

TRIPLE JEOPARDY: Protecting At-Risk Refugee Survivors of Sexual and Gender-Based Violence

WORKING WITH BOY SURVIVORS AND THEIR FAMILIES

1. AIM

This module aims to familiarize participants with core principles for working with boy survivors of SGBV, including the key role family members and caregivers play in their recovery. It highlights the challenges faced by both boys and their families in coming to terms with SGBV and sets out strategies service providers may use to engage parents and families in SGBV prevention and response.

2. USE

This module may be used as part of a two-day training (see *Model Agendas*).

TIME	METHODOLOGY	MATERIALS
1 hour	PowerPoint Brainstorming Discussion Role play	Flip chart Markers Working with Boy Survivors and their Families PowerPoint Projector

3. GENERAL BACKGROUND

Helpful **definitions** for this and other modules include:

- **Boys:** Males 18 and under, including younger boys 12 and under, and adolescents aged 13-18.
- **Caregiver:** A person responsible for the daily care and wellbeing of a minor, be it a parent, family member or guardian. It does not necessarily imply “legal responsibility.”
- **Guardian:** A person who looks after the interests of a minor and is entitled to exercise parental rights over him or her. A guardian is appointed by the court or family members in the event of both parents’ death, absence or physical or economic incapacity.

Resources

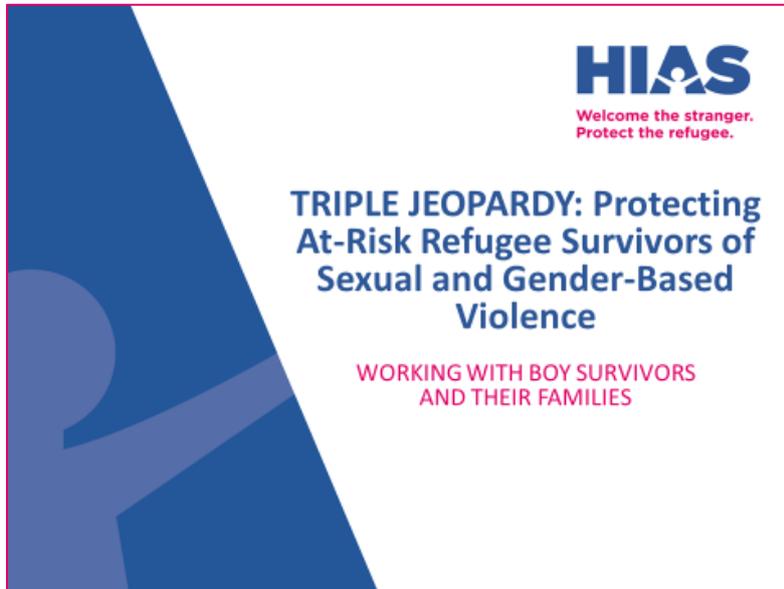
Triple Jeopardy Report, pp. 27-32.

Family Caregiver Alliance (2014) [Definitions](#). International Rescue Committee (2012) [Caring for Child Survivors of Sexual Abuse](#). Restless Development (2014) [Men and Boys and Sexual and Gender Based Violence \(SGBV\)](#). World Health Organization (1999) [Social Change and Mental Health, Violence and Injury Prevention, Report of the Consultation on Child Abuse Prevention](#).

4. SLIDES

This section provides you background and resources for each PowerPoint slide in the module. It also gives you instructions to facilitate group discussions and exercises.

SLIDE 1: COVER



SLIDE 2: OBJECTIVES

Objectives

By the end of the session, participants will understand:

1. Core principles for working with boy survivors of SGBV and their families
2. Challenges facing boy survivors of SGBV and their family members
3. Strategies to engage family members in SGBV prevention and response

TRIPLE JEOPARDY TRAINING | HIAS 2

Background

- In this module, we review core principles for working with boy survivors of SGBV. While there is overlap regarding working with adult male survivors, there are heightened care duties for boys.
- At the center of any response to SGBV experienced by boys is taking action in “best interests of the child.” This varies according to the needs, maturity level, experience and desires of each boy.
- Family members and caregivers play a key role in the lives of boys. Their involvement in programs to prevent and respond to SGBV is therefore critical to guarantee the safety, protection and access to rights by boys.
- The module will discuss the challenges faced by boys and their families following an SGBV experience.
- The module will conclude with strategies that service providers may undertake to engage parents, family members, caregivers or guardians in SGBV prevention and response involving boys.

