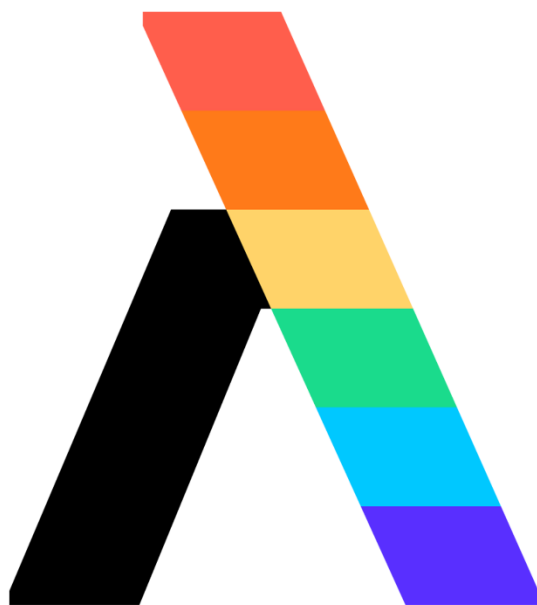


Lambda Warszawa 2024

Intersectional Approach to LGBTQIAP Refugees

Guidelines for Agencies and NGOs working with Refugees



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INTRODUCTION

We would like to present to you a fruit of our work, namely, a toolkit that will not only provide you with comprehensible answers to a variety of issues, questions and queries but will also offer a coherent set of guidelines applicable in your every day work with LGBTQIAP refugees.

When we woke up in the early morning of February 24, 2022 to our horror and disbelief, we watched news coverage showing the bombing of the cities of Kyiv, Kharkiv and Odessa that started a full-scale Russian invasion of Ukraine. We had not had a high expertise on how to provide assistance to refugees fleeing war zones as Eastern Europe had not been invaded since the end of WWII. However, being the oldest Polish LGBTQIAP organization, we instantaneously realized that our common border with Ukraine would very soon become the destination for a large influx of refugees and among them a substantial number of queer persons who would require multi-faceted assistance. We knew that many people would come to Poland, since our countries share a similar cultural background. Since 2017 we have had a support group for queer Ukrainians living in Poland, which gave us an insight into their situation and helped us create programs tailored to the needs of the LGBTQIAP refugee community.



We started with managing an enormous mobilization of the local LGBTQIAP community. We contacted people offering temporary accommodation in Warsaw and neighboring towns with the refugees so that they would get a warm and soothing welcome and most of all a safe shelter in those devastating circumstances to, we asked people to join us in preparing food packages and handing them out at Warsaw train stations where refugees had started to arrive in great numbers since day one.

Thankfully, quite soon we received the first refugee grant from an organization in Belgium, which enabled us to rent one apartment for our queer refugees. Simultaneously we hired a Ukrainian psychologist and offered counseling in Ukrainian and Russian, which was often the only language some of the refugees spoke. Our lawyer rapidly readjusted to include legal counseling for refugees in the presence of a Ukrainian or Russian interpreter. We also managed to receive further grants from numerous organizations worldwide, some of whom have become our long-time partners who have performed various training for our team, e.g., related to safeguarding and GBV-issues.

One thing that we noticed immediately was the cis-heteronormative approach to the idea of providing assistance; from our previous experiences we had known that such an approach does not respond to our beneficiaries' needs. As a team, we have developed a system that would guarantee queer beneficiaries' safety and understanding.



For the last 2,5 years that have passed since then, we have established a unique and comprehensive approach towards our refugee beneficiaries. We have become experts in the field of GBV with a particular focus on the LGBTQIAP community, expanding our scope of services with an Integration Center and a job training program as well as creating a platform to share good practices with a wide range of worldwide organizations offering support to displaced persons from all over the world.

Please bear in mind that it is absolutely crucial to cooperate with local NGOs when dealing with any of those issues – this publication should only be a part of a complex process, which will foster to embrace and understand those who are the subjects of every activity you undertake.

Miłosz Przepiórkowski

President of the Board

Lambda Warszawa Association



CONTEXT AND FRAMEWORK

According to ILGA Europe's Rainbow Index, which measures the legal situation of LGBTQIAP persons in European Countries, Poland has received for the 4th year in a row the lowest score within the European Union (18/100 points in 2024). In the years 2021-2024, Ukraine each time received more points than Poland, although their number was relatively similar each time. For almost a decade, the legal situation of the LGBTQIAP community in Ukraine has been slowly improving - adoption of Legal Gender Recognition, etc. However, it should be remembered that social progress or progress in the medical context (the approach of health care providers, their knowledge and work standards) do not always go hand in hand with legal changes.

While in both countries the situation has been quite uniform over the last 4 years, in many European countries, also considered very progressive for years, LGBTQIAP people are increasingly closer to equal rights with other members of society (for example, Iceland and Germany).

On the other hand the only legal protection for the LGBTQIAP community against discrimination in Poland is provided for in Labor Law. Poland has not yet included the premises of sexual orientation, gender identity and expression in existing Hate Crimes legislation. The country also has no law regarding Hate Speech.



Poland has included legal protection, the right to stay (firstly up to 18 months), work and social benefits for people fleeing Ukraine from February 24th, 2022. Free rail transport throughout the country (and to neighboring countries) was also provided, and in many cities - free public transport without restrictions.

However, this only concerned people who crossed the border on February 24th or later and had a Ukrainian passport. People who had entered the country earlier or had documents other than those issued in Ukraine did not receive the above-mentioned protection. The situation was particularly problematic for LGBTQIAP people who had previously left their countries of origin and lived in Ukraine - as a country safer for them than their homeland (for example, Belarus and Russia).

Additionally, Poland does not recognize same-sex relationships (partnerships and marriages) concluded outside the country. They cannot be concluded in Poland either. Therefore, for many people it was a difficult experience - after crossing the border, such relationships, in a legal context, became completely strangers to each other. This affected the issue of placing people in shelters and matters related to making decisions for or on behalf of the spouse (especially in health and life-threatening situations). These community challenges and



needs may escape the attention of those responsible for first-contact help and support.

At border crossings where reception points were organized, LGBTQIAP organizations, with the support of refugee agencies, left leaflets and posters with information in several languages intended for the LGBTQIAP community on where to seek dedicated help in various regions of the country.

Information was also shared within Ukraine in parallel, so that people deciding to cross the border had direct knowledge of where to seek help and where to go to avoid staying in places intended for all refugees. Such parallel action is also a very good practice, which not only provides specific people with a resource of information and reduces the mental tension related to the extreme situation in which the person is and the uncertainty related to possible lack of security and LGBTQIAP-phobia. At the same time, it relieves the burden on the "first line" of help, which may not have information about dedicated help services. What is also very important is the lack of forced coming-out, which the person would have to do to clarify their situation.

The Lambda Warszawa Association organized a meeting of LGBTQIAP organizations operating on behalf of migrants and refugees, legal and human rights organizations on February 25, 2022, in order to respond as quickly and effectively as possible to the needs of people who will certainly be arriving in



Poland. The community (LGBTQIAP) who already lived in Poland was invited to the meeting to help organizations respond to the needs as best (and as quickly as possible), but also to know the context of Ukraine as best as possible. Particular attention was paid to transgender, intersex and HIV-positive people, as groups that may need more specialized help in a medical context, continued use of medicinal substances ("bridging"), and as subgroups who may experience transphobia, interphobia, and bias related to their health status within the LGBTQIAP community.



WHAT DOES LGBTQIAP STAND FOR?



A. LESBIANS

Introduction

Research shows that lesbians, who are women emotionally, romantically, and/or sexually attracted to other women, face unique challenges within the LGBTQIAP community. According to a report by the Williams Institute, lesbians are more likely to experience both gender-based and sexual orientation-based discrimination. In Poland, strong patriarchal norms and gender stereotypes exacerbate these challenges, making lesbians a particularly vulnerable group.

Definition

“Lesbian” is a term that describes women who are emotionally, romantically, and/or sexually attracted to other women. Some non-binary people may also identify with this term. A lesbian can have any gender identity, gender expression, or gender characteristics. In Polish society, where patriarchal norms and gender stereotypes are still strong, lesbians may experience double discrimination due to their gender and sexual orientation.

Risks

1. Violence from society: Lesbians may experience physical, verbal, and emotional violence, leading to physical injuries and health and psychological problems.



2. Rejection from the local community: Lesbians with refugee experience may be isolated and marginalized due to their sexual orientation and refugee status, leading to feelings of loneliness and alienation.

3. Difficulties in accessing services and resources: Lesbians with a refugee experience may encounter barriers in accessing basic services, such as healthcare and social support, due to language and cultural barriers and discrimination from professionals and institutions.

4. Lack of legal protections: In Poland, the rights of queer people and refugees are often insufficiently protected by law, leading to social exclusion, lack of equality before the law, and difficulties in obtaining help and support from state institutions.

