WALKING THE TALK: SUPPORTING YOUNG LGBTIQ+ PEOPLE IN OUR COVID-19 ADAPTATION AND RESPONSE
Across the globe, there are increasing reports of LGBTIQ+ people experiencing COVID-19 related homelessness, food insecurity, health and mental health issues, and violence. COVID-19 relief may not reach LGBTIQ+ communities; for example people who do not have identification cards, who avoid those services due to fear of violence and discrimination, or whose lived experiences and needs are not understood or addressed by relief providers.

With many young LGBTIQ+ people forced to isolate in unsafe residences, often with their own families who may not accept their identities, young LGBTIQ+ people are at increased risk of SGBV, other forms of violence and abuse, underlying health conditions and limited access to services, as well as economic vulnerability. In addition, young LGBTIQ+ people and their relatives are often not in a position to seek assistance due to the lack of mobility and social capital, and with little or no access to many social and legal protections. Because of lockdowns and increased social isolation, many informal safety nets are also out of bounds, exacerbating risks for young LGBTIQ+ people.

The COVID-19 crisis is posing increasing risks to already vulnerable young LGBTIQ+ people. This briefing paper is for all Plan International staff, to help protect and empower these young people by including them in our response to crises and programme adaptations across the world.

“Because our physical spaces are so restricted, young queer people here turn to the virtual world for comfort...Before COVID-19, it was already challenging to maintain social connections. We have no safe and private spaces.”

– Syrian queer youth activist
UNDERSTANDING IMPACTS ON LGBTIQ+ CHILDREN, ADOLESCENTS AND YOUNG PEOPLE

LGBTIQ+ children, adolescents and young people are vulnerable to violence by family members and they are often forced out of the family home. They often receive minimal forms of social support, including being unwelcome in their local community or faith groups. Bullying at school leads many young LGBTIQ+ students to drop out, resulting in lower education outcomes and higher rates of illiteracy. Mental health issues and suicide are also more prevalent among young LGBTIQ+ communities. Discriminations by employers means that jobs are hard to find, especially in formal sectors, forcing many to fall into selling sex for survival. Many LGBTIQ+ people are highly economically vulnerable and lack essential savings to cope with the economic effects of lockdowns. Public services such as hospitals and police stations are not necessarily safe places; and LGBTIQ+ people suffer high levels of street-based violence.

These multiple systemic forms of discrimination mean that many LGBTIQ+ people start and go through life at a disadvantage. These challenges intersect with other harmful societal norms, causing additional challenges for young LGBTIQ+ people who are also girls and young women – are extremely marginalised because of their non-conformity to expected gender norms in the communities where they live. Our work in transforming societies means that we must tackle and address the gender dimensions and discriminatory social norms that affect young LGBTIQ+ people’s lives.

How do young LGBTIQ+ people fit into Plan’s programming and influencing?

At Plan International, through our gender transformative approach, we challenge the norms and beliefs that reinforce inequalities lived by young women, girls and other vulnerable children and groups throughout the world. Young LGBTIQ+ people – who are also girls and young women – are extremely marginalised because of their non-conformity to expected gender norms in the communities where they live. Our work in transforming societies means that we must tackle and address the gender dimensions and discriminatory social norms that affect young LGBTIQ+ people’s lives.

KEY TERMS

CIS/GENDER refers to a person who identifies with the gender or sex assigned to them at birth. Someone who does not identify as trans.

INTERSECTIONALITY is a term used to describe how different identities intersect with each other and may reinforce advantages, privileges, inclusion, or exclusion. Factors such as gender, age, ethnicity, abilities, sexual orientation, gender identity, expression, and sex characteristics are all elements of who we are. As a tool for analysis, intersectionality enables us to look at how these different identities affect a person’s lived experience. LGBTIQ+ people can experience multiple intersectional forms of discrimination; e.g., a trans person being homeless because of discrimination by potential employers against their gender identity and/or expression.

