

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

### **RESPONSE TO SGBV – SEXUAL MINORITY REFUGEES**

#### **1. AIM**

This module aims to increase the capacity of participants to effectively respond to the needs of survivors of SGBV using the "Survivor-Centered Approach." Participants will learn how to apply the approach to sexual minority refugees.

#### **2. USE**

This module may be used as part of a half-, one- or two-day training (see Model Agendas).

TIME	METHODOLOGY	MATERIALS
1 hour, 30 minutes	PowerPoint	Flip chart
	Brainstorming	Markers
	Discussion	Response to SGBV – Sexual Minority Refugees PowerPoint
	Group work	Projector
	Case study	

#### 3. GENERAL BACKGROUND

- The Survivor-Centered Approach complements the Human Rights-Based Approach by placing the rights, needs and desires of SGBV survivors at the center of response. This requires consideration of survivors' multiple needs and vulnerabilities, and the impact of decisions and actions taken to support them. This approach ensures services are tailored to the unique requirements and priorities of survivors, recognizing the leading role they play in their recovery.
- Many service providers employ some aspects of the Survivor-Centered Approach. But most frontline staff require training and capacity-building to apply the approach to survivors who are older, male, sexual minorities or those who live with disabilities.
- Staff and service providers need to consider how they communicate and engage with caregivers when working with sexual minority survivors, making sure that their actions are aligned with the Survivor-Centered Approach.

#### **Resources**

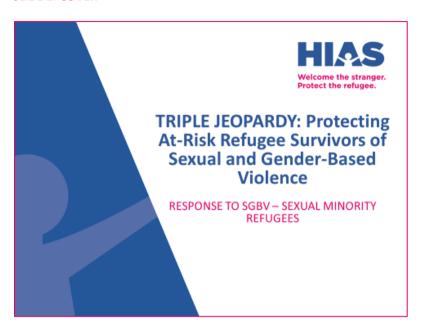
Triple Jeopardy Report, pp. 33-38.

Gender-Based Violence Area of Responsibility Working Group (GBV AoR) (2010) <u>Handbook for Coordinating Gender-based Interventions in Humanitarian Settings</u>. GLBTQ Domestic Violence Project (2016) <u>Trauma-Informed Approaches for LGBTQ\* Survivors of Intimate Partner Violence: A Review of Literature and a Set of Practice Observations</u>. Health-GenderViolence.org (2016) <u>Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia: Principles and Standards for Service Provision</u>. HIAS (2013) <u>Invisible in the City: Protection Gaps Facing Sexual Minority Refugees and Asylum Seekers in Urban Ecuador, Ghana, Israel, and Kenya</u>. Inter-Agency Standing Committee (2015) <u>Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action</u>. United Nations Population Fund (2012) <u>Addressing GBV – A Survivor-Centered Multi-Sectoral Approach</u>.

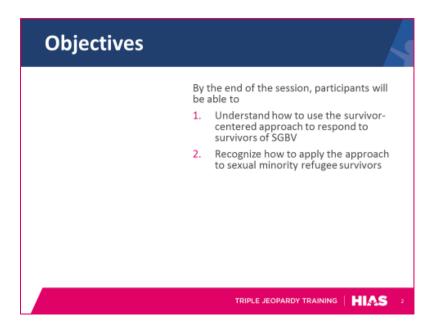
#### 4. SLIDES

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**



#### **Background**

- Read through the objectives.
- Explain that the module will help participants understand the specific needs of sexual minority refugee survivors of SGBV and how best to respond to them in an appropriate, empowering manner.
- The module will focus on using the Survivor-Centered Approach with a focus on the needs of sexual minority refugee survivors of SGBV.

#### **SLIDE 3: THE SURVIVOR-CENTERED APPROACH**

## The Survivor-Centered Approach

#### **Group Brainstorming**

- How would you define the "survivor-centered" approach?
- Who should benefit from the approach?
- Who should use it?

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#### **Materials**

Flip chart and markers

#### **Background**

- The Survivor-Centered Approach to SGBV response is the primary approach used in humanitarian assistance.
- Use this short exercise to test participants' prior knowledge about the Survivor-Centered Approach, and to preview the discussion to come.