Situations Faced by Practitioners

Practitioners may encounter lesbian refugees who have faced severe discrimination and violence in their home countries. These individuals may also struggle with finding safe housing and employment due to their sexual orientation and refugee status. Additionally, practitioners might need to navigate the complexities of providing culturally sensitive support in a society where patriarchal norms are prevalent.



Recommendations

1. **Understanding Identity:** Recognize the complex identities of lesbians with refugee experiences, which include not only sexual orientation but also gender, culture, and other aspects.

2. **Providing Social Support:** Offer social support and networks to help lesbians integrate into their new environment, reducing feelings of isolation and rejection.

3. **Fighting Discrimination and Violence:** Actively work against discrimination and violence that lesbians with refugee experiences may face. Support them in accessing legal aid and other forms of support in the event of persecution.

4. **Creating Inclusive Services:** Train staff on LGBTQIAP issues and ensure that all services are inclusive and sensitive to the needs of lesbian refugees.

5. **Considering Cultural Context:** Many Ukrainian refugees who initially moved to Germany faced challenges adapting to a different cultural environment, prompting some to return to Poland. This highlights the importance of understanding and addressing cultural differences when providing support to refugees.

6. **Health Support:** Facilitate access to healthcare services that are knowledgeable about and sensitive to the specific needs of lesbians, including reproductive health and mental health services.



B. GAYS

Introduction

Gay men, who are emotionally, romantically, and/or sexually attracted to other men, often face significant discrimination and violence due to their sexual orientation. Studies indicate that gay men are at higher risk for mental health issues, discrimination, and sexually transmitted infections (STIs), including HIV. Understanding these risks is crucial for providing effective support.

Definition

The term “gay” is general and describes people who are emotionally, romantically, and/or sexually attracted to people of the same sex. While it is typically used to describe men, some women and non-binary people may also identify as gay. A person identifying as gay may have any gender identity, gender expression, or gender characteristics. In Poland, where acceptance of queer people can be limited, gay people often experience discrimination and violence because of their sexual orientation.

Risks

1. Verbal and emotional violence: Gay people may be exposed to offensive comments, insults, or harassment, leading to lower self-esteem and social isolation.



2. Physical violence: Some gay men may experience physical attacks, resulting in physical injuries and traumatic experiences.

3. Discrimination in the workplace and education: Gay people may face discrimination at work or school, leading to job loss, reduced opportunities for career advancement, and stress related to social exclusion.

4. Lack of equal rights: Poland lacks full legal protection for queer people, restricting access to medical services, adoption of children, or entering into civil partnerships.

5. Stigmatization and marginalization: Gay people may experience social stigmatization and marginalization, leading to feelings of isolation and loneliness.

6. Sexually transmitted infections (STIs): Gay men are at a higher risk of STIs, including HIV, due to factors such as discrimination, limited access to healthcare, and social stigma. This increases the importance of regular testing, prevention, and education.

Situations Faced by Practitioners

Practitioners may encounter gay refugees who have experienced severe trauma due to persecution in their home countries. They may also face difficulties in finding employment or housing due to discrimination. Additionally, gay refugees may be reluctant to seek help due to past negative experiences with



authorities or service providers. Moreover, practitioners might deal with refugees who face health challenges related to STIs, including HIV, and need specialized medical and psychological support.

Recommendations

1. **Understanding Cultural Contexts:** Be aware of the cultural and social differences that may impact the experiences of gay men with refugee backgrounds. Many have fled due to persecution related to their sexual orientation.

2. **Providing Psychological Support:** Offer psychological and emotional support tailored to the needs of gay refugees, who may have experienced trauma from violence, social rejection, and other forms of discrimination.

3. **Creating Safe Spaces:** Ensure a safe and accepting environment where gay refugees can express themselves without fear of discrimination. This includes safe housing and inclusive services.

4. **Legal Support:** Assist gay refugees in accessing legal aid to address any legal challenges they may face due to their sexual orientation.

5. **Inclusive Services:** Train staff on LGBTQIAP issues and ensure that all services are inclusive. Avoid assumptions about sexual orientation and ensure that policies protect against discrimination.



6. Considering Cultural Context: It is also important to consider the cultural context in which refugees have lived. For instance, many Ukrainian refugees who initially moved to Germany found it difficult to adapt to the different cultural environment and chose to return to Poland. Such challenges may arise from varying levels of social acceptance, cultural norms, and the overall environment for LGBTQIAP individuals. Understanding these cultural differences is vital in providing appropriate and effective support.

7. Health Support: Provide information and resources for STI prevention and treatment, including access to regular testing and safe sex practices. Support gay refugees in accessing healthcare services that are knowledgeable about and sensitive to their specific needs.



C. BISEXUAL PERSONS AND THE BI + UMBRELLA-TERM

Introduction

When we look at latest research, we can say, that bi+ is the most widely represented sexual/romantic orientation within the LGBTQIAP community.

According to research conducted by the Trevor Project, 28% of respondents among young LGBTQIAP people declare themselves as bisexual and 27% as pansexual. This shows that the orientation spectrum has the highest representation within the LGBTQIAP group. Studies such as the one mentioned above also confirm that young people are more aware of their sexual/romantic orientation and they do not want to restrict themselves to the monosexual orientations. They are also more conscious of the nomenclature and the existence of a plethora of sexual/romantic orientations and gender identities (e.g.: higher usage, understanding and acceptance of different pronouns among young persons).

Definitions

Bi+ is used as an umbrella-term for the orientations that involve the attractions towards persons of more than one gender (polysexual orientations).



Bisexuality is defined as an attraction towards other persons of more than one gender identity, which means that bisexual persons can be attracted to different persons of various gender identities, not restricted to those within the binary system (male/female); preferences towards persons of one gender identity may occur, e.g., a bisexual woman may be attracted to women and nonbinary persons, whereas her sexual attraction is stronger towards women. This attraction (as all others) can transition in time.

Pansexuality is the attraction towards other people regardless of their gender. Pansexual people are often described as gender blind, since the gender of their object of interest is not, contrary to the looks or character, a factor that would play a role, when choosing a partner.

Bisexuality and pansexuality are often confused, e.g., some persons identify as pansexual as they claim that “*they are also attracted to nonbinary and/or trans persons*”. This stereotype is extremely hurtful towards bi+ persons, considering the fact that bisexuality *is* trans and nonbinary inclusive. The only difference is that bisexual persons may not be attracted towards persons of all possible gender identities, whereas pansexual persons simply “cannot see” a person’s gender identity at all.

Risks

There are numerous factors leading to higher risks for bi+ persons.



1) Paradoxically, the so-called “straight passing”, which means that bi+ persons might not be considered LGBTQIAP because they remain in a relationship/ marriage with a partner of a different gender identity or because they “*don’t look gay*” and are therefore automatically considered heterosexual.

2) Bi+ persons are affected by discrimination not only in the “straight” world but also among LGBTQIAP persons, e.g., bisexual men are often considered to be “*closeted gay*”, whereas bi+ women are sexualized and told that “*they will find the right man one day and lead a normal life*”. Due to such stereotypes many lesbians refuse to date bi+ women and some gay men tell bisexuals to “*finally come out as gay*” before they would even consider dating them.

3) One has to be completely aware of these prejudices while working with bi+ refugees. Growing up and living with such stigma in a country where it is illegal to be LGBTQIAP leads to a high level of minority stress among bi+ persons. They more often become addicted to substances in comparison with the rest of the LGBTQIAP community because they are the ones whose sexuality is either erased belittled or ridiculed. They are also the ones, who are often excluded from various groups and activities by other homosexual refugees, simply because “*they have a choice and can lead a normal life*”. The same situation can be observed within religious groups that are accepting of gay, lesbian and transgender persons due to their “*lack of*



choice” but leave bi+ persons out of their circle because “*only due to their choice they remain living in sin*”.

4) In many countries bi+ persons are keener to be treated with the so-called “conversion practices” because it is generally believed that “*it is much easier to make them straight*”.

Recommendations and good practices

Please note, that all the examples given above add up to a higher level of vulnerability among bi+ refugees. You should embrace the fact, once they have come out to you as bi+, rather than putting them in the “*gay box*”. It is already hard enough for them to be left behind by other LGBTQIAP persons and the fact that they consider themselves to be bi+ in such a critical situation as escaping war and leaving their homelands due to their sexual/romantic orientation shows not only great bravery but above all an internal imperative to be seen as who they really are.

Working with same-sex-couples you should avoid using the term a “gay/lesbian couple”. Instead, use the term “same sex couple”. This is key due to the fact, that you never know (unless you are told that by the persons who you work with) if both partners remaining in the relationship are homosexual, e.g., a relationship between a lesbian woman and a bi+ woman is described as a “mixed orientation relationship”. As with all other beneficiaries, the golden rule is: NEVER assume. The fact



that someone seems gay, trans and/or queer does not mean that they actually are.

