

"Let me be me!"

BETTER CARE FOR LGBTI* CHILDREN

A Working Paper for iNGOs



Imprint

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Ise Bosch, Dreilinden gGmbH

Preface



Dreilinden is happy to present the first working paper on improving practice regarding LGBTI* children in care. Last year's issue paper ("Skirt? Nope, not for me! Sexual and gender self-determination for children and youth in alternative care settings") presented results of a one day **Rainbow Philanthropy Conference in 2015**. That meeting was characterised by a real eagerness to get going: to identify promising practice, reflect bad practice, to consider the theory and the legal contexts, but most of all to find ways how to live up to human rights requirements and professional care standards in this laggard field of work.

But even if we had all the energy needed in 2015, we lacked a critical mass of representatives of relevant stakeholders to get momentum. So we re-grouped, together with SOS Children's Villages International. We produced the mentioned above issue paper to make sure the strong beginnings were preserved, and pursued a highly pro-active invitation strategy for the **repeat conference in November 2016**.

What you have in front of you is one of the results of that conference.

We thank everyone involved in this effort, especially Eva-Maria Hilgarth, who coordinated the conference and also this paper, as well as our publication partners SOS Children's Villages International and Keeping Children Safe. Dreilinden could never have done this alone. We thank everyone who came, and was willing to contribute to this paper (including Imke Schmidt-Sàri, our illustrator!).

The paper puts together texts from around the world, exposing readers to a variety of formats, pace, and writing styles. It contains three sections:

Research and tools: the legal human rights context, kindly supported by Kirsten Sandberg; results from Keeping Children Safe's survey on institutional readiness

of 150 organisations in international child care from January 2017; and workshop results from last year's Rainbow Philanthropy Conference - in the form of notes, intending to capture in some detail what emerged during the conference.

An incredible set of interviews, five of which with young people who, as children, have been in alternative care - three lesbian, one gay, one transgender -, an interview with a training coordinator who works with caregivers, and one with Save the Children in Vietnam on their programme with LGBT street youth and parents of LGBT children and youth. Tremendous thanks to those interviewed, and especially Amani Njogu who took the initiative and used personal connections to collect precious insights.

Last but not least, we have promising practice examples from Save the Children in Vietnam and SOS Children's Villages International in Argentina, as well as SOS' response to a case of staff discrimination in Tunisia.

A note regarding the "I" (for "intersex") in the LGBTI* acronym: This paper looks at a new field of work. Yes, intersex issues differ greatly from sexual orientation and gender identity issues. Key terms here are sex characteristics and bodily integrity - not sexual orientation, not even necessarily gender identity. However, many of the people who have worked on this paper feel strongly that intersex issues should be part of the conversation from the start. In cases where we include the "I", even without being able to demonstrate specific intersex expertise, it is with this intent.

We now dare to call this a working paper. We have drilled down deeply enough to show a landscape of what could, and should, be done. The hope is, of course, that this landscape has fertile soil, and good things grow from it, speedily and sustainably. Gender non-conforming children and youth need to receive better professional care.

Ise Bosch, Dreilinden gGmbH

Eva-Maria Hilgarth, for Dreilinden gGmbH

LGBTI Rights are Children's Rights

ARE LGBTI CHILDREN INCLUDED IN THE UN CONVENTION ON THE RIGHTS OF THE CHILD? A SUMMARY OF KIRSTEN SANDBERG'S ANALYSIS



LGBTI rights are human rights – at least according to the UN Human Rights Council. But do these also apply to children? Do minors, people aged younger than 18 years, have the same rights as adults to self-determine sexual orientation, gender identity and gender expression? The human rights of children are defined by the UN Convention on the Rights of the Child (CRC)¹. Ratified by nearly all states, the CRC is a strong instrument. Albeit SOGIE is not explicitly mentioned in the treaty, the question to be scrutinised is whether CRC also includes LGBTI children. Kirsten Sandberg shows in her 2015 paper 'The Rights of LGBTI Children under the Convention on the Rights of the Child'^{2*} why queer kids are also protected under this treaty. This article summarises her findings, provides powerful tools to support LGBTI children in their everyday struggle, and emphasises that children do have the right to self-determine sexual orientation and gender identity/expression.

The CRC and LGBTI children?

The United Nations Convention on the Rights of the Child is a treaty framing the human rights of children. It came into force in 1990, and currently 196 states are party to it, including every UN member country except the USA. Nations that have ratified the CRC are bound to it by international law. The CRC consists of 54 articles, and was expanded three times via optional protocols.³ Compliance is monitored by the UN Committee on the Rights of the Child. The Committee is composed of 18 independent experts from all over the world. Kirsten Sandberg, author of the paper presented in this article, has been one of them since 2011. In addition, the Committee is advised by UNICEF, national human rights organisations and NGOs. States who have ratified the Convention have to submit a report to the Committee every five years on what they have done to uphold children's rights. On the basis of the report and the information provided by UNICEF and the civil society organisations, the Committee holds a dialogue with the respective state. Afterwards, Concluding

Observations (CO) are issued to the state. Beyond single state assessment, the Committee also publishes General Comments (GC) on thematic topics which the Committee wants to clarify.⁴

In her paper, Sandberg highlights the CRC articles which strengthen the position of LGBTI youth and substantiates them by means of statements from the Committee. She identifies the following articles as being important for queer kids: The right to non-discrimination under article 2, the right to consideration of the child's best interest under article 3, the right to identity under article 8, the protection from violence under article 19, the respect for the views of the child under article 12, the right to privacy under article 16, and the right to health under article 24. Some of the articles apply to all LGBTI children. However, since issues of gender identity and gender expression concerning transgender and intersex children differ from issues of sexual orientation, Sandberg discusses them separately.



Articles of the CRC for LGBTI Children

LGBTI Children: Protection

Non-Discrimination (Article 2) and Protection from all Forms of Violence (Article 19)

Right to Non-Discrimination (Article 2)

CRC article 2 holds that state parties shall respect and ensure the rights in the Convention without discrimination of any kind, irrespective of the child's or the parents' or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status. Sandberg documents that the Committee has interpreted the expression 'other status' as including sexual orientation and gender identity several times.

General Comments mentioning sexual orientation are, among others, GC No 3 (2003, para 8) on HIV/AIDS, GC No 4 (2003, para 6, 30) on adolescent health and development and GC No 13 (2011, para 60, 72) on the right of the child to freedom from all forms of violence. In the latter, 'other status' includes gender identity. Increasingly, Concluding Observations are also referring to LGBTI. Sandberg's analysis of the year 2014 revealed six CO which mention LGBTI, which were those to Russia, Hungary, the Holy See, Kyrgyzstan, Portugal, and Venezuela. According to her, many more examples could be listed for 2015 and 2016.

Protection from Violence (Article 19)

CRC article 19 holds that states shall take all appropriate measures to protect children from violence, abuse and neglect by their parents or anyone else who looks after them. All children have the right to freedom from all forms of violence, including mental and sexual harassment.

LGBTI Children: Self-Determination

Right to Identity (Article 8), Right to Privacy (Article 16), and Respect for the Views of the Child (Article 12)

The Right to Identity (Article 8)

Article 8 calls upon states to respect the right of children to preserve their identity, including nationality, name and

family relations as recognised by law without unlawful interference. Gender identity and sexual orientation are not explicitly mentioned in this article. But is identity only restricted to the determinants nationality, name and family relations? Or is it rather the whole sum of properties and qualities distinguishing us one from another that add up to the individual sense of self? If this is true, as Sandberg argues, sexual orientation and gender identity would clearly be part of identity. And indeed, Sandberg finds that in GC 14 (2013, para 55, on best interest) sexual orientation is one of the things ascribed to identity. Hopefully, it will only be a matter of time until gender identity and expression will be mentioned explicitly in this context. In literature on children's rights all kinds of SOGIE are perceived to fall under article 8. There is no scientific evidence why transgender or intersex children should be treated differently than cisgender children.

Self-Determination of Sexual Orientation (Article 8, Article 12, Article 16)

Even though the CRC does not grant children the right to self-determination, article 12 demands that their views have to be respected and heard. The child's view has to be brought in and given due weight in decisions affecting the child. Furthermore, Sandberg explicates that sexual orientation, meaning all kinds of sexual orientation, is not a decision, but, part of identity. Thus, she holds that the right to sexual orientation and all consequent decisions (choice of partner, vision of life etc.) is included in the right to identity (article 8). Also under article 16, children are protected from arbitrary and unlawful interference with their privacy and from attacks on their honour and reputation. As sexual orientation is a private matter, it is covered by this article.

Self-Determination of Gender Identity (Article 8, Article 12, Article 16)

Sandberg's line of arguments for self-determination of gender identity and gender expression is the same as for sexual orientation: The right to identity (article 8), the right to have their views respected (article 12) and



the right to privacy (article 16) support LGBTI children to self-determine and express their gender identity.

Since article 8 grants the right to preserve one's identity, one might argue that sex reassignment procedures have nothing to do with identity preservation. But Sandberg points out that the need for physical change only follows the gender identity that has already been established. That is why sex reassignment surgery is also called gender confirmation surgery. The states' duty is to preserve the child's identity by, for example, providing a birth certificate. According to Sandberg, this also includes the positive obligation to adjust the gender registry; and probably also to provide a third registry option besides male and female. But this issue is outside the scope of Sandberg's paper as it is a wider question which is as relevant to non-binary adults as well.

Transgender Children: A Right to Medical Treatment?

Respect for the Views of the Child (Article 12) & Right to Privacy (Article 16) & Right to Health (Article 24)

Right to Medical Intervention? (Article 24)

Whether or not transgender children have the right to not only get their legal gender changed, but also to receive, if they choose, gender confirmation treatment and surgery, is a question Sandberg has not been able to fully affirm. According to her findings, the wording of article 24 is not very strong. Article 24 holds that states shall recognise the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. Further, they shall ensure the provision of necessary medical assistance and health care to all children; but to what extent is not clear. In GC 15 (2013, para 24, 25, on the child's rights to health) states are expected to provide health services to children to the maximum extent of their available resources (article 4). Sandberg concludes that in wealthy countries like Germany or Norway there

may be a general right to gender confirmation treatment and surgery.

Who Should Consent? (Article 12, Article 16)

Although CRC does not grant the right to self-determination, under article 12 and article 16 children's views must be heard and their privacy respected. Sandberg claims that in the case of far-reaching decisions, such as concerning gender identity, the child's view must not only be given great weight, but, veto power. In case parents and child do not agree, article 5 holds that states shall respect the responsibilities, rights, and duties of parents to provide, in a manner consistent with the evolving capacities of the child, appropriate direction and guidance to the child in exercising the rights in the Convention. With the child's maturing, the rights of the parents diminish. Sandberg cites GC 4 (2003, para 6) on adolescent health where the age limit for the child to decide independently on medical treatment should be less than 18 years. While a general procedure cannot be provided, Sandberg recommends that the responsibility for this serious and far-reaching decision should not be carried by the child alone until the child is mature enough to consent independently. Before that, the consent of the parents may be needed in addition to that of the child, with an exception to be made if the parents unreasonably withhold their consent.



