GENDER DIVERSE POPULATION WORKING GROUP (GDPWG)
TODAY'S DISCUSSION POINTS

- GDPWG and mainstreaming Gender Diverse Population (GDP) concepts in the Response
- Barriers in accessing service (latest assessments)
- Understanding the Gender Diverse Population (GDP)
- Barriers to Access Equal Opportunity
- Strategies to Ensure Equal Opportunity
SCOPE of WORK of the GDPWG

• **GDPWG AND THE CONTEXT**
  The WG will bring together the Government, UN agencies, Sectors, INGOs and CBOs at local level and align accessing better livelihood/self-reliance, address gender-based violence, mitigate protection risks, capacity building and promoting refugee rights, empowerment and protection in line with international/National laws and policies. This WG will support to create an enabling environment through protecting the Refugee including host community at Cox’s bazar.

• **GDPWG SCOPE OF WORK:**
  - Promote and protect human rights of GDP (both Rohingya and Host community)
  - Strengthen and mobilize networks + Enhance the capacities and technical expertise of community-based organizations
  - Nurture and support Hijra/transgender organizations
  - Identify structural discriminations against GDP.
  - Conduct action research in order to bridge the knowledge gaps
  - Advocate for addressing Gender Based Violence (GBV) against GDP and conduct evidence advocacy
  - Coordination and collaboration between NGOs and INGOs, sectors and sub-sectors of humanitarian responses
  - Mainstream GDP in the response and strengthen capacity of Sectors and camp-level actors
Research Finding – THE ONLY WAY UP: Monitoring and Encoring Diverse SOGIESC Inclusion the Humanitarian and DRR Sectors. The research conducted Edge Effect and UN Women.

- **35 Respondents**
  - **Gender Identity**
    - 17 Cisgender Men
    - 1 Cisgender Woman
    - 16 Trans Women

- **Sexual Orientation of Respondents**
  - Lesbian: 2.9%
  - Gay: 28.6%
  - Bisexual Man: 20%
  - Unspecified: 48.6%

- **Age Breakdown**
  - 18-25 years
  - 26-35 years
  - 36-45 years
  - 46+
  - Did not answer

- **Respondents felt that government relief workers did not treat them with respect**
- **91%**
  - Respondents agree that the crisis has negatively impacted their mental health

- **73%**
  - Nearly three-quarters of Rohingya respondents said they experienced violence during the crisis because of their SOGIESC

- **77% of respondents felt they received less support because of their SOGIESC**

Link: https://www.edgeeffect.org/publications/
Humanitarian Staff Views… (THE ONLY WAY UP - Research)

- Have not proper knowledge about Gender Diverse Population.
- There are sometimes resistance to the inclusion of gender diverse people within Gender programs.
- People don’t see it as this is the core part of someone’s identity.”
- Have no capacity building initiative on GDP issues in ongoing humanitarian program
- Humanitarians worker don’t know what is right or wrong for GDP
- Humanitarian staff in Cox’s Bazar keen to learn about diversity of SOGIESC.
- Have not data about GDP for discussing sector wise.
- poorly funding diverse SOGIESC program
- There is a lack of data, compared with people living with disabilities, where for example, surveys were done about the impact of COVID-19 that had not happened with people with diverse SOGIESC.
- Humanitarian staff expressed confidently that the Gender Diverse Working Group is a step in the right direction.
Humanitarian Staff Views... (Suggested some points- THE ONLY WAY UP - Research)

- A longer-term perspective is needed, with “staff to coordinate it here in Cox’s Bazar with a 5-year mandate”.

- Need to Donor commitment LGBTI supported organization.

- Needs to invest in capacity strengthening specialist humanitarian capacity sector wise.

- Need to add GDP issues in deferent sector and program.

- Protection Working Group and Gender in Humanitarian Action group would continue to expand opportunities for GDP.
Terminology:

**Lesbian:** Homosexual / lesbian women. A woman who feels sexual attraction to another woman or claims to be gay / lesbian.

