

Sexual diversity, from the margins to the mainstream

the innovation fund

Sexual diversity refers to the broad spectrum of sexuality including attraction, behaviour, sexual orientation¹ and gender identity.²

The freedom to enjoy and express our sexuality is an integral part of our lives, happiness and wellbeing. However, people whose sexual orientation or gender identity does not conform to majority norms, referred to as sexual minorities, often face stigma and discrimination. They are marginalized – both implicitly and explicitly – by the state and by society. Over 70 countries criminalize same-sex sexual acts between consenting adults.³ In other countries, where the legal environment is more favourable, it is society that imposes restrictions on sexuality.

The marginalization of people of diverse sexual orientations and gender identities affects their ability to access essential health services, information and support. Fear of discrimination, or a breach of confidentiality, discourages many from approaching health care providers. This is compounded by a lack of information tailored towards sexual minorities and a lack of capacity to provide specialized health services. Sexual minorities are often excluded from health interventions; ignored because the issues are

too sensitive and the environments too challenging.

The result is a disproportionately heavy burden of ill health. It is estimated that gay men and other men who have sex with men are 19 times more likely to be living with HIV than the general population in low and middle income countries. ⁴ Among transgender people, HIV prevalence is likely to be even higher. ⁵ The lack of essential support networks needed to help sexual minorities cope with stigma and discrimination can result in depression and other mental health problems.

Globally there are some encouraging signs of progress towards more supportive and favourable environments for sexual minorities. The legal recognition of same-sex relationships in Argentina (2010) and the decriminalization of same-sex sexual activities between consenting adults in India (2009), are just two recent examples of positive steps forward.

There is, however, still an urgent need to meet the demand for specialized health services and information for sexual minorities, and this work needs to be prioritized. This is certainly challenging, but it is definitely achievable, as these Innovation Fund projects illustrate. Targeted, bold and innovative interventions are needed to mainstream sexual minorities into health programming, and empower people to enjoy their sexuality in good health and without fear of stigma and discrimination.

About this issue

'Sexual Diversity, from the Margins to the Mainstream' brings together lessons learned from three Innovation Fund projects that successfully addressed the marginalization of sexual minorities. Each project developed strategies to provide access to specialized sexual health information and services to people of diverse sexual orientations and gender identities, empowering those who are marginalized to better manage their health and emotional well-being.

The projects

Cameroon National Association of Family Welfare

Advancing the sexual and reproductive health and rights of sexual minorities

China Family Planning Association

Promoting sexual health among men who have sex with men in Gansu Province

Asociación Civil de Planificación Familiar. Venezuela

Integrating sexual diversity into policies, programmes, organizational networks and services













of Family Welfare Advancing the sexual and reproductive health

and rights of sexual minorities

In Cameroon, the legal and social environment for sexual minorities is challenging at best and dangerous at worst. Same-sex sexual acts are punishable by imprisonment of up to five years. Discrimination from health service providers and a lack of sexual health information leave people of diverse sexual orientations and gender identities vulnerable to poor health. This project worked closely with lesbian, gay, bisexual, transgender and intersex people to provide them with non-discriminatory, confidential and specialized health services, information and counselling. Peer groups were set up to provide support networks, for the improved well-being of beneficiaries.

- 1972 Article 347 bis of the Penal Code anyone who has sex with another person of the same sex may be punished by imprisonment for up to five years and fined up to approximately US\$400
- **2005** Police arrest 32 people at a nightclub in the first of a series of high-profile arrests and prosecutions under Article 347 *bis*
- **2006** 'L'Anecdote' newspaper launches a 'gay witch-hunt' against 50 high-profile men and women 'suspected' of being gay or lesbian
- **2011** Man is jailed for three years on charges of 'homosexuality and attempted homosexuality'



China Family Planning Association



Promoting sexual health among men who have sex with men in Gansu Province

A traditional culture and conservative social values result in a high level of stigma and discrimination against sexual minorities in China. Gay men and other men who have sex with men often keep their sexuality a secret from their family and friends, and many have heterosexual relationships or marriages, making it particularly challenging to deliver specialized sexual health services to them. This project focused on community mobilization, and partnered with local community groups for men who have sex with men. These activities created a more supportive environment for men who have sex with men, increased sexual health knowledge and led to safer sexual health practices.