Intersex Children: Protection against Unnecessary Medical Intervention and Self-Determination

Right to Best Interest (Article 3) & Right to Identity (Article 8) & Protection from all Forms of Violence (Article 19) & Respect for the Views of the Child (Article 12)

Genital Surgery of Intersex Children

Intersex children are born with a mix of sex characteristics (on a genetic, hormonal or anatomical level), some traditionally considered male, and some considered female. Thus, it is difficult at birth to assign a male or female gender. There is a great variety of intersex conditions. Sometimes it is only noticed in puberty or never in life at all. Intersex bodies are usually healthy. In a few cases, surgery to sustain physical health is necessary; for example to provide a urinary drainage opening or in case of acute tumor risk. However, due to psycho-social reasons and lack of knowledge, for decades, parents were, and still are, persuaded that normalising treatment is required to fit the child into the binary gender system. These cosmetic surgeries (amputation of enlarged clitorises, removal of testicles etc.) are often irreversible, expose children to repeated excessive genital examinations and other medical treatments, and can be considered as genital mutilation. It is well-documented that children suffer both physically and mentally from early genital surgery.⁵

The Right to Non-Intervention Until the Child Can Consent

According to Sandberg, intersex children have the right to non-intervention until they can consent, based on article 19, article 12, article 3 and article 8. If the intervention is not strictly medically necessary, doctors violate article 19 by ignoring the child's right to be protected against all forms of violence. Further, Sandberg suggests to suspend all unnecessary medical intervention until the children are capable to express their views after having understood everything the procedure entails (article 12). Given the extensive consequences of genital surgery, the treatment should not be carried out without the child's consent. Otherwise, article 3 on the best interest of the

child would be ignored, and the child's right to identity (article 8) would be violated.

The CRC Committee responded in its 2015 review of Switzerland's report by stating that intersex genital surgery can be viewed as a harmful practice, terming it 'intersex genital mutilation'. It recommended to guarantee bodily integrity, autonomy and self-determination to intersex children and to not expose them to unnecessary medical treatment.⁶ Further, the Committee recommended to Ireland in 2016 to investigate cases of intersex genital mutilation and to review the training of medical and psychological professionals on the consequences of unnecessary medical interventions.⁷

This article was written with the kind support of Kirsten Sandberg.

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¹Convention on the Rights of the Child (adopted 20 November 1989, entered into force 2 September 1990) 1577 UNTS 3 (CRC).

²Sandberg, K. (2015). The Rights of LGBTI Children under the Convention on the Rights of the Child, *Nordic Journal of Human Rights*, 33:4, 337-352

** All statements refer to this source and sources mentioned ibidem unless stated otherwise

³https://en.wikipedia.org/w/index.php?title=Convention_on_the_Rights_of_the_Child&oldid=771354555

⁴<http://www.ohchr.org/EN/HRBodies/CRC/Pages/CRCIntro.aspx>

⁵Carpenter, M. & Cabral, M. (2014). Intersex Issues in the International Classification of Diseases: a revision.

http://intersexday.org/wpcontent/uploads/2015/10/intersex_issues_in_the_international_classification_of_diseases-cabral-carpenter-2014.pdf

⁶UN Committee on the Rights of the Child, Concluding Observations: Switzerland, 26 February 2015, CRC /C/CHE/CO/2-4, para 42.

⁷UN Committee on the Rights of the Child, Concluding Observations: Ireland, 26 February 2015, CRC /C/IRL/CO/3-4, para 40.

Sarah Blakemore, Keeping Children Safe

Analysing Institutional Readiness

ASSESSING THE CAPACITY OF ORGANISATIONS WORLDWIDE TO SAFEGUARD LGBTI* CHILDREN

Promoting Child Safeguarding Standards: Keeping Children Safe

Keeping Children Safe is a global movement of organisations committed to child safeguarding and actively influencing others to adopt International Child Safeguarding Standards. The standards emphasise the key aspects of managing child safeguarding within an organisation. They describe the features, systems and processes that need to be in place to ensure that child safeguarding is fully and effectively embedded in organisations. They include:

Standard 1: Policy

The organisation sets clear policy that describes how it is committed to promoting the well-being of children, preventing abuse and creating a positive environment for children wherein their rights are upheld and they are treated with dignity and respect.

Standard 2: People

The organisation communicates clearly its commitments to keeping children safe and the responsibilities and expectations it places on staff and associates in particular, its partners - through relevant policies, procedures and guidance, and that staff and associates (and other relevant, including children) are supported in understanding and acting in line with these.

Standard 3: Procedures

The organisation implements a systematic process of planning and implementation of child safeguarding measures.

Standard 4: Accountability

The organisation has in place measures and mechanisms for monitoring and review of safeguarding measures and to ensure both upward and downward accountability in relation to child safeguarding.

General principles

The standards are based on the following set of principles:

- All children have equal rights to protection from harm.
- Everybody has a responsibility to support the protection of children.

- Organisations have a duty of care to children with whom they work, are in contact with, or who are affected by their work and operations.
- If organisations work with partners they have a responsibility to help partners meet the minimum requirements on protection.

All actions on child safeguarding are taken in the best interests of the child, which are paramount.

Assessing Institutional Readiness: Research and Findings

In February 2017 Keeping Children Safe undertook research with 150 organisations around the world using the International Child Safeguarding Standards as a framework to assess institutional readiness to safeguard LGBTI* children. This is a very under-researched area, with a large number of respondents communicating that their organisation either does not safeguard these children properly or, perhaps more worryingly, that they do not know if they do or not. Ninety-one per cent of respondents told us they would like guidance and support in this area.

As the topic of LGBTI* children is sensitive in many parts of the world, it is still very unclear what good practice, with relation to safeguarding LGBTI* children, looks like. A good amount of respondents can give examples of good safeguarding practice towards LGBTI* children within their organisation, for example,

'peer approach - to build capacity of local LGBT children's group to speak up for themselves.'*

'Providing space through suggestion boxes at organisational level for them to air their views and concerns and assuring them that all suggestions are treated in the strictest of confidence and that no discrimination of any form will be tolerated.'

'Whenever such children are identified we develop [a] specific "Individual Care Plan" for such children keeping in mind their individual need[s] and risks. We include them in our ongoing programmes and ensure that they are not bullied by other peers. Counselling supports are provided in case of emergency and we also provide them adequate health support.'

Still, fifty-one per cent cannot provide these examples. For each positive and useful example given there was another respondent who could not provide any example from within their organisation. There did, however, appear to be willingness from some respondents to learn more:

'I don't have any but would love to hear about examples.'

Forty-three per cent of respondents were KCS members before taking the survey and the subject matter undoubtedly attracted a disproportionate number of organisations that work specifically with LGBTI* children (eight

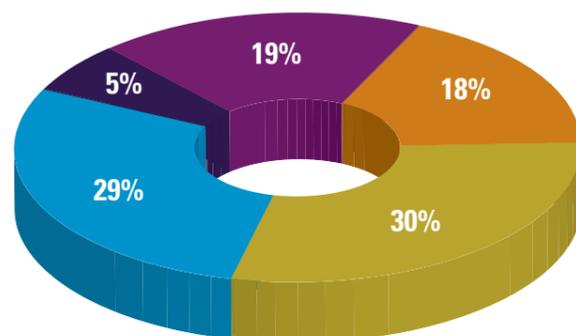
membership yields a more representative sample of the total population of organisations that work with children, and that the true statistic is likely closer to the percentage of KCS members. That would bring our estimate of the actual proportion of organisations with concerns about the safeguarding of LGBTI* children closer to thirty-eight.

Of the KCS members who responded, only twenty-four per cent were confident in saying that in their organisation, LGBTI* children were adequately safeguarded. If this is an indication of the general state of policy in this area, it is something that must be paid considerable attention. Twenty-nine per cent (fourty-six per cent KCS members)

Does Your Organisation work with LGBTI* children?

Answer Options

- Yes
- Yes, we run specific programs
- No
- I don't know
- We don't monitor



per cent of pre-existing KCS member respondents run specific programs for LGBTI* children, as opposed to twenty per cent of non-members). Twenty-five per cent of all respondents felt that LGBTI* children are not being adequately safeguarded by their organisation. Interestingly, twenty-eight per cent did not know whether they were adequately safeguarded or not – perhaps if a conversation is started on this topic this statistic could be lowered to gain a clearer picture with a smaller margin of error.

Regarding respondents' concerns if LGBTI* children were properly safeguarded within their organisations, KCS members and non-members answered differently. Almost twice as many KCS member respondents (thirty-eight per cent) said they did not feel LGBTI* children were being adequately safeguarded in their organisation, while only twenty-two per cent of KCS non-member respondents said so.

Assuming that those non-member organisations who took the trouble to respond were more likely to be already aware of LGBTI* issues, we also assume that KCS

of organisations stated that they do not monitor the LGBTI* status of children involved with their programs. It is probable that these figures are connected. In fact, only eighteen per cent of child rights organisations and only eight per cent of KCS member respondents stated that they run specific programs based around LGBTI* children.

According to the survey responses, sixty per cent of child safeguarding policies do not explicitly refer to the commitment to preventing harm to LGBTI* children, and sixty-three per cent of recruitment procedures do not assess prospective employees' attitudes towards safeguarding them. Thirty-eight per cent stated that lack of capacity played a part in preventing LGBTI* children from being adequately safeguarded. When combined with the fact that fifty-three per cent of respondents feel that their system for monitoring and reviewing safeguarding measures does not take into account the needs of LGBTI* children, these statistics paint a picture of millions of children who may be at risk by inadequate or non-existent safeguarding measures in the organisations that are supposed to serve them.

Question ● Yes ● No ● I don't know

Do you feel that LGBTI* children are adequately safeguarded in your organisation? 47% 25% 27%

Have any safeguarding concerns about an LGBTI* child been reported to your organisation? 35% 53% 12%

Do you have any concerns about how your organisation works with LGBTI* children? 34% 66%

Does your child safeguarding policy specifically mention how you are committed to preventing and responding to harm to LGBTI* children? 31% 59% 10%

Does your system for monitoring and reviewing safeguarding measure take into account the safeguarding needs of LGBTI* children? 32% 52% 16%

Does your organisation's reporting and responding process for safeguarding incidents and concerns address the needs of LGBTI* children? 40% 42% 19%

Does your code of conduct place clear responsibilities and expectations on staff around what is appropriate and inappropriate behaviour around LGBTI* children? 43% 51% 6%

Do your recruitment procedures assess attitudes to safeguarding LGBTI* children? 27% 63% 10%

Does staff training and induction on safeguarding ensure staff know what the organisation expects of them in terms of safeguarding LGBTI* children and what to do if they have a concern? 41% 44% 15%

Does your code of conduct place clear responsibilities and expectations on what is appropriate and inappropriate behaviour around LGBTI* staff? And is this clearly communicated within the organisation? 40% 47% 14%

Would your organisation be interested in additional support and guidance on safeguarding LGBTI* children? 91% 8%

organisation

policy

people

Barriers to safeguard LGBTI* children within the organisation



Sixteen per cent of respondents to the survey cited a lack of organisational leadership, perhaps suggesting that a top-down approach with pressure from donors and directors could make a start on tackling this issue.

