**Summary of working group discussion**

**Sexual Orientation**

**November 2011**

**Introduction**

In late October 2011, CARE Tanzania requested that the GED Institutional Working Group help them think about sexual orientation. They launched a discussion based around the following questions:

*As per the CARE US GED Strategy, CARE conceptualizes diversity in the broadest sense, going beyond regular classifications of gender, race, nationality, ethnicity, religion, sexual orientation, age, disability, among others, to also include diversity of perspectives that uphold CARE’s core values, and to emphasize the value of creating and maintaining and work environment that promotes diversity.*

*CARE Tanzania would be interested in learning other CO’s experiences on promoting discussions among staff, partners and different networks around sexual orientation and homosexuality. This is particularly challenging in the context where homosexuality is illegal and people have strong religious background and prejudices on homosexuality.*

*Therefore CARE Tanzania would be delighted to hear any good practices from other COs how to facilitate discussions especially with staff and partners on homosexuality, in order to implement CARE’s GED strategy. It is extremely important for us that we avoid judging staff opinion whether it is for or against.*

*Experiences about how to facilitate discussions about sexual orientation and homosexuality from countries where homosexuality is illegal, strongly controlled, or culturally unaccepted, would be in particular welcome.*

**The discussion**

In total there were 8 contributions; many of which came from people with experience in the East and Central Africa region. The majority of the contributions came from females and international staff.

One contributor challenged the CARE Tanzania staff to think about CARE’s rights based approach; she raised questions about our readiness to challenge culture when it comes to women’s rights even if laws in developing countries discriminate against them, why then do we shy away from advocating for sexual rights? What makes sexual orientation or homosexuality different from other aspects of diversity? She noted that while countries in East Africa were criminalizing homosexuality, there were very few CARE COs who were sufficiently engaged in the issue – with the exception of Burundi – who did have some special debates on the issue. She continued that in order to facilitate discussions, it can help to frame them in a human rights framework; listening to staff views and ideas is important along with ensuring that people remain respectful and aligned to core values; and this can mean making it clear that CARE has no tolerance for harsh statements against homosexuals regardless of culture or laws. Another way into the discussion is to explore biological sexual evolution, which shows that whether female or male, at one state in our lives, we have all been homosexuals. Asking colleagues how they might react if a close family member was homosexual – is that family member who they loved all their life a bad person simply because of their sexual orientation? She highlighted her experience that often staff hide their sexual orientation out of fear of discrimination, she wondered if this is acceptable in an organization with our core values.

This contribution prompted one from Burundi where they carried out the debates; they found that generally the attitudes to homosexuality fell into three categories; that homosexuality is a sin (it is against nature); that even though ‘I am uncomfortable with homosexuality’ making it illegal is not right (it might be simply a political strategy to distract people away from what really matters); homosexuality is a right (that it is no different from color or anything else – it is no different than apartheid to discriminate against those who are homosexual). The Western expatriates tended to have the last attitude, but it was a minority view. This contributor also spoke of the discomfort of those staff who hide their sexual orientation. She highlighted a Human Rights Watch document that showed how many homosexuals knew they were different as young children; how they experienced discrimination even to the point of one woman being repeatedly raped by men because of her sexuality. Clearly it is not an easy decision to take in Burundi. Even after sharing this document, many staff remained against homosexuality.

One contributor suggested getting two films that could help explore the issue of sexual orientation with a specific focus on religion (the first on Christianity; the second on a variety of cultures and religions):