- **1997** Homosexuality is decriminalized in China
- **2001** Homosexuality is removed from the official list of mental disorders
- **2010** Reported arbitrary arrest and mistreatment of more than 80 gay men in one incident in Beijing
- **2011** Gay men and other men who have sex with men account for about one in every three new cases of HIV in China⁶



Integrating sexual diversity into policies, programmes, organizational networks and services

Planificación Familiar

Despite anti-discrimination legislation to protect the rights of sexual minorities in Venezuela, sexual orientation and gender identity remain taboo and sensitive issues. A culture of machismo, which is common in Latin America, places strong emphasis on traditional gender roles. This can lead to discrimination against sexual minorities and result in their marginalization in society. Recognizing the need to promote awareness and acceptance of sexual diversity, this project successfully integrated issues related to sexual orientation and gender identity into the organization's policies, programmes and services, with a particular focus on youth programming and education.

- 1999 Discrimination on the basis of sexual orientation is outlawed in the Labour Organic Law
- 2008 The Supreme Court rules that no individual may be discriminated against because of their sexual orientation in any way that implies treating him or her in an unequal fashion
- **2009** Reports of the arbitrary arrest and detention of 19 gay men and lesbian women, 11 of whom are minors
- **2009** Reports of a significant increase in violence against transsexual people the murders of 20 transsexual people recorded in the first six months of the year alone

LESSON 1 The needs of sexual minorities can only be met if the factors that lead to their marginalization are understood, and an appropriate strategy developed to address them.

Cameroon

Cameroon criminalizes same-sex sexual relations. It is socially conservative with traditional values that place strong emphasis on gender roles and norms. Sexuality is not expressed openly, and sexual diversity is not widely accepted in society. This results in an incredibly challenging environment in which to implement a project that directly targets people of diverse sexual orientations and gender identities.

How we did it

- The right to health for all citizens is protected by the national constitution and Penal Code. The project was framed in this context, emphasizing its focus on improving the health and well-being of an under-served group.
- The National HIV Strategy identifies men who have sex with men as a priority target group for health interventions. The HIV prevention activities and voluntary counselling and testing services offered through the project were emphasized in conversations with government officials.
- The project was implemented discreetly and effectively, with activities deliberately given a low profile to avoid potentially damaging and negative attention.

Achievements

- The government saw the value of the project in the context of providing health services to an under-served group, as well as the contribution towards the National HIV Strategy, and therefore did not oppose the work.
- The project was implemented effectively in a hostile environment without drawing a detrimental reaction from the public or the government. This also enabled the project to protect the privacy and security of project beneficiaries.

China

Though same-sex sexual acts between consenting adults are legal in China, cultural norms lead to pervasive stigma and discrimination towards sexual minorities. There are currently no protective laws prohibiting discrimination on the grounds of sexual orientation or gender identity. Reports of police harassment and the arbitrary detention of men who have sex with men are common.

How we did it

- Dialogues were initiated involving project staff, key stakeholders in the community and community groups for men who have sex with men. This approach allowed all stakeholders to voice their opinions and concerns, and facilitated a constructive working relationship.
- Anti-stigma and anti-discrimination workshops were held with the police and government health providers to reduce prejudice against men who have sex with men.
- Sensitization sessions with religious leaders were held in Muslim majority areas. Initial sessions were met with resistance. Project staff therefore realized that these sessions needed to focus on general male sexual health as Muslim leaders were not willing to talk about men who have sex with men

Achievements

- The attitudes of key stakeholders, including police officers and government health providers, are more positive towards sexual minorities, and a more favourable environment has been created.
- Muslim religious leaders' knowledge of male sexual health is improved, and information, education and communication materials are distributed in mosques.

