

“Not sure how much longer I can hold on”: The pandemic’s impacts on housing, income, food security, and mental health among 2SLGBTQI people

Introduction

The COVID-19 pandemic has increased health risks generally and intensified preexisting health disparities faced by many 2SLGBTQI people in Canada. There is, however, a lack of knowledge on the impacts of the pandemic on various social determinants of mental health (SDoMH) among 2SLGBTQI people. SDoMH are the conditions in which people “are born, grow, live, work, and age”: for example, access to housing, food, and healthcare; employment; income; education; and degree of community connections and social supports (Compton & Shim, 2015). They are shaped by the multilevel distribution of money, power, and resources (WHO, 2014). Given the unequal distribution of money, power, and resources (WHO, 2014), and these circumstances influence the risks of poor mental health and well-being.

Through [Queering Mental Health Supports in Canada](#), a multi-year research and education project, Egale Canada addresses these knowledge gaps concerning the impacts of the pandemic on SDoMH and the subsequent impacts on 2SLGBTQI people’s mental health. One major output of this project is an online training program and resources for mental health and social service providers.

This data brief will focus on the COVID-19 pandemic’s impact on key SDoMH—namely, employment, income, housing, and food insecurity—among 2SLGBTQI individuals (n = 303 national survey respondents and n = 58 focus group participants) who participated in the Queering Mental Health Supports in Canada project (see

[Seida, 2023](#)). In efforts to maximize the impact of our research on policy, included in this report are quotes from both 2SLGBTQI service seekers and 2SLGBTQI service providers who participated in the project.

Employment

Steady employment is one of the social determinants of mental health most directly impacted by the pandemic, with national data revealing a more than twofold increase in the unemployment rate between February 2020 (5.6%) and May 2020 (13.7%) (Statistics Canada, 2020). Throughout the pandemic, 2SLGBTQI individuals in Canada were especially at risk of employment loss, because they were less likely to be securely employed and to be working full-time if employed (Appiah et al., 2021). Indeed, a survey Egale Canada conducted at the outset of the pandemic in 2020 (N = 2300, weighted) found that 31% of 2SLGBTQI respondents (n = 300) were full-time employed, while 17% were unemployed (Egale Canada et al., 2020a). In a second, follow-up national survey we found that 2SLGBTQ people (n = 300) were more affected by layoffs and reduced hours than national respondents (n` (Egale Canada et al., 2020b).

In our national survey,¹ we found that nearly

35%

of survey respondents experienced negative changes in their employment as a result of COVID-19.

These negative changes had correspondingly negative impacts on mental health. As one queer, genderfluid/nonbinary individual living in urban QC noted:

“ I lost my job and then had to take the first one I could find. I am working in a very stressful borderline toxic work environment where I am underpaid for the services I provide. I often feel exhausted and resentful when I am at work. ”

¹ Please note that survey respondents are described according to their demographic details, while focus group participants are referred to by their assigned pseudonym.

Jess, a focus group participant, similarly stated that because she had drawn “a lot of self-worth and routine from work,” losing employment “really impacted [her] negatively.”

Employment challenges were among several simultaneous and cumulative stressors. As an older lesbian woman living in rural Manitoba discussed:

“ [I am] overworked, I’ve spent more time in direct service and fell behind in admin, more demanding and high needs clients, more prone to vicarious trauma, [...] compounded by the last years of Trump, the US supreme court, women’s rights declining in the States and globally, vocal anti-gay and anti-trans laws/attitudes, the Ukraine, and American mass shootings. It’s too much [sic] cumulative stressors.

Some respondents discussed the consequences of negative changes to their employment. For instance, a gay/queer agender trans man living in a small ON city shared:

“ I spent the first year and 8 months of the pandemic without employment, so my income was sporadic, only from donations, and I ate through my savings. This put me in a lot of distress, and negatively impacted my mental health. I was not sure if I would continue to have a home or be able to eat for long portions of that time.

For the 26% of our survey respondents who cited positive changes to their employment, the most common reasons were the flexibility of working from home/working remotely, having the time to look for and obtain new and better employment, and getting a promotion.

Income, Economic Stability, and Experiences of Poverty

We know very little about 2SLGBTQI poverty in Canada, but recent work has shown that the pandemic's impacts on employment, as noted above, have had direct impacts on risks of low income and poverty among 2SLGBTQI people (Kia et al., 2021). 2SLGBTQI people experiencing poverty have greater difficulty accessing healthcare, and studies show that discrimination explains persistent associations between 2SLGBTQI status, poverty, and poor health (Kinitz et al., 2022).

