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Introduction

Refugees and asylees face innumerable challenges when resettling in the United States as they adapt to a new culture, learn a new language, and look for work with limited resources. On top of the challenges typically associated with resettlement, lesbian, gay, bisexual, and transgender (LGBT) refugees and asylees are confronted with additional obstacles and have unique concerns and vulnerabilities.

Across the globe, individuals are fleeing persecution based on their sexual orientation and gender identity. While most other refugee populations flee persecution by state actors, LGBT refugees often run away from violence committed by family members, friends, neighbors, and community members. As they resettle in the US, they often lack the critical support networks upon which other refugees and asylees rely. Doubly marginalized, LGBT refugees and asylees are designated an 'outsider' status as forcibly displaced persons; as LGBT individuals, they must also navigate the isolation they face within their own ethnic or national communities. When resettling in the US, LGBT refugees/asylees are in need of a community responsive to their concerns and committed to cultivating social and economic opportunities that will facilitate their integration.

Most LGBT refugees initially obtained refugee status for reasons unrelated to their sexual orientation and gender identity. They may be reluctant to disclose such information to family members or caseworkers due to fear of continued discrimination and harassment. Regardless of whether LGBT refugees self-identify, service providers have an extraordinary responsibility to ensure they feel safe and welcome in their new communities. The resettlement network must commit to preventing LGBT refugees/asylees from facing the same discrimination, barriers to accessing services, and violation of rights they experienced back home.

Recognizing a gap in resettlement agencies' response to LGBT refugees/asylees, the Office of Refugee Resettlement supported Heartland Alliance's establishment of the Rainbow Welcome Initiative. The Rainbow Welcome Initiative provides resettlement agencies with the tools, knowledge, and technical assistance needed to render comprehensive, culturallycompetent services to this population. After conducting a series of regional trainings this year, Heartland Alliance developed this field manual to offer practical guidance to service providers so they can effectively meet the specific needs of the LGBT refugee/asylee community. Just as resettlement agencies tailor their approaches to service delivery based on participants' country of origin, religion, and ethnic identity, Heartland Alliance hopes this guide will enable organizations to apply the same methodology to working with LGBT participants.

For LGBT refugees and asylees to achieve self-sufficiency, they must first find safety and a supportive community. By acknowledging the unique circumstances under which LGBT refugees arrive and considering how their backgrounds and experiences will inform each service, interaction, and referral, service providers will successfully respond to a refugee community that has for too long been hidden.

Understanding Sexual Orientation and Gender Identity

Understanding issues relating to sexuality and gender enables providers to strengthen service delivery for LGBT participants. Knowledge of these issues will help guide you when making referrals and identifying needs and concerns specific to this community. Especially when working in a multicultural context, it is important to appreciate diverse expressions and identities, as countries from which refugees come may conceptualize sexuality and gender differently.

A. Terminology

Terms describing sexual orientation and gender identity vary by region, culture, and language. For this manual, we chose to include terms recognized and utilized by the United Nations High Commissioner for Refugees (UNHCR) (which are denoted by a*).

Sexual Orientation*

Refers to each person's capacity for emotional and sexual attraction to, and intimate relations with, individuals of a different or the same gender.

- **Lesbian*:** Is a woman whose enduring physical, romantic, and/or emotional attraction is to other women.
- Gay*: Is used to describe a man whose enduring physical, romantic, and/or emotional attraction is to other men.
- Bisexual*: Describes an individual who is physically, romantically, and/or emotionally attracted to both men and women.
- MSM: Men who have sex with men.
 MSM may not identify as gay or bisexual.
- WSW: Women who have sex with women.
 WSW may not identify as lesbians or bisexual.

Gender Identity*

Refers to each person's deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth.

- **Transgender*:** Is an umbrella term for people whose gender identity and/or gender expression differs from the sex they were assigned at birth.
- **Transition:** The process in which transgender persons align their physical appearances with their gender identity.
- FtM: Female to Male transgender individual.
- MtF: Male to female transgender individual.
- Passing: This term is used to describe
 the ability of transgender individuals to be
 perceived as the gender with which they
 identify, i.e. a transgender woman is perceived
 as a woman by others.
- **Gender Realignment Surgery:** Refers to medical procedures individuals may undergo to align their genitalia and physical appearance with their gender identity.
- Top surgery: Refers to surgeries involving the realignment of a transgender individual's body through chest reconstruction.
- Bottom surgery: Refers to surgeries involving the realignment of a transgender individual's body through genital reconstruction.

OTHER TERMS

- Ally: Refers to individuals who support and advocate for a community of which they are not members.
- Intersex*: An umbrella term covering differences of sexual development, which can consist of diagnosable congenital conditions in which anatomic, chromosomal, or gonadal sexual development is atypical. Intersex individuals may have biological characteristics of both males and females.
- Heterosexual: Describes an individual whose enduring physical, romantic, and/or emotional attraction is to someone of the opposite sex.
- Homosexual: Used to describe LGB individuals, this medical term is not often used by members of the LGBT community because of negative connotations.
- Heterosexism: Describes institutionalized oppression against non-heterosexual individuals and experiences.

- Homophobia: Refers to hostility, negative attitudes, and/or fear directed at LGB individuals.
 LGB individuals who feel shame and selfhatred because of their sexual orientation are said to experience internalized homophobia.
- Transphobia: Refers to hostility, negative attitudes, and/or fear directed at transgender individuals.
- Queer: An umbrella term encompassing a variety of sexual orientations and gender identities excluding heterosexuality. The term was originally used as a slur but has been reclaimed by the LGBT community to also refer to political ideologies and sexual/gender expressions not adhering to heteronormativity or a gender-binary.
- Questioning: Refers to individuals who are unsure of their sexual orientation and/or gender identity.

B. Diversity of Sexual and Gender Identities

Shared definitions allow service providers, advocates, organizations, and community members to "speak the same language" and enable them to identify and respond to the needs of LGBT persons. Still, it is important to recognize that fixed definitions remain limited in their ability to illustrate the rich diversity of sexual expressions and gender identities across the globe. Appreciating the flexibility and fluidity of sexual orientation and gender identity, particularly across cultures, is key to greater inclusiveness and better services for the refugees and asylees with whom you work.

How one identifies may not correspond to how one behaves or how one presents her/ himself, especially according to Western conceptualizations of sexuality and gender.

- We often hear about the LGBT community within the context of human rights violations and abuses. While Western LGBT culture has been influential in shaping globally recognized and shared LGBT identities, cultural variables still determine how one identifies, how one expresses her/himself, and how society reacts and responds. Refugees and asylees come from a tremendous diversity of cultures and communities, and there is limited information on how sexual and gender expression differ across communities in the global south.
- The terms lesbian, gay, bisexual, and transgender may be useful in certain contexts. You can also use the terms MSM and WSW since they focus on the sexual acts of individuals, not their sexual orientations. Not everyone who has same-sex sexual partners identifies as gay, lesbian, or bisexual; there are often other cultural and societal implications for identifying as a member of the LGBT community. Consequences may include endangering oneself, bringing shame or dishonor to one's family, and experiencing difficulty in securing employment.

In Iraq, identifying as gay or lesbian is taboo, in part because it poses an immediate threat to the family unit, which like in other countries in the Middle East/North African region, is the foundation on which many communities are built. Some also perceive LGBT identities as imports of the West and are hostile towards this community for this reason.

- You will likely encounter participants who never disclose their sexual orientation or gender identity to you. They may not identify as LGBT or they may not feel comfortable sharing this information. Some may even be married to a member of the opposite sex but still have sexual relations with members of the same sex (either for economic purposes or out of romantic/emotional attractions). Do not make assumptions based on how one presents her/himself or one's relationship status.
 - In many Latin American communities, men who penetrate other men are not considered to be gay; only their male partners who are penetrated are. The nature of these male partnerships varies, from one-time affairs and purchased sex to long-term emotional and romantic relationships. Active partners are perceived as masculine and often have wives. Receptive partners are more feminine and typically do not partner with women.
- There are often no corresponding words for homosexual, heterosexual, gay, lesbian, bisexual, or transgender in different countries. In some cases, these words exist but are not widely known or used by most community members. Still, sexual orientations and gender identities and expressions vary in all cultures and communities, whether there is vocabulary to define it. Service providers can educate participants about the terms we use here in the United States, but it is important not to impose our own views or expectations of how LGBT people should look, act, or identify. Participants have a right to selfdetermination and to decide for themselves how they wish to identify and if and when they disclose such sensitive information.

C. Dispelling Myths

It is easy to identify LGBT individuals.

It is best to never assume a person's sexual orientation or gender identity. A man might behave in a "stereotypically gay manner" and identify as straight; a woman might appear to be "stereotypically straight" but identify as lesbian. Transgender individuals may not present themselves in the way they identify.

I do not personally know anyone who is LGBT.

It is far more likely that you do but do not know any one who is open about her/his sexual orientation or gender identity. It is very possible a friend, relative, neighbor, or colleague is LGBT and has not yet shared this side of her/himself.

All gay men are effeminate or want to be women.

Gay men are diverse in expression, personality, and behavior. Society often reinforces cultural stereotypes with which some may identify.

All lesbians act like men or want to be men. Lesbians are equally diverse in expression, appearance, and behavior.

Gay men are more likely to be pedophiles.

Statistical evidence and psychological studies unequivocally debunk this myth. According to the American Psychological Association, "homosexual men are not more likely to sexually abuse children than heterosexual men are." This myth is used to spur fear and homophobia.

Bisexual individuals are confused about their sexuality.

It is often assumed, even by members of the lesbian and gay community, that bisexual individuals are in an 'in-between' period in which they have yet to determine their prevailing sexual identity. Some people wrongly believe that bisexual individuals will transition from being bisexual to lesbian or gay; while this may be the case in some instances, most bisexuals will live their entire lives attracted to both males and females.

Homosexuality is a contemporary phenomenon.

Homosexuality is a natural occurrence that has been recorded throughout history.

Homosexuality can be found only in the West.

Homosexual behavior occurs in all communities and cultures across the globe.

Homosexuality is a choice.

Most LGBT individuals describe their sexual orientation as being inherent. Choice plays a role in whether an individual decides to live openly as LGBT. LGBT refugees may not feel as if they ever had a choice to liven openly as it could have resulted in their persecution.

HIV/AIDS is a disease only gay men contract.

HIV/AIDS is contracted because of sexual acts, not because of one's sexual orientation.

LGBT persons are predisposed to mental illness and/or substance abuse.

LGBT individuals are more susceptible to mental illness or substance abuse, but this is a result of the isolation, hostility, or discrimination they endure as LGBT individuals, not because of any predisposition based on sexual orientation or gender identity.

Same-sex parents harm children and their development.

There is no evidence that children are negatively affected by being raised in same-sex parent households. Children of same-sex parents have spoken out against this myth, describing the nurturing and loving homes created by their mothers and fathers and the opportunities that have been provided for them to thrive and succeed.

Offering LGBT participants certain services means we are giving them "preferential treatment."

Tailoring services to meet the needs of each population, including the LGBT community, is actively acknowledging the different circumstances under which refugees arrive. Strengthening services for LGBT refugees and asylees is a part of achieving greater cultural competency and respecting the human rights of all participants.

D. Transgender Facts

Transgender True or False Quiz

The relationship between sexuality, gender identity, and sexual orientation is complex. Societal views of gender and sexual orientation often intertwine but in reality, sexual orientation and gender identity are separate from and independent of each other. Transgender individuals make up the "T" in the LGBT acronym, but the issues confronted by this community are distinct.

Sexual orientation refers to each person's capacity for emotional and sexual attraction to, and intimate relations with, individuals of a different or the same gender. Gender identity refers to each person's deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth.

Learn more about the Transgender community by taking this short quiz. 1. A transgender woman is referred to as "he" or "him." ☐ True ☐ False 2. All transgender individuals undergo medical procedures to align their physical appearance with their gender identity. ☐ True ☐ False 3. One can determine an individual's preferred pronouns by judging the person's physical appearance. □ True ☐ False 4. Crossdresser is the preferred term over transvestite. □ True ☐ False 5. Transgender individuals identify as either gay or lesbian. ☐ True □ False

Answer Key

- 1. False: If the person identifies as female, feminine pronouns should be used. Transgender individuals though may circumstantially alternate what pronouns they prefer, depending on where they are and how they are feeling. If your participants let you know they identify as transgender, it is best to ask them what pronouns they prefer.
- **2. False:** Many transgender individuals never take steps to physically alter their bodies. These procedures are very expensive and often unaffordable. Others are just not interested in this transition method.
- **3. False:** For some transgender individuals, their gender expression, or how they present themselves, does not correspond to the gender they identify as.
- 4. True
- **5. False:** Gender identity is different from sexual orientation. One's gender identity does not determine who one is sexually attracted to. Transgender individuals may identify as heterosexual, gay, lesbian, or bisexual.

2. Creating a Safe Space for LGBT Participants

LGBT refugees and asylees are reluctant to disclose information pertaining to their sexuality and gender because they fear being discriminated against. Resettlement agencies can take measures to actively demonstrate support to the LGBT community, marking its office as a "safe space" for all participants. By examining and adjusting policies and practices, service providers can make their organization more inclusive of LGBT participants, encouraging greater numbers of LGBT refugees and asylees to self-identify.

A. Assessing and Managing Discomfort

Participants can sense when service providers are uncomfortable. LGBT participants will feel less inclined to access services at the agency if they feel unwelcome. It is important to identify ways to either reduce or manage discomfort in order to continue providing essential services.

We all have different experiences interacting with LGBT individuals in both personal and professional settings and thus may have different levels of comfort working with this population. This is particularly true for refugee resettlement workers who may come from countries or communities in which LGBT status is stigmatized as religiously or culturally unacceptable. It is important to identify and acknowledge why and under what circumstances we experience discomfort and strategize ways to move forward productively and positively.

Supervisors and managers need to know the comfort level and boundaries of their employees so they can make arrangements to guarantee LGBT participants receive the support and information they need.

TIPS FOR MANAGING DISCOMFORT:

- Consider the factors that may contribute to your or your colleagues' discomfort.
 - Lack of familiarity or exposure to a group of people may lead to discomfort. Here are steps one can take to reduce discomfort and increase understanding:
- > Read books or articles about the LGBT community;
- > Watch movies and TV shows with positive representations of LGBT individuals;
- > Pursue professional development opportunities by attending a conference or training on LGBT issues;
- > Develop a personal relationship with an individual who identifies as LGBT.
- Negative stereotypes and messages regarding the LGBT community are pervasive across the globe, even here in the United States.
- Consider the ways in which members of your own community have been wrongfully discriminated against;
- > Challenge preconceived notions;
- > Push yourself to reevaluate your attitudes and make an effort to engage this community.
- Occasionally, staff may hold religious beliefs that negatively color their perceptions of LGBT persons.
- > There is a diversity of opinion within most religions regarding LGBT persons and condemnation of LGBT status is rarely universal within any one religion.
- > Staff who feel a high level of discomfort due to religious conviction may find it helpful to reach out to LGBT organizations that can identify others from the same religious background who have LGBT relatives, and who can help staff explore their feelings toward LGBT persons in a supportive, non-judgmental way.
- > Staff members have a responsibility to respect the right of program participants not to share a staff member's religious perspective or belief.

- Regardless of personal feelings, supporting LGBT participants is human rights work and is part of providing culturally-competent resettlement services as mandated by the US Government. Ultimately, staff members are expected to fulfill their professional obligations and provide quality services to all participants without discrimination based on sexual orientation or gender identity. As a practical matter, some resettlement agencies may end up assigning case workers who are more comfortable with LGBT persons to work with those program participants, but all refugee resettlement workers have an obligation to create a safe and welcoming environment for all refugees, regardless of sexual orientation or gender identity.
- There may be tasks one strongly feels uncomfortable performing. One may never feel comfortable, for instance, talking to program participants about sexual health and safe sex practices. You and/or your colleagues should always:
 - Recognize and honor personal boundaries;
 - Communicate to colleagues about what can be expected of you;
 - Make arrangements to ensure that participants still receive the services and information they need.
- Carve out time to reflect on your experiences with LGBT individuals by filling out the Rainbow Welcome Initiative's self-assessment [Appendix I]. After assessing your comfort level by taking the quiz, evaluate the following:
 - Issues and Areas of Strength
 Where do you excel as a provider to LGBT participants?
 - Key Areas for Growth
 Where do you struggle?
 - Areas To Learn More About
 What are some topics or issues you want to understand better?
 - Next Steps/Action Plan
- > Just as you create service plans with your participants that are SMART (Specific, Measurable, Achievable, Realistic/Relevant and Timely), create a follow up plan.
- > Think of creative ways to address objectives and reach goals.
- > Consider who or what you can utilize to meet your objectives. Don't forget to use colleagues as resources.

