

SAFE AND USEFUL DATA FOR INCLUSIVE
RESPONSE THAT IS MINDFUL OF PEOPLE'S
DIVERSE SEXUAL ORIENTATION, GENDER
IDENTITY, GENDER EXPRESSION AND SEX
CHARACTERISTICS (SOGIESC)"

SOGIESC

SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION
AND SEX CHARACTERISTICS



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Cover photo: Denys, a social worker, offers assistance to individuals within the LGBTIQ+ community, including lesbian, gay, bisexual, transgender, intersex, queer, and others with diverse sexual orientations and gender identities. He's distributing HIV tests and aiding in doctor's appointments. Here, he's in conversation with an IOM staff member.
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IOM OPERATIONAL GUIDE 2023

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AND SEX CHARACTERISTICS

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This guide was written by Daunia Pavone (IOM DTM and Protection in Emergencies) and Jennifer Rumbach (RMM and LGBTIQ+ Focal Point) and is a collaboration of the IOM Displacement Tracking Matrix (DTM) team in the Global Data Institute (GDI), the IOM Protection Division (PXD), the Global Gender-Based Violence support team in the Department of Operations and Emergencies and the IOM LGBTIQ+ Focal Point.

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EXECUTIVE SUMMARY

This document uses the phrasing “[persons with diverse sexual orientation, gender identity, gender expression and sex characteristics](#)” (SOGIESC) in preference to “lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+)” as the acronym LGBTIQ+ is considered by many as too narrow in origin and application. All people have SOGIESC; diverse SOGIESC refers to SOGIESC that exist outside of heteronormative, cisnormative, gender binary and endosexist assumptions¹.

Data and information are needed to programme and implement an inclusive response that reflects and addresses the needs of all groups and ensures access modalities tailored to all people in need, including persons with diverse SOGIESC.

There is a recognised lack of data and information about persons with diverse SOGIESC, and often specific needs, risks and barriers faced by persons with diverse SOGIESC are overlooked in designing and implementing a response, leaving some individuals exposed to additional risks and personnel confused about how to respond appropriately in an inclusive manner.

Data and information management for persons with diverse SOGIESC is complex as, wrongfully done, data collection, storing, analysis and sharing can bring serious additional risks to these individuals, their families and communities, as well as to organizations and their personnel, due to the reality of the legal, social and cultural contexts where we work. These risks should not be underestimated, as they affect people’s safety, lives and wellbeing.

As expressed in the International Migration Law (IML) document “[International Standards on the Protection](#)

[of People with Diverse Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics in the Context of Migration:](#)” “States and other stakeholders must also always respect the overriding principle of ‘Do No Harm’ in every action conducive to human rights implementation.”²

In this detailed guidance you will find: 1) common types of data you need for an inclusive response, 2) what methods and sources to use to collect the necessary data, and 3) how to avoid doing harm while collecting, storing, analysing, sharing and using data and information for persons with diverse SOGIESC.

In IOM, collecting, storing, sharing, analysing and using data to support the design and implementation of a response that is inclusive of persons with diverse SOGIESC must adhere to the fundamental principles identified by the *Protection Mainstreaming Approach* (see Mandatory Instruction IN232 on Protection Mainstreaming), Protection Information Management Initiative³, the IASC Operational Guidance on Data Responsibility in Humanitarian Action⁴, the 2018 *Personal Data Protection And Privacy Principles* by the UN Privacy Policy Group⁵ and the IOM Data Protection Principles⁶. In particular, the principle of “Defined Purpose” means that only data that have a proven link to actions in support of the wellbeing, access to rights, goods and services and safety of persons with diverse SOGIESC must be collected⁷.

The principle of “Do No Harm” means that specific attention should be paid to only collect data that does not increase or bring harm when collected, stored, shared, analysed and used, and to only solicit that data in a way that does not do harm and through the appropriate methods and sources.

1 See definitions in Annex A: Definitions and in IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

2 IML Information Note: <https://www.iom.int/sites/g/files/tmzbd486/files/documents/InfoNote-International-Standards-Protection-of-People-with-Diverse-SOGIESC.pdf>

3 Pim.guide

4 IASC Operational Guidance on Data Responsibility in Humanitarian Action <https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance-data-responsibility-humanitarian-action> Note that IOM Migration Data Strategy includes Data Responsibility as one of the IOM principles (p.10) and state that IOM will “support the implementation and monitoring” of relevant IASC frameworks (p.23). IOM <https://publications.iom.int/books/internal-displacement-data-strategy-2021-2025> states that “IDDS is further guided by the [...] the IASC’s Operational Guidance on Data Responsibility”, p.7.

5 [https://unsceb.org/privacy-principles#:~:text=The%20Principles%20aim%20to%3A%20\(i,particular%20the%20right%20to%20privacy](https://unsceb.org/privacy-principles#:~:text=The%20Principles%20aim%20to%3A%20(i,particular%20the%20right%20to%20privacy). Adopted by the UN High-Level Committee on Management (HLCM) at its 36th Meeting on 11 October 2018.

6 See IOM Data Protection Manual

7 The IOM Data Protection Manual also introduces “SPECIFIED AND LEGITIMATE PURPOSE” among the IOM principles for data protection, saying “The purpose(s) for which personal data are collected and processed should be specified and legitimate, and should be known to the data subject at the time of collection. Personal data should only be used for the specified purpose(s), unless the data subject consents to further use or if such use is compatible with the original specified purpose(s).” IOM Data Protection Manual, p.13

The principle of “People-Centred and Inclusive” means that “affected populations should be afforded an opportunity to be included, represented, and empowered to exercise agency throughout data management whenever the operational context permits. Special efforts should be made to support the participation and engagement of people who are not well represented and may be marginalized in the data management activity at hand (e.g., due to age, gender and other diversity factors such as disability, ethnicity, religion, sexual orientation or other characteristics), or are otherwise ‘invisible.’ [This is] consistent with commitments to leave no one behind. A people-centred and inclusive approach is particularly important in the development of context-specific norms and standards for data management.”⁸

Conducting risk assessments of the data collection exercise, together with a do no harm analysis of each question in the data collection tools is crucial to avoid harm to persons with diverse SOGIESC, enumerators, communities and the organization, during the whole data life cycle.

Aligning with the common process for needs assessment identified under the Grand Bargain⁹ is also required to reduce harm and obtain useful and usable data.

The process starts with colleagues identifying the strategic and programmatic decisions they have to make and the information necessary to make such decisions.¹⁰ Examples of data and information commonly needed are in the [Decision-Making Tree on Obtaining Data for Persons with Diverse SOGIESC: What data we need and how to collect it.](#)¹¹

Once it is clear what detailed information the team needs, colleagues must carry out a review and analysis of existing data and information before moving to any type of primary data collection. Examples of sources of secondary (i.e., existing¹²) data to be used before moving to primary data collection are provided in the [Annex Resources for Secondary Data Analysis](#).

Any inclusive response must start with training all teams, including both international and national personnel. This means training senior management, teams that design and monitor programmes, those who implement activities, those who design data collection exercises and tools, those who collect data, and those in direct contact with the affected population (e.g., security teams, case workers, reception and transit centre personnel, logistics, water and sanitation experts, shelter colleagues). IOM has a comprehensive SOGIESC training package that is available in an in-person format as well as an E-Learning course on I-Learn and E-Campus.¹³ These training options will allow personnel to become acquainted with the basic concepts and realities of persons with diverse SOGIESC. While neither of the courses currently include guidance on data collection, it is necessary for personnel with involvement in data collection and/or a high level of interaction with affected populations to take the more comprehensive in-person course. A facilitated training session on how to safely gather and process data for persons of diverse SOGIESC in line with this guide is also publicly available¹⁴.

Following best practices in Protection and Information Management, teams should then make use of existing knowledge and experience from years of response activities in the field, before trying to collect new data. Some examples from the field are listed in this document in [Annex B: What we already know- Examples for an inclusive response and to reduce data-related risks](#). These examples highlight common challenges, obstacles and risks that persons with diverse SOGIESC face during a crisis in accessing their rights, basic needs, services, and participating in community life. The analysis of examples from our common experience will help us all reduce those known risks when we design and implement our projects, so as to improve the inclusiveness of our response even before collecting new data.

8 IASC Operational Guidance on Data Responsibility in Humanitarian Action <https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance-data-responsibility-humanitarian-action>

9 Grand Bargain Outcomes are in: https://interagencystandingcommittee.org/system/files/ensuring_data_and_analysis_is_useful_and_usable_for_response_-_tools.pdf

10 It is important to remember that “Data” is not synonymous with “number of persons:” we will gather and use all information that help us safely respond, as well as advocacy for the rights of persons with diverse SOGIESC.

11 <https://dtm.iom.int/dtm-partners-toolkit/sogiesc> and below in this Guide.

12 See Annex A: Definitions

13 See: Learning resources for IOM personnel and partners ([enrolment key](#): SOGIESC-IOM-2022).

14 <https://dtm.iom.int/dtm-partners-toolkit/trainings>

After analysing existing data and information, it is appropriate to move to primary data collection only if response design and implementation require additional data and information. Each type of data and information will have to be obtained using appropriate sources and methods, and data collection tools must be developed carefully and jointly by SOGIESC experts, protection experts, sectoral experts and data/assessment experts. This document facilitates the identification of defined purposes, information needs, secondary sources and primary data collection methods for each purpose, section on [Decision-Making Tree on Obtaining Data for Persons with Diverse SOGIESC: What data we need and how to collect it](#).

For each data collection exercise, colleagues must conduct a risk analysis to ensure that the exercise is safe to be implemented and find solutions to minimise identified risks. In addition, colleagues conduct a specific “Do No Harm” analysis on each question of the data collection tools and on the expected analysis of the outcomes. Process and tools to facilitate this analysis are explained in the section [The process: How to safely collect \(only\) the information we need for inclusion of persons with diverse SOGIESC](#). In some cases, it will be necessary to review or even refrain from collecting specific data when added risks may outweigh the resulting benefits.

Note that we must not ask for individuals’ SOGIESC, and we must not attempt to collect the prevalence of persons with diverse SOGIESC in a community, area or country.

Also, we must not attempt to collect the number of persons with diverse SOGIESC among programme users/beneficiaries.

If you are requested to engage in such data collection activities, seek the help of IOM SOGIESC expert such as the LGBTIQ+ Focal Point or PIM Support Field Network (PIM-Support@iom.int) in HQ to explain, including to donors, why we cannot comply with the request, and what alternatives, and more useful data, we can provide.

As unprompted disclosures often occur during our activities, personnel in each programme must be ready to safely manage unprompted disclosures about someone’s SOGIESC by ensuring appropriate follow up, and safely manage and guard this information with the utmost attention. See section below “What to do when planning and implementing programmes -including case management activities

The reasons for the two pieces of guidance mentioned above are multiple and include ethical as well as practical and technical data and assessment considerations. The ethical, technical and practical reasons for these limitations are detailed [in the section Risks linked to data collection and management for individuals with diverse SOGIESC and alternatives to safely obtain useful data](#), together with concrete alternative types of data that are useful for our inclusive programming and should be safely gathered.

INTRODUCTION: WHY GUIDANCE ON DATA FOR PERSONS WITH DIVERSE SOGIESC

This guidance is the outcome of the joint work of the IOM Displacement Tracking Matrix (DTM) team in the Global Data Institute (GDI), the IOM Protection Division (PXD), the Global Gender-Based Violence support team in the Department of Operations and Emergencies and the IOM LGBTIQ+ Focal Point.

An inclusive response that addresses the needs of all groups, including needs and priorities of persons with diverse SOGIESC, is paramount in the humanitarian and development communities. However, some colleagues may still be unsure whether it is important to collect data for persons with diverse SOGIESC, or which data are really needed for decision making, and through which modalities they should be collected.

Additional challenges are determined by the fact that, in many contexts, it is either criminalised or culturally unacceptable to hold or express identities that fall outside of the cisgender, endosex and heterosexual mainstream or to exhibit behaviours that are perceived as violating the gender binary. Regardless, people with diverse SOGIESC are present in every culture, in every country and in every population we assist. Those we assist who have diverse SOGIESC are more likely to experience discrimination, violence and exclusion¹⁵ during crises, disasters, migration and displacement.

Information and data are crucial to plan and implement inclusive programming. Ensuring understanding and recognition of the risks, needs and resources of diverse SOGIESC populations contributes to appropriate, accurate and targeted support through programming, advocacy and resourcing.

Data on people with diverse SOGIESC,¹⁶ is essential to support programmatic decision-making and operational implementation in the field with and for

people with diverse SOGIESC, as well as to advocate for allocation of resources and allow for better referrals and support services.

The limited availability of data for people with diverse SOGIESC contributes to rendering them invisible to policy and decision makers,¹⁷ as well as to donors and aid workers.

However, collecting some types of data or collecting data using the wrong method and source may cause harm to persons with diverse SOGIESC, to enumerators and potentially also to the organization conducting the data collection exercise. This is particularly relevant, although not exclusively, in many countries where humanitarian and development colleagues work, and where the social reality and the cultural and legal frameworks may increase risk for persons with diverse SOGIESC.

This guide aims to support all colleagues **to identify necessary data, and safely obtain, manage and use it to plan and implement a safe and inclusive response for all persons in need, including persons with diverse SOGIESC**, without creating harm to persons of concern, communities, interviewees, enumerators and the organizations.¹⁸

This guide equips the organizations and its personnel to recognize which data is necessary for strategic, programmatic and operational decision-making, and to collect the necessary data in full respect of the principles of **Do No Harm, Defined Purpose, and Necessity and Proportionality**,¹⁹ in line with best practices of Protection Information Management²⁰ and the IASC Operational Guidance on Data Responsibility in Humanitarian Action.²¹ This guide uses the shared approach and process developed under the Grand

15 Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, U.N. Doc. A/HRC/37/50 (23 November 2018), para. 32 (stating that LGBTIQ migrants are “particularly vulnerable to discrimination, violence, sexual abuse and humiliation”).

16 Data on persons with diverse SOGIESC includes data on specific obstacles faced to access basic goods and services, resources and coping mechanisms and protection risks, among others.

17 See for example [IML Information Note](#):

18 See DTM Do No Harm Checklist (<https://displacement.iom.int/dtm-partners-toolkit/field-companion-sectoral-questions-location-assessment>) for a short overview of who and when can be exposed to harm during IM and data activities. Also, See SDP-DAP training session on Mainstreaming Protection in IM and Analysis Activities (<https://dtm.iom.int/dtm-partners-toolkit/module-02-mainstreaming-protection-im>).

19 See: <http://pim.guide/guidance-and-products/product/principles-protection-information-management-may-2015/> and <https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance-data-responsibility-humanitarian-action>

20 Pim.guide

21 IASC Operational Guidance on Data Responsibility in Humanitarian Action <https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance->

Bargain by the Working Group on *Ensuring Data and Analysis is Useful and Usable for Response* (EDAUUR)²² and builds on best practices of collaboration between data users and providers **to obtain necessary data for response without exposing vulnerable people to additional risk.**

This document uses the phrasing “*persons with diverse*

sexual orientation, gender identity, gender expression and sex characteristics” (SOGIESC) in preference to “lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+)” as the acronym LGBTIQ+ is considered by many as too narrow in origin and application. All people have SOGIESC; diverse SOGIESC refers to SOGIESC that exist outside of heteronormative, cisnormative, gender binary and endosexist assumptions.

[data-responsibility-humanitarian-action.](#)

²² Grand Bargain Outcomes are in: https://interagencystandingcommittee.org/system/files/ensuring_data_and_analysis_is_useful_and_usable_for_response_-_tools.pdf.

DECISION-MAKING TREE ON OBTAINING DATA FOR PERSONS WITH DIVERSE SOGIESC: WHAT DATA WE NEED AND HOW TO COLLECT IT

We start by identifying the purpose, or use, of the information we want to collect, in line with PIM, IASC Data Responsibility Principles and the EDAUUR shared process. This contributes to the safe and efficient collection of data and information. The Decision Tree below is a flow chart that helps us identify our purpose and the information we need, as well as the appropriate method and source to safely obtain useful and usable data. It is designed to include some of the most common uses of information in programmes, advocacy and decision-making. The flow chart is explained and complemented with important guidance in the following section.

Explaining the Decision-Tree

We start by **identifying our purpose** on the first row of the Decision Tree. The second row identifies the **information we need** for each specific purpose. Then the flow chart leads us to check if we can access **existing data** (called **secondary data**) that we can use for our defined purpose. We obtain existing

data and information and read and analyse them to determine reliability, considering whether they are up-to-date and still relevant to the current context. Once we know what information we need but do not have (**information gap**), we again use the flow chart to identify **the appropriate methods and sources to safely collect the data** we still need.