The current research found that, 30% of participants (n = 91) experienced negative changes in their income, 21% (n = 64) noted positive changes in their income, while 40% (n = 122) indicated they had not experienced any changes in income since the start of the pandemic. More specifically, participants who experience negative changes in income shared the negative and wide-ranging mental health impacts of this decrease and other effects of the pandemic in the context of inflation and rising living costs, with “not being able to make ends meet” causing both anxiety and depression. Rising living costs, driven by the pandemic, impacted even those whose incomes had increased: “Though I’m making more than I was by a lot, it still isn’t enough to counteract increasing expenses of rent, gas, groceries, and just general living” (a lesbian woman living in small BC city).

Several people also noted how pandemic-related income changes required dipping into their savings, causing a range of mental health concerns. For example, a Two Spirit man living in a small BC town wrote:

“ I had a stable life in a nice, rented townhouse pre-pandemic. I’m currently living off of charity and my savings account. I am nearly 30 and I feel a sense of mourning for an adulthood our economic climate has not allowed me to have. I feel a pressure to find and escalate a romantic relationship purely for rent relief. Jobs I am qualified for pay above minimum wage, but not enough to cover one-bedroom rent anywhere. This contributes greatly to a sense of hopelessness about the future and feelings that I lack agency in my life. ”

Service providers who participated in our survey and/or focus groups also discussed how precarious employment, inflation, and low income combined to impact their 2SLGBTQI clients:

“ With the stimulus gone, I’m seeing intensifying financial precarity everywhere. [My] clients had economic relief for the first time because of CERB, and now that’s been stripped away [and] now inflation is almost at like 10%! [...] Poverty really impacts my clients’ health. And so a lot of what we talk about is how to thrive within poverty. (Lindsey, queer service provider working in ON)

”

Employment-related mental health concerns were especially pronounced for 2SLGBTQI service providers, who were frequently experiencing challenges like those of their clients:

“ There has been a large impact on my mental health through the pandemic since I am a mental health practitioner. It was sometimes difficult to hold space for clients to process what was happening while I was also experiencing it (e.g., the 6-month curfew in Quebec, the increase in cost of living, general trauma of the pandemic, etc.). (A bisexual/queer woman living in urban area of QC)

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For those who experienced positive changes to their income, it was evident that this led to improved mental health:

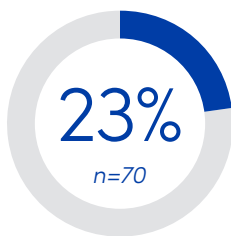
“ My income has more than doubled since the pandemic started. This is a huge privilege [and] if it was not for this privilege, I would not have been able to leave my abusive ex-partner. Being slightly freer from that situation has enabled me to get support for my mental health, not to mention I am no longer subjected to the abusive behaviour which, some days, made getting out of bed a major struggle. (A bisexual woman living in small town in ON)

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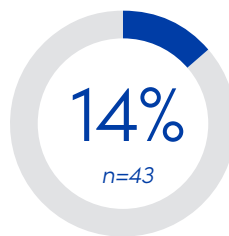
Our data clearly show the centrality of income and economic security in shaping mental health and well-being. This is especially true for 2SLGBTQI people in Canada, who prior to the pandemic were already facing more economic precarity (Kia et al., 2021).

Housing

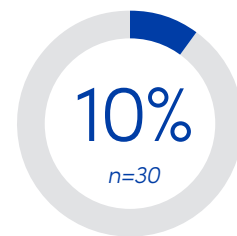
Adequate, suitable, and affordable housing is a core determinant of both physical and mental health and well-being, increasing personal safety, and decreasing stress (Canadian Mental Health Association, 2021). However, 2SLGBTQI people face numerous barriers to secure and safe housing, such as a lack of affordable housing. Among our survey respondents,



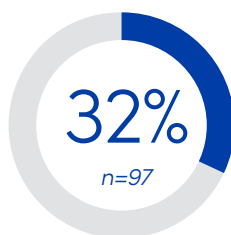
noted they had difficulty finding a new place to live.



