

Leaving no one behind

Inclusive development, health and rights: what does this mean for people marginalized on the basis of SOGIESC?

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In the preamble of the **2030 Agenda for Sustainable Development** is the pledge that "no one will be left behind." Member states are expected to commit to achieving 17 sustainable goals that aim to "free the human race from the tyranny of poverty and heal the world and secure our planet." Here, economic well being, environmental and physical health and security are interlinked requiring inclusive strategies in order to be a sustainable reality for all. Similarly the **2063 Agenda: The Africa We Want**, initiated by the African Union in 2013, lists in Aspiration 6, a call for "an Africa whose development is people-driven, relying on the potential of African people." This is an Africa where "no child, woman or man will be left behind or excluded, on the basis of gender, political affiliation, religion, ethnic affiliation, locality, age or other factors."

Committing to the normative aspiration of social inclusion written into both the **2030 Agenda** and the **2063 Agenda**, a great challenge that is not only present in African countries but the world is the realization of full social inclusion of all people that are marginalized on the basis of sexual orientation, gender Identity and expression, and sexual characteristics (SOGIESC).



People Lesbian, that are Gay, Bisexual Transgender/Transsexual and/or Intersex (LGBTI), or who whose identities, expression and desires fall outside of the scope of gendered or sexual norms comprise one of the most socially excluded members of the global population. At present, there is severely limited research that investigates compounding and interrelated effects of exclusion from health services, social protection and justice on the basis of SOGIESC in the Great Lakes Region (GLR).

Linking positive health outcomes for LGBTI people to access to social protection and justice, on 1 November the Gender Centre of the Graduate Institute of International and Development Studies will host the Geneva rendition of a series of global strategic network meetings (SNM), organized in collaboration with Université de Paris 8, University of Birmingham, University of KwaZulu-Natal and the London School of Hygiene & Tropical Medicine.

This SNM will zero in on the legal, social and health dimensions of routinized social exclusion on the basis of SOGIESC. The meeting will be one day in length and workshop format. It will be divided into three sessions with three speakers per session to trigger discussion in thematic sessions. Speakers are invited to discuss multi-faceted aspects of social exclusion as they relate to health, social protection **or** access to legal remedy when discriminated or harmed on the basis of SOGIESC. Participants will contribute as discussants to help critically engage with the issues presented.

There are three goals for this SNM

- 1) Learn how researchers, institutions, advocates and activists, working in different African contexts, presently centre SOGIESC in their studies, policies and practices.
- 2) Generate synergies between local and foreign academics, activists, advocates, development practitioners and/or policy makers.
- 3) Produce best practices from lessons learned that can be applied to the GLR while respecting its regional complexity.

As the GLR is complex and diverse, linguistically ethnically, geopolitically and legislatively there are myriad ethical, methodological and political challenges to consider. Among them include the stigmatized, marginalized and criminalized status of LGBTI people, which normalizes in varying degrees state sanctioned discrimination and violence on the basis of SOGIESC. Second, are the corollary difficulties of identifying and reaching individuals and communities, for whom exposure via identification runs the risk of exacerbating existing insecurities. Lastly, are the productive capacities and limiting effects of the existing vocabulary when mainstreaming SOGIESC advocacy. The acronym 'LGBTI' has passed into the lexicon of academics, activists, advocates, development practitioners and/or policy makers across the world. However, the acronym is a construct of Western origin that might not fully capture the diverse sexualities and gender expressions that exist in the region. In keeping with the principle of "leave no one behind," this may be a critical shortcoming of current mainstreaming objectives of both international organizations and national civil society organizations. Yet substantial donor funding is provided to realize these objectives at the international level. Conversely, the international push to extend rights to LGBTI people, and fight discrimination and violence on the basis of SOGIESC often gives rise to the charge of neo-colonial interference, in highly politicized discussions in GLR states. The consequent dangers of backlash against LGBTI communities are all too real.

It is therefore imperative that while forming this Strategic Network, we approach this project with an ethos of participation and dialogue. This is the optimal means to realize best practices in academic and practical knowledge exchange.

Speakers and discussants are welcome to tailor their interventions to reflect one or more of the following questions:

- What are institutions advocates and activists presently doing to weave considerations for SOGIESC into their policies and practices? How have they translated onto the ground? What are the limits to present institutional approaches?
- 2. What are the strengths and limits to the available categories and concepts used when advocating for those susceptible to discrimination based on SOGIESC in national institutions (e.g. judicial, health and social welfare)? How might we tailor social policies and strategies for advocacy interventions for people that fall outside of the scope of the present concepts being mainstreamed?
- 3. What are the methodologies used to produce demographic data on members of "key populations" (such as men who have sex with men and sex workers) when they often occupy statuses explicitly criminalized by the state? How do we generate the visibility needed to produce data for meaningful interventions while maintaining the invisibility required to do no harm?
- 4. Where are the present gaps in available data and data collection methodologies in health and social justice research that targets SOCIESC?
- 5. What role do, and can, LGBTI advocates and activists play in promoting ostensibly universal goals and aspirations in concrete, localized contexts? What lessons can we draw from the successes and challenges in these aspirations?
- 6. How can academics contribute to the discussion and what can they learn from practitioners?

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