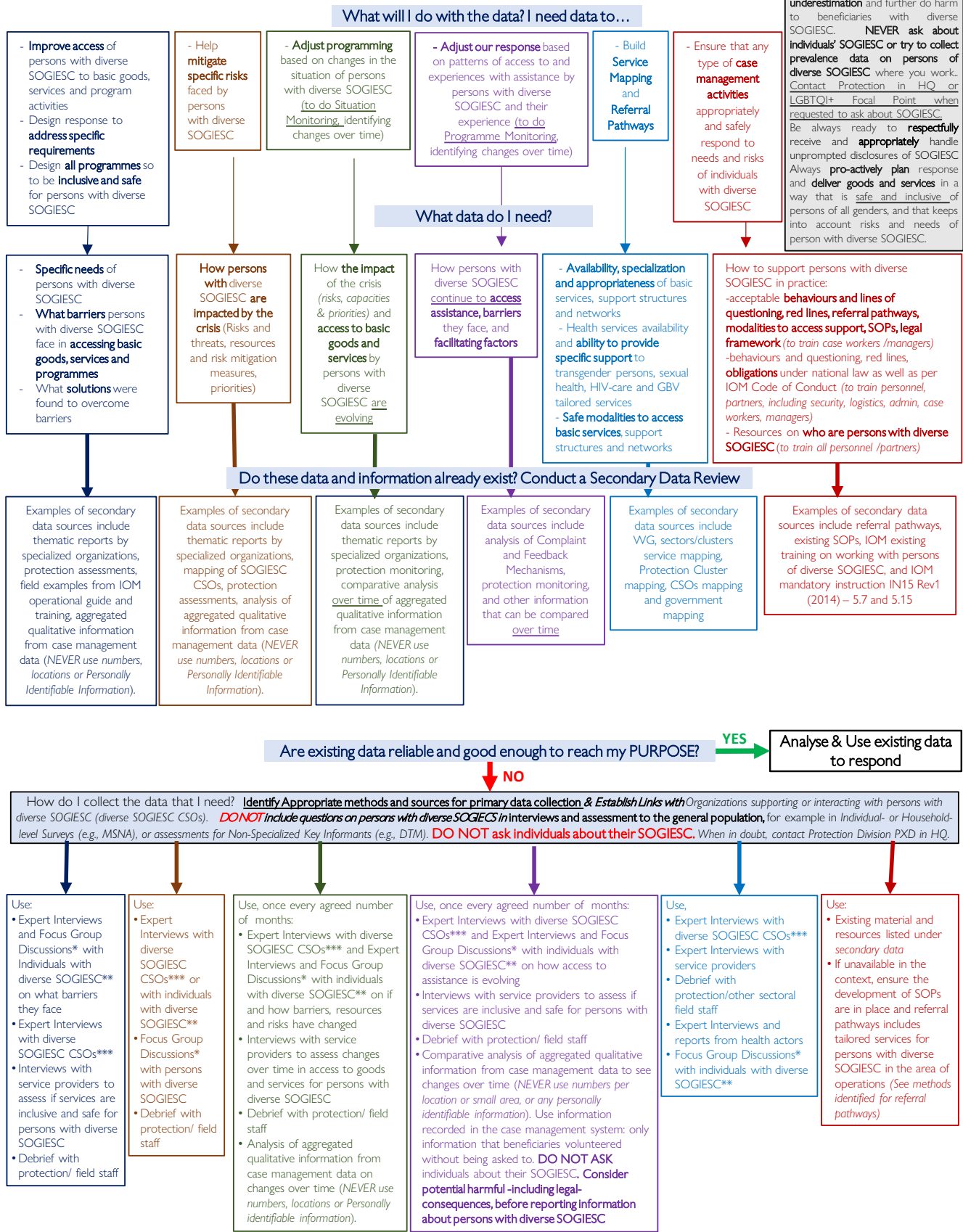
The Decision Tree identifies the following 6 (six) purposes/uses of data and related information needed for an inclusive response: 1) barriers, 2) impact, 3) impact over time (*situation monitoring*), 4) access to the organization's assistance (*programme/results monitoring*), 5) service mapping and referral pathways, and 6) case management.

For each type of information, the flow chart indicates methods, sources and tools to obtain such data, possible secondary data sources and **important dos and don'ts, essential to the safety of persons with diverse SOGIESC, personnel and organizations.**

Decision-Making Tree on Obtaining Data for Persons with Diverse SOGIESC:

Identify purpose, data you need and how to collect it

It is correct and appropriate to assume that in any community there are persons with diverse SOGIESC. Attempting to identify prevalence is likely to put **beneficiaries and personnel at risk** and result in **gross underestimation** and further do harm to beneficiaries with diverse SOGIESC. **NEVER ask about individuals' SOGIESC or try to collect prevalence data on persons of diverse SOGIESC** where you work.. Contact Protection in HQ or LGBTQI+ Focal Point when requested to ask about SOGIESC. Be always ready to **respectfully** receive and **appropriately** handle unprompted disclosures of SOGIESC. Always **pro-actively plan** response and **deliver goods and services** in a way that is safe and inclusive of persons of all genders, and that keeps into account risks and needs of person with diverse SOGIESC.



*Only use FGDs after a joint risk assessment with diverse SOGIESC CSOs or Individuals. FGDs may create additional risks for persons with diverse SOGIESC and you may have to avoid FGDs.

**Use "Snowball sampling" to interview persons with diverse SOGIESC limiting exposure to harm. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Organise separate FGDs if necessary.

*** Consult CSOs working with all groups of individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

1. Barriers

- **Purpose/Use:** To improve access of persons with diverse SOGIESC to basic goods and services; to design response to address specific requirements; to design all programmes to be inclusive and safe for persons with diverse SOGIESC.
- **Information needed:**
 - **Specific needs** of persons with diverse SOGIESC
 - **Barriers** that persons with diverse SOGIESC face in accessing basic goods, services and programme activities
 - **Solutions** that have been found to overcome barriers
- **Does this data already exist? Conduct a secondary data analysis:**

Examples of secondary data sources include thematic reports by specialized organizations, protection assessments and monitoring, knowledge and experience of protection and sectoral colleagues acquired through specific meetings and interviews in the offices, field examples from Annex B to this guide, “*Annex B: What we already know- Examples for an inclusive response and to reduce data-related risks*” aggregated qualitative information from case management data (remember to *never ask for individuals’ SOGIESC, never request to see detailed case management data: only request and analyse aggregated data. In case you are aggregating the data for reporting, remember not*

to include and report numbers of cases, specific locations or any type of Personally Identifiable Information-PII).²³

When conducting analysis of aggregated -and unidentifiable- **case management data** remember that **case management interviews should not include questions about individuals’ gender identities, sexual orientations and sex characteristics**,²⁴ and therefore the data reported will only include the SOGIESC-related information that the clients disclosed during case management interviews unprompted, or without being asked²⁵. The data you are collecting cannot be used to identify the number of clients/persons with diverse SOGIESC, or be expected to reflect all needs, barriers, and solutions found by and for persons with diverse SOGIESC.

- Even if you cannot access existing reliable data on SOGIESC, **you still must not include questions on persons with diverse SOGIESC in any type of interviews or assessment to the general population**, including *Individual or Household Surveys (e.g., Flow Monitoring Surveys or MSNA), or assessments for Non-Specialized Key Informants (e.g., DTM MSLA)*
- **If existing data is not sufficient for your specific purpose**, only protection personnel with deep understanding of the context, of the issues and of the modalities to carry out sensitive interviews can carry out the following types of data collection activities:
 - Expert interviews and focus group discussions (FGD)²⁶ with individuals with

23 PII include any information that can lead to the identification of a case, or personnel, or office, also when analysed together with separate data sets and information. Always conduct a Risk Assessment/Do No Harm analysis when working with case management data, including when deciding on reporting aggregated data. You can use the DTM Do No Harm Checklist (<https://displacement.iom.int/dtm-partners-toolkit/field-companion-sectoral-questions-location-assessment>).

24 Due to the high potential for harm, asking persons and clients about their gender identity, sexual orientation and sex characteristics is a red line, and should never be done. When it is indispensable for ensuring safety of a client, for example during case management, it is important to wait for disclosure rather than asking and case management teams must ensure a safe environment and confidential management of the information: see section on Inclusive and Safe Case Management for more details. Never ask this information, including for the purpose of research, statistics, situation analysis, monitoring, or reporting. If you are requested to engage in such data collection activities, seek the help of IOM SOGIESC expert such as the LGBTIQ+ Focal Point or PIM Support Field Network (PIM-Support@iom.int) in HQ to explain, including to donors, why we cannot comply with the request, and what alternatives, and more useful data, we can provide) to explain, including to donors, why you cannot comply with the request, and what alternatives, and more useful data, we can provide.

25 If you are asked to collect SOGIESC-related data or have questions about gender and sex categories, contact PIM Field Support Network in HQ (PIM-Support@iom.int) and IOM LGBTIQ+ Focal Point for help explaining why we do not do this, and for alternatives and safer data we can collect.

26 Only use FGDs after a joint risk assessment with diverse SOGIESC CSOs or Individuals. FGDs may create additional risks for persons with diverse SOGIESC and you may have to avoid FGDs. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Organise separate FGDs if necessary.

diverse SOGIESC²⁷

- Expert Interviews with diverse SOGIESC civil society organisations (CSOs)²⁸
- Interviews with service providers to assess whether services are inclusive and safe for persons with diverse SOGIESC (*in combination with capturing the point of view of persons with diverse SOGIESC*)

2. Impact

- **Purpose/Use:** To help mitigate specific risks faced by persons with diverse SOGIESC
- **Information needed:** How persons with diverse SOGIESC are affected by the crisis (risks and threats, resources and risk mitigation measures, priorities)
- **Does this data already exist? Conduct a secondary data analysis.**

Examples of secondary data sources include thematic reports by specialised organizations, specialised reports and academic research on legal frameworks in a country, knowledge and experience of protection and sectoral colleagues acquired through specific meetings and interviews in the offices, as well as global resources, for example <https://www.equaldex.com/issue/homosexuality>, protection assessments and monitoring, mapping of SOGIESC CSOs and aggregated qualitative information from case management data²⁹ (remember to *never ask for individuals' SOGIESC, never request to see detailed case management data: only request and analyse aggregated data. Do not report numbers of cases, specific locations*

or any type of Personally Identifiable Information-PII).

- When conducting analysis of aggregated -and unidentifiable- **case management data** remember that **case management interviews should not include questions about individuals' gender identities, sexual orientations and sex characteristics**,³⁰ and therefore the data reported will only include the SOGIESC-related information that the clients disclosed during case management interviews unprompted, or *without being asked*³¹. The data you are collecting cannot be used to identify the number of clients/persons with diverse SOGIESC, or be expected to reflect all needs, barriers, and solutions found by and for persons with diverse SOGIESC.
- Even if you cannot access existing reliable data on SOGIESC, **you still must not include questions on persons with diverse SOGIESC in any type of interviews or assessment to the general population**, including *Individual or Household Surveys (e.g., Flow Monitoring Surveys or MSNA), or assessments for Non-Specialized Key Informants (e.g., DTM MSLA)*
- **If existing data is not sufficient for your specific purpose**, only protection personnel with deep understanding of the context, of the issues and of the modalities to carry out sensitive interviews can carry out the following types of data collection activities:
 - Expert interviews and focus group discussions (FGD)³² with individuals with

27 Use "snowball sampling" (see definition in Annex) to interview persons with diverse SOGIESC limiting exposure to harm. Consider using remote means to limit potential harm, for example, speaking by phone with individuals or CSOs in a very conservative community, where being seen speaking in person may attract unwanted attention (e.g., even the fact that IOM cars are visible outside their door may attract unwanted attention). Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

28 Consult CSOs working with all groups of individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Consider remote interviews to reduce exposure to harm.

29 You can read the field examples in this document to understand the type of impact you can expect, but you need to ensure you have context-specific information on impact (Annex B: What we already know- Examples for an inclusive response and to reduce data-related risks.)

30 Due to the high potential for harm, asking persons and clients about their gender identity, sexual orientation and sex characteristics is a red line, and should never be done. When it is indispensable for ensuring safety of a client, for example during case management, it is important to wait for disclosure rather than asking and case management teams must ensure a safe environment and confidential management of the information: see section on Inclusive and Safe Case Management for more details. Never ask this information, including for the purpose of research, statistics, situation analysis, monitoring, or reporting. If you are requested to engage in such data collection activities, seek the help of IOM SOGIESC expert such as the LGBTIQ+ Focal Point or PIM Field Support Network in HQ (PIM-Support@iom.int) to explain, including to donors, why you cannot comply with the request, and what alternatives, and more useful data, we can provide.

31 If you are asked to collect SOGIESC-related data or have questions about gender and sex categories, contact PIM Field Support Network in HQ (PIM-Support@iom.int) and IOM LGBTIQ+ Focal Point for help explaining why we do not do this, and for alternatives and safer data we can collect.

32 Only use FGDs after a joint risk assessment with diverse SOGIESC CSOs or Individuals. FGDs may create additional risks for persons with diverse SOGIESC and you

diverse SOGIESC³³

- Expert interviews with diverse SOGIESC CSOs³⁴
- Interviews with service providers to capture their perspective on impact (*in combination with capturing the point of view of persons with diverse SOGIESC*)
- Structured debriefing with protection staff working in the field (*in combination with capturing the point of view of persons with diverse SOGIESC*)

3. Impact Over Time: Situation Monitoring

- **Purpose/ Use:** To adjust programming based on changes in the situation of persons with diverse SOGIESC (to do Situation Monitoring, identifying changes over time)
- **Information needed:** How the impact of the crisis (specific needs, risks and threats, resources and risk mitigation measures, priorities) and access to basic goods and services by persons with diverse SOGIESC are evolving over time.
- **Does this data already exist? Conduct a secondary data analysis.**
Examples of secondary data sources include thematic reports by specialised organizations, specialised reports and academic research on legal frameworks in a country, knowledge and experience of protection and sectoral colleagues acquired through specific meetings and interviews in the offices, as well as global resources, for example <https://www.equaldex.com/issue/homosexuality>, Protection

Monitoring, and comparative analysis over time of aggregated qualitative information from case management data.

- When conducting analysis of aggregated -and unidentifiable- **case management data** remember that **case management interviews should not include questions about individuals' gender identities, sexual orientations and sex characteristics**,³⁵ and therefore the data reported will only include the SOGIESC-related information that the clients disclosed during case management interviews unprompted, or without being asked³⁶. The data you are collecting cannot be used to identify the number of clients/persons with diverse SOGIESC, or be expected to reflect all needs, barriers, and solutions found by and for persons with diverse SOGIESC.
- Even if you cannot access existing reliable data on SOGIESC, **you still must not include questions on persons with diverse SOGIESC in any type of interviews or assessment to the general population**, including *Individual or Household Surveys (e.g., Flow Monitoring Surveys or MSNA), or assessments for Non-Specialized Key Informants (e.g., DTM MSLA)*
- **If existing data is not sufficient for your specific purpose**, only protection personnel with deep understanding of the context, of the issues and of the modalities to carry out sensitive interviews can carry out the following types of data collection activities, **every agreed number of months:**
 - Expert interviews and focus group

may have to avoid FGDs. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Organise separate FDGs if necessary.

33 Use "snowball sampling" (see definition in Annex) to interview persons with diverse SOGIESC limiting exposure to harm. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

34 Consult CSOs working with all groups of individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

35 Due to the high potential for harm, asking persons and clients about their gender identity, sexual orientation and sex characteristics is a red line, and should never be done. When it is indispensable for ensuring safety of a client, for example during case management, it is important to wait for disclosure rather than asking and case management teams must ensure a safe environment and confidential management of the information: see section on Inclusive and Safe Case Management for more details. Never ask this information, including for the purpose of research, statistics, situation analysis, monitoring, or reporting. If you are requested to engage in such data collection activities, seek the help of IOM SOGIESC expert such as the LGBTIQ+ Focal Point or PIM Field Support Network in HQ (PIM-Support@iom.int) to explain, including to donors, why you cannot comply with the request, and what alternatives, and more useful data, we can provide.

36 If you are asked to collect SOGIESC-related data or have questions about gender and sex categories, contact PIM Field Support Network in HQ (PIM-Support@iom.int) and IOM LGBTIQ+ Focal Point for help explaining why we do not do this, and for alternatives and safer data we can collect.

- discussions (FGD)³⁷ with individuals with diverse SOGIESC³⁸ on how barriers, resources and risks have changed over time
- Expert Interviews with diverse SOGIESC CSOs³⁹ on how barriers, resources and risks have changed over time
- Structured debriefing with protection staff working in the field (*in combination with capturing the point of view of persons with diverse SOGIESC*)
- Interviews with service providers to assess changes over time in access to goods and services for persons with diverse SOGIESC (*in combination with capturing the point of view of persons with diverse SOGIESC*).

