Monkeypox and LGBTQI+ employees: How employers can avoid stigmatization

The monkeypox virus is currently most prevalent among men who have sex with men. An infection can lead to involuntary coming-out. Employers need to safeguard privacy and avoid stigmatization, state Michiel Kolman and Kai Jonas.

Autumn in full swing, employers are preparing for a new wave of Corona infections, but there is a second virus of concern around: monkeypox.

Last summer, WHO categorized this virus officially as an international threat to public health. Monkeypox is spreading slowly across the world, and also in the Netherlands infections are still occurring. How many is difficult to estimate.

**Monkeypox are here to stay**

Those who suspected themselves to be infected with COVID-19 get tested, of course, to gain clarity, but in the context of monkeypox this need is less present due to the clear symptoms: very visible skin lesions.

Thus, the official infection statistics are less robust, and there is no reason to think lightly about the virus.

Monkeypox is far less deadly than Corona, but there are very painful skin lesions associated with it that can remain for weeks. The likelihood of monkeypox vanishing by itself is small, since vaccines are available in limited amounts and their effectiveness is still under research. The expectation is now that monkeypox will become endemic, that means it is here to stay.

**Stigmatization in the context of monkeypox**

The majority of monkeypox cases are currently found among men who have sex with men (MSM). The prevalence of the virus in this group sparks recollections of the HIV epidemic in the 80s.

HIV lead to a massive stigmatization of MSM and the larger LGBTQI+ community: it was seen as a gay disease and the wildest myths were circulating. There were countless cases where individuals living with HIV lost their jobs or homes.

Monkeypox can lead to a similar stigma: the virus can be seen as a sexually transmitted disease that only occurs among gay men.

**Monkeypox at the workplace**

The potential stigma around monkeypox is especially relevant in the employment context. Individuals who are infected experience the workplace as the most difficult setting to disclose their infection, current research shows.
There are two main reasons for that. Since the virus is so closely associated with MSM informing other about it can lead to a forced coming out.

But employees that are open about their sexual orientation can suffer from negative outcomes, too. Stigma leads to employees being seen as less trustworthy and unprofessional. The infected individual is automatically associated with sex parties, frequently changing sexual partners and an overall lack of responsibility.

**Long duration of the illness**

The duration of the illness can lead to complicated situations. Contrary to Corona monkeypox symptoms last up to 21 days. During this period, it can be difficult to engage in work: the skin lesions are clearly visible and you pose an infection risk to others.

In-person meetings are out of the question anyway, but also video calls can be tricky, for the employee, colleagues and external relations.

Organizations that take inclusivity and diversity seriously need to consider the impact of monkeypox in the workplace environment and its management. A careful, empathic approach can avoid harmful situations for the employee and the organization as a whole.

**Suggestions how to handle monkeypox in the work context**

If you are working as a HR specialist or in management and want to bring your policies up to speed to avoid stigmatization and protect privacy? You may want to consider this advice:

1) Maintain the privacy of the employee 100%. They need to able to trust you with their disclosure and that no one else gets to know. This is important for the company medical services and especially for administrative personnel.
2) Do not disclose the monkeypox infection if the employee does not explicitly consent. Choose for a more generic label, such as a “serious infection that takes a while to heal”
3) Re-organize work and tasks, including video calls, as this may not be an option.
4) Safeguard a good re-integration after the infection. Pro-actively approach the employee, give space for concerns and address the stigma. Do not leave the elephant in the room unaddressed, and check if the employee suffers from allegations to their assumed sexual behavior.
5) Plan in advance for the case of an involuntary outing of the employee. Think about issues such as: how to stop gossip, how to address colleagues that to not act professionally, and how to reinstate trust in the affected employee in the workplace.

**UPDATE:** Although many national public health institutions have downscaled the monkeypox risk currently, a small number of infections will prevail. Those rare cases require even more attention and careful handling, as the public awareness will cease which in turn can lead to more attention to the specific cases in an organization.