What we learned

People of diverse sexual orientations and gender identities can be reached and empowered by using innovative and appropriate strategies, even in the most restrictive and challenging environments.

Venezuela

National law does not prohibit same-sex sexual relations, and discrimination in the workplace on the basis of sexual orientation is against the law. However, a culture of machismo prevails in society and strong traditional views are assigned to gender identities, norms and behaviours. Homophobia is a widespread problem, and there are frequent reports of police harassment of sexual minorities.

How we did it

- Community outreach using innovative and engaging techniques educated the public on sexual diversity and respect for different sexual orientations and gender identities, as well as promoting safe sexual health practices.
- Outreach activities also increased public awareness of sexual rights as human rights, and of national and international laws prohibiting discrimination on the basis of sexual orientation and gender identity.
- Sensitization activities with young people were designed to get them to think critically about their attitudes towards sexuality and gender through drama and interactive discussions

Achievements

- A large number of people were reached with messages promoting sexual rights and respect for sexual diversity, challenging traditional gender roles and stereotypes.
- Over 1,000 young people took part in sensitization activities, increasing their knowledge and understanding of issues relating to sexual rights and sexual diversity.

LESSON 2 It is vital to address internal organizational attitudes and practices at the outset, to create a strong basis to work with people of diverse sexual orientations and gender identities.

Cameroon

The first challenge was to tackle the attitude of staff towards people of diverse sexual orientations and gender identities. The project invested a significant amount of time to address their concerns and dispel misconceptions.

How we did it

- The Governing Board was involved in conversations from an early stage in project development to gain its approval for project activities and guarantee its future support.
- Training sessions on gender, rights and sexuality were conducted for all staff and volunteers. Regular discussion and learning sessions allowed them to air their opinions and concerns, and discuss issues openly with colleagues.
- Staff had the opportunity to meet people of diverse sexual orientations and gender identities through away-days, and information sessions at nightclubs and bars.
- Statutory documents were critically reviewed to assess the extent to which the policies supported work with sexual minorities, and to ensure they prohibited discrimination on the basis of sexual orientation and gender identity.

Achievements

- The project led to a new vision within the organization with a focus on providing services to all, without discrimination, and within a rights-based framework.
- Staff, several of whom had serious reservations about working with sexual minorities, were able to work through their concerns, resulting in strong project ownership. The change experienced was dramatic and staff developed close relationships with many of the beneficiaries.
- The organization's constitution now includes lesbian, gay, bisexual, transgender and intersex people as a priority target group, along with language to prohibit discrimination on the basis of sexual orientation or gender identity.

Venezuela

This project integrated sexual diversity into all programmes, policies and services to create a rights-based, non-discriminatory organizational culture.

How we did it

- Staff, management and Governing Board members' opinions and attitudes on sexual diversity were assessed through a baseline survey. The results were used to inform staff sensitization and training.
- Sensitizing and training all staff, management and Board members on issues relating to sexual diversity and sexual rights was frequent and ongoing.
- Experts on sexual orientation, gender identity and sexual rights provided technical assistance and training, with a particular focus on the practical implementation of non-discriminatory policies.
- Institutional guidelines on sexual diversity were developed to aid the integration of sexual diversity into all organizational programmes, policies and practices.

Achievements

- The project led to fundamental organizational change, creating a rights-based and non-discriminatory culture.
- New organizational protocols led to the effective mainstreaming of sexual diversity into all programming to guarantee an inclusive approach to sexuality.
- Clinic and programme staff now have increased technical knowledge and capacity to meet the needs of sexual minorities.
- The project improved the quality of care provided by the clinics. Service providers now ensure a non-discriminatory and confidential environment in which clients feel at ease. This, in turn, allows service providers to deliver a more responsive, appropriate and tailored approach to care.

"Discrimination-free zone." Sexual diversity project poster, Venezuela

What we learned

A significant amount of time needs to be invested at the beginning of project implementation to address staff concerns and facilitate discussion. Attitude change is a gradual process that takes time.