4. Access to Assistance Over Time: Response/ Results /Programme monitoring

- **Purpose/Use:** To **adjust our response** based on patterns of access to assistance by persons with diverse SOGIESC (to do Programme Monitoring, identifying changes over time)
- **Information needed:** How persons with diverse SOGIESC continue to access assistance, barriers they face, and facilitating factors.
- **Does this data already exist? Conduct a secondary data analysis.**

Examples of secondary data sources include analysis of Complaint and Feedback Mechanisms (CFMs), Protection Monitoring, and other information that can be compared over time, including aggregated qualitative information from case management data

- When conducting analysis of aggregated -and unidentifiable- **case management data** remember that **case management interviews should not include questions about individuals' gender identities, sexual orientations and sex characteristics**,⁴⁰ and therefore the data reported will only include the SOGIESC-related information that the clients disclosed during case management interviews unprompted, or without being asked⁴¹. The data you are collecting cannot be used to identify the number of clients/persons with diverse SOGIESC, or be expected to reflect all needs, barriers, and solutions found by and for persons with diverse SOGIESC.

When analysing and reporting for results/ programme monitoring, use ONLY anonymised information aggregated to the level of the country, without mentioning specific dates, service providers and areas or locations. This reduces the likelihood of identification of individuals or locations. Use and adjust the following *phrasing*, when reporting on numbers of clients:

“During the year, XXX number of beneficiaries have come forward disclosing their diverse SOGIESC (sexual orientation, gender identity, gender expression and sex characteristics) in the context of case management/this programme. IOM personnel do not actively solicit information about individuals' SOGIESC so to respect the right of the individuals to privacy and in line with the Data Responsibility ethical principles of Do No Harm, Defined Purpose, Necessity and Proportionality. IOM personnel do not prompt disclosures; however, they do safely record and manage such information when received. The

37 Only use FGDs after a joint risk assessment with diverse SOGIESC CSOs or Individuals. FGDs may create additional risks for persons with diverse SOGIESC and you may have to avoid FGDs. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Organise separate FGDs if necessary.

38 Use “snowball sampling” (see definition in Annex) to interview persons with diverse SOGIESC limiting exposure to harm. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

39 Consult CSOs working with all groups of individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

40 Due to the high potential for harm, asking persons and clients about their gender identity, sexual orientation and sex characteristics is a red line, and should never be done. When it is indispensable for ensuring safety of a client, for example during case management, it is important to wait for disclosure rather than asking and case management teams must ensure a safe environment and confidential management of the information: see section on Inclusive and Safe Case Management for more details. Never ask this information, including for the purpose of research, statistics, situation analysis, monitoring, or reporting. If you are requested to engage in such data collection activities, seek the help of IOM SOGIESC expert such as the LGBTIQ+ Focal Point or PIM Field Support Network in HQ (PIM-Support@iom.int) to explain, including to donors, why you cannot comply with the request, and what alternatives, and more useful data, we can provide.

41 If you are asked to collect SOGIESC-related data or have questions about gender and sex categories, contact PIM Field Support Network in HQ (PIM-Support@iom.int) and IOM LGBTIQ+ Focal Point for help explaining why we do not do this, and for alternatives and safer data we can collect.

reported information is therefore not a reflection of the number of beneficiaries with diverse SOGIESC nor of persons with diverse SOGIESC in the community.”

Always conduct a risk analysis, considering potential harmful consequences, including legal consequences, before reporting on persons with diverse SOGIESC.

- Even if you cannot access existing reliable data on SOGIESC, **you still must not include questions on persons with diverse SOGIESC in any type of interviews or assessment to the general population**, including *Individual or Household Surveys* (e.g., *Flow Monitoring Surveys* or *MSNA*), or *assessments for Non-Specialized Key Informants* (e.g., *DTM MSLA*)
- **If existing data is not sufficient for your specific purpose**, only protection personnel with deep understanding of the context, of the issues and of the modalities to carry out sensitive interviews can carry out the following types of data collection activities, **every agreed number of months**:
 - Expert interviews and focus group discussions (FGD)⁴² with individuals with diverse SOGIESC⁴³ on how access to assistance is evolving
 - Expert interviews with diverse SOGIESC CSOs⁴⁴ on how access to assistance is changing
 - Interviews with service providers using a checklist, to assess if services are inclusive and safe for persons with diverse SOGIESC (*in combination with capturing the point of view of*

*persons with diverse SOGIESC*⁴⁵)

- Structured debriefing with protection staff and partners working in the field (*in combination with capturing the point of view of persons with diverse SOGIESC*).

5. Service Mapping and Referral Pathways

- **Purpose/Use:** To develop a mapping of available services and referral pathways
- **Information needed:** Availability, specialization and appropriateness of basic services; support structures and networks; health services' availability and ability to provide specific support to transgender persons or persons with diverse sex characteristics or sexual orientation; sexual health, HIV-care and GBV tailored services, and safe modalities to access basic services, support structures and networks.
- **Does this data already exist? Conduct a Secondary Data Analysis.** Examples of Secondary data sources include WVG, sectors/clusters service mapping, protection cluster mapping, CSOs mapping and government mapping, knowledge of protection colleagues (and sectoral colleagues) acquired through specific meetings and interviews in the offices.
- **If existing data is not sufficient for your specific purpose**, only protection personnel with deep understanding of the context, of the issues and of the modalities to carry out sensitive interviews can carry out the following types of data collection activities:
 - Expert interviews and focus group discussions

42 Only use FGDs after a joint risk assessment with diverse SOGIESC CSOs or Individuals. FGDs may create additional risks for persons with diverse SOGIESC and you may have to avoid FGDs. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Organise separate FGDs if necessary.

43 Use “snowball sampling” (see definition in Annex) to interview persons with diverse SOGIESC limiting exposure to harm. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

44 Consult CSOs working with all groups of individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

45 Interviewing service providers, partners and personnel are possible additional modalities to obtain data. However, they cannot be the only ways to collect this information, as service providers, partners and personnel may not know the obstacles faced by persons with diverse SOGIESC, or how to make inclusive services. In addition, they also may be subject to the same prejudices as the general population and may not be objectives about their ability to be inclusive.

(FGD)⁴⁶ with individuals with diverse SOGIESC⁴⁷

- Expert interviews with diverse SOGIESC CSOs
- Expert interviews with service providers,
- Structured debriefing with sectoral and protection staff and partners working in the field
- Expert Interviews and reports from health actors⁴⁸ (this must be done with support of colleagues who are health-experts)

6. Inclusive and Safe Case Management

- **Purpose/Use:** To ensure that any type of case management activities respond appropriately and safely to needs and risks of individuals with diverse SOGIESC
- **Information needed:** Ensure that colleagues are familiar with resources and modalities to support persons with diverse SOGIESC in practice, including:
 - o Appropriate and acceptable behaviours, as well as line of questioning, red lines, obligations under national law as well as per IOM contract (to train personnel, partners, including security, logistics, admin, case workers, managers)
 - o Referral pathways, modalities to access support, Standard Operating Procedures (SOPs), legal framework (to train case workers /managers)
 - o Resources on who are persons with diverse SOGIESC (to train all personnel /partners)
- **Does this data already exist? Conduct a Secondary Data Analysis.** Examples

of Secondary data sources include referral pathways, existing Standard Operating Procedures, IOM existing training on working with persons with diverse SOGIESC,⁴⁹ and IOM mandatory Instruction IN15 Rev1 (2014) – 5.7 and 5.15

- Use existing material and resources listed under *secondary data*. If standard operating procedures, service mapping and/or referral pathways that include tailored services for persons with diverse SOGIESC are unavailable in the context, ensure their development for the area of operations, after sufficient training using the in-person IOM SOGIESC training package. (using methods identified for referral pathways above).
- When planning and implementing case management activity, adhere to the list of do's and don'ts in: *What to do when planning and implementing programmes -including case management activities*

Examples of activities and information needed

When planning and implementing activities, IOM personnel and partners may have a combination of the purposes listed above. Consequently, you will need to combine the information detailed above. Here you will find two examples of activities and the list of information you will need. Modalities, sources and red lines for each type of information are explained under the Explaining the Decision-Tree section above.⁵⁰

a) Protection Analysis

In order to ensure that the team's protection analysis considers persons with diverse SOGIESC, the following information is necessary:

- Needs and barriers that persons with diverse SOGIESC face in accessing basic goods, services

46 Only use FGDs after a joint risk assessment with diverse SOGIESC CSOs or Individuals. FGDs may create additional risks for persons with diverse SOGIESC and you may have to avoid FGDs. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics. Organise separate FDGs if necessary.

47 Use "snowball sampling" (see definition in Annex) to interview persons with diverse SOGIESC limiting exposure to harm. Ensure participation of all groups of individuals, those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

48 Consult CSOs working with all groups of individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

49 See: Learning resources for IOM personnel and partners

50 See above Explaining the Decision-Tree

and program activities;

- Consequences of the crisis on persons with diverse SOGIESC:

- o Threats: Including factors and actors that threaten persons with diverse SOGIESC, including threatening their safety and wellbeing, access to rights, security, inclusion (social, economic, civic), psychological well-being, access to basic goods and services, visibility and invisibility, access to legal processes and justice, family unity, and ability to move freely, especially in --relation to their documentation. Consider threats for specific sub-groups of persons with diverse SOGIESC (due to the crisis and/or pre-existing issues) e.g., transgender individuals, transgender men, transgender children, individuals of diverse sexual orientation, individuals with diverse sex characteristics,⁵¹ MSM⁵² sex workers. The threats may also be related to other characteristics of the individuals or fall at the intersection of those characteristics and their SOGIESC.
- o Capacities in the community, resources, resilience mechanisms, enablers, including networks and community organizations serving persons with diverse SOGIESC, and actors and factors that protect persons with diverse SOGIESC for example, norms and values, civil society, religious institutions and individuals, political bodies, services availability, access, quality and use, resources related to intersectionality with other characteristics.
- o Priority needs of persons with diverse SOGIESC in the context.

- How the impact of the crisis (risks, capacities & priorities) and access to basic goods, services and program activities by persons with diverse SOGIESC are evolving
- Humanitarian/development goods and services inclusiveness and barriers (programme monitoring and reporting)

b) Concrete implementation of sectoral response activities, in CCCM, Shelter and NFI, WASH, Education, Livelihoods, Healthcare, Food security, GBV, Child Protection, and other sectors.

In order to ensure that the teams plan and implement their sectoral response activities to be safe, accessible and inclusive of persons with diverse SOGIESC, the following information is necessary:

- Protection Analysis information (see above)
- Sector-specific solutions found by service providers to overcome access challenges, garnered through:

Secondary data (reports from local organizations, coordination fora – e.g., clusters, sectors, protection cluster), existing experience (in the operation), existing experience (reach out to HQ – PXD and LGBTQI+ focal point), resources suggested in Annex C-List of Resources.

⁵¹ Remember that forced and coercive medical interventions are considered a violation of the rights of intersex people by the UN: Joint Statement on human rights of LGBTI people, specifically of Intersex people, by UN and regional human rights mechanisms in 2016. "In countries around the world, intersex infants, children and adolescents are subjected to medically unnecessary surgeries, hormonal treatments and other procedures in an attempt to forcibly change their appearance to be in line with societal expectations about female and male bodies. When, as is frequently the case, these procedures are performed without the full, free and informed consent of the person concerned, they amount to violations of fundamental human rights. Parents of children with intersex traits often face pressure to agree to such surgeries or treatments on their children. They are rarely informed about alternatives or about the potential negative consequences of the procedures, which are routinely performed despite a lack of medical indication, necessity or urgency. The rationale for these is frequently based on social prejudice, stigma associated with intersex bodies and administrative requirements to assign sex at the moment of birth registration. Profound negative impacts of these often irreversible procedures have been reported, including permanent infertility, incontinence, loss of sexual sensation, causing life-long pain and severe psychological suffering, including depression and shame linked to attempts to hide and erase intersex traits. In many cases intersex people do not even have access to their own medical records or original birth certificates. While awareness of the existence and rights of intersex people is slowly growing thanks to the work of intersex human rights defenders, only a handful of countries have taken concrete measures to uphold their rights and protect them from abuses. States must, as a matter of urgency, prohibit medically unnecessary surgery and procedures on intersex children. They must uphold the autonomy of intersex adults and children and their rights to health, to physical and mental integrity, to live free from violence and harmful practices and to be free from torture and ill-treatment. Intersex children and their parents should be provided with support and counselling, including from peers. Intersex children and adults should be the only ones who decide whether they wish to modify the appearance of their own bodies – in the case of children, when they are old or mature enough to make an informed decision for themselves. They should have access to support as well as to medical services that respond to their specific health needs and that are based on non-discrimination, informed consent and respect for their fundamental rights. In this connection, it is critical to strengthen the integration of these human rights principles in standards and protocols issued by regulatory and professional bodies." <https://www.ohchr.org/en/2016/10/intersex-awareness-day-wednesday-26-october?LangID=E&NewsID=20739> and "Human rights abuses against intersex people include, but are not limited to: infanticide, forced and coercive medical interventions, [...]" <https://www.ohchr.org/en/sexual-orientation-and-gender-identity/intersex-people>

⁵² Men who have sex with Men: A term used to refer broadly to people assigned the sex of male who engage in sexual activity with others assigned the sex of male, regardless of how they personally identify. This category includes cisgender men who have sex with transgender women or with nonbinary people assigned the sex of male, and vice versa. It does not include transgender men who have sex with cisgender men or transgender women.

- o **Primary data collection** – Expert interviews with service providers, sector-specific solutions proposed by organizations of persons with diverse SOGIESC or individuals with diverse SOGIESC.⁵³
- Existing up-to-date referral pathways from

protection colleagues and protection cluster/sectoral working group.

When planning and implementing sectoral responses, follow the same instructions in the section below: What to do when planning and implementing programmes -including case management activities

⁵³ Consult CSOs working with all groups and individuals with diverse SOGIESC, including those with diverse sexual orientation, those with diverse gender identities, and those with diverse sex characteristics.

WHAT TO DO WHEN PLANNING AND IMPLEMENTING PROGRAMMES -INCLUDING CASE MANAGEMENT ACTIVITIES

- **Prepare in advance for unprompted disclosures.** Response-specific standard operating procedures (SOPs) must be developed to explain how to respond to and ensure follow up on cases that have disclosed diverse SOGIESC when needed. Support on how to develop such SOPs can be drawn from the institutional IOM SOGIESC training package or by contacting the IOM LGBTIQ+ Focal Point and PIM Field Support Network in HQ (PIM-Support@iom.int)
- **Ensure that referral pathways are up-to-date** and include services tailored to specific needs of all groups within the “diverse SOGIESC” definition (e.g., health needs of intersex persons, transgender persons or MSM⁵⁴).
- **Ensure that all personnel and partners** – including case workers and managers as well as security, admin and logistics personnel – are trained on expected behaviours, contractual obligations under the Code of Conduct,
- **Ensure that case workers and managers** are familiar with the relevant SOPs and referral pathways for persons with diverse SOGIESC.
- **Never ask individuals about their sexual orientation, gender identity or sex characteristics**, including during case management assessments; ask instead about the needs of individuals and any specific measure that should be taken (for example when providing them shelter).
- **Ensure personnel are clear on what an unprompted, voluntary disclosure is**, understand the difference between unprompted disclosures and actively collecting information (e.g., asking people about their SOGIESC) and how to follow up appropriately on a disclosure and how to keep the information confidential.
- **Create and promote a safe space** in which individuals coming to IOM premises feel safe and comfortable being who they are and openly sharing their concerns with us. This will help ensure that anyone who needs support on the basis of having a diverse SOGIESC may seek it out from us. Guidance on creating safe spaces can be found in the IOM institutional SOGIESC training package and E-Learning course.
- **Always ensure a supportive environment**, safe recording and management of information and confidentiality, when people disclose their diverse SOGIESC voluntarily and without being asked or prompted to do so. This could happen, for example, if their SOGIESC is linked to a safety risk and when it will have to be considered for identifying solutions. In no way should our response to or handling of a disclosure jeopardise the safety and well-being of the individual(s).
- **Ensure case management activities include a safe Information Management System for case management** that records and stores information appropriately to protect the information and safeguard the identity of the individuals disclosing and the case workers, as well as their families and communities. To manage such information safely when disclosed, plan and implementing safe data storage, safe data sharing and destruction of individual records⁵⁵ when they are no longer useful for the defined purpose of

⁵⁴ Men who have sex with men: A term used to refer broadly to people assigned the sex of male who engage in sexual activity with others assigned the sex of male, regardless of how they personally identify. This category includes cisgender men who have sex with transgender women or with nonbinary people assigned the sex of male, and vice versa. It does not include transgender men who have sex with cisgender men or transgender women.

⁵⁵ Secure destruction of individual records when no longer needed for the original purpose is an integral part of data protection, as indicated in the Principles for Data Responsibility in Humanitarian Action in the *IASC Operational Guidance Data Responsibility in Humanitarian Action* and in Principle 9: Retention of Personal Data in the *IOM Data Protection Manual*. The number of cases including a client with diverse SOGIESC may still be retained and used for other purposes (e.g., reporting, adjusting programmes) as long as the identification of individuals is not possible, even when cross analysing the data with other datasets. For example, reporting the number of beneficiaries who voluntarily and safely disclosed their SOGIESC in a country in one year may be safe as long as it is not connected to specific locations, case manager, sub-national office or dates. Remember that the identification of individuals becomes easier with each additional piece of information reported. For support, contact PXD HQ and Protection Information Management Advisor in HQ.

service provision.

