Concept Note: Pride in the Humanitarian System Consultation

| Project Title | Pride in the Humanitarian System: Asia Pacific Consultation on the Inclusion of LGBTIQ Communities and Promoting LGBTIQ Rights in Resilience-Building, Response, and Recovery Interventions in Humanitarian Settings |
| Geographical focus | Asia-Pacific region, with priority countries Bangladesh, Cambodia, Fiji, Indonesia, Myanmar, Nepal, Pakistan, the Philippines, Samoa, Sri Lanka, Tonga, and Vietnam. |
| Partnering Agencies | UN Women Regional Office for Asia and the Pacific (UN Women ROAP) International Planned Parenthood Federation (IPPF) ASEAN SOGIE Caucus Asia Pacific Transgender Network (APTN) APCOM Edge Effect |
| Location and dates | Pullman Bangkok King Power Hotel Bangkok, Thailand, 4-7 June 2018 |

1. Background and Justification

The Asia-Pacific is the region most vulnerable to disaster impacts in the world, and home to multiple complex emergencies and protracted humanitarian crises. It is well documented that disasters and humanitarian crises exacerbate vulnerabilities of marginalized populations, including Lesbian, Gay, Bisexual, Transgender, Intersex, and Queer (LGBTIQ) persons. Despite recent strides towards ensuring the safety and enjoyment of equal rights by LGBTIQ populations in the Asia-Pacific region, persistent and sizeable obstacles to inclusion remain, including harmful legal frameworks and religious, cultural, and societal stigmas which, when combined with the impact of a natural disaster or armed conflict, further exclude LGBTIQ persons from the protections they are entitled to and render them uniquely vulnerable. Like gender-based discrimination against women, stigma and discrimination against LGBTIQ persons are

---

2. Including the decriminalization of homosexual conduct in Palau (2014); the introduction of anti-discrimination clauses relating to sexual orientation in employment in the Cook Islands (2012) and Samoa (2013); the recognition of a ‘third gender’ in Nepal (2007), Bangladesh (2013), and India (2014); the inclusion of a SOGIE anti-discrimination clause in the Fiji constitution (2012); the legalization of same-sex marriage in Taiwan (2017); the inclusion of gender expression in Thailand’s Gender Equality Act (2015); and the first Pride Parades held in Vietnam (2012) and Timor-Leste (2017).
also deeply rooted in patriarchal values of rigid gender and sexual norms and enforce dominant power inequalities and heteronormative masculinities.

Although there is a dearth of evidence with regards to LGBTIQ inclusion in humanitarian response in the Asia-Pacific region, the data that is available indicates that the needs of LGBTIQ populations are not adequately accounted for and addressed in DRR and humanitarian action⁴. While human rights instruments such as the Yogyakarta Principles (2007) affirm that LGBTIQ populations are equally entitled to the same human rights as all other persons, in practice many states continue to discriminate against and actively perpetuate violence towards LGBTIQ persons. In emergencies, issues such as a lack of gender-affirmative legal identification, the collapse of normal coping mechanisms and structures such as LGBTIQ community centres, and the destruction of informal economies from which many LGBTIQ populations seek work further compound their vulnerability.⁵

At all points along the DRR-humanitarian response-recovery spectrum, key actors fail to take into consideration the needs and capacities of LGBTIQ persons. Although the Good Practice Review for DRR is almost 400 pages long, “sexual minorities” warrant only a short paragraph.⁶ Key humanitarian actors still lack protocols and trainings for LGBTIQ sensitive and inclusive DRR and humanitarian relief, for example, the Sphere Project Handbook (2011) of minimum standards in humanitarian response entirely lacks any mention of the needs of LGBTI communities, although revisions of the Sphere standards taking place in 2017 have included reference to the needs of LGBTIQ populations. In practice, emergency response tools such as camps, temporary shelter, sanitation facilities, centralized aid distribution points, and health centers are rarely sensitive to the needs of LGBTIQ persons, often making the process of seeking aid humiliating, expository, and harmful.⁷

As a result, humanitarian response often continues to perpetuate the exclusion and marginalization of LGBTIQ populations. In India, Pakistan, the Philippines, and Nepal, transgender communities were harassed, mocked, and ridiculed or excluded entirely from aid distribution due to lack of identification that matched their gender identity and expression⁸. Heteronormative understandings of the household as a common unit for analysis and distribution of relief services, furthermore, effectively excludes many vulnerable people from response,⁹ for example, after the triple disasters in Japan, financial compensation for the loss of a partner was given only to married spouses, effectively excluding same-sex couples.¹⁰ In terms of health, whether through oversight or low prioritization of LGBTIQ populations,  

⁷ See footnote 5.
¹⁰ Ozawa, K. (2012), Relief activities for LGBTI people in the affected areas. Voices from Japan 26:21-22.
STI clinics and ART clinics run by Blue Diamond Society in Nepal after the earthquake were forced to interrupt services, also resulting in disruptions to hormone therapy for transgender individuals.  