Lack of organisational readiness to tackle this issue is not the only force at work here. Out of all the respondents, thirty-seven per cent said that national legislation was a hindrance to safeguarding LGBTI* children. This is an international average so obviously this is more of a barrier in some countries than others. Thirty-seven per cent also responded that attitudes and beliefs pose a significant hurdle when dealing with these issues at ground level – this is where assimilating specifically LGBTI*-friendly hiring practices and strategies into policy comes in.

One standout statistic is that forty-three per cent of organisations believe that a lack of training or guidance is a significant barrier to safeguarding LGBTI* children. With more widespread awareness and pressure on organisations from donors, this is something that can be changed - we asked organisations if they would be interested in support and guidance on safeguarding LGBTI*

children from Keeping Children Safe and almost all respondents (ninety-one per cent) indicated that they would.

Perspective

Keeping Children Safe is forming a working group focused on safeguarding LGBTI* children. This project will address the gaps identified in the survey by employing a range of interventions to improve the capacity of organisations to safeguard LGBTI* children in line with the International Child Safeguarding Standards. Including: research to identify the main issues, developing capacity building workshops and resources on safeguarding LGBTI* children and implementing accountability measures to hold organisations to account on progress.

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Workshop Results: 8th Conference Rainbow Philanthropy

PUT LGBTI* CHILDREN AND YOUTH ON THE AGENDA OF DEVELOPMENT COOPERATION

COMMUNICATE OPENLY WITH DONORS



Summary

The demand is clear: Queer kids exist, and their needs must be included in development cooperation. In the conference's workshops, all participants – children's rights organisations, foundations, national and international NGOs as well as interested individuals – came up with ways to address different aspects of the topic. And the audience responded strongly to the initial wish of Ise Bosch, the conference's initiator and founder of Dreilinden gGmbH: „Exchange information on what is being done, what can be done and how to be more strategic. If you start looking at something you start to see, and when you see you also need to act“.

Workshop 1: LGBTI* Children from a Family Perspective

The team 'LGBTI* children from a family perspective' delved into the reality of queer kids and the challenges they face. In addition to exclusion and bullying, intersex children run the risk of mutilation due to 'cosmetic' surgeries, and both they and transgender children do not get the required medical care. Educating parents, caregivers and medical staff, as well as increasing the visibility of LGBTI* children would improve the situation significantly.

Workshop 2: Institutional Readiness

Analysing the readiness of institutions, this workshop compiled various ways to best integrate staff into the process of mainstreaming LGBTI* issues: Careful monitoring, trainings, webinars, and clear management guidelines were some of the ideas. Utilising experiences gained from gender or HIV mainstreaming could help this process as much as learning from bad or harmful practices. A handout, created by several organisations together, would make it easier for inexperienced organisations to approach the topic.

Workshop 3: Awareness Raising

Action is also required when working with local and implementing partners like municipal administrations, civil society organisations, or caregivers. The group 'awareness raising' discussed how a combination of top-down and bottom-up methods would best sensitise external partners. The motto „initiated from below, promoted from above“ found widespread agreement. Depending on country laws and social situations, all approaches would require great caution to protect, and not endanger, both children and caregivers. Popular role models or greater media presence could point out the needs of queer children to a broader audience. Another suggestion was to link the topic with gender programmes, or safeguarding programmes regarding violence prevention. In addition, all participants agreed on the importance of speaking directly to LGBTI* children and their caregivers.

Workshop 4: Next Steps

For the next steps, there was strong consensus across all workshops that more research needs to be carried out. Sharing resources as well as collecting and disseminating good, promising and bad practices would make the next steps easier. To ensure as much exchange as possible, the attendees intend to collaborate closely. Instantly, several concrete decisions were made: Publishing a second issue paper (at hand), carrying out a survey on institutional readiness (see page 9 et seq.), setting up an international mailing list for all people interested in this subject, and organising network meetings (supposed to take place in London and Berlin in the Spring/Summer of 2017). But the very immediate next step of the participants will be to carry results and experiences of the conference to their working and private environment. As a participant claimed: „We need to mention that LGBTI* children exist. We need to make others aware that support is crucial for children“.

Workshop Results in Detail

Workshop 1: LGBTI* Children from a Family Perspective

Challenges: What are the risks LGBTI* children face?

- physical and psychological violence, oppression, mutilation
- discrimination
- bullying by peers and school
- criminalisation
- pathologisation
- isolation, loneliness, having no support systems
- identification clashes with religious beliefs; fear of being a 'sinner'
- invisibility
- perceiving their identity as taboo
- hardly any role models, no information, no education
- no support from family, fear of being excluded
- sense of shame and guilt, fear of loss of face and of dishonoring the family
- self-denial and concealment
- identity crisis: Who am I and am I alright?
- exclusion from the community (e.g., no third option in official forms)

Tasks: What can we do to support LGBTI* children?

- welcome them explicitly
- increase visibility
- look for media coverage (TV shows for children etc.) that embrace diversity
- think intersectionally (class, race, age..)
- introduce transgender bathrooms
- reduce gender norms, provide gender neutral choices
- train and educate parents, teachers and caregivers
- find inclusive children's books, games, movies, posters
- child-led communities, institutions
- provide inclusive sex education in school
- negotiate code of conduct: no discrimination, affirmative interaction
- address discrimination in your everyday life

Workshop 2: Institutional Readiness

Potential elements of institutional readiness regarding LGBTI*

- staff capacity training: providing support to staff to understand the issue within their context
- employing LGBTI* staff and management
- including LGBTI* children and young people in policy formulation
- clear policy, code of conduct, vision and mission
- tools and procedures on how to become LGBTI* inclusive
- having champions for the topic
- monitoring the reality of the situation
- having evidence and data of good practice
- monitoring the reality of the situation
- collecting 'bad practices' to learn from
- readiness to communicate to private donors
- risk awareness and mitigating actions
- learning from HIV/Aids, how mainstreaming was pursued

Challenges: What obstacles will organisations encounter when getting ready for LGBTI* children?

- general issues on leadership level (concerns of country directors, safety, political and security issues)
- the illegality to work on the topic → putting staff and children at risk
- the consideration of sexuality as a private issue
- the challenge to reconcile personal beliefs and child rights
- not enough resources to address the topic
- lack of data (esp. disaggregated data)
- donors who are not willing to fund this topic
- the perception of LGBTI* as an adult issue and not a children's issue

Tasks: What can we do to make a difference?

- accept LGBTI* as a children's issue
- bring in foundations and donors
- share policies, guidelines etc.
- start by documenting initial discussions and practices
- identify good or promising practices
- connect with other initiatives (e.g., "ending violence" campaign)
- form internal working groups within organisations
- form working groups among organisations
- involve local activist groups and organisations
- it might be difficult to engage and connect with child rights groups
- listen to children's voices, including to care leavers
- check and update the organisation's own policies

Workshop 3: Raising Awareness

Implementing Partners: Who will raise awareness regarding the topic 'LGBTI*' children'?

- country offices
- partner NGOs
- staff working directly with children, social workers, caregivers
- governmental institutions on the national, regional, local level
- program/project beneficiaries
- faith-based organisations
- local partners such as civil society organisations
- individuals (e.g. consultants)
- donors (governmental and non-governmental)
- networks
- national associations
- influencers (local or national media, educational institutions, governments etc.)
- National Human Rights Institutions

Barriers: What do you expect will prevent or slow down the process of awareness raising?

- preaching to the converted, „preaching to the choir“
- heteronormative social order and gender norms
- taboo
- law, religion, public opinion, stigma
- children are not visible
- decision makers' faith, religious beliefs
- funding constraints
- lack of institutional willingness to engage in the topic
- lack of political will/commitment
- cultural relativism
- discrimination
- perception that this is a Western topic
- criminalisation of LGBTI* supporters
- lack of security for all people involved

Tasks: How can we raise awareness for the needs and suffering of LGBTI* children?

- increase publicity: public events, radio shows, exhibitions, theatre
- include LGBTI* inclusive child safeguarding measures in policies, publications, hiring processes
- conduct and participate in workshops, seminars, trainings (also with partner organisations)
- develop child safeguarding workshops about/for LGBTI* children
- participate in demonstrations, support gay prides



- collect and disseminate good practices, publications, information on focal points
- peer-to-peer education
- do research, work with data and facts
- investigate child abuse, produce studies to counter the accusation of paedophilia
- carry out research on child abuse and LGBTI* children
- mainstreaming
- advocacy and lobbying, building alliances, networking, dialogue/on-line dialogue
- reframing the narrative
- set incentives for other organisational departments (e.g., call for proposals)
- strategic fundraising
- engage head of UN committee on the rights of the child about LGBTI* children
- take topic to other fields such as gender, HIV, sex education
- bottom-up or top-down approach? → initiated from below, promoted from above



Workshop 4: Next Steps

Mapping: Whom to address?

- Coalition for Children Affected by Aids
- Child Protection in Crisis Learning Network
- Child Rights International Network
- Better Care Network
- Global Partnership to End Violence against Children
- Early Childhood Development Action Network/ Unicef/World Bank
- Global Social Service Workforce Alliance
- UN LGBT Core Group
- Child Rights Connect/UN
- The Alliance for Child Protection in Humanitarian Action/Unicef/Save the Children
- International Lesbian and Gay Association
- Elevate Children Funders Group
- Global Philanthropy Project (LGBTI funders collaborative)
- Ariadne, European Funders for Social Change and Human Rights
- International Human Rights Funders Group
- Child Rights Connect
- Alliance for Child Protection in Humanitarian Action
- Global Social Service Workforce Alliance

Tasks: How do we take the topic forward?

SHARE

- start with sharing amongst organisations and continue to exchange with conference participants → mailing list
- empowerment through exchange → share resources, team up, institutionalise exchange and mutual learnings

INVOLVE

- link the topic to regional alternative care conferences and to the Unicef #ENDviolence campaign
- connect with US groups focusing on LGBTI* topics in foster care
- create a coalition of pioneer organisations, governments and countries → be a role model
- involve local activists
- involve children and young people, acknowledge their views and opinions

INTERNAL

- include LGBTI* in policies (general and child safeguarding) more explicitly
- sensitise colleagues and incorporate LGBTI* in project management
- brainstorm with colleagues about what an international research agenda should contain
- bring together like-minded staff members
- do risk analysis in your work with children and young people to not make things worse
- children in alternative care are already vulnerable
- the topic of children & LGBTI* is very sensitive

EXTERNAL

- create a space where parents and care professionals can access support and information
- figure out how to raise awareness of LGBTI* topics with donors in the context of alternative care

TALK ABOUT IT

- get the messaging right and talk about it, be brave but sensitive in order to put nobody at risk
- continue to collect stories of LGBTI* people
- focus on the context of alternative care in the broader sense
- sharpen arguments and refer to human rights and the convention on the rights of the child
- include and speak with opponents
- address the evidence and good practice groups regarding the role of religion and tradition



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Voices of LGBT* Youth

BEING LGBT* IN ALTERNATIVE CARE

This working paper recognises the significance of listening to and acknowledging LGBTI* children. It also wants to raise the voices of children who have grown up in alternative care and shed more light on what can be done to improve their quality of life.