- **Ensure that case workers and managers safely use the system** and keep the information confidential.
- **Plan and train personnel and partners on how to implement tailored assistance solutions** when an individual's gender and/or sex does not correspond to their personal document or records.
- Ensure that colleagues implementing cross-cutting activities have information to **respond operationally** to the needs of individuals with diverse SOGIESC in crisis situations, in areas such as participation and outreach, on other issues of safety and security, in the context of information dissemination and information or orientation sessions, in relation to complaint and feedback mechanisms, and in relation to referral pathways. **Find context-specific solutions** with the support of organizations working with persons with diverse SOGIESC.
- **When analysing and reporting**, use ONLY anonymised information aggregated to the level of the country, without any other attribute, e.g., no location, no service provider, case workers, no area, no date. This reduces the likelihood of identification of individuals or locations. Clarify that the number provided is not prevalence of persons with diverse SOGIESC among beneficiaries/clients, but only a record of the voluntary disclosures received during some activities. Such numbers are a statistical underestimation of people with diverse SOGIESC and miscommunicating them or misunderstanding them as indicative of the number of beneficiaries/clients with diverse SOGIESC will show a distorted picture that will harm advocacy and programming efforts by misrepresenting the level of need and, consequently, could harm persons with diverse SOGIESC.
- You can adjust and use the following phrasing, when reporting on your numbers of clients: *“During the year, XXX number of beneficiaries have come forward disclosing their diverse*

SOGIESC (sexual orientation, gender identity, gender expression and sex characteristics) in the context of case management/this programme. IOM personnel does not actively solicit information about individuals' SOGIESC to respect the right of the individuals to privacy and in line with the Data Responsibility ethical principles of Do No Harm, Defined Purpose, and Necessity and Proportionality. IOM personnel does not prompt disclosures; however, they record and manage such information safely when it is received. The reported information is therefore not a reflection of the number of beneficiaries with diverse SOGIESC nor of persons with diverse SOGIESC in the community.”

- Always **conduct a risk analysis**, considering potential harmful consequences, including legal consequences, before reporting on persons with diverse SOGIESC, including a do no harm analysis on each piece of information reported.
- The SOGIESC of individuals is individual-level data: **IOM Data Protection Policy considers it as “SECRET DATA” (Personally Identifiable Information)**. Breaches to these types of secret data will likely expose individuals and their families to harassment, discrimination, exclusion from basic goods and services and, in many cases, to violence.
- **Case management forms** (including assessment forms in MiMOSA and any other case management systems) should have appropriate categories to record the information that is necessary to provide support to clients with diverse SOGIESC (follow the IOM Guidelines on Gender Inclusive Communication⁵⁶ and below, to design the options, adapting them to the fact that individuals are not asked about their SOGIESC, which is recorded only if disclosed without prompting:

56 <https://www.iom.int/resources/iom-gender-inclusive-communication-guidance>

- o Sex (If in question form: What is the sex marker on your official document?)

F – Female;

M – Male;

A - Another designation (O, T, X);

P - Prefer not to disclose⁵⁷

- o Gender Identity (**Do not ask, only record if voluntarily disclosed**)- *record exactly as the individual answers, choosing among the following options:* **W - Woman** (note this term is inclusive of both cisgender and trans/transgender women);

M - Man (note this term is inclusive of both cisgender and trans/transgender men);

NG - No gender

NB - Non-binary

T - Trans/transgender

TM - Trans/transgender man

TW - Trans/transgender woman

ID - My gender is: _____ [with write-in]

- o Sexual Orientation (**Do not ask, only record if voluntarily disclosed**):

A - Asexual

B – Bisexual

G - Gay

H - Heterosexual (Straight)

L - Lesbian

P - Pansexual

Q - Queer

ID - Sexual orientation is: _____ [with write-in]

P - Prefer not to disclose

⁵⁷ Responses will be recorded as they were provided. For modalities to ask about sex, see the “DTM Guidance on Data collection on Sex and Age Disaggregated Data,” available at: <https://dtm.iom.int/dtm-partners-toolkit/population-data>

RISKS LINKED TO DATA COLLECTION AND MANAGEMENT FOR INDIVIDUALS WITH DIVERSE SOGIESC AND ALTERNATIVES TO SAFELY OBTAIN USEFUL DATA

Our response must be “people-centred and inclusive,” identifying and prioritizing the rights, wishes and safety of the individuals we assist, treating them with dignity and respect, and establishing a supportive,⁵⁸ safe and respectful environment. This must be done while avoiding causing harm. A thorough risk assessment and analysis are necessary, both of the context in which we operate and of the activities we wish to conduct. These must balance the support we can facilitate for individuals with diverse SOGIESC with the possible risks linked to our intervention, including our data collection, storage, sharing and analysis.

As stated in the International Migration Law Information Note on *International Standards on the Protection of People with Diverse Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics in the Context of Migration*: “Where data is collected relating to people with diverse SOGIESC, there are several protection risks which need to be considered with respect to the actual collection and management of sensitive information. Firstly, States and other stakeholders, including assisting organizations such as IOM must adopt safeguards surrounding the collection, use and storage of data related to diverse SOGIESC and measures adopted to mitigate the associated risks. States and other stakeholders must also always respect the overriding principle to “Do No Harm” in every action conducive to human rights implementation. Any decision to collect data must be based on an assessment of the risks, which includes the participation of the affected communities, peoples or populations. Moreover, any collection, management and use of data must respect the right to privacy and the principle of confidentiality.”⁵⁹

Alternatives illustrated below and in the Decision Tree should be used to achieve the purpose defined for the data without exposing people to harm.

Information on individuals’ SOGIESC may be necessary

in relation to some types of case management, in those cases where diverse SOGIESC is the reason for a specific response modality to provide protection and assistance. Also in these cases, **we should not ask a person to identify their SOGIESC, nor should we prompt such disclosures in our questioning.** However, as unsolicited disclosures may happen, such interviews should always be **conducted confidentially**, in a **safe space** and **using safe modalities**. In addition, we must manage such information safely when disclosed, including planning and implementing safe data storage, safe data sharing and destruction of individual records⁶⁰ when they are no longer useful for the defined purpose of service provision.

The reasons for such measures are multiple and include existing social, cultural and legal frameworks in the places we work, as well as to the very limited protection that many communities enjoy due to crisis, conflict, disasters, poverty or weak rule of law.

Collecting and managing data for persons with diverse SOGIESC, even when this collection is done with the purpose of advocating for their rights or to provide assistance and protection, involves risks. The following is a non-exhaustive list of such risks:

- **Risks for persons with diverse SOGIESC:**
 - Visibility may bring more scrutiny by the community (host community or migrants/ IDPs themselves) which may bring physical, psychological, legal and others risks.
 - Data leakages may result in security concerns, discrimination, violence, or sexual exploitation and abuse. In countries with laws and cultural norms against people with diverse SOGIESC, data leakages can lead to serious protection risks. Even when the data has been anonymised, it is often possible to triangulate with other

58 IASC, Operational Guidance on Data Responsibility in Humanitarian Action, 2023.

59 <https://www.iom.int/sites/g/files/tmzbd486/files/documents/InfoNote-International-Standards-Protection-of-People-with-Diverse-SOGIESC.pdf>

60 Secure destruction of individual records when no longer needed for the original purpose is an integral part of data protection, as indicated in the Principles for Data Responsibility in Humanitarian Action in the IASC Operational Guidance Data Responsibility in Humanitarian Action and in Principle 9: Retention of Personal Data in the IOM data Protection Manual. The number of cases including a client with diverse SOGIESC may still be retained and used for other purposes (e.g., reporting, adjusting programmes) as long as the identification of individuals is not possible, even when cross analysing the data with other datasets. For example, reporting the number of beneficiaries who voluntarily and safely disclosed their SOGIESC in a country in one year may be safe as long as it is not connected to specific locations, case manager, sub-national office or dates. Remember that the identification of individuals becomes easier with each additional piece of information reported.

information and locate the person concerned, who may then face legal problems or physical violence.

- o Communicating the number of voluntary disclosures recorded in a case management system with the purpose of using it as prevalence of persons with diverse SOGIESC in our programmes would mean a significant underestimation. This would create harm to advocacy for future budget to cover specific tailored activities or deliverance modality and would reduce the potential for an inclusive response, ultimately harming persons with diverse SOGIESC.

- **Risks for enumerators/data collectors:**

- o Asking questions around SOGIESC may lead to legal consequences for enumerators, and, in some contexts, to physical violence.
- o Enumerators and their families may even become targets of violence and discrimination in their own communities.

- **Risks for the organizations:**

- o In some contexts, the perceived sensitivity of the topic may lead to conflicts with government authorities or non-government actors, and even legal consequences and expulsion from the country.
- o Misrepresentation of number of unsolicited disclosures as some kind of indication of prevalence of persons with diverse SOGIESC in the community or among the beneficiaries is likely to lead to less funding for inclusive responses.

It is therefore important to always conduct a risk assessment, including a Do No Harm analysis, before conducting any type of data collection (see The process: How to safely collect (only) the information we need for inclusion of persons with diverse SOGIESC). In some cases, it will be necessary to review or even refrain from collecting specific data when added risks may outweigh the resulting benefits.). In some cases, it will be necessary to review or even refrain from collecting specific data when added risks may outweigh the resulting benefits.

Finding alternatives: getting data we need without exposing people to additional risks

As mentioned above, collecting information to inform a response that includes persons with diverse SOGIESC is particularly challenging, as additional risks come from identification, increased visibility, involuntary breaches of confidentiality and data leakages, due to limited protection capacities of duty bearers and the possibility of increased discrimination, ostracization, violence, exploitation and abuse.

However, we cannot plan an inclusive response without an analysis of the situation that specific communities face in the context where we work. If aid workers, data and information management experts, sectoral and protection colleagues do not know what constitutes a danger for some people in the specific context, they cannot anticipate it and put safeguards in place in their response.

For example, carrying out a situation analysis that anticipates specific risks faced by transgender women in need of shelter during an emergency evacuation might enable shelter and CCCM colleagues to plan for solutions that anticipate and reduce potential risk of physical and sexual violence. If the programme does not anticipate such risks, field personnel would likely be unprepared when facing such situations. Personnel may decide to “follow normal procedure” and decide based on the sex identified in the ID document. This would mean accommodating transgender women with single men, resulting in harassment, discrimination and limitations when accessing basic goods and services, and in some cases, physical and sexual violence that could have been avoided through informed planning.

This example shows how data and information, and their analysis, are very important for our work. The difficulty lies in identifying WHAT data and information we really need and find safe ways to collect only those data and information. We need to keep the ethical integrity to move away from buzz words and deceptive data solutions that would lead us to collect data we do not need for our response while doing more harm.

Do not collect data that increases risk, may do harm and is likely inaccurate

It is difficult to resist the temptation to collect such data, as we often are animated by good intentions and the important objective to accelerate recognition of equality, rights and dignity of persons with diverse gender identity, sexual orientation and sex characteristics. This leads to specific requests to disaggregate the population by gender identity or collect number of persons with diverse SOGIESC, individual-level data on people’ sexual orientation, gender identity or sex characteristics. If you are requested to engage in

such data collection activities, seek the help of IOM SOGIESC expert such as the LGBTIQ+ Focal Point or PIM Field Support Network in HQ (PIM-Support@iom.int) to explain, including to donors, why IOM does not ask for persons' SOGIESC and what alternative and more useful data we can provide.

In Case Management situations and for other types of unprompted disclosures, while we will not ask about individuals' SOGIESC, we must always ensure a safe environment to enable individuals to disclose such personal information if they need or want to. We must always have appropriate tools and standard operating procedures for safe data storing and sharing for the provision of tailored assistance and protection.⁶¹

DTM Guidance on Data Collection on Sex and Age Disaggregated Data

*Note that DTM has clear guidance on **collecting data only on sex, not on gender/gender identity**. This aims to provide the data needed for response without increasing risks for the interviewed persons, interviewees and the organization. This policy considers the nature and contexts of DTM operations, the risk to do harm, and the inaccuracy of results and potential harm done by reporting these data as prevalence, while providing information to actors to design inclusive responses.*⁶²

The good news is that we do not need data on prevalence to enhance the inclusiveness of our response.

Our responsibility as aid workers is to always plan our response and deliver goods and services pro-actively and in a way that is safe and inclusive of persons of all genders: Our response will consider risks and specificities faced by individuals with diverse SOGIESC and their families when accessing assistance and protection. To achieve effective and inclusive programming, **we will use information on specific needs, priorities, risks, resources and barriers** faced by individuals with diverse SOGIESC in the context where we work.

Why we do not need to know “HOW MANY” to design an inclusive response.

We will not use the number of persons with diverse SOGIESC to design an inclusive response.

Some colleagues who are sensitive to the importance of programming and responding to the needs of all

groups, may think that they should collect number of persons with diverse SOGIESC in the community or area where they work (also called prevalence data). This is often done to ensure a response that includes the needs of persons with diverse SOGIESC and other groups. However, this is a common misconception, and is likely to do harm to the people we serve, while trying to help

Remember always that:

- Knowing the number of persons with diverse SOGIESC does not help programming and implementing an inclusive response. Collect instead information about needs, risks, resources and obstacles to accessing services and goods, and to participation. This information will be much more useful to enable inclusive programming and safe implementation
- Trying to collect prevalence data (i.e., number or percentage of persons with diverse SOGIESC in a community, a site, a city, a country...) is very likely going to create additional harm for persons with diverse SOGIESC, for enumerators, their families, for the organization itself and sometimes even for the community at large, that will no longer receive support if access by the organization becomes limited as a consequence of this attempt. It may also result in an assumption that the portion of the population with diverse SOGIESC is much smaller than in reality, given many people with diverse SOGIESC are unlikely to disclose.

It is correct and appropriate to assume that in any community there are persons with diverse SOGIESC. Therefore, always plan your response pro-actively and deliver goods and services in a way that is safe and inclusive of persons of all people and that accounts for risks and specific needs of persons with diverse SOGIESC. Attempting to identify prevalence is not only likely to put beneficiaries and personnel at risk but will also result in gross underestimation that may do further harm to beneficiaries with diverse SOGIESC and to advocacy attempts by the organization and other actors.

⁶¹ See section above: What to do when planning and implementing programmes -including case management activities

⁶² <https://dtm.iom.int/dtm-partners-toolkit/population-data>

Data we need (and can use) to design an inclusive response

Let us consider, for example, the need for shelter during an emergency evacuation: we realize that knowing the number of persons with diverse SOGIESC in the population will not help make our response more inclusive. However, using our knowledge and colleagues' experience will enable us to do so:

We know from experience that in every community there will be a number of persons with diverse SOGIESC. We know from experience that the size of the population with diverse SOGIESC who has specific shelter needs will be limited in number. Our shelter and WASH response must foresee modalities to respond to the specific needs of some of them, for example, transgender individuals that cannot be accommodated with cis-gender persons who match the sex on their identification documents.

In other situations, communities of persons with diverse SOGIESC may be displaced together (e.g., *khawaja sara* in Pakistan or *hijra* in India). The information we need in this case is the specific needs and risks of the affected community and an estimation of the size of the community (not the exact number of people with their sex characteristics, gender identity and sexual orientation and never through identifying individuals with diverse SOGIESC). In this case, the response would have to consider a community with relatively homogeneous shelter needs going to the same displacement location, and this will likely lead to planning for different solutions.

The examples above highlight some of the data we genuinely need: who are the communities that compose the population we are trying to support? What is their relationship with other communities? What are the specific needs of each group? What are the specific risks, strengths, economic power and means of support, roles, power dynamics, resilience mechanisms, safety systems etc. in the context? How were these elements affected by the current crisis? Such qualitative information is much more useful (when safely obtained) than number of persons with diverse SOGIESC. **Data for Programme Monitoring**

Let us now look at another example, where the temptation to collect figures of individuals' SOGIESC

can be difficult to resist: monitoring that needs of persons with diverse SOGIESC are included in our programming.

While it is safe and, when possible, recommended to disaggregate the number of beneficiaries by age and sex (SADD is the commonly used acronym, Sex and Age Disaggregated Data), collecting number of beneficiaries with diverse gender identity and expression, sexual orientation and sex characteristics is extremely problematic and should never be done. This is because, What to do when planning and implementing programmes -including case management activities if we wanted to obtain the number of beneficiaries of our projects disaggregated by SOGIESC, we would have to collect that information by asking each one (or a probabilistic sample⁶³) of our beneficiaries about their SOGIESC. We would then record such information, analyse and share it. We must not do this, as risks are present in all these different phases, starting from data collection to storage, analysis and data sharing.

