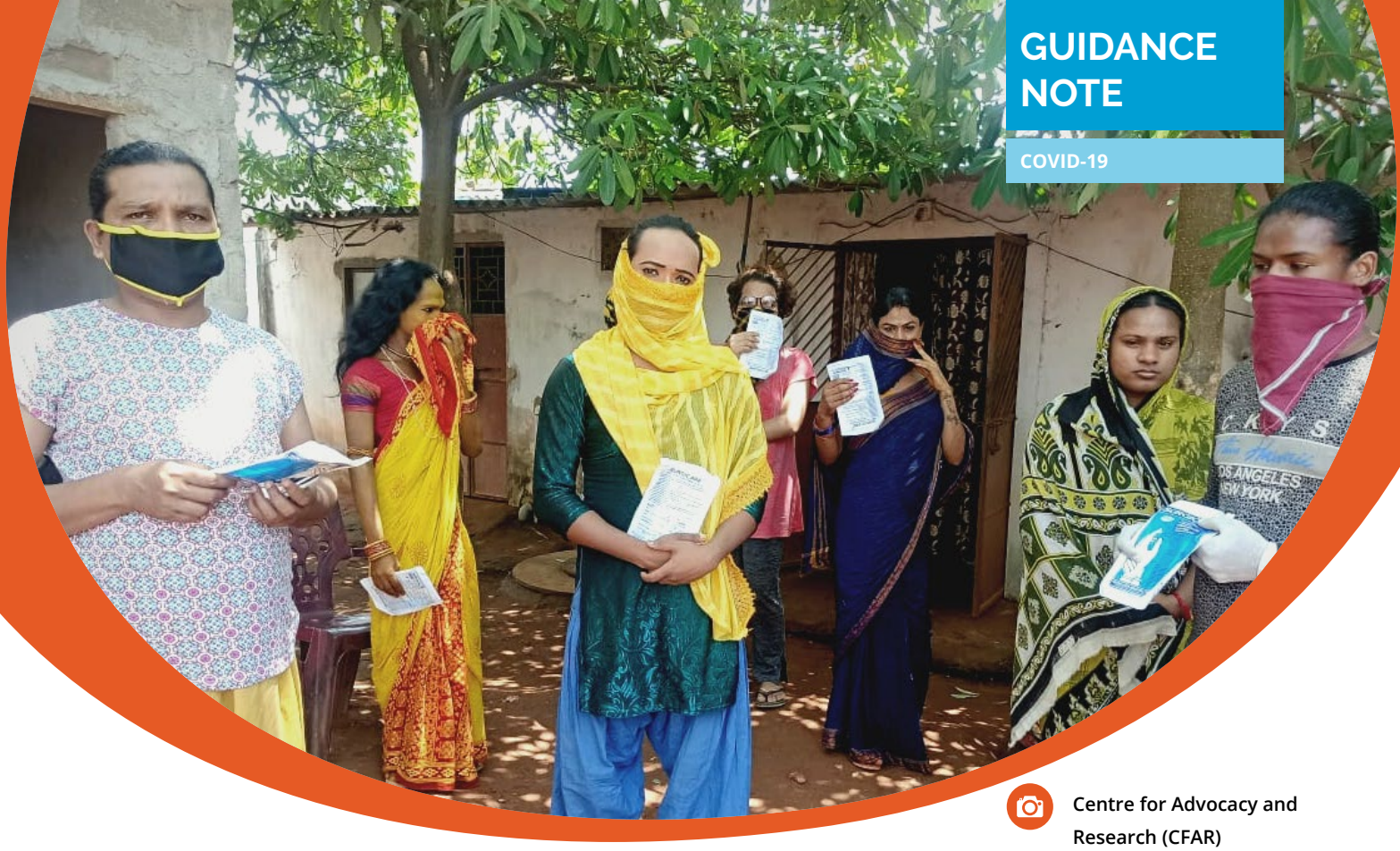
GUIDANCE NOTE

COVID-19



Centre for Advocacy and Research (CFAR)