Case Scenario:

A female colleague of yours is currently working with a lesbian participant. Your colleague was selected to work with this woman because they are from the same country and speak the same language. You share an office with your colleague and from your observations sense that your colleague is uncomfortable interacting with the participant. You suspect that your colleague may not be sharing all the necessary information regarding the services for which the participant is eligible. Your colleague has even told you she does not want to conduct the mandatory home visits because she is worried the participant would act inappropriately.

What you can do:

The needs and wellbeing of the participant come first. You should alert your supervisor to your concerns. Your supervisor is better positioned to have a conversation with your colleague about responsibilities and obligations.

Supervisors and managers

Talk to your colleague about the situation, offering her an opportunity to rectify any misunderstandings or explore what religious or cultural values may be affecting her behavior. Consider the ways in which you can support both your employee and participant. If through your conversation you find the staff member does not feel comfortable working with the participant and that it will indeed likely affect her performance and delivery of services, make alternative arrangements (assign the case to another staff member and search for interpretive services). This should always be a last resort though. Staff cannot choose with whom they work. Staff should be expected to serve all participants equally and not allow personal beliefs to impact their service provision.

B. Approaches to Case Management

Establishing Rapport

Building a relationship based on trust and communication is important when working with any participant. LGBT participants may be more likely to disengage or withhold information, due to fears of discrimination and rejection and also due to fears of breaching confidentiality.

Establishing trust with participants may be difficult when services last for such a short period of time and the opportunities to connect with participants on an intimate level are limited.

- Written materials should be made available at the office so participants can access resources on their own time if they wish.
- Even if a participant does not feel ready to self-identify as LGBT to the resettlement agency, staff still have the opportunity to set the tone and precedent for respectful and sensitive service delivery, which may encourage participants to disclose later on, perhaps to another service agency.
- If providers from different agencies cultivate similar safe spaces and communicate the messages of trust and confidentiality, LGBT participants will know they can safely discuss their issues with any provider assisting them.

Proactive steps like these must be taken to assure LGBT refugees' comfort, paving the way for a strong, cooperative, and communicative partnership.

Being an Ally

An ally is someone who supports and/or advocates for a community of which s/he is not a member. One can be an ally to LGBT individuals just by accepting their sexual orientation and/or gender identity or by actively supporting them. Service providers have the opportunity to be 'active' allies and this can be done in a number of ways. Outlined below are several steps to becoming an effective ally:

- 1. Learning and Growing: Learning about the community you support is the first step in becoming an ally. Just by reading this manual, you are on your way! Take the next step by sharing your knowledge with colleagues, developing relationships with LGBT organizations, and making resources available in your office.
- 2. Confronting Personal Biases: We live in a world where our views and values are shaped by so many external factors. It is natural for us all to have biases and prejudices. To be effective allies, we must reflect on these biases, ask ourselves how we came to have these feelings, and challenge them. The National Association of Social Workers' code of ethics calls for "Social workers [to] be aware of the impact on ethical decision making of their clients' and their own personal values and cultural and religious beliefs and practices. [Social workers] should be aware of any conflicts between personal and professional values and deal with them responsibly." Resettlement staff may or may not be social workers, but the professional obligation to render services of equal quality to all participants, regardless of sexual orientation and/or gender identity, still applies.
- 3. Follow, Don't Lead: Allies can and should advocate on behalf of the LGBT community, but it is important to remember that allies should neither speak for the community, nor say what is in its best interest. It is allies' responsibility to foster an environment where participants feel empowered and supported in their efforts to make decisions independently.
- 4. Treat everyone with dignity and respect, regardless of sexual orientation and/or gender identity!

Case Scenario:

An Iraqi teenage boy, who resettled with his parents and two younger sisters, comes to you one day after school alone. He tells you that he is gay and asks for information on available services for LGBT individuals. He is having a very difficult time keeping his sexual orientation secret from his family and friends at school; he has only told his best friend and now you.

How would you approach this situation as an ally?

- ② Do you encourage him to come out? "You live in the United States now, no reason to be afraid! You have rights!"
- ② Do you advise him to remain closeted? You are afraid that if he discloses his sexual orientation to his parents, they will kick him out of the house. Your agency does not have the funds to support him and resources in the surrounding area are limited; you are concerned you will not be able to find him shelter elsewhere.
- ⑤ Instead of making a choice for him, you gently talk to him about potential repercussions. Conduct a risk assessment, weighing the pros and cons to each possible decision. This will empower the participant to make an informed choice of his own. Determine what support you can offer based on the participant's plan of action.

Strengths-Based Case Management

Strengths-based case management is an approach used to empower participants and facilitate their active involvement as they successfully move through the cultural adjustment process. Most refugees are able and resilient individuals, though they are often portrayed as victims. LGBT refugees and asylees often remain isolated and discriminated against when arriving in the US. As a result, they may suffer from poor self-esteem, making it particularly difficult for them to identify the resources they have at their disposal. Strengths-based case management allows service providers and participants to identify and highlight the strengths and assets participants possess, strengths that will help them succeed in their new communities. Taking time to examine strengths and resources is an ongoing process, as they can change and develop over time.

LGBT refugees and asylees face many obstacles when resettling in the United States. Reminding them of their resilience and strength, and the support available can help

them get through the most

challenging of times.

STRENGTHS CAN BE:

Personality Traits and Characteristics

- Are participants motivated to work towards meeting goals?
- Do they have a thirst for knowledge?
- Are they optimistic?
- Are they hard-working?
- Are they focused?
- Are they adaptable to different environments and situations?
- Point out the courage and resilience they possess to be able to leave their familiar surroundings for new opportunities.

Skills

- Do they have the ability to speak multiple languages?
- What is their education background?
- Are they resourceful?
- Are they comfortable speaking to large groups of people?

People and Support Systems

- Do they have family who is supportive of them and their sexual orientation and/or gender identity?
- Do they have friends who also have been resettled?
- Do they have connections to and support from the LGBT community?

Resources

- Do they have any economic resources?
- Do they utilize the resettlement agency and its resources?
- Have they utilized LGBT services and programs?

Providers have an opportunity to help LGBT participants secure external resources as well as identify internal strengths. By doing so, providers reframe challenging circumstances, helping to positively shape participants' perspectives.

You can help participants reframe a situation by:

- Reminding participants that the adversity they experience may be out of their control, but the power to respond to and overcome obstacles is in their hands.
- Assuring participants that they have support at the agency; people are dedicated to seeing them succeed!
- Helping participants consider options that are available to them in the present.
- Assisting participants imagine possibilities and their vision of the future. Ask participants what they would want to try.

Communication Skills

There are a number of ways to signal support to a participant. Here are some examples:

ACTIVE LISTENING: It's as easy as...

Affirming
Being sensitive
Clarifying

Affirming

Participants may divulge very personal information that is difficult for them to share. Recognize their courage by acknowledging and responding to their statements. Participants will benefit from knowing that you are invested in the conversation and that you care.

Suggested responses include:

- "Thank you for trusting me with this information."
- "I'm sure that was not easy for you to talk about."
- "I heard you say...Is there more?"

Nodding your head and engaging in direct eye contact is a great way to affirm participants' words, especially when verbal exchange may not be appropriate. Watch body language and positioning. Facing away from a client (toward a computer screen for example) or crossing one's arms while talking sends a signal that you are not interested or engaged in the conversation. It is often preferable to have a conversation, especially a sensitive one, by moving out from behind the desk and facing the client directly.

Being Sensitive

Pushing your participants to share more than what they are comfortable with will inhibit them from engaging in future conversations, so follow their lead as they direct discussions. They may reference past experiences that still trigger a great deal of pain, so it is important your participants know that you are listening to what they are saying and that you are registering their statements and emotions.

Sample responses include:

- "I am sorry you experienced that."
- "I can only imagine how hard that was for you."

Statements like, "Well, it's all okay now," or "All will be better here in the United States, you don't have to worry anymore," may unintentionally delegitimize participants' feelings. Instead, focus on validating their emotions without making promises.

Clarifying

Asking questions, if appropriate, can signal that you are actively engaged in the discussion.

- "And what does that mean? Can you explain that further?"
- "When did this happen?"
- "Is this what you mean?"

Because LGBT participants are more likely to be survivors of torture and trauma, they may not recount stories in a linear fashion. Instead, their stories might jump back and forth between different times. While this can make it hard to understand the chronology of events, asking them to clarify may only upset or disorient them. Again, use discretion when asking questions; it is possible participants are less interested in relaying facts to you than in sharing their stories.

Dear Rainbow Welcome,

My participant came out to me as a lesbian and I didn't know what to say. I didn't want to make her feel uncomfortable so I just glossed over it and changed the subject. What should I have done in this situation?

Ally in Training

Dear AIT,

Thanks for writing in. You obviously care about supporting those you work with. It will be productive to consider who in this situation experienced discomfort. Your participant was comfortable enough to disclose her sexual orientation to you; take this as a good sign! You have earned her trust and confidence. Try to understand what about the situation may have made you nervous. Is this the first time a participant has disclosed this kind of information to you? It is natural to be nervous in new situations. In the future, if participants share with you their sexual orientation or gender identity, you can do the following:

- Thank them for confiding in you
- Assure them that you will protect their confidentiality
- Tell them you and your colleagues are here to support them
- Ask if they have any safety concerns
- Discuss available services in the area for LGBT individuals
- As you continue providing services, reflect on how the sexual orientation/gender identity of participants may impact core service delivery
- Remember, sexual orientation and gender identity are just facets of an individual and there is more to each person than their being LGBT

Thanks,

Rainbow Welcome

C. Cultivating an Inclusive Environment

What does it mean for an agency to be inclusive of LGBT participants? How does this affect services? What impact will this have on participants? LGBT refugees and asylees rarely disclose their sexual orientation and/or gender identity to resettlement staff. This is often out of fear of continued persecution and discrimination. If organizations do not actively signal support to the LGBT community, LGBT participants will likely assume, based on past experiences, that they will be met with hostility and harassment if they disclose.

By fostering an inclusive workspace:

- LGBT refugees and asylees will feel more comfortable sharing information in regards to their sexual orientation and/or gender identity;
- Staff can build stronger relationships with participants;
- Participants will be more communicative about their needs, allowing you to provide the necessary support;
- Participants of all backgrounds will learn more about LGBT individuals and the contributions they make to society;
- Colleagues who identify as LGBT will feel more comfortable in the workplace.

How can I make my workspace more inclusive?

Language choice and usage:

Through language, we have the opportunity to signal support to LGBT participants or discourage them from accessing services. Whether we intend to or not, the words we use (or don't use) can suggest either approval or disapproval of participants' sexual orientation or gender identity.

Dear Rainbow Welcome.

I don't want to assume the gender identity of participants. But how can I ask everyone who comes through my door what pronouns they prefer? Also, if I think a participant is lesbian, gay, or bisexual, can I ask?

Sensitive Case Manager

Dear SCM,

You're absolutely right that we cannot assume the gender identity of participants, nor can we assume their sexual orientation. The way in which participants express/present their gender may not correspond to how they identify. Still, let's think about why directly asking about the gender identity/sexual orientation of participants may not be the most appropriate or effective approach.

- Many refugees and asylees will be unfamiliar with such concepts. While this could offer an opportunity to educate participants on diverse sexual and gender identities, there may be other settings (e.g. cultural orientation) where such discussions are more appropriate.
- Some participants may be offended by such questions. While you could explain that asking this question is standard procedure, you still run the risk of jeopardizing your rapport, which is especially delicate when first meeting. It is more important that you earn and establish the trust of your participants than try to gather sensitive information in what might appear to be a forceful manner.
- Even if the participant identifies as LGBT, s/he may not feel comfortable sharing this information upon arrival.

This manual offers tips for how to demonstrate support in subtle, unobtrusive ways. This prevents any participant (whether LGBT or not) from experiencing discomfort or pressure while still marking the office as a safe space for individuals to disclose their sexual orientation/gender identity.

If you believe a participant is LGBT and you have developed a strong enough rapport with the individual, you may find a way to approach the subject in a discrete and sensitive manner, using discretion as to whether this is appropriate. Instead of asking outright, you can say, "I came across this brochure the other day of an organization offering services to LGBT individuals. Is this something you might be interested in?" Remind participants that they should feel comfortable coming to you with any questions and that they can meet with you privately and confidentially.

Thanks,

Rainbow Welcome

General word choice:

- As service providers and participants grow closer, it is not uncommon to inquire about personal relationships. When asking participants about their relationship status or history, ask if they have had a 'partner;' avoid using the terms boyfriend/girlfriend or husband/wife, so as not to assume the gender to which participants are attracted.
- Remember, staff set the tone at the organization. It is important to confront comments or opinions that are biased and discriminatory. Whether a colleague or another participant makes a disparaging remark against LGBT individuals, politely remind her/him that such language and sentiment is not tolerated at the agency. Encourage all to respect and appreciate differences. Refugee resettlement agencies are rich with diversity, participants spanning the entire globe. Staff and participants must extend respect held for cultural differences to differences in sexual orientation and gender identity.

Brainstorm with your colleagues on what steps you might take to intervene and support the participant. Then review Rainbow Welcome Initiative's recommendations.

Case Scenario:

On break from an ESL class in the office, participants gather in the lobby by the water cooler. A new participant, a transgender woman, arrives at the office for intake. A handful of ESL students begin to laugh and snicker, making imitative feminine gestures. The entire group erupts in laughter.

What you can do:

Understand that the participants may be laughing because they are unfamiliar or uncomfortable with a male-bodied individual identifying and presenting as a woman. Politely, but firmly, speak to participants about how such harassment and discrimination is not tolerated at the agency:

- "That is not how we treat other participants here"
- "We welcome everyone who walks through these doors."
- "Such behavior will not be tolerated."

Assure transgender participants that your agency does its best to cultivate a safe and supportive environment for all and that there is a zero tolerance policy against discrimination of any kind. Let your participants know that they should inform a staff member if they ever feel like they are being harassed.

Transgender persons and the use of pronouns

- If your participant is transgender, it is important to use the pronouns that correspond to her or his gender identity. For example, if your participant was born female but identifies as male, you want to use masculine pronouns when referring to him, in paperwork and in conversations.
- The safest way to know which pronouns a transgender individual prefers is by asking. Perhaps a transgender woman feels comfortable being referred to as 'she' and 'her' at the office, but not in public. It is also possible that participants will request different pronouns be used depending on how they feel that day and how they chose to present themselves. Take the cues of your participants and remember that it is okay to ask.
- You may have participants who transition during their resettlement period. It may take time for you to adjust to calling your participant by a different name. It is understandable that you may revert to her/his previous name in conversations. As long as you make a conscious effort of remembering, and correct yourself when you slip, your participant will know you respect her/his identity and expression.

Official documents:

Office documents present another opportunity to demonstrate support to LGBT participants. Think about all the paperwork participants sign when they first arrive. Are intake forms and other documents gender inclusive?

- If you ask for the gender of a participant, you can include Male, Female, and Transgender.
- Participants' legal documentation may not align with their preferred name. It is important to explain to participants that at official appointments, they will need to present their legal documents but should still feel free to tell with whomever they are meeting the name they wish to be called. Your participant may feel more comfortable if you inform the external party about which name they prefer.
- Bear in mind that when translating documents, there may not be a word in the participant's language that corresponds to 'transgender' or 'intersex.' Speak with interpreters about how you might get around this.

Physical Environment:

The physical space of an office can enhance or detract from participants' sense of belonging. Considering LGBT refugees' and asylees' experiences in hostile environments, it becomes even more pressing to make certain that they feel their physical safety and wellbeing is assured at the agency.