- Beneficiaries may face legal consequences or discrimination, exclusion and even violence if they are overheard or if such information comes to light through other means.
- Sometimes, even just the act of asking the questions can put people and the organization at risk. Some in the community and even some of our own staff and partners may wonder why the question is posed to that individual. Some of the beneficiaries may feel offended or even have a violent reaction to the question itself. This can create harm to the enumerators and the whole data collection activity may be jeopardised.
- In some countries, the authorities or de-facto authorities have considered such questions a way for the organization to push a specific agenda that is not in line with what the authorities want or accept, thus putting all activities of the organization to risk of being halted or hindered.
- Storing, analysing and sharing this information brings the same enhanced risks to the beneficiaries, the staff and the organization itself, especially as in most of the places where humanitarian and development actors work, safe storage and sharing has proven to be difficult with many episodes of data leakages due to technological, institutional and human errors occurring even to stakeholders that took all

63 A probabilistic sample is what enables us to extrapolate results of our survey and generalize them to the whole population (including those we did not interview). It is a carefully constructed sample that will need the work of a statistician and accurate implementation.

reasonable precautions.⁶⁴

This data would not be accurate: Accuracy of the data and lack of baseline are other concerns that contribute to the decision to avoid using such data for monitoring access to programmes. Beneficiaries are very aware of the risks they would face when disclosing such information in most context we work in, and therefore the likelihood of obtaining accurate data is very limited. Even when a person has a non-binary gender identity, for example, they may choose not to disclose that for safety concerns or because they prefer to keep such personal information confidential and are not ready to disclose it to a stranger. Moreover, we cannot know the scale of this inaccuracy.

The data does not help decision-making: There is a third set of reasons why we should not be trying to collect such data from our beneficiaries or persons of concern: we cannot use this data to monitor access, appropriateness and quality of our programmes. In order to use number of beneficiaries with diverse SOGIESC to monitor programmes, we would need to compare the number of persons we served to the number we aimed to serve. We would need to compare an inaccurate number of beneficiaries with diverse SOGIESC to an inaccurate number of persons with diverse SOGIESC in the affected population, without knowing the scale of this inaccuracy. Let us say, for example, that we identified 10 persons with non-binary gender identity amongst our beneficiaries: does that number indicate all the persons with diverse SOGIESC in the community? Or many of them? Or far too few?

In addition to being unethical, dangerous to collect, as well as inaccurate to an unknown level, the number of beneficiaries with diverse SOGIESC would not help us understand if and how we must change our programming to facilitate access and improve appropriateness and quality.

We cannot use this data to make decisions, and therefore we go against our core principles. We would be violating various Principles of the Rights-Based

Approach “respect, protect and promote the fulfilment of human rights, including [...] specific right to privacy⁶⁵,” Defined Purpose, Necessity and Proportionality (“have a clearly defined purpose” “should contribute to improved humanitarian outcomes” and “in line with the concept of data minimization, the management of data in humanitarian response should be relevant, limited and proportionate [...] to the specified purpose(s)” as well as to those of Fairness and Legitimacy (“Legitimate grounds for data management”). These are all core principles in the IASC Operational Guidance on Data Responsibility in Humanitarian Action, of which IOM co-led the development⁶⁶ and which it is bound to respect. The principles of Purpose Specification, Proportionality and Necessity are also included in the 2018 *Personal Data Protection And Privacy Principles* by the UN Privacy Policy Group, that also state: *The United Nations System Organizations should process personal data [...] on the basis of [...] the best interests of the data subject [...]*⁶⁷. Remember that the adherence to these principles would be called into question every time we try to collect data without a defined purpose and ask questions to people that go beyond improving their wellbeing, are not in line with data minimization or are not proportionate to the purpose.

Data we need (and can use) for response monitoring:

Let us now look at data we need and can use: What data is useful, safer and fit-for-purpose? Let us start with defining what our purpose is.

The purpose of programme monitoring data is to monitor that our response is facilitating access to goods and services by persons of all communities and identities, including those with diverse SOGIESC. We may also have the purpose of encouraging colleagues in the field to make their response more inclusive to persons with diverse SOGIESC. We may think that getting the number of persons with diverse SOGIESC is a good way of achieving these purposes, but we have just seen above that this is not the case.

More useful, in addition to be feasible and safer, for example, is to monitor the number of programmes (in any sectors and divisions) that include context-tailored

64 See for example the 2022 case when ICRC servers hosting personal data belonging to more than 515,000 people worldwide were hacked: <https://www.icrc.org/en/document/cyber-attack-icrc-what-we-know>.

65 “IOM holds data protection central to supporting our operations as it is paramount to the respect for human dignity and the right to privacy of individuals”, see: <https://www.iom.int/data-protection>.

66 https://reliefweb.int/report/world/iasc-operational-guidance-data-responsibility-humanitarian-action-february-2021?gclid=Cj0KCOiAqOucBhDrARIsAPCQL1Y1k3Zeiks9ZKgX3Fxruiw6h7ZTQjbWVdYIRCvT9B3GzSjhP6jOd6caAnRwEALw_wcB.

67 https://unsceb.org/sites/default/files/imported_files/UN-Principles-on-Personal-Data-Protection-Privacy-2018_0.pdf. Adopted by the UN High-Level Committee on Management (HLCM) at its 36th Meeting on 11 October 2018.

modalities to facilitate access to goods and services and overcome risks and challenges faced by persons with diverse SOGIESC.

We cannot only rely on reports from our own programmes and personnel for this type of information. The data should come also from persons with diverse SOGIESC themselves, for example through safely conducted focus group discussions and expert interviews with persons with diverse SOGIESC and/or with organizations that work with them.

In addition, we can also monitor the number of staff, personnel and partners being trained on working with persons with diverse SOGIESC ([IOM SOGIESC and Migration Training Package](#)), and the effectiveness of the training.

These can constitute good indicators to understand where to plan better, invest more on capacity building

and sensitization of field workers and managers, so that more of our programmes are designed to be inclusive of persons with diverse SOGIESC and that access to goods and services is safer.

Data we need (and can use) for specific cases and how to collect it

When unsure of what data you need to inform your response and advocacy in your specific context, please check the Decision-Tree⁶⁸ above and its detailed explanation: *Decision-Making Tree on Obtaining Data for Persons with Diverse SOGIESC: What data we need and how to collect it.*

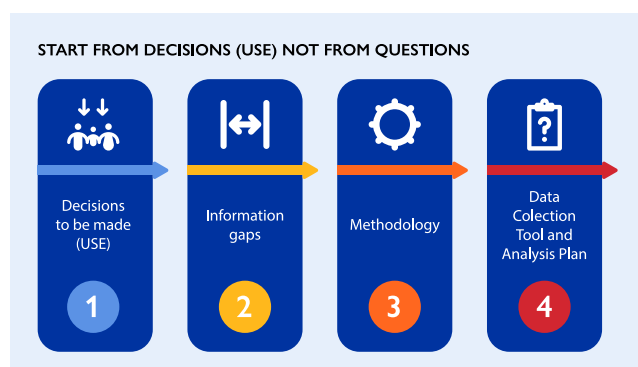
For situations not included in the section above, or for additional support and questions, contact PIM Field Support Network when you start planning, using this address: PIM-Support@iom.int

⁶⁸ See: <https://dtm.iom.int/dtm-partners-toolkit/sogiesc>

THE PROCESS: HOW TO SAFELY COLLECT (ONLY) THE INFORMATION WE NEED

I. Start with the purpose

Safely collecting the data necessary to build an inclusive response requires that the teams use the standard process based on best practices and common to most humanitarian and development actors. The main steps are illustrated in the visual below. Always consult with international and local experts on SOGIESC and local CSOs working with persons with diverse SOGIESC. Ask PIM Field Support Network for help when you start planning, using this address: PIM-Support@iom.int



Any team that is considering data collection and analysis must start from **identifying the intended use of the data they want to collect**. This must be done in writing, by the team that will use the results for their planning, and purpose must be clearly defined and detailed⁶⁹. The purpose is, in other words, “the specific decision we need to make” when programming or implementing response activities. This means that, for example, that it is not sufficient to say that the team needs data “for programming purposes.” A clearly defined and detailed enough purpose is, for example, “To adjust distribution modalities to the specific risks encountered by persons with diverse SOGIESC.” this will enable teams to continue with the process and obtain useful and usable data.

Do not collect data you do not need or do not know how to use. Starting with the identification of the specific purposes for each data we collect responds to the Inter-Agency Principles of Protection Information Management and the IASC Operational Guidance

on Data Responsibility in Humanitarian Action.⁷⁰ IASG Guidance explains, under “Defined Purpose, Necessity and Proportionality,” that “Humanitarian data management and its related activities should have a clearly defined purpose. The design of processes and systems for data management should contribute to improved humanitarian outcomes, be consistent with relevant mandates and relevant rights and freedoms, and carefully balance those where needed. In line with the concept of data minimization, the management of data in humanitarian response should be **relevant, limited and proportionate** – in terms of required investment as well as identified risk – to the specified purpose(s).”

Once the team identifies the specific decisions, it will be easier to **identify what information is needed to make those decisions**.

Use existing information and data on risks, needs, services, coping mechanisms and resources for persons with diverse SOGIESC in the context, already collected by other institutions or organizations. Some sources of secondary data are in *Resources for Secondary Data Analysis*. Evaluate the usefulness, reliability and timeframe of the data and whether or not more data are necessary. Use *Annex B: What we already know- Examples for an inclusive response and to reduce data-related risks* as a checklist; it is a list of commonly observed risks and obstacles faced by persons with diverse SOGIESC during a crisis. These challenges are too often worsened by organizations’ non-inclusive programming.

When evaluating the secondary data and identifying their information gaps, the team will consider also that some of the existing data will have to be complemented, as things may have changed after the crisis (e.g., access to networks), while others may have stayed the same (e.g., cultural beliefs, legislative framework). Only if the necessary information is not available among the **existing secondary data**,⁷¹ will the team plan for primary data collection to **fill their information gaps**.

⁶⁹ You can use the template “Mapping_Decisions and information needs.xlsx” in <https://dtm.iom.int/dtm-partners-toolkit/information-needs-and-data-users> and adjust it to your decisions and information needs

⁷⁰ <http://pim.guide/guidance-and-products/product/principles-protection-information-management-may-2015/>, <https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance-data-responsibility-humanitarian-action>.

⁷¹ Secondary data is data that has been collected, collated and analysed by other agencies, institution or bodies.

The team will then **identify the appropriate and feasible methodology and sources for data collection**: This helps you get reliable and usable data and reduce the potential harm caused by misinformation. Use the *Decision-Making Tree on Obtaining Data for Persons with Diverse SOGIESC: What data we need and how to collect it.*⁷² to identify what data you REALLY need for response and how you can collect it.

The next step is to **jointly design data collection tools** (e.g., questionnaires). This will be done jointly, by data and assessment experts work with subject matter experts⁷³, experts on Protection as well as from relevant sectors (e.g., Shelter, Food Security...), and with organizations serving persons with diverse SOGIESC. PXD (Protection) HQ colleagues can help you on this, providing expertise that may be missing in your team, as well as specific expertise on data for persons with diverse SOGIESC.⁷⁴ Always include context experts and ask them to help you obtain and analyse information in a way that makes sense and that it is safe in the context.

The Data/Assessment experts prepare a Data Analysis Plan (DAP)⁷⁵ and share it with data users (decision makers and subject matter experts). They will need to verify that the expected results are what they require. Agreeing on a data plan will also ensure that each datapoint is clearly linked with its purpose, so data users will know how to use results when they are collected. This is especially important as personnel turnover is quite fast in a response.

II. Conduct a Risk Assessment for the whole exercise and a “Do No Harm analysis” for each question and dataset

When planning a data collection and management exercise, and at each change of context or data collection modalities, the team will conduct a risk assessment, to identify and minimise the risks related to the modalities of the exercise. Then, when developing the questionnaires or other data collection tool, each question will be evaluated before being included in the questionnaire, through the **“Do No Harm analysis.”**⁷⁶

This means that protection, sectoral and data experts will work with context experts and organizations serving persons with diverse SOGIESC to identify the potential of **each question and resulting data to do harm** at each step of the Information Management Process: when collecting, **storing, analysing, and sharing data**. The analysis will consider harm to all those involved, as a minimum to **persons with diverse SOGIESC, their families, their communities, the organizations, and personnel**.

Why a Do No Harm analysis for each question and resulting dataset?

While a Risk Assessment of the data collection exercise will look at the risks of the overall exercise, access limitations and safety in conducting the data collection, each question and resulting datasets will also have to be analysed to ensure they do not do harm to all people involved. It is reasonable to want to understand the need for such time-consuming exercise, before embarking in it. These are a few examples of harm caused to the groups involved, at different points in the Information Management Process:

72 Available at : <https://dtm.iom.int/dtm-partners-toolkit/sogiesc>

73 As per Grand Bargain Outcomes, in: https://interagencystandingcommittee.org/system/files/ensuring_data_and_analysis_is_useful_and_usable_for_response_-_tools.pdf.

74 DTMSupport@iom.int. The Data/Assessment experts prepare a Data Analysis Plan

75 “An analysis plan helps you think through the data you will collect, what you will use it for, and how you will analyse it. Creating an analysis plan is an important way to ensure that you collect all the data you need and that you use all the data you collect. Analysis planning can be an invaluable investment of time. It can help you select the most appropriate research methods and statistical tools. It will ensure that the way you collect your data and structure your database will help you get reliable analytic results.” (CDC 2013, “Creating a Data Analysis Plan”). For a DAP template, see “Template_DTM Data Analysis Plan.xlsx” available at: <https://dtm.iom.int/dtm-partners-toolkit/analysis>

76 Use the DTM Do No Harm checklist (<https://dtm.iom.int/dtm-partners-toolkit/field-companion-sectoral-questions-location-assessment>) or similar tool for your Do No Harm analysis.

DO NO HARM CHECKLIST

WHO IS EXPOSED TO INCREASED RISK?	BECAUSE OF DATA COLLECTION	BECAUSE OF DATA STORAGE	BECAUSE OF DATA ANALYSIS	BECAUSE OF DATA AND REPORTS SHARING (NOW)	BECAUSE OF DATA AND REPORTS SHARING (FUTURE)
DATA COLLECTORS/ ENUMERATORS					
RESPONDENTS/ INTERVIEWEES					
FAMILIES OF RESPONDENTS					
COMMUNITIES					
ORGANIZATIONS					
PERSONNEL AND THEIR FAMILIES					
OTHERS					

Harm to persons with diverse SOGIESC when collecting data

The questions posed during an interview are overheard by others in the community. One of the questions is asking about the person's SOGIESC. Without hearing the person's answer, the fact that the question was asked to that person is sufficient for others to identify the interviewed persons as having a diverse SOGIESC. The person is discriminated against, harassed and beaten before being forced out of their shelter, which someone else comes to occupy.

Harm to interviewers (and to the organization) when collecting data

One of the questions in the questionnaire is asking a Key Informant in a village about specific needs of individuals with diverse SOGIESC and obstacles they face to safely accessing basic goods and services. The Key Informant is offended and becomes angry at the enumerator for what he considers inappropriate questions and even a personal insult. The enumerator fears for his safety and is no longer welcome in that village. Assessments in that village cannot be conducted any longer by that organization.

Harm to persons with diverse SOGIESC when storing data

During a case management assessment, a person shares their diverse SOGIESC. The information is stored in a non-secure electronic record (no password, and the record accessible to people outside the case worker and their manager). The electronic record is accessed by someone who knows the person's family and tells them. Family members kill the person, considering their diverse SOGIESC something that can expose the family to shame and harm.

Note that data leaks can happen by accident easily (the computer screen is left on and open on the case details during a coffee break, the paper file is misplaced/left on the desk or on the copy machine, two case workers are discussing a case and they are overheard by a colleague...). However, more often than before, we are seeing purposeful data hacking,⁷⁷ that seize large datasets of personally identifiable data of persons in vulnerable situations. We also continue to witness break-ins, emergency evacuations and theft, that leave records behind and in the hands of third parties, who may use the stolen data to blackmail, harass and victimise clients and their families.

Harm to organization personnel when sharing data

In some cases, even sharing non-personal information can be causing additional harm: in a country, an organization

⁷⁷ See for example the 2022 case when ICRC servers hosting personal data belonging to more than 515,000 people worldwide were hacked: <https://www.icrc.org/en/document/cyber-attack-icrc-what-we-know>

has a HIV program for MSM⁷⁸ and sex workers. The staff who works on it receives continuous threats and must keep the locations of the clinics anonymous, frequently moving them to prevent attacks from community members. It is an example of why we should always conduct a do no harm analysis when planning to share information, even when planning to share the information on the location of service providers.

Harm to persons with diverse SOGIESC when analysing and reporting data

Reporting numbers of beneficiaries /clients with diverse SOGIESC can be harmful to the people themselves: reporting such information – as usual, very low numbers – at location level leads to the identification of some of the clients.

In addition, reporting number of identified persons with diverse SOGIESC may lead aid workers and donors to understand that persons with diverse SOGIESC are very few in the community: therefore, funding and programming to address their specific needs and ensure their safe access to services are not prioritised.

Harm to organizations programmes when reporting data

Reporting the presence of persons with diverse SOGIESC in a location or amongst clients/beneficiaries of a programme leads to authorities forcing the organization to close their programme and other activities in these locations. Authorities send law enforcement personnel to force out clients with diverse SOGIESC from a service provider centre.

