COVID-19 Pandemic and LGBTQ+ Youth

Given the well-established health disparities between lesbian, gay, bisexual, transgender, queer, and gender-expansive (LGBTQ+) and cisgender, straight youth, scholars predicted the COVID-19 pandemic would disproportionately impact LGBTQ+ students.

❙ 1. Background

The COVID-19 pandemic disrupted K-12 education, exacerbating long-standing academic, social, and health disparities among historically marginalized groups of students [1][2][3][4][5]. However, it remains unclear what effect COVID-19-related disruptions to the school environment had on lesbian, gay, bisexual, transgender, queer, and gender-expansive (LGBTQ+) youth. The pre-pandemic literature concerning LGBTQ+ students' school experiences suggests that COVID-19-related school disruptions could have both beneficial and harmful consequences for youth. When schools closed their doors to in-person learning and shifted to virtual learning in March of 2020, families with school-aged children faced multiple obstacles. Caregivers lost jobs, moved to remote work, scrambled to find childcare, learned about new work- and school-related technology, supported their children with online learning, and lost access to many social supports that schools provide for families. Reports of increased stress and anxiety in the United States since the start of the COVID-19 pandemic reflect these realities [6]. Because of the well-established academic and health disparities between cisgender, straight and LGBTQ+ youth before the pandemic and the added stress COVID-19 posed to families with school-aged children, many scholars raised concerns about the health and safety of LGBTQ+ students [7][8][9][10]. These scholars suggested that school closures could further increase exposure to family-based social stressors as students lost access to LGBTQ+-inclusive supports in schools [7][9][10].

To that end, school closures related to the COVID-19 pandemic could have also provided LGBTQ+ students sanctuary from harmful school environments. If students could still access support, the change to online learning could shield students from the prevalent, harmful social interactions. Prior to the COVID-19 pandemic, LGBTQ+ students faced greater identity-based social stressors in schools and at home on average compared to their peers, which put LGBTQ+ youth at risk of poor academic and health outcomes [11][12][13][14][15][16][17][18][19][20][21]. Yet, LGBTQ+ youth in environments with greater structural and social support do not necessarily report poor academic or health outcomes [18][22][23][24][25], indicating the importance of school and family contexts on these individual-level outcomes. Students might have also been spared from harmful school environments with high levels of bullying and discrimination because of COVID-19-related school disruptions and virtual learning spaces.

A more nuanced understanding of the impact of COVID-19 on LGBTQ+ students aligns with calls from a growing number of scholars who have advocated for educational and health researchers to move beyond dominant narratives of LGBTQ+ youth as victims of bullying [26][27][28][29][30][31]. These scholars recommend focusing on how schools maintain cisheteronormative systems, while also describing the agentic power of LGBTQ+ youth. For instance, Brockenbrough [26] and other scholars [28] using a queer of color critique lens advocate for the field to focus on systemic oppression through racist and cisheteronormative educational institutions. Payne and Smith [29] similarly argue that efforts to reduce risk by intervening in anti-LGBTQ+ bias in schools do not account for the many dimensions of institutionalized power that marginalize LGBTQ+ youth. Gilbert et al. [27] emphasize research that resists deficit-based narratives and highlight new possibilities for students within schools. Rather than focusing on the individual, to center the influence of systemic disruptions on the well-being of youth. The COVID-19 disruptions provide an opportunity to examine how in-school forces influence the safety and well-being of LGBTQ+ youth across multiple domains. Thus, researchers explore changes in students' reports of victimization, anxiety, and suicide attempts during the COVID-19 pandemic and whether LGBTQ+ students reported different trends across these constructs compared to cisgender, straight students.

2. Schools as Sites of Harm and Support for LGBTQ+ Youth

Prior to the pandemic, many LGBTQ+ youth experienced marginalizing school environments that negatively influenced their well-being. LGBTQ+ youth face higher incidents of harassment, bullying, and victimization in schools than their heterosexual and cisgender peers [13][15][16][19][32], and this rate has remained relatively stable since 2015 [33]. In a 2019 national survey of LGBTQ+ students, more than 80% of LGBTQ+ students reported experiencing harassment or assault at school [22]. Using the Dane County Youth Assessment (DCYA), a survey of middle and high school students, Robinson and Espelage [20] found that LGBTQ+ students reported less school belonging and greater suicide attempts, victimization, and unexcused absences.

Harassment and the related health risks, such as suicide, can also be exacerbated by direct harassment or a lack of intervention by adults in schools. For instance, several scholars find that educators do not consistently intervene in LGBTQ+ bias-based bullying [34][35][36]. Additionally, more than half of LGBTQ+ students reported hearing school staff make homophobic comments, and two-thirds reported hearing school staff make negative remarks about students' gender expression [22]. McQuillan and Mayo [37] suggest educational practitioners contribute to ongoing bias and bullying in schools by directly bullying LGBTQ+ youth and preventing staff from learning how to better support students.