Restrooms

- Transgender individuals are often concerned about which restroom they can use safely; many will plan out their entire days in advance, conscious of their limited options.
 Transgender participants may feel most comfortable in a single occupancy restroom.
 If one does not exist at your agency, transgender individuals should be allowed to use a staff restroom if there is one. If transgender participants were to use a restroom designated for the gender they identify as, non-transgender participants may feel uncomfortable and could potentially respond violently.
- If transgender participants feel comfortable using the restroom for the gender they identify as, they should be able to do so. Forcing them to use an alternative restroom against their will further stigmatizes and isolates them.

Physical markers

Tangible markers that signal support to LGBT individuals let LGBT participants know this is a space where they can openly share who they are and be themselves. It also indicates to all staff and participants that intolerance will not be accepted.

- Put a rainbow flag up alongside flags of different countries.
- While originating in the West, the rainbow flag is a globally recognized symbol of the LGBT community.
- Display brochures from local LGBT organizations in your lobby and offices.

D. Ensuring Confidentiality

Confidentiality is a common concern among LGBT refugees and asylees. The fear of their sexual orientation or gender identity being discovered by hostile individuals is very real; many have experienced breaches of trust and confidentiality in the past, which often led to arrest, abuse, and torture. While repercussions such as these are not likely to occur in the United States, providers must honor their feelings and appreciate the sensitive nature of these issues. LGBT refugees often have not disclosed their sexual orientation or gender identity to family members and resettlement agencies must be acutely sensitive to the need to preserve confidentiality when working with multiple members of the same family. Demonstrating to participants the value you and your agency put on protecting their privacy will make them more comfortable trusting you and sharing personal information.

- Every organization should have a confidentiality policy. Check with your colleagues to find out if one exists. If a policy is not yet in place, work with staff and the organization's board to create one. If the policy does not include both sexual orientation and gender identity as grounds of protection, work to have these integrated in the existing policy.
- Participants and staff should all be familiar with the organization's confidentiality policy.
- Confidentiality policies should be reviewed frequently and strictly enforced.
- Organizations should have a release of information form that is used for sharing information with third parties, which may include other organizations, service providers, public agencies, and individuals (including relatives). Caseworkers should inform LGBT participants that they will not be denied services if they request information pertaining to their sexual orientation and/or gender identity not be shared.
- If participants are concerned about information leaking to the larger refugee communities, explain that all interpreters sign a contract and are also mandated to maintain confidentiality.
- If participants are concerned about sharing information to external providers, explain that other agencies you work with also have confidentiality policies and they will be able to provide better services if they have all the information available.

Think about how your office is set up. Is there a room or designated space for you to have sensitive conversations with a participant? Due to lack of space, caseworkers and other service providers may share quarters with other colleagues who might simultaneously be meeting with participants. Participants may not feel comfortable disclosing their sexual orientation or gender identity or talking about sensitive issues if other individuals are in the room, especially if they are from the same ethnic or national community.

Because you may not know a participant wants to discuss sensitive subjects, make it common practice to find an opportunity to meet with participants on an individual basis in a secure and safe setting. Establish open office hours to meet with participants. Perhaps whenever you meet with an individual, family members are also around. Affording participants an opportunity to come into the office alone and unaccompanied by friends or family may allow them to discuss issues they do not feel comfortable addressing while others are present.

Considerations for Youth

Finding time to speak to individuals alone is complicated when working with youth participants, who are not the primary clients. Parents may not feel comfortable, or will be suspicious, if their children come to the office alone or if you request time with them independently. Think creatively as to how you can touch base with youth participants in a confidential setting.

For example, just a walk to the water fountain affords enough time to briefly check in. "Hey, how are things going? How's school? I know it might be hard to talk when there are so many people in the room. If you ever need to talk privately, I am available to meet at the office or another public setting of your choice."

Interpretive services

Non-English-proficient participants require interpretive services during appointments and meetings. To assure LGBT participants' comfort and confidentiality, think carefully about who is selected to provide interpretive services regardless of whether you know the sexual orientation or gender identity of the refugee.

- Friends and relatives, while often most convenient to use as interpreters, may inhibit participants from sharing information. Former or current participants who do not have personal ties to a given individual may still be too connected within the refugee community to be considered as safe to disclose to. While your agency may have signed a confidentiality agreement with these individuals, participants may either not be aware of such arrangements or are concerned that information shared will still be leaked to others. If your agency employs individuals who are or are perceived to be entrenched in the refugee community and there is no other option but for them to act as interpreters, be sure each session is prefaced with the interpreter explicitly informing the participant that information is confidential.
- Employing telephonic interpretive services is encouraged because it provides the participant a higher level of confidentiality and anonymity. This may be too expensive an option for your organization to pursue. There are other cost-effective alternatives. Parents, Family, and Friends of Lesbians and Gays (PFLAG) is a national organization providing support to the LGBT community and friends and family members of LGBT individuals. PFLAG may serve as an excellent resource in identifying volunteer interpreters through their extensive network. If your organization is near a college or university, you can also reach out to students on campus when identifying interpreters outside the refugee community. Refugee resettlement agencies that cannot routinely afford telephonic interpretation may also consider informing refugees during orientation that they can request private consultation at any time using an outside interpreter if they wish to discuss private matters without family members present.
- All interpreters, regardless of background and experience, should undergo training with agency staff to review confidentiality policies and best practices for rendering interpretive services sensitive to all participants.
 Some languages may not have corresponding vocabulary for various LGBT terms. It is important interpreters are able to still effectively communicate concepts if terminology is lacking. Interpreters should also know to never use terms that may be viewed as derogatory to the participant.

Additional Considerations

- If an agency has multiple LGBT participants, it is best to not have a single case manager assigned to work with all of them. This might increase other participants' ability to identify LGBT individuals, who may not feel comfortable with community members knowing. Additionally, all agency staff should be comfortable providing the same level of services to LGBT individuals. Although LGBT refugees may decide to keep distance from their own communities, this is the choice of the refugee—agencies should not segregate or artificially isolate LGBT refugees from their communities.
- Confidentiality is never absolute. Inform
 participants under what circumstances
 information they disclose may not remain
 confidential (e.g. if a participant is a danger
 to him/herself or others, and if immediate
 harm may result). Failing to do so could
 result in the participant's sense of betrayal
 and loss of trust.
- Typically, caseworkers are assigned to participants based on shared national origin.
 For English-speaking LGBT participants, ask whether they feel comfortable working with a staff member from the same country of origin.

Dear Rainbow Welcome,

I realize maintaining the confidentiality of LGBT participants is really important. Am I breaching confidentiality if I share information with a colleague? What about with a third party that is delivering services, like the health clinic?

Considering Confidentiality

Dear CC,

Although you are not legally obligated to keep this information confidential from other individuals working within your agency, you should respect your client's request for confidentiality unless there is an immediate and compelling reason related to safety or essential services. Rather, if a participant discloses her/his LGBT status to vou in confidence, have a conversation about why s/he might benefit from others knowing. In regards to third parties involved in the resettlement of the participant, you must get a Release of Information signed prior to sharing information. LGBT participants may be particularly concerned about the agency sharing information with organizations and individuals with whom they may have not even made initial contact. While you cannot force your participant to disclose to others, have a conversation about how services will be impacted. If other service providers are informed about participants' sexual orientation and/or gender identity, they will be more equipped to meet their needs. Inform participants on the legal rights afforded to individuals in respect to confidentiality and allow them to discuss and process their concerns.

Thanks.

Rainbow Welcome

E. Additional Organizational Policies

In addition to having a clearly stated and well-enforced confidentiality policy, there are other policies equally significant to ensuring the rights and protections of LGBT participants. If your organization does not currently have the following policies in place, work with colleagues and board members to establish them.

Discrimination

Your agency likely has a discrimination policy in effect. Participants may or may not be aware of this though; communicating to them their rights while receiving services will make them more comfortable and empower them to advocate for themselves when necessary. Many LGBT refugees and asylees experienced discrimination in their countries of origin and had no legal or social recourse to take action. Knowing they have rights and protections will significantly impact their comfort level and sense of security.

- Discuss the discrimination policy during initial intake and then again during orientation.
- Be sure both sexual orientation and gender identity are included as protected groups.
- Ensure the discrimination policy protects both participants and staff.
- The discrimination policy should be posted in a high-traffic area of the office.
- Whenever possible, translate the policy into the language of participants.

Grievance

There may be instances when participants are unhappy with the services provided or are uncomfortable with the interactions they have had at the office. For when these situations occur, each workplace should have a grievance policy to follow. It is important that refugees and asylees have a voice, ensuring they have the opportunity to express their disappointment or discomfort with members of your team. While your workplace may have instated a grievance policy, staff and participants may not be aware of its existence.

A grievance policy will help identify and rectify any misunderstandings and will ultimately create a safer environment for all. Miscommunication or misunderstandings may occur between staff and participants. Perhaps a participant believes s/he is eligible for certain services that are not being offered when in fact these are not services that fall under your agency's mandate. It is possible a caseworker will unintentionally exclude or offend a participant. Utilizing a grievance policy can then be viewed as an opportunity for growth—a way to improve services and a chance for participants' voices to be heard.

Case Scenario:

After speaking with a female participant who resettled with her husband and children, a single gay Iraqi male, E., learns that the resettlement agency offers social activities for newly arrived refugees on a monthly basis. The female participant inquires as to why E. has never participated. E. was never told about these events because his caseworker assumed he would not be interested. Mostly families participate and the caseworker thought E., as a single gay man, would only feel uncomfortable. E. is hurt and wants to feel included; he has few friends and limited opportunities to interact with others. He is now reluctant to visit the office for services and English classes because he feels unwelcome. This is an instance in which a well-enforced and clearly stated grievance policy could address and resolve the breakdown of communication. If E. is empowered to voice his feelings and communicate either to his caseworker or another staff member about this incident, the opportunity to strengthen and improve access and quality of services emerges.

Putting Policies into Practice:

To ensure that the policies in place are practiced, managers should set a specific schedule to review them with staff and participants; not only will this raise awareness, but will increase everyone's investment in following and upholding them.

Sexual and Other Unlawful Harassment

Be sure sexual and other forms of harassment are addressed in your organization's policies. The policy should cover interactions between staff members, between staff members and participants, and between participants if they take place on office grounds. The policy should state that harassment based on gender identity and sexual orientation is unacceptable and the agency will take corrective action to any offending behavior. Harassment may also include refusal of staff to refer to participants by their preferred name or gender pronoun.

LGBT Inclusive Services Check List

(Adapted from Gil Gerald & Associates, Inc. Copyright 2011)

This check list is meant to guide you as you evaluate your agency's level of LGBT inclusiveness

Check off the items that your agency has accom	
Agency Policies and Procedures	Inclusive Language
□ Non-discrimination policy or human rights statement that includes sexual orientation	Forms and Assessments Agency wide forms (such as intake paperwork)
☐ Non-discrimination policy or human rights statement that includes gender identity	use inclusive language for LGBT individuals Available services for LGBT individuals are
☐ Mission statement is inclusive of LGBT individuals (would LGBT individuals feel excluded by current mission statement?)	made known during intake sessions for all participants, regardless of real or perceived sexual orientation and/or gender identity
☐ Policy and procedure in place for participants	☐ Service plans include LGBT needs if applicable
and staff for grievance issues	Visibility of LGBT People and Issues
□ Participants sign a release of information (ROI) form if their information will be given to another party. Participants can clearly state on this form what information, including sexual orientation and gender identity, they want to disclose or remain confidential. Staff Training and Conduct	☐ Openly LGBT people on staff
	☐ Openly LGBT people on board of directors
	□ Non-discrimination policy (with LGBT inclusion) displayed
	☐ Marketing materials reflect agency's LGBT participants and LGBT-friendly services
□ Staff receives basic sensitivity and cultural awareness training on LGBT issues and/or LGBT issues are included in other diversity trainings/staff development sessions □ All staff treat LGBT participants with respect by honoring confidentiality and respecting their identities	☐ Website reflects LGBT-friendly services
	☐ Pamphlets and brochures specific to LGBT services are available
	☐ Posters and/or other symbols signifying LGBT support are prominent
	Physical Space
☐ Staff is trained on how to intervene when participants and/or other staff members use derogatory language and/or act in a discriminatory manner toward LGBT individuals	☐ Meeting room space allows for privacy and maintenance of confidentiality for participants
	\square Restroom facility is gender-neutral
	Resources
	☐ Resources and referrals are inclusive of LGBT individuals and sensitive to their needs
	☐ Formal referral mechanisms and partnerships with LGBT oriented organizations are established

F. Physical Safety Concerns

When working to create a safe space for LGBT refugees/asylees, consider issues affecting the physical safety of this community.

Domestic violence

Domestic violence is when one intimate partner seeks to control the thoughts, beliefs, or conduct of the other intimate partner, or to punish their partner for resisting their control. This may manifest itself as physical or sexual violence, or as persistent or severe emotional and/or verbal abuse. Other forms include: economic abuse, isolation from others, and other controlling patterns. Domestic violence can occur in any relationship regardless of race, religion, culture, gender, or sexual orientation. Abuse often occurs in a cyclical fashion and is used to maintain control and power over one's partner.

Domestic violence is underreported and under recognized in the LGBT community but occurs at the same rate as heterosexual couples (25%). LGBT individuals may be reluctant to report due to compounded discrimination—prejudice against their samesex relationship and shame associated with domestic violence. The abused partner may feel isolated and afraid, convinced that the abuse is somehow her or his fault.

Factors that contribute to underreporting of domestic and family violence among LGBT refugees and asylees:

- Authorities often assume that abuse in same-sex couples is mutual.
- Male victims especially are reluctant to report because of the misguided notion that males cannot suffer abuse from their partners.
- LGBT refugees and asylees may not have the linguistic capacity or knowledge of rights to report incidents.
- They have fewer sources of support and often cannot turn to family or community members for guidance; domestic violence shelters also have limited resources for LGBT individuals.
- LGBT refugees and asylees may also fail to report abuse out of concern that their immigration status will be affected; in other cases, the abuser will threaten to 'out' her/ his partner if s/he were to report.

No one deserves abuse. As service providers, be attentive to participants and take appropriate action if abuse is suspected. Review the following case scenarios and consider what steps could be taken if such situations were to arise.

Brainstorm with your colleagues on what steps you might take to intervene and support the participant. Then review Rainbow Welcome Initiative's recommendations.

Case Scenario:

M. is a male Middle Eastern asylee who moved in with an older man, who is assisting him financially. You don't know if the asylee is gay or not, but you think he might be. The older man seems to have a large role in his life, advising him to take or reject job interviews, contacting resettlement workers, and asking for information. M complains about this occasionally and has mentioned several times that he feels like he should move out. His caseworkers have supported him in this, but M keeps going back. Recently, M has come to language classes with bruising, and is inattentive and troubled. You suspect that M is a victim of domestic violence. M. is larger and stronger than the older man with whom he lives, and you also worry that M's increasingly violent language when referring to the older man might indicate a risk that he could respond physically.

What you can do:

In a safe and confidential setting, you should confront M., expressing your concern and asking about the bruises. Conduct a risk assessment [Appendix IV] with M. and collectively determine a plan of action. Notify a supervisor of your suspicions and make sure to take a team-based approach to this situation, including mental health professionals, managers, and legal staff if possible.

QUESTIONS TO CONSIDER:

1. Does M. want to move out?

While you can present options to M., forcing him to move out of the apartment is not the answer. Survivors of domestic violence need to decide for themselves a plan of action. It is the responsibility of service providers to ensure that participants are aware of their legal and protection rights, as well as available services. If M. is inclined to stay in the apartment, you can explain the patterns of domestic violence and the most effective ways to end the cycle of abuse.

2. Is M. concerned for his own safety?

Asking this question gives the participant a chance to reflect on the danger he is facing and allows you to assess whether M. is experiencing an emergency.

3. Is the older man's safety at risk?

If you believe M. might resort to violence, you need to inform him of the repercussions he would face if violence occurs. Check immediately with a supervisor; imminent risk of severe violence or homicide triggers mandatory reporting. Charges of physical assault could render M. deportable.