All interviewees grew up in alternative care organisations in the African context. The African charter on Rights and Welfare of children has provided instruments that can be used to protect and care for children in the African context. It recognises that a child should grow up in a family environment that is filled with an atmosphere of love, happiness and understanding and fundamentally recognises that everyone has a duty and responsibility to fulfil in the promotion of the rights and welfare of the child, and for the children to achieve a holistic development.

Children growing up in alternative care have been placed in a unique position as they are deemed to have received a 'second chance' to develop and become productive beings in the absence of their primary caregivers. The safe haven provided by the alternative care institution is seen

as providing for their holistic development until adulthood. But have the people, entrusted with the well-being of the children, ever thought about the psychological strains LGBTI* children are dealing with? A caregivers' training coordinator will have his say at the end of this section.

The children's voices have been raised to highlight their fears, disappointments, successes and achievement in navigating their lives in alternative care institutions. There are no intersex children among the interviewees only because none were known to us. It is paramount to listen to all their voices, to keep them safe and to not expose them to any dangers of coming out as LGBTI* youth. Therefore, all names and locations of persons interviewed have been changed. The working paper will also look at the children's advice and recommendations for alternative care institutions to encourage holistic development of LGBTI* minors. Because listening is not enough: advice and recommendations by LGBTI* children and youth should be brought to child focus organisations for further input and action.

Young lesbian, openly living and proud of who she is: **Wanjiku**



Wanjiku considers herself a human rights activist. She has an educational background in child and youth development. Wanjiku grew up in an alternative care institution in East Africa.

Personal questions

When did you notice you were different? At the time, could you name in what way you were different, or did you find out about homosexuality later?
Growing up I knew I was different, but what stuck with me the most was being called a tomboy. Being compared to my sisters and being forced to be like them was a tormenting phase in my life, and trying to conform and not being able to do so was my biggest fear. However, it all came crushing down on me when I was in an all-girls high school. During my first week of orientation the

headmaster who was also a nun kept staring at me in the crowded room. That was the first time I heard someone talking about lesbians, her stares and stern warning about this "curse" and sinful life was enough to ping my curiosity. Nonetheless this "curse" did not scare me as much as her staring and the threat of school expulsion. I chose silence. Curiosity, after all, killed that cat.

From what did you suffer for being different?

I chose silence and never shared my opinion about sexuality both at school and at home. However, my four years in high school were marred by school detention, suspicions, and punishment for being suspected to be a lesbian. I was suspended from my boarding school twice for showing signs of being a lesbian and both times my caregiver came to my protection as there was lack of evidence. I was always being punished by specific teachers for not being a girl enough. Luckily I was an amazing athlete who brought more glory to the school than shame.

What were you scared of?

Being branded different and more specifically a lesbian was my biggest fear, since it was termed a curse and an ungodly thing to be. I feared being excluded from social events both at home and in school.

Did you ever hear of other 'different' children?**How?**

Name calling was the only thing differentiating people. "Tomboy" or "sheboy" were regarded as insults when I was growing up. We were a couple of us who started owning that name, but never knew why we did, just that we were not ashamed of the name calling.

Where could you get information about LGBTI*?**Did you have LGBTI* role models?**

It was not an era of technology, so it was only books and magazines and hearsay stories from other people. I did not have a LGBTI* model.

Did you have somebody to talk to? Did anybody support you, take you as you are?

In high school, I got a chance to visit my sponsors in Norway. And one day he hinted about me being special the way I was and that I should strive to be the best. I did not understand what he meant as I was not used to sharing my feelings and opinions with adults. Later on during my trip I visited another family who lived many kilometers away from Oslo and the mother of that house became my guardian angel. We were invited for dinner at her neighbour's house and the composition of that family was intriguing, to say the least. She told me about those children being raised by two mums and how great it was. She asked my opinion about her neighbours and I realised I did not have an issue and from there we started talking openly and sharing our feelings and opinions. It was such an eye opener and she brought out the kindness and understanding that I was looking for at that age.

What would you have wished for to comfort you?

The room to discuss different topics when it comes to sexual education and not just talk about STDs and pregnancy. I would have loved to have a discussion openly with my caregiver about what I was going through and for her to not only pray for me, but to actually talk to me about what was going on.

Would you support your own children if they had trouble to get accepted the way they are?

150% yes. I will not even let them reach that point of self-doubt. I will give them all the support I can to ensure that when people judge them it will be based on their own ignorance and not for the lack of my children's courage, strength, love, kindness, compassion and forgiveness.

Growing up in alternative care**What kind of support did you get?**

There was no support growing up as a lesbian in my organisation, let alone within my family. Sexual orientation and identity were never discussed.

What kind of support would you have wished for?

The room to unpack sexual health and education to encompass sexual identity, orientation and self-realisation without fear or discrimination.

Was sexual orientation and gender identity ever mentioned other than in heteronormative ways?

The only education I got was boys and girls should never have sex until they are married.

Did you have the feeling that your organisation agrees with adults being LGBTI*?

In theory, my organisation's end goal is having a productive adult. But if that productive adult identifies as anything different than heterosexual, then the measuring yard becomes higher, and these adults are not seen as "complete" adults. In all honesty, because very few people have come out and expressed their sexual or gender identity, the visibility of LGBTI* persons is minimal, hence there are harsh repercussions when young people come out.

Was there space for self-expression?

The fear of promotion and recruitment is rife and self-expression to encompass diversity is limited.

Advice to alternative care organisations**What is your advice to other LGBTI* kids in alternative care?**

Reach out to adults who can understand you and support you. I would love to say SPEAK OUT, but am not sure how much they will be heard in an environment where politics and religion play a critical role in the arenas of critical mass discussion.

What is your advice to childcare organisations?

- Diversify your cooperation to have not only religious groups as your partners, but other organisations that can help with the psychosocial development of your children.
- Make sexual orientation and gender identity a mandatory topic in the caregivers' training curriculum.
- Encourage caregivers to share with the authorities their fears, speculations and realisation of the gender identities of their children and give

them enough support and encouragement to support their children openly.

- Have a strategy that looks at children's rights in a holistic perspective encompassing children's identity, expressions, and personal identities.
- Encourage a culture of empowerment and protection of children which means decision-making must be inclusive.
- There should also be a deliberate move to give factual information on sexuality and gender diversity for children and caregivers, and every other person in contact whether directly or indirectly with the children.

How could they support queer children when LGBTI* is illegal in the respective country?

In countries where homosexuality is illegal, the universal laws of human rights and children's rights are still applicable. If the alternative care institutions are hesitant to tackle the issue of gender diversity, they could partner with organisations that prioritise this area and have massive experience. At the end of it all human rights are universal to everyone.

Training for caregivers: What would you emphasise, what should be the contents?

For the training of caregivers, I think a lot of unpacking needs to be done in terms of sexual health and reproductive rights, misconceptions, and conceptions of LGBTI* issues made, religion, culture etc. ■

Young adult, closeted gay man: Tendai

Tendai is a young gay man in his early twenties. He has a Bachelor of Arts in literature and is currently pursuing his career in an international firm as customer care agent. He lives with his best friend and hopes that one day he will be confident enough to live as a gay man. He is proud to have made baby steps by coming out to his older sister and best friend. For now he is content "to live in the shadows", as he puts it, and hopes things will get better someday.

Personal questions

When did you notice you were different? At the time, could you name in what way you were different, or did you find out about homosexuality later?

I have always known. I was so close to women growing up. I had a huge crush on one of my classmates. He made me happy and sad at the same time as he was a bully - but I found myself still drawn to him. There was no name for what was going on, just simple attraction in a non-sexual way.

When did you find out about your sexuality?

In high school: My bully became my lover by night and kept on insisting that he was not gay. When I googled a little bit about it, that was when I realised what it was. We continued being lovers by night and enemies by day for a long time. I thought my sexuality was brought about by my family status which was the lack of a father figure. For a while, I thought due to the lack of a father figure in my life, one of the consequences would be my attraction to other men, so I gave them a free pass to use me and abuse me as they wanted.

What were you scared of?

Losing the only family I had. My mother is very spiritual and I was scared of letting her down by being the opposite of what the Christian values were. So I hated myself for being who I was. I was scared that I would die of AIDS, just like it was said and believed. So I spoke to my pastor about my feelings and what is happening. I was rewarded with a set of prayers and an assurance that my evil ways and feelings had been banished to eternity. I pretended to have changed at home and became a good Christian boy, but in school it was a different thing as I continued to have sexual relations with lots of boys. This fear paralysed me so much that I shut out everyone.

Did you ever hear of other 'different' children? How?

We discussed about the peculiarity of people, but we never wanted to give it a name. So anything different was "homosexual," and that was not a nice word to call anyone. I am ashamed that, together with my bully/lover, we hated anything different and made other people's lives miserable.

Where could you get information about LGBTI*? Did you have LGBTI* role models?

My biggest role model was my sister as she is the only one who confronted me about this issue. She asked me point blank whether I was gay and if I was having protected sex. She was too frank for me at that point and I pushed her away. Then one day she asked me to join her for a hike and there I met her lesbian and gay friends and



it just changed the way I thought about life. So I opened up to her and she connected me with one of her friends who became my mentor and friend. He pushed me to be the best and to study hard. He comforted me and opened my eyes and warned me against putting myself in a box and allowing to be used by people. My mentor encouraged me to go to university and reduced my fear of being excommunicated from my 'home', shattering my dreams of the impossible. Although no one knows about my sexual orientation and there are rumours about me, I am living happily now and I got a job that I love.

How would you support your own children if they had trouble to get accepted the way they are?

I would love to have children because I think this child will be the luckiest person on earth. I will love them, mentor them, guide them through the journey of life and encourage them to live life to the fullest.

Growing up in alternative care

What kind of support did you get?

No support at all. I was too afraid to even think that what I was feeling was right, so I chose not to talk about it, and it has become one of my life's struggles.

What kind of support would you have wished for?

The people in charge of young people in the organisation should be able to identify the different areas that youth are struggling with and be trained efficiently to deal with the most uncommon issues without fear or prejudice.

Was sexual orientation and gender identity ever mentioned in other than heteronormative ways?

Nope.

Did you have the feeling that your organisation agrees with adults being LGBTI*?

I don't think so, because I am the pride and joy of my family and the organisation, but only because I have achieved a good education and a good job. I am sure if I come out to them I will be an outcast and I will be banished from going to visit my home.

Advice to alternative care organisations

What is your advice to other LGBTI* kids in alternative care?

Childhood is a very critical issue and critical phase and it is important to talk openly about our struggles. The kids should look for a confidant and let that person help them walk in this path safely. But if you are not open as an adult how do you expect a 13/14 year old to do it? Even as I am giving that advice I know it is futile - but that is what I would like to do to my 14-year-old self.