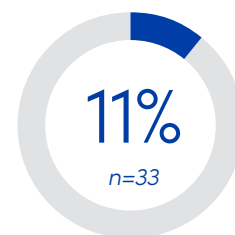
needed to move in with family and friends.



had to move into a new neighbourhood because housing was not affordable.

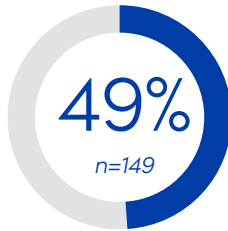


felt unsafe due to others' exposure to COVID-19.



felt unsafe due to domestic violence, maltreatment, or harassment.

As one lesbian/queer/pansexual nonbinary person living in a small QC city wrote, moving back home meant “being around abusive family members a lot more often with only walks to the park to escape.” Another survey respondent, a bisexual/queer genderqueer individual living in urban ON, shared: “Increased time spent with my (ex) partner meant increased experiences of violence and the eventual breakdown of our relationship. I continue to live with them due to the inability to afford rent on my own.”



of respondents had future concerns about difficulties finding an apartment or adequate housing due to 2SLGBTQI discrimination.

Income instability had direct impacts on housing situation, most often involving moves to cheaper places or moving in with roommates. However, moving in with people—or adding more people to a dwelling—often came with a mental health toll, as one lesbian woman living in urban area of ON described:

“ I have to live with roommates because I do not make enough income to live on my own. As the pandemic increased stress on my roommates, especially one who became unemployed and had difficulty accessing medical help and medication, friction substantially increased. [They] became verbally and emotionally abusive [and] I couldn't afford to move out and could not rely on friends to help me with a physical move. All of this had a devastating impact on my mental health, especially my depression and PTSD, and I'm still struggling with the aftereffects. ”

Other respondents similarly showed how housing-related challenges such as increasing rent, difficult landlords, and home maintenance during the pandemic led to poorer mental health:

“ My current landlord has illegally increased our rent by an amount that we are unable to pay. We need to find a new place to live within the next couple months. This search for a new living space that fulfills all our needs has caused major anxiety that I am struggling to deal with every day. (A bisexual/queer woman living in urban area of ON) ”

“ I had to move into a different, cheaper apartment because of the cost savings, but also because my landlord was awful, and the apartment was literally falling down around me. Living somewhere that was that unsafe [...] was very difficult, and my already poor mental health deteriorated. (A bisexual individual living in a small city in NL)

“ We were in [US City] at the start of the pandemic but had to move back to Canada for me to remain employed. The move caused a lot of stress, especially because our new house needed a lot of repairs that were still working through. It's caused a lot of tension in our marriage and contributed to my depression/ anxiety/burnout. (A gay/queer trans masc individual living in urban area in QC)

2SLGBTQI youth face specific housing challenges because of unsupportive family members, which often puts 2SLGBTQI youth at high risk of homelessness (Abramovich & Shelton, 2017). For instance, one young gay man living in an urban area in BC shared that needing to move back in with transphobic parents while medically transitioning “feels awful and has been negative for [their] mental health and well-being.” Our research also highlighted housing challenges facing 2SLGBTQI older adults: for example, an older bisexual/queer woman living in an urban area in BC noted that they were experiencing ongoing and systemic homophobic bullying within their senior housing facility. Despite requesting intervention from the housing organization and engaging with police, this individual was told action was “outside of their mandate” and “not top priority” respectively.

The housing-related experiences research participants shared with us illustrate the distinct housing challenges facing 2SLGBTQI people in Canada, including unaffordability, safety concerns, and instability. These challenges have direct and serious impacts on individuals' mental health and well-being.

Food Security

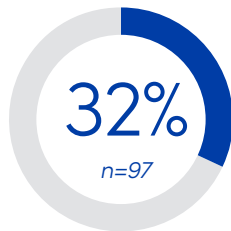
Another SDoMH that has been impacted by the ongoing pandemic is that of food security. In 2022,

6.9 million people

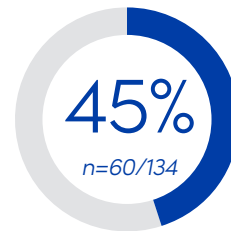
in ten provinces lived in a food-insecure household, a considerable increase from 2021 and in part a result of unprecedented inflation coupled with stagnating wages (PROOF, 2023).

To our knowledge, there is no national data on food insecurity among 2SLGBTQI people, but our survey found that,

In addition, a relatively high proportion of people living with a disability had experienced negative changes to their food security.



of survey respondents experienced negative changes to their food security during the pandemic.



of respondents living with a disability had experienced negative changes to their food security.