You may be inclined to meet with both M. and the older man to mediate between the two of them. Unless you are a certified mental health professional and this facilitation is requested, such action is inappropriate and potentially dangerous. After conducting a risk assessment, inform your supervisor of the situation at hand. You may be a mandated reporter so familiarize yourself with the organization's polices and procedures.

Teen bullying and violence against youth

LGBT teenagers experience discrimination and harassment at school on a daily basis. Studies estimate that LGBT teens in US high schools hear anti-gay slurs on average 26 times each day. A third of LGBT teens experience a physical threat during the school year, many of whom feel as if they have nowhere to turn for support. LGBT teens drop out of school at a rate three times that of straight teenagers and are three times more likely to attempt suicide than their heterosexual counterparts.

LGBT refugee youth face compounded discrimination, as refugees, and as LGBT individuals. Refugee youth who are gender non-conforming may also be targeted and harassed for their perceived sexual orientation. For instance, Bhutanese youth sometimes grow their hair out and wear nail polish. They may not identify as LGBT but American students might assume otherwise.

TIPS TO DISCUSSING BULLYING WITH TEENS:

- Engage youth participants in a conversation about their experiences in school.
 - "Have you been enjoying your classes?"
 - "Are you making friends?"
- Youth who are bullied may feel ashamed to share this information with their case workers. Find ways to initiate discussion around bullying and harassment.

"I remember when I was in school. Some of the kids weren't very nice. Have you found this to be true in your experience also? Do any of your classmates bother or threaten you?"

If a participant informs you that s/he is being harassed, ask for permission to contact the school. Victims very often feel that they will be subject to even more abuse and public shaming if authorities get involved. Listen carefully to these objections, and affirm that you have understood his/her concern. However, also explain that bullying is a common problem, schools should have experience on how to address it, and that you are concerned about the risks of letting the abuse continue. When reaching out to school officials, discuss what interventions may be necessary. Whether an administrator, counselor, or teacher gets involved, it is important for the school to be made aware of bullying incidents.

Bullying experienced by youth participants should be taken extremely seriously. Do not feel as if you need to make decisions alone. Whenever the physical safety of a participant is concerned, notify a supervisor and involve colleagues as you plan a response. Also encourage parents' involvement if they do not pose an additional security risk.

Brainstorm with your colleagues on what steps you might take to intervene and support the participant. Then review Rainbow Welcome Initiative's recommendations.

Case Scenario:

C. is a teenage refugee girl from Burma. She confides in you that she is being bullied in school, but that she can't bear to tell her parents or discuss it. She tells you that she is accused of being a "lesbian." You don't actually know what her sexual orientation is, but she is being made fun of for spending a lot of time with another girl who students in the high school say is a lesbian. Her parents are concerned that she doesn't have more friends and tell her to find other friends and spend less time with that girl.

What you can do:

- Thank C. for sharing and for trusting you. Remind her that this information will remain confidential if she so desires.
- Tell C. that she should not be embarrassed about being bullied. She has done nothing wrong; the bullies' behavior is what is shameful.
- Ask C. whether she would like you to take a
 particular action, or whether you can suggest
 a course of action. Does she want you to call
 the school to intervene? Does she want you
 to have a conversation with her parents?
 Is she looking for outside resources or someone
 to speak with about this? Explain to C. that
 bullying is a serious issue and that you suggest
 making contact with school officials.
- If you sense C. would benefit from professional mental health services and she is interested, make a referral. You may need to have a conversation with C.'s parents first. Explain how it is natural for refugee youth to want to speak to someone about their adjustment to life in a new country. Speaking to a mental health professional can be very helpful as youth face many new changes and challenges.
- After conducting a risk assessment, determine if C. is at immediate risk of violence or self-harm. There are mandated reporting requirements for individuals who are suicidal. Be sure to take a team approach to responding to such situations and involve your colleagues and supervisors.

3. Direct Service Provision

A. Employment/Vocational Services

LGBT refugees/asylees have unique concerns when looking for work. This section offers recommendations to help identify and secure job opportunities that are appropriate and safe for LGBT participants, facilitating their successful transition to the US employment sector.

Pre-employment activities

1. Carve out time to discuss job opportunities:

Back in their countries of origin, many LGBT refugees and asylees were subjected to harassment from coworkers and were sometimes fired as a result of their sexual orientation and/or gender identity. They may have reservations about re-entering the workforce in the United States for this reason; to address and mitigate their anxiety, employment counselors should encourage LGBT participants to openly discuss their concerns and fears with staff.

A male Iraqi refugee described the anxiety and fear he endured during the job search process, stating, "I didn't want to work in an environment with other Iraqis. I was still traumatized."
The respondent explained that he was very concerned that he would be placed in a job with other refugees from the resettlement agency. Contemplating this possibility and imagining the continued prejudice and discrimination he could be confronted with, he thought "I don't want to have this experience again." This type of continued discrimination can be avoided through the intentional career planning by resettlement staff based on discussions with LGBT participants.

2. Assess and honor participants' boundaries:

- LGBT participants, out of concern for their safety and wellbeing, may not be willing to take certain jobs. For instance, if a job involved working with individuals from their country of origin, they may not feel comfortable taking the position. To reduce psychological stress and ensure participants thrive in their new job placements, work collectively to evaluate which jobs are most suitable. This should be done as caseworkers and participants develop individualized employment service plans. Assess the appropriateness of certain jobs while assuring compliance with cash assistance programs.
- Under the guidelines of the Matching Grant program, a refugee's or asylee's participation can be revoked if she or he refuses a job offer. Sensitivity should be paid to LGBT participants if a job is turned down due to security concerns. Service providers have the ability to make such accommodations while maintaining compliance because of the flexibility Matching Grant guidelines afford; guidelines stipulate that jobs must be "appropriate." Resettlement agencies are subsequently able to account for and consider workplace conditions that may impact LGBT participants.

Pre-employment activities (continued)

2. Assess and honor participants' boundaries (continued):

The safety of participants must always be prioritized. While it is necessary to honor participants' boundaries, service providers can allay LGBT participants' anxieties by informing them of the rights and protections they are afforded in the United States or in local jurisdictions. However, in some jurisdictions, employers can discriminate against LGBT employees. Know the law in your area. This puts an additional burden on employment counselors to identify LGBT-friendly employers.

Investigate prospective employers' policies:

- Does the employer have a nondiscrimination policy? Does it prohibit discrimination based on sexual orientation and gender identity and expression?
- Does the employer have an anti-sexual harassment policy in place?

Regardless of policies in place, service providers cannot guarantee participants will never encounter any discrimination at work. Providers can inform participants of their rights and encourage them to advocate for themselves if they experience harassment on the job. Participants need to know they can alert their supervisors and/or case managers if they feel like they are being discriminated against or treated unfairly. If not explicitly informed, LGBT participants may assume they have no available recourse.

4. Cultivate partnerships with LGBT-friendly companies and businesses:

- Search for and develop a list of companies that actively support the LGBT community and have transparent policies in place that protect LGBT individuals from discrimination.
- Collaborate with the local LGBT Chamber of Commerce (nglcc.org).
- Network with local LGBT organizations to locate safe job opportunities.
- Search for LGBT-friendly workplaces on our website (RainbowWelcome.org).
- Increasingly, third party employment agencies contracted by corporations make hiring decisions. While their practices and policies may not be transparent, they may have exclusive access to many jobs for which refugees qualify (e.g. English speaking ability not required). To the extent possible, speak to representatives to determine if the jobs available are appropriate for LGBT participants.

"Some of the other employees made fun of me because of how I talk and act. For a while, my manager was asking me to do a lot of tasks I did not see others doing. This was very hard for me. Later on, someone approached me and told me that this guy who was making me do all this work was not even a manager—he just wanted me to do his job for him...I never really felt comfortable there."

A gay Mexican asylee, describing his difficult experience at his first job.

Post-employment activities

After successfully securing employment for LGBT participants, there are additional measures one can take to ensure a smooth and safe transition.

Safety

Best practice is to provide all program participants with a card with emergency contacts, including your agency, police, and crisis hotlines. Encourage your participants to keep these numbers with them and to use at work should it be necessary.

Self-disclosure

Remind your participants that they do not need to disclose their sexual orientation or gender identity to their employers or fellow coworkers if they do not feel comfortable doing so. Be prepared to support your participant either way. Understand that for many, coming out is a life-long process; while they may be 'out' at the resettlement agency, they may not feel comfortable disclosing at work.

Sexual harassment and discrimination

 As participants prepare to enter the workforce, they should be made aware of potential risks. Educate them on the protocol they and their coworkers are expected to follow.

Familiarize yourself with the company's sexual harassment and discrimination policies. Inform your participants of the rules and regulations they are expected to abide by as well as the repercussions they should expect to face if they do not.

Sexual harassment and discrimination (continued)

- Service providers should continue to monitor participants' placements after employment is secured. Assess any existing barriers in the workplace and strategize a plan of action. Conducting follow up with both the participant and employer allows caseworkers to identify and resolve any issues, resulting in healthier work environments, more positive work experiences, and longer job retention.

Empower participants through advocacy and support

- If a participant is experiencing harassment at the workplace, intervene and discuss with her/his employer how to best immediately resolve the situation.
- Should a LGBT participant experience severe discrimination or be fired due to sexual orientation or gender identity, consider making a referral to a lawyer.
 Review Section Four for additional tips.
- Create materials and educate participants on local and national resources relevant to issues in the workplace. Agencies such as Equal Employment Opportunity Commission, Department of Labor, Department of Justice-Civil Rights Division, and state employment commissions can assist in employment related questions.

NOTE ON TRANSGENDER PARTICIPANTS IN THE WORKPLACE:

Transgender refugees and asylees will experience additional challenges when looking for work. They will find it harder to obtain employment, and harder to avoid or mitigate discrimination and hostility in the workplace. Transgender participants may be in the process of transitioning; it is possible they will feel pressure to present as a different gender at work than they do elsewhere, exacerbating emotional or psychological anxiety. Transgender individuals are at greater risk of experiencing discrimination in the workplace. The National Center for Transgender Equality and the National Gay and Lesbian Task Force reported that 90% of transgender individuals encountered some form of harassment or mistreatment on the job; 26% were fired because they were transgender. For these participants, a thorough examination of companies' policies and cultural climate is especially important.

- Service providers can empower transgender participants to report discrimination to either their agency or their supervisors.
- New-hire paperwork may have to be completed with the participant's legal name.
 When you explain the requirements to your participants, inform them that they can still request to be referred to by their preferred name when at work.
- If you have developed close relationships with certain employers for whom a transgender participant is qualified to work, consider having a conversation with them to ensure they are sensitive to the participant's transgender identity.

B. Housing

Caseworkers have the responsibility of locating and securing, per the Cooperative Agreement, "safe, decent, and sanitary" housing that is affordable for participants. This section offers guidance for when identifying housing opportunities for LGBT participants.

How do participants' sexual orientation and gender identity affect where and how they should be housed?

As refugees and asylees from all communities and backgrounds resettle in the United States, they hope to live in a space where they feel safe and comfortable. LGBT refugees and asylees are often resettled alone, as they are frequently escaping discrimination and persecution by their own relatives. Resettling as single cases places LGBT refugees at a distinct disadvantage both financially and emotionally as they are not afforded the emotional and financial support families can provide. Since LGBT refugees will often resettle alone, the decision about where they live and who they live with falls upon the resettlement agency.

Location

Neighborhood

When identifying potential housing accommodations, consider the following:

- Is the neighborhood generally safe and welcoming for LGBT individuals?
- Have hate crimes been reported in the neighborhood?
- If you are unfamiliar with the surrounding neighborhoods and the conditions for LGBT individuals, contact local LGBT organizations about safe neighborhoods and/or conduct a web search for local LGBT businesses and organizations.

Accessibility to LGBT resources

While most large cities have easily identifiable LGBT neighborhoods, LGBT friendly housing options may not necessarily be feasible in some rural and suburban areas, where it might be more difficult to find housing in close proximity to LGBT resources. Although these services are not exclusive to metropolitan cities, there are dramatically fewer resources readily available for the LGBT population in rural areas; resettling this population far away from LGBT organizations and communities may result in increased isolation and stigmatization.

Housing within refugee communities

While resettlement agencies are inclined to resettle individuals in areas where other members of their country of origin live, it may not be safe for LGBT refugees to live with or near other members of their ethnic or national community.

- Many LGBT refugees and asylees are reluctant to interact with members of their home communities because of the continued discrimination they would potentially endure.
- LGBT refugees and asylees may remain close to others from their country of origin because they rely on their support. They often do not disclose their sexual orientation or gender identity and this can have harmful consequences on participants' mental health and emotional wellbeing. If they do disclose, they may be met with hostility, even violence. Monitor their safety and wellbeing on a regular basis.

Housing for transgender refugees/asylees

Location is also a serious concern for transgender refugees and asylees, who are at greater risk of being harassed and targeted as they may not be able to 'pass' in the same way LGB persons can. Police sometimes assume that transgender individuals are sex workers based only on their gender expression, and will make arrests without due cause. Transgender participants should be housed in neighborhoods with low risk of assault and discrimination. Having easy access to a LGBT clinic is also critical for transgender refugees and asylees as they may wish to seek out medical services upon their resettlement. Sometimes resettling transgender refugees near a local college or university makes sense if the college campus is generally tolerant of LGBT persons.

Dear Rainbow Welcome,

I recently housed a transgender participant in an apartment complex near the office. She alerted me two weeks ago that the kitchen sink is perpetually clogged. She had made several requests to the landlord to have it fixed but still no one came by. I paid a visit and asked the landlord if he could do something about the sink. He said he was very busy but would send someone to look at it soon. He kept using masculine pronouns to refer to the participant, which made me uncomfortable. I am concerned he is discriminating against the participant because she is transgender; he is always very responsive to other tenants' needs. I feel as if I should say something but our agency has a long-standing relationship with this landlord and I would not want to jeopardize that...finding apartments is always a challenge and we cannot afford to lose our connection to this complex.

Struggling with management

Dear SWM.

I understand the difficult situation in which you find yourself; while you have your participant's best interest in mind, you also want to navigate this situation delicately so as not to cut off ties with someone who is important to your organization (and other participants). I encourage you to follow up with the landlord and have a frank, respectful conversation. Here is sample language you can use:

"Hi Tom. I wanted to check in on the status of my participant's sink—she lives in 3D. I really appreciate how responsive you are to all of your tenants' needs, which is why we continue to house our participants in your complex. I hope Clarisse has the same positive experience as our other participants. Also, I wanted to talk to you about something else. I know it is sort of confusing because the tenant signed the lease as Yusuf. She prefers to be called Clarisse though because as you can see, she identifies as a woman. You've been very sensitive to the backgrounds of all our participants, understanding they have fled persecution because of who they are. I want to thank you for extending this same respect and sensitivity to Clarisse. Of course, if you have any questions or concerns, you should let me know."

Frame the conversation positively, highlighting how enjoyable your working relationship has been. Don't forget though that while your agency depends on this landlord to house participants, the landlord has also probably come to rely on the steady source of income your participants provide by resettling in his complex. You can gently and subtly remind him that if the respect and responsiveness were not afforded to all participants, you would begin to house participants elsewhere.

Thanks,

Rainbow Welcome

"Sometimes I feel discriminated against at home. My roommates know and we don't talk about it but sometimes they give me a hard time. They harass me. This is why I want to move out."

A transgender asylee from El Salvador, commenting on her living arrangements

When Sexual Orientation/ Gender Identity Is Unknown:

LGBT refugees and asylees may not immediately disclose their sexual orientation and or gender identity and it is likely this information is not available during allocation. As a result, you may find that you have unknowingly housed a LGBT participant with an individual intolerant of the LGBT community, perhaps someone from the same country. If participants disclose their sexual orientation and/ or gender identity later in the resettlement period and inform you they feel unsafe in their current living situation, immediate action must be taken to ensure their security. It is not uncommon for participants to request a move; often it is because they are unhappy in their apartment or want to live closer to friends/ family. While it is not necessary to accommodate such requests, when the safety of a participant is compromised, accommodations must be made.