Sexual and Gender Minorities and COVID-19: Guidance for WASH delivery

Actively supporting Sexual and Gender Minorities so that they are not left behind in COVID-19 WASH responses

Melbourne / June '20

Introduction

During COVID-19, the discrimination and exclusion faced by sexual and gender minorities (SGM) has been amplified. New challenges now exist in accessing relief and adhering to public health advice. Organisations undertaking Water, Sanitation and Hygiene (WASH) responses to COVID-19 – or activities where WASH is part of a broader organisational response – can take specific measures to address these challenges. Furthermore, **this crisis provides an opportunity for transformation:** organisations should reflect upon engagement with SGM communities, and ask how recovery and post-COVID-19 programs can better address the rights, needs and strengths of SGM communities.

This guidance note will cover:

How SGM inclusive is your program?

Root causes of discrimination, violence and exclusion faced by SGM communities

Key considerations for SGM inclusion

Additional actions for specific WASH and COVID-19 interventions including:

- WASH in emergencies/rapid response
- Hygiene information and communication
- WASH in communities
- WASH and public health service-providers

Water For Women

edge effect

Australian Aid

A Note on Acronyms

SOGIESC = *Sexual Orientation, Gender Identity and Expression and Sex Characteristics*

SGM = *Sexual and Gender Minorities*

CSO = *Civil Society Organisation*

There are different terms used within the area of diverse sexual orientation, gender identity and expression and sex characteristics (SOGIESC).

The Water for Women fund is using the term sexual and gender minorities (SGM) when referring to people, a phrase that is not intended to minimise significance of these issues, but rather to draw attention to structural power imbalances, agency and the need for transformation.

The Water for Women Fund sees an **intentional focus on 'Do No Harm' (DNH) approaches as a critical way of supporting an ethical approach to inclusion.** This includes addressing the risk of backlash that comes with supporting representation and decision-making of women and marginalised groups to ensure that no one is left behind in WASH programming.

Checklist: How SGM inclusive is your program?

- ☐ Has your organisation sought guidance from local SGM Civil Society Organisations (CSOs) or other community based organisations working directly with the SGM community?
- ☐ Has your organisation sought technical support for engaging with sexual and gender minority communities?
- ☐ Are your staff and partner staff trained to work with SGM communities?
- ☐ Are SGM community members involved in establishing needs and designing rights and strengths-based responses?
- ☐ Has your organisation developed ways of engaging with SGM community members that effectively mitigate risk and are consistent with Do No Harm principles?
- ☐ Has your organisation developed an understanding of specific risks that SGM communities are living with in this pandemic?
- ☐ Is provision of basic WASH equipment and supplies reaching SGM community members who do not feel safe attending relief distribution centres or public WASH facilities?
- ☐ Is WASH messaging and community training provided in ways that include SGM communities?
- ☐ Is your advocacy inclusive of SGM community rights, strengths and needs?
- ☐ Is your COVID-19 advocacy to donors, governments, CSOs and communities inclusive of the rights, needs and strengths of SGM communities?
- ☐ Is your public health messaging designed to reduce stigmatisation of SGM and other marginalised communities?

Left and page one: a group of ten transgender people from Kalinga Studio Kinnar Basti, Bhubaneswar, India are being supported by Water for Women Fund partner, CFAR. The COVID-19 lockdown is impacting their usual sources of income, so when they decided to sell vegetables to make a living, CFAR was there to help. CFAR advised them on precautionary measures for purchasing and handling vegetables, and preventative behaviours such as frequent hand sanitisation, wearing gloves and masks and maintaining social distancing / Photo credit: CFAR / Samir Ranjan Dash

Pre-emergency marginalisation

In order for SGM-focused COVID-19 relief and recovery support to be effective, safe and dignified, **WASH organisations need to consider the root causes of discrimination, violence and exclusion faced by sexual and gender minorities**. Pre-emergency structural inequalities lead to more severe and lengthy impacts of COVID-19 as illustrated in the table below.