Please, take also into consideration that bi+ refugees must be included in all workshops, meetings and activities dedicated to the LGBTQIAP group, even if they remain in mixed relationships. Being with someone of a specific gender identity does not change their sexual/romantic orientation – quite contrary, those persons often deal with the so-called “imposter syndrome”, which leads to trauma and a higher risk of depression.

Mentioning sexual actions (for example during workshops regarding STIs), do not use the term “gay/lesbian sex” – in such cases we rather speak of MSM (men having sex with men) and WSW (women having sex with women).

Always try to be more inclusive and do not leave anyone out – the more you speak of the other orientations, the higher the chances are that bi+ refugees will come out to you, which will make it easier to adjust to their needs while choosing specific services and include them in the activities dedicated to LGBTQIAP beneficiaries.



D. TRANSGENDER AND NONBINARY PERSONS

Introduction

The transgender and non-binary community is something of a minority within a minority. Very often, this community is seen through the prism of their gender identity, not the sexual orientation they have (like any other person). Therefore, the experience of discrimination and intolerance may be more multi-layered than that of cis people in the LGBTQIAP community. Exclusion, discrimination and intolerance experienced by transgender and non-binary people may also occur within the entire rainbow community. Therefore, this community should be looked at even more multidisciplinary than the cisgender part of the group, and help and support should not only be tailored to the entire subgroup, but in many cases tailored to the needs of a specific person.

Definition

While the UN's official definition on transgender term¹ is quite descriptive, it is not comprehensive and does not include non-binary persons.

¹ [https://www.unfe.org/definitions/#:~:text=them%20at%20birth-.Transgender%20\(sometimes%20shortened%20to%20%E2%80%9Ctrans%E2%80%9D\)%20is%20an%20umbrella,characteristics%20are%20seen%20as%20gender](https://www.unfe.org/definitions/#:~:text=them%20at%20birth-.Transgender%20(sometimes%20shortened%20to%20%E2%80%9Ctrans%E2%80%9D)%20is%20an%20umbrella,characteristics%20are%20seen%20as%20gender) access on February 23rd, 2024



To simplify the understanding of the definition, it is vital to accept that a transgender person is a person whose sex assigned at birth differs from their gender identity.

A non-binary person is one who does not fully identify as a woman or man. The non-binary category is a spectrum and a person's identity does not have to fit into any preexisting notions of gender. It does not mean, though, that the person is indecisive or uncertain, non-binary is simply a gender identity.

A person's gender identity is an integral, non-negotiable and indisputable part of their being. A person's gender expression is also beyond question. Even though both may not be consistent with culturally accepted and created norms describing women and men. It is also not necessary for a person's gender identity to match their gender expression.

Social Context

The social situation regarding transgender and non-binary persons is one of the greatest challenges regardless what country we have in mind. Not only does the level of social acceptance depend on it but also the ability to live in harmony with one's gender identity.

The country of origin determines to what extent a person can be themselves. There are countries where being a transgender person is not only socially unacceptable but can



also expose a person to hate crimes without a chance for seeking legal defense as these crimes are not recognized under local law, or they lack the premise of gender identity and expression and/or psychosexual orientation.

Special consideration should be given to the social and legal situation in countries where merely being an LGBTQIAP person may lead to imprisonment or death penalty. This is especially the case in the countries where official anti-LGBTQIAP laws are in place or the situation is derogating and hateful laws might be introduced in near future.

Taking these issues into account, it is important to remember that speaking freely about gender identity and related experiences may pose a danger for some. The deeply imprinted need to protect themselves from possible threats (including physical ones) may require time and an established sense of security.

Medical Context

Transition is a multi-stage process that may last for years. It should also be adapted to the needs of a transgender and/or non-binary person.



Despite the latest very extensive and exhaustive WPATH Standards of Care (version 8)², it is still up to health care providers to determine what this process will look like, how long it will take, and what tests will be needed. This applies to both medical and psychological tests as well as to mental health. In many countries, there is no National Protocol or official guidelines for medical transition. This may be a major difficulty in finding specialists being able to admit a person to their office and provide assistance or guide a person through the process of medical transition.

In some countries, for many years there was (or is still in force, also as a medical practice) forced hospitalization in a psychiatric ward of transgender and non-binary persons treated as a diagnostic process. For many people, this was associated not only with the trauma of hospitalization, violence from staff and other patients, as well as the trauma associated with any form of contact with health care providers. Also, the stigma of having a diagnosis and/or staying in a psychiatric ward can be very difficult to deal with and cause great fear and resistance to contact with a specialist again, even if it is in a completely different context.

² <https://www.wpath.org/soc8> access on February 25th, 2024



Particular attention should be paid to people who are already taking hormonal therapy (including synthetic gonadoliberin analogue (GnRH)). Giving up medications can have many health repercussions - both physical and mental. That is why continuity of treatment is so important. Changing the drug must also be consulted with a doctor and not all countries offer the same forms of administering the drug and/or the same substances.

There are countries where hormonal drugs are available without medical supervision or intake guidelines - in such a situation the person can determine the doses and frequency of intake themselves. This is a dangerous situation because persons who set their own doses and frequencies may overdose. When taking hormonal drugs, most crucial is taking precisely prescribed doses at appropriate time intervals recommended by the doctor. For many people, the need to reduce doses or extend them over time may be very difficult to bear mentally.

Giving up on medications may have various health repercussions, both physical and mental. That is why continuity of treatment is so important.

The situation related to medical transition will be different for people who have documentation related to the diagnostic process (if it is possible, available and necessary in the country where the person stayed previously), medical aspects of transi-



tion (medical documentation related to health condition is particularly important here, tests and hormone therapy. In the case of medical documentation, the doctor will (in most cases) be able to "bridge", continue treatment without repeating tests. In the case of "self-meds", i.e., people taking medications without medical supervision, the situation is much more complicated. It may require additional tests, doctor appointments, time, and possibly more financial resources.

Changing the drug must also be consulted with a doctor. Not all countries offer the same forms of taking the drug (intramuscularly, medicine administered/rubbed onto the skin, tablets, etc.) and/or the same substances.

Due to significant discrepancies in access to medical transition between countries, it is advisable to cooperate not only with local organizations that are best versed in medical issues but also access to trans-specific health care and places where a person can receive psychological support. In some cases, it is also recommended to contact international organizations such as Transgender Europe (TGEU) to have a clearer picture of the situation in the specific country from which the person comes.

Many LGBTQIAP non-governmental organizations offer free psychological counseling or opportunities to engage in support groups that are often necessary to help a person feel stable



and find their way in a new place. Additionally, a sense of belonging and access to one's social group is also beneficial in coping with experiences of war, relocation or trauma.

For many people, it will only be possible to start any stage of transition (social, medical and/or legal) in a new country of residence.

Legal Context

Each country has different legal solutions regarding Legal Gender Recognition but there are countries that do not have any regulations in this respect. An additional disadvantage may be the identification of legal regulations in force or discrepancies in existing procedures and their access by persons who do not have the citizenship of a given country.

A person's legal status may be so unfavorable that legal counseling might be inevitable when dealing with this type of cases.

One of the biggest challenges in the legal context is ensuring safety in sheltered apartments or other kind of accommodation where a person will be placed. Placing a person in a place consistent with their document legal gender marker may expose them to harassment, hate speech, and physical and sexual harassment. If such a place does not have a separate space dedicated to LGBTQIA persons, you should consider other available options, i.e.: a smaller facility/ apartment or finding a separate



facility. You should start by asking the person where they will feel safer if places are granted to a person based on their gender.

It is worth ensuring that such a place has staff trained in the specificities of LGBTQIAP persons, the context and legal situation as well as familiar with clear procedures related to, e.g., administering medications, which may be crucial for transgender and non-binary people.

Risks

The risks that ought to be considered are:

- legal situation of the person
- social and medical context of the person's country of origin
- medical situation (related to both medical and non-medical aspects of transition)
- documents held by the person and their legal gender marker
- access to trans-specific medical care and psychological counseling
- support network and access to your social group

Recommendations and good practices



One of the fundamental facets when working with and assisting the transgender and non-binary community is to ensure their right to self-determination and free expression. In many places there will be neither developed procedures nor any aid or assistance dedicated to the group, which is why it is crucial not only to improve the qualifications of the staff but also to have direct conversations and map the needs of the community. In many cases this will allow us to develop at least sufficient solutions.

This social group is at a high risk of suicidal thoughts and attempts as well as depression. Various studies have revealed the percentage to be between 50% and 70%. Therefore, it is important to ensure access to qualified assistance not only related to post-war traumas (including sexual violence) but also to trans-specific medical and psychological care.

It is worth inquiring local organizations working with transgender and non-binary persons or LGBTQIAP community at large for support and in developing procedures and/or improving staff qualifications.