**Gay:** Homosexual / gay. A man who is attracted to another man or claims to be homosexual / homosexual. The term is actually used to describe a person / persons who have experienced sexual attraction to the same sex.
Bisexual: This means that the person feels sexual attraction towards homosexuals and the opposite sex.

Transgender: A person who is born with a sexual identity does not usually feel comfortable accepting it. This type of person may or may not identify himself as the 3rd gender. This type of person can be male but can feel comfortable to dress, behave etc. like women, again in the same way this type of person can also be female but can feel comfortable to dress and move like a man. Whatever the case, these types of people may not always claim to be gay.
Terminology:

**Queer:** A person who wants to see the heterosexual structure in question. These include homosexuals / homosexuals, immature genitals, discomfort in the sexual identity of one's birth, etc. In some cases the term is offensive, where other groups / people similarly see the term as a metaphor for power because they think they are not heterosexual and in this view or in its continuation they do not really want to be bound by any specific terminology. They are not satisfied with the choice of words like homosexual / homosexual, heterosexual, etc.

**Intersex:** Immature genitals. A person who is born with bisexual physical characteristics. These types of people may or may not claim to be men or women.
Terminology:

**Asexual:** Asexual is the lack of sexual attraction to others, or a low interest in sexual activity. Some people consider asexuality to be their sexual orientation, and others describe it as an absence of sexual orientation.

ဗိုလုံးသောအောက်ခြောက်သည်အခြားသောအခါသူများအားလုံးသို့မဟုတ်လိင်မှုကိစစ်သည်လိင်ပိုင်းဆိုင်ရာသောအခြားထပ်ဝင်သည်ဟုဆပ်ခပ်သည်။

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Terminology:

**MSM:** Men who have sex with men; they may or may not identify as gay.

**MSW:** Male who sell sex in exchange of money compulsory gift. Therefore all MSW are MSM, but not all MSM sell sex.
Terminology:

**Kothi:** A kothi in the culture of the Indian subcontinent, is an effeminate man or boy who takes on a female gender role in same sex relationships, often with a desire to be the penetrated member in sexual intercourse. The word kothi is common across India, similar in use to the term Kathoey of Thailand.

**Hijra:** Those who identify themselves as belonging to a traditional hijra sub-culture and belong to the guru-chela hijra hierarchy. A more strict definition was employed such that only those hijra who not only identified themselves as hijra but were part of the hijra culture and within the guru-chela hijra hierarchy were included in this group.
DIFFERENCE BETWEEN

HIJRA

TRANSGENDER
SEXUAL ORIENTATION

**Sexual orientation** is an enduring pattern of romantic or sexual attraction (or a combination of these) to persons of the opposite sex or gender, the same sex or gender, or to both sexes or more than one gender. These attractions are generally subsumed under heterosexuality, homosexuality, and bisexuality, while asexuality (the lack of sexual attraction to others) is sometimes identified as the fourth category.

Exercise/စီးမှုများ/ခြုံမှန်များ

Myths and Realities/
အကျိုးဖြစ်ပါကမ်းများ/ချစ်ဖြစ်ပါကမ်းများ
Myth

We can change a person’s sexual orientation and gender identity.

আমরা একজন ব্যক্তির যৌন দৃষ্টিভঙ্গি এবং লিঙ্গ পরিচয় পরিবর্তন করতে পারি।

ကျွန်ုပ်တို့သည် လူတစ်ဦး၏လိင်စိတ်ဦးမှုနှင့်က ကခဏကိုဆခပ်င်းလွဲနိုင်သည်။
The World Health Organization has made clear that sexual orientation cannot be changed. Attempts to forcibly change the sexual orientation of lesbian, gay and bisexual persons are ineffective, harmful and may amount to torture.
Myth

Homosexuality is an illness, or a health issue.