* For the Bible tells me so
* Anyone and everyone

A contributor from West Africa reflected that often there is little support amongst leadership in CARE to openly address Lesbian, Gay, Bisexual and Transsexual (LGBT) rights in contexts where there is cultural or political opposition. Sometimes outsiders can also feel that raising a sensitive issue such as sexual orientation is difficult because ‘we don’t want to offend’. This raised the question for this contributor: “Why can’t we have honest discussions where each person’s opinion is as valid as the next and in which we respect that we all come from different places, perspectives and experiences?” She suggested that we should address ALL aspects of diversity and not ‘hide some’ for fear of being perceived as culturally in appropriate. She also questioned CARE’s political stance, noting that even in countries where homosexuality is criminalized, we do not have any particular advocacy response to this issue even as we claim to defend human dignity and rights. This is particularly troublesome in programs where we are addressing sexual and reproductive rights – because often we, ourselves, can be insensitive, discriminatory and uncomfortable with the subject matter ourselves. This contributor had facilitated a discussion in Rwanda on sexual orientation and in order to ground the discussion in reality, they invited a Rwandan transgendered woman to share her experience with staff. This grounded the discussion in the Rwandese context (and not as something foreign), but also took the discussion away from the theoretical. This took preparatory work with the woman herself and careful facilitation to ensure that respect was maintained. She told of her experience and the story seemed to hit home for many staff who reported that it was a valuable learning experience. This contributor felt that we all need to broaden our understanding of diversity and challenge ourselves to explore ‘uncomfortable’ issues, and then to oppose discrimination in all its forms.

A contributor from CARE Egypt noted that this is the first time they had seen such a discussion; in Egypt homosexuality is ‘religiously, culturally and ‘logically’ unacceptable.’ Often terms to describe diverse sexual orientation are used to insult or joke around. Homophobia is rife amongst Egyptian men according to this contributor, often demonstrated in extreme defensiveness and disrespect of men who might give off an impression of being homosexual. There is greater tolerance of women who are homosexual. While this contributor has no homosexual friends, she understood that they lead normal lives, often in many ways being homosexual is easier – because heterosexual couples often need a marriage certificate to get even simple things such as a day use together by a pool in a hotel or an apartment. Same sex couples can co-rent apartments, park their car somewhere dark and not be suspected of fornication! This contributor agreed with the challenge to broaden our concept of diversity and openly challenge ourselves and others to talk about uncomfortable issues and speak against discriminatory attitudes and behaviors.

One contributor shared an IGLA report on State Sponsored homophobia; the opening statement suggests that: “The day is not far, when homophobia and transphobia will be considered everywhere as they should – with the same abhorrence currently reserved to sexism and racism, and no amount of self-serving rhetoric will prevent the wall of state-sponsored homophobia from crumbling.” The report also recognizes that more needs to be done, particularly to ensure legal rights for LGBT as a precondition for social change. It is a useful resource for COs wishing to understand the legal context in their country on this issue.

A contributor from South Sudan gave a contextual overview of this ‘new country’ where “cultural orientations, beliefs and practices are very strong and highly valued…relegating women and girls to inferior social positions within very strong patriarchal societies.” Laws and policies are also emerging in that context. This contributor noted that the subject of homosexuality has not been discussed amongst staff (let alone participants in projects or government representatives), but that it exists as a practice as ‘old as mankind’. Homosexuality is a taboo in South Sudan – considered as an abomination – but not criminalized by law. This contributor felt hat this discussion was not a priority for staff at present, rather engaging on the rudiments of GED would lay a good foundation for future discussions on this more sensitive topic. The starting point for CARE South Sudan is to explore gender norms with staff and perhaps in one year this will enable broader discussion on issues such as tribes and homosexuality.

**Other resources** provided on this issue:

4 part series on a global gay history: <http://www.bbc.co.uk/programmes/b014x5lh/episodes/player>

A report linking sexuality and poverty: <http://www.iglhrc.org/cgi-bin/iowa/article/takeaction/partners/1392.html>

**Conclusion**

As the facilitator of this discussion, I was both impressed that progress on this discussion has been made in many places; while at the same time feeling concerned that the discussion in the working group did not elicit a lot of responses from national staff or from the Asia or Latin America regions. I am sure that there are some excellent experiences of facilitating discussions in both these regions that those in our Africa country offices could learn from. In many Asian contexts diversity of sexual orientation can be more open – perhaps not more tolerated – but more openly demonstrated; and I know that many of our projects work with people of diverse sexual orientation. Please do share other stories or methods if you have them!

I do hope that the discussion has inspired colleagues in CARE Tanzania to move ahead with discussions on this issue and we hope to hear about how they go in the future. I have put the films above on order for the GED Unit and will update the working group about them when I have seen them!

Finally, as someone with the privilege of having cherished homosexual friends and family; it is of course a concern to me that they should experience discrimination and fear simply because of their sexual orientation. I look forward to a day when we really do treat all human beings with dignity and respect.