#### **Group Activity (5 minutes)**

- Ask participants each of the three questions on the slide. Encourage diverse participants to respond.
- Record answers on the flip chart.
- Provide a summary of each response drawn from the answers provided.

#### **SLIDE 4: DEFINITION OF SURVIVOR-CENTERED APPROACH**

### Definition of Survivor-Centered Approach

- The survivor-centered approach empowers survivors to make informed decisions based on their own priorities and take a leading role in their path to
- Diverse survivors should benefit
  - Young, old, men, women, LGBTI, people with disabilities
  - Citizens, refugees, internally displaced, stateless, migrants
- Diverse supporters should use it
  - Family, caregivers, community members
  - Service providers (medical, mental health, legal, psychosocial)

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#### **Background**

- Ask a participant to read the definition and compare it with the various ideas raised during the brainstorming exercise.
- Explain that the Survivor-Centered Approach:
  - Integrates concepts of empowerment and human rights to SGBV response.
  - Supports the survivor to regain control over his/her life, and take a leading role in recovery, based on informed decision-making.
  - o Ensures that all responders prioritize survivors' preferences at all times.
  - Recognizes that individuals respond differently to SGBV, and have different needs.
  - o Ensures survivors receive personalized care that prioritizes their rights, needs and wishes.

#### Resources

Colombini & Maman (2011) Programming Module on Working with the Health Sector to Address Violence against Women and Girls. Health-GenderViolence.org (2016) Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia: 2.5 Principles and Standards for Service Provision. Inter-Agency Standing Committee (IASC) (2015) Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action. United Nations Population Fund (2012) Managing Gender-based Violence Programmes in Emergencies, E-learning Companion Guide. United Nations Women Virtual Knowledge Centre to End Violence Against Women and Girls (2012) Ensuring Survivor-Centered and Empowering Approaches.

#### SLIDE 5: PRINCIPLES OF THE SURVIVOR-CENTERED APPROACH

## **Principles of the Survivor-Centered Approach** Dignity Safety Confidentiality Empowerment Inclusion Multi-sectoral approaches TRIPLE JEOPARDY TRAINING | HIAS

#### **Background**

Explain that the Survivor-Centered approach is based on six key guiding principles that clarify the relationship between the survivor and provider of SGBV response.

#### **SLIDE 6: DIGNITY**

## **Dignity**

When providing services and support to survivors

- Ensure the availability of age- and gender-sensitive services
- Show respect for choices, wishes and rights of survivors
  - Honor the choices, wishes and rights of survivors
  - Be patient while they disclose their experiences
  - Listen actively
  - Be aware of your body language and tone of voice
  - Never interrogate survivors
  - Focus on survivors' capacities, not vulnerabilities

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#### **Materials**

Flip chart and markers

#### **Background**

- Survivors should have the opportunity to work with a service provider of the gender and/or age of choice. Most of the sexual minority refugees interviewed for the Triple Jeopardy report preferred working with female service providers.
- Service providers should avoid expressing judgmental attitudes. These may deter the survivor from disclosure and may lead to a sense of rejection or re-victimization.
- Survivors may take time to disclose experiences of SGBV. Patience, respect and active listening are required to create a safe environment for disclosure.
- Service providers should avoid asking sexual minority refugee survivors to prove their sexual orientation or gender identity. They should similarly avoid asking voyeuristic or explicit question about their consensual sexual experiences or SGBV. Questions should instead focus on the survivor's feelings of difference, stigma, shame, and harm.
- Explain the importance of respecting the survivor's narrative of the SGBV experience and his/her interpretation of events.
- Acknowledge what survivors share with you. In the past, they may have been dismissed when trying to communicate their feelings and experiences.
- Service providers should provide emotional support and use supportive statements, when needed.
- Always ask if you are not sure how survivors want to be identified. Refer to people by their chosen name and chosen pronoun, or take the lead from survivors on how they want you to refer to them (he vs. she, nickname vs. legal name).