LGBTIQ+ refers to Lesbian, Gay, Bisexual, Trans, Intersex, and Queer/Questioning communities and people. Because LGBTIQ+ is structured around Western-centric language, in many places people may instead use their own terms and language to describe themselves or their communities. Each subgroup of the LGBTIQ+ acronym experiences unique vulnerabilities. The “+” refers to the fact that many other identities are not captured under the acronym itself. Sometimes, the term “diverse SOGI/ECS” is used instead of LGBTIQ+. This stands for people of diverse Sexual Orientation, Gender Identity and Expression, and Sex Characteristics. It is a generally broader, more inclusive term than LGBTIQ+, because it captures the fact that we all have SOGI/ECS. Please review our LGBTIQ+ page on Planet HERE and view our Plan International SOGI/ECS video HERE.

SGBV is sexual and gender-based violence. It refers to any act that is perpetrated against a person’s will and is based on gender norms and unequal power relationships. LGBTIQ+ people generally experience disproportionate rates of SGBV because of their non-conformity to gender norms.

DIVERSE FAMILIES

Amongst the communities that Plan works with, there are families with children who are LGBTIQ+, as well as families with LGBTIQ+ parents and caregivers. Families with one or more member who identifies as LGBTIQ+ may suffer discrimination and abuse from friends, neighbours, and the wider community. Parents of LGBTIQ+ children often need help in understanding how to foster a loving and protective environment at home. LGBTIQ+ parents often need support themselves, including in overcoming the discriminations they and their children face because of their identities. It’s important to remember that all families are diverse — and we help to embrace that by supporting LGBTIQ+ children, young people, and parents and caregivers in building inclusive environments at home!

KEY IMPACTS OF COVID-19 ON YOUNG LGBTIQ+ COMMUNITIES

ACCESS TO HEALTH:

Young LGBTIQ+ people experience compromised access to health services, including SRHR (particularly, access to HIV prevention and care, hormone treatments, and contraception) due to access issues related to stigma and discrimination, lack of legal identification documents, biases by healthcare providers, and lower socioeconomic status. As a result, they are more likely to have underlying health conditions that can increase risk of severe COVID-19 illness. Shortages of supplies and limitations in SRHR services during COVID-19 may further exacerbate their situation, as these concerns are not likely to be a priority when the health systems become increasingly occupied with preventing and responding to the outbreak. Pre-emergency access issues are likely to be exaggerated in the context of COVID-19.

ACCESS TO INFORMATION:

Marginalisation and invisibility of young LGBTIQ+ people compromises their access to information. In many countries, low education outcomes also mean that many young LGBTIQ+ people suffer from higher rates of illiteracy; further compounding their financial and social marginalisation. Location remoteness also affects people’s access to information. Young LGBTIQ+ people living in peri-urban and rural areas cannot access important information about COVID-19 as easily as those living in urban areas. Young LGBTIQ+ people’s access to digital and online information can be further compromised by lacking safe and private spaces, as well as risks of state surveillance in some places.

ACCESS TO HOUSING AND BASIC SERVICES:

Marginalisation often forces young LGBTIQ+ people to live in areas of cities with informal housing and limited services. Stigma and discrimination often hinder individual’s access to community WASH facilities (such as running water and toilets). Trans individuals can experience particular protection risks accessing shared bathroom facilities; stigma can affect young LGBTIQ+ women and trans men accessing menstrual hygiene kits; or young gay men experiencing bullying or violence accessing facilities. These barriers are magnified under COVID-19, compromising young LGBTIQ+ people’s abilities to protect themselves from the virus through sound sanitary and hygiene practices.

LIVELIHOODS

One assessment carried out by the CSO Sanggar Swara in the Jabodetabek area of Indonesia estimated that at least 640 trans individuals (of 1000 people consulted) had lost their source of livelihood since the beginning of the pandemic and were facing homelessness.

CSO PERSPECTIVE

Helém is providing life-saving services to young LGBTIQ+ people affected by COVID-19 in Lebanon. Director, Tarek Zeidan, explains that since the crisis, Helém has found its functions shifting from advocating around long-term change of social and legal norms to providing humanitarian relief to an increasingly marginalized and vulnerable community: “Look at how COVID has affected the work of NGOs – it’s made everything so much more difficult”. Tarek Zeidan says getting information to hard-to-reach communities is essential: “Helém is active in communicating messages surrounding coronavirus to the community”, and that is just one activity along with food deliveries, medical interventions, data collection and psychosocial support: “still, the need is great. We lack the resources and capacity to cope with the growing number of cases. A complete humanitarian catastrophe in the queer community in Lebanon is only a couple of months away.”