Working together, the protection, sectoral and assessment teams will find alternatives to any question that can do harm and reassess the new questions again. They will only finalise the questionnaire when they agree that the questions and resulting data will not do harm to any of the people involved by collecting, storing, analysing, sharing data and analysis.

A highly effective way to ensure we understand what can do harm and how to prevent harm, is **to involve organizations serving persons with diverse SOGIESC in the analysis**. They can also be excellent sources of qualitative information about specific needs, new risks, barriers and resources. Therefore, it is recommended to safely establish relationships with such organizations, wherever possible. It is important to remember that persons with diverse SOGIESC are not just one homogeneous group with the same needs and barriers: the team should make sure to consult with all existing organizations serving different groups.⁷⁹

When performing analysis, information management and assessment experts should again join forces with subject-matter experts (sectoral experts, protection experts) and context/cultural experts⁸⁰ for interpreting the information and making sense of the data. As much as possible, it is recommended to carry out any analysis with persons with diverse SOGIESC and organizations serving them and identify possible modalities to overcome challenges and risks.

78 Men who have sex with Men: A term used to refer broadly to people assigned the sex of male who engage in sexual activity with others assigned the sex of male, regardless of how they personally identify. This category includes cisgender men who have sex with transgender women or with nonbinary people assigned the sex of male, and vice versa. It does not include transgender men who have sex with cisgender men or transgender women.

79 Note thought, that not all groups are always represented in such organizations. Also, some persons with diverse SOGIESC are resistant to engage with LGBTIQ+ rights organizations, particularly in some of the most repressive contexts. This may be due to fear of visibility, but also different cultural perceptions of SOGIESC, and situations of exploitation where sexual behaviour does not coincide with a person's felt orientation. E.g., many men who have sex with men do not identify as gay, for example because they are married, do not feel represented by Western 'gay' culture, or only engage in homosexual behaviour in specific circumstances. Some of them may be particularly vulnerable – in Greece, there was a huge issue with sexual exploitation of often underage male asylum seekers, many of whom would identify as "straight". Understanding the needs, perceptions and lived experiences of these persons to inform programming and advocacy may require finding other safe modalities in the specific context. Contact PIM Field Support Network in HQ for support and questions when you start planning (PIM-Support@iom.int)

80 For more on this, see the Grand Bargain EDAUUR Outcomes, available at: <https://interagencystandingcommittee.org/improve-joint-and-impartial-needs-assessments/workstream-5-tools-and-guidance-advancing-coordinated>

Key consideration to help you in the Do No Harm analysis and identify measure to minimise risks:

- **Laws or customary laws**, including domestic legal framework, international standards, local customs, and general practice, e.g., criminalization of particular sex acts, “cross-dressing” or impersonation.

Understand the legal frameworks related to individuals with diverse SOGIESC. As an example, sixty-two (62) nations worldwide consider homosexuality as illegal, with eight (8) of them considering it punishable by death.⁸¹ Prior to implementing any activities with and for individuals with diverse SOGIESC, it is important to evaluate whether and how our activities may lead to increased risks for the population and individuals we serve. Similar considerations shall also include customary laws and local culture – noting that the existence of laws does not necessarily reflect the level of openness, permissiveness or acceptance in a society, that the lack of such laws does not equate with that country being an open, permissive or safe place for people with diverse SOGIESC and that laws of general application may be disproportionately applied to people with diverse SOGIESC – in other words, that individual context and landscape (socio-cultural norms and how laws are enforced, routine actions by officials, histories of persecution and impunity, etc.) are as important as the laws that are in place.

Depending on the circumstances, giving visibility/exposure to individuals of diverse SOGIESC could increase risks of violence, abuse, exploitation, discrimination, denial of basic goods and services and of participation to community life, against them and their families. The same could apply to organization personnel who may face negative consequences when seen to be associated with such activities. Considerations on the local context must therefore inform the way we work (e.g., how we conduct data collection exercises, who do we ask, which data we collect, how much visibility we give in reporting, etc.), to ensure that we can assist all in the safest way possible.

- **Competency and Capacity:** Do interviewers have the **appropriate skills** necessary for the interviews? Are the interviews conducted by personnel with the appropriate understanding? For example, can this interview be done by enumerators, or only by protection experts who are familiar with sensitivities related to persons with diverse SOGIESC in the context?
- **Are personnel designing the data collection and are interviewers trained** on *working with persons with diverse SOGIESC* and on what constitute acceptable behaviours by personnel? This is important to ensure that the design of the data collection is appropriate to the subject matter and the context, and that those who will be approaching individuals are knowledgeable and comfortable and have respectful interactions with individuals they will be collecting data from.
- **Safe Response to incident disclosures:** Are there services to refer potential cases if disclosed to enumerators? Are interviewers aware of the **appropriate referral pathways** and on how to refer in case of disclosures? Use Training on “*Safely Responding to Incidents Disclosure during data and analysis activities.*”⁸²
- **Data protection:** Can the information management systems used in the response and the teams involved ensure **the highest standards of confidentiality by all personnel and partners involved?** We should always prioritize safe collection, storage and sharing of data, as outlined in IOM Data Protection Manual.⁸³ Data leakages can lead to violence, discrimination and abuse. Use safe information management systems, protect files with passwords and encryption, lock paper files and destroy electronic records and files when storage is no longer necessary, do not share data through email or through non-safe documents, do not discuss cases in places where you can be overheard.
- **Differences within the context:** Culture is not homogenous in any context, and the cultural mainstream may be distinct from the cultures of populations with diverse SOGIESC or the cultures of IOM offices or facilities: **cultural norms should never be a deterrent to assisting**

81 Homosexual activity by country | Equaldex <https://www.equaldex.com/issue/homosexuality> – accessed June 2023

82 <https://dtm.iom.int/dtm-partners-toolkit/trainings>.

83 <https://publications.iom.int/books/iom-data-protection-manual>.

vulnerable populations.⁸⁴ Thus, in all instances the utmost caution should be exercised, and the situation carefully examined in relation to safety, security, confidentiality, data protection, data use, and benefit and risk to the individual before requesting, collecting, analysing, reporting, sharing data related to persons with diverse SOGIESC.

- **Are we managing and/or sharing Personally Identifiable Information (PII⁸⁵)?** In line with IOM Data Protection Manual, we shall not share identifiable information of individuals at risk, unless it is necessary to provide assistance, and then only with their consent. When writing reports on our work we should always ensure that any information or data is anonymized in such a way as to never expose the individuals we assisted. At times, anonymizing data may not be enough, and it may still be possible to locate both the individuals and the actors that have collected it – therefore subjecting them to possible negative consequence. For example, we publish a report saying that in a specific location we assisted two individuals with diverse SOGIESC who faced barriers in accessing services as their national cards only reflected the sex they were given at birth. We do not provide their names, ages, sex, or physical appearance. Nevertheless, it may still be easy for them to be identified, given the information on the specific location and agency operating there. A best way to include this information is not to specify the location, nor the specific number of people assisted or dates, implementing agencies and case workers.

III. Before you start data collection

- **Train all personnel on how to work with persons of diverse SOGIESC:** Before collecting data and implementing programmes, train IOM personnel on how to work with persons with diverse SOGIESC and ensure they understand the concepts clearly, including the differences between sexual orientation, gender, gender identity, gender expression, sex, and sex characteristics.

IOM has created the course “SOGIESC and Migration

Training Package” which can be downloaded [from the IOM website](#) for in-person trainings. A short E-Learning course, available in English, Spanish, and French, can be accessed by IOM staff members in I-Learn, or by other personnel and external individuals through the open platform E-Campus. The courses will help participants know what to consider when designing and implementing an inclusive response.

- Make sure to train, sensitize, and supervise all personnel (including interpreters and cultural mediators) to **promote people-centred, respectful, and non-judgmental behaviours and practices to survivors of all ages, genders, and sexualities – to prioritize safety, dignity and respect of individuals of diverse SOGIESC.** Train using IOM mandatory Instruction IN15 Rev1 (2014) – 5.7 and 5.15, and on humanitarian principles (impartiality and non-discrimination), on IOM values and *rights-based* approach to assistance and protection.⁸⁶ Ensure personnel understand that working for IOM entails providing assistance and protection to all in need, without discrimination on the basis of race, gender and gender identity, age, religion, disability, or sexual orientation, or any other category or status.
- Always **ensure safe data management following unprompted disclosures.**
- **Consider intersectionality**, or “*the ways in which different aspects of a person’s identity can expose them to overlapping forms of discrimination and marginalisation.*”⁸⁷ Aspects of a person’s identity to consider in relation to intersectionality include, but are not limited to, sex, age, ethnicity, language, religion, colour, nationality, refugee or asylum seeker background, migration or visa status, disability, health/medical record, mental health, socioeconomic status, housing status, and geographic location. For example, being a migrant, and therefore a foreigner, or being an internally displaced person (IDP), and therefore coming from another area of the same country, may in itself

84 This is in line with IOM Mission: “[...] The Organization is guided by the principles enshrined in the Charter of the United Nations, including upholding human rights for all. Respect for the rights, dignity and well-being of migrants remains paramount.”

85 PII include any information that can lead to the identification of a case, or personnel, or office, also when analysed together with separate data sets and information. Always conduct a Risk Assessment/Do No Harm analysis when working with case management data, including when deciding on reporting aggregated data. You can use the DTM Do No Harm Checklist (<https://dtm.iom.int/dtm-partners-toolkit/field-companion-0>)

86 See, for example: RBA Manual <https://publications.iom.int/books/rights-based-approach-programming> but also the AVM Handbook: <https://publications.iom.int/books/iom-handbook-migrants-vulnerable-violence-exploitation-and-abuse>

87 <https://www.vic.gov.au/understanding-intersectionality>.

increase one's risks in a context of xenophobia or anti-migrant sentiments.⁸⁸ As another example, IDPs and migrants with diverse SOGIESC may also belong to different ethnic groups, which further exposes them to discrimination and abuse.

- **Do not ask about individuals' SOGIESC nor try to collect prevalence of persons with diverse SOGIESC or identify persons with diverse SOGIESC** among your clients/beneficiaries for safety, ethical, technical and practical reasons. If you are encouraged to do so in relation to program requirements, seek assistance from HQ Protection and LGBTQI+ Focal Point on explaining, including to donors, why we do not do so, and what alternatives, and more useful data, we can provide. If you want to know more about these reasons and find alternative data that work for your purposes, see *Risks linked to data collection and management for individuals with diverse SOGIESC and alternatives to safely obtain useful data*. This will help you design and implement an inclusive response based on evidence, as well as to monitor and report it, using safer modalities.
- Safety of the communities and individuals we serve **MUST** come before the objective of the data collection, analysis and reporting.
- Always plan with protection colleagues with specific expertise on Protection Information Management, and with those who are aware of the sensitivities related to diverse SOGIESC in the context, and with organizations working with persons with diverse SOGIESC.
- Contact PIM and LGBTQI+ Focal Point in HQ for support and questions when you start planning (PIM-Support@iom.int).

⁸⁸ See IOM Research: Mapping and research to strengthen protection and assistance measures for migrants with diverse sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC) – IOM 2023 (<https://publications.iom.int/books/mapping-and-research-strengthen-protection-and-assistance-measures-migrants-diverse-sogiesc>)

ANNEX A: DEFINITIONS

These are some definitions of terms used in this document.

Protection and SOGIESC-related terms

For more terminology on persons with diverse SOGIESC, consult the [IOM glossary of terms](#)⁸⁹

Persons with Diverse SOGIESC:⁹⁰ Umbrella term for all people whose sexual orientations, gender identities, gender expressions and/or sex characteristics place them outside culturally mainstream categories.

SOGIESC:⁹¹ Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics.

Sex or gender? Sex and gender are often conflated, including in reports, documents, technical systems and on surveys and forms. For example, when asking about gender, the options provided are often **“male” and “female,” which are not gender markers but are rather sex markers.** Thus, colleagues often gather data on sex and report it as gender. Additionally, people may use the terms sex and gender interchangeably within the same report, document, system or survey. (Note that DTM has clear guidance on **collecting data only on Sex, not on Gender identity**, in the “DTM Guidance on Data collection on Sex and Age Disaggregated Data”⁹²).

Sex⁹³ refers to bodily characteristics that are typically categorized at birth and recorded on official documents such as birth certificates, passports and ID cards as male, female or, in some countries, another designation such as O (*other*), T (*Third Gender*) or X. In some cases, an individual’s sex assigned at birth may be different than what is currently listed on their official documentation.

Gender⁹⁴: The socially constructed roles, behaviours, activities and attributes that a given society considers appropriate for individuals based on the sex they were assigned at birth.

Gender identity⁹⁵: The term refers to one’s personal sense of whether they are a man, woman, another gender, or no gender. One’s gender identity may or may not align with the sex they were assigned at birth or with the gender assigned to them by society.

Note that: **GENDER** is not synonymous with **GENDER IDENTITY**: avoid using the two terms interchangeably, so to reduce confusion.

Gender Expression⁹⁶: Individuals use a range of cues, such as names, pronouns, behaviour, clothing, voice, mannerisms and/or bodily characteristics, to interpret other individuals’ genders. Gender expression is not necessarily an accurate reflection of gender identity. People with diverse sexual orientation, gender identity or sex characteristics do not necessarily have a diverse gender expression. Likewise, people who do not have a diverse sexual orientation, gender identity or sex characteristics may have a diverse gender expression.

89 <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

90 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

91 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

92 Available at: <https://dtm.iom.int/dtm-partners-toolkit/population-data-0>

93 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

94 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>. It can be useful to also consider the definition of gender given by the Inter-Agency Standing Committee: “Gender is a social construct built through cultural, political and social practices that defines the roles of women, girls, men and boys, as well as the social definitions of what it means to be masculine and feminine. Gender roles are taught, learned and absorbed and vary between and even within cultures. Gender often defines the duties and responsibilities expected of women, girls, men and boys at any given time of their lives and sets some of the barriers they may face or opportunities and privileges they may enjoy throughout their lives. Gender, along with age, sexual orientation and gender identity, determines the power which women, girls, men and boys have and their ability to access and control resources.” IASC Gender Handbook in Humanitarian Action, <https://www.gihahandbook.org/> Part A, page 17.)

95 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

96 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

Sexual Orientation⁹⁷: Each person's enduring capacity for profound romantic, emotional and/or physical feelings for, or attraction to, other people. Encompasses hetero-, homo-, bi-, pan- and asexuality, as well as a wide range of other expressions of sexual orientation. This term is preferred over sexual preference, sexual behaviour, lifestyle and way of life when describing an individual's feelings for or attraction to other people.

Sex characteristics⁹⁸: Each person's physical features relating to sex, including chromosomes, gonads, sex hormones, genitals and secondary physical features emerging from puberty.

Protection risk –Operational Definition: *From an operational standpoint, a protection risk identified or monitored by Protection Clusters refers to:*

- *the intensity and damage or harm resulting from...*
- *...a human activity or a product of human activity...*
- *...affecting an individual or group of individuals.*⁹⁹

International migrant: *“Any person who is outside a State of which he or she is a citizen or national, or, in the case of a stateless person, his or her State of birth or habitual residence. The term includes migrants who intend to move permanently or temporarily, and those who move in a regular or documented manner as well as migrants in irregular situations.”*¹⁰⁰

IM and Assessments Terms.

This document uses the following terms in the meaning defined below. These definitions are important especially when reading the guidance on methods of data collection to use for each type of needed information. For more on data collection techniques, see <https://dtm.iom.int/dtm-partners-toolkit/data-collection-techniques>

Data: A collection of facts, such as numbers, measurements or observations.¹⁰¹

Qualitative Data: Data that provides description, experience and meaning, and that which can be observed but not measured (non-numerical information). It can be collected, for example, through open-ended or semi-structured individual interviews, focus groups, observations, narrative texts and reports.⁷

Quantitative Data: A type of information/data that can be measured.¹⁰²

Semi-structured Interviews: a key number of identical questions is asked to all respondents, but follow-up can vary.¹⁰³

Key Informant Interviews (KII): These interviews are conducted by enumerators who are not experts in the sector. They interview a limited number of key informants in the communities, using a set of standardised predetermined questions, in a structured questionnaire. Key informants are not sectoral experts; however, they have updated prior knowledge of the affected community. They answer questions providing information about the community, not about themselves or other individuals or households, and do not provide information about specific groups within the community. Key Informants interviews gather information on the consequences and effects of the crisis and on community needs and resources. Through this method, you cannot gather information on sensitive issues (Protection, Trafficking in Persons, GBV or Child Protection) and on priorities, barriers, needs and risk of specific population groups, for example of persons with diverse SOGIESC. Results of KII are often

97 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

98 IOM institutional glossary: <https://www.iom.int/resources/iom-sogiesc-glossary-terms>

99 Global Protection Cluster, PROTECTION RISKS EXPLANATORY NOTE, 2023

100 IOM Migration Glossary – IML

101 PIM terminology: http://pim.guide/wp-content/uploads/2018/04/Protection-Information-Management-Terminology_Revised-Edition-April-2018.pdf

102 PIM terminology: http://pim.guide/wp-content/uploads/2018/04/Protection-Information-Management-Terminology_Revised-Edition-April-2018.pdf

103 IOM Counter-Trafficking in Emergencies: Information Management Guide, 2020

described by IM experts, and represented in charts, maps and tables.