Roommates

LGBT refugees and asylees will most likely require shared housing in order to pay rent. Roommates add a variable that could potentially put refugees and asylees at risk for continued persecution and re-traumatization.

It is necessary for LGBT refugees to live with individuals who are supportive of their sexual orientation or gender identity. Roommates share in the responsibility of creating a safe space for LGBT refugees and asylees.

Resettlement affiliates should whenever possible screen potential roommates to ensure LGBT participants are matched appropriately. It is the participants' decision to disclose to their roommates. Information regarding the sexual orientation or gender identity of a participant should not be communicated to prospective roommates under any circumstances. Cultivate relationships with potential roommates and identify who would be supportive of LGBT individuals. Keep these individuals in mind when housing a LGBT participant.

Dear Rainbow Welcome,

How can I identify roommates who are supportive of LGBT participants? A lesbian woman from Uganda will be resettling next month. We also have a single woman from Iraq for whom we have no information or history regarding her sexual orientation or possible history of trauma. They are arriving at the same time. I wonder if I can house them together. I'm nervous to do so because I realize the LGBT community is not tolerated in Iraq either.

Housing Assistance Please

Dear HAP,

I understand why you would be reluctant to house these two women together. We have found that housing a LGBT participant with a non-LGBT participant is not as likely to result in any harm if the participants are from different countries of origin. A LGBT person from the same country might appear to be posing a threat to the individual's culture and community. A LGBT individual from a different background does not provoke the same sentiment and emotional response.

LGBT participants benefit from shared housing since they would likely not be able to afford rent were they to live alone. Living with a roommate also promotes relationship building and networking, preventing continued isolation.

Still monitor your participants' housing situation. Check in with each individual independently so they feel comfortable sharing their experiences. Remember that if the Iraqi woman experienced torture or sexual assault, this factor may be more relevant and more challenging than the other refugee's sexual orientation, as highly traumatized individuals may have difficulty interacting with others independent of any concerns about sexual orientation. Do not disclose sexual orientation or gender identity to one roommate just as you would not disclose a history of trauma to the other. Be attentive to signs of discomfort or hostility.

Thanks,

Rainbow Welcome

Dear Rainbow Welcome,

Can I house two LGBT participants together in the same apartment?

Coordinator Question

Dear CQ,

Yes, that's usually acceptable. There is greater reason to be concerned when housing a LGBT refugee and a straight refugee together than two of the same sexual orientation and/or gender identity. LGBT refugees can be an excellent source of support for each other as they share a great deal in common. That said, there is no way of knowing for sure whether two strangers will connect. As with any refugee, you should be attentive to housing concerns once they arrive and be ready to provide alternative accommodations if these two LGBT participants cannot be housed together for some reason not known at the time of allocation.

It is also possible for two participants to become romantically involved. In other cases, there may be incidents of sexual harassment. There is not much you can do in regards to this aside from being aware of the possibilities and supporting your participants as needed.

Thanks,

Rainbow Welcome

Case Scenario:

A gay Bhutanese man, D., arrived two months ago. He was housed with another single Bhutanese man who had resettled within the same week. D. did not self-identify upon his resettlement and no mention of his sexual orientation was made in his assurance documents. D. comes into your office one day to tell you that he is gay and that he recently began dating someone he met at a local LGBT event. D. informs you that his roommate learned of the relationship and is now harassing him, threatening him to end the relationship immediately.

What you can do:

• Thank D. for sharing this information and for trusting you. Remind him that this information will remain confidential if he so desires.

- · Conduct a risk assessment.
 - What has the roommate said?
 - Have the threats been escalating?
 - Is there a risk if the roommate discloses information to the program participant's family or community?
 - Has any physical force been used?
- Talk with D. and determine whether he needs to relocate immediately (that night) or if he can remain in the apartment for any period of time (a couple days, a week). If D. is at risk of physical violence, immediate relocation is necessary. Assess the situation to determine if D. or his roommate should be the one to move out.
- Identify alternative accommodations.
 Perhaps another refugee arriving can fill the empty space.

ADDITIONAL STRATEGIES FOR HOUSING LGBT PARTICIPANTS:

- Coordinate with other resettlement agencies when identifying appropriate roommates. Set up an email listserv for local resettlement affiliates to communicate housing needs as they arise. In order to maintain the confidentiality of LGBT participants, do not provide enough personal information that would make the participant identifiable. "I have an Arabic-speaking male refugee arriving. I am looking for gay-friendly housing." This request does not disclose the country of origin nor does it explicitly 'out' the refugee as gay. Remember that sexual orientation or gender identity should not be disclosed to roommates by anyone but the participants themselves.
- Reach out to local LGBT organizations.
 Members of the LGBT community may
 have space in their homes available to rent
 to LGBT refugees/asylees. LGBT groups
 may also be interested in fundraising for this
 population to support LGBT participants'
 resettlement. This funding could go towards
 an emergency funding account which can
 be utilized if a LGBT participant needs to
 evacuate and/or live alone.
- Use agency discretionary funding to offset rental costs for LGBT participants who have to live alone.
- Post-arrival housing assessments of welfare and living conditions are critical to ensuring the safety and wellbeing of participants.
 When conducting mandatory home visits, inquire with each participant as to how s/he has been feeling. Pointed questions may be necessary if participants are not comfortable initiating discussion (e.g. Are the two of you getting along okay?). Interviews with roommates should be conducted separately to offer participants an opportunity to speak freely.

What about LGBT refugees and asylees who resettle with families?

Of course, some LGBT refugees and asylees resettle with their families. Some families may be aware of their relatives' gender identity and/or sexual orientation and others will not. If LGBT refugees and asylees have not yet disclosed, it can be incredibly stressful hiding this part of themselves. Families may also kick out an LGBT relative if her/his sexual orientation or gender identity is discovered. See Section Six to read about how service providers can mediate familial conflict and prevent this from occurring or ensure safety when it does. Remember, minors have the same right to confidentiality as adults; providers should not disclose a minor's gender identity or sexual orientation to other members of the family.

C. Health Services

LGBT refugees/asylees have unique and specialized health concerns. Lesbians for instance are at higher risk for breast cancer and heart disease. Some LGBT refugees may be at greater risk for contracting sexually transmitted infections (STIs) and will respond to different health education information and prevention strategies. Like most refugees/asylees, LGBT program participants are initially unfamiliar with the US medical care system and may not know how to advocate for themselves during appointments; compounding linguistic and cultural barriers, concerns about disclosing one's sexual orientation and/or gender identity presents additional challenges for LGBT refugees/asylees.

Empowering Participants in Health Care Settings

To ensure LGBT refugees/asylees are comfortable during medical appointments and fully understand their rights as patients, resettlement workers need to address each of their concerns prior to initial health screenings.

Confidentiality

- LGBT refugees/asylees may be reluctant to self-identify as LGBT to their doctors, fearful this information will be leaked and shared among family or community members.
 Assure participants that doctors are required by law to maintain confidentiality. Explain why disclosing information regarding sexual practices or gender identity will help nurses and doctors provide better care.
- Program participants often do not have the linguistic capacity to communicate with medical staff. Participants are entitled to interpretive services at every visit and must be informed of all their options. Englishspeaking family members or friends often accompany participants to interpret, but LGBT refugees may not feel comfortable sharing sensitive information if relatives or friends are present. Explain to program participants that they can request telephonic interpretation or for an interpreter to be provided by the health care facility if they prefer not having family and friends perform this task. This should also be made clear to refugees/asylees who have not self-identified as LGBT.
- LGBT refugees/asylees may worry that sharing information relating to their LGBT status will result in discrimination at the health facility. Discuss with participants the strict professional ethic codes by which health practitioners abide. If they feel that they were harassed or discriminated against, they have the right to submit a grievance and should notify their caseworkers immediately.

Understanding Procedures

- Medical staff may use terminology not familiar to program participants. LGBT refugees/ asylees need to know they are able to ask questions at any time during their appointment if they are confused and require clarifications to be made.
- Encourage LGBT refugees/asylees to honestly discuss with their providers their behaviors, concerns, and needs.
- Explain patient rights and responsibilities to program participants before they have their first medical visit. It is necessary for them to know how they can advocate for themselves during appointments. For instance, LGBT refugees/asylees may wish to request their doctor/nurse is of the same or opposite sex.
- Participants have the right to see a medical professional without family members present.
 However, they can also request to have family members present during appointments if so desired.

Advocacy

While refugee health clinics may be well versed in providing culturally competent medical care to patients of different national origins, they often have limited capacity in offering LGBT-sensitive health care services. Resettlement agencies in the local area can collaborate with LGBT health clinics to provide trainings to refugee health clinics.

• LGBT refugees and asylees are far more likely to be survivors of torture and/or to have suffered from other forms of life-threatening violence. They may feel uncomfortable during physical examinations; breast exams, gynecological exams, pap smears, and colorectal exams are particularly sensitive procedures that could trigger past traumatic events. Medical staff should know that to make LGBT patients more comfortable, they should move through each procedure slowly, explaining the purpose of each step.

LGBT refugees and asylees may feel more comfortable accessing health care services at a LGBT health organization. While these groups are experts in serving the LGBT community, they usually have not worked with refugees before. In this case, resettlement agencies can provide guidance on working with this population.

- LGBT health organizations may not recognize or respond to parasitic or infectious diseases that are rare or non-existent in the United States, but sometimes occur in refugees.
 Some infections can remain latent for many years, and health care providers who are not experienced with immigrant populations should pay particular attention to taking a thorough history, and be prepared to refer to an infectious disease specialist as needed.
- LGBT health organizations may not recognize that some refugees/asylees use traditional forms of medicine that could impede the efficacy of medications prescribed in the US.
- LGBT health organizations are unlikely to understand or anticipate cultural differences in perception of causes of disease; some refugees attribute illness to spiritual or environmental factors which are unfamiliar to western practitioners, and which may affect adherence to treatment regimens. Health care providers working with refugees should make sure to schedule follow-up appointments to check in on treatment adherence, and take extra time to explain dosage, prescriptions, and reasons for medication.

Sexual Health

Refugees/asylees in general, but especially LGBT refugees/asylees, may experience discomfort when talking about their bodies or sexual practices and health. They may attach shame or embarrassment to who they are and what they do. Additionally, LGBT refugees/ asylees sometimes become sexually active for the first time upon resettling. They may never have had access to information on sexual health and practices before and may be reluctant to ask questions now due to shame, discomfort, or fear of discrimination. All of these factors may result in risky sexual behavior, including elevated risks of sexually transmitted infections. Addressing sexual health in an inclusive manner normalizes this conversation so that program participants are aware they can broach this subject with their service providers.

- Integrate a discussion on sexual health into new arrivals and cultural orientations.
 Resettlement service providers are not expected to cover sexual health and safe sex practices in depth. It is necessary to at least mention the importance of safe sex and inform participants that if they have questions, they should feel comfortable approaching their caseworkers and physicians.
- Other potential topics to include during orientation or healthcare workshops: STIs; HIV/AIDS; sexual violence.
- Make sure to let participants know that they cannot be deported or arrested for same-sex sexual activity that takes place in a private space between consenting individuals of age. This will not be a factor in their green card or citizenship applications either.

Gender Identity and Healthcare

Transgender or gender non-conforming participants may expect that they will have insurance that covers procedures, medications, and general care associated with transitioning. It is important to address and manage expectations, and answer questions about whether Medicaid or private insurance will cover the following:

- Psychological counseling for the initial diagnosis and for guidance through the transition.
- Hormone Replacement Therapy (HRT).
- Permanent facial hair removal for transgender women
- Breast augmentation for transgender women.
- Bilateral mastectomy and chest reconstruction for transgender men.
- A hysterectomy for transgender men.
- Genital reconstruction (also called sex/gender realignment surgery).

Currently, federal Medicaid regulations do not provide any guidance on whether this type of healthcare for transgender individuals should be covered. Programs differ in each state, so research the regulations in your state or reach out to LGBT organizations for the most up to date information.

Dear Rainbow Welcome,

I just discovered that a transgender participant of mine is not using her cash assistance to pay for food and rent but is instead spending her money on hormone therapy. I'm at a loss of what I should do or say. I'm worried she could be evicted.

Not Enough Cash Assistance

Dear NECA,

Your participant should not have to choose between food, rent, and hormone replacement therapy; she cannot live a full life with dignity without any one of these. Hormone therapy is a standard and necessary medical treatment for transgender persons who have decided to undergo transition. Because surgery and hormone treatment are not covered under many medical insurance plans, some transgender refugees may have to defer their plans until they are able to find the financial resources, or relocate to a jurisdiction in which they can obtain some form of insurance support. However, if transgender persons are well into their process of transition, access to hormone therapy becomes a medical necessity. Improper use of hormones can affect mood and exacerbate underlying depression or other mental health problems, and obtaining needles for illicit use of hormones can raise the risk of HIV.

Consult a physician to assess your participant's health risks if she were to end hormone replacement treatment. If she is not at risk, she may have to delay treatment. Let her know you understand how vital this is to her wellbeing and that your team is aggressively looking for supplemental income that will allow her to pay for this necessary expense. Also reach out to LGBT organizations and clinics that may offer hormone replacement therapy on a sliding scale for low-income individuals.

Thanks,

Rainbow Welcome

HIV/AIDS

Resettlement providers should include HIV/ AIDS education as a part of cultural orientation for all refugees.

LGBT refugee/asylees living with HIV/AIDs have additional healthcare needs. There is still a great stigma associated with positive HIV/ AIDS status. Although HIV positive refugees historically have higher treatment compliance than the general population, every individual is unique. Some refugees may struggle with their status and decide not to address their healthcare needs, forgoing medications or avoiding treatment. Refugee resettlement agencies should assess HIV positive participants to determine if they are engaged in HIV specific medical care and if they understand their medication regimen. Once HIV positive refugees are enrolled in treatment, refugee resettlement agencies have a responsibility to work closely with healthcare providers to assure that patients are appropriately educated and monitored to assure compliance. Additionally, HIV positive refugees have a higher risk of having been exposed to tuberculosis and other latent infectious diseases prior to arriving in the United States, which can present additional challenges if refugees are not compliant with their treatment regimen and develop compromised immune systems.

NEXT STEPS

- Research LGBT health issues.
- Identify LGBT healthcare providers in your area and establish formal referral mechanisms.

Work with other resettlement agencies in your area and with LGBT healthcare providers to strengthen or formalize partnerships and establish systems for referrals.

The Centers for Disease Control (CDC)
 provides information on both providing care
 to refugees and LGBT populations on their
 website, and the Gay and Lesbian Medical
 Association (GLMA) have a set of guidelines
 for healthcare providers serving LGBT
 individuals. Links to both of these sites
 are available on the Rainbow Welcome
 Initiative website.

4. Legal Services

As service providers, you are in a unique position to be the first line of defense in screening possible legal services your refugee/asylee participant may need, but it is critical that you appreciate the severe consequences that can come from providing improper legal advice. Learning about the needs of LGBT individuals will help you determine when to refer them to an attorney. This section will assist you in doing just that. You should consider the information provided in this section as a guide and resource. It is not intended to serve as a substitute for legal counsel and under no circumstances should you provide legal advice to anyone. Providing legal advice is not only illegal, but it also may adversely affect an individual's potential avenues of immigration relief. Moreover, it is crucial to timely refer individuals to a lawyer because some claims are subject to strict filing deadlines and have additional rules about documentation.

A. Civil Law, Discrimination, and Hate Crimes

Employment Protections

Some states have laws that make employment discrimination on the basis of sexual orientation illegal. State non-discrimination laws often protect individuals who experience discrimination based on real or perceived status. Typically, these laws ban harassment and discrimination in hiring, firing, and promotion practices but they do not always require employers to provide equal benefits to LGBT employees or their partners. The Employment Non-Discrimination Act (ENDA) would provide explicit protection based on sexual orientation and gender identity, but has not yet been passed at the federal level. The Americans with Disabilities Act protects people with HIV from workplace discrimination. Applicants do not have to disclose HIV status unless it affects their current ability to perform their job. HIV positive participants are also entitled to reasonable accommodations on the job, such as flexible scheduling. In April of 2012, the Equal Employment Opportunity Commission ruled that transgender individuals are covered under Title VII, the federal sex discrimination law.