E. INTERSEX PERSONS

Introduction

Intersex people are the least visible subgroup within the LGBTQIAP community. There has been a long-standing conspiracy of silence around intersex people and hiding their health condition, very often within the family. Intersex was treated as a stigma, a fact that should be hidden at all costs, and forced "normalizing" and "repairing" procedures in order to achieve the most dyadic body possible. In most countries of the world, the only possible gender designations are "female" and "male" and there is no option not to mark sex in documents. Therefore, especially in the event of general military mobilization, intersex people (as well as transgender and non-binary people) may have difficulty crossing the border of the country of their nationality. They may experience pushback and/or refusal to enter another country - both because of their appearance, which differs from cis-normative forms of perceiving who is a "woman" and who is a "man", and because of the gender marking in documents. Therefore, intersex people may be one of the last groups to reach help services.

Definition

Intersex is a term that "refers to people born with physical sex characteristics (such as sexual anatomy, reproductive organs, hormonal patterns and/or chromosomal patterns) that do not fit typical definitions of male or female bodies (dyadic). These



characteristics may be internal or external, apparent at birth or emerge in puberty or not be physically apparent at all. There exists a broad spectrum of sex characteristics among intersex people. Intersex people use the term in different ways such as “being intersex” or “having an intersex variation”, or they may prefer not to use the term at all. An intersex person may have any gender identity, gender expression or sexual orientation. Used next to a noun, e.g., *intersex person*.³

Intersex persons are one of the less visible groups within the LGBTQIAP community. Intersex is related to the structure and functioning of the body. Nevertheless, it should be remembered that intersex persons (like all the other) have a gender identity and psychosexual orientation, therefore, when working with intersex persons, one should be guided by multi-level understanding without limiting to matters related to intersex rights, issues and needs.

Social Context

Despite the increasing awareness of intersex rights, many countries have no laws prohibiting "corrective" surgery performed to "normalize" a person's body to fit the typical definition

³ [https://www.unfe.org/know-the-facts/definitions#:~:text=them%20at%20birth-,Transgender%20\(sometimes%20shortened%20to%20%20%20%20trans%20is%20an%20umbrella,characteristics%20are%20seen%20as%20gender](https://www.unfe.org/know-the-facts/definitions#:~:text=them%20at%20birth-,Transgender%20(sometimes%20shortened%20to%20%20%20%20trans%20is%20an%20umbrella,characteristics%20are%20seen%20as%20gender) access on February 27th, 2024



of a female or male body. Taboo concerning discussing the rights of intersex persons and their right to self-determination regarding their bodies is a pivotal and at the same time demanding aspect that cannot be overlooked. In plenty of cases, there is a conspiracy of silence regarding intersex conditions and informing the person that they have undergone a surgery or procedures related to the "normalization" of their body.

For a great number of people, talking about being intersex is a very traumatic experience, associated with enormous social anxiety and fear directed at health care providers.

When working with refugees, it is crucial to be aware that many people will not refer to themselves as intersex but will use medical names that describe intersex and/or will not even know the term "intersex" at all. Other people will identify themselves as belonging to other subgroups under the LGBTQIAP umbrella to hide the fact that they are intersex or simply are unaware of the fact.

It is important not to look at a person solely through their actual or perceived gender, gender expression, a legal gender marker or psychosexual orientation. Particular care should be taken when mapping support and categorizing it, especially due to the legal gender marker and the perceived gender of the person.



There is quite a number of institutions, such as shelters, that admit people only by their legal gender marker. This is potentially a greatly dangerous situation for an intersex person. Not only because they may not fit into the strict criteria of the gender binary but it may also mean an experience of violence from other people staying in the same place but also from employees who will not be aware that the person needs additional protection and, due to their own prejudices and/or ignorance, they will not respond appropriately to hate-driven incidents.

As in the case of transgender and non-binary people a good and recommended practice is to let the intersex person decide where they want to stay (a shelter, apartment building, etc.) and which option would be the safest for them.

Medical Context

For many intersex people, remaining under medical care may be essential and necessary. At the same time, previous experiences with health care providers might have been traumatic and the fear of retraumatization may effectively debilitate the ability to obtain the necessary help.

Some people find it helpful to have a trusted person accompanying them to medical appointments or other places that provide medical and psychological assistance and counseling. Analogous to the medical context of transgender and non-binary people, many people crossing the border may not have



their medical records with them and thus the threat of "bridging" grows significantly.

It is also crucial to find specialists who are aware not only of medical intersex issues but also of the challenges arising from previous medical-related experiences. Specialists can be difficult to find, so it is worth having a list of intersex organizations that will help you find the right specialist, support groups and/or participation in activities intended for the social group. It is particularly recommended to contact and establish cooperation with OII Europe - an umbrella expert organization.

The sense of belonging is extremely important for minority groups, especially those that have to deal with many years of trauma and misunderstanding. The additional experience of war trauma (and trauma related to previous experiences), relocation, and a lack of access to a support network may cause even greater feelings of alienation and adaptation barriers.

Legal Context

The vast majority of countries do not recognize any sex assigned at birth categories other than "female" or "male". Therefore, for many intersex people, the legal gender marker is completely inconsistent with their gender identity. Thus, it is inadvisable to look at a person only through the context of a legal gender marker.



It is also worth bearing in mind that an intersex person will need medical transition or certain aspects of it or will decide to change the gender marking in their documents, which may be related to their desire of starting "life anew in a new place", and/or the availability of medical and legal procedures at the place of relocation or stay.

Due to pushbacks at borders related to the legal gender marker, intersex, transgender and non-binary people may not have documents confirming their identity - in some cases, "losing" documents and passing of the person is the only way of crossing a border. In such cases, it may be necessary to obtain documents confirming the person's identity and, consequently, obtain legalization of stay, obtain medical insurance, etc.

Possible risks:

- lack of awareness about the situation and context of intersex persons both from the country of origin/arrival and the country to which the person has arrived.
- lack of access to intersex-specific medical care
- lack or inconsistency of medical documents and documents confirming the person's identity
- lack of support network

Recommendations and good practices



An intersectional, multi-level, customized, individual approach to each person is necessary to ensure the comfort and safety of the individual. Similar to the case of transgender and non-binary people, ensuring the ability to decide and self-determine regarding their place of residence and the aid they receive is crucial. This gives the person a sense of being part of decision-making process in a challenging situation, which also creates a sense of stability and belonging.



F. ASEXUAL PERSONS AND THE A+ UMBRELLA TERM

Introduction

Speaking of LGBTQIAP people very often think of sexual orientation, much more often than about gender identity or sex characteristics. But in most cases, they tend to totally forget the letter A, which represents the A+ spectrum.

Definition

People who identify as asexual experience little or no sexual attraction to others. Asexual people, or “aces,” often identify somewhere on a spectrum that includes their emotional, spiritual and romantic attraction to other people. There is no one simple way to describe asexual persons. A+ is – similitier to bi+ - a spectrum, and every “ace” (short for asexual person) will describe themselves differently. For example, demisexual persons don’t experience sexual attraction to others, unless they build a strong relation to one concrete person – and the sexual attraction appears, but is focused only on that specific person.

Sexual attraction is also very often confused with libido – it is important to emphasize, that asexuality is not equal to the low level of libido; it simply means, that the sexual attraction towards others is either very little or doesn’t exist at all.

Risks

“Everyone likes sex”, “You will meet the right person one day and he/she will fix you” or “You should go to the doctor” are real-



life examples, what A+ persons have to deal with on a regular basis.

The risk is, that situations take place, where someone is actually trying to “fix” an asexual person by raping them, similar as it is the case with lesbians (the so-called “corrective rape”), a situation, that appears i.e., in war-zones.

Another great risk is the fact, that many psychiatrists try to “treat” asexual persons through therapy, as they assume that asexuality is the result of trauma caused by sexual abuse in childhood. This is very dangerous, since this kind of behavior is nothing other than a “conversion practice”, as is the case with homosexual, bisexual and transgender persons.

Recommendations and good practices

When dealing with asexual persons, it is necessary to take into account what traumas they may have suffered in the past due to their orientation. Some people are victims of sexual violence and the so-called "corrective rapes" and therefore they need special psychological care. Many psychologists do not consider asexuality to be a full-fledged orientation and send the persons to treatment that may only deepen their mental state. It is important to talk about asexuality and thus make others aware that people under this umbrella term are part of the LGBTQIAP community, which is often overlooked. Remember, that asexual persons may also be affected by STIs.





**SPECIAL MEASURES REGARDING
THE LGBTQIAP
COMMUNITY**



A. CHEMSEX

Introduction

Chemsex, the use of psychoactive substances to enhance sexual experiences, is a significant issue within the LGBTQIAP community, particularly among gay and bisexual men. This practice is often linked to coping mechanisms for minority stress and the pressures faced by the LGBTQIAP community. Understanding and addressing chemsex is crucial for supporting the mental and physical health of those affected. In addition, implementing harm reduction strategies is essential to minimize the negative consequences associated with chemsex, promoting safer practices and reducing health risks.