Core Principles: Working with Boy Survivors of SGBV

- The best interests of the child are paramount
 - Refer for “Best Interest Assessments” where possible
- Communicate with boy survivors according to age, developmental stage, and experience
 - Differentiate between children and adolescents
- Believe and validate the boy survivor’s experience
- Provide compassionate, gender-sensitive care
- Ensure full confidentiality
 - Advise when information must be shared with a third party and for what reasons
- Obtain informed consent from boys and caregivers
 - Interview them separately to determine best interests
- Do no harm

TRIPLE JEOPARDY TRAINING | HIAS 3

Background

Explain to participants that when working with caregivers

- The “best interests of the child” is the central principle underlying all support for boy survivors of SGBV.
- One key means of manifesting this principle is by referring a boy survivor for a “Best Interest Assessment” (BIA). The BIA, which is conducted by trained service providers, examines the boy’s access to protection in the home, school and community, as well as access to food, medical care and basic non-food items, among other indicia of health and protection. The BIA should not be conducted once, but rather should act as a case management tool and should be repeated at consistent intervals (for example, every six months) to ensure follow-up and so that any changes in the boy’s situation are accurately recorded.
- BIAs and healing plans for boy survivors should always include boys’ perspective and desires. Older boys, in particular, should always have the opportunity to be interviewed separately from other family members or guardians.
- Communicate with boys in a manner that suits their age, development level and experience. Remember that children and adolescents have short attention spans, which may be shorter if they have experienced trauma.
- Recognize that older boys have different needs than young boys. Boys returning from forced recruitment experiences may not be attached to parents or caregivers any longer and may not want to engage in child-related activities, including school.
- Respect boy survivors’ opinions and narratives. Validate their experiences. Do not question their experiences. Be compassionate and engage in “active” listening.
- Communicate to the boy survivor that the SGBV he experienced is not his fault, but the fault of the perpetrator/s. Validate his story and build trust through compassion and non-judgmental communication or body language. Use statement such as “I believe you” and “It’s not your fault.”
- Recognize the need to provide gender-sensitive care, just as in the case of survivors of SGBV who are women and girls. This means, for example, respecting a boy’s request for a service provider or interpreter of the gender of his choice.
- Always explicitly explain that the information the boy shares will be kept strictly confidential. Clearly explain if his information will need to be shared with another party, UNHCR for example, and the reason and circumstances under which you will share that specific information.

- Explain the reason for your interview and all follow-up steps. Then obtain fully informed consent from both the boy and his parent or guardian.
- Interview the adult parent or caregiver and the child separately.
- Allow a presence of a parent or guardian if the boy requests that specific adult's presence and only if the adult is not suspected to be the boy's abuser.
- Be very careful not to further traumatize or re-victimize the boy survivor or interrogate him.

Resources

Triple Jeopardy Report, pp. 27-32.

International Rescue Committee (2012) [Caring for Child Survivors of Sexual Abuse](#). Restless

Development (2014) [Men and Boys and Sexual and Gender Based Violence \(SGBV\)](#).

SLIDE 4: COMMON SGBV EXPERIENCED BY BOYS

Common SGBV Experienced by Boys

- Abusive sexual contact and acts, including rape
- Sexual slavery, forced sex work, trafficking
- Forced pornography or exposure to pornography
- Forced recruitment into military, militia, rebel forces
- Abusive initiation practices
- Forced circumcision
- Early marriage
- Other forms of severe social pressure to conform to expected masculine gender roles
- Homophobic and transphobic acts