সমকামিতা একটি অসুস্থতা, অথবা একটি স্বাস্থ্য সমস্যা।

ဖိုးအားလုံးအားလုံးသည် (အချင်း) ကြားများတစ်ခုကို သေချာသည်။
More than 20 years ago the World Health Organization explicitly clarified that homosexuality is neither a disorder nor a disease and has emphasized that homosexuality is a natural and non-pathological variation of human sexuality.
Myth

Depriving LGBTI people of their human rights can be justified on grounds of religion, culture or tradition.

এলজিবিটিআই মানুষকে তাদের মানবাধিকার থেকে বন্ধ করা ধর্ম, সংস্কৃতি বা আচারানুষ্ঠান ভিত্তিতে ন্যায়সঙ্গত হতে পারে।

LGBTI

Depriving LGBTI people of their human rights can be justified on grounds of religion, culture or tradition.
Discrimination on the basis of sexual orientation or gender identity can never be justified on any basis. Human rights are universal: every human being is entitled to the same rights, no matter who they are or where they live. History, culture and religion are all very important, but all States, regardless of their political, economic and cultural systems, have a legal duty to promote and protect the human rights of all. This includes the rights of all LGBTI people.

Religious freedom means the right to our beliefs, but it does not give us the right to impose our views on others, including by discriminating against or otherwise harming them.
Myth

LGBTI people are “not normal,” they are a creation of the modern age; their identity is a “trend.”

এলজিবিটিআইয়ের লোকেরা "স্বাভাবিক নয়", তারা আধুনিক যুগের সৃষ্টি; তাদের পরিচয় একটি "প্রবণতা"।
Sexual orientation and gender identity are not “current trends.” Almost every country has a recorded history of people whose identities and behaviours bear close resemblance to what we call today heterosexuality, bisexuality, homosexuality and transgender identity.

যৌন অভিযোজন এবং লিঙ্গ পরিচয় "বর্তমান প্রবণতা" নয়। প্রায় প্রতিটি দেশেরই এমন লোকদের একটি রেকর্ডকৃত ইতিহাস আছে যাদের পরিচয় এবং আচরণ যাকে আমরা আজকে বিষমকামিতা, উভকামীতা, সমকামিতা এবং হিজড়া পরিচয় বলেছি তার সাথে সাদৃশ্য রয়েছে।

လိင်စိတ်ြံ်ူမှုနှငို့်က လက်ိှိဆြတ်စ်း လ သည် မဟုတ်ပါ။ နိုင်ငံတိုင််းလိုလိုတ င််ဆန ို့ဆြတ်တ င်လိင်က ွဲ၊ လိင်တူြ စ်ခြင််း၊ လိင်တူဆက်ဆံခြင််းနှငို့်လိင်တူဆက်ဆံသူ ဟူ၍ ဆြေါ်ဆဝေါ်ဆသ အဆထ က်အထ ်းမ ်းနှငို့်အက ငို့်စရိုက်မ ်း တူည ဆသ လူမ ိ ်းမ ်းကိုမှတ် တမ််းတင်ထ ်းဆသ မှတ်တမ််းိှိသည်။
Myth

Homosexuality is a “Western phenomenon” or Diversity in sexual orientation has spread from the west as part of globalization.

সমকামিতা একটি "পশ্চিম ঘটনা"। অথবা বিশ্বায়নের অংশ হিসেবে পশ্চিম থেকে যৌন অভিমুখীতার বৈচিত্র্য ছড়িয়ে পড়েছে

মিথ

"明细性"
Claims that same-sex attraction is a Western practice are false. LGBTI people exist everywhere, in all countries, among all ethnic groups, at all socioeconomic levels and in all communities and have for a very long time.
LGBTI people are requesting “special rights.”