Definition

Chemsex refers to the use of psychoactive substances to enhance sexual experiences. This practice is often seen among gay and bisexual men and can involve drugs such as methamphetamine, GHB/GBL, and mephedrone. Chemsex is often linked to coping mechanisms for minority stress and the pressures faced by the LGBTQIAP community, leading to higher rates of substance dependence and risky sexual behavior.

Risks



1. **Health Risks:** Chemsex increases the risk of STIs, including HIV, due to unprotected sex and sharing of drug paraphernalia. There are also risks associated with overdose and adverse drug reactions.

2. **Mental Health Issues:** The use of drugs in chemsex can exacerbate mental health issues, including anxiety, depression, and psychosis.

3. **Addiction:** The combination of sexual pleasure and drug use can lead to a cycle of dependency, making it difficult to break free from the habit.

4. **Social and Legal Consequences:** Participation in chemsex can lead to legal issues related to drug use and social isolation due to stigma and discrimination.

Recommendations and good practices

1. **Awareness and Education:** Educate both practitioners and gay refugees about the risks associated with chemsex. Provide resources and information on safer practices and alternatives to cope with stress.

2. **Healthcare Access:** Ensure access to healthcare services that are aware of and equipped to handle issues related to chemsex. This includes STI testing and treatment, addiction services, and mental health support.



3. **Psychological Support:** Offer tailored psychological support to address the underlying issues that may lead to chemsex, such as minority stress, trauma, and social rejection.

4. **Safe Spaces:** Create safe and non-judgmental environments where individuals can discuss their experiences and seek help without fear of stigma or discrimination.

5. **Support Networks:** Encourage the development of support networks among gay refugees to reduce isolation and provide mutual aid in coping with stress and addiction.

6. **Harm Reduction:** Implement harm reduction strategies such as providing information on safer drug use practices, offering needle exchange programs, and ensuring access to overdose prevention resources like naloxone. Harm reduction focuses on minimizing the negative health and social consequences of drug use without necessarily eliminating drug use.

By addressing these risks and providing comprehensive support, practitioners can help gay refugees navigate the challenges they face and promote healthier and safer lifestyles. While chemsex most commonly affects gay and bisexual men, it is important to remember that individuals identifying differently can also be at risk of compulsive sexual behaviors involving psychoactive substances.



B. SAFEGUARDING AND SAFETY MEASURES

Introduction

Power is very often misused, which can lead to abuse in various forms – may it be sexual harassment (verbal or physical), sexual acts performed/ demanded/ expected for benefits or sexual violence.

Sexual exploitation and abuse are horrible realities that disproportionately affect marginalized communities, including the LGBTQI community. While no single solution can eradicate these issues entirely, there are proactive steps individuals can take to reduce their risk and empower themselves and their communities. This chapter aims to provide guidance and resources for preventing sexual exploitation and abuse within the LGBTQI community.

Safeguarding

In order to prevent this type of behavior, various organizations have established and implemented the so-called “Code of conduct”, which not only enables reporting such cases but also allows to perform an investigation, which aims to limit the harm experienced by a potential victim and solve the case.

Prevention measures are usually adapted to the so-called cis-heteronormative environment; they include actions, such as women supervising women/ men supervising men at shelters, which in theory eliminates/ reduces the number of acts of sexual



violence. In practice we have noticed that most resolutions theoretically designed to combat sexual violence fail simply because the world is neither cis-heteronormative nor binary.

The biggest challenge is NOT to assume although the human brain is programmed otherwise both by our environment and our experience; when we encounter someone or start a conversation with a person we have just met, we tend to think whether we are talking to HER or HIM. When someone says, that they are queer, the majority will assume that they are homosexual. The greatest risks of this way of thinking in the refugee context are:

1. Putting a person at risk,
2. Failing to provide them with a proper support.

In collaboration with Oxfam, we have established our own measures applicable in any facility providing assistance for LGBTQIAP beneficiaries. Make sure that your organization adapts its own code of conduct in order to ensure safety at all of its facilities.

SOGIESC

This term is an acronym that stands for:

- **S**exual **O**rientation – L, G, B+, Q, A+ and other sexual/ romantic orientations,
- **G**ender **I**ntity – Cis, T and nonbinary, agender, genderfluid and other gender identities,



- **Gender Expression** – the way people express their gender,

- **Sex Characteristics** – physical features.

Sexual Orientation is *not* visible. It is the attraction, both sexual and/ or romantic towards particular persons of a specific gender. Pop culture has given us the wrong pictures of people of different orientations: a feminine gay man, a butch, short-haired lesbian, a seductive bisexual woman or a “bisexual” man who is afraid to come out as gay and finally a sad asexual girl who spends her free time at parties in the corner reading a book. Obviously, some of the stereotypes do occur but the fact that a man is more “feminine” does not make him gay. You will find more information below →

Gender Expression.

Gender Identity is the way that people perceive their gender. Our world is still mostly binary, i.e., people are assigned male or female at birth mostly based on their → **Sex Characteristics**. Keep in mind that gender identity is in the brain and not below the belt.

Gender Expression is often imposed by the predominant culture. Boys are to be dressed in blue, girls - in pink. Gender expression is the way that people dress, whether they wear make-up or not or if their hair is short or long. None of these really determine their → **Sexual Orientation** nor their → **Gender Identity**.



Sex Characteristics is a term that describes the physical (chromosomal, gonadal and anatomical) features of a person; they include primary characteristics (genitalia and reproductive organs), chromosomal structures and hormones and secondary characteristics (breasts, muscle mass, hair distribution). Sex Characteristics do not determine someone's → **Gender Identity** or → **Sexual Orientation**.

This information is crucial when you start mapping the needs and potential risks; both are multi-faceted and need to be taken into consideration when you work with LGBTQIAP refugees. In the previous chapters (L, G, B+, T and nonbinary, I and A+) you can find useful information about all specific needs and potential risks. Make sure that the staff responsible for dealing with LGBRQIAP refugees has undergone training related to all of the issues.

Stepping out of the cis-binary system

It is crucial to think out of the cis-heteronormative mindset. In a shelter where thousands of people are staying, these measures must be applied according to the gender marker in their documents, both when it comes to staff as well as the refugees. People are not only put at risk of ("reparatory" rape, sexual harassment, (bullying) but they are also often misgendered and their needs are overlooked.



The measures result in exclusion not only of trans and non-binary beneficiaries but they also put gays, lesbians, bi+, intersex and asexual persons at a great risk since their gender identity and/ or sexual/ romantic orientation make them extremely vulnerable in places where such measures are implemented solely on the basis of the sex marked in their documents.

For instance, it might be extremely uncomfortable for a gay man to report a case of abuse to a male staff worker; homosexual and bisexual men and women often become the objects of ridicule, hence they might not be willing to report acts of sexual violence to the person who has been assigned to that particular position. Thus, it is crucial to give people alternatives as well as train all staff members on LGBTQIAP-related issues. Every person working with refugees should undergo sensibility training and be aware of the fact that not all beneficiaries can be treated the same way and that an individual approach is mandatory. Survivors cannot be re-victimized due to staff members' lack of proper knowledge.

Risks

Refugees often come from countries where LGBTQIAP rights are violated or are simply nonexistent. A lack of knowledge and awareness within the group of beneficiaries is simply a consequence of a queerphobic environment where they lived most of their lives. In a number of states it is still fully acceptable to make



jokes about queer people and humiliate them in public using slurs.

Placing a large number of people brought up in places like these in support and housing facilities will always end up in fights for benefits and queer persons will most often lose in such circumstances. For obvious reasons it is impossible to educate all beneficiaries on human rights particularly when acts of violence towards weaker persons often binds the more privileged ones; that is why the team has to react promptly when any case of homo-, bi-, trans-, enby-, inter- and ace-phobia occur. Inform all beneficiaries right from day one that such behavior will not be tolerated and explain them what measures will be taken once such a violent act takes place. Do not hesitate when you witness a situation when a queer person becomes a victim, even if it seems a “harmless” joke. Ignoring such “mild” acts will be a clear sign to other beneficiaries that it is acceptable to bully others and it will soon escalate in more brutal behavior.