As the Yogyakarta Principles state, “the policing of sexuality remains a major force behind continuing gender-based violence and gender inequality,” and this remains true in the aftermath of disasters, with multiple documented cases of violence against LGBTIQ persons. Gender-segregated shelter, sanitation, and toilet facilities often become places of sexual harassment for gay men and transgender women, as documented in India\(^\text{12}\) and the Philippines\(^\text{13}\), and multiple cases of rape of lesbian and bisexual women to ‘correct’ their sexual and gender transgressions were recorded in camps in Haiti post-earthquake.\(^\text{14}\)  

Despite these vulnerabilities, evidence from recent disasters in the Asia-Pacific region also demonstrates the capabilities of LGBTIQ populations to cope in the aftermath of disasters, and to leverage existing social networks for the protection and recovery of themselves and their communities.\(^\text{15}\) In Indonesia, for example, although waria\(^\text{16}\) opted to use their social networks to find housing rather than risk discrimination at government shelters after the Mt. Merapi eruption in 2010, many warias chose to still contribute to the shelters by providing haircuts and makeup services to people affected by the disasters, contributing to the emotional and social wellbeing of their communities\(^\text{17}\). In Samoa, the Samoan Fa’afafine Association, a tight, pre-existing network of fa’afafine,\(^\text{18}\) proved instrumental in driving relief operations after Cyclone Evan, as the network spanned fa’afafine holding government positions in the Disaster Management Office, the Ministry of Health, and more.\(^\text{19}\) Emerging evidence also demonstrates that communication, cooperation, and partnerships between donors, humanitarian actors, and LGBTIQ CSOs is a good practice in LGBTIQ inclusive humanitarian response, as was the case with USAID, Nepal Red Cross, and the Blue Diamond Society collaboration after the Nepal earthquake.\(^\text{20}\)  

Recognizing the imperative of advocating for and actualizing LGBTIQ inclusion in humanitarian response, realizing the importance of building the capacity of LGBTIQ CSOs in DRR and humanitarian response, acknowledging the strengths LGBTIQ CSOs can offer to traditional humanitarian practices, and building on sessions on LGBTIQ+ persons in humanitarian settings at ILGA Asia 2017, UN Women, IPPF, APCOM, APTN, ASEAN SOGIE Caucus, and Edge Effect thus propose the *Pride in the Humanitarian System: Asia Pacific Consultation on the Inclusion of LGBTIQ Communities and Promoting LGBTIQ Rights in Resilience-Building, Response, and Recovery Interventions in Humanitarian Settings.*

---

\(^{12}\) See footnote 10.  
\(^{15}\) See footnote 1 for case studies of Bakla in the Philippines following flash floods, Waria in Indonesia after the eruption of Mt. Merapi in 2010, and Fa’afafine in Samoa after Cyclone Evan.  
\(^{16}\) Individuals assigned male at birth who adopt feminine features and identity; the term is a contraction of wanita (woman) and pria (man).  
\(^{17}\) See footnote 1.  
\(^{18}\) Individuals assigned male at birth who claim a feminine identity in Samoa.  
\(^{19}\) See footnote 1.  
\(^{20}\) See footnote 13.
2. Regional Consultation

Format
The regional consultation will begin with a one day training workshop on LGBTIQ rights and humanitarian response and pre-conference for representatives of LGBTIQ CSOs, followed by a 2.5 day regional consultation and workshop bringing together LGBTIQ CSOs and humanitarian actors.