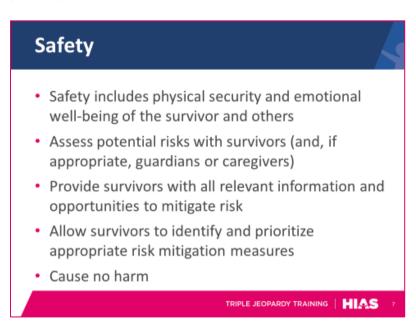
#### **Group Activity (5 minutes)**

- Before reviewing the slide, ask participants how the concept of "dignity" might apply to SGBV response. Encourage diverse participants to respond.
- Record answers on the flip chart.
- Present the slide and compare with answers provided.

#### Resources

American Psychological Association (2011) Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients. Chelvan, S (2014) DSSH Model and LGBTI Asylum Claims. Gender-Based Violence Area of Responsibility Working Group (GBV AoR) (2010) Handbook for Coordinating Gender-based Interventions in Humanitarian Settings. United Nations Population Fund (2005) Guidelines on Gender-Based Violence Interventions in Humanitarian Settings.

#### **SLIDE 7: SAFETY**



#### **Materials**

Flip chart and markers

#### **Background**

- Making the survivor feel safe is key to recovery. Safety can take the form of physical protection, medical or psychological assistance, and social or moral support.
- It is critical to assess potential risks with the survivor, including from perpetrators, family, community or others, either following the SGBV or its disclosure.
- When working with the survivor to mitigate risk, ascertain from the survivor who should be involved in a safety plan for both the short- and long-term.
- Make sure to cause no harm: be patient, do not judge, and support the survivor's narrative, needs and safety priorities.
- Take care to avoid unintentionally exposing the survivor to other risks; in case of sexual minorities, a referral to the police might place them in danger of arrest.

#### **Group Activity (10 minutes)**

- Before reviewing the slide, set up two flip charts. At the top of one, write "safe" and at the top of the other, write "unsafe."
- Ask participants to go up to each flip chart and write something about the training that makes them feel "safe" and "unsafe."
- The factors participants note can relate to physical environment, feeling of the group or concepts discussed in the training.
- Review the answers. Identify with participants what safety entails (physically, emotionally, environmentally and procedurally). Address how to make the training safe for all participants.

Present the slide.

#### Resources

Inter-Agency Standing Committee (2015) Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action. Rumbach, Jennifer (2013) Towards Inclusive Resettlement for LGBTI Refugees. Ward, Jeanne (2004) Communication Skills in Working with Survivors of Gender-Based Violence: A Five-Day Training Curriculum.

#### **SLIDE 8: CONFIDENTIALITY**

## Confidentiality

- Confidentiality not only ensures survivors' safety but is central to upholding their dignity and privacy
- Secure consent from survivors (and, if appropriate, guardians or caregivers) when taking action to support
- Specify with survivors if their personal information needs to be shared with other agencies or professionals
- Keep survivors' records in a secure location at all times
- Ensure staff, including interpreters and others involved in survivors' recovery, uphold confidentiality requirements

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#### **Background**

- Remind participants that all interviews with SGBV survivors must be held in a safe, private and confidential location.
- Explain that key to confidentiality is ensuring that disclosure of the survivor's information may only be done with his/her consent. Consent must be secured for each new disclosure to a third party.
- Service providers should explain that some information may need to be disclosed to others to access justice or receive medical care.
- Consider strategies to manage confidentiality if caregivers or family members are involved, or if you need to seek further advice on communication methods of an individual survivor.
- The decision about whom to involve, and when, should be made in partnership with the survivor. It should consider risks to his/her safety.

#### Resources

Health-GenderViolence.org (2016) Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia: Principles and Standards for Service Provision. United Nations Women Virtual Knowledge Centre to End Violence Against Women and Girls (2012) Ensuring Survivor-Centered and Empowering Approaches. United Nations High Commissioner for Refugees (2011) Need to Know Guidance: Working with Lesbian, Gay, Bisexual, Transgender & Intersex Persons in Forced Displacement.