TRIPLE JEOPARDY TRAINING | **HIAS** 4

Background

- SGBV against boys, which is identified with increasing frequency during war and conflict, is brutal and profoundly stigmatizing. Sexual violence in conflict zones has been reported to include oral and penetrative rapes, genital mutilation and forced sexual acts.
- Boy recruits may be forced to sexually abuse other boys, girls and women or witness it.
- The World Health Organization defines child sexual abuse as: *the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person.*
- Child sexual abuse can include: touching a child's genitals or private parts for sexual purposes; making a child touch someone else's genitals or play sexual games; putting objects or body parts (such as fingers, tongue or penis) inside the mouth or in the anus of a child for sexual purposes; showing pictures of naked men and/or women to a child; deliberately exposing an adult's genitals to a child for the adult's sexual pleasure or interest; photographing a child in sexual poses; encouraging a child to watch or hear sexual acts; watching a child undress or use the bathroom for the adult's sexual pleasure or interest; forcing a child to witness rape and/or other acts of sexual violence; using inappropriate sexual language directed at a child.

- The sexual abuse of boys is usually committed by a perpetrator who is close to the minor and has his trust. An overview of studies in 21 countries conducted by IRC found that 3-29% of men reported sexual victimization during childhood.
- Early adolescents, aged 10-14, may be targeted for sexual abuse as they begin to experiment with their sexuality. Those in late adolescence are most vulnerable to SGBV as they more actively seek sexual, emotional and romantic experiences.
- Boys may experience sexual abuse by other boys. Boy perpetrators may or may not understand the harm they are perpetrating. Some may have themselves been abused.
- Unaccompanied boys are more vulnerable to SGBV because they often lack a social protective network.
- Boys are vulnerable to abuse during traditional practices of initiation, which may include forced same-sex relations, forced sexual acts or traditional circumcision. Boys who refuse to participate in such practices may be viewed as failed men and may also experience gender-based violence.
- Boys are expected to gradually fulfill expected masculine general roles, which are different in each society. Boys who do not conform may experience retaliation by parents, siblings, peers, teachers, and neighbors using physical, emotional and even sexual violence to pressure boys to conform to predominantly masculine gender roles.
- Homophobia and transphobia are major drivers of SGBV affecting boys who are/suspected of being gay or transgender, challenging the dominant masculine heterosexual gender and sexual orientation norms.

Resources

Triple Jeopardy Report, pp. 27-32.

International Rescue Committee (2012) [Caring for Child Survivors of Sexual Abuse](#). Restless

Development (2014) [Men and Boys and Sexual and Gender Based Violence \(SGBV\)](#). World Health

Organization (1999) [Social Change and Mental Health, Violence and Injury Prevention, Report of the Consultation on Child Abuse Prevention](#).

SLIDE 5: CHALLENGES FACING BOYS SURVIVORS

Challenges Facing Boy Survivors

- Social and cultural barriers to disclosure
- Fear of disclosing abuse by family or caregivers
- Rejection by family and community
- Untrained service providers unable to support
- Vulnerability to self-destructive behavior
- Adolescent boys forcibly recruited face challenges to reintegration into the family and community
- Physical, psychological, psychosocial consequences
 - Similar to adult male survivors
 - Depression, anxiety, aggression, social withdrawal, questioning of sexuality are all common

TRIPLE JEOPARDY TRAINING |

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Background

- The prevailing social and cultural gender norms anticipate that boys do not ask for help if they are in pain, and that they are strong and can take care of themselves as they approach

adulthood. This prevents boys from disclosing SGBV and a general under-reporting of SGBV against men and boys.

- Boys who are abused by close friends or family may not want to disclose the abuse for fear of putting their abuser in harm's way.
- An angry or non-compassionate response by parents, friends or service provider may persuade boys to keep silent about their SGBV experiences. Service providers should convey compassion, non-judgmental care and calm.
- SGBV committed by men or boys against boys is commonly misperceived as a "homosexual" act, which inhibits survivors from seeking medical, legal and psychosocial treatment.
- Response by service providers and in particular police and hospital staff is often insensitive and can be re-traumatizing for a boy survivor and his family.
- It is important to acknowledge that in many cases a boy's disclosure of SGBV is indirect and the information reaches service providers via parents, guardians, teachers or others. This may impact a boy's attitudes towards cooperation, disclosure and positive consent for intervention.
- The impact of SGBV is usually stronger when SGBV, and particularly sexual abuse, is perpetrated by a parent, family member or a close and trusted person.
- Vulnerability to self-destructive behavior such as substance abuse and self-inflicted injuries.
- Rejection by family, friends, community or school is commonly experienced by boy survivors.
- Adolescents who were forcibly recruited as child soldiers face rejection by family and community of origin – they are accused of collaborating with the enemy and being responsible for crimes against the community.
- Boys who have been recruited and separated from family or traditional authority figures for some time often prefer to live in a group home for boys. These boys often have a hard time engaging in age appropriate tasks - like school. Sometimes, there is a backlash against caregivers because the boys associate authority with abuse and/or they have been independent for some time and do not respond well to authority.
- Many of the boys have been sexually abused by male superiors or forced to abuse other boys or girls and thus would resist any authority by a male or female caregiver.