7 Trans is an umbrella term for people whose gender does not match the sex they were assigned at birth. Trans women are women who were assigned male at birth, but identify as female. Trans men are women who were assigned male at birth, but identify as male.

JOBS AND HOMELINESS:

“WE’RE RECEIVING SO MANY REQUESTS FOR PROTECTION, SIMPLY BECAUSE PEOPLE ARE BEING BEATEN BY THEIR PARENTS FOR BEING LGBTIQ+.”

– Director of an LGBTIQ+ CSO in Lebanon

Discrimination relegates many young LGBTIQ+ people to work in informal sectors, where job losses due to movement restrictions have been catastrophic. This includes street-based work and begging which has impacted young trans women and adolescents in particular. Few LGBTIQ+ people have savings, resulting in large surges of homelessness and food insecurity. Young LGBTIQ+ people lack social support, including informal community-based social structures that would otherwise provide security to them. Discrimination, exclusion and violence experienced by young LGBTIQ+ people undermine their capacity to develop resilient livelihoods and heighten their vulnerability in shocks. In this context, cash and voucher assistance may be a decisive measure in supporting young LGBTIQ+ people.

Job losses and homelessness:

Isolation and lockdown rules mean that young LGBTIQ+ people cannot escape violent and unsupportive family homes. Parents of LGBTIQ+ children are often the perpetrators of violence. Job losses have led many young workers to return to cities from smaller town and villages, where they are at greater risk of SGBV. Safe spaces where they could previously express their gender identities or meet friends are now off limits. The sudden loss of community is having dire impacts on young LGBTIQ+ people’s mental health.

VIOLENCE AT HOME:

On 13 April, a gay Ugandan refugee took his own life outside the UNHCR Branch Office in Nairobi, Kenya. Young refugees identifying as LGBTIQ+ are in precarious positions, with many indicating they would prefer to return to their countries of origin – and risk persecution – than struggle with local populations over access to basic necessities in countries of asylum.

VIOLENCE

...
LGBTIQ+ organisations and communities are working on COVID-19 response across all regions where Plan International operates. To take a couple of examples...

**MEESAH**

Many LGBTIQ+ CSOs that have a focus on human rights say they are “branching out into humanitarian support” during this crisis. One such CSO in Lebanon noticed that homelessness and food insecurity was on the rise amongst young people, due to loss of livelihoods. To get food to young people they’ve partnered with a local relief agency, and the CSO is collecting and delivering food baskets. The relief agency staff have never been sensitised on LGBTIQ+ issues and the CSO says that “sustainable and safe livelihoods” during this crisis. One such CSO says that “sustainable and safe livelihoods” during this crisis, “Ours was the first aid the people got, and many of them were struggling with basic needs. To receive support. In Argentina, an expansive network of CSOs working with LGBTIQ+ communities have organised to distribute food and WASH items to young LGBTIQ+ people affected by COVID-19 lockdowns. Leveraging their access points to otherwise hard-to-reach communities, the network is providing lifesaving assistance to young people, all of whom were struggling while waiting for government support. As one CSO representative explained, “Ours was the first aid the people got, because the government took a long time to reach these communities.” The network is effective because of the solidarity and pre-existing connections of these local organisations.

**ROAH**

Many young LGBTIQ+ people have lost their jobs in informal sectors and are struggling to cover their basic needs. Compounding this are lengthy delays in government assistance programmes, meaning vulnerable communities are waiting longer periods to receive support. In Argentina, an expansive network of CSOs working with LGBTIQ+ communities have organised to distribute food and WASH items to young LGBTIQ+ people affected by COVID-19 lockdowns. Leveraging their access points to otherwise hard-to-reach communities, the network is providing lifesaving assistance to young people, all of whom were struggling while waiting for government support. As one CSO representative explained, “Ours was the first aid the people got, because the government took a long time to reach these communities.” The network is effective because of the solidarity and pre-existing connections of these local organisations.