#### **SLIDE 9: EMPOWERMENT**

### **Empowerment**

- Empowerment helps survivors regain strength after abuse and take control of their lives
- Develop a healing plan in collaboration with survivors (and, if appropriate, support people)
- Frame the plan around the needs and priorities, as defined by the survivor
- Involve survivors in all aspects of planning, services and protection
- Consult with survivors during plan implementation to ensure it remains appropriate, and modify as needed

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#### **Background**

- Explain that survivor empowerment is critical to recovery.
- A healing plan sets out what actions the survivor believes are best and where he/she needs support.
- The plan must center on the survivor's wishes and be completely voluntary.
- Even people who lack capacity to consent to the plan have a right to information and can play a role in decision-making.
- Over time, the plan should be modified to suit the survivor's needs and wishes.
- Acknowledge how difficult it is for sexual minorities who are refugees in a homophobic society to disclose sexual violence, to leave relationships and to recover quickly.
- Steps should be taken to empower sexual minority refugee survivors, ensuring that they are involved in each step of planning and decision-making.

#### Resources

South African Medical Research Council (2011) Care and Support of Male Survivors of Conflict-Related Sexual Violence.

#### **SLIDE 10: INCLUSION**

#### Inclusion

- Provide the same quality of services to survivors regardless of their sex, age, ethnicity and sexual orientation
- Present all available options to survivors, even if you are not yet sure how they will participate in these activities
- Be prepared to try several different ways of communicating these options
- · Give the survivor time to think about these options and to ask questions

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#### **Background**

- We must provide the same quality of services to every survivor regardless of their sex, age, ethnicity, sexual orientation or gender identity.
- Reflect on your own prejudices and assumptions about sexual minorities and address them before dealing with survivors. Where this proves difficult, refer the client to another service provider.
- Take care not to make assumptions about the capacity of survivors to make decisions on their own behalf. Making decisions for the survivor reinforces disempowerment.
- Present all available options to survivors, even if you are not yet sure how they will participate in these activities.
- Be prepared to try several different ways of communicating these options; give the survivor time to think about the options and to ask questions.

#### Resources

Health-GenderViolence.org (2016) Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia: Principles and Standards for Service Provision. United Nations High Commissioner for Refugees (2011) Need to Know Guidance: Working with Lesbian, Gay, Bisexual, Transgender & Intersex Persons in Forced Displacement. United Nations High Commissioner for Refugees (2012) Managing Gender-based Violence in Emergencies: E-learning Companion Guide, Annex 9.

#### **SLIDE 11: MULTI-SECTORAL APPROACHES**

## **Multi-sectoral Approaches**

- Access to a wide range of services and activities is critical for effective recovery
- Develop a multi-sectoral approach, involving
  - Medical, psychological, psychosocial, legal and economic and community support and response
- Engage the community in addressing stigma and discrimination relating to SGBV

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#### **Background**

- Explain that a survivor's path to recovery may involve a variety of service providers working hand-in-hand to support the survivor.
- Survivors should take the lead on deciding which services they want to access and when.
- While service providers whether medical, psychological or legal play a key role, survivors should be actively supported by family, caregivers and the general community. The survivor should decide who to involve and when.
- Raise awareness about SGBV affecting refugee sexual minorities in the community to reduce stigma and discrimination faced by survivors.

#### Resources

Health-GenderViolence.org (2016) Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia: Principles and Standards for Service Provision, United Nations High Commissioner for Refugees (2011) Need to Know Guidance: Working with Lesbian, Gay, Bisexual, Transgender & Intersex Persons in Forced Displacement. United Nations Population Fund (2012) Managing Gender-based Violence in Emergencies: E-learning Companion Guide.

**SLIDE 12: SURVIVOR-CENTERED APPROACH** 



#### **Background**

- As discussed, SGBV response centers on the survivor, with support from caregivers and family. Community support is critical for recovery and reintegration.
- Effective response relies on a strong referral system involving medical, physical, psychological, psychosocial, legal and economic support.
- Each element may vary in its importance for each survivor. In this diagram, the survivor's need for safety outweighs most of the other needs. In other words, survivors have varying and unique needs requiring a range of sector-appropriate responses.
- It is important to ensure that the referral systems to different service providers do not retraumatize the survivor.
- Survivors must take a lead in identifying their needs and the most appropriate responses.
- Responding to survivors should take a holistic approach; addressing only one need may not solve the whole problem.
- Sexual minorities commonly experience stigma and fear of being targets for hate crimes, an issue that may also be part of cases they present.
- To help sexual minority survivors, service providers must become familiar with terminology and concepts relating to sexual orientation and gender identity.