Good Practices

It is impossible to completely eliminate risk though there are methods that can lower the number of acts of abuse and misconduct, e.g.:

1. Create awareness: Make sure to train all staff members on LGBTQIAP-related issues. Find a local



LGBTQIAP organization that will help you to prepare and conduct such training. Possibly look for an organization that has experience in reaching out to queer refugees,

2. Cooperate: Hire a psychologist who works with LGBTQIAP clients. Having a specialist with expertise in your team will ensure that queer beneficiaries receive necessary support. General psychologists often lack knowledge in terms of the specificities of LGBTQIAP issues and can even worsen their clients' situation,

3. Update: Make sure that the whole staff is trained. When you hire new team members, make sure that they receive the same training as the rest of the employees,

4. Expand: you will start with a general workshop devoted to basic LGBTQIAP issues. Make sure to broaden your staff awareness through more specific training on gender identities, inclusive language and other issues regarding the queer community,

5. Listen: Leave your prejudice and disinformation behind. Rely on the knowledge and information you receive from seasoned LGBTQIAP activists,

6. Support: Support and encourage other staff members to help creating a more inclusive space,

7. React: React in situations where others make jokes about queer persons. Report those acts to the



right authorities and ensure that such behavior is not accepted in your organization. Microaggression in the form of allegedly “harmless” jokes leads to acts of violence faster than you can imagine! Try to implement a zero-tolerance for hate speech,

8. Know your privilege: Being a cis-heteronormative person automatically puts you in a higher position; be aware of this privilege and use it to help those who lack it.

9. Show your support: It is always good to place a rainbow sticker/ badge in order to show queer beneficiaries that they can trust the place where they are staying.

Visibility

The acts of violence that are not reported immediately are easily forgotten. Make sure that beneficiaries are well informed where and to whom they can report. Remember to provide them with multiple opportunities of reporting, including an “anonymous path”. Place leaflets and posters in various languages all over your facility. Placing a rainbow sign on the materials will be an additional sign that queer people are protected. You can choose a team member who will wear a rainbow badge as a clear sign that they are an LGBTQIAP-ally and will react appropriately to the situation.



C. BACKLASH TARGETING LGBTQIAP MIGRANT AND REFUGEE COMMUNITIES

The backlash targeting the LGBTQIAP community can be observed in many parts of the world. It varies in intensity as in some countries it is more harmful whereas in others slightly less.

The rainbow community is portrayed as a threat to "traditional" families and children in particular (e.g., creating a narrative about the allegedly common pedophilia among homosexual men), the legal order or more ambiguously a general threat to society.⁴ These narratives are particularly common in countries where religion (of any kind) is merged with politics.

Religious leaders possessing power to influence politicians and society often express their opinions and views without slightest inhibitions.⁵ The assault on the LGBTQIAP community is closely related to the discourse of "gender ideology", i.e.,

⁴ <https://globalphilanthropyproject.org/wp-content/uploads/2021/04/Manufacturing-Moral-Panic-Report.pdf> access on March 2nd, 2024

⁵ <https://globalphilanthropyproject.org/2018/11/04/religious-conservatism-on-the-global-stage-threats-and-challenges-for-lgbti-rights/> access on March 1st, 2024



questioning, taking away and limiting women's rights and reproductive rights.⁶ The dynamics and rhetoric of these and LGBTQIAIP-phobia are identical. Based on a fear and potential threat to others the established status quo of may be a strong tool to change political and social moods. An additional aspect is disinformation, which plays a particularly important role in places where media have limited freedom to present impartial coverage while at the same time being an effective and well-paid propaganda mouthpiece for politicians or other entities interested in dividing societies and reshaping social moods targeting a specific group.

These rhetoric and dynamics take place all around the world, they are not restricted to a specific country or region. Creating such a message and spreading it requires a lot of time, media access, complicity of politicians and decision-makers and last but not least, big money, completely incomparable to the funds available to LGBTQAIP organizations. Therefore, all attempts to limit or stop them entirely have proved to be an extremely arduous and unequal fight.

The struggle against equal rights usually run in parallel with varying degrees of intensity and fake threats spread easily not

⁶ <https://english.elpais.com/international/2023-06-28/the-world-wide-offensive-against-the-rights-of-lgbtq-people.html#> access on March 1st, 2024



only through traditional media outlets but especially in social media.

The LGBTQIAP community has been a relatively easy target for decades, sexual orientations other than heterosexuality and gender identities other than cisgender have been defined as "other", "different", "sick", "disordered" or "deviant". Homosexuality was removed from the WHO's International Classification of Diseases (ICD) only in 1990 but in a number of countries it is still punishable by death or imprisonment.

Anti-immigrant and anti-refugee sentiments and narratives do not differ significantly from those previously mentioned. They are all based on inciting the feeling of threat, otherness and irreconcilable differences in relation to general society.

Creating the need to defend what is "ours" and is allegedly endangered has been a powerful political weapon, eagerly used especially in election campaigns. This is an exceptionally powerful narrative often publicized by various media outlet.

People arriving in a given location have limited or no knowledge of the actual socio-political situation in the new country or region that can be perceived from the outside as friendly, accepting and safe. In many cases the situation in a given place is not a "for" or "against" factor, but only the chance of saving life and/or health.



Having had traumatic and difficult experiences in their own country and having experienced war trauma, it can be extremely difficult for many people within the LGBTQIAP community to talk about their sexual orientation and/or gender identity. This will often require patience, building trust and a sense of security and stability.

Potential risks:

- anti-immigrant and anti-refugee attitudes that may appear before the first people arrive in a specific area
- lack of knowledge of the organization/ agency employees about the local context
- lack of knowledge of the organization/ agency employees about the context of the country of arrival of a given person/ group
- lack of interdisciplinary and multi-level approach
- lack of awareness of the connection between sexual orientation and/or gender identity and a refugee status
- insufficient legal knowledge in relation with the above
- lack of awareness and sensitivity to the medical and health-related needs of specific groups (described in other chapters)
- lack or insufficient cooperation and lack of building relationships with local authorities



- insufficient integration (or lack thereof) with local society
- presence of far-right and nationalist organizations or groups (or not knowing whether they are present) in the area
- lack of willingness to cooperate on the part of the law enforcement institutions.

Recommendations and good practices

Local context: fear of newcomers and the feeling that they pose a threat may occur even in the most open community. Therefore, it is worth building relationships with the local community, authorities and, if possible, religious representatives right from the start. LGBTQIAP people with refugee experience may need interdisciplinary, customized assistance, a variety of resources and time. As mentioned in the previous chapters, for many people in this community the need to belong and be within their own social group is paramount. Therefore, it is crucial to integrate with the people who came to the particular location before and with the local LGBTQIAP community.

Collaborating with local LGBTQIAP organizations may be extremely helpful not only in building a sense of belonging but also in finding health professionals, who will be qualified to address the specific health needs of LGBTQIAP persons. Numerous organizations cooperate with psychologists and consultants to whom such a person may be referred if we do not have our



own resources to provide psychological assistance and/or counseling.

Establishing cooperation is also an opportunity to expand skills of our team and open space for deeper collaboration. The organizations can also be allies and support advocacy work at the local level.

Law enforcement is often not very willing to cooperate, which can play a part when a hateful incident occurs, particularly if there are no hate crimes regulations or the premises of gender identity and sexual orientation are not included into the local law.

In case the services refuse to report such an incident or there is no legal opportunity to do so (e.g., battering will be considered a "standard" beating, not related to the victim's sexual orientation or gender identity), it is worth (with the informed consent of the person who has experienced it)) reporting the incident to an organization that monitors hate crimes and incidents, such as the Organization for Security and Co-operation in Europe (OSCE).

National and regional context

You ought to represent expertise not only in refugee policies and legal provisions related to the social group but also of the realities of the LGBTQIAP community.



Ilga-Europe annually publishes the "Rainbow Map and Index"⁷ precisely describing the legal status of the rainbow communities in a given country in the European region. This is a useful tool for measuring potential risks, outlining legal options (e.g., legal gender recognition, recognition of same-sex relationships and marriages) but also gives us the opportunity to supervise specific procedures specific countries.

It is also worth paying attention the discourses and narratives described in the initial part of the chapter. They may impact existing opportunities and the performance of activities as well as reveal how the community described in this manual will be or may be portrayed in various media outlets and by politicians

⁷ <https://www.ilga-europe.org/report/rainbow-europe-2023/> access on March 1st, 2024





**ESTABLISHING A SAFE SPACE:
GOOD PRACTICES FOR A MORE IN-
CLUSIVE ENVIRONMENT**



A. INTERVENTION HOUSING FOR LGBTQIAP REFUGEES

Introduction & context

Since the autumn of 2022, Lambda Warszawa has been operating an Intervention Housing project for LGBTQIAP refugees. Recognizing the significant influx of refugees due to the war in Ukraine, we launched a registration form for individuals who could offer temporary accommodation in their homes for those arriving in Poland. We verified potential hosts through meetings at our office, ensuring that refugees arriving in Warsaw could live in safe and secure conditions.

Despite a large response from allies, particularly in Warsaw, many of these stays were short-term. Therefore, with the help of international organizations, we were able to rent two large apartments that could safely house approximately 35 people simultaneously. This type of assistance is still available as it has proven to be effective. In this chapter, we would like to share key considerations for launching such a project.