This contrasts with people who did not live with a disability; 21% (n = 34/170) of these respondents reported negative changes in food security.

Participants in both our survey and our focus groups described how rising food prices had led to financial stress, exhaustion, and mental distress:

“ It’s been really difficult to get fresh fruit and vegetables as well as keeping our pantry stocked with the regular food we like. Food is so expensive now [and] we get really anxious when we go grocery shopping now because we don’t have any more reliable options; stuff is either out of stock or really expensive and poor quality. (A bisexual/gay male-adjacent trans person living in urban area of QC) ”

“ Not having adequate healthy foods has greatly impacted my mental health due to feeling ill often from not eating enough or getting enough nutrients. This is heightened by my high-stress environment in higher education and has been accompanied by weight loss, where I have already been underweight before the weight loss. (A lesbian woman living in urban area of a northern area of Canada). ”

Food insecurity is interrelated with other social determinants of mental and physical health like income and housing. One pansexual agender/genderqueer individual living in a small ON city noted: “this income drop is what caused my food insecurity, and I often now worry more about making rent.” Others shared similar experiences:

“ It has been very, very difficult [...] Both my income and my partner’s have been reduced, we recently got a rent increase, and we can’t afford it without giving up money for food or to feed our cat or for medications, but we can’t move anywhere else because everywhere else is already more than what we are currently paying. It’s a lose-lose situation with housing that makes me depressed and constantly anxious. (A queer nonbinary individual living in a small NB town). ”

The pandemic’s impacts on employment and income have negatively impacted 2SLGBTQI people’s access to affordable and nutritious foods. This takes a toll on both the physical health (Caceres et al., 2022) and mental health (Polsky & Gilmour, 2020) of 2SLGBTQI individuals.

Mental Health Outcomes Among 2SLGBTQI People

The pandemic's impacts on SDoMH have worsened rates of anxiety, depression, post-traumatic stress disorder, problematic substance use, and suicidality/suicidal ideation among 2SLGBTQI Canadians (Slemon et al., 2022; Sylliboy et al., 2022). In our research, participants connected pandemic-related negative changes in their mental health to other structural stressors such as anti-2SLGBTQI legislation, inadequate federal housing policies, and lack of universal income.

Pandemic

+

Structural
Stressors

=

increased stress, anxiety,
rumination, and depression.

Some participants talked about how negative changes to income, employment, and housing “stretched people thin,” leaving them with less energy to provide social support to other people in their community and networks. As one genderqueer, queer/pansexual individual living in a small town in BC noted:

“ I feel more alone and less resourced. My friends and community supports are also overloaded and unreliable right now leading to greater instability. ”

This illustrates the ripple effects that SDoMH can have on factors protecting mental health.

The pandemic has also impacted the ability of 2SLGBTQI people in Canada to access mental healthcare. For example, income insecurity caused by the pandemic, coupled with the cisheterosexism and homophobia 2SLGBTQI people already face in many mental healthcare settings (Gaspar et al., 2021), has made mental healthcare more unaffordable and thus less accessible (Chaiton et al., 2021). Several participants in our project explicitly discussed these connections. For example, Heather, a focus group participant, shared:

“ During COVID I just saw that there were so many people who needed mental health support and it just wasn't there. There weren't enough people from varying backgrounds who were that well-trained, mindful of [2SLGBTQI] experiences, or accessible because of the cost, especially when people are out of work.

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Taken together, these results illustrate that the costs of not being able to access necessary mental healthcare are extremely high, with 2SLGBTQI people experiencing housing and employment precarity and food insecurity at heightened risk of an array of negative physical and mental health outcomes.

Conclusion

The pandemic has had a range of negative impacts on SDoMH such as housing, poverty, and food security. These changes have disproportionately impacted 2SLGBTQI people in Canada, since these groups were already facing higher rates of poverty, food insecurity, and housing precarity. We have highlighted findings from our research illustrating the associations between the pandemic's impacts in these areas and the mental health and well-being of 2SLGBTQI people across the country.

These findings can be taken up as a call to action for municipal, provincial, and federal governments and policymakers to explicitly recognize 2SLGBTQI people as a priority population in national plans to address SDoMH. Community-based organizations and mental health service providers could also use these findings to inform their proposed or ongoing programming and initiatives.

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