Reviewing and revising organizational policy and practice, using a rights-based framework, ensures a significant and sustainable impact, and fosters an inclusive working environment.

Training staff to work with and serve people of diverse sexual orientations and gender identities must be continuous to maintain commitment and prevent discriminatory incidents. Just one breach of trust can do a lot of damage and undo months of hard work.

LESSON 3 The meaningful participation of sexual minorities in project planning and implementation has multiple benefits and is essential for establishing trust and respect.

China

Gay men and other men who have sex with men were recruited as peer educators to conduct outreach activities and to participate in the project coordination committee. This was an effective way to engage meaningfully with the target population while, at the same time, earning their trust.

How we did it

- Men who have sex with men were recruited as peer educators. They were trained using a curriculum developed in consultation with men who have sex with men and sexual health experts, drawing on existing resources.
- Peer educators conducted frequent outreach activities to disseminate information on HIV and sexual health.
 Condoms and water-based lubricant were distributed in bars, shower centres and other public spaces frequented by men seeking sex with other men.
- Men who have sex with men were involved in project coordination committees, contributing to project design, planning and implementation throughout the project.
- Peer educators took the initiative to create a service using social media and mobile phone technology to provide information and counselling about male sexual health.

Achievements

- Over 10,000 people have benefitted from outreach activities. Men who have sex with men now have greater knowledge of safe sexual health practices, and increased access to condoms and lubricants in convenient locations.
- Men who have sex with men feel less isolated: contact with peer educators and the project staff helps to relieve feelings of isolation, and reduces the psychological and emotional pressure they often feel.
- The peer educators have learned new skills and are given a sense of purpose and hope in their lives.

Cameroon

Because of the reality of their situation, sexual minorities in Cameroon are suspicious of outsiders. Creating relationships with members of the target community, based on trust and collaboration, was integral to project effectiveness.

How we did it

- A 'word-of-mouth' strategy was adopted. Initially, a small number of people were told about the services available and were encouraged to pass this information on to friends and peers; a discreet, yet highly effective approach.
- A number of people were identified to be peer educators who acted as leaders in the community to mobilize and educate their peers. They set up peer groups to act as support networks for sexual minorities.
- Sexual minorities were consulted during project design.
 They were active participants on the steering committee, which acted as a watchdog to monitor, review and provide frequent input on project planning and implementation.
- Focus group discussions were held with beneficiaries to review project progress, provide a better understanding of their needs and identify opportunities for improvement.

Achievements

- The word-of-mouth strategy led to over 1,800 people of diverse sexual orientations and gender identities accessing sexual and reproductive health services through the project.
- Sexual minorities trust project staff to provide accurate information about their sexual health and rights.
 Confidentiality is guaranteed so clients feel comfortable accessing the specialized services on offer.
- The participatory and inclusive approach empowers beneficiaries to make positive decisions about their sexual health and overall well-being.

"Being involved with the project and doing outreach work gives me a meaning to life."

Project beneficiary, China

What we learned

Having committed project staff who interact on a personal level with project beneficiaries helps to establish relationships based on trust and respect and is a prerequisite to the participation of sexual minorities in the project.

When working with a marginalized group for the first time it is best to adopt a responsive and flexible approach to project implementation that involves continuous consultation with the target population.

By empowering peer educators and encouraging ownership of the project, new and exciting innovations in project implementation can develop that increase effectiveness.

LESSON 4 Engaging with community-based organizations and local partners is essential to create an enabling environment for people of diverse sexual orientations and gender identities.

Venezuela

In Venezuela, there are several organizations that work specifically with sexual minorities and have extensive knowledge and experience of working on these issues. Forming strategic partnerships with these organizations led to effective collaboration and coordinated interventions.