এলজিবিটিআই/জিডিপি লোকেরা "বিশেষ অধিকার" অনুরোধ করছে।

LGBTI/GDP လူများသည် "အထူးအြင်းအဆရ်"ကိုဆတင်းဆုံကသည်။
This is not true. There are no special rights being claimed by or for LGBTI people. They are entitled to enjoy the same human rights and fundamental freedoms to which every human being is entitled. Regrettably, these rights and freedoms are denied to millions of people around the world just because of their sexual orientation and gender identity. This is why there is a need to focus on ending discrimination on the basis of sexual orientation and gender identity and ensure the inclusion of all LGBTI people in development.

এটা সত্য নয়। এলজিবিটিআই দ্বারা বা তাদের জন্য কোন বিশেষ অধিকার দাবিদার হচ্ছে না। তারা একই মানবাধিকার এবং মৌলিক স্বাধীনতা ভোগ করার অধিকারী, যার প্রতিটা মানুষের অধিকার আছে। দুর্ভাজনকারণে, এই অধিকার এবং স্বাধীনতাটুকু সারা বিশ্বের ল ক্ষমতার কাছে তাদের তৈরি দৃষ্টিভঙ্গি এবং লিঙ্গ পরিচয়ের কারণে অস্বীকার করা হয়েছে। এজন্যই তৈরি দৃষ্টিভঙ্গি এবং লিঙ্গ পরিচয়ের ভিত্তিতে বৈষম্যের অবসান ঘটাতে এবং সমস্ত এলজিবিটিআই মানুষের উন্নয়নে অষ্ট্রুত্ত্বা নিষিদ্ধতা করার দিকে মনোনিবেশ করার প্রয়োজন রয়েছে।
All LGBTI people have HIV/AIDS.

সমস্ত LGBTI মানুষের এইচআইভি/এইডস আছে।

LGBTI ধর্মগুলিতের হিসেবে সাজায় উই ইয়াইএস আছে না।

REALITY

This is patently not true. HIV/AIDS affects heterosexual, cis-gender and LGBTI people, men and women, in varying degrees according to the characteristics of the epidemic. In some regions of the world it is primarily a problem among the heterosexual population.

What is true, however, is that stigma, discrimination and exclusion of LGBTI people leads to lack of access to information on HIV and safe sex practices, prevention, testing, treatment, care and support. This leaves LGBTI people (and in particular transgender women) at higher risk of contracting HIV. Reducing stigma, eliminating discrimination and exclusion and, consequently, increasing access to services, is the right way to address the HIV epidemic for all people, regardless of their sexual orientation or gender identity.

এটি স্পষ্টভাবে সত্য নয়। এইচআইভি/এইডস মহামারীর বৈশিষ্ট্য অনুসারে ভিন্ন ভিন্ন দিগ্রীতে ভিন্ন ভিন্ন যৌন, লিঙ্গ এবং এলজিবিটিআই মানুষ, পুরুষ এবং মহিলাদের প্রভাবিত করে। বিশ্বের কিছু অঞ্চলে এটি মূলত বিষমকামী জনসংখ্যার মধ্যে একটি সমস্যা।

তবে যা সত্য তা হল যে, এলজিবিটিআই লোকদের কল্পনা, বৈষম্য এবং বাদ দেওয়া এইচআইভি এবং নিরাপদ যৌন চর্চা, প্রতিরোধ, পরীক্ষা, চিকিৎসা, যত্ন এবং সহায়তা সম্পর্কিত তথ্যের অ্যাক্সেসের অভাবের দিকে পরিবর্তিত করে। এটি এলজিবিটিআই লোকদের (এবং বিশেষ হিজড়া মহিলাদের) এইচআইভি সংক্রমণের উচ্চ ঝুঁকিতে ফেলে দেয়। কল্পনা হ্রাস করা, বৈষম্য এবং বর্জন দূর করা এবং ফলস্বরূপ, পরিষেবাগুলিতে অ্যাক্সেস বৃদ্ধি করা, সমস্ত মানুষের জন্য এইচআইভি মহামারী মোকাবেলার সঠিক উপায়, তাদের যৌন দৃষ্টিভঙ্গি বা লিঙ্গ পরিচয় নির্বিশেষে।
LGBTI people may be more susceptible to mental illness and substance abuse because they are LGBTI, but because of the stigma they face.
Studies have found that LGBTI people may have higher rates of mental illness and substance abuse than the general population. However, this is not because they are LGBTI. Rather, it is because they face isolation, discrimination and persecution in their daily lives.

