE STUDY

Chainu Chaudhary lost her job as a social worker in an LGBTI+ organisation in Itahari, a sub-metropolitan city in Nepal, just a few weeks before the World Health Organization declared COVID-19 a global pandemic. The organisation had faced funding cuts as a result of the onset of the pandemic. With fading prospects of finding another job without a formal education, she returned home to Gaisar, where she had a limited network of friends and lacked social protection for intersex women like herself.

In Gaisar, Chainu opened a bicycle repair shop using the little savings she had. Soon after, she was forced to temporarily shut down her business when the Nepali government ordered a national lockdown. During this time, she ran out of money and could not afford to buy groceries. When she found out that the local government office in her village was distributing food and supplies to those in need, she quickly made her way to the nearest distribution centre. However, the officer at the centre told her that supplies could not be distributed to single women. She went to bed hungry for three nights.

A week into the lockdown, Chainu fell ill. The nearest hospital was more than 30 minutes away on foot, so she did not go see a doctor because walking to the hospital would have meant encountering policemen, whom she had had bad past experiences with. Chainu also feared testing positive for COVID-19 at the hospital, which would have required her to spend time in a government-administered quarantine facility that she heard was badly managed, unhygienic, and unsafe for SOGIESC minorities.

After four months of lockdown, Chainu was able to reopen her bicycle repair shop. Her services were mostly sought out by Muslim men. When the word got out that she was repairing bikes for Muslim men, her neighbours reproached her for exposing herself to coronavirus by coming in contact with Muslim men, who were seen by locals as vectors of diseases. Soon, rumours began stirring in her village that she had contracted the virus. Her neighbours stopped allowing her into their homes and some even stopped talking to her altogether.

IMPACTS

Chainu's multiple, intersecting identities include:

- Intersex
- Low caste status
- Gender identity as a woman
- Single
- Peri-urban/rural dweller
- Minimal social network
- Low education

Therefore, Chainu faces interwoven impacts that exacerbate the above-mentioned social categories.

These include:

LOSS OF LIVELIHOOD AND FOOD INSECURITY: Funding cuts at the LGBTI+ organisation where Chainu worked rendered her jobless, which in turn made her economically insecure. With limited financial resources and skills, she tried to build a livelihood in her home village, which was shut down for four months after the government ordered a national lockdown. Without a steady income and no savings left, Chainu became food insecure.

OUTRIGHT DISCRIMINATION: Chainu was discriminated against due to her gender identity and marital status as a single woman. When she went to procure essentials at the local government-run distribution centre, the officer arbitrarily denied her supplies. Additionally, Chainu's experience of discrimination at the hands of police made her more vulnerable and at risk of violence in her own community.

DISRUPTION/RESTRICTED ACCESS TO HEALTHCARE: Chainu's lack of access to transportation during the lockdown, combined with her geographical location, limited her ability to access healthcare. Furthermore, poorly run quarantine facilities with a reputation for being unsafe for SOGIESC minorities prevented her from seeking services.

SCAPEGOATING: Rumours circulated in Chainu's village that she had contracted COVID-19 from the Muslim men who were patrons at her bicycle repair shop. Chainu could not make the gossip stop, nor could she afford to close her shop because her livelihood depended on it. This induced tremendous stress on Chainu, and when neighbours limited their contact with her, Chainu felt socially isolated, which had a negative impact on her mental health.

THE GOALS AND BENEFITS OF INTERSECTIONALITY IN POLICY MAKING

As noted above, the goal of intersectionality in policymaking is to identify and address the ways in which social identities including, but not limited to, sex, gender, ethnicity/race, disability, age, geography and other socially embedded hierarchies interact to form unique experiences for different members of society. Intersectionality recognises that policy is not neutral and it is not experienced the same way for all populations. In the cases of LGBTI+ people, a one-size-fits-all approach to address complex inequities simply does not work.