If a participant reports discrimination or harassment at work, gather as much information as you can, including:

- What happened and who was involved;
- Testimony from co-workers or supervisors;
- Employers' personnel policies, non-discrimination policies, and/or relevant union contracts;
- Grievance policy procedures;
- Advise the participant to save any threatening or discriminatory emails, letters or other documentation.

You may consider contacting an attorney to discuss all available legal options if the participant so desires.

While laws vary throughout the country, employers in some states may be free to ask about sexual orientation, and marital or family status.

Employment Protections (Continued)

QUICK TIPS

Investigate employers' non-discrimination policies before placing participants, and stay informed of local non-discrimination laws. If there are no protections in your state, LGBT persons may still be protected under laws relating to free speech, harassment, invasion of privacy, defamation, or interference with an employment contract or collective bargaining agreement.

Lambda Legal reports that the following questions are illegal to ask in an interview:

- Are you in good health?
- What prescription drugs are you currently taking?
- Have you ever been treated for mental health problems?
- How many days were you sick last year?
- Do you have HIV or AIDS?
- Do you have a disability? (They can ask about ability to perform the essential job functions)

How can I support participants?

Discuss the rights and protections afforded to LGBT individuals at work with all participants during job readiness programming. Inform participants how to document harassment or discrimination on the job.

Family Law

LGBT refugees and asylees cannot apply for same-sex partners to join them and receive an immigration status that is tied to theirs. This can make family reunification difficult. For LGBT participants in committed relationships, provide information about state and local laws regarding marriage, civil unions, and domestic partnerships, and refer them to a lawyer to discuss power of attorney, living wills, and other legal protections. LGBT refugees have the right to form families of choice, including through adoption. Resettlement agencies should refer LGBT participants to appropriate legal assistance to formalize same-sex partnerships and adoptions.

Hate Crimes Legislation

LGBT refugees/asylees are often isolated and easily targeted, making them more vulnerable to hate crimes perpetrated by family members, members of the home community, or others they interact with in the United States. It is critical resettlement agencies include safety and legal information pertinent to LGBT individuals during orientation. Highlight that everyone has the right to be:

- · Free from fear
- Protected by the laws in their community
- Protected by the police officers in their community

What does the current law look like? The Federal Hate Crimes Law of 1969 was extended in 2009 with the Matthew Shepard and James Byrd, Jr. Hate Crimes Prevention Act. The law now covers crimes motivated by a victim's actual or perceived gender identity or sexual orientation.

Healthcare Law

Millions of Americans have difficulty securing affordable, comprehensive healthcare coverage. This is especially true for low-income individuals, the un- or underemployed, and LGBT persons. LGBT refugees/asylees face these same challenges in accessing sensitive, culturally-competent, affordable healthcare.

Transgender specific concerns

Discrimination based on gender identity is commonly experienced in healthcare settings. If a participant complains of any of the issues listed below, contact a legal organization such as the Transgender Law Center or Lambda Legal for further assistance.

- Applications for healthcare insurance may be denied on the basis of transgender status or their history of medical care related to transitioning. There may be legal options to appeal this decision.
- Many health insurance policies exclude coverage for hormone therapy, transitionrelated surgery, or other transgender related healthcare, but not all. Resettlement workers may need to help program participants understand their coverage.
- Occasionally health insurance companies will deny coverage for non-transgender related healthcare services because they believe those services are connected to transgender related care.
- Gender-specific healthcare services, e.g. gynecological care for women, may be denied for transgender men.

Law Enforcement

If LGBT participants are victims of a crime, officials may need to intervene. LGBT refugees and asylees may be particularly reluctant to report crimes to the police. Unfamiliarity with local law enforcement may be compounded by their history of persecution, harassment, or violence by police forces in their country of origin. Many police forces in the United States, especially in major cities, have received sensitization training on working with LGBT community members. Despite this, not all officers will respond positively to LGBT individuals and may not take their claims and reports seriously. Resettlement staff should encourage LGBT participants to report crimes and provide ongoing support as needed. You may need to accompany them to the police station, help them obtain legal representation, or follow up with the police as necessary.

Access to Housing

LGBT persons may have more difficulty accessing housing because of their sexual orientation or gender identity. Discrimination is common across the country, and there is no national fair housing law that explicitly protects people on the basis of sexual orientation or gender identity. The Fair Housing Act outlaws rental discrimination based on race, color, religion, sex, national origin, disability, and familial status but does not specifically include sexual orientation and gender identity. In some cases, a LGBT person may still be protected by the Fair Housing Act.

- A gay man is evicted because his landlord believes he will infect other tenants with HIV/AIDS. That situation may constitute illegal disability discrimination under the Fair Housing Act because the man is perceived to have a disability, HIV/AIDS.
- A property manager refuses to rent an apartment to a prospective tenant who is transgender. If the housing denial is because of the prospective tenant's gender non-conformity, it may constitute illegal discrimination on the basis of sex under the Fair Housing Act.

What does the current law look like?

Some states have laws that make housing discrimination on the basis of sexual orientation and gender identity illegal. It is important to stay informed of local and federal laws as they often change, and provide varying levels of protection in different parts of the country. In February 2012, the United States Department of Housing and Urban Development (HUD) passed a rule entitled "Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity." This rule makes it illegal for anyone living in HUD managed or funded housing to be discriminated against on the basis of actual or perceived sexual orientation or gender identity.

What can I do if participants come to me and report they've been discriminated against?

 Determine whether what participants experienced constitutes discrimination. Proving discrimination requires showing that unfair treatment is based on sexual orientation or gender identity and not exclusively for some other reason.

Examples include:

- Refusal to sell or rent a property based on known or suspected LGBT or HIV status
- Eviction from an apartment based on known or suspected LGBT or HIV status (even if it is a month-to-month lease)
- Being treated differently from other tenants or prospective tenants because LGBT or HIV is status is known or suspected
- If a landlord has a policy on noise or building visitors, but only applies those policies to some tenants who are known to be LGBT
- If a landlord takes action to end harassment against some tenants, but not those who are suspected to be LGBT
- If a landlord denies the lease application based on LGBT or HIV status
- Harassment based on known or suspected LGBT or HIV status
- 2. Document discriminatory practices, including any letters and correspondence. Write down details of conversations, including phone conversations.
- 3. Obtain statements from witnesses.
- Because LGBT status is not always protected under local laws, obtain a legal consultation before confronting housing provider.

B. Immigration Issues

Most of your LGBT program participants will already have immigration status as an asylee or refugee, but that does not mean they will not need immigration assistance. There are several reasons an individual might need legal advice concerning immigration. Below are some of the most common reasons a LGBT individual will ask you for immigration advice. If individuals come to your office but do not have legal status, refer them to a legal service provider to initiate asylum applications.

Individuals may want to file immigration petitions for other family members.

Petitions for Partners

Current law in the United States precludes a LGBT individual from applying for benefits for a same-sex spouse. U.S. immigration law is governed by federal law, and the Defense of Marriage Act (DOMA) defines marriage as "a legal union between one man and one woman as husband and wife." If your client legally married a same-sex partner in a state or country that allows same-sex marriage, that person will not receive any immigration benefits in the United States.

Petitions for Spouses

Although refugees and asylees may also apply to have their spouses join them in the United States as derivatives on their immigration status, that process is also substantially more complicated for LGBT individuals. An application for an opposite-sex derivative spouse will likely raise significant questions about the individual's credibility as a LGBT person. This problem of petitioning for opposite-sex partners arises even for individuals who, from the beginning, identify as bisexual.

Transgender individuals who are in opposite sex marriages (based on the gender identity of both individuals) have had some success in getting their marriages recognized for immigration purposes. For transgender individuals who are married in the United States to opposite-sex partners, immigration officials should look to the law of the state where the marriage took place. If the marriage was considered legally valid there, it should be valid for immigration purposes, including family petitions of varying types.

Petitions for Children

In general, refugees and asylees can petition to have their children join them in the United States as derivatives on their immigration status. This process, however, is significantly more complicated for individuals who have received refugee protection based on sexual orientation. If a LGBT refugee or asylee files an application for derivative children, the existence of those children may cause an adjudicator to question the individual's credibility as a LGBT person, particularly if the refugee claimed in his/her request for protection that he/she had identified as LGBT for a significant amount of time. Although this concern is generally unfounded, LGBT individuals must take extra precautions before filing an application for derivative children to avoid casting doubt on their underlying eligibility for refugee status. LGBT individuals should also endeavor to preempt questions about any children that they have by acknowledging opposite-sex sexual relationship in their applications for protection.

Petitions for Extended Family

Although refugees and asylees can petition for their family members to join them as derivatives on their refugee status, that option is limited to spouses and children. Until a refugee becomes a resident or citizen, sponsorship for other family members is not an option.

Individuals may want to file immigration petitions for other family members.

Even if an individual enters the United States as a refugee or becomes an asylee after arrival, the person may nonetheless end up in removal (deportation) proceedings, particularly after getting arrested or otherwise charged with criminal activity. As above, if a person gets put into removal proceedings after having already received lawful status it is imperative that the applicant speak to an immigration lawyer both because the legal options are limited and difficult to assess and because the consequences of a deportation order are extremely high.

Consequences of Deportation/Removal

The severity of the consequences of a deportation order underscore the importance of qualified legal counsel, particularly for refugees and asylees who find themselves in removal proceedings following a criminal conviction. Some of the consequences are as follows:

- The individual loses permission to stay in the United States and may encounter difficulty obtaining lawful status in other countries.
- The individual may be ineligible to regain legal status again if he/she loses status.
- If removed, the individual cannot legally return to the United States for at least ten years, without permission from the United States.

Individuals who reenter the United States after being deported can be subject to criminal prosecution for illegal reentry.

Withholding of Removal

Withholding is similar to asylum, but requires that an applicant show there is a more than 50 percent chance of persecution. Individuals who do not qualify for asylum because of a criminal conviction or because of failure to meet the one-year filing deadline may nonetheless receive withholding. Individuals who receive withholding are not eligible for permanent status in the United States, but they are permitted to live here indefinitely. These individuals are required to attend periodic check-ins with immigration officials and to apply annually for work authorization.

Legal Options for Refugees/Asylees with Criminal Convictions

When advising an applicant in this situation about speaking to a lawyer, keep in mind the following factors.

- An individual who fears persecution or torture may be eligible to remain in the United States even after having committed a crime. The applicant may be eligible for a waiver of the crime, withholding of removal, or protection under the Convention Against Torture. Each of these options is discussed briefly below.
- Assessing eligibility for these forms of relief will depend on numerous factors, including the severity of any crimes that an individual has committed and the basis for the fear of returning. It is crucial for an applicant to be open and honest about all contact with law enforcement.
- Immigration law classifies criminal conduct differently than many state laws and the classification under immigration law will determine if a refugee or asylee is at risk of losing his/her immigration status. Because immigration law categorizes crimes differently than most states, a crime that is seemingly minor based on state-law classification may be an aggravated felony or a "particularly serious crime" for immigration purposes.
- Individuals should obtain and keep copies of any records they have from any contact with the police (even minor infractions), and they should share those records with the attorney.

Convention Against Torture

Protection under the Convention Against Torture (CAT) is a separate form of relief available to those who are likely to be tortured by a government official in their home country. The United States has signed a treaty promising that it will not return anyone who fears being tortured in their home country. Even individuals with very serious crimes may be eligible for protection under CAT. Unlike withholding and asylum, there is no requirement to show that the torture be inflicted because of someone's membership in a protected group.

Waiver of Criminal Convictions

Refugees and asylees who are placed in removal proceedings after being convicted of a crime may nonetheless be eligible for permanent residency if they qualify for a waiver of the criminal conviction. Immigration officials have broad discretion when it comes to applying the waiver, so individuals in this situation should consult with a lawyer to present the most compelling case possible.

Individuals with criminal convictions of any kind should disclose those convictions to a lawyer before applying for adjustment of status as a refugee or asylee. Some crimes could be considered serious and could put the applicant's refugee status in jeopardy.

Refugees and asylees are required to apply for permanent residency.

Permanent Residency

Refugees and asylees are eligible to apply for adjustment of status after they have been in the United States as a refugee or asylee for one year. This process is administrative and it should not require going back before an immigration judge. As a refugee service provider, you should encourage clients to be proactive about adjusting their status from that of refugee/asylee to permanent resident because doing so provides additional protection and benefits.

Refugees and asylees may want to change their immigration records.

As refugee service providers working with transgender participants, you may meet individuals who wish to get a name and gender change on immigration documents. This process is difficult because there is a lack of clear guidance from immigration authorities on changes to federal identification cards like a permanent resident card. Make sure to refer these individuals to a lawyer. Do not try to do it yourself.

Refugees and asylees may be the victim of crimes in the United States.

Most refugees and asylees will not have a need for additional legal status except in the instances discussed above, but it is important to understand that there are mechanisms in immigration law that allow individuals who are the victims of crime or domestic violence to obtain permanent legal status. The circumstances under which a refugee or asylee would need to apply for one of these benefits is limited, so it is important to refer the individual to counsel to ensure that an individual is not needlessly applying for an immigration benefit. The two most common benefits for victims of abuse and crime in the United States are discussed briefly below.

Although refugees and asylees do not generally require the protections discussed above, individuals who qualify as refugees but were granted withholding of removal or protection under the Convention Against Torture may benefit from these options because, unlike withholding and CAT, they provide a route to permanent status.

U-Visa

The U-Visa allows individuals who have been victims of certain crimes to remain in the United States if a law enforcement agency certifies that the individual has been or could be of assistance in the investigation or prosecution of the crime. Once granted a U-Visa, an individual can work and remain legally in the country for up to four years. After three years, the individual can apply for permanent residence (green card). The U-Visa is especially important for LGBT individuals who have been victims of domestic violence and do not qualify for other forms of immigration relief because same-sex marriage is not legally recognized under United States immigration law.

Protection under the Violence Against Women Act (VAWA)

VAWA applies to spouses of citizens and permanent residents and also to children under 21 who have a parent who is a permanent resident or citizen. VAWA allows these individuals to petition for permanent immigration status without relying on the resident or citizen relative if that relative has been abusive. Unfortunately, same-sex relationships are not recognized because of DOMA, so survivors of same-sex domestic violence cannot take advantage of protection under VAWA. LGBT youth, however, can apply for protection under VAWA in some circumstances, so as with every other remedy discussed in this section, it is important to refer LGBT individuals who are victims of domestic violence at the hands of a resident or citizen spouse to a lawyer.

5. Mental Health Services

Mental health services can help LGBT refugees and asylees restore or maintain wellbeing. Resettlement workers should be aware that LGBT refugees/asylees are likely to have misconceptions of mental health services and may fear mental health workers if they grew up being told they are somehow mentally ill or "not normal." The societies they came from often deny their very existence, expecting them to suppress their emotional or sexual feelings, and criminalizing their most private and intimate emotions. It can take a lifetime for LGBT refugees/asylees to fully accept themselves and overcome this legacy of shame and internalized homophobia. Refugee resettlement agencies and mental health professionals have a role in supporting LGBT refugees/asylees in their process of self-acceptance, community integration, and autonomy, but it is important to do so from a client-centered approach, at a rate and in a manner consistent with each individual's own life experience and wishes.

All refugee resettlement workers need to start with the following set of principles:

- Same-sex orientation is a normal variant of human sexuality.
- Same-sex partnerships are as equally valid and important as opposite-sex partnerships.
- Families of choice (versus families of origin) have a special importance to LGBT persons.
- Nearly all LGBT refugees/asylees have suffered directly from discrimination and violence often sufficient to have long-term effects on mental health and wellbeing.

A. Discussing Mental Health Services with LGBT Program Participants

Refugees often initially reject the idea of mental health services. They may believe that such services are for "crazy" persons only, rather than a support as people transition to a new life in a new country. Most refugees come from cultures in which the family is the primary unit, and in which the idea of seeking assistance from a non-family member is uncomfortable or aberrant. Some LGBT persons fear that mental health professionals will try to change them or treat their sexual orientation as a mental illness. Others may have experienced sexual assault or traumas that embarrass them or that they fear acknowledging or disclosing to anyone.