#### **Resources**

Health-GenderViolence.org (2016) Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia: Principles and Standards for Service Provision. United Nations Population Fund (2012) Managing Gender-based Violence in Emergencies: E-learning Companion Guide.

## Case Study: Tesfalam

Tesfalam, a 24-year-old male, comes to your organization seeking help with accommodation.

He says that people in his community want to kill him because they think he is impersonating women. He has no food, no place to stay and fears going back to the only people he knows – his family and the Eritrean community in South Africa.

He says he feels like less of a person and blames himself for the rape and disappearance of Amaya, the partner who has never been seen since unknown persons attacked their home and destroyed all their property.

He doesn't articulate all of the information properly and seems to be deeply fearful and traumatized.

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#### **Materials**

Flip chart and markers

#### **Group Activity (15 Minutes)**

Show participants the slide and ask one to read out the scenario.

- Divide the participants into Group A and Group B
  - Group A should develop a 5-minute skit showing a social worker's first encounter with Tesfalam after he gathers additional information about him. The survivorcentered approach should be used to identify needs and a healing plan.
  - Group A should perform the skit.
  - While watching, Group B should make notes in a handout about how the social worker applied the survivor-centered approach. Group B should then present these findings along with its feedback.
- Discussion question: Was the survivor-centered approach fully employed? If yes, how?

#### **Background**

- Participants should discuss how myths and misconceptions associated with LGBTI survivors can influence how we implement the survivor-centered approach.
  - **Dignity** Did the social worker establish trust and a conducive environment to enable Tesfalam to open up to him and tell him more? Did the social worker ask Tesfalam whether he was comfortable speaking to him about experiences of persecution because of his sexual orientation and gender identity or ask if he preferred to speak to another worker of a different sex and or age? How did the social worker acknowledge Tesfalem's revelation that his partner, Amaya, a male refugee, was raped? Did the worked acknowledge the fear Tesfalem was experiencing because of his gender identity and sexual orientation?
  - o Safety Did the social worker explore the possible risks that Tesfalam might be experiencing or is likely to experience within the community? And when accessing different services (e.g., justice services)? Was the environment of the interview emotionally safe for Tesfalam to disclose his problems freely?
  - o Confidentiality Did the social worker explain all of the issues surrounding the confidentiality of Tesfalam's information? Did the social worker ask permission from

- Tesfalam before bringing in another staff member to examine his medical condition? How was informed consent obtained?
- **Empowerment** Did the social worker provide information surrounding sexual violence affecting LGBTI to Tesfalam and possible actions to deal with it? Did the worker provide Tesfalam time and space to make decisions for himself? Or did the worker assume that he knew what Tesfalam needed? How did the social worker signal that Tesfalam was in charge of the healing process?
- Inclusion Did the social worker provide different options for services and programs that Tesfalam could consider? Did the social worker treat Tesfalam in a similar manner to other clients who present SGBV issues? Did the worker deal specifically with his case as a sexual minority? Did the social worker try different methods of communication?
- Multi-sectoral approach What services did the social worker discuss with Tesfalam? Do these services address immediate health and safety issues, as well as supporting psychosocial support activities? Did the social worker identify which community activities Tesfalam may want to join in the future, and any supports needed?

#### **SLIDE 14: SUMMARY**

## Summary

- The survivor-centered approach empowers survivors to take a leading role in their recovery
- · Key principles include dignity, safety, confidentiality, empowerment, inclusion and a multi-sectoral approach
- Sexual minorities who have experienced SGBV need the support of all actors, including communities in which they live
- We must adapt the way we interact with sexual minority survivors, ensure that our programs uphold principles of the survivor-centered approach and are fully inclusive of their needs

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#### **Background**

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