

The Effects of COVID-19 on Queer Asylum Claimants in Germany

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About the context

The Covid-19 pandemic clearly reveals the vulnerability of LGBTQI+ persons seeking asylum and refuge within the Common European Asylum System and as applied in Germany. The German government recognizes that the call to “stay home and save lives” potentially puts at risk vulnerable groups (i.e. women, children, elderly etc.) and increases isolation. However, people seeking asylum find themselves in cramped accommodation with less access to community and with increased instances of violence and trauma. In most federal states, legal services offered by the Federal Office for Migration and Refugees (BAMF) have been temporarily suspended. A particularly vulnerable group within the category of asylum claimants in Germany are lesbian, gay, bi- and transsexual, gender non-binary and intersex people seeking asylum who often experience loneliness and abuse in reception and accommodation camps due to homo/trans-phobia. The continuing pandemic substantially exacerbates the social isolation they were already facing and poses specific challenges in regard to accommodation, healthcare, access to community, trauma and isolation, and (sexual) violence.

The [Queer European Asylum Network](#), under the leadership of Dr. Mengia Tschalaer (SPAIS, University of Bristol), organized a [virtual symposium on COVID-19 & Queer Asylum](#) on 29th April 2020 to explore how the lives of LGBTIQ+ asylum claimants and refugees are affected in terms of social isolation, health and legal needs. This symposium facilitated a conversation between the Council of Europe and NGO representatives, lawyers, LGBTQI+ activists and LGBTQI+ persons seeking asylum and refugees from Germany. The policy brief – along with an [advocacy video](#) – summarizes the findings of this symposium and outlines key policy implications for the German government and EU stakeholders.



Policy recommendations

The federal government as well as local governments should recognize that LGBTQI+ persons seeking asylum and refugees constitute a particularly vulnerable group in this crisis and beyond and should take steps to improve their safety, health, and livelihood during and after COVID-19. These measures are in line with German Basic Law and the European Human Rights Convention.

- The system of reception and centralized accommodation camps must be reconfigured in order to ensure safety and health standards for all refugees. However, in the short term, LGBTQI+ persons should be assigned single rooms in reception and accommodation camps, or assigned safe LGBTQI+ housing, so as to minimize risks of violence and stigmatization.
- All camps must have a free and stable internet connection that allows for LGBTQI+ persons to stay in touch with their counsellors, LGBTQI+ community organizations and friends so as to tackle extreme isolation and prevent re-traumatization.
- Shelters, support services and other measures to address gender-based violence during the COVID-19 pandemic should take steps to include the LGBTQI+ population in these measures.
- Specific efforts should be made to ensure accessible health care for all during a health crisis – regardless of residence status – and to minimize stigmatization and discrimination for LGBTQI+ persons. Healthcare that is particularly relevant to LGBTQI+ people should not be de-prioritized during a pandemic.
- Counselling and support services in adequate languages for LGBTQI+ should not be stopped during a pandemic. LGBTQI+ refugee groups and networks have to be supported and provided with funding for them to offer help and support services. It must be ensured that LGBTQI+ persons have access to these services in order to minimize risks of re-traumatization, depression, self-harm and substance abuse.

Key findings

- **Accommodation:** The COVID-19 crisis has shown that the system of arrival centers and centralized accommodation facilities is not adequate to protect the health and safety of persons seeking asylum and refugees. Reception and refugee camps are often overcrowded and do not allow for social distancing measures to be implemented. In addition, LGBTIQ+ refugees have special needs in the field of sexual and mental health (HIV, hormone treatment, depression etc.) which elevate their risk for health complications in case they contract COVID-19.
- **Homophobia, trans*phobia and misogyny:** The camps are not safe for LGBTIQ+ claimants, who even before COVID-19 faced violence and discrimination due to their sexual orientation and/or gender identity status. Being locked in with their abusers heightens the risk of stigmatization and (sexual) violence and exacerbates trauma, isolation, and self-harm. Lesbians and trans women are particularly vulnerable to sexual violence.
- **Isolation:** The lockdown has heightened the isolation of LGBTIQ+ persons seeking asylum who hide their SOGIESC status in the camps and who, in most cases, have no support networks in the camps. They tend to minimize all interaction with fellow roommates and other camp inhabitants out of fear of being outed, stigmatized and harmed. As a result, LGBTIQ+ claimants tend to live in extreme isolation in reception and refugee camps.
- **Community access:** The COVID-19 related lockdown meant the loss of community access for LGBTIQ+ persons living in refugee camps. All socializing and LGBTIQ+ group activities provided by community groups and LGBTIQ+ NGOs were halted and support and educational services such as language classes were moved online. The lack of a consistent WIFI connection in refugee accommodations make it difficult for LGBTIQ+ asylum seekers to engage in online community events, counselling groups and/or classes. This further exacerbates the isolation of LGBTIQ+ persons seeking asylum and refugees.
- **Access to healthcare:** The healthcare system in Germany is not easily accessible for LGBTIQ+ asylum seekers because they lack health insurance and/or fear being outed. Particularly trans sex workers and LGBTIQ+ persons living with HIV were found to be reluctant to access the healthcare system during COVID-19 due to fear of stigmatization. LGBTIQ+ asylum seekers additionally reported that the lack of information in different language and racial prejudice on the part of health officials deterred them from getting adequate medical help during the pandemic, and in areas that are more rural only exacerbated the problem.

“With the pandemic, trans people seeking asylum are now more isolated than they were before because they have to be even more careful to hide their gender identity within hostile environments.”*

(Lilith Raza, The Lesbian and Gay Federation in Germany)

Further information

Further information on the Covid-19 and Queer Asylum Symposium and the Queer European Asylum Network, under which auspices the symposium has been organized, can be found at www.queereuropeanasylum.org

This Policy Brief has been finalized in collaboration with Danijel Cubelic (European Coalition of Cities Against Racism), Dr Nina Held (SOGICA at University of Sussex), Lilith Raza (The Lesbian and Gay Federation in Germany), Knud Wechterstein (Rainbow Refugees Support Frankfurt), Dr Harpreet Cholia (Refugee Council Hessen) and Magdalena Müssig and Mohammad Dalla (Bundesstiftung Magnus Hirschfeld).

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Website of EU-funded project “Queer Muslim Asylum in Germany”: www.queerasylum.org