What is your advice to alternative care organisations?

- Sexuality should be discussed openly. It will reduce HIV infections amongst gay boys within the organisation and outside. Not talking about it puts them more at risk of self-destruction. I have seen miserable deaths, loneliness that leads to depression, and substance abuse among my peers as the organisation does not want to face up to the fact that sexuality is a key concept that affects the holistic development of a human being. Academic progress and careers are not the only issues affecting young people. We need to bring people to talk about HIV, substance abuse, sexual health, relationships. Caregivers and everyone who comes into contact with the children should be educated on sexuality and the various thematic areas that come with it.
- Organisations should employ LGBTI* personnel who are not ashamed of themselves. This will reduce the level of stigma and will also bring discussions around policies affecting the developmental milestones of children.
- Youth Leaders should all be equipped with knowledge and understanding of these issues. They should be open to the realities of different sexualities and gender identity struggles.
- The organisations need to partner with various LGBTI* groups to broaden their perspectives.
- Religion should not be used to suppress voices within the organisation.
- Self-acceptance should be core and that different people love differently.



Young adult, closeted lesbian woman: Bahemuka

Bahemuka is a young lesbian living in one of the major cities in Africa. She is in the food and beverage industry and works as a waitress in one of the modern bars in the city. Although she is outgoing and loved by her friends, when it comes to her family she is very closeted and prefers not to discuss her sexuality with anyone, including her siblings. This interview process was quite welcome and she was more than happy to share her experiences and opinions as long as her anonymity was upheld. She grew up in a children's institution that she has no close ties to, with the exception of her caregiver.

Personal questions

When did you notice you were different? At the time, could you name in what way you were different, or did you find out about homosexuality later?

When I was 13 years old, my best friend was the most attractive person and I was always drawn towards her. I did not know what it was until my older sister started teasing me that I had a crush on a girl.

From what did you suffer for being different?

I became very fearful of being found out, and disappointing my tutor. She is a born again Christian and I think she has hopes that I will get married to a man soon. So I am scared to not only disappoint her, but cause her to reject me.

What were you scared of?

People finding out that I am attracted to women.

Did you ever hear of other 'different' children? How?

When we were teenagers, there were discussions and speculations of people's sexuality in a very negative way, so I picked my battles wisely and stayed clear of trouble-making youth.

Where could you get information about LGBTI*? Did you have LGBTI* role models?

I read it in magazines and saw Ellen DeGeneres on TV one day, and I joined a feminist organisation.

Did you have somebody to talk to? Did anybody support you, take you as you are?

I never spoke to anyone about sexuality. So I decided to concentrate on things that will not get me into trouble. As a volunteer with the feminist organisation, I started talking to a few others and I realised that I was not alone.

What would you have wished for to comfort you?

I wished for someone to tell me that it is ok to be a lesbian. When I was around 16 years old, I had a sexual relationship with one of my classmates. I knew it felt right, but we never spoke to anyone about it. This secret made me very unhappy and I went to church to ask God for guidance and I asked him to make my feelings for that girl go away. Although the relationship disintegrated, I continued being attracted to other girls.

How would you support your own children if they had trouble to get accepted the way they are?

Full support! However, I would like to shelter them and protect them from being different. I know it sounds ridiculous, but it is not easy to bring up gay children.

What is your current relationship status, and how long?

I have just broken up with my last girlfriend. She is a lesbian and her family and friends know, but I am not ready to live as openly, so I am deeply closeted.

Is your partner open to his/her family? Have you met them?

She was and that made me very uncomfortable.

Growing up in alternative care

What kind of support did you get?

None, as I was too scared to talk about my feelings, especially to my caregiver.

What kind of support would you have wished for?

I wish for someone to have explained to me why I felt so different and why I was so scared of embracing myself.

Was sexual orientation and gender identity ever mentioned other than in heteronormative ways?

I heard a lot about how sick homosexuality was and how the eternal fire awaits anyone who learns this disgusting behaviour.

Did you have the feeling that your organisation agrees with adults being LGBTI*?

I am not open to any of my siblings or caregiver, although rumours about me are rife, but I am just scared to come out. Secondly, I know I am not a very strong individual. Suicide has always been an option for me when things get very bad. If I heard I was the topic of discussions due to my sexuality, I would get very depressed and engage in risky behaviour. So I try not to listen to what others think or say about me.

Was there space for self-expression?

This space was within the lesbian community of my town, but after I bumped into a neighbour who was my sister's best friend, and she told my sister, I do not think there are more spaces for self-expression for me as an individual. So it is either my house or my mate's house.

Judgement, discrimination, and being hated for something you have no control over, have been my biggest disappointment in all my 24 years. My tutor has no issue with me working in a bar as a waitress, but she has issue with me not being married, and that puts too much pressure on me. I chose to keep my head down. Growing up would have been a lot easier if sexual orientation was discussed. If other peoples' sexual orientation was acknowledged, it would become a non-issue. The society we live in is changing and more and more

people are accepting peoples' different sexual orientation, so why not my organisation.

Advice to alternative care organisations

What is your advice to other LGBTI* kids in alternative care?

Queer children have not been influenced or taught the behaviour by anyone. No one learns to be gay or transgender, so get someone to talk to them.

What is your advice to the organisation?

The people in charge of protecting children have no clue what it means to protect all children. The ones who are slightly different are not weird or deserve to be mocked for their difference.

What should children's rights organisations do to support LGBTI* children?

The world is changing and there is a lot of information on sexual orientation, gender identities and expressions. It is time to cascade that down to caregivers and organisations minding children. Children who are deemed to have received a second chance in life have an especially huge baggage. The church leaders who are not LGBTI* friendly should be kept at arm's length. Organisations should only encourage peer counsellors and advisors who are conversant with diversity and their own religious and cultural perspectives should not cloud the life journey of others.

How could they support queer kids when LGBTI* is illegal or disregarded in the respective country?

They should acknowledge that they exist within their own communities and houses and support them to be productive human beings as they navigate through their journey. Encourage and embrace diversity - confident children end up being confident adults.

Regarding religion, I think that everyone should have their own God. And it does not mean one God is stronger than the other one - so we should stop using God as scapegoat. ■



Young adult, heterosexual transgender man: KK



KK is a young transgender man in his twenties. He works in the automobile industry and all his colleagues have no idea that he is a transgender man. His closest friend knows, but that is as far as he is willing to share his life.

Personal questions

What kind of support did you get?

No support whatsoever.

I was deemed a tomboy from childhood and everyone let me be. Although many people who worked in the organisation were troubled by my appearance and mannerism and called me mean things, I never cared. My worst time was because I was a good footballer, so I got a scholarship to an all-girls school and the organisation decided to send me there. The uniform was skirts and I was expected to behave like a girl. I realised I was different at a very early age and I told anyone who cared to listen, but no one had the courage to interrogate what was happening with me, so I was left to my own exploration. The organisation sent me to different churches to ensure that they could make me the woman I was born to be. They called in a special psychiatrist who advised them that I was mentally sick and needed proper interventions and behavioural changes. My high school years were a gift and a curse. I was far away from home, but at the same time far away from threats of excommunication and the fear of losing financial support and family. And it was a blessing as I met an amazing teacher who treated me like the man I was supposed to be. She was the biggest life achievement for me as she took time to encourage me not only to play football, but she ensured that my grades and mental health were up to par and she offered me a shoulder to cry on. My teacher was the pastoral advisor to the school and she opened my eyes to the fact that I was not a mistake and God wanted me to be whoever he wants me to be, and that is a man. So my school life turned ok eventually.

As a transgender man, there are so many things that the organisation and my family are not conversant to and I chose that it will not be my place to educate them. I have a community of friends who love me for who I am. I am not afraid to be me in front of them and I have decided

that even within my family, despite the bitterness and bad attitude from my siblings, I am the man who I was born to be and nothing can change that.

I have had my shares of tribulations and joys in this lifetime and I am going to make the best out of it. As much as I would like to help influence policy changes within institutional care, I feel that, as long as Christian values are deeply entrenched in the day-to-day activities of the people we entrusted with the protection and care for these children, it would not yield any change. I am a heterosexual man, but according to people around me, I am a lesbian. I am not a lesbian. You keep saying it might be important for my voice to be heard, but I don't think so. I do not want to be involved in anything about that place and you can use what I have said, but I am not interested in revisiting my past or changing anything. I just want to be left alone.

Interviewer's opinion

Despite assuring KK that his name will not appear anywhere he chose silence and only met with me out of courtesy of our friendship. I was not able to go in-depth with him. I saw hurt and disappointment in him, so I made a conscious decision not to interview him further, but just to have a wonderful lunch with an old friend. ■



Young adult, openly lesbian woman: Ayah

Ayah is a young lesbian, an entrepreneur and an activist in her own right. She is engaged to another woman and has no issue talking about her lover to family and friends. She says her coming out was a journey full of fear, but also of wonderful experiences. She grew up in one of the conflict zones in Africa.

Personal questions

When did you notice you were different? At the time, could you name in what way you were different, or did you find out about homosexuality later?

I noticed I was different when I was 11 years old, back then in an alternative care organisation. My country was at war and I was worse off because I couldn't get the right name when I was young. I found out about homosexuality when I came to the USA.

From what did you suffer for being different?

I suffered emotionally and psychologically.

What were you scared of?

That the organisation would cut me off financially and that I would be kicked out.

Have you ever heard of other 'different' children?

In what way? Once I came out in the United States, I got many Whatsapp texts and messages [from people in my organisation] about them being gays, bicurious, bisexuals and lesbians and they were all looking to find out whether the organisation kicked me out or not.

Where could you get information about LGBTI*?

Did you have LGBTI* role models?

When I was in my organisation, there was no information about LGBTI* at all. The role models were in other countries.

Did you have somebody to talk to? Did anybody support you, take you as you are?

I had one of the youth leaders to talk to. We liked each other more than friends, but we were never being intimate. She supported me emotionally; I had to tell her not to share it with others.

What would you have wished for to comfort you?

I really wished for emotional support and I would have wanted to be who I am without being scared.

How would you support your own children if they had trouble to get accepted the way they are?

I never wanted to marry or have children. There were harsh punishments because we've been told not to love or share our feelings with anybody. If you are in a relationship with another woman or get pregnant or married, you are automatically disowned or not part of the family.

What is your current relationship status, and for how long?

I'm in a relationship with a woman and we are engaged.

Is your partner open to his/her family? Have you met them?

Yes, we live together and we have been together for three years. My partner hasn't met any parents of mine because I feel ashamed of them, although she met my foster parents and brothers. I also met her mother and we got along with each other.

Growing up in alternative care

What kind of support did you get?

Financial support, and shelter.

What kind of support would you have wished for?

Community support.

Was sexual orientation and gender identity ever mentioned other than in heteronormative ways?

It was never mentioned at all and it was killing me inside.

Did you have the feeling that your organisation agrees with adults being LGBTI*?

F** no. For example, there was a speculation about me and another girl in the organisation. We were called in by the programme director and he threatened us.