Resources

Triple Jeopardy Report, pp. 27-32.

International Rescue Committee (2012) [Caring for Child Survivors of Sexual Abuse](#). Restless

Development (2014) [Men and Boys and Sexual and Gender Based Violence \(SGBV\)](#).

SLIDE 6: QUOTE BY A SERVICE PROVIDER

Quote by a Service Provider

'You will even get a boy who has been sodomized for five years or two years or two weeks or three months and he is saying nothing because he is [thinking], "I'm a man. I'm supposed to be strong, you know... If this guy was able rape me, for example, there must be a problem with me." He's thinking, "I was not man enough to protect myself."'

Service Provider, Nairobi, Kenya, 14 February 2014.

TRIPLE JEOPARDY TRAINING | HIAS 6

Background

- Ask a participant to read the quote provided by a service provider in Nairobi, Kenya.
- Gender roles and expectations often present barriers for disclosure and denial of SGBV by adolescent boy survivors.

Resources

Triple Jeopardy Report, pp. 27-32.

International Rescue Committee (2012) [Caring for Child Survivors of Sexual Abuse](#). Restless Development (2014) [Men and Boys and Sexual and Gender Based Violence \(SGBV\)](#).

SLIDE 7: CHALLENGES FACING FAMILIES/CAREGIVERS

Challenges Faced by Families/Caregivers

- Feelings of shock, disbelief, stress, guilt
- Feelings of betrayal and anger towards perpetrators who are close friends or family
- Tension between parents and other forms of dysfunction within the family
- Fear of stigmatization and exclusion
- Inability to provide emotional support, physical safety, economic stability necessary for recovery
- Rejection of former family or caregivers by the boy
- Unwillingness by boy survivor to reintegrate
 - Forced recruits may not be willing to resume a role as a child by, for example, going to school

TRIPLE JEOPARDY TRAINING | HIAS 7

Background

- Shock, disbelief and stress result in confusion and development of various types of coping mechanisms ranging from extreme protection of the boy to total rejection.
- Many family members of boy survivors experience extreme guilt and desperately need mental health support.
- If the perpetrator is a close friend or family member, at times parents or caregivers may blame the boy survivor for false accusation attempting to avoid the feelings of betrayal.
- Many parents themselves fear the stigmatization that may result when the community learns of the SGBV experienced by their son.
- Service providers need to strengthen the survivors' family resilience to such shocks. Refugee families may be less resilient due to loss of social support networks, resources, a sense of stability and additional traumas and stresses as a result of forced migration on multiple members of the family.
- In some cases, multiple members of the family may experience SGBV. Many refugee households are headed by a single parent, usually a mother who might be at risk to exposure of SGBV herself.
- Tensions and stress may lead to family dysfunction and at times, to abandonment of the boy survivor by the parent/s or caregiver.
- In some cases, a boy who has returned from an experience of forced military recruitment may not be willing to reintegrate into the family or community. He may not want to go to school or engage in other activities he associates with being a child.

Resources

Triple Jeopardy Report, pp. 27-32.

International Rescue Committee (2012) [Caring for Child Survivors of Sexual Abuse](#). Restless Development (2014) [Men and Boys and Sexual and Gender Based Violence \(SGBV\)](#).