	Structural inequality	COVID-19	Consequence
	Pre-existing health conditions due to lack of access to safe and dignified health care.	+	Lower likelihood of seeking healthcare during this crisis.
	May undertake street-based work as a result of discrimination in families, schools or other employment, or rely upon charity, and have little or no savings.	+	Loss of livelihoods leading to higher risk of homelessness, moving into crowded and temporary accommodation, or return to potentially unsafe family homes.
	Lack of legal recognition of their gender identity may manifest in lack of government-issued ID cards, or through discrimination by officials and relief workers.	+	Discrimination at health facilities or exclusion from aid delivery. Unwillingness of SGM people to attend medical facilities (or undergo testing), or to attend relief distribution points.
	May be homeless or in areas with inadequate WASH facilities, such as informal and crowded housing, or experience stigma when accessing community water points.	+	Public health messages that emphasise hand hygiene may not be followed, due to lack of WASH services, housing arrangements and the need to earn money.
	Have experienced violence or discrimination at the hands of police, community members and/or family.	+	Being turned away from aid distribution or choosing not to attend due to safety fears, resulting in lack of support and information.
	May be cut off from family and other social coping mechanisms, or be living as part of a small isolated community	+	Higher chance of mental health issues (due to the issues/ conditions outlined above), and low chance of accessing SGM inclusive mental health care services.

> “ It is only with COVID-19 that others have started viewing each other with suspicion; **transgenders have always been viewed with disgust and derision in public, for no fault of ours.**”

Wajid Ali Shah as Namkeen, Assistant Gender and Social Inclusion at International Rescue Committee (IRC) - a Water for Women Fund partner

> “ They are **terrified of ending up in hospitals, in isolation units where their gender identity is not respected, where they have** no access to any kind of support, which is amplified under quarantine conditions with levels of transphobia high, and the possibility of leaving basically being zero.”

Tatiana Vinnichenko, in Outright (2020)

Transgender staff member of Water for Women Fund partner, IRC, Wajid Ali Shah as Namkeen celebrates International Women’s Day #EachforEqual / Photo credit: IRC Pakistan

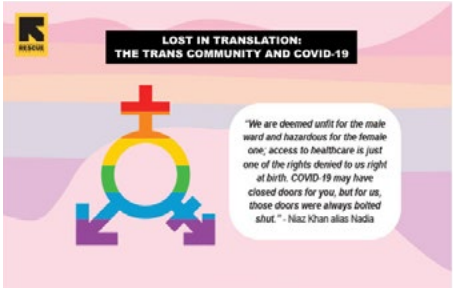
Nadia is a skilled tailor. With cancelled social events, unreliable incomes, and a recession looming, no one seeks her services now. Fawad (alias Wafa) is a performer. Without an audience, even the pennies received as tips are no longer forthcoming. For Sapna, rock bottom meant being forced to beg, but with the lockdown, even that source of income has vanished because there is no one on the streets to implore / Photo credit: Lost in Translation: the Trans community and COVID-19 (IRC Pakistan)

Key considerations for SGM inclusion

We are here, but we have many reasons to be cautious, and may stay out of sight

Much of the impact on sexual and gender minorities may go unnoticed, as data collection by governments and aid organisations often fails to include SGM people and issues. But we are in every community; and we are very likely to be part of your programs even if you are not aware of that. Many members of sexual and gender minorities have learned to be very cautious about sharing this aspect of themselves, due to criminalisation, discrimination from officials and service providers and community stigma. Private and informal networks are common within the community, as people seek to survive, and make sense of their lives together. While there are significant practical and protection issues to overcome in learning about issues faced by SGM community members, the ongoing lack of qualitative or quantitative data reduces the likelihood that the needs of SGM people will be acknowledged, understood or acted upon.

There are safer ways of engaging, for example, through peer-research methods, close engagement with SGM organisations, and seeking advice on specific adaptations of do no harm and research ethics frameworks.