This is evidenced by the ways in which Chainu faced myriad forms of discrimination and exclusion as a result of her multiple marginalised identities that caused her to experience unique and disproportionate harm in comparison her heterosexual or cis-gendered counterparts. For instance, Chainu's loss of livelihood induced food insecurity and forced her to relocate to a remote village where she faced outright discrimination and was subjected to scapegoating. Chainu was denied access to government-distributed food and supplies as a result of her social position as a single woman with limited social capital and norm-defying bodily characteristics. She was also distrusting and fearful of police due to past experiences of violence from officers. As an intersex individual, Chainu surmised that she would be unlikely to receive appropriate care at a government-run quarantine or healthcare facility, and that she may face additional forms of discrimination or exclusion as a result of her minority status.

These are just a few examples of the challenges Chainu faced in accessing an inherently flawed policy system that failed to address her multiple identities and within-group diversity. While existing policies may factor in various causes of exclusion that impact heterosexual or cis-gendered women (such as age, education, marital status, caste, etc.), they often leave out the unique social positions of LGBTI+ people because the policy world remains largely heteronormative. Therefore, LGBTI+ people like Chainu are rendered invisible to policymakers, and measures to counter the myriad of barriers and challenges she and other SOGIESC minorities face in accessing services are mostly missing.

An intersectionality framework can reveal essential information about an individual's lived experience that is often hidden in mainstream policy analysis. Intersectionality encourages a different way of looking at all aspects of policy, including how problems are defined, how solutions are developed and implemented, and how such policies are evaluated.²⁵ As a result, 'the identification of different socially-situated perspectives will not only provide more precise information but also yield greater insights into systems of marginalisation and oppression. This will assist policymakers and service providers alike to deliver more effective and efficient programs and services to better meet the needs of those individuals and groups most disadvantaged by social inequities.'²⁶

²⁵ Hankivsky, O., & Cormier, R. (2011). Intersectionality and Public Policy: Some Lessons from Existing Models. *Political Research Quarterly*, 64(1), 217-229. Retrieved April 26, 2021, from: <http://www.jstor.org/stable/41058335>

²⁶ Rummens, J. A. (2003). Ethnic ancestry, culture, identity, and health: Using ethnic origin data from the 2001 Canadian census. *Canadian Ethnic Studies* 35 (1): 10-25. (Cited in Hankivsky 2011)

DISCUSSION

This paper has presented background information and context for introducing intersectionality within policymaking to identify and address the complex needs of LGBTI+ people with intersecting social identities in order to mitigate the socio-economic consequences of the COVID-19 pandemic.

Further, this paper has made a case that the temptation to identify a single reason for interwoven impacts is predictable, but focusing on a single source of marginalisation does not fully address the interlaced and overlapping relationship among impacts rooted in multiple factors. Hence, policymakers and researchers who are interested in an intersectionality perspective will realise the importance of locating oppressive forces that operate simultaneously under a 'matrix of domination' in society that impacts people's lived experiences in diverse ways.

The case study in this paper presented a window into the matrix of domination through Chainu's interaction with biased social space and institutional policies, which created unique barriers and challenges that are often overlooked by policymakers. Selective denial on the part of key a programme implementor (a government officer) who denied food and supplies to Chainu could have been due to a host of reasons such as her gender identity, conscious or unconscious bias based on perceived sex characteristics, age, ethnicity, caste, etc. In this light, this paper highlights that unidimensional policymaking privileges some inequities over those faced by the SOGIESC minority, while maintaining and reproducing hierarchies of oppression, and promoting exclusion of LGBTI+ people from policies.

To address these gaps in policymaking, an intersectional approach that takes into account multiple sources of inequalities — opening up space for seeing and understanding cross-cutting matrix of domination — is advocated to make comprehensive policy analysis.

Applying intersectionality to a policy system will be adaptive, taking on different forms depending on the context. Further analysis and discussion should consider context-specific ways to integrate intersectionality by identifying the sources of inequality, incorporating the voices and identities of the most marginalised populations, effectively delivering necessary resources, and enhancing forms of democratic participation to identify new and persistent inequities.

Policies become more inclusive and impactful when they centre and aim to address the intersecting concerns and challenges of the most marginalised people in society, and by not simply understanding intersecting identities as additive, because experiences of marginalisation are different for people at different social locations. As this paper has demonstrated, an intersectional framework will illuminate various layers of inequality, which will in turn allow for a more inclusive and sophisticated analysis that can lead to more effective, responsive, and