Space for self-expression?

None at all.

Any other issues you would like to raise?

I just want those children to be raised the right way in terms of supporting them regardless of who they are. Their sexuality or preferences shouldn't be a reason for their lives to be ended. Child care organisations should acknowledge their children's accomplishments, rather than their sexuality or beliefs.

Advice to alternative care organisations

What is your advice to other LGBTI* kids in alternative care?

Be who you are and don't you change a bit about you.

What is your advice to the organisation?

Once a child comes out of the closet, they need to be supported financially and emotionally, regardless of who they are.

What should children's rights organisations do to support LGBTI* children?

Get to know the child at a personal level and support the child without judgements.

How could they support queer children when LGBTI* is illegal or disregarded in the respective country?

It might be illegal, but it doesn't mean we should disown our children. There are many ways of protecting the children rather than the country. I will not go to those levels at this time.

How should caregivers in alternative care organisations be trained? What would you emphasise, what should be the contents?

The caregivers should get some education about gender roles and sexuality. Also, they will have to read books on how to raise a child who is "different" from other children. There is nothing wrong with those children who are LGBTI, compared to straight people. They are not harming anybody in the organisation, nor are they spreading diseases. Also, hire caregivers who are LGBTIQ. The organisation hires so many straight caregivers who don't understand what the child is going through mentally and psychologically.

Any other issues you would like to raise?

Former organisation kids who themselves identify as LGBTI* should be hired at the organisation, since they are bringing different perspectives and growth into the organisation. ■



Caregiver curriculum trainer coordinator – experiences, organisational perspective and opinions

As a former teacher, the coordinator is in charge of developing the trainers' curriculum and of disseminating information to all the trainees involved in the day-to-day activities of children. The coordinator also acts as a bridge between the caregivers and the organisation. The coordinator has worked with children in institutional care for more than fifteen years.

Questions for the caregiver training coordinator

Is Sexual Health and Reproductive Health a theme in your trainings?

Sexual Health and Reproductive Health for both caregivers and their children is a thematic area that we focus on. We have contracted external help for this topic as we find that we are not very experienced in this. We are now working with a man who works in an organisation working with men who have sex with men, and our primary concern was HIV and homosexuality, and it has been going on for a while.

Why HIV and homosexuality?

There was a huge concern among the caregivers about the rates of youth and young people dying of HIV, and we thought it would be important for us to mix the topics, as a lot of young men who died have been rumoured to be homosexuals.

What were some of the areas of focus?

First, we wanted to understand why men chose to have sex with their fellow men. We also looked at sexual orientation and what are the causes, and how best to understand this issue.

You do realise that sexual orientation exists as a continuum?

What do you mean? I thought it is just two - homosexual or heterosexual! And the rest is just mental disorders.

(Brief background on sexual orientation, sex characteristics, gender identity and expressions done.)

I must admit that this is a fairly new area of exploration for me and I am glad you have brought to surface the differences. I believe that all children are equal and unique in their own ways and they should be protected at all cost. However, the role of culture, religion, and our own understanding affects how we view this topic. Christian organisations have been at the forefront of how we view and tackle these issues.

Now that you know there is a difference, what would be the way forward to ensure proper information is disseminated?

The education we give the caregivers must be updated, as I realise. If I am that limited in terms of terminologies and understanding, how could I purport to be an educator who is not up-to-date with the changing times? I will make sure the right information is given, give it priority in the curriculum, talk to the organisation and see how best we could talk about it without sending the wrong messages. We must look for the best ways to support our children, without promoting this agenda.

What do you mean by "wrong messages" and "promoting this agenda"?

What I mean is I would not want the caregivers to think that I am supporting homosexuality. I would like them to have more information and see how best to support their children in case they come across it.

The profile of caregivers is changing all over the world. Do you feel it is time to also change your profile as a caregiver? Is it possible to start looking at different families to support children in need of loving homes?

What do you mean? Start including families in the LGBTI* spectrum?

Yes!

I want to believe I am open-minded, but I think with the legal system it would be a long way to go. The system might be failing in protecting all the children because it is illegal to be a homosexual in our country, I think. I would first want to focus on information dissemination and not look like am promoting the homosexual agenda.

We have gone through the basic understanding of LGBTI* and SOGIE issues. Is it also not important for you to stop fearing and to use the correct terminologies?

I am sorry. I am so stuck with the whole notion of men having sex with men and it will take me a while to digest all these new things, but I am ok with learning. In fact, I would like you to support me in this area since you know the organisation and how rigid we can be in bringing this agenda to the discussion table.

Interviewer's opinion

As I am writing up the answers to this interview, it is important to acknowledge that this happened to be the most difficult and yet enlightening session. Difficult due to the fact that the coordinator was not very conversant with LGBTI* issues and he could only relate to this topic when talking about homosexuality and HIV. This session ended up being a training/discussion session. Nevertheless, it was a fruitful meeting and I hope the issues discussed will open doors for more discussions and encourage people to speak without fear and spread the correct information. I hope that partnerships with various organisations will not only include child focus organisations and religious groups, but also LGBTI* organisations.

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A Loving Boat that Carries LGBT Youth

INTERVIEW WITH SAVE THE CHILDREN IN VIETNAM ABOUT EXPERIENCES AND FINDINGS OF THEIR WORKSHOPS ON LGBT YOUTH

What kind of workshops did you run already and what were the goals?

To reduce discrimination against youth who are highly vulnerable due to their sexual identity and HIV status, the Save the Children in Vietnam project 'LGBT Street Youth' (see article page 28 et seq.) conducted several preparatory workshops for the establishment of PFLAG Can Tho chapter. There were four workshops:

- (1) networking with parents,
- (2) parents and LGBT youth dialogue,
- (3) needs assessment of LGBT children and youth in Can Tho,
- (4) a workshop on establishing PFLAG Can Tho chapter.

The workshops aimed at implementing pilot community-based interventions in two locations, Ho Chi Minh City and the Mekong Delta.

Who was your target group?

Parents of LGBT youths in Can Tho, LGBT youths, and government agencies.

What were your aims, what learning did you try to achieve?

One of the main objectives of the prevention work is for LGBT youth to feel much safer at home, and to ensure that their journey to find themselves will never have to end up on the streets. Activities were initially designed to gradually increase the parents' scientific knowledge about their children's biological and psychological health. This was the first attempt to reassure parents that their children are growing up in a healthy and natural manner. Meeting other LGBT youth from the community also helped the parents to glean more information about their children's feelings and wishes, which they had often ignored at home.

What did you do in detail?

In July 2016, a networking session was held with the LGBT youths. The content of the session was to facilitate the articulation of linkages amongst grassroots community-based groups to share information, answer inquiries from LGBT youth, and provide immediate consultation to them. The network quickly enabled the LGBT youth to speak

about their feelings, hopes and needs. At the same time, it paved the way to commence a PFLAG entity in Can Tho.

A preliminary needs assessment on LGBT children and youth in Can Tho was conducted in August 2016. Representatives from grassroots community-based organisations and LGBT street youth gave considerable input regarding needs, wants, and challenges which young LGBT people on the street and at home face every day. Overall, the assessment revealed that the youth carry a strong desire to find a reasonable way to come out that will secure the relationship with their families, and an urgent need to have a support network for LGBT children.

What were your outcomes?

On 18th of September, the establishment of PFLAG Can Tho Chapter met with an appreciation surpassing all expectations. Ly, the president of the chapter who was co-facilitating the workshop, acknowledged that this was a monumental benchmark for the history of the PFLAG movement in Vietnam. Local partners reported to gain more first-hand experience in working with a community-based group. The basic understanding about LGBT issues and rights-related topics was raised significantly. This result was attributed to various communication sessions for capacity building and awareness raising for both governmental and private services providers. Social perceptions and prejudice against the LGBT community have been reduced since the project was endorsed by the local authority. Results from the assessment will be taken into account when tailoring PFLAG's strategy and work plan in the next phase, to best serve the needs and desires of these young people.

What was the feedback of the participants?

The LGBT parents who participated in the project reported that the project enforced and enabled them to go beyond empathy and to think about something bigger and more strategic, and that the project fired them with inspiration and enthusiasm to stand by the LGBT youth as fathers and mothers. The establishment of PFLAG will pave the way for more interaction with LGBT youth and their parents, which eventually will serve as a vehicle for extending the reach of their advocacy work. PFLAG

has supported the beginnings of a LGBT youth-led organisation in defying misconceptions and reducing discrimination. This chapter raised the hope for many LGBT youths in Can Tho, and Vietnam, on a larger scale, which is one of the main objectives of the prevention work: to ensure that LGBT youth will feel much safer at home and that their journey to find themselves will never have to end up on the streets.

What would you improve the next time?

An analysis of the questions that emerged during the discussions with policy makers and social service providers showed many misconceptions and stereotypical conceptions about LGBT. It suggests that a lot of work needs to be done particularly in awareness raising at the level of government agencies. More sensitising exercises will have to be done in order to leverage a common understanding about this group.

Will there be more workshops?

We will have a 'Train PFLAG Can Tho chapter' workshop to build capacity for current members in terms of organisational development and support provision to parents of LGBT children. We want to strengthen capacity for outreach and communications, as PFLAG's mission and strength is individual counselling both to parents and to LGBT youth.

We will also conduct a 'Support PFLAG Can Tho chapter' workshop to organise community-based advocacy campaigns that increase public awareness of issues LGBT children face at home. The expansion PFLAG in Can

Tho should continue to raise awareness and empower parents, relatives and friends to champion and support LGBT youth.

What was the feedback from your organisation and international colleagues?

Over the past years, our country office and project staff have continued to receive requests from other Save the Children's offices to discuss the project's model as well as the general situation of LGBT young people in Vietnam.

What further hurdles do you see?

The probability of success in engaging families or government staff depends on many factors, for example their availability, openness, and understanding towards this sexual minority population. LGBT remains a sensitive issue. We hope that in Ho Chi Minh City and Can Tho, where the project was implemented, LGBT rights will soon be on the agenda of the Department of Labour, Invalids and Social Affairs which is responsible for handling child protection and social issues.

“ I have luckily been enlightened to choose to support my dearest son. And other mothers and fathers of the LGBT community should do it too!” Mr. Thanh, with a sparkle in his eyes, announced the establishment of Can Tho Chapter. “I was amazed by the impact my journey can make and how PFLAG Can Tho paves the way for us to end discrimination from families. In other words, this significantly prevents LGBT youth from becoming homeless”. Thanh and PFLAG Can Tho will spread out the love to encourage other parents on their journey to be proud of and stand up for their children. “My daily job is trading goods in a floating market, or you can say that my life is to sail a trading boat. And at PFLAG Can Tho, we are to sail a loving boat that carries LGBT children to the supportive arms of their parents.”