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**DO’S AND DON’T’S – DO NO HARM AND RISK MITIGATION**

<table>
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<tr>
<th>DO’s</th>
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<tr>
<td>Establish relationships with and support CSOs and community networks that are already undertaking community-based responses. In supporting those efforts, ensure that LGBTIQ+ people remain in leadership roles.</td>
<td>Start providing services to LGBTIQ+ people without consulting local LGBTIQ+ organisations to assess local needs and conditions.</td>
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<tr>
<td>Understand that gay, lesbian, transgender, intersex, queer and questioning young people may have different issues and require different support.</td>
<td>Assume that all LGBTIQ+ people have the same needs and issues.</td>
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<td>Work with young LGBTIQ+ people to establish safe spaces at Plan offices or in other community spaces.</td>
<td>Expose young LGBTIQ+ people by hosting mixed meetings with the wider community.</td>
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<td>Include LGBTIQ+ people in data collection and analysis and develop specific protocols for managing sensitive LGBTIQ data.</td>
<td>Put LGBTIQ+ people at risk through collection, methods that may ‘out’ them, or put them at risk.</td>
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<tr>
<td>Undertake inclusive programming throughout all stages of crisis response by ensuring (where safe) that young LGBTIQ+ people are actively engaged in assessments, design, implementation and evaluation.</td>
<td>Assume that the needs of young LGBTIQ+ people are automatically taken into account through applying an Age and Gender Diversity/Mainstreaming approach. Most such tools do not specifically address LGBTIQ+ issues.</td>
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<td>Ensure staff are sensitized on LGBTIQ+ issues, and take advantage of Plan resources such as Adolescents in All – Their Diversity and We Are Diverse.</td>
<td>Not giving enough time and space for dialogue and understanding of LGBTIQ+ issues. The topic requires ongoing engagement.</td>
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<td>Work with partners and LGBTIQ+ organisations to establish referral mechanisms that are safe.</td>
<td>Assume that services set up for other marginalized people will be okay for LGBTIQ+ people as well.</td>
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<td>Understand that LGBTIQ+ people may not make use of official responses or services, for fear of violence or discrimination, and alternative methods may be needed to build trust or provide support.</td>
<td>Assume that because they’re not visible, they don’t exist. Many services to young LGBTIQ+ people are offered under the banners of women’s empowerment organizations, support for sex workers, HIV prevention programmes, and legal advocacy groups.</td>
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<td>Consider the needs of LGBTIQ+ families by providing positive support to parents in fostering loving attitudes towards their LGBTIQ+ children, and by supporting parents and caregivers who identify as LGBTIQ+.</td>
<td>Make gendered assumptions in designing programs about what a family “should” look like – families are diverse, and so are their needs and strengths.</td>
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WAYS TO INCLUDE YOUNG LBTIQ+ PEOPLE IN COVID-19 RESPONSE AND ADAPTATION

INCLUSION ACROSS THE PROGRAMME CYCLE

01 PREPARATION
Identify cultural, gender, social and other norms that negatively affect young LBTIQ+ people’s access to services

02 INITIAL RESPONSE
Ensure rapid need and other assessments are inclusive of young LBTIQ+ people and their families

03 MITIGATION
Consider the particular access issues and needs of young LBTIQ+ people and their families, and integrate these into programme delivery

04 RECOVERY
Engage the strengths of young LBTIQ+ people, their families, and the organisations that support them in programme design and implementation

YOUNG LBTIQ+ WOMEN AND GIRLS ARE … YOUNG WOMEN AND GIRLS!
WE MUST INCLUDE THEM IN PROGRAMMING, INFLUENCE AND EMERGENCY RESPONSE.

Plan International is committed to making lasting impacts on the lives of the most vulnerable and excluded children, while creating greater equality for girls in society through our gender transformative, rights-based programming. Lesbian, bisexual, trans and intersex young women and girls suffer many different types of marginalisation; not only because they do not conform to the societal expectations, but also because they are young women and girls and therefore may face additional discrimination. Many of them are “invisible” in families and society, and do not feel safe asking for help. It’s therefore up to us to actively include them in our programmes by working closely with local CSOs and communities to identify and integrate their needs and strengths into our programmes.