How we did it

- Local organizations that work with sexual minorities were identified and made fully aware of the project goals and activities. Effective partnerships were set up to enable collaboration and avoid duplicating activities.
- A referral and counter-referral system was set up to ensure that all people in contact with the partner organizations were made aware of services offered by the project implementing organization, and vice versa.
- The knowledge and experience of local organizations and experts who work with sexual minorities was pooled, and used to inform and shape project activities.

Achievements

- A large number of people of diverse sexual orientations and gender identities now have access to a wide range of non-discriminatory sexual health services provided through a network of organizations.
- Long-term support is ensured with the commitment of partner organizations to serving people of diverse sexual orientations and gender identities.
- Collaboration with partners on awareness-raising and advocacy activities ensures the efficient use of resources to reach a large number of people through effective and creative communication techniques.
- Partnerships between civil society organisations in Venezuela have been used to advance the discourse and advocate on sexual diversity and sexual rights.

China

In China, existing community groups were already championing the sexual health and rights of men who have sex with men. The project increased these groups' capacity and worked in partnership with a range of stakeholders.

How we did it

- Project staff developed good relationships with several local community groups for men who have sex with men.
 They also supported men in one city to set up their own group, and provided training to develop the skills of group leaders. Meetings were held between these community groups to facilitate communication and knowledge sharing.
- Project coordination committees were set up, bringing in key stakeholders: these included health department officials, police officers and religious leaders, as well as community groups for men who have sex with men.
- Anti-discrimination workshops were held for police officers to help improve relations with men who have sex with men, and government health care providers took part in sensitization sessions

Achievements

- Community groups for men who have sex with men are strengthened. Capacity-building has enabled group leaders to act as conveners and champions in their community.
- The police force is more accepting of men who have sex with men. In turn, police officers are better trusted by men who have sex with men, who are now more willing to report crimes committed against them.
- Health care providers are aware of the issues facing men
 who have sex with men. They recognize the importance
 of providing non-discriminatory and confidential sexual
 health services, and are committed to exploring best
 practice service delivery approaches.

"Before, I was prejudiced against men who have sex with men. But now I understand I have a duty to all my clients regardless of their sexuality."

Government health care provider, China



What we learned

It is often possible to tap into existing local resources and knowledge. These should be used, where possible, and local champions engaged and supported.

Forming strategic partnerships can maximize the effectiveness of project activities by pooling resources and sharing tools.

Setting up robust referral systems with partner organizations ensures a holistic approach and optimizes quality of care.

LESSON 5 It is essential to develop an approach that addresses emotional well-being as well as physical health using a rightsbased and holistic model of care.

Cameroon

Sexual minorities in Cameroon face enormous emotional and psychological pressure. The project addressed the emotional well-being of beneficiaries through peer support groups.

How we did it

- Sexual rights were central to all project activities. 'Sexual Rights: an IPPF Declaration' was translated into easy-to-understand language and adapted as a leaflet. Peer educators used the leaflet to inform beneficiaries of what sexual rights meant in relation to their own lives.
- Peer support groups were set up, each one led by a peer educator. These groups offered beneficiaries a safe space to share experiences, problems and fears.
- All clinic staff took part in sensitization and training sessions on sexual rights. As a result, they were able to provide beneficiaries with non-discriminatory services and support, which included counselling on HIV, sexually transmitted infections and other issues.

Achievements

- The majority of beneficiaries were not previously aware of their sexual rights. Realizing that they have sexual rights offers people a sense of self-worth, builds their confidence, and helps to reduce depression and anxiety.
- Having a forum in which to discuss problems and concerns with peers experiencing similar issues reduces feelings of isolation, and is identified by beneficiaries as being incredibly important. Demand to participate in peer support groups was so high that a further four were set up after the first year of project implementation, taking the total number of peer groups to 12.
- By learning about their sexual rights, beneficiaries are empowered to take control of their sexual health and feel able to seek the medical support that they need.

Venezuela

It is often challenging for people of diverse sexual orientations and gender identities to accept and be open about their sexuality. This is particularly hard for young people as they lack experience and knowledge, and may not know their rights. This project provided essential support, tools and information about sexual diversity.