In these challenging times, those most vulnerable in communities are even more at risk. What many parts of the community are experiencing for the first time through COVID-19, has long been the reality for sexual and gender minorities / '*Lost in Translation: the Trans community and COVID-19*' authored by Mariam Humayun, Communication and Media officer IRC with the support of Wajid Ali Shah, Assistant GSI, IRC

Private and informal networks are common within the community, as people seek to survive, and make sense of their lives.

We will not be impacted uniformly

A one-size fits all response strategy by WASH and other agencies is likely to leave some people behind. The impacts outlined above will not be felt uniformly across sexual and gender minorities. For example, women within sexual minorities (including lesbian, bisexual, transgender and intersex women) may be doubly impacted: both as women, and on the basis of their diverse gender identity, sexuality, or sex characteristics. For a lesbian this means that they may experience discrimination or violence on the basis of presumptions about the gendered roles of women, and they may experience discrimination or violence because they are not heterosexual. Some SGM people may be less deeply impacted, while those who experience intersecting marginalisation on the basis of ethnicity, class, disability or other factors may be excluded in additional ways. An effective and dignified response to SGM issues requires:

1. Awareness of the different experiences of people with different sexual orientation, gender identities, gender expression and sex characteristics.
2. A response strategy that takes into account differences in needs, outreach methods, CSO specialisations, and more.

Work with SGM Civil Society Organisations

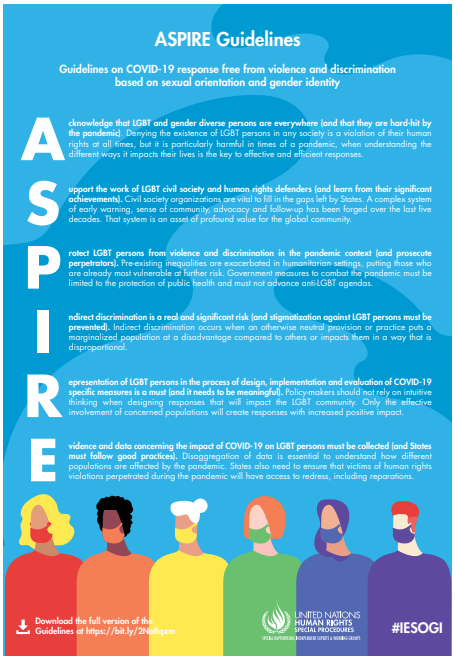
This is a consistent message across sub-sectoral advice below. While SGM organisations may not have extensive WASH experience, working with them will be the safest and most effective path. They are more likely to have an understanding of lived experience of sexual and gender minorities, how to reach community members safely, and what risks need to be mitigated.

Remember that some SGM organisations have stronger networks some parts of the SGM community more than others, for example some CSOs – including women's rights organisations – specialise in working with lesbian, bisexual and other queer women. Others, especially those that have extensive HIV programs, may be more likely to have networks among HIV program key populations including gay men, bisexual men and trans women. When engaging, take into account that these CSOs are currently under a lot of pressure, responding to community need despite movement restrictions, addressing attempts by some governments to use the crisis to crack down on activism, surviving despite loss of funding, and dealing with their own personal and family challenges.

Learn from this crisis

Many of the challenges facing sexual and gender minorities have become more visible during COVID-19.

The organisations that are doing the best job of addressing these needs are those that had relationships with SGM organisations before the crisis, and that already had SGM-inclusive components within their regular programs. It takes time to understand the issues faced by SGM, it takes time to build trust, time to train your staff (and seek the same from your partners) and it takes time to redesign tools, forms, and ways of working.



ASPIRE Guidelines: on COVID-19 response free from violence and discrimination based on sexual orientation and gender identity (UN Human Rights Office of the High Commissioner, 2020)

Remember that some SGM CSOs have stronger networks within some parts of the SGM community more than others.

It **takes time to understand the issues faced by SGM**, it takes time to build trust, time to train your staff (and seek the same from your partners) and it takes time to redesign tools, forms, and ways of working.