Interviews with Expert and/or Service Providers: Interviews with experts on the specific subject-matter and /or situation, and/or service providers, who respond based on their professional experience and describe the situation of their clients or the individuals they know about. These interviews are conducted by subject-matter experts (e.g., GBV experts) who ask questions to experts with knowledge of the situation and context. The interviews can therefore go in-depth on content, using semi-structured questionnaires. Such interviews can for example provide qualitative information on legal or cultural context and norms, obstacles, dynamics, causes of lack of goods and services, barriers, risks for specific groups, resources and coping mechanisms. They are useful for information that only persons with an in-depth knowledge of the issues can provide and can collect information about sensitive issues that cannot be gathered through other means.

Focus Group Discussions (FGD): Discussions with a homogeneous group, that presents specific characteristics functional to the research question and topic of discussion (e.g., only with women, only with teen-agers, only persons with diverse gender identity, only persons with diverse sex characteristics, only women with disabilities, only teachers...). The FGD are semi-structured interviews, facilitated by sectoral experts (e.g., GBV, Protection experts). These discussions provide qualitative information and are useful to identify perspectives of specific groups. They are not carried out by enumerators, but rather by protection, GBV, CP experts, who have an in-depth knowledge of the issues, facilitate the conversation, and interpret both answers and interaction dynamics in the group.

All questions asking about the experience of violence have the potential for re-traumatization, and should not be included in any interview, including when response services are available. Enumerators should be trained on how to refer, and what to do if individuals disclose an incident.¹⁰⁴

Group Interviews: Group Interviews with non-homogeneous groups from the community, conducted using a set of standardised predetermined questions, in a structured questionnaire. The group can be composed of, for example, a woman, a person with disability, the village leader and others, a sort of group of different non-specialised key informants, who provide information about the community, not about specific groups within the community. The individuals sit together and answers questions in the presence of the others. The enumerators record one final answer to each predefined question per group. This method cannot be used for questions on sensitive issues, for example related to persons with diverse SOGIESC, Protection, Trafficking, GBV or Child Protection, and cannot provide the perspective of specific groups (e.g., persons with diverse SOGIESC) even when representatives of these groups are interviewed. This is because only one answer is recorded per group and because each person is interviewed in the presence of others, and therefore likely to be limited in their ability to respond by interpersonal dynamics, cultural norms and fear of likely negative consequences. Results of such interviews are often described by IM experts, and represented in charts, maps and tables.

All questions asking about the experience of violence have the potential for re-traumatization, and should not be included in any interview, including when response services are available. Enumerators should be trained on how to refer, and what to do so if individuals disclose an incident¹⁰⁵.

Household-level Interviews (HH): These interviews are conducted by non-sectoral experts who interview the Head of the Household, or a member of the Household, using a set of standardised predetermined questions, in a structured questionnaire. Individuals answer providing information about the household. Results of such interviews are often described by IM experts, and represented in charts, maps and tables.

These interviews may be conducted in front of other household members and questions and answers are likely to be overheard. Therefore, the individual answering is likely to be limited in their ability to respond by interpersonal dynamics, cultural norms and fear of likely negative consequences and even violence.

This method, in fact, cannot and should not be used for questions on sensitive issues, for example related to

104 Training on “**Safely Managing Incidents Disclosures**” is available at: <https://dtm.iom.int/dtm-partners-toolkit/trainings>. It includes clear roles and responsibilities of coordinators, protection colleagues and enumerators on how to safely respond to incidents disclosures. Contact PIM in HQ for help: PIM-Support@iom.int

105 Training on “**Safely Managing Incidents Disclosures**” is available at: <https://dtm.iom.int/dtm-partners-toolkit/trainings>. It includes clear roles and responsibilities of coordinators, protection colleagues and enumerators on how to safely respond to incidents disclosures. Contact PIM in HQ for help: PIM-Support@iom.int

domestic violence, GBV, most child protection risks, and some protection concerns of specific family members. Also, this method cannot provide reliable information on the perspective of specific groups (e.g., persons with diverse SOGIESC). Even when a specific member of the household (e.g., woman, or a child, or a person with diverse SOGIESC) is asked to answer a specific question, results should not be considered reliable. In addition, asking questions on sensitive topics can in itself create harm to vulnerable individuals in the household, regardless of their answer. Separating a family member from the rest to ask them sensitive questions is also not effective in capturing a realistic answer and may even create harm for the interviewed person.

All questions asking about the experience of violence have the potential for re-traumatization, and should not be included in any interview, including when response services are available. Enumerators should be trained on how to refer, and what to do if individuals disclose an incident.¹⁰⁶

Individual Interviews: These interviews are conducted by non-sectoral experts, who interview individuals using a set of standardised predetermined questions, in a structured questionnaire. Individuals answer providing information about themselves and their experience, needs, priorities and resources. Results of such interviews are often described by IM experts, and represented in charts, maps and tables. Such data collection exercises can produce representative results or results that are not representative of the whole group, but rather only of the interviewed persons. This depends on the used sampling method.

Depending on the context, often such interviews are conducted in busy areas, where questions and answers are likely to be overheard, and therefore, questions on sensitive topics and any question that has the potential of creating harm to the interviewee and the interviewer should be avoided. All questions asking about the experience of violence have the potential for re-traumatization, and should not be included in any interview, including when response services are available. Enumerators should be trained on how to refer, and what to do if individuals disclose an incident.¹⁰⁷

Observation is a research method in which a researcher observes the behaviour of participants in a situation. Observation does not necessarily require an interaction with a respondent and can be qualitative or quantitative. The definitions below define the researcher's position in relation to the observed behaviour or participants, rather than on the nature of the information collected, which can be qualitative or quantitative. Observation can happen in different ways depending on the level of participation of the researcher and whether the observed population is aware of the presence of said researcher (Bryman, 2012, p. 430–467).¹⁰⁸

Probabilistic Surveys. Findings can be generalized. The sample is randomly selected, allowing statistical inferences about the whole group.¹⁰⁹

Non-probabilistic Surveys. Findings cannot be generalized. The sample is not randomly selected. Rather, selection is based on other criteria.¹¹⁰

106 Training on “**Safely Managing Incidents Disclosures**” is available at: <https://dtm.iom.int/dtm-partners-toolkit/trainings>. It includes clear roles and responsibilities of coordinators, protection colleagues and enumerators on how to safely respond to incidents disclosures. Contact PIM in HQ for help: PIM-Support@iom.int

107 Training on “**Safely Managing Incidents Disclosures**” is available at: <https://dtm.iom.int/dtm-partners-toolkit/trainings>. It includes clear roles and responsibilities of coordinators, protection colleagues and enumerators on how to safely respond to incidents disclosures. Contact PIM in HQ for help: PIM-Support@iom.int

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Types of Probabilistic sampling¹¹¹

SIMPLE RANDOM SAMPLING	the sampling frame includes all the population, and each member of the population has the same chance of being selected.
SYSTEMATIC SAMPLING	Like simple random sampling, respondents are selected but at regular intervals. For instance, families in a household survey, instead of being selected by randomly extracting the number of their house, might be selected at an interval of 10 houses after randomly selecting the first.
STRATIFIED SAMPLING	If a population presents mixed characteristics, it might be better to first divide it by these characteristics and then apply a simple random sampling to each group. For instance, instead of doing a simple random sampling on an entire IDP population in a district, a researcher might want to differentiate IDP communities in formal camps, IDP communities in informal settlements, etc.
CLUSTER SAMPLING	Cluster sampling consists in the creation of subgroups, with each subgroup having features similar to those of the population. Instead of sampling individuals from each subgroup, the researcher randomly uses entire subgroups. For instance, instead of sampling an entire province's population, a researcher will first identify villages, then randomly select villages.

What does “randomized” mean?¹¹² Randomized does not mean by chance, and randomization always requires knowing the total number of the reference population. In a simple randomized sample, all participants (out of the reference population) have the same probability of being selected, and that probability is known.

If there is a population of 100, each person has 1 out of 100 probabilities to be selected. If there is a population of unknown dimensions, the researcher cannot know the probability each person has of being selected.

The sample is supposed to be, in a way, a micro-version of the population of interest. Randomization is the systematic way of eliminating selection bias. A selection bias occurs where the sampled individuals differ from the population of interest in a systematic way. Probabilistic sampling strategies give the population parameter of interest (the population parameter is the true “answer” – the estimate that would be found if the researcher had access to the whole population, instead of a sample) a better chance of being accurately represented by the sample.

Types of Non-probabilistic sampling¹¹³

CONVENIENCE SAMPLING	A SAMPLE INCLUDES INDIVIDUALS THAT THE RESEARCHER CAN ACCESS EASILY – FOR INSTANCE, MIGRANTS AND REFUGEES CROSSING AT AN ACCESSIBLE FLOW-MONITORING POINT.
VOLUNTARY RESPONSE SAMPLING	It is still based on ease of access. The researcher does not identify the respondents. Rather, the respondents can volunteer. For instance, a researcher advertises in community centres that he/she is looking for candidates for a research. Or he/she publishes an online survey on social media to which anybody can reply.
SNOWBALL SAMPLING AND RESPONSE-DRIVEN SAMPLING	It is based on chain referral and particularly useful with hard-to-reach populations. One respondent identifies another respondent, that respondent identifies another one, and so on.
PURPOSIVE SAMPLING	The sampling is based on the judgement of the researcher, who wants to select a specific group functional to the research. For instance, a researcher might actively seek and include people with disability to focus on their specific experience.

¹¹¹ IOM Counter-Trafficking in Emergencies: Information Management Guide, 2020

¹¹² IOM Counter-Trafficking in Emergencies: Information Management Guide, 2020

¹¹³ IOM Counter-Trafficking in Emergencies: Information Management Guide, 2020

ANNEX B: WHAT WE ALREADY KNOW- EXAMPLES FOR AN INCLUSIVE RESPONSE AND TO REDUCE DATA-RELATED RISKS

During a crisis, persons and families with diverse SOGIESC face additional, unique and increased protection risks as well as the risk of exclusion from basic goods, services and humanitarian assistance. When a crisis occurs, people with diverse SOGIESC – who typically rely on established networks of support in the form of friends, safe physical spaces and inclusive community resources to function in their daily lives – may experience the collapse of their coping mechanisms and separation from the friends, spaces and resources they need. Subsequently, the services put in place by national and international actors will not necessarily fulfil those needs, and individuals may face increased scrutiny when trying to access mainstream assistance. We have to understand these risks, design inclusive services and ensure inclusive access to basic goods. Lack of this understanding hinders inclusive response, i.e., enhances and perpetuates the exclusion of people in need from basic goods, services and participation.

Visibility and concealment can both increase risk.

It is important to remember that often risk is accompanied by visibility, namely the more visible someone is, the more at risk they may be. In crises, individuals with diverse SOGIESC, including those who previously used invisibility as a coping mechanism,¹¹⁴ or as a means of staying safe from harm, may face increased scrutiny of their identity, documentation, body or family while seeking assistance. This is because the mechanisms with which authorities and aid organizations register and track assisted persons often require data from official identity documents or ask for self-reported sex and family information. Collecting data may also increase visibility and therefore increase risk.

Conversely, not being visible also has risks for people with diverse SOGIESC, as it is well-established that concealment can cause long-term psychological harm. Using invisibility as a coping mechanism during a crisis may keep individuals safe from harassment, violence and abuse, but means they do not necessarily get the support or care they urgently need. Not having the necessary data may however perpetuate the “invisibility” of persons with diverse SOGIESC, and therefore reduce their access to goods, services and participation, subsequently increasing risks. When considering what data to collect, we must keep in mind both issues and weigh them carefully. Before collecting additional data, we should make use of existing information, including the knowledge and experience that international and local experts on SOGIESC and LGBTIQ+ advocates have collected in many years of responding to the needs of the most vulnerable in the same and other contexts.

This section gives useful examples of how persons with diverse SOGIESC are exposed to additional and different risks in addition to those faced by other groups. The analysis of examples from combined experience will help us all reduce those known risks when we design and implement projects, so as to improve the inclusiveness of our response even before collecting new data.¹¹⁵

What do we know from field experience

In the context of a programmatic response, individuals with diverse SOGIESC are at heightened risk for discrimination, harassment and violence. They may also face compounded marginalization because of their migration or crisis-affected status and their status as persons with diverse SOGIESC. Their unmet needs will likely evolve over the months and years of the crisis. Specific contexts will present different risks; however, typically risk centres around three areas:

1. A lack of access to usual coping mechanisms, resulting in individuals going without support or having to seek support from mainstream sources that may be unsafe.

¹¹⁴ See also: “Mapping and research to strengthen protection and assistance measures for migrants with diverse sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC)” – IOM 2023 forthcoming publication.

¹¹⁵ Always remember to ensure that: 1) IOM personnel and partners who designs programmes, come in contact with persons affected by crisis and manage those programmes and activities are ALL TRAINED to understand the common additional risks faced in a crisis by persons with diverse SOGIESC and 2) programme design includes modalities for a safe response to needs of persons with diverse SOGIESC.

2. The categorization of identities by various actors for purposes such as registration, aid distribution or visa issuance, which can bring unwanted scrutiny to individuals, their bodies and their families and render visible or bring harm to individuals or families who do not fit into established categories. Public outing is an invasion of the right to privacy and presents risks for the people involved, as in many situations where IOM operates, public outing may threaten a person's life and safety as well as their mental health.
3. An insufficient response from supporting organizations, including a lack of appropriate tailored support as well as attitudes and behaviours that are discriminatory or even threatening. Programmes or infrastructure may also be designed and constructed without the needs of people of diverse SOGIESC in mind, because aid workers do not consider these groups when planning a response.¹¹⁶

Risk points include, but are not limited to:

- Borders, Immigration points and government offices – any location where there is interface with immigration or government officials who may scrutinize an individual's ID, body or family.
- Employment sectors – both informal and formal, where there is interface with employers who may review documentation or other aspects of an individual
- Health centres and counselling centres – where documentation, bodies or families may be scrutinized, or an individual may need to seek care related to their diverse SOGIESC.
- Our own offices and programs – particularly if they exclude people with diverse SOGIESC, or do not plan for their inclusion, and if staff are untrained.
- Information and registration points – Information and registration points for migrants, displaced persons and crisis-affected populations.
- Sanitation facilities (including toilets, bathrooms, washing facilities...) where lack of privacy and being forced to share private spaces with strangers increases the risk, as bodies and behaviours are under scrutiny by others, and lack of adherence to gender norms may be met with violence and abuse.
- Shelter and sites/transit centres – including regular housing, group shelters, temporary shelter in urban areas, transit facilities, camps, detention centres- where lack of privacy and being forced to share private spaces with strangers increases the risk, as IDs, bodies, families and behaviours are under close scrutiny by others, safety mechanisms are not prioritised and lack of adherence to gender norms may be met with violence and abuse.
- Distribution areas – including centralized aid distribution areas and aid queues where ID cards, family composition and adherence to gender norms may be scrutinized.
- Communities and families – that are unwelcoming or persecutory based on an individual's adherence with gender norms or lack thereof. In some cases, persons with diverse SOGIESC may be denied assistance from the community themselves under the assumption that they are “not meriting of aid.”¹¹⁷

The common thread is that **risks to persons with diverse SOGIESC increase drastically in situations in which someone's ID card, body, family or adherence to gender norms might be scrutinized by others, such as officials, personnel of organizations or community members.**

Inclusive programming will have to take this into account and plan for inclusive measure for goods and services response, as well as find ways to reduce risks when such services and goods are delivered by authorities or others. Our personnel will have to be trained to provide support and assistance IMPARTIALLY to ALL people in need without discrimination, and on HOW to ADJUST response to be inclusive also of persons with diverse SOGIESC.¹¹⁸

¹¹⁶ Training for personnel is available: See Learning resources for IOM personnel and partners

¹¹⁷ Cycles of Displacement, Understanding Exclusion, Discrimination and Violence Against LGBTQI People in Humanitarian Contexts, <https://www.rescue.org/uk/report/cycles-displacement-understanding-exclusion-discrimination-and-violence-against-lgbtqi>

¹¹⁸ See IOM standards of Conduct from 2014, <https://hrhandbook.iom.int/system/files/file=policies/IN015EN.pdf> 5.7 on core values, 5.15 on freedom from discrimination.

Needs, risks and barriers by sector

The following are a selection of risk and barriers faced by people with diverse SOGIESC in different sectors, based on field experience by IOM and other organizations.¹¹⁹

When finding solutions, make adjustments and take measures after consultations with protection colleagues and/or organizations already assisting persons with diverse SOGIESC and ensure that the adjustment does not result in additional risks.