Objectives
The consultation aims to:

- Convene a dialogue and develop a common understanding between stakeholders of the experiences of LGBTIQ communities in natural disasters, and of the critical issues and barriers to the promotion and protection of LGBTIQ rights in humanitarian response
- Facilitate learning and sharing of good practices in the region on addressing, protecting, and promoting the human rights of LGBTIQ persons in humanitarian crises, based on recent examples from the region;
- Bring LGBTIQ rights CSOs together with other stakeholders in humanitarian response, and facilitate opportunities for partnership development;
- Discuss the role of and develop recommendations for a diverse and inclusive approach to strengthening partnerships between LGBTIQ CSOs, donors, and humanitarian agencies/NGOs in the Asia-Pacific region.
- Develop a regional workplan that includes community in regional DRR – response and recovery interventions by key responders

Expected results:
As a result of this Regional Consultation, we expect to provide the following:

- A community call to action titled “What LGBTIQ Communities want from Humanitarian Action”
- A publication summarizing the key discussions, analysis, and recommendations of the pre-conference and Regional Consultation;
- A regional partnership framework for actions to be taken to strengthen the advocacy and inclusion of LGBTIQ rights organizations in humanitarian response across the region;
- A set of concrete recommendations for LGBTIQ inclusion in humanitarian response for donors, humanitarian policy makers, and implementing agencies.

Participants:
Representatives from LGBTIQ CSOs already engaging in humanitarian action or with an interest in doing so in priority countries, relevant UN agencies, humanitarian NGOs, government disaster management units, and key humanitarian donors.

Nomination criteria for LGBTIQ CSOs are as follows:
- Representatives of LGBTIQ organizations from or working in geographic locations affected by disasters or humanitarian emergencies;
- Representatives of LGBTIQ organizations who have the capacity to mainstream/incorporate DRRM work into their existing programs.

Youth and minority representation, including LGBTIQ+ persons with disabilities and indigenous peoples, encouraged.

### 3. Contact

<table>
<thead>
<tr>
<th>Organization</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>APCOM</td>
<td>Ryan Figueiredo, Deputy Director</td>
</tr>
<tr>
<td>APTN</td>
<td>Marli Gutierrez, Communications Officer</td>
</tr>
<tr>
<td>ASEAN SOGIE Caucus</td>
<td>Ryan Silverio, Regional Coordinator</td>
</tr>
<tr>
<td>Edge Effect</td>
<td>Emily Dwyer, Managing Director</td>
</tr>
<tr>
<td>International Planned Parenthood Federation</td>
<td>Maria Holtsberg, Senior Regional Gender and Inclusion Advisor</td>
</tr>
<tr>
<td></td>
<td>Matthew Kusen, SPRINT Program Manager</td>
</tr>
<tr>
<td></td>
<td>Jagkrapan Janchatree, Humanitarian Programme Officer</td>
</tr>
<tr>
<td>UN Women</td>
<td>Smriti Aryal, Regional Advisor for Humanitarian Action and Resilience Building</td>
</tr>
<tr>
<td></td>
<td>Prim Devakula, Gender in Humanitarian Action Analyst</td>
</tr>
</tbody>
</table>
Annex: 1 – Organization Profiles

UN Women

UN Women is committed to promote and protect the rights of LGBTIQ persons, including in emergencies, to achieve gender equality and women’s empowerment. This includes the September 2015 joint call to action on ending violence and discrimination against lesbian, gay, bisexual, transgender and intersex persons by 12 UN agencies including UN Women. In 2016, UN Women ROAP also organized a Regional Consultation on Promoting and Protecting the Rights of Lesbians, Bisexual Women, Transgender and Intersex Persons, which sought to develop new and strengthened partnerships in the region to promote and protect the rights of LBTI women, and identify key programming areas for ending discrimination against women based on sexual orientation and gender identity and strengthening the leadership and rights of LBTI persons in this region.

Based on its mandate, UN Women plays an important role to ensure an adequate, consistent and sustainable integration of gender equality and women’s empowerment in identifying and addressing the needs and vulnerabilities of crisis and disaster affected populations and promoting the leadership of women, particularly those who are marginalized, across the humanitarian-development continuum. Furthermore, UN Women has strong relationship and extensive experience in working with human and women’s rights groups to bring their voices to key policy and programmatic forums and maintains strong relationships with LGBTIQ CSOs at both the regional and country level. Across several countries in this region, UN Women country offices already have strong partnerships with LGBTIQ organizations and groups on ending gender based violence, supporting advocacy and leadership participation for gender responsive policy and program, gender sensitive HIV programs and promoting protection and leadership of LGBTIQ organizations and individuals in disaster preparedness, response and recovery. Within UN Women corporately, there is increasing efforts put on to ensure integration of SOGIE principles and LGBTI rights across all aspect of its policy and programmatic actions, including in the area of humanitarian response and DRR.

In line with our Flagship Programme Women’s Leadership, Empowerment, Access, and Protection in Crisis Response (LEAP), we aim to strengthen diverse women’s leadership and promote gender equality in humanitarian assistance, such that no one is left behind. In UNW ROAP’s work plan humanitarian action for 2018-2019 year, strengthening the promotion and protection of LGBTIQ rights is one of the priority areas.