In collaboration with SAKHA, a transgender Community based Organisation (CBO) in, Bhubaneswar India, **CFAR has facilitated the installation of Water ATMs in settlements where transgender people reside**. In March 2020 (for World Toilet Day), SAKHA led a campaign to make public and community toilets inclusive, with support from CFAR.

If your organisation does not already work with SGM CSOs or sexual and gender minority community members, there are additional challenges and risks when starting during a crisis. It may take time for your staff to learn about SGM issues, to build trust and develop partnerships with SGM organisations and communities, to learn what is possible (especially in non-permissive contexts), and to develop ways of working consistent with sector do no harm commitments. If this resonates with the experience of your organisation, ensure that steps are taken to review this as part of your overall review of COVID-19 activities.

Consider what steps you can take to improve your organisation's capacity to engage SGM CSOs and sexual and gender minority community members. This will assist your organisation to reduce pre-emergency marginalisation and to respond more effectively in the next crisis.

Use COVID-19 as a wake up call to ensure that your organisation takes genuine steps to transform its ways of working to be SGM-inclusive.

Specific wash interventions/sub-sectors

The guidance below sets out some additional SGM inclusion considerations and actions for specific WASH and COVID-19 interventions. These should be applied along with the key actions and considerations listed above.

Temporary/rapid WASH response measures

Such as accessible public handwashing stations, hygiene kits, distribution points, outreach strategies and WASH in temporary emergency clinics/facilities

What you can do:

- *Ensure staff and partners understand that SGM community members may feel unsafe accessing public WASH facilities, relief distribution points, community gathering points and health facilities. Provide training so that staff and volunteers can provide assistance that respects the rights and dignity of sexual and gender minorities.*
- *Work with SGM organisations to establish alternative ways to safely provide services to sexual and gender minorities. This may require providing services through a SGM CSO intermediary, or through less formal networks.*
- *Consider providing handwashing stations, soap, disinfectant and related supplies in locations where SGM community members are known to live, including for communal housing used by chosen families and cultural third gender groups (where these services can be provided safely).*

Many staff of NGOs, government and other agencies may have limited experience engaging with SGM community members. They may intentionally or inadvertently act in offensive or insensitive ways, or make assumptions that exclude sexual and gender minorities. While sensitisation training may not be possible at this time, tip sheets could be provided to staff and volunteers, along with a clear message from senior management that your organisation does not tolerate discrimination against SGM.

Where your organisation, staff or volunteers do not have experience working with sexual and gender minorities there is greater potential to do harm. For this reason, and consistent with the principle of 'nothing about us without us', WASH sector providers should seek partnerships with SGM CSOs. Organisations that hire SGM members as staff will have additional options for community outreach, trust building, information gathering and service delivery.

Good practice within Water for Women

- IRC's Pakistan LIFE project team has installed handwashing stations in neighbourhoods where transgender people live.
- In Bangladesh, World Vision has included transgender people within the target groups for distribution of soap.

WASH hygiene information and communications

Ensuring SGM inclusive hygiene messaging, dissemination strategies, outreach strategies.

What you can do:

- *Produce messaging that is inclusive of SGM community members, showing them as people living through this crisis alongside other community members.*
- *Review diversity within iconography, drawings and photography, including where possible, diverse families and people with diverse genders.*
- *Ensure messaging reaches SGM community members by taking specific steps to work with SGM organisations or trusted community members to share information in communal housing, community gatherings (where safe and permitted) or through SGM community social media channels.*

Messaging that includes visible representation or other positive inclusion of SGM people may mitigate family and community stigma. This makes it more likely that members of SGM can safely shelter in family homes, can more safely access relief in communal locations, or access medical care.

During crises and disasters some community leaders and community members seek to make sense of the situation by finding people to blame. Typically, minority, marginalised or misunderstood people are blamed, including SGM community members.

Sometimes there is a religious dimension, with certain groups accused of immorality and the crisis or disaster being divine punishment for their 'sins'. Reports of religious leaders blaming COVID-19 on the supposed sins of the SGM community have emerged from Indonesia, Thailand, the United States and other countries. Positive messaging can help ensure these views do not gain traction.