It’s important to ensure that young LBTIQ+ women and girls are included in gender transformative programming. When considering how cultural, gender, and social norms affect the lives of young women and girls in the places where we work, we must look beyond the binary to ensure the rights, needs and strengths of young LBTIQ+ women and girls are included in our analysis. The challenges a straight, cisgender girl faces in the field may be amplified for a young woman who identifies as a lesbian, or is intersex, or trans. To protect and empower these young women and girls, gender analyses need to be inclusive.

How?

Don’t assume that all LBTIQ+ organisations are safe spaces or effective conduits to LBTIQ+ women and girls. Some of these organisations place may more emphasis on issues for specific groups, such as young gay men. Young LBTIQ+ women may not feel welcome in those spaces, and might set up their own organisations, or work through feminist or other groups.

Discrimination frequently precludes young LBTIQ+ women from having meaningful access to health options. In many places, the stigma associated with unmarried young women accessing SRHR services poses serious risks to women’s health. Many young LBTIQ+ women and girls have specific SRHR needs and lack access to crucial information. SRHR messages and services should be delivered to these communities, and LBTIQ+ women should be actively engaged in programmatic design, delivery, and feedback cycles.

There are challenges identifying and reaching out to young LBTIQ+ women because they lack visibility in community spaces. Work with local organisations offering specific support to young LBTIQ+ women and girls and ensure that services expressly accommodate their needs.

ALL OF THE PILLARS OF PLAN’S COVID-19 RESPONSE CAN BE INCLUSIVE OF US!
**WATER, SANITATION & HYGIENE**

Young LGBTIQ+ people may have limited access to WASH, making hand-washing and other advice hard to implement. In some contexts, LGBTIQ+ people may not use public toilets for fear of violence or discrimination, falling back on open defecation. Community water-points may also be sites for violence or discrimination.

Ways to be LGBTIQ+ inclusive:

- Identify cultural, gender, and other norms associated with access to WASH. Consider the gendered ways in which people experience different WASH needs. For example, protection concerns associated with young trans individuals accessing bathroom facilities; young lesbian and bisexual women and trans men accessing menstrual hygiene kits; or young gay men who may experience bullying or violence accessing facilities. Consider how family home dynamics might further negatively affect young LGBTIQ+ people’s access to WASH; and support parents in providing enabling environments for young people’s WASH needs.
- Ensure needs assessments include WASH requirements amongst young LGBTIQ+ communities, especially those living in shared accommodation facilities, camps, and informal settlements. To mitigate protection risks, engage LGBTIQ+ CSOs or peer researchers, and seek do no harm guidance for data collection and management.
- Develop solutions to these challenges through meaningful dialogue with affected communities and LGBTIQ+ CSOs, noting these CSOs may not have technical experience in areas such as WASH and may need support to work with their communities on these issues. This a great way to create mutual knowledge exchange and constructive partnerships!
- For WASH programmes, establish participatory approaches with LGBTIQ+ communities and CSOs including in the development and delivery of COVID-19 hygiene messaging. Ensure comprehensive gender mainstreaming by accounting for the preferences of young LGBTIQ+ people in WASH facilities and services.

**CHILD PROTECTION**

LGBTIQ+ children and young people face trauma, exploitation and abuse; including specific forms of SGBV, barriers accessing services, lack of access to safe shelter, and distinct psychosocial needs. They are often “invisible” in communities and are at risk of being missed by identification procedures and services.

Ways to be LGBTIQ+ inclusive:

- Ensure that SGBV risk assessments include analyses of specific risks for LGBTIQ+ children, adolescents and young people. Rapid needs and other assessments should strive to be inclusive of young LGBTIQ+ communities.
- Prevention and response mechanisms for SGBV need to have the sensitivity and capacity to deal with young LGBTIQ+ survivors. In practice, this means maintaining a critical approach to language (e.g. do the services only target heterosexual and cisgender women?); establishing and maintaining community-based SGBV prevention and response mechanisms with LGBTIQ+ focused CSOs and community figures; and ensuring the voice of young LGBTIQ+ people in the design of SGBV programmes.
- Mobile and/or remote protection services, including case management services, should reach young LGBTIQ+ communities. Many young LGBTIQ+ people are reluctant to access community-based services where there is a risk of exposing themselves to violence, harassment or abuse. Mobile services, therefore, should be proximate and accessible to young LGBTIQ+ people where they live.
- To help foster loving and protective environments at home, identify and include parents and caregivers of LGBTIQ+ children in parenting support programmes. Parents of LGBTIQ+ children can find support in one another and can work together to create more loving communities for their children.
- Applying the do no harm principle, sensitization programmes in the community against the stigmatisation of individuals in COVID-19 can include a component clarifying misconceptions about LGBTIQ+ people.
- Keep in mind that, due to discrimination, many young LGBTIQ+ people will be experiencing profound mental health issues. Work with psychosocial support services to develop referral pathways to provide safe and dignified care. Phone or online-based psychosocial support services may be the most appropriate. Support the maintenance of social connectivity by providing data and phone credits to young LGBTIQ+ people. Enabling technology can serve as a lifeline for young LGBTIQ+ people during isolation.