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LGBT Street Youth in Vietnam

FIRST STEPS TOWARDS REALISING THE RIGHTS OF LGBT YOUTH

Governments, organisations and people around the world are engaged in fulfilling the rights of children and protecting them from stigma and abuse. Many commitments have been and are being respected; however, some are being neglected so far. Lesbian, gay, bisexual, transgender and intersex youth are considered one group of children who receive inadequate attention. In Vietnam, Save the Children implemented a project targeting this group, including research to provide better understanding of the situation facing LGBT young people in Ho Chi Minh City, Vietnam. They strive to contribute good evidence for effective program planning and implementation of children's rights regardless of their gender identity, sexual orientation, or gender expression.

Save the Children in Vietnam (SC)

Started in 1990, Save the Children Vietnam is now operating in 20 provinces with a team of about 100 local and international professionals working with children, communities, and other partners towards the fulfillment of children's rights. In 2016, more than 8.5 million children in Vietnam were supported in the areas of Education, Health and Nutrition, Child Protection, Child Rights Governance, Child Poverty and Humanitarian Responses.

LGBT street children

Thousands of vulnerable young people are living and working on the streets in Vietnam. The majority of these children have migrated to major cities from other places. Street children and youth often lack access to social services such as health care, shelter, education, as well as livelihood, and suffer child rights violation.

Many of these young people self-identify as LGBT. Due to stigma placed on their sexual identity, this group of young people is at even higher risk of discrimination which they face from their family members, from

community and society at large. Most of them lack identification documents and the registration papers necessary to have access to formal education, health and protection services, and are unable to find safe housing or work opportunities. As a result, they commonly experience hunger, violence, abuse, physical health risks, psychological risks, and social isolation.

Child Rights Governance to Promote Non-Discrimination of Vulnerable Children and Youth People in Vietnam Project (The LGBT Street Youth Project)

With generous support from the Norwegian Organisation for Sexual and Gender Equality (FRI), SC developed a three year project to address the problems facing LGBT street youth. SC works closely with local systems to improve access to services and address their basic needs and rights, and to strengthen advocacy efforts of civil society organisations (CSOs) on the rights related to gender identity, reproductive health and HIV/AIDS. Besides mainstreaming, programming has also been specifically tailored to work for these most vulnerable children and young people in the urban context.

The project's includes different strategies for addressing different types of vulnerability of LGBT youth:

1. An outreach program directly assisting LGBT street youth, providing needs-based support, helping them cope with daily challenges, building capacity in various aspects (with focus on employability, self-improvement, and social network building and maintenance), empowerment. This strategy aims to take down internal barriers within the youth themselves, freeing them from having to worry about survival so that they can switch their focus to growth.
2. Child rights advocacy: facilitated campaigns including youth-led campaigns to advocate for the rights



WE STICK TOGETHER NO MATTER WHAT!

of this highly vulnerable group, training stakeholders on LGBT and child rights to improve their awareness and willingness to fulfill these rights, advocate with policy makers and related stakeholders in the legal system to better serve this group which currently is not well-supported by the legal system. This strategy aims to reduce discrimination against LGBT street youth within the system, effectively minimising external factors barring them from accessing the same opportunities as other children.

3. Improving social services: training service providers, including those from the government and CSOs, to better serve this target group and to increase LGBT street youth's access to social services.

This creative approach has proved to be a very effective empowerment tool for this target group. Not only did the youth greatly enjoy the drawing and hip-hop workshops and keep asking to have more - many have shown significant changes in self-esteem and confidence, speaking up more, and communicating more effectively.

The project, commenced in October 2013 and completed in December 2016, achieved the following key results:

- A group of social workers, including one lead, six social workers and fifteen volunteers, was established in 2014. The group has reached out and provided support to 365 LGBT street youth and children.
- The project has reached out and built capacity in leadership, team working and life skills for 349 LGBT street youth, and enhanced their resilience to the challenges on the streets.
- The project has built a network of over forty different organisations, including governmental agencies, service providers, education institutions, and CSOs, to share experiences and build capacity in working with vulnerable children.

- As a result of technical and financial project support, the six youth-led community based CSOs are now able to work on LGBT children rights and child rights issues with other partners, scale up their activities, and strengthen networking.
- A curriculum on social work with LGBT people was developed and adopted by the University of Social Science and Humanities in Hanoi in 2016 - 2017 as an optional class with sixty hours a semester. The curriculum includes the issues of sexual orientation, gender identity, discrimination against LGBT children and youth, international and domestic law related to LGBT, and how to respond to these issues using social work theories and practice.
- Joint advocacy efforts at government and society levels were made with key partners such as ICS (Information, Connection and Sharing, a national LGBT organisation) and Viet Pride to raise awareness on the monitoring and fulfilment of the rights of LGBT young people and children. 3,000 participants were reached in year three.
- The project strengthened capacity and improved knowledge about children and LGBT issues of an additional 86 government representatives and social service providers to improve their attitude and service quality to LGBT street young clients.
- The program against bullying of LGBT students reached 47,012, and engaged 1,042 people.
- Workshops on LGBT youth for the establishment of PFLAG (Parents, Families and Friends of Lesbians and Gays) Can Tho Chapter (see interview page 26 et seq.).
- Research into LGBT street children and youth was started and its findings have been included in the report "LGBT Street Youth in Ho Chi Minh City, Vietnam, a report on their experiences of discrimination and barriers when accessing social services"^{1,2}.

Further Steps towards improving the situation of LGBT children

In 2016, SC continued to analyse the body of data obtained from the same research, to extract further answers to more complicated questions pertaining this population. The rich body of data collected was further analysed quantitatively and qualitatively to answer more questions about moving to the streets (consequences of discrimination, stigmatisation and isolation and their intersection with poverty), surviving the streets (hate crimes, social support network), and leaving the streets (family, education). The in-depth analysis report focused on accessibility to specific critical social services of LGBT young people living on the streets in Ho Chi Minh City and provided further recommendations in preventing and responding to homelessness and discrimination against LGBT young people before and after they have gone to the streets.

Phase two of the project will be implemented over a period of three years starting in 2017 with support from FRI. This next phase will build on the successes, partnerships and networks already established, and its objectives are expected to be achieved by means of a three-pronged approach: intervention, prevention, and advocacy. The intervention and prevention component will address challenges faced by LGBT young people in Vietnam through both school and family channels, at the same time fostering and facilitating youth participation and networking. Important partnerships with the current project partners will be maintained, which will enable the broadening of the scope of SC's work.

Save the Children Nepal and Save the Children Norway are coordinating a similar project in Nepal, partnering with local entities to promote the rights of LGBT children and youth.

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SOGIE IN VIETNAM

Homosexuality is not criminalised in Vietnam, but LGBTI* people face legal challenges, widespread abuse, and discrimination in their homes and workplaces. Traditional norms make every life script other than heteronormativity a taboo. There are no anti-discrimination laws, transgender people have limited access to gender confirmation surgery options and hormone treatments, and intersex people are neither mentioned nor protected from harmful practices or discrimination. Still, among Asian countries, Vietnam is one of the progressive ones regarding LGBT rights. The first gay pride took place in 2012 and gave rise to pride marches every year since then. From January 2017 on, people who have undergone gender reassignment are allowed to change their legal gender.

¹ Institute for Studies of Society, Economy and Environment (2012). Situation Assessment of LGBT Street Children in Ho Chi Minh City. <http://isee.org.vn/Content/Home/Library/lgbt/stituation-assessment-of-lgbt-street-children-in-ho-chi-minh-city.pdf>

² Save the Children and Institute of Social and Medical Studies (2015). Being LGBT Young People in Vietnam: Life on the Streets and the Light through the Crack. A Summary of Research Findings. https://resourcecentre.savethechildren.net/sites/default/files/documents/lgbt_young_people_in_vietnam_-_save_the_childrens_report.pdf



Karin Demuth, SOS Children's Villages International

We Still Need to Learn

EXPERIENCES AROUND LGBTI* CHILDREN AND STAFF
IN ARGENTINA AND TUNISIA

How to best support LGBTI* children and young people is a question we at SOS Children's Villages need to ask ourselves and find answers to. At the same time we have to be aware of the cultural, religious and societal influences our co-workers are exposed to in regard to the LGBTI* topic. In this article we share experiences and practices from different parts of the world: a pilot project on capacity-building from Argentina and the case of an unjustified dismissal of a co-worker due to her LGBTI* activism in Tunisia.

**Argentina:
The project "We are all included"**

With the project "We are all included" SOS Children's Villages Argentina wants to generate and promote proper conditions for children, adolescents and young people to exercise their rights freely from any form of discrimination

SOGIE IN ARGENTINA

In Argentina, lesbian, gay, bisexual, and transgender people enjoy the most advanced rights in the region. After same-sex marriage was legalised in 2010, Argentina became the first country in Latin America to so introduce same-sex marriage. A Gender Identity Law was passed in 2012 which makes it comparatively easy for people to change their gender identities. In 2015, the World Health Organization cited Argentina as an exemplary country for providing transgender rights.

or violence related to their sexual orientation or gender identity. Promoting child rights, especially for children who have lost parental care or who risk losing it, has been a focus for SOS Children's Villages Argentina for a long time. In 2016, local staff started awareness raising on the rights of the LGBTI* community

when they invited the mother of Luana for a workshop on sexual diversity. Luana, an 8 years old girl, has become a key actor in the fight for gender rights in Argentina. She was born a boy, and in 2013 she became the youngest person to take advantage of an Argentinian law that allows people to identify their own gender.

Luana's case sparked a debate about how best to raise children who identify themselves with the opposite sex. It also made very clear how important it is to listen to the voices of children and accompany their choices, in order to allow them to find their identity.

With the project "We are all included" SOS Children's Villages Argentina emphasises "that we are all responsible for protecting children, adolescents and youngsters from any form of abuse, including discrimination regarding their sexual orientation or gender identity. We focus on how to accompany the identity construction processes in childhood."

The project's objectives

The project "We are all included" is specifically oriented towards:

1. capacity-building in sexual diversity for families of origin, caregivers, care professionals and other co-workers, including management. The objective is to obtain knowledge and tools to work with children, adolescents and young people that participate in SOS Children's Villages' programmes in Argentina.
2. promoting a culture of good treatment, non-violence and non-discrimination, respect for all people, accepting the differences and promoting equality of rights, emphasising specifically the integration of LGBTI* people.
3. going beyond the organisational space, partnering with other organisations, government and institutions interested and/or specialised in the topic, in order to develop together actions to promote changes.

To implement these objectives, awareness and sensitisation activities were developed in order to:

- a. identify myths and prejudices of sexual orientation and gender identity.
- b. introduce basic knowledge on topics such as sexual



orientation, sexual and gender identity, sexual diversity and violence, homo-trans-bi-phobia.

c. promote the respect and the value of diversity, as well as good practices based on non-discrimination regarding sexual orientation or gender identity issues.

d. sensitise co-workers, familiarise them and create empathy with specific cases of trans-children, LGBTI* young people and same sex families.

e. inform about the recent laws and regulations on sexual diversity in Argentina, in order to recognise the victory of rights and the cultural and democratic advancement within the society.

f. spread information about historic events and people who are allies in the fight of LGBTI* people's rights.

g. build bonds with other organisations based on the knowledge, experiences and activism in this topic that may become a reference for our work.

h. elaborate tools to continue the work in this area, autonomously and on a permanent basis. These tools are being worked out at the moment.