Good practice within Water for Women

- Pakistan IRC's LIFE project is including messaging for transgender people within radio health campaigns.
- In India, Centre for Advocacy and Research (CFAR) is taking steps to ensure that transgender people can access information. CFAR's tele-counselling service has specific sessions for transgender community members, as part of the series of sessions for different marginalised groups. These sessions are being planned and shaped by the counsellor in consultation with transgender leaders. CFAR is also undertaking community information activities that support the transgender community, such as street murals with the support of transgender CBO Nai Bhor as part of the COVID-19 response.

These murals are a part of a public art campaign about COVID-19 led by Kinnar Art Village and created in collaboration with the Mumbai Municipal Corporation. Kinnar Art Village is a collection of artists of all genders who are promoting art with the transgender community to raise public awareness using creative methods. The murals are painted on the wall as a collaboration between the transgender community and artists. These murals were facilitated by Deepak Sharma, who is the artist / Photo credit: CFAR

WASH in communities

Consider household access and support strategies, interruptions to services, household/community outreach.

- *This provides an opportunity for supporting the development of a two way partnership, in which efforts are made to support the SGM organisation in understanding WASH issues, while the WASH team is sensitised about the needs, strengths and rights of SGM people.*
- *SGM organisations have conducted COVID-19 rapid needs assessments in some countries and will have more information and access to sexual and gender minorities than any other organisations. Work with CSOs to learn more about community needs, noting that these CSOs may not have WASH sector experience.*
- *Work with SGM organisations and communities to understand forms of stigmatisation, and to seek their input into messaging that reduces community stigma.*
- *SGM organisations may provide a conduit for SGM community members to safely report incidents of harassment when using water points or other WASH facilities. Work with SGM organisations or community members to install services where they live, or in safer nearby locations.*
- *Some SGM community members are returning to smaller towns and rural areas, as lockdown and the economic impact of COVID-19 cause them to lose jobs in larger cities. In some cases they may be returning to family and community settings that are discriminatory or unsafe. Ensure that your community outreach staff are aware that SGM community members may be present, even if they were not there at earlier stages of projects. Ensure that they take note of any potential exclusion or targeting of SGM community members in community-based WASH programs and communications.*
- *In areas where no SGM inclusive services are unavailable (e.g. in rural or conservative areas), consult SGM CSOs (where they exist) or other rights organisations about alternative informal and community-based support.*
- *Where your organisation has a dedicated humanitarian program, or other development programs pivoting to COVID-19 response, share this note. Members of SGM groups are impacted by lack of shelter, livelihoods, food, stigma, violence and other challenges, which can exacerbate challenges in WASH and health.*

Social distancing and hygiene advice designed for high or middle income settings may not be relevant for sexual and gender minority members who are homeless, who live in crowded informal housing, or who do not have access to running water where they live. For example, discrimination against trans and gender diverse people based on stereotypes of uncleanliness, has been reported by activists in Bangladesh and India when Hijra access public water points. This may worsen during the COVID-19 crisis, and reduce the opportunity to perform hand hygiene. Social distancing, if it is practiced, also has the potential to exacerbate isolation of SGM, and contribute to mental ill-health.

Good practice within Water for Women

- CFAR is an equal opportunity employer and its project team includes transgender persons.
- IRC in Pakistan now employs a transgender staff member and has included transgender people within the group of transformation agents (project volunteers) that are providing information within communities. This will assist in reaching transgender and Khwaja Sira community members (who may not engage with health officials or other volunteers). By including transgender people with the group, IRC is also modelling inclusion for other volunteers and community organisations. Noting that some transgender people live in areas with poor sanitation and hygiene, IRC is providing chlorine for disinfecting spaces.

WASH in institutions, schools and healthcare facilities

Social distancing considerations and specific hygiene needs.