Here are some key messages you can use if you feel a program participant would benefit from mental health services:

- Symptoms of traumatic stress or depression are "natural responses to unnatural events," not a moral failing or illness.
- Depression and anxiety are treatable, and seeking treatment makes it easier to obtain and keep employment, pursue education, and meet other life goals.
- Mental health services are intended to help improve people's well-being, not just to get rid of a problem.
- Mental health services are not considered shameful in American culture.
- Counselors or other mental health professionals are required by law to keep all information confidential.
- Mental health workers will accept one's sexual orientation or gender identity and not judge or condemn a person because of who they love.

Refugees from some cultures may interpret symptoms of traumatic stress, depression, or mental illness as spiritual matters, or a just punishment for some perceived offense or sin. Addressing such negative beliefs is difficult; don't directly contradict a person's religious faith or dismiss cultural beliefs, but emphasize that a person experiencing emotional distress should not blame him or herself, but seek assistance instead.

B. Selecting a Mental Health Provider

Refugee resettlement workers are not equipped to respond to severe depression and post-traumatic stress disorder (PTSD), and should obtain help in the event of a crisis involving risk of harm to self or others. Resettlement agencies should seek to identify appropriate referral sources in advance of the need for those services.

Few mental health professionals have experience working with both immigrants and LGBT persons, although those working with either community can acquire the skills to work with both. Refugee resettlement agencies should assure that mental health providers conform to the American Psychological Association's guidelines for Psychosocial Practice with Lesbian, Gay and Bisexual Clients. This resource is available online at: www.apa.org/pi/lgbt/resources/guidelines.aspx.

In particular, mental health providers should be screened to assure that they ascribe to the following basic principles:

- Understand that lesbian, gay, and bisexual orientations are not mental disorders, but that same-sex attractions are normal variants of human sexuality;
- Reject unproven and unsafe efforts to "cure" homosexuality;
- Accept that same-sex relationships have equal relevance and value as opposite-sex relationships;
- Have an awareness of the pervasive impact of discrimination and stigma on LGBT persons;
- Understand that LGBT families may include individuals who are not legally or biologically related;
- Be open to understanding how sexual orientation or gender identity impacts relationships with the individual's family, and be aware that LGBT status may increase risk of violence or rejection by family members;

- Be aware that conflicting norms and beliefs among groups defined by ethnicity, religion, or nationality may create specific risks and stressors for LGBT persons;
- Be aware of the impact of HIV on LGBT persons, be open to discussions of sexual health, HIV, and STIs, and be able to work with refugee resettlement agencies and health care providers to make appropriate referrals for healthcare;
- Be aware and responsive to the risks of bullying and family violence that can affect LGBT teenagers;
- Be aware of the psychological and economic impact on LGBT persons of workplace discrimination and harassment.

C. Substance Abuse

Some LGBT persons struggle with drug and alcohol dependency. Because same-sex relationships are criminalized or hidden in much of the world, LGBT persons may have limited social outlets and meet others in bars or private homes where alcohol or drugs are part of social interaction. Use of alcohol or drugs may also permit some individuals who are conflicted about their sexuality to act on suppressed same-sex attractions, while distancing themselves from emotional attachments. In other situations, drug and alcohol use may be a means of escape from stressors related to discrimination, violence, or family rejection. LGBT teenagers may use drugs or alcohol for the same reasons as other teens —to conform to peer expectations, to assert independence, or to relieve boredom or tension. However, LGBT teens may also use substances in order to deal with other more specific issues: difficulty in coming to terms with same-sex emotional attachment, rejection by parents or siblings, greater need to conform or fit in, and other issues of isolation or rejection unique to adolescents who experience same-sex attraction or genderidentity issues.

Individuals facing chemical dependency typically follow a step-by-step path to recovery, starting with recognizing the problem, contemplating change, and acting on change. In addition to helping refugees/asylees find appropriate treatment services, resettlement workers should encourage every positive change. Twelve-step programs such as Alcoholics Anonymous are useful for many persons struggling with chemical dependency, but finding an appropriate program for LGBT individuals may be more difficult. Those who are uncomfortable with their sexual orientation may also be reluctant to discuss other issues resulting in "shame" such as alcohol or drug use. LGBT refugees/asylees without English language skills may have very limited options in terms of functioning recovery support groups.

LGBT refugees/asylees who face these problems should be referred to an appropriate service provider, or otherwise supported in taking every positive step toward reducing dependency and harm.

D. Mental Health Services for Transgender Persons

Most stressors facing LGB persons are amplified for transgender persons. Additionally, transgender persons experience a range of stressors if they undergo transition and experience associated hormonal and physical changes. All of these factors lead to elevated risk of major depression, substance use, PTSD, and suicide. Refugee resettlement programs working with transgender participants have a particular responsibility to identify mental health professionals who have past experience in supportive counseling for transgender persons, and who adhere to an ethical, client-centered approach that does not stigmatize or shame, or attempt to impose an external course of action on transgender individuals.

A note on the Diagnostic and Statistical Manual - DSM IV:

The medical and mental health professions in the United States consider same-sex attraction and bisexuality to be normal variants on human sexuality, and neither are listed as disorders in the DSM IV, the main diagnostic manual for the mental health professions. However, the status of transgender persons is still a matter of dispute. Transgender persons are still classified as having "gender identity disorder" in the Diagnostic and Statistical Manual (DSM IV), despite the opposition of many mental health professionals and the transgender community. As a result, transgender persons may fear mental health services even more than lesbian, gay or bisexual persons.

E. Suicide and Crisis Response

LGBT persons have an elevated risk of suicide, although refugees seem to be less likely to commit suicide than the general public. People sometimes harm or kill themselves after detailed planning, or act very impulsively with little or no warning. Many psychologists talk about suicidal thresholds and triggers. A person with severe depression may suffer from a number of stressors, which increase depression and hopelessness, leading to a threshold in which the person may think about suicide in an abstract way without actively planning to carry through with the act. Refugees and asylees face loneliness, unemployment or financial difficulties, and loss of country and identity. LGBT refugees/asylees face many additional stressors already described elsewhere. All of these can set the stage for suicide risk. A trigger, such as the loss of a relationship or a job, may then precipitate self-harm.

Eighty percent of persons who attempt suicide tell someone before they try to end their life. Take all threats of suicide or self harm seriously.

Watch for signs of serious depression among program participants, and try to talk to any participant who appears to be significantly depressed about getting treatment. Here are some warning signs that are common to persons experiencing depression and who are at an elevated risk of suicide:

- Talking about suicide or death (suicidal ideation)
- Persistent sadness or hopelessness
- A change in social interaction—withdrawal
- An increase in use of drugs or alcohol
- · Giving away important or personal items
- Foreshortened or absent sense of the future
- Lack of motivation
- Distractibility or lack of concentration
- Changes in sleep or eating habits
- Talking about being "worthless" or "a burden" or "useless"
- Any sudden change in affect in a very depressed person

If someone expresses a desire to commit suicide, your initial response is important. Persons who are contemplating suicide may have experienced recent rejection and building trust is important. Find a private place to talk if possible. Make sure the individual knows you are listening (See Section Two on notes for active listening). Don't tell participants they are irrational or wrong to think about suicide, and especially, do not tell them that their problems are "not as bad as you think" or otherwise minimize whatever they are feeling or expressing. Avoid judgmental language. Use statements like "That must have been very difficult" or "That would be upsetting" rather than "Why did that make you so upset?" Allow the person to tell his or her story. It's okay to be silent for a little while and let the person start talking again. Ask for clarification if necessary.

There are several 24-hour, 7-days-a-week toll-free suicide hotlines for persons who are suicidal, or for providers.

One of these hotlines is the National Hopeline Network: **1.800.SUICIDE** (784.2433).

Another hotline number is the Suicide Prevention Lifeline: 1.800.273.TALK (8255).

Ask the person if s/he has a plan to commit suicide and pay close attention to the details. Does the person have a viable plan? A severely depressed person who articulates an intent or wish to commit suicide and who has a viable plan should be considered a psychiatric emergency. Do not leave the person alone. Establish a short-term safety plan that involves someone monitoring the person. Discuss the situation immediately with a supervisor. As a non-mental health professional, it is your responsibility to assess whether you think the threat is credible, and obtain additional assistance. Be aware of your limitations. Any credible suicide threat requires a team approach and you should communicate the situation to your supervisor at the earliest opportunity, immediately after assuring the safety of the program participant. Even if the person does not have a plan and you think that the threat of suicide is small, you must communicate with a supervisor and co-workers.

Dear Rainbow Welcome:

I am working with a refugee who is very dramatic and is always talking about "killing himself" but this seems to be more an attempt to get attention and assure that we meet his needs. I feel as if the program participant is using this threat to get us to respond, but we have to address the needs of all of the refugees in our program. I don't want to ignore or minimize his claims to want to kill himself, and I feel a responsibility to take these claims and threats seriously. What should I do?

Worried Resettlement Worker

Dear WRW,

Some program participants may talk about "killing themselves" a lot, using your concern for their wellbeing in ways that may be manipulative. Even when working with such a participant, pay very close attention to anything s/he says about suicide. You must report this to other co-workers and your supervisor. Does the person have a plan? If so, create a safety plan, and watch for changes in behavior. If this behavior persists, you can inform the participant that you have to take these statements seriously, up to and including hospitalization if there is an imminent risk. Address this issue directly and independently from other services or requests. A series of manipulative suicide "threats" can sometimes be followed by the real thing.

Thanks,

Rainbow Welcome

F. Traumatic Stress

LGBT refugees and asylees are more likely to have experienced torture or violence from police or others acting in official authority than non-LGBT refugees/asylees, and many have also experienced severe or prolonged family violence. Because the exposure to traumatic events is so high, many LGBT refugees/asylees suffer from depression, post-traumatic stress disorder (PTSD), or other psychological effects of trauma. Persons who are known to be LGBT are often singled out for sexual assault when imprisoned or captured during times of civil unrest or conflict.

PTSD occurs in some people after experiencing one or more events that involved threatened death or serious injury to self or others, and in which the person's response involved intense fear, helplessness, or horror. The experience of severe and/or repeated trauma can cause an individual to develop imbalances in the way the mind and body deal with stress. PTSD results in persistent re-experiencing of the event, including through recurrent dreams, flashbacks, intrusive memories, and thoughts of the event. Persons with PTSD may have certain triggers which cause memories to flood back of the traumatic event and can spark flashbacks or panic. Persons with PTSD exhibit avoidance of any stimuli associated with trauma. and a numbing of general responsiveness as indicated by diminished interest or participation in activities, a feeling of detachment or disconnection, restricted affect, or a sense of a foreshortened future. The final category of PTSD symptoms involve hyperarousal, including difficulty sleeping or remaining asleep, sudden exaggerated startle response, hyper-vigilance, and/or irritability and outbursts of anger.

Major depression is the other common consequence of traumatic stress, and often accompanies PTSD. Depression is characterized by persistent feelings of hopelessness or overwhelming sadness, problems with memory, withdrawing from social contact, becoming agitated easily, or having difficulty concentrating. Persons with severe depression often also have physical or somatic complaints such as headaches and sleep disturbances.

Trauma-specific interventions are designed to address the consequences of trauma in the individual. While referrals should be made to professionals skilled at working with survivors of trauma, resettlement agencies should create an environment that is supportive of persons with major depression or PTSD related to trauma.

Treatment programs and resettlement agencies must recognize the following:

- The survivor's need to be respected, informed, and engaged in a partnership regarding their own recovery;
- The interrelation between trauma and symptoms of trauma (e.g., substance abuse, eating disorders, depression, and anxiety);
- The need to work collaboratively with survivors, family and friends of the survivor, and other human services agencies in a manner that will empower survivors and consumers.

Trauma-informed services assure that the organization's policies and procedures are assessed and potentially modified to reflect a basic understanding of how trauma affects the life of an individual seeking services. Most refugee resettlement programs provide traumainformed services, but it is still important to carefully review operations to identify "triggers" that may exacerbate traumatic stress. Examples can include: proximity to loud, unpredictable noises such as construction sites or poorly repaired radiators; waiting rooms or facilities that resemble detention cells or police stations, or in which female program participants may wait with unknown male participants; or presence of uniformed guards who may trigger fear of police or soldiers.

Resettlement agencies can avoid retraumatization by minimizing the number of times LGBT participants are required to tell their story. Resettlement agencies that provide multiple services, utilize a team approach, share information internally, and coordinate service provision can create a more comfortable environment for program participants.

Please see guidelines for trauma-informed services at SAMHSA (Substance Abuse and Mental Health Administration) National Center for Trauma-Informed Care: www.samhsa.gov/nctic/

6. Community Integration

Resettlement agencies are limited in what assistance they are able to offer; for this reason, refugees who are able to draw upon additional support from friends and family members are better positioned as they transition to life in the United States. Whether it's having a friend accompany a newly arrived refugee to an appointment, or receiving supplementary financial or material resources from a relative, this outside support is critical to successful integration.

The resettlement network has historically relied on public-private partnerships to expand the resources and assistance available to refugees/asylees; operating on such a model will benefit LGBT refugees/asylees who too often have little or no support from anyone outside the resettlement agency. Resettlement agencies can reach out to LGBT organizations to strategize ways to collaborate, leverage resources, and map out plans to prevent this population from experiencing continued isolation.

A. Teaching Tolerance

LGBT refugees and asylees experience double marginality. As forcibly displaced persons, they are designated an 'outsider' status. As LGBT individuals, these refugees and asylees must also navigate the isolation they face within their own communities, as a result of their sexual or gender minority status. While an immediate approach to ensuring LGBT refugees' safety might be to separate them from their ethnic or national communities, efforts should still be made to build bridges between LGBT refugees and other members of their countries of origin. Teaching tolerance will facilitate LGBT participants' autonomy, security, safety, and the ability to thrive. Rather than resign to the notion that LGBT refugees will be excluded from their home communities, action can be taken to transform the way these individuals are welcomed by and integrated into the refugee communities at large. Below are several recommendations to foster tolerance and acceptance among refugee and asylee populations.

Presentation During Cultural Orientation

Increasing refugees' and asylees' understanding and acceptance of LGBT people will not only benefit members of their community but can also lead to LGBT staff feeling more comfortable in the workplace.

Cultural orientation is an excellent forum to promote and encourage tolerance for all peoples. LGBT specific info can be integrated in the sections already mandated by PRM, including health, rights/protections, and safety. You can also incorporate a section on diversity in the United States and highlight the LGBT community. Critical messages to convey:

- LGBT individuals come from every community from every culture
- Same-sex attraction is not a matter of personal choice. Some people are inherently attracted to members of the same sex in exactly the same way people inherently feel an attraction toward the opposite sex.
- Individuals do not 'choose' to be LGBT
- What makes the United States so rich and vibrant is its diversity

- Just like refugees contribute to the US' cultural tapestry, so do LGBT individuals
- Transitioning to a new life in the United States can be overwhelming. Imagine if you did not receive any assistance from others. Think about how helpful it has been to have the support of the agency and friends and family. Let's work together to make sure everyone who comes here as refugees, regardless of how they identify, has resources to make as smooth a transition as possible.
- Emphasize community building across cultures and communities. We're all in this together!

Since this may be a sensitive subject for students, approach the conversation delicately. One should be cautious in how the discussion is framed as not to offend participants while still using this as an opportunity to affirm the existence of LGBT people across the globe and encourage tolerance and support to these individuals.

Integrating LGBT Issues into ESL Classes

- ESL classes also present an opportunity to further explore LGBT issues and discuss diversity in the United States. While ESL classes may prioritize language instruction for the purpose of preparing participants for jobs, they also can serve as extended cultural adjustment sessions. Utilize this time to elicit questions and concerns, engaging participants in a dialogue. Some questions instructors may want to ask:
 - What do you know about the LGBT community?
 - What have your experiences been with LGBT individuals?
 - From where you come, what do people think about LGBT persons?
 - What do you think people in the United States think about LGBT persons?
- > In the US, same sex couples are generally accepted by society. This is something that you as new Americans should know. What do you think about this?
- > The President of the United States supports initiatives to protect LGBT people facing danger. He also is supportive of same sex marriage.