Key Considerations for Intervention Housing Projects

1. Transparency with Landlords: From the beginning, it is crucial to be fully transparent with the landlord about the purpose of the rental and who will be residing



in the property. By playing fair, you can potentially secure a rental from someone who supports the community.

2. **Clear Housing Regulations:** It is essential to establish clear housing rules, outlining the terms of use and specifying the duration of stays. This ensures that all residents understand the guidelines and expectations.

3. **Safety and Privacy:** Ensure the housing provides a safe and private environment for LGBTQIAP individuals, who may be escaping persecution or trauma. This includes secure locks, private rooms if possible, and a supportive community atmosphere.

4. **Support Services:** Provide access to comprehensive support services, including psychological counseling, legal aid, and healthcare. Many LGBTQIAP refugees may have specific needs related to their experiences of discrimination and trauma.

5. **Community Integration:** Facilitate the integration of residents into the local LGBTQIAP community and broader society. This can include language classes, cultural orientation, and social activities that promote a sense of belonging and community support.

6. **Inclusive Policies:** Ensure that all housing policies and practices are inclusive and respectful of di-



verse identities and experiences. This includes recognizing and accommodating the needs of non-binary and transgender individuals.

7. Confidentiality: Maintain strict confidentiality regarding the identities and backgrounds of residents to protect them from potential threats or discrimination. This is especially important for individuals who may be at risk of persecution.

8. Feedback Mechanisms: Implement mechanisms for residents to provide feedback and report issues or concerns. This helps ensure that the housing environment remains safe, supportive, and responsive to the needs of its inhabitants.

9. Training for Staff and Volunteers: Provide thorough training for all staff and volunteers on LGBTQIAP issues, trauma-informed care, and cultural sensitivity. This ensures that those supporting the residents are well-equipped to meet their needs.

10. Partnerships and Networking: Establish partnerships with other organizations, both local and international, to enhance the support network available to residents. Collaborations can provide additional resources and expertise, benefiting the overall project.

Conclusion



By adhering to these key principles and practices, intervention housing projects can provide a vital lifeline for LGBTQIAP refugees, offering them safety, stability, and support as they rebuild their lives. Lambda Warszawa's experience demonstrates the importance and effectiveness of such initiatives, highlighting the need for continued and expanded efforts in this area.



B. ACTIVIST TRIPS DEDICATED TO LGBTQIAP REFUGEES FROM UKRAINE

Introduction

Activist trips are not only a perfect opportunity to engage in human rights activities but also a form of support of and solidarity with LGBTQIAP refugees from Ukraine. For those who are in a distressful situation (war trauma, PTSD, forced relocation) and persecution due to their sexual orientation and/or gender identity, participation in such an endeavor may be a chance to experience a sense of stability, security and belonging to their social group and community. In this chapter you will find out how to prepare for such an event, what the best practices are and what potential issues and challenges to pay attention to.

Preparations before the event:

1. Consultations and Psychological Support:

Providing participants with access to consultations and psychological support before departure is crucial to help them deal with potential difficulties in adaptation and overwhelming emotions related to previous, pre-war experiences and find their way in an (often) new group. Psychological support plays a key role in preparing participants for action because it allows them to understand their own emotions and reactions in various situations, which can be helpful in coping with potential stress and



trauma of their refugee status as well as sexual orientation, gender identity and sex characteristics persecution.

2. Safety Training before departure:

Organization of safety training, including a discussion of the procedures to be followed in emergency situations and provision of appropriate protection measures during the trip. The safety of the participants is a top priority when planning and organizing activities. Safety training should cover topics such as potential threat recognition, preventive measures and procedures for dealing with crisis situations.

3. Rules applicable when traveling and Contract

Drawing up a contract, rules and regulations applicable to participants ensures clarity and gives the opportunity to refer to the rules previously agreed upon by the entire group in case any violation occurs. It is worth taking into consideration that participants may include, among others: young people who ought to become familiar with the rules that they should follow for their own safety and that will provide them with a sense of security (physical and mental). It is highly recommended that all participants pay attention to:

- being introduced to the group's advisors and team members as persons whose instructions ought to be abided by and to whom they can always turn to



- Defining clear rules for staying in the place where the group will be accommodated

- Rule of not moving away from the group, informing team members about a need to move away and obtaining consent to do so

- Presentation of the agenda (meetings, workshops, activities) on each day

Recommended contract points:

- Establishing the rules of cooperation and appointing persons in charge of particular activities and those to whom you ought to reach out to in emergency situations or when making a request for consent or when reporting communication obstacles within the group or a need for psychological counseling

- Defining clear rules for staying at the place of the event (both during organized activities and free time) and establishing a daily schedule

- Principle of speaking to others with respect and non-judgmental manner

- Principle of confidentiality

- Assumption of good will

- Consent to making mistakes (mainly regarding communication)



- Each person participates in a particular activity to the extent that is suitable for them ("it's ok to pass" principle)
- Speaking only for yourself and about yourself
- No consent to any form of violence (mental, physical or sexual)

4. Contact with Local Organizations:

Establishing contact with local LGBT organizations and groups on the spot to become familiar with the socio-political outlook and needs of the local community is crucial. The cooperation with local organizations is significant to effectively carry out such activities and support the LGBT community in a certain region. Not only can local organizations provide valuable information and support but also help establish contacts with community leaders, organize meetings and events and provide opportunities for integration and exchange of experiences.

During the event:

1. Support for Participants:

Providing available psychological and logistical support for the participants to enhance efficiency and ensure safety. During an event participants may encounter hardships and challenges, which makes it crucial to provide them access to support and assistance at all times. Both psychological and logistical support are high priority in ensuring that participants feel safe and comfortable.



2. Training and Workshops:

Organization of training and workshops regarding human rights, social activism, communication to enable participants to act effectively in the field. Training and workshops are an important preparatory element for the trip participants in fostering the performance of activist activities and work for human rights causes. Providing participants with appropriate skills and knowledge can significantly boost the efficacy of activities and improve comfort, while safety strengthens their confidence and self-determination.

3. Leisure and Entertainment Activities:

Encouraging participants to engage in recreational activities such as hiking, visiting local tourist highlights aims to offer them some rest, a relaxation and positive experiences within their social group. Spending time in an informal atmosphere is pivotal in maintaining well-being, enabling participants to take a break from social activism and in integration.

4. Cooperation with the Local Media and Community:

Establishing contact with local media outlets and community in order to promote activities and initiatives and build social awareness and acceptance. The local media outlets and the whole community can foster the visibility and impact of activism as well as build positive relations and strengthen social support for it.



After returning:

1. Activities Analysis:

Conducting an evaluation of the activities undertaken during the trip and identifying areas for further development and improvement is crucial for the prep team. It ought to provide valuable feedback and tips for the future with the aim of improving the execution of activities tailored for activists and the organization of similar actions and campaigns.

A joint evaluation for participants will offer them a sense of being an integral part of the group and will be the closing point of the process.

2. After return:

Providing psychological and social re-adaptation support to participants upon return in order to foster their adaptation to everyday life and reflect on their trip experiences is a key element... Returning to everyday life after such an intense period of learning, being part of the group may be challenging and may require additional support. It is vital that participants have the opportunity to share their experiences and feelings and to receive help when needed.

3. Continuation of Activist Activities:

Support for continuation of activist activities after return through participation in local social initiatives, campaigns and



projects related to human rights and equality. It gives an opportunity for further activist development, a sense of positive control, influence and sense of being part of the community. Returning from an activist gathering does not mean the end of involvement for the participants. On the contrary, it is time to continue the intended activities using the knowledge and experience gained in the trip and engage in new activities.

Potential Problems and Challenges:

1. Security and possible threats:

Taking into consideration potential threats to the safety of participants and applying precautionary measures to minimize possible risks. Participants' safety should be the top priority when planning and implementing activist trips. You ought to be aware of various threats, such as physical aggression, cyberbullying, hate speech, discrimination, and potential hateful incidents. It is vital to establish appropriate procedures in advance, such as a reporting procedure – internal, external (including the use of the Istanbul Convention if it is ratified in a specific country).

2. Language and Cultural Barriers:

Providing participants with appropriate tools for efficient communication in their destination and the awareness of cultural and social differences (it is worth focusing on it during the



trip planning phase). Linguistic and cultural barriers may constitute an obstacle in effective performance and communication in a foreign environment. It is therefore important that participants are prepared to deal with these challenges and have support in case a problem occurs.

3. Possible public Response:

Preparation and awareness of a variety of social responses, including hateful incidents, both in terms of gender identity and psychosexual orientation and sex characteristics as well as the provision of psychological assistance for participants when confronted with discrimination or hostility. Activist activities are often met with resistance and misunderstanding from the local society and may even create a sense of disruption of social norms. The emphasis ought to be put on being prepared for various reactions and being able to respond effectively and deal with troublesome situations.