What you can do:

- *If relief services are provided at these facilities be aware that they may not be considered safe locations by SGM community members, and alternative distribution methods may be needed to reach those people. Staff should be aware of potential for discrimination against sexual and gender minorities, and where safe to do so, provide indications for how a person with safety concerns could safely make their situation known.*
- *When the COVID-19 crisis starts to lift: consider how your regular programs in institutions such as schools or health facilities may be inadvertently excluding SGM community members, due to location or due to the design of activities. SGM organisations and technical experts can assist your organisation to understand the opportunities and risks for developing SGM inclusive programs and messaging in these institutions, including potential for engagement with government officials, UN agencies and other development organisations.*

Discrimination and violence in WASH contexts has been identified when SGM members access WASH facilities in schools, workplaces, and other locations such as health facilities. While research is lacking in many contexts, studies in India, Thailand and Vietnam have highlighted these issues. The need for WASH programs to address SGM issues in institutional settings has been highlighted within reports by the Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation.[1]

Public WASH service-providers and sector coordination

Advocacy and awareness raising messages, links to SGM organisations, links between WASH and health agencies, opportunities for people from SGM communities to lead/advise/train.

What you can do:

- *Seek advice from SGM organisations, bearing in mind partnering advice in the Water for Women Learning Brief Stepping Up: ensuring sexual and gender minorities are not left behind.*
- *When seeking information or cooperation from SGM CSOs be aware that they are working under severe stress with few resources to meet urgent needs of families and they may have limited time or resources. Where possible, reduce the complexity of application, verification and reporting processes.*
- *Employ SGM community members on your staff and in outreach teams. Ensure that you review organisational culture to ensure that they are treated with dignity and respect by other staff, and that this is part of a transformational approach to SGM inclusion in your organisation.*
- *Work with SGM organisations, institutions and communities to understand forms of stigmatisation, and to seek their input into hygiene messaging that reduces stigma and supports inclusivity.*

Many SGM organisations are undertaking community-based response within their own communities. These responses address needs that are not met by governments or aid organisations, due to lack of awareness of specific needs, community mistrust of official response, or in some cases active exclusion. However, many SGM CSOs are not funded or trained to do this work, and are relying upon personal financing and volunteer labour. This is putting those organisations under severe stress, at a time when other aid projects are being cancelled or deferred, sometimes eliminating core funding. Members of these CSOs are also working under challenging conditions, including movement restrictions and the need to address the health and safety needs of themselves, chosen family, and others.

Good practice within Water for Women

- Both IRC in Pakistan and CFAR in India have transgender people within their staff and community outreach teams. These staff are more easily able to engage with SGM communities, establish trust, implement participatory activities and deliver services.
- For IRC this involved a thorough organisational review and learning process to ensure that discrimination common in Pakistan was not accepted in their office.
- For CFAR this approach is part of a long-term engagement with SGM community members

Endnote

1 Human Rights Council (2019) Human rights to water and sanitation in spheres of life beyond the household with an emphasis on public spaces, report of the Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation (AHRC/42/47)

References and further reading

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https://bit.ly/2UKIQtw

Acknowledgements

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This Water for Women guidance note provides some key considerations and actions that Water for Women partners, and the Water Sanitation and Hygiene (WASH) sector more broadly, can apply to strengthen the inclusion of SGM in their COVID-19 programming responses and adaptations. Agencies are encouraged to involve SGM people and their representative organisations in identifying context-specific issues and solutions, and to seek further advice to guide implementation of the actions listed within this guidance note.

Water for Women is Australia's flagship water, sanitation and hygiene (WASH) program supporting improved health, equality and wellbeing in Asian and Pacific communities through socially inclusive and sustainable WASH projects. Water for Women is delivering 18 WASH projects in 15 countries together with 11 research projects over five years (2018-2022).

Water For Women

Australian Aid

Find out more at
waterforwomenfund.org

Water for Women Fund, Edge Effect and DFAT, 'Sexual and Gender Minorities and Covid-19: Guidance for WASH delivery', Guidance Note / COVID-19, 2020, Melbourne, Water for Women Fund.