"It helps me to think about old paradigms"

The first workshop took place in September 2016 and was offered to youth advisors. Youth advisors play a crucial role in the identity building of adolescents, since they accompany the young people in a critical period of their life. The workshop introduced gender studies, it helped to reflect on youth advisors' own perceptions about sex, gender and sexuality and to discuss their influence on everyday ties and professional practices. They were very satisfied, as the following comment shows: "The workshop helped me to think about old paradigms and reflect on gender diversity".

Similar activities took place in each location in Argentina where SOS Children's Villages has alternative care and family strengthening services and reached thirty-six social workers, youth advisors, family advisors, programme development advisors and programme directors. When the project was presented to family advisors, their appeal was clear: "Help us to understand the social construction of sexuality and gender and how these issues tend to reproduce

certain forms of domination and violence." There was also talk about the sexuality of adolescents with disabilities, and the importance of not taking the sexuality of caregivers as a taboo.

In January 2017, a workshop was organised for family facilitators who work with families in communities. When asked about the most important learnings, they said: "We were putting ourselves in the shoes of minorities and we could strengthen our empathy with regard to masculinity, sex and gender, and identity".

A pilot project to learn from

More workshops are planned for 2017, particularly for caregivers. An additional workshop will be held for young people who are currently involved in processes of leaving care and becoming independent. Once the awareness-raising workshops have been completed, SOS Children's Villages Argentina will work together with the young people on child friendly materials for dissemination.

"We are all included" is a pilot project for the SOS Children's Villages organisation how to address the issue of discrimination of LGBTI* children and youths. Learnings from this pilot will be incorporated into their care and human resources frameworks.

**Tunisia:
Zero tolerance of discrimination**

In January 2017, SOS Children's Villages Tunisia was mentioned on a Facebook post regarding the termination of a co-worker's employment that related to the staff member's pro-LGBT and feminist activism. The dismissed staff member had recorded a conversation with the National Director asking if she was dismissed because of her personal views which the director appears to confirm.

"The Tunisian incident was totally unacceptable", says Coenraad de Beer, team leader Care & Child Safeguarding at SOS Children's Villages International. "It certainly reflects the challenges that international organisations such as SOS face on LGBTI* topics. But we have a very

SOGIE in Tunisia

In Tunisia, both male and female same-sex sexual activity is illegal. According to article 230 of the Penal Code same-sex sexual activity can be fined with up to three years imprisonment. Tunisia is a pre-dominantly Muslim country with Islam as the official religion, and homosexuality is seen as a sign of decadence and immorality.

clear policy regarding discrimination of any kind which we follow." In the case of Tunisia, the National Director of SOS Children's Villages Tunisia left the organisation at the end of her probation period by mutual agreement.

This decision followed an internal review that had been launched to investigate allegations of discrimination put forward by the dismissed former staff member. SOS Children's Villages has followed standard procedures to respond as the organisation takes any such reports very seriously.

"We are firmly committed to the protection of all human rights regardless of an individual's gender, sexuality, ethnic background, religious beliefs, disability, or any other aspect of identity or personal characteristics", says Coenraad de Beer. "Working in countries where LGBTI* involvement conflicts with the law is very challenging. We are a rights-based organisation and as such work towards rights-based solutions."

SOS Children's Villages will now put in place a programme of training and awareness-raising to promote the values of the organisation, which include intolerance of any form of discrimination and the championing of human rights. If the rights of LGBTI* people are respected, concerned staff and children are relieved from the pressure to hide their sexual orientation and they do not need to be afraid of rejection, ridicule, or negative reactions. Children who see that LGBTI* staff is treated with respect will feel more comfortable and safe, so they will have a greater chance to develop self-esteem and be themselves. ■

About SOS Children's Villages

SOS Children's Villages is a global federation working to prevent family breakdown and to protect and care for children who have lost parental care, or who are at risk of losing it. We work with children, families, communities and states to ensure that children's rights are met. If a child has lost parental care, or it is not in the child's best interests to remain in their family, then we work with community and state partners to provide the child with loving and supported family-based care in a created family setting.



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Additional resources can be found in the Dreilinden publication „Skirt? Nope, not for me!“.

Glossary:

*****: A character used in several languages to denote sexual and gender diversity. It is one of many linguistic strategies to make sexual and gender diversity visible in language.

Alternative care: Any type of care of children and youth other than within their family of origin, such as day care centres or foster families, as well as support of children and their families who are at risk of losing parental care.

Children: All human beings under the age of eighteen years, according to the →CRC.

Cisgender: A term for those who stay with the sex/gender assigned to them at birth for life.

Closeted, in the closet: LGBTI* people who have not disclosed their →SOGIE. The act of telling other people about one's own SOGIE is commonly described as 'coming out'.

CRC: The United Nations Convention on the Rights of the Child; A treaty of the United Nations framing the human rights of children which came into force 1990. Currently, 196 states are party to the CRC including every UN member country except the United States. Nations that have ratified the CRC are bound to it by international law.

CSO: Civil society organisation; CSOs are non-commercial and non-state organisations outside the family that share a common, public purpose. CSOs can come in many forms: formal entities such as →NGOs, informal groups of activists, faith-based organisations, etc.

Development cooperation: Cooperation between so called industrialised countries and developing countries to eliminate global social and economic inequalities, by state actors or actors from civil society →CSO, →NGO.

FSF: Female persons who have sex with female persons regardless of their sexual orientation. This scientific term is often used in health programmes (esp. HIV), medical and social research. Sometimes it is easier for people to self-identify as FSF instead of lesbian or bisexual, e.g. in restrictive environments where being lesbian or bisexual is a taboo or criminalised.

Gender binary system: Classification of sex and gender as exclusively male and female.

Gender identity and gender expression: Personal experience of one's own gender. Other than the biological sex, gender is based on social structures. Gender identity is the innate sense of one's own gender whereas gender expression is the way how to manifest or express oneself such as through socially defined behaviors and ways of dressing, styling etc. Unlike gender expression, gender identity is not visible to others.

Heteronormativity: A system of norms, attitudes, and prejudices in which heterosexuality and the male/female binary is defined as the social standard; all other →SOGIE are depreciated.

Intersex: Physical condition and/or gender identity not fitting in the binary definition of male and female. It is not an illness,

as often assumed, but a description of people whose bodies don't fit any of the common sex/gender categories of male and female. For more information see page 8.

LGBT: Acronym for lesbian, gay, bisexual, transgender. In this paper, this acronym (without "I") is chosen if intersex issues are not specifically addressed.

LGBTI: The above, plus intersex. Used in this paper when there is specific content regarding intersex issues, or to reflect thereof the intention and hope to include intersex issues in the future.

LGBTI(Q)*, LBTTIQ, LBTTIQAAA etc.: These acronyms emphasise different forms of the above. For example, the latter two make transsexuals, queers, persons questioning their sex/gender, asexuals and their allies visible.

MSM: Men who have sex with men regardless of their sexual orientation. This scientific term is often used in health programmes (HIV), medical and social research. Sometimes, it is easier for people to self-identify as MSM instead of gay or bisexual, e.g. in restrictive environments where being gay or bisexual is a taboo or criminalised.

NGO, iNGO: Non-governmental organisation resp. international non-governmental organisation; an interest group set up by ordinary citizens, often engaged in service provision, but also in social and welfare policy and environmental policy. NGOs are a subset of →CSOs.

Non-binary: Outside the categories of man and woman or in between; not falling into the categories of male and female. →intersex

PFLAG: Parents and friends of lesbians and gays; US organisation for parents, families, friends, and allies of LGBTI* with more than 500 chapters across the US, founded in 1972. Outside of the US, several similar organisations exist, although most of them are not affiliated with PFLAG.

Queer: Used in this context for everyone whose →SOGIE is other than heteronormative, meaning non-heterosexual and/or not fitting the binary gender norm.

Sex reassignment surgery: Also called gender confirmation surgery. Surgical intervention to alter one's sex assigned at birth and only a small part of transition. Transition is the whole procedure to alter one's birth sex and can include personal, medical, and legal steps. Not all transgender people choose to, or can afford to, undergo medical surgeries.

Sexual orientation: Ability of a person to relate to one or more persons emotionally and/or sexually.

SOGI or SOGIE or SOGIESC: Sexual orientation, gender identity and expression, and sex characteristics.

Trans*: Umbrella term for transgendered ways of life as well as the identity of people going beyond the sex assigned to them at birth (transsexuals, transgender, transvestites, and gender nonconforming persons amongst others). →cisgender

Parts of this glossary were adopted from the Dreilinden publication „Skirt? Nope, not for me!“. For some definitions, information was used as provided on websites by ILGA, GLAAD, ISNA and OII. The glossary makes no claim to be complete. All terms are only defined as used in the paper on hand.



Gesellschaft für gemeinnütziges
Privatkapital mbH

Dreilinden gGmbH

Dreilinden is a non-profit organisation for private funding. Dreilinden believes that human societies are more interesting and stronger if gender roles are less binary and less hierarchic. Dreilinden supports social acceptance of gender and sexual diversity by means of grants to existing organisations and project grants, as well as by social investments, and networking. Besides funding feminist and SOGI organisations in the so-called "Global South," Dreilinden supports selected mainstream human rights organisations in Europe in their efforts to acquire gender and SOGI expertise.



**SOS CHILDREN'S
VILLAGES
INTERNATIONAL**

SOS Children's Villages International

SOS Children's Villages works to prevent family breakdown and cares for children who have lost parental care, or who risk losing it. If a child has lost parental care, or it is not in the child's best interests to remain in their family, then we work with community and state partners to provide the child with loving and supported family-based care. With our family strengthening activities we support families and communities build their capacities so that children are well cared for, and family breakdown can be avoided. Furthermore, our SOS Children's Villages are the starting point for emergency reliefs that we offer to children and their relatives in troubled areas and disaster zones. As a pioneer in the field of alternative child care we fight for the rights of girls and boys in need of protection since 1949. Today we are active in 135 countries. Our work reaches about 1.5 million children, youth, and families.



**Keeping
Children
Safe**

Keeping Children Safe

Keeping Children Safe is a dynamic and growing global network working to keep the world's most vulnerable children safe from abuse and exploitation. It was established in 2001 by a group of leading humanitarian relief and development charities in response to the growing realisation that children were being abused by aid and development workers in emergency camps in West Africa and within their own organisations. Keeping Children Safe represents a commitment by organisations worldwide to protect children by developing and promoting a set of robust and comprehensive safeguarding standards that all organisations can and should follow. As a result of our services, and through our expanding network of members in over 120 countries, millions of children worldwide are now better protected from violence, abuse and exploitation.

Eva-Maria Hilgarth

The freelance editor of this working paper is a human rights activist with professional experience in a variety of fields. For Dreilinden gGmbH, Eva-Maria Hilgarth coordinated the Rainbow Philanthropy Conference 2014, 2015 and 2016 including concept development, led workshops, edited and co-wrote the publication on hand.