**HEALTH (INCL. SRHR)**

In many countries young LGBTIQ+ people already face discrimination in accessing health information and services. This discrimination will increase and make LGBTIQ+ people particularly at risk of suffering serious illness or death as a result of COVID-19 or underlying health conditions.

Ways to be LGBTIQ+ inclusive:

- Ensure that all COVID-19 health care is rights-based and that privacy, confidentiality and dignity are maintained. Frontline staff should receive training on challenges that LGBTIQ+ people experience when accessing health care and be aware of specific needs of young LGBTIQ+ people, such as transition care for trans and intersex people.
- It may be possible to mitigate protection risks for young LGBTIQ+ people accessing health facilities by introducing specific hours or access points at facilities.
- Ensure community-based health, including working with Community Health Workers, and mobile SRH and SGBV services are supported to be inclusive and non-discriminatory towards LGBTIQ+ adolescents and young people.
- Local CSOs may provide some health care services, including SRHR, amidst COVID-19 lockdowns. Continued access to SRHR information and services is essential for LGBTIQ+ people. Engagement with local CSOs may assist Plan offices to identify effective communication channels, through CSOs themselves, social media or other means.
- Given the particular risks and vulnerabilities young LGBTIQ+ people face in accessing SRHR, include diverse families in SRHR education. Integrate this as a pillar of support for parents to LGBTIQ+ children and adolescents.
- Because of access issues related to discrimination, many young LGBTIQ+ people don’t have access to public health information, preventative measures, and testing stations. Frontline health workers can bridge this critical divide by delivering services, as well as general health education, to LGBTIQ+ communities.

**EDUCATION (INCLUDING EARLY CHILDHOOD DEVELOPMENT)**

Young LGBTIQ+ people may already experience violence or discrimination at school by their peers and in some cases also by teachers, may drop out early, or be withdrawn by families. If education platforms shift to online learning, several young LGBTIQ+ people may experience access issues, but could also benefit from a safer learning space with less violence. Where educational support is provided in shelters young LGBTIQ+ people may not be able to take part and may experience violence or discrimination from family members.

Ways to be LGBTIQ+ inclusive:

- Considering the unique protection situation of many young LGBTIQ+ people living at home, parenting intervention models may not apply to them. Coordinate with education partners and local CSOs to ensure young LGBTIQ+ people have continued access to education, and are included in education response plans; as well as working closely with protection colleagues to mitigate safety risks in learning environments. Where young LGBTIQ+ people are facing issues accessing education because of discrimination within the family, develop a support and action plan that involves their parents/caregivers.
- Providing data/internet connection, phone credit, and other school materials to young LGBTIQ+ people.
- Remember that rates of illiteracy amongst young LGBTIQ+ people may be lower, and most will require additional support from education partners. Establish close working relationships with communities and individuals and encourage young LGBTIQ+ people by providing targeted support to overcome their individual needs, including assessing the coping strategies of young LGBTIQ+ people to promote their well-being.
- For vocational and livelihood programmes, establish comprehensive participatory approaches with LGBTIQ+ communities in programme design. Ensure comprehensive gender mainstreaming by taking into account the preferences and capacities of young LGBTIQ+ people. Because of safety issues, many LGBTIQ+ people cannot participate in many vocational/livelihood courses and require different safe spaces to learn and work.
- Online learning platforms may reduce bias and bullying against LGBTIQ+ students in schools. These shifting platforms could encourage different, and potentially safer, types of learning. To assess this, ensure the perspectives of young LGBTIQ+ people are captured throughout all stages of the education crisis response.
WAYS TO BE LGBTIQ+ INCLUSIVE:

» In designing cash and social protection programmes, ensure there is a clear purpose/outcome to the intervention, e.g., self-reliance; cash for protection outcomes; cushion for livelihoods support, etc. Assess whether this is a realistic objective with the specific protection concerns of young LGBTIQ+ people in mind. Consult closely with communities in designing these objectives.