SLIDE 8: QUOTE BY THE MOTHER OF A BOY SURVIVOR

Quote by the Mother of a Boy Survivor

'I went to [name of agency omitted] to ask if they could help me to take him to school. They told me that they cannot take someone who is traumatized like him in school. As I have five children, I asked them to take others to the government school, but they refused. They are at home, not studying, with this one who I have to take everywhere I go. It gives me a headache. I don't know what to do. That is the problem I have in Kampala. I fear for the others to be raped also because all of them are at home not doing anything.'

Mother of Refugee Boy Survivor, Kampala, Uganda, 27 February 2014.

TRIPLE JEOPARDY TRAINING | HIAS 8

Background

- Ask a participant to read the quote provided by the refugee mother of a boy survivor living in Uganda.
- Combined barriers to income and education make boys, even those with guardians and families, vulnerable to SGBV. Many boys in the refugee camps in eastern Chad are sent out to herd flocks or are even sold as laborers to other families. These refugee boys, much like those spending all day in the camp markets or those working in urban areas, are extremely vulnerable to sexual violence and exploitation.
- Caregivers also noted the lack of long-term solutions to address the abuse of their children. Whereas some sought resettlement, others needed ongoing assistance for their children to recover from the SGBV and to gain access to education, health care and, in some cases, legal status.

Resources

Triple Jeopardy Report, pp. 27-32.

Strategies to Engage Parents and Caregivers in SGBV Response

- Involve families in the development of and fulfillment of Best Interest Assessment recommendations
- Build connections between families of returning child military recruits with reintegration experts
 - “DDR” = disarmament, demobilization, reintegration
- Identify community resources for support
- Provide support groups for parents and caregivers of survivors
- Strengthen family and caregivers’ psychological and economic resilience

TRIPLE JEOPARDY TRAINING | HIAS 9

Background

- Involve parents and caregivers in the implementation of Best Interest Assessments, providing them with active and supportive roles.
- Caregivers should be provided with opportunities to build connections to trusted community members.
- Specialized reintegration experts from the disarmament, demobilization and reintegration sector should be engaged to assist forced military recruits return.
- When caregivers join support groups, they are able to share experiences with people in similar circumstances and build trusting relationships outside the family.
- When providing caregivers opportunities to share feelings and needs, be sure to follow up with an opportunity to strategize jointly on how to respond to any basic needs or concerns.
- Help family members of survivors develop their capacity to support their boy survivors.
- Caregivers should be reminded of confidentiality when it comes to a minor's care. There may be a tendency to share a boy's information, but this can be devastating to a young male SGBV survivor.

Resources

Triple Jeopardy Report, pp. 27-32.

Strategies to Engage Parents and Caregivers in SGBV Prevention

- Include SGBV against boys and men in community SGBV trainings and outreach
- Facilitate parents'/caregivers' access to holistic community support mechanisms
 - For example, to ensure boys go to school and travel safely outside the home
- Work with parents'/caregivers' to mitigate risks of SGBV
 - Examine the living environment, neighborhood, school, broader community

TRIPLE JEOPARDY TRAINING | HIAS 10

Background

- Caregivers should be encouraged to explore holistic support mechanisms to help boys access education, skills training and sports, among other activities.
- Often, engaging a boy in an activity as opposed to a counseling setting is more therapeutic and less stigmatizing. This can provide an opening to rebuild connections between a caregiver and a boy survivor.
- Service providers should work with parents and caregivers to mitigate possible re-exposure to SGBV by boys.

Resources

Triple Jeopardy Report, pp. 27-32.

SLIDE 11: SUMMARY

Summary

- The “Best Interest of the Child” is at the core of SGBV response for refugee boy survivors
- Parents and caregivers need to take an active role in the recovery of boy survivors ensuring their safety, wellbeing and development
- Younger and adolescent boys have different needs – e.g., boys returning from forced military recruitment may be resistant to reintegration
- Many of the physical, psychological and psychosocial responses in boys are similar to those in adult male survivors
- Both caregivers and boy survivors should benefit from SGBV prevention and response programs

TRIPLE JEOPARDY TRAINING | **HIAS** 11

Background

- Ask a different participant to read out each of the summary points.
- Ask participants for any questions or requests for clarification.