LGBTI ဆ ကတက စိတြက် မရ်းမ မႈ ပစ ပ်းတြ ်းသူဆ ကတထကအ ို ုငက်င ို့ ြံရၾကတ် ။ ဒါကလည်းသူတို့က LGBTI ပစ ဆန့်လို ႔ မဟုတပါဘူ်း ။ ဆန့်စဥ္ဝမ်းအထ ်းက်န၊ မြွဲ ြ်းဆကဆံြံရပ်း ိ ပစ ကခံရမႈ ဆဆကတၾက ငို့ ပွဲ ပစပါတ် ။

গবেষণায় দেখা গেছে যে সাধারণ জনগণের তুলনায় এলজিবিটিআই লোকদের মানসিক অসুস্থতা এবং পদার্থের অপব্যবহারের হার বেশি হতে পারে। তবে এটি এলজিবিটিআই হওয়ার কারণে নয়। বরং এ কারণেই তারা তাদের দৈনন্দিন জীবনে বিচ্ছিন্নতা, বৈষম্য এবং নির্যাতনের মুখোমুখি হয়।
Many LGBTI people do not share their diverse sex, sexual orientation or gender identity with us, but we are still working with them.
Young men who grow up in a household with only women are more likely to be gay.

Exercise

Older men who grow up in a family with only women are more likely to be gay.
Exercise

Gay and bisexual women generally act like men, and gay and bisexual men generally act like women.

সমকামী এবং উভকামী মহিলারা সাধারণত পুরুষদের মতোই কাজ করেন এবং সমকামী এবং উভকামী পুরুষরা সাধারণত মহিলাদের মতোই কাজ করে।
Exercise

You can tell someone is LGBTI by the way they look, dress, act or speak.

কারও চেহারা, পোশাক, অভিনয় বা কথা বলার মাধ্যমে আপনি কাউকে এলজিবিটিআই বলতে পারবেন।
Types of Gender Based Violence (GBV)....

- Verbal bulling though tuning abusive words
- Psychological/Emotional violence
- Deprivation from basic human rights
- Beatings, Physically Harassment
- Rape, blackmail
- Family Rejection
- Bullying at School
- Homelessness and Economic Hardship
- Pressure to Marry and to Maintain Heterosexual Relationships
- Lack of Access to Comprehensive Sex Education and Culturally Competent Health Care
- GDP young people in the Global South experience extreme hardship within their communities rendering it extremely difficult for them to lead healthy lives and become productive adults.
Currently Response to GDP by CSOs ...........

- Mental Health Counselling (PSS) session with community participants
- Advocacy with financial stakeholder in host and refugee community area.
- Include GDP issues in different kinds of awareness activity, education session
- Distribution of sexual health commodities.
- Health Care/Clinical services
- IEC/BCC material development and distribution
- Provide safe spaces as a part of community development and Motivation
- GBV case documentation, referral and mitigate
- HIV and Syphilis test and services
- Referral mechanism for care and support
- Relief and cash support particularly host GDP.
Bias: Bias is a natural inclination for or against an idea, object, group, or individual. It is often learned and is highly dependent on variables like a person’s socioeconomic status, race, ethnicity, educational background, etc. At the individual level, bias can negatively impact someone’s personal and professional relationships; at a societal level, it can lead to unfair persecution of a group, such as the Holocaust and slavery.