How we did it

- Counselling services were identified as a priority to be provided through this project. The youth centre partnered closely with the organization's psychology unit to provide counselling on sexual orientation and gender identity.
- The project developed tools to help clients accept their sexuality and to 'come out' to their friends and family. Resources were also developed for friends and family to help them deal with what might be an unfamiliar situation.
- The project drew on existing expertise about gender-based violence to provide a comprehensive approach to gender, diversity and rights.
- Information, education and communication materials and activities were used to disseminate messages on sexual diversity using rights-based language.

Achievements

- Close collaboration between the psychology unit and the youth centre enables effective and immediate provision of psychological care to young people who are anxious about issues relating to their sexual orientation or gender identity.
- A large number of people are reached through innovative communication materials and activities that focus on respect for sexual diversity.
- Increased knowledge of sexual rights and sexual diversity has empowered sexual minorities and improved their emotional well-being.

"The friend who sent me to this project helped me not to kill myself. I feel good now because I see different people here who are like me. I have the opportunity to talk about my problems." Project beneficiary, Cameroon

What we learned

Using 'Sexual Rights: an IPPF Declaration' as a tool for promoting sexual rights is an effective way to empower sexual minorities by improving knowledge of their rights.

Providing a safe space and a forum for experience-sharing and interaction with peers is a simple, yet highly effective strategy to improve both emotional and physical wellbeing.

Project activities should have a dual focus: to address the challenges resulting from stigma and discrimination that people of diverse sexual orientations and gender identities face in their everyday lives, while responding specifically to their sexual and reproductive health needs.

Putting learning into practice

LESSON 1

The needs of sexual minorities can only be met if the factors that lead to their marginalization are understood, and an appropriate strategy developed to address them.



Conduct a situational analysis of the legal and social environments for sexual minorities.



Consider the realities of the environment in which you are working, develop a range of appropriate strategies and be prepared to adapt them if necessary

LESSON 2

It is vital to address internal organizational attitudes and practices at the outset, to create a strong basis to work with people of diverse sexual orientations and gender identities.



Invest time at the beginning of project implementation for discussion and sensitization with volunteers and staff.



Train staff on a frequent and ongoing basis to ensure the highest quality of care.

LESSON 3

The meaningful participation of sexual minorities in project planning and implementation has multiple benefits and is essential for establishing trust and respect.



Consult with the target population from the outset and use their ideas to shape project activities.



Take time to interact with project beneficiaries on a personal and social level to build trust and respect.

LESSON 4

Engaging with community-based organizations and local partners is essential to create an enabling environment for people of diverse sexual orientations and gender identities.



Use existing resources and engage with local champions to build organizational capacity and maximize project impact.



Establish effective partnerships with organizations and develop robust referral systems to maximise access to all available services.

LESSON 5

It is essential to develop an approach that addresses emotional well-being as well as physical health using a rights-based and holistic model of care.



Use 'Sexual Rights: an IPPF Declaration' to inform people about sexual rights and to empower beneficiaries.



Provide access to emotional support networks, for example through peer groups and/or professional counsellors.

References

- 1 'Sexual orientation' is understood to refer to each person's capacity for profound emotional, affectional and sexual attraction to, and intimate and sexual relations with, individuals of a different gender or the same gender or more than one gender.
- 2 'Gender identity' is understood to refer to each person's deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth including the personal sense of the body (which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including dress, speech and mannerisms.
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Who we are

The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organizations working with and for communities and individuals.

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Our vision

IPPF envisages a world in which all women, men and young people have access to the information and services they need; a world in which sexuality is recognized both as a natural and precious aspect of life and as a fundamental human right; a world in which choices are fully respected and where stigma and discrimination have no place.

About the Innovation Fund

Member Associations to develop ground-breaking initiatives to solve some of the most difficult sexual and reproductive health and rights issues in the world today.



Published in 2011 by the International Planned United Kingdom UK Registered Charity No. 229476 Parenthood Federation

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