Exposure to identity-based stigma, victimization, or discrimination puts LGBTQ+ students at greater risk than their cisgender and heterosexual peers of experiencing poor academic achievement and mental health problems [11][12][20][32][38]. Several pre-pandemic studies suggest suicide attempts among the general U.S. population has remained relatively unchanged in the last decade [39][40][41], although the rates among adolescents have increased according to the Centers for Disease Control [39][42][43][44]. Although suicide rates have been decreasing among LGB youth, Raifman et al. [45] indicate that LGB youth remain 3 times more likely to attempt suicide. The lack of longitudinal data makes similar trend analysis of suicide attempts in transgender youth difficult. Still, Toomey et al. [46] report transgender youth are 3.5 times more likely to attempt suicide than cisgender youth. Using the DCYA data, Robinson and Espelage [32] found bullying to partially explain mental health risks among LGBTQ+ youth, such as suicide attempts, but are only part of the contributing factors. As such, the consideration of the effect of systemic disruptions during the COVID-19 pandemic includes an assessment of changing suicide attempts rates.

Although schools can be a stressful location for LGBTQ+ youth, they are also sites where youth can explore different aspects of their identity and develop identity-based leadership skills. Schools can provide access to important supportive relationships with peers and adults, as well as to resources that affirm their gender or sexual identity [27]. This support contributes positively to students' well-being [17][22][47][48][49][50]. Connecting with supportive peers and adults at school can facilitate greater school belonging and other positive school experiences compared to youth without supportive social support in school [17][22][50]. Social support from peers can also mitigate the harmful effects of family rejection on LGBTQ+ youth's mental health [51]. Educators may support LGBTQ+ youth by discussing LGBTQ+ issues, supporting leadership skills, and connecting students to affirming resources. LGBTQ+ students in schools with supportive school personnel experience a greater sense of belonging, less victimization, higher self-esteem, and lower levels of depression than those without supportive adults in schools [17][22][50]. Social support and safe spaces may have been even more important for LGBTQ+ youth during the pandemic [9][10][52].

In addition to supportive peers and adults, access to LGBTQ+-inclusive school resources promotes LGBTQ+ students' mental health and safety in schools [27][53][54][55]. For instance, Gender and Sexuality Alliances (GSAs) provide safe spaces for LGBTQ+ youth in schools where they can explore their identities [56][57][58][59]. LGBTQ+ students in schools with GSAs report feeling safer and having lower rates of mental health problems than those without GSAs [60][61][62]. School-based health centers also provide critical access to mental health services. LGBTQ+ students are more likely to utilize school-based health services than other mental health services, and school-based health services are associated with lower mental health distress among LGBTQ+ youth [63][64]. Additionally, LGBTQ+ students in schools with protective policies, LGBTQ+-inclusive curricula, and practices report better school experiences and well-being than students without protective and inclusive supports [49][55][65][66][67][68][69]. The COVID-19 pandemic may have restricted LGBTQ+ students' access to these affirming resources and exacerbated existing mental health issues.

3. The COVID-19 Pandemic and LGBTQ+ Youth

School closures moved students out of schools and into home environments that may have posed serious risks to LGBTQ+ students' health and safety. Coming out to family and friends, as well as receiving their support has been important to LGBTQ+ individuals' health [70][71]. LGBTQ+ youth who conceal their identity [72][73] or are rejected from their families [21] experience greater mental health problems (i.e., distress, depression, anxiety, disordered eating, suicide).

During the pandemic, only one-third of LGBTQ+ youth reported that they found their home affirming to their gender or sexual identity [74]. Even more concerning, LGBTQ+ youth report higher rates of sexual, psychological, and physical abuse from their families than their cisgender, heterosexual peers [75][76]. LGBTQ+ youth who have yet to disclose their gender or sexual identity, or who are "out" but lack support from their families, face additional stressors being at home [3][9] [10][77]. The COVID-19 pandemic may have exacerbated mental health problems among LGBTQ+ youth as they spent extended time at home, especially for youth among unsupportive families.

Some early evidence suggests the COVID-19 pandemic put LGBTQ+ individuals' at risk of experiencing emotional distress. Overall, LGBTQ+ adults experienced increased stress, anxiety, depression, and decreased quality of life during the pandemic [78][79][80]. Although studies exploring these relationships among K-12 LGBTQ+ students remain scarce, at least one study found LGBTQ+ college students who reported increased victimization during the COVD-19 pandemic had four times the odds of higher levels of psychological distress [52]. Qualitative studies indicate K-12 LGBTQ+ youth expressed pandemic-related concerns (1) for their mental health due to social isolation and a lack of structure, (2) being at home with unsupportive family members, and (3) loss of access to LGBTQ+-inclusive spaces and resources in schools [77]. Compared to 30.3% of heterosexual youth, 63.8% of lesbian, gay, and bisexual youth reported that their "mental health was most of the time or always not good during the COVID-19 pandemic" [43]. Initial research indicates the COVID-19 pandemic exacerbated mental health concerns among LGBTQ+ individuals. The shift from in-person to remote learning during the COVID-19 pandemic may have provided LGBTQ+ students relief from hostile school environments but may have posed mental health risks as students lost access to supportive school resources and moved into possibly stressful home environments.

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