Some examples of biases relevant for the GDP mainstreaming:

Cultural bias. Cultural bias, also known as implicit bias, involves those who perceive other cultures as being abnormal, outlying, or exotic, simply based on a comparison to their own culture. Also known as implicit social cognition, this bias attributes the traits and behaviors of an individual to a larger group of people. Implicit bias creates attitudes or stereotypes that can affect or influence our decisions in an unconscious way. This unconscious bias affects many people because they are unaware of the origins of their baseline of thinking.

In-group bias. This type of bias refers to how people are more likely to support or believe someone within their own social group than an outsider. This bias tends to remove objectivity from any sort of selection or hiring process, as individuals tend to favor those who they personally know and want to help.

Fundamental attribution error. This bias refers to an individual’s tendency to attribute someone’s particular behaviors to existing, unfounded stereotypes, while attributing their own similar behavior to external factors. For instance, when someone on your team is late to an important meeting, you may assume that they are lazy or lacking motivation without considering internal and external factors like an illness or traffic accident that led to the tardiness. However, when you are running late because of a flat tire, you expect others to attribute the error to the external factor (flat tire) rather than your personal behavior.

Unconscious bias: unconscious biases, also known as implicit biases, are the underlying attitudes and stereotypes that people unconsciously attribute to another person or group of people that affect how they understand and engage with a person or group.
How bias, stigma, and discrimination can lead to poor health outcomes.

Hiding one’s sexual orientation or gender identity, living in fear of disclosure, being estranged from family and communities, and experiencing arrest, harassment, violence, and discrimination can all have short and long-term consequences on a person’s health and well-being.

- Bias
- Stigma
- Discrimination

- Isolation
- Poverty
- Unemployment
- Internalized stigma

- Loneliness
- Depression
- Substance use disorders
- Delay of care

- Functional limitations
- Disability
- Lower wellbeing
**HUMANITARIAN PRINCIPLES**

**Humanity:** Human suffering must be addressed wherever it is found. The purpose of humanitarian action is to protect life and health and ensure respect for human beings.

**Neutrality:** Humanitarian actors must not take sides in hostilities or engage in controversies of a political, racial, religious or ideological nature.

**Impartiality:** Humanitarian action must be carried out on the basis of need alone, giving priority to the most urgent cases of distress and making no adverse distinction on the basis of nationality, race, gender, religious belief, class or political opinion.

**Independence:** Humanitarian action must be autonomous from the political, economic, military or other objectives that any actor may hold with regard to areas where humanitarian action is being implemented.

**PROTECTION PRINCIPLES**

1. Avoid exposing people to further harm as a result of your actions.

2. Ensure people’s access to impartial assistance – in proportion to need and without discrimination.

3. Protect people from physical and psychological harm arising from violence and coercion.

4. Assist people to claim their rights, access available remedies and recover from the effects of violence and other abuses.
Barriers to Access Equal Opportunity …

- Level of social stigma, discrimination, rejections, domestic violence and HR violation
- Legal barriers including BPC 377 against GDP
- Gender expression, sexual orientation adolescent age and cultural/traditional norms
- Insecurity, assault, expulsion, denial of access to school, religious platform, public places, sports ground, camp level and relatives/families
- Knowledge gap on GDP and SRHR
- Negative perception about GDP in the society as well as rohingya community.
- Misconception about Hijra community in the mainstream society including media
- No proper guidelines to provide STI services to GDP who are below 18 years in particular Rohingya population
- No acceptance of the GDP in the family
- All service providers are not equally aware about GDP, Knowledge Gap
- Supporting environment in the camp.
Strategies to Ensure Equal Opportunity