IPPF

IPPF

IPPF is the world’s largest network of sexual and reproductive health service providers and advocates, working across 170 countries globally. The Federation is made up of locally-owned, autonomous civil society organizations that offer a broad range of SRH services, and promote sexual and reproductive rights through advocacy work at local, national, regional and global levels.

IPPF Humanitarian
IPPF’s Humanitarian Programme provides a distinctive model for SRHR in crisis that connects key elements of humanitarian action (prevention, preparedness, response, recovery and resilience) with long-term, equitable development. Before a disaster strikes, we work with our Member Association to ensure access to sexual and reproductive health in emergencies is integrated throughout national disaster risk management and Sexual and Reproductive Health policies. During a humanitarian response, IPPF mobilises its resources and serves as first responders to provide life-saving SRH services, information and referral pathways. IPPF’s humanitarian work is guided by gender equality continuum based on policies that seek to transform gender relations to promote equality. Further, the humanitarian program is driven by an inclusion agenda which includes working with Member Associations to ensure LGBTQI components are integrated in localized response work. Gender and inclusion guidance is provided to Member Associations, based on the understanding that investing in gender equality and inclusion is essential both as a means for fulfilling SRHR in emergencies and as an end in itself.

We are currently funded by Australia’s Department of Foreign Affairs and Trade to respond to natural disasters and conflict settings predominantly in the Asia-Pacific Region, and increasingly by other donors to respond to emergencies in other regions, including fragile contexts.

APCOM
APCOM is a regional organization that represents a diverse range of interests working together to advocate, highlight and prioritise health and human rights issues that affect the lives of SOGIESC persons in Asia and the Pacific. APCOM’s work is focused on empowering these communities by strengthening advocacy, forging innovative partnerships, building new leadership, democratising strategic information and amplifying community voices at the regional level.

APCOM is also committed to work with intersectional approaches and this is reflected in its special initiatives portfolio. APCOM in partnership with the International Planned Parenthood Federation, UN Women, UNFPA and ICRC and IOM is working to ensure the inclusion and participation of SOGIESC persons and communities in humanitarian settings; especially across the DRR, response and recovery spectrum.

ASEAN SOGIE Caucus
ASEAN SOGIE Caucus is a regional network of human rights defenders advocating for the protection, promotion and fulfillment of the rights of all persons regardless of sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC). The organization envisions a SOGIESC-inclusive ASEAN community.

Its work entails supporting local groups and activists in undertaking evidence based advocacy through conduct of trainings and provision of technical support. ASC creates spaces for LGBTIQ activists to interact with human rights mechanisms such as through advocacy dialogues and engagement in human rights reporting processes.

ASC works in partnership with Arcus Foundation, UNDP Being LGBTI in Asia Program and Outright Action International.
Edge Effect
Edge Effect assists international humanitarian and development organisations to work in genuine partnerships with people of diverse sexual orientation, gender identity/expression, and sexual characteristics (aka gender and sexual minorities and intersex people, or LGBTIQ+ people). We undertake:

- training with international humanitarian and development actors on inclusion of sexual and gender minorities and intersex people in their programs.
- work with sexual and gender minority and intersex CSOs and networks within those communities, as they engage with humanitarian and development actors.
- action research to support humanitarian and development program design, development of good practice guidance, and policy development.
- project cycle support through assessment, design, implementation and evaluation phases.

What’s an edge effect? We borrowed the term from ecology studies, where it refers to the presence of greater ecological diversity and transformational change within boundary regions where different ecosystems meet; for example, the boundary of a forest and grassland. We imagine a world in which sexual and gender minorities and intersex people are not only included, but in which our understanding of people and society is transformed.

Edge Effect is a social enterprise, with a focus on South Asia, Southeast Asia and the Pacific. Edge Effect is based in Australia, on the land of the Taungurung People of the Kulin Nation, and we pay respect to all elders past, present and emerging. Always was, always will be, Aboriginal land.

Asia Pacific Transgender Network (APTN)

Asia Pacific Transgender Network (APTN) provides a platform for trans and gender diverse people to engage in community-to-community learning, build organisational capacity through workshops, and develop programme planning, implementation and evaluation of projects. Since its founding in 2009, APTN has published several key reports, policy and technical briefs, in partnership with other community-based groups and multilateral organisations, that have been used to inform policy and laws.