- You may decide to focus on sexual orientation rather than gender identity, at least when initiating this conversation, as it may be easier for participants to understand the idea of same-sex attraction.
- If someone expresses a religious objection, discuss how people have the freedom of their private religious beliefs, but that in public life, there is a separation of church and state.
 Even if one feels that same-sex relationships are sinful, the state cannot and should not make them illegal on religious grounds.
- Participants may have inaccurate
 assumptions about the LGBT community
 (see Section One for Myths). Take the time
 to acknowledge and debunk mistruths.
 For example, unfortunately, a prevalent
 perception is that gay men are attracted to
 young boys. Clearing up misunderstandings
 such as this may result in increased
 awareness and tolerance.

Refugees as Ambassadors and Allies

While refugees and asylees may be responsive to service providers' messages on diversity and inclusion, participants may feel more comfortable discussing these issues with members of their own community. It perhaps will also be more persuasive for refugees/asylees to be told there is a need to accept LGBT individuals from a friend, neighbor, or relative. Having service providers' messages reinforced by other refugees or asylees is a powerful technique to leverage a participant's social standing to affect change.

Among refugee and asylee communities, there are often young adults, high school- and college-aged who, based on their English proficiency and access to resources, have assumed leadership roles within their respective communities; they have been granted the responsibility to strengthen and organize the community, advocating on its behalf. These individuals have also proven more likely to accept the LGBT community. If there are LGBT participants excluded from their home community, recruiting an ally from within to conduct outreach is a promising way to facilitate inclusion and integration.

B. Familial Mediation

Sooner or later, all agencies resettle families with children, adolescents or young adults who do not conform with gender norms either in their original culture or in US society. In some cases, the individuals identify as or are perceived to be LGBT. In other situations, gender non-conformity may be as simple as a boy who is perceived to be effeminate and plays "like a girl," or a girl who is a "tomboy" and expresses no interest in "feminine" activities. This may concern or upset parents and they may come to a trusted teacher, resettlement worker, or other staff member with questions. This may require your organization's active intervention in the rare event that gender non-conformity results in actual physical threats to a refugee child or adolescent. If adult participants express disapproval of their children's real or perceived sexual orientation and/or gender identity, the following recommendations may help in preventing or remedying conflict.

Modeling and encouraging tolerance through behavior and education

Participants may not know what it means to be LGBT. They might assume a child of theirs is LGBT because of how s/he acts, behaves, or talks. They may be concerned what the implications are if their child does in fact identify as LGBT. Such fears can include fears about being a "failed" parent, concerns about their children's future religious belief or affiliation, potential impact on the family's status and reputation in their community, or even fears about not having grandchildren. As you engage participants in discussion, strike a balance between listening to their fears, concerns, and frustration, and educating them on and sensitizing them to what it actually means to have a LGBT family member in the US context.

- Afford participants the time and space to express how they feel. They too are in the process of a major transition as they adapt to life in a new country. Their response to their children may be compounded by general anxiety: anxiety about living in a new country, anxiety about their family's wellbeing, and anxiety about their children growing up surrounded by new and unfamiliar cultural values.
- Allay fears—young children who do not conform to gender stereotypes may or may not have same-sex attractions or opposite sex gender identity when they become adolescents. Explain to parents that trying to enforce gender conformity can be damaging and ultimately can't change whatever sexual orientation or gender identity the child develops as an adolescent. Predictions of future sexual orientation or gender identity are imprecise and not useful in the case of young children; some gender-conforming children will grow up to be LGBT and some gender non-conforming children will grow up to be straight.
- Parents might be concerned how adolescents or young adults will fare in the United States if they are LGBT, based on the ways LGBT persons are treated back in their countries of origin. Explain that LGBT people in the US can live successful and full lives, including raising families of their own.

- Parents might believe that adolescents or young adults adopted a LGBT 'lifestyle' as a result of resettling in the United States. It is important you clarify that scientific research indicates individuals are inherently LGBT just as others are inherently straight; living in the United States has not changed the sexual orientation or gender identity of their children.
- Parents are sometimes distraught over the sexual orientation or gender identity of their adolescent or young adult child due to religious or moral reasons. While refugee resettlement agencies should respect the religious beliefs of program participants, it is sometimes possible to find families within the same religious community who have come to accept the sexual orientation or gender identity of family members.
- In most cases, family conflict or anxiety over a child or adolescent's sexual orientation or gender identity diminishes over time. However, refugee resettlement workers should monitor situations in which parents might use physical punishment on gender nonconforming children, or in which an adolescent or young adult might be at risk of family violence. Such incidents are rare, but require supervisor notification, a teambased approach, and a safety plan. If there is a risk of violence, mandated reporting requirements may come into place.

Brainstorm with your colleagues on what steps you might take to intervene and support the participant. Then review Rainbow Welcome Initiative's recommendations.

Case Scenario:

E. is a six year old boy from a Muslim Eritrean family. He participates in a refugee family program, and his parents access multiple services at your agency. E. likes dolls, plays with girls more than boys, and says that he "wants to be a girl." He is not interested in sports, and acts very effeminate, even at this age. His parents worry because he is not masculine enough and when they try to get him interested in cars or playing soccer with the other boys, he cries, which upsets them even more. E's parents have heard about gay people and feel like they have to intervene strongly to cure him before he grows up to be gay. They are a kind family, but you are worried that they may even hit the child in order to toughen him up.

What you can do:

Using talking points described above, inquire why the parents are concerned. Especially since E. is still a young boy, you can explain that how E. acts as a child may have no implication for how he will identify later on in life. Some boys are effeminate just as some girls are 'tomboys.' Emphasize that punishment for playing with dolls or not playing sports will be counterproductive. If you are concerned about the parents responding violently, you must remind them that child abuse is illegal, a serious crime, and could result in deportation. Contact Parents, Families, and Friends of Lesbians and Gays (PFLAG) to see if you can connect with another Eritrean family. PFLAG has a wide network and may be able to offer support and counseling to your participants. Talking to another Eritrean family whose child is LGBT may be both educational and comforting.

C. Accessing Support from LGBT Communities

The LGBT community has an opportunity to play a critical role in the resettlement of refugees and asylees. Local LGBT organizations can provide additional assistance, offering emotional and social support, as well as material resources.

When refugees and asylees are immersed in the LGBT community, they tap into a connected network and feel a sense of belonging. They are afforded the support they need and deserve. Perhaps for the first time, their sexual orientation or gender identity is affirmed by others, instilling in them a sense of pride, confidence, and self-worth they may not have previously felt. Refugees and asylees are not the only ones though who stand to gain from these relationships. The LGBT community becomes more vibrant, more accessible, more inclusive, and more powerful by integrating diverse voices from around the world.

There are parallels between LGBT and refugee communities as they share many challenges, needs, and goals of minority populations facing discrimination. Building on each other's strengths and resources, these groups can join efforts to advance the rights of and improve conditions for marginalized populations in general.

Establishing Ties with LGBT Organizations

- The first step is to identify LGBT agencies in your local area. Universities can be of assistance in identifying LGBT organizations, coalitions, and ally groups. Try to identify a number of organizations as they will most likely offer diverse services, including:
 - Health
 - Psychosocial support
 - Recreational activities
 - Case management
 - Social groups and activities
- Service providers can reach out to LGBT organizations, establishing formal referral mechanisms, and developing memorandums of understanding (MOUs).

Discuss with them why there is a need to support this population but also how their agencies will benefit from reaching out to refugees and asylees.

- Though LGBT organizations should have the cultural competency to work with LGBT individuals, they may not have much experience working with refugee or asylee populations. Offer to conduct an orientation for staff, providing background information on refugee and asylee communities. Topics you can address in this mini-orientation include:
 - Who refugees and asylees are and why they resettle in the US
 - Orientation to resettlement process
 - Special considerations for this population (such as history of torture or housing issues as a barrier to resettlement)
 - Cultural backgrounds
 - How local LGBT community-based organizations can play a role in supporting this population

Collaborating & Creating Community

There are a number of ways for refugees and asylees to get involved in the LGBT community and you and your agency can work with local LGBT organizations to help make this happen.

- Establish a mentorship program where a refugee or asylee is partnered with a member of a LGBT organization.
- Hold social and educational sessions in which refugees/asylees and American born LGBT individuals are able to share their stories and experiences.
- Seek interpretation support from local university students. The participant may feel less scrutiny from a student interpreter.
- · Organize recreational activities.
- Support groups can offer individual and family assistance.

Considerations for Potential Obstacles

Language Capacity

Unfortunately, many LGBT organizations may not have the capacity to offer services in the languages of participants. If this is the case, while your participants continue their studies in English, ask around the community, including LGBT organizations and other refugee resettlement agencies, to see if there is another LGBT individual who speaks their language and is willing to befriend the newly arrived person. What is most important is that connections are made to prevent these individuals from experiencing continued isolation at the time of resettlement.

Cultural Differences

Cultural differences may also pose a barrier to refugees' and asylees' integrating in the LGBT community. Participants may be uncomfortable with or not accustomed to Western LGBT culture. Despite their living in hostile conditions back home, many of them may still have been able to carve out an intimate community of LGBT friends and neighbors. This fact cannot be discounted when they come to the United States and are presented with a LGBT community very different from what they know. It is also important to remember that while these friends from back home may have been like family to them, they are not able to apply for resettlement together and this loss can be devastating. Ultimately, while there is great potential for the local LGBT community to serve as a resource, the introduction may initially overwhelm participants. You can prepare participants by letting them know it may take time before they adjust and feel comfortable.

Overstepping Boundaries

If your organization decides to engage in a mentorship program where refugees and asylees are linked up with members of the community, it is necessary to screen mentors. When establishing this sort of project in any context, there is an inherent risk in mentors engaging in inappropriate behavior. The same considerations pertain to LGBT oriented programs and mentorships as for mentorship programs for any other group of refugees: Mentors may overly involve themselves in participants' lives, making important decisions on their behalf. They may make sexual advances. After screening mentors and connecting partners, clearly outline parameters of and expectations for this partnership. Continue to have conversations with your participants about how things are going; look for any red flags that suggest an unhealthy or abusive relationship is developing.

Conclusion

While LGBT refugees and asylees are confronted with unique challenges and vulnerabilities, their resilience and determination to carve out new lives position them for success. With your support and guidance, they can resettle safely and begin to pursue new possibilities. This field manual presents best practices and offers instructions on how you can effectively tailor services to meet the specific needs of this refugee community; you may need to adapt approaches and interventions according to available resources, organizational capacity, and participants' individual circumstances. For additional resources, please visit www.RainbowWelcome.org. Heartland Alliance also offers on site and remote technical assistance. If you have any questions or concerns regarding a specific case or are interested in receiving training, please contact: RainbowWelcome@heartlandalliance.org.



Assessing Discomfort: Self-Assessment

1. I am comfortable interacting with lesbian women.	7. I am comfortable discussing issues of sexuality and gender with participants/clients.
□ Always □ Sometimes □ Never	□ Always □ Sometimes □ Never
2. I am comfortable interacting with gay men.	8. I am comfortable making referrals to LGBT organizations.
□ Always □ Sometimes □ Never	☐ Always ☐ Sometimes ☐ Never
3. I am comfortable interacting with bisexual individuals.	9. I am comfortable providing services to someone who is HIV-positive.
☐ Always ☐ Sometimes ☐ Never	☐ Always ☐ Sometimes ☐ Never
4. I am comfortable interacting with transgender individuals.	10. I have friends who identify as LGBT. ☐ Yes
□ Always	□No
□ Sometimes □ Never	11. I have colleagues who identify as LGBT.
5. I am comfortable seeing two individuals of the same sex show affection to each other.	□ Yes □ No
☐ Always	12. I have provided services to LGBT individuals.
□ Sometimes □ Never	□ Yes □ No
6. I am comfortable talking about sexual health and safe sex practices to participants/clients.	13. There are certain job responsibilities and/ or tasks I find harder to fulfill when working with LGBT individuals.
☐ Always ☐ Sometimes ☐ Never	☐ Yes ☐ No

Appendix II

Organizational Assessment

and concerns.

As you review these guidelines and considerations, think about what your organization is already doing well. When you identify gaps, work to draft ideas and strategies to either adjust or implement new practices and policies.

or implement new practices and policies.		
 □ Official documents and forms are gender-inclusive. □ Confidentiality and discrimination policies are practiced and enforced. 	☐ LGBT refugees and asylees are offered affordable housing options and are placed in living arrangements that feel comfortable to the participant.	
☐ There is a formal grievance policy for participants.	☐ Neighborhoods are vetted to assure security for LGBT persons.	
 □ Participants' sexual orientation or gender identity is not disclosed to other resettlement staff or outside parties unless given approval by participants. □ Staff members have undergone sensitivity training on LGBT issues. □ Outside interpretive services are available so that resettlement agencies do not need to rely on family members, friends, or other members of the community for interpreting. This will ensure the confidentiality of LGBT participants. □ Staff is mindful of using participants' 	☐ Roommates are screened to ensure refugees and asylees are housed with individuals supportive of the LGBT community.	
	□ LGBT friendly employment and vocational services are provided. LGBT refugees' and asylees' participation in the Matching Grant	
	program will not be terminated based on their need for a LGBT friendly work space. Preference is given for placing LGBT participants in organizations with non- discrimination employee policies.	
	☐ Resettlement agencies are engaged with LGBT communities in identifying work opportunities for participants.	
preferred gender pronouns in verbal and written communication.	☐ Efforts are made to advocate on LGBT refugees' behalf in immigrant communities,	
 □ An orientation is designed to inform LGBT refugees and asylees about their rights as refugees and asylees, as well as federal and state laws regarding sexual orientation and gender identity. An orientation devotes time to discussing matters relating to sexual health and safe dating practices and is inclusive of LGBT individuals. □ LGBT topics are included in the general cultural orientation for all refugee and asylee participants, ensuring that information reaches even those whose sexual orientation or gender identity have not been disclosed. Special attention should be paid if there are mixed gender groups to ensure that orientations remain culturally sensitive. 	ensuring that these individuals are not isolated due to their self-identified or perceived sexual orientation or gender identity.	
	☐ LGBT specific services and referrals are made available to all participants in the refugee resettlement program due to the expected existence of non-disclosing LGBT refugees and asylees.	
	☐ Partnerships with LGBT service providers are formally established to offer comprehensive social services, mental health services, medical care, and other necessary support.	
	 Efforts are made to provide LGBT organizational partners with training on refugees and asylees. 	
□ LGBT refugees and asylees have access to medical care and mental-health services. Accommodations are made to address financial, transportation, language, and cultural barriers.	☐ An assessment process is created to determine the success of LGBT refugees'/ asylees' acculturation and access to supportive services. Procedures are in place to monitor and report participants' progress and outcomes.	
☐ Appropriate referrals are made to healthcare providers and mental health practitioners who have experience working with the LGBT population and are sensitive to their needs	☐ Methods are established to identify and gain access to LGBT resources in communities to which refugees/asylees may move.	



Workplan to Strengthen Service Provision

Department:	
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From reviewing the field manual and organizational assessment, you should now have a sense as to what steps your agency can take to strengthen services for LGBT participants. We encourage you to take the time to discuss with your team the changes you can make to your organization's policies, practices, and services to more effectively identify and responto LGBT refugees and asylees.
List the action, person(s) responsible, and projected start/finish dates.
1. Goal:
a. Action Step(s):
b. Person(s) Responsible:
c. Timeline:
2. Goal:
a. Action Step(s):
b. Person(s) Responsible:
c. Timeline:
3. Goal:
a. Action Step(s):
b. Person(s) Responsible:
c. Timeline:
4. Goal:
a. Action Step(s):
b. Person(s) Responsible:
c. Timeline:
5. Goal:
a. Action Step(s):
b. Person(s) Responsible:
c. Timeline:

Risk Assessment Tool

THREAT	PRIORITY LEVEL (A, B, or C)	BARRIERS and COMMENTS

Possible Questions and Considerations

- Is your physical safety at risk?
- How would your family/friends/neighbors/employer respond if they learned of your sexual orientation/gender identity?
- Are you engaged in any behavior that could result in deportation?
- Do you have alternative accommodations if you had to leave your current residency?
- Do you have access to supportive services?





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