- Mutual respect and social acceptance
- Appropriate health care provision with special attention on mental health and wellbeing issues
- Create more awareness and continue advocacy with different types of stakeholders inside and outside of the camp.
- Increase support to community-based organizations (Camp administration, Donor, & humanitarian Sectors/WG).
- Involve more organizations, i.e., Coordination who are working on Gender Diverse Population in CXB, Ukhiya and Teknaf
- Coverage and Outreach to more camps to ensure friendly service to the community
- Understand barriers and take action
- Confidentiality (audio visual)/documentation/office policy
- Confidentiality required at all levels regarding gender identity and sexual orientation
- Communication (verbal & non-verbal)
- Respect culture and locality including language
- Increase knowledge exchange program
- Support others colleagues/team/peer supervision
- Produce referral directory/develop referral link
- Report and follow up
Challenges with Communication

- Discomfort due to the **attitude** of the staff.
- Reluctance of individual to **share information** based on the gender, nationality or attitude of the staff or assumptions of the staff (see bias).
- **Discrimination or abusive language** on the part of the staff, especially if they are not trained.
- **Misunderstandings** or incorrect language.
- Breaches of **confidentiality** by interpreter. Homophobia
Basic Communication Tips

- **Listen** patiently. Follow, don't lead.
- Create a welcoming environment
- Find a **private space** in which to speak.
- Use inclusive language
- **Acknowledge** you have heard them and their experience.
- Learn from them and **practice active listening**: listen, then repeat what was said to ensure you understood accurately.
- **Do not promise** any action or assistance you cannot provide, or total confidentiality – the information may need to be noted in a file or shared with persons who can assist.
- Recall key **terms, concepts** and **stereotypes to avoid**, when working with less common cases.
Terminology to Avoid

• Sexual preference or behavior
• Way of life, lifestyle, agenda or choice
• Not normal, abnormal or unnatural
• Problem or condition
• She-man, he-she or tranny
• Hermaphrodite, homo, fag, faggot or dyke
Key Learning Points

- When someone says they are **LGBT** or **I**, respond by saying “thank you for sharing that with me.”
- **Ensure** you understand what someone means when they use LGBTI by asking, “what does that word mean to you?”
- **Refer** to a transgender person using their preferred name and pronoun. If you’re not sure what it is, ask. If you accidentally use the **wrong name** or pronoun, apologize.
- Do not ask **LGB people** if they have a preferred name or pronoun.
- Do not ask **someone** if they are LGBTI. Instead, create safe spaces.
UNITED NATIONS entities call on States to act urgently to end violence and discrimination against lesbian, gay, bisexual, transgender and intersex (LGBTI) adults, adolescents and children.

All people have an equal right to live free from violence, persecution, discrimination and stigma. International human rights law establishes legal obligations on States to ensure that every person, without distinction, can enjoy these rights. While welcoming increasing efforts in many countries to protect the rights of LGBTI people, we remain seriously concerned that around the world, millions of LGBTI individuals, those perceived as LGBTI and their families face widespread human rights violations. This is cause for alarm – and action.

Failure to uphold the human rights of LGBTI people and protect them against abuses such as violence and discriminatory laws and practices, constitute serious violations of international human rights law and have a far-reaching impact on society – contributing to increased vulnerability to ill health including HIV infection, social and economic exclusion, putting strain on families and communities, and impacting negatively on economic growth, decent work and progress towards achievement of the future Sustainable Development Goals. States bear the primary duty under international law to protect everyone from discrimination and violence. These violations therefore require an urgent response by
Meet Shewli, from Teknaf, brining voice to the voiceless through her work with Bandhu Social Welfare Society. Cox’s Bazar People standing with Rohingya refugees.

“Here we get different services for transgender people in the host communities. There are many sisters like me among the Rohingya community as well. They also need to get those services.

When I went to the field and met with them, they felt very happy. They thought there were no people to speak for them. Now they have their own people who can speak for them.”

Shewly Hijra, grew up in Teknaf, Cox’s Bazar District Community Mobiliser Bandhu Social Welfare Society
THANK YOU

Stay Healthy, Stay Safe...