Why is this Group Particularly Sensitive:

LGBT refugees from Ukraine have often experienced trauma related to both war and persecution due to their gender identity, psychosexual orientation and sex characteristics. Therefore, during activist events, special care ought to be taken to ensure their emotional and physical safety. The social context in which the activities take place also ought to be taken into account. For plenty of the participants getting involved in the trips may not only be an opportunity to work in the area of human rights but it



may also be a way to rebuild a sense of normality and belonging to the community. Gaining support and enabling participation in activist activities can help them integrate and feel accepted and equal as well as finding their place in the society in which they are currently living.

Summary

Activist trips of LGBT refugees from Ukraine are not only a form of support for the LGBTQ+ community and activities committed to human rights causes but also an opportunity to regain stability and feel a part of the community and society as a whole.

For those who have experienced war and persecution traumas the participation in the trips can be a sign of hope and solidarity. However, for such a trip to be successful and safe, it is necessary to prepare properly taking into account potential threats and provide psychological and logistical support.

When organizing such an event, it is essential to remember to consult local organizations, conduct safety training and be aware of potential issues and challenges. It is also important to provide support to participants before, during and after the trip to enable them to act effectively and support them when facing difficulties.

For LGBT refugees from Ukraine, activist trips can be not only a form of social involvement, but also a way to build a sense of normality and acceptance. Therefore, a continuous



development after return and support related to integration and adaptation processes are as important as participation itself.

By continuing activist activities and building relationships with local communities, participants can influence social change and promote the values of equality and respect for all people, regardless of their sexual orientation, gender identity and sex characteristics, discrimination or hostility. Activism is often met with resistance and misunderstanding from society and/ or local communities. It is worth being prepared for various reactions and being able to respond effectively and deal with difficult situations on the spot and afterwards.

C. INTEGRATION CENTRE FOR QUEER REFUGEES AND THE LOCAL COMMUNITY

Introduction & context

Our support for LGBTQIAP refugees has always been highly appreciated by our beneficiaries – contrary to many members of the local queer community. In the beginning of our work with refugees, the Polish community was very supportive; we had many volunteers, who helped us with a wide range of chores. Later on, as Russia's full-scale invasion on Ukraine continued, we started receiving emails asking, why we still put such a high focus on refugees, instead of delivering services to locals. In the beginning we were stunned by such an approach, but after a few deeper thoughts, we knew, that we had to start creating and implementing integrational procedures.



The idea of the Community Centre is to facilitate the integration of queer refugees into the local LGBTQIAP community and broader society. This can include language classes, cultural orientation, and social activities that promote a sense of belonging and community support.

Key Considerations for the Community Centre

1. Transparency with Landlords: Exactly, as it with housing: from the beginning, it is crucial to be fully transparent with the landlord about the purpose of the rental and who will be residing in the property. By playing fair, you can potentially secure a rental from someone who supports the community and at the same time eliminate those options, in which the landlord would turn out to be queerphobic.

2. Trainings for facilitators: Remember, that facilitators must undergo trainings on:

- Teamwork,
- GBV,
- Safeguarding,
- Preventing and solving conflicts and
- LGBTQIAP issues.

The fact, that someone is a member of the LGBTQIAP community doesn't necessarily mean, that they are aware of the meaning of the whole acronym.



The facilitator has also to be aware of how to use the right pronouns.

3. Clear Centre Regulations: It is essential to establish clear rules, outlining the terms of use and specifying the opening hours. This ensures that all beneficiaries understand the guidelines and rules, which will result in understanding and will help you create a place, where everyone is aware of the code of conduct. Be flexible, when it comes to opening hours: keep in mind, that many visitors work part- or full-time and can join after 5:00pm or even later.

4. Approach: Take into consideration, that you will have clients with completely different backgrounds; some will be war survivors, whereas others – members of the local community; some will be very open and talkative, whereas others will just want to sit quietly in the corner and have a cup of coffee. Don't force visitors to take part in activities – the idea of the Community Centre is a safe space where no one is forced or over-enthusiastically “encouraged” to be active during various happenings.

5. Support Services: Many LGBTQIAP refugees may have specific needs related to their experiences of discrimination and trauma, very often connected to their sexual/romantic orientation, gender identity and/or ex-



pression. Provide information on comprehensive support services, including psychological counseling, legal aid, and healthcare. Those services do not necessarily have to be held at the Community Centre – a much better solution is to have them somewhere else, but information should be provided in all premises. Put out leaflets, hang up posters and keep the staff updated on different opportunities.

6. Reporting opportunities: Ensure that all housing policies and practices are inclusive and respectful of diverse identities and experiences. This includes recognizing and accommodating the needs of non-binary and transgender individuals.

7. Confidentiality: Maintain strict confidentiality regarding the identities and backgrounds of residents to protect them from potential threats or discrimination. This is especially important for individuals who may be at risk of persecution.

8. Feedback Mechanisms: Implement mechanisms for beneficiaries to provide feedback and report issues or concerns. You can use the same tool as you do for housing, but make sure, that clients of the Centre have the opportunity to choose, which services they benefit from.

9. Think “out-of-the-box”: An evening with boardgames? Great! But have you ever thought of



combining this activity with a discussion about job opportunities in the neighborhood? Beneficiaries choose those services, which are more “attractive” – an evening with friends is much more desired, than a “boring” workshop – this is exactly the place, where you can step in and provide them with important information!

10. Partnerships and Networking: Establish partnerships with other organizations, both local and international, to enhance the support network available to beneficiaries. Collaborations can provide additional resources and expertise, benefiting the overall project. You can also look for funding for the Community Centre reaching out to more than one donor.

Conclusion

Make sure, that the Community Centre is not only an attractive, but foremost a SAFE space for visitors. Try to integrate the local and the refugee community – there will be language barriers, but you can overcome them either by providing translation or by choosing activities, which do not involve the knowledge of a foreign language (boardgames, charades, etc.). Don't stick to the facility itself – try out outdoor activities, where the Community Centre only serves as a meeting point. Make sure, that such information (in cases, when the Centre will be closed) is provided at least two weeks in advance. Visitors should be informed about such activities not only by the facilitator – our Community



Centre has its own group on Telegram - a very popular communicator among Ukrainians – where the schedule is always available and easily accessible by all the contestants. Such a form of communication also helps the beneficiaries to stay in touch with each other and contributes to building an international community.

Don't get discouraged by a little frequency of visitors in the beginning – our Centre has grown enormously after 6 months, mostly due to word of mouth.



NOTES



NOTES

Julia Kata (she/her) (*1985). She is a psychologist undergoing training as a mediator.

She has been working with the transgender and non-binary community for over a decade. In 2016-17 she was a member of the IGLYO Executive Board. She has co-authored scientific research, reports and educational brochures. She runs support groups for communities from all over Poland. She conducts training on transgender rights and issues as well as inclusive language training for educational institutions, companies, healthcare professionals and students. Since February 2022 she has been supporting refugees at the LGBTQIAP Refugee Center run by Lambda Warszawa Association as an expert in trans and non-binary issues.

Paweł Mamzer (he/him) (*1988) He is the Vice-President of the Board at Lambda Warszawa Association, where he has been employed since 2021. He has been a Coordinator of aid projects and a co-founder of the Support Center for people with refugee experience in the LGBTQIAP community. He has also co-founded Warsaw QueerWeek. QueerWeek includes various activities, such as meetings, discussions, workshops, exhibitions, concerts, parties and many other events related to LGBTQIA+ culture and rights, leading up to the Equality Parade in Warsaw. He is an initiator of educational campaigns related to HIV/AIDS as well as a future clinical psychologist.

Paweł Porzeziński (he/him) (*1997) He is the Assistant of the Board and organizer of integration trips at Lambda Warszawa Association. He used to work for the offices of the municipality of Warsaw. He has been involved in Lambda Warszawa since 2022, he assists the Board in various ventures related to refugee projects and works as an accounting and finance expert, responsible for financial settlements of international grants. A future psychologist.

Miłosz Przepiórkowski (he/him) (*1979) He is the President of the Board at Lambda Warszawa Association, where he is responsible for corporate training, international projects, fundraising and PR activities and a co-creator of the Warsaw QueerWeek. He has been working at Lambda Warszawa Association since 2018. A co-creator of the Help Center for LGBTQIA+ refugees and advocate for people under the so-called Bi+ umbrella. A co-author of "Kropka nad Bi" ("Visi-Bi-Lity"), the first publication in Central-Eastern Europe fully devoted to the Bi+ community. Graduate of the US Congress Office "Open World" program, a mentor appointed by the US Embassy in Warsaw.

Can we really treat everyone equally? Living in a world full of diversity we often forget about those who are discriminated against because of their skin color, religion, sexual/ romantic orientation or gender identity.

In this toolkit we collected the most important information that will help you identify risks and prevent harmful situations while working with LGBTQIAP refugees.