» Prioritise CBIs or other forms of in-kind assistance for vulnerable young LGBTIQ+ people and their families. Where possible, use electronic cash transfers to mitigate protection risks. Use established guidance on coordinating cash programmes for LGBTIQ+ people13.

» Ensure the existence of a comprehensive post distribution monitoring system to measure the impact of cash and to capture any associative protection risks for young LGBTIQ+ people receiving assistance.

» Ensure that cash assistance mitigates protection risks including dependency and always include a comprehensive case plan that takes into account the individual needs and capacities of young LGBTIQ+ people.

» Where young LGBTIQ+ people are living with parents/caregivers, ensure that cash is delivered to the whole household, and that the parents/caregivers are a part of the case plan. Assistance can provide a good opportunity for transformative change in households.

WAYS TO BE LGBTIQ+ INCLUSIVE:

» Support CSOs and community networks that are already undertaking community-based response. In supporting those efforts, ensure that young LGBTIQ+ people can actively participate in the response and remain in leadership roles.

» Not every context where Plan International works has a presence or visibility of LGBTIQ+ focused CSOs. Plan International can support the work of other community-based initiatives, including intersectional feminist organisations, sex worker alliances, and health organisations that may already be supporting young LGBTIQ+ people.

» Initiate and strengthen partnerships with local LGBTIQ+ organisations14. Understand the needs of the communities with which these organisations are working and coordinate on programme delivery. Work with these CSOs to identify mechanisms through which Plan International can safely engage with young LGBTIQ+ people. Where safe, include families, parents and caregivers in these relationships as much as possible!

» Consult young LGBTIQ+ people to identify best practices and strategies that successfully responded to their needs to document and share lessons with communities, with Plan International and the wider humanitarian sector. Engage young LGBTIQ+ people throughout the programme cycle, including during participatory assessments, programme inception and design, implementation and evaluation.

» Take an intersectional approach and ensure the availability of key information in multiple local languages, including for those with low or no literacy, and people with visual and hearing disabilities. Disseminate this information through established channels with LGBTIQ+ communities, such as through local CSOs or other community structures.

13 UNHCR, Cash Assistance and Gender; RefugePoint (2018) Disaggregating LGBTIQ Protection Concerns: Experiences of refugee communities in Nairobi
14 Pathways to Partnering with Youth Organisations may be of help! Click HERE
ADOLESCENTS IN ALL THEIR DIVERSITY

This module is Plan International’s first ever module on Sexual Orientation, Gender Identity, Gender Expression, and Sexual Characteristics (SOGIESC) and support for adolescents who are lesbian, gay, bisexual, trans, intersex or questioning (LGBTIQ+). It is for Plan International staff and part of the Planting Equality 2.0 action learning programme. It uses a co-facilitation approach – combining Plan staff (who have with strong understanding of the organisation’s commitments and procedures) and representatives of LGBTIQ+ organizations (who bring their expertise and lived experience of the subject).

WE ARE DIVERSE!

This module is part of Champions of Change and builds on the programme’s core modules. ‘We Are Diverse’ is based on the belief that, to build understanding about SOGIESC and to promote the rights of LGBTIQ+ young people, action is needed at all levels. This includes individuals, families, communities and society. The module mostly focuses on the first level - individuals. It aims to equip young people to explore their own attitudes to SOGIESC. This is important for all young people, such as whether a young woman identifies her sexual orientation as heterosexual, lesbian or bisexual.

About Plan International

We strive to advance children’s rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it’s girls who are most affected. As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children. We support children’s rights from birth until they reach adulthood, and enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge. For over 75 years we have been building powerful partnerships for children, and we are active in over 70 countries.