Aid distribution

- **Distribution mechanisms, such as queues or general access hours** – may put people with diverse SOGIESC at risk because they force them to be visible to others. Individuals who have diverse gender expressions will find gender-based queues problematic and unsafe, while they are often necessary support for other groups. Project implementation must foresee such risks and identify locally appropriate solutions that protect all people, including those within binary categories and persons with diverse SOGIESC. In some instances, facilities have implemented mechanisms whereby individuals with heightened protection needs can access an alternate entrance, utilize a private waiting area, take advantage of alternate hours or benefit from visits at alternate locations such as the office of an NGO.
- **Distribution criteria, including those defining who can access aid**, how, when and why – may not recognize same-gender couples, thus excluding them from aid meant for families; may exclude transgender individuals who lack documentation that matches their gender expression; may fail to provide intersex people with appropriate medical supplies, as needed; and in some cases, may unintentionally exclude populations like single gay men, as it happened in Haiti where the earthquake response focused on “vulnerable households” with children, elderly, single women. Distribution processes may make assumptions about what families, men and women look like and what items they need.
- Persons with diverse SOGIESC may **be reluctant to access services and goods** due to the fear that their SOGIESC will be shared with third parties, will be leaked even unintentionally and their privacy will not be respected. In addition, they may fear that service providers are not able to cater to their needs, because of lack of awareness and training or even think that specific services are not meant for them (e.g. GBV seen as a service for women only)
- **Contents of assistance packages may not be appropriate** for some people with diverse SOGIESC – for instance, transgender men may need access to sanitary napkins.

Documentation

- **Lack of official documentation that matches one’s self-identified gender**, or a lack of legal documentation of **marriage or adoption**, may lead to discrimination, separation, violence or exclusion included at border crossings, other immigration points, security checkpoints, registration and reception centres and police stations, during census exercises, and in accessing legal status, asylum, humanitarian aid and basic goods and services.
- **A lack of legal status caused by a lack of documentation** may limit access to police protection, housing, employment, medical care, mental health care and humanitarian assistance, leading to risky survival measures such as sex work and exposing to violence, exploitation and abuse.
- **Official documents listing a sex that does not match the individual’s gender identity** – may lead to harassment and abuse by authorities and others, especially in spaces such as detention, but also for shelter assignments and non-food items allocations in camp/group reception settings.
- **Registration processes that reveal sensitive information**, or involve officials who are not sensitive to, or welcoming of, persons with diverse SOGIESC, or force individuals to wait in public queues – may place people with diverse SOGIESC at risk.

¹¹⁹ See Resource List in Annex, including: Rumbach & Knight as well as UNHCR, WRC, UKAID, USAID & IRC, ICRC, UN Women.

- **Case Management and documentation forms** may exclude people by conflating sex and gender and limiting categories to male and female, or by not recognizing same-gender families.
- **Obtaining birth certificates for intersex babies** can lead to discrimination, stigma and violence.
- **Segregation in shelter, sanitation and detention facilities** may not be appropriate for persons who lack of official documentation that matches one's self-identified gender.
- **Education enrolment classifications** may not align with self-identified gender or may be a challenge due to a lack of proper birth registration documents.

Education

- **In education establishments, teachers and fellow students may bully, harass, stigmatize and physically abuse** youth who do not conform to expected roles or behaviour in relation to gender or who experience atypical development during puberty (such as in the case of intersex youth). Multiple studies have shown that youth with diverse SOGIESC face higher rates of abuse in education establishments than their peers, they are more likely to be bullied, assaulted, socially ostracized, harassed and have their property stolen or damaged.

Health

- **Health care centres may not provide** specific, appropriate, respectful or critical health care services and treatment options to people with diverse SOGIESC, for example sexual and HIV care and tailored GBV services.
- **“Corrective” programmes or treatments**, including surgeries and other interventions on intersex children – may be extremely damaging to health and are included by the UN amongst the *Human rights abuses against intersex people*.¹²⁰
- Intersex individuals may need **hormone replacement therapy**, including if their internal reproductive organs have been removed as a part of “corrective” surgery.
- **Limited access to support groups** for people with diverse SOGIESC, which may lead to loneliness, isolation, and mental health challenges.

Livelihoods

- **Employers** may discriminate against, abuse, refuse to hire or summarily dismiss people with diverse SOGIESC on the basis of their SOGIESC or same-gender relationships due to entrenched social discrimination.
- **Informal work settings and arrangements can lead to exploitation**, including a lack of payment of wages, trafficking in persons, sexual and physical violence. Transgender persons are at particular risk of being misgendered.

Participation & Accountability to Affected Population (AAP)

- Persons with diverse SOGIESC are often **excluded, intentionally or unintentionally, from decision-making processes** in humanitarian and development settings. This may be a consequence of discrimination and stigmatization from community members and families so that many avoid participation out of fear of further harm and visibility. Lack of participation also means less information on specific needs and risks for inclusive response.
- **Conditions at reception spaces** may discourage people with diverse SOGIESC from approaching humanitarian actors and disclosing information. For example, reception facilities with no private spaces

¹²⁰ The UN Office of the High Commissioner for Human Rights indicates that “Human rights abuses against intersex people include, but are not limited to: 1) infanticide, 2) forced and coercive medical interventions, 3) discrimination in education, sport, employment and other services, 4) lack of access to justice and remedies.” 2019 “Background Note- Human Rights Violations Against Intersex People” <https://www.ohchr.org/en/sexual-orientation-and-gender-identity/intersex-people>.

in which individuals can disclose their diverse SOGIESC or ask for assistance, or reception spaces where organizations work alongside security forces or government representatives, can result in individuals feeling unsafe sharing information related to their diverse SOGIESC. Conversely, facilities clearly managed by non-governmental organizations with private areas, safe space campaigns (including signage, announcements, videos and other materials) and clear notices regarding data protection may see more disclosure from affected populations.

- **Data collection that can be overheard by others** discourages individuals from sharing the specific challenges they face. For instance, after the Nepal earthquake an organization was going to remote villages to talk to people about their experiences and needs but could not collect information on the specific needs of vulnerable groups as they were interviewing the village residents in front of others, in larger groups or in front of the whole family.
- **Safe places commonly follow a gender-binary approach** which excludes people with diverse SOGIESC – feel excluded and unwelcomed.

Resettlement and Return

- During **voluntary repatriation and resettlement**, people with diverse SOGIESC may not receive appropriate or necessary information and may face issues of family unity. For example, individuals in some resettlement operations have reported not being informed that they were allowed to travel with their same-gender partner or were incorrectly informed they were not allowed to travel with a same-gender partner, resulting in the separation of their family.
- In other cases, individuals have been **given inaccurate information related to documentation and gender diversity** or were unable to access critical information about the support that might be available in the country of resettlement or the current circumstances in their country of origin. In an extreme case, an individual was misinformed about the lack of resettlement options. He was told that they must return to their country of origin despite being gay, having been outed and the country having the death penalty for homosexuality.¹²¹

Security

- Where same-gender sexual conduct is criminalized, or laws of general application are applied disproportionately to people with diverse SOGIESC, **they may face high rates of GBV** due to impunity, especially if they are involved in sex work. A lack of police protection may, in many locations, increase the probability of GBV occurring.
- In countries where identities, relationships and behaviours of persons with diverse SOGIESC are highly stigmatized and negative attitudes against persons with diverse SOGIESC and associated behaviour are widespread, **GBV may also occur with impunity**. Persons with diverse SOGIESC may be **wary of approaching authorities for assistance**, especially if local security forces are suspected of also perpetrating GBV.
- Border crossings, aid queues, transit centres, detention facilities and shelters are **high-risk locations** due to the level of exposure to potential discrimination and violence people with diverse SOGIESC face. Borders present the additional risk of international trafficking. Detention may result in abuse, harassment, isolation and/or extortion and offer no access to due process.
- **Formal and informal justice mechanisms and related locations** may limit access to or exclude people with diverse SOGIESC due to prejudice and stigma. These include police stations, trials and other judicial processes as well as informal dispute-resolution mechanisms based on customary laws and norms.
- Persons with diverse SOGIESC may also **fear reporting the crimes** that have been committed against them. A lack of police protection may be due to entrenched social discrimination, a lack of training of

¹²¹ Note that specialized training module on AVRR and materials on RST exists in IOM. See: Learning resources for IOM personnel and partners

police forces, or an overall xenophobic or anti-migrant climate.

Staff knowledge, attitude, behaviours, capacity & teams' preparedness

- Staff often lack adequate knowledge about how to keep persons with diverse SOGIESC safe when they approach the organization for support. Teams are often not ready to respond to their specific needs and mitigate the specific risks faced by persons with diverse SOGIESC. IOM personnel may also adopt attitudes and behaviours that are not in line with IOM Mission.¹²² This often leads to:
 - Non-inclusive response based on generalizations (*one-size fits all*) and thus ineffective response.
 - Unintentional exposure of persons with diverse SOGIESC to risk through unsafe implementation of response activities.
 - Increased visibility of individuals with diverse SOGIESC in a community/site, without their consent, exposing them to violence, stigma and exclusion.
 - Heightened physical insecurity and psychosocial distress.

Shelter and CCCM

Lack of appropriate care arrangements that consider the privacy and specific protection risks faced by persons with diverse SOGIESC. Solutions must be context-specific and designed after listening to persons with diverse SOGIESC and engaging with organizations working with persons with diverse SOGIESC.

- **Shelters in humanitarian contexts** may not be designed to accommodate the specific needs and risks that people with diverse SOGIESC face. For example, transgender individuals may not be welcome in gender-segregated shelters designed for predominantly cisgender and heterosexual residents. Housing may be **gender-segregated and follow heteronormative models**, may lack privacy, may put transgender and intersex people at risk of humiliation, anxiety, GBV and physical and mental harm.
- Housing may not recognize **same-gender families**, resulting in **separation**.
- **Housing with other** IDPs, migrants, asylum-seekers or refugees presents potential safety and security risks to people with diverse SOGIESC, who may experience violence and harassment if placed in shelters that are not sensible to their affirmed gender identity. **Housing away from others** may be isolated and lack access to services and key/focused community resources for persons with diverse SOGIESC. **Safe houses may be attacked** once their residents are identified as people with diverse SOGIESC and are not appropriate for long-term use. Persons with diverse SOGIESC may be unwilling to access such places due to fear of visibility and consequent risk of violence.
- **Individualised and context specific solutions must be planned and implemented** with the help of persons with diverse SOGIESC themselves and/or organizations working with them. In some places (e.g., New Delhi, Nairobi) refugees with diverse SOGIESC were brought together and accommodated with an NGO and prioritised for accelerated resettlement to reduce their safety risks in the community.

Water, Sanitation and Hygiene

- **Sex segregated sanitation facilities may put transgender and intersex people at risk** of scrutiny, humiliation, anxiety, violence, GBV and physical and mental harm. Project implementation must foresee such risks and identify situation-appropriate solutions that protect all people, including those within binary categories and persons with diverse SOGIESC, in order to implement GBV prevention for all people.

122 "[...] The Organization is guided by the principles enshrined in the Charter of the United Nations, including upholding human rights for all. Respect for the rights, dignity and well-being of migrants remains paramount," <https://www.iom.int/mission>.

Risks and challenges faced by specific groups

The following are examples from field experience, specific to some groups.

Note that there are many more examples, that depend on the circumstances and location, when intersectional identities must be considered when planning a response. For example, being migrant, and therefore foreigners, or being an IDP, and therefore coming from another area of the same country, may increase risks in a context of xenophobia or anti-migrant sentiments.¹²³ As another example, IDPs and migrants with diverse SOGIESC may also belong to different ethnic groups, which exposes them to further discrimination and abuse.

- Bisexual individuals tend to be persecuted by both queer and heterosexual populations.
- Bisexual and lesbian women may be at risk because of their gender and their sexual orientation and may be at heightened risk of violence within the home.
- Some gay men, lesbian women and transgender persons may be more visible and therefore more at risk of violence.
- Overall, trans and nonbinary people are at heightened risk of discrimination, harassment and violence in every context.
- Having a same-gender partner or having children with a same-gender partner can bring a heightened level of scrutiny to individuals and families.
- Intersex individuals tend to be invisible in the context of our work.
- Intersex individuals may be funnelled into procedures extremely damaging to health that are included by the UN amongst the *Human rights abuses against intersex people*.¹²⁴
- Queer youth are at elevated risk of dropping out of school and suicidal ideation, as well as homelessness (e.g., young people who are forced out of their family shelter).

¹²³ See IOM Research: Mapping and research to strengthen protection and assistance measures for migrants with diverse sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC) – IOM 2023 forthcoming publication.

¹²⁴ The UN Office of the High Commissioner for Human Rights indicates that "Human rights abuses against intersex people include, but are not limited to: 1) infanticide, 2) forced and coercive medical interventions, 3) discrimination in education, sport, employment and other services, 4) lack of access to justice and remedies," 2019 "Background Note- Human Rights Violations Against Intersex People" <https://www.ohchr.org/en/sexual-orientation-and-gender-identity/intersex-people>.

Examples of risks, challenges and barriers by location

Haiti

The 2010 earthquake destroyed protective infrastructure; “*from walls that ensured privacy at home to alleyways that made travel to clinics and gathering spaces safe. In the wake of the damage, people who had relied on specialized and often discreet services, such as HIV/AIDS clinics, were forced to turn to the common consumption of relief aid.*”¹²⁵

Kenya

In one instance, two Ethiopian refugees in Kenya were beaten and robbed repeatedly as well as lost their jobs due to their sexual orientation. Also, the house of a lesbian Ugandan refugee was demolished by local residents after refugees told the local council about her sexual orientation. Many similar cases happen each year and go under-reported due to fear and stigma.

Libya

As tens of thousands of labour migrants sought help to leave Libya and return to their home countries, a migrant approached a staff member. He explained he was gay and faced persecution in his home country. The organization was only undertaking assisted voluntary return activities and no other organization was active in the area, therefore he was told there were no other services available, and he must return home if he wanted help leaving Libya. He was repatriated to a country with the death penalty for homosexuality.

Nepal

Some forced relocation schemes in Nepal's Tarai region after the 2008 flooding did not account for the need for access to many of the vital services that support lives of *metis* people (persons who were assigned the sex of male at birth but identify as women), including HIV services and community-based organization social services.

During the 2015 earthquake, the Kathmandu offices of the national LGBT organization were damaged and many of the staff were crisis-affected, so individuals who usually relied on their services were unable to do so. Because displaced persons camps were not safe spaces for LGBT Nepalis, they formed their own camps and were greatly in need of supplies such as food and clean water. Despite the visibility of their plight, their needs were largely overlooked by the organizations engaged in emergency response.

Pakistan

In 2010 flood relief efforts in Pakistan, reports emerged that transgender women were left out of the aid efforts organized by UN agencies and NGOs and denied access to IDP camps because of general prejudice against them, their non-conforming appearance, and their lack of proper identification documents.

¹²⁵ For more information about the impact of the crisis -and of the response- on persons with diverse SOGIESC in Haiti see “The Impact of the Earthquake, and Relief and Recovery Programs on Haitian LGBT People,” by International Gay and Lesbian Human Rights Commission and SEROvie available at: <https://outrightinternational.org/sites/default/files/2022-10/haiti-servio.pdf>.

Peru

In 2020 during the COVID-19 pandemic, government officials in several Latin American countries, including Peru, enacted a scheme during quarantine that allowed residents to leave their homes at specific times to shop for basic supplies based on the sex marker on their official ID card. This system had negative consequences for transgender people – including nationals, migrants, refugees and asylum-seekers – as it increased their visibility to others and put them in the way of potential harm.

Philippines

For some people assigned the sex of male at birth who identify as female in the Philippines, accessing gender-segregated toilets and shower facilities in temporary shelters after natural disasters has been an embarrassing or humiliating experience. Many report they would feel more comfortable in female facilities, but the social norm associated with their masculine bodies compels them to use male bathrooms where they suffer from mockery from cisgender males.

South Sudan

A team implementing a HIV program for MSM¹²⁶ and sex workers received threats and had to keep the locations of the clinics anonymous, frequently moving them to prevent attack from neighbours.

Uganda

Human Rights First reported in 2012 that a bisexual refugee and her child living in Uganda were beaten by other refugees in the camp who disapproved of her sexual orientation, as well as removed from the queue for food along with other refugees with diverse SOGIESC. They were told that if they formed their own queue, the food providers would not assist them. Thus, they were often denied access to food. Additionally, a gay male refugee in Uganda was locked inside his house by a group of refugees who tried to burn him alive and a Sudanese lesbian in Uganda had her house burned down by the local refugee community.

USA

Several relief programs initiated in response to Hurricane Katrina in the USA employed administrative systems that made assumptions and arrangements based on different-gender marriage and family structure. This resulted in discrimination against people with diverse SOGIESC, same-gender couples and families. In some cases, it prevented them from receiving federal aid and accessing health care.

¹²⁶ Men who have sex with Men: A term used to refer broadly to people assigned the sex of male who engage in sexual activity with others assigned the sex of male, regardless of how they personally identify. This category includes cisgender men who have sex with transgender women or with nonbinary people assigned the sex of male, and vice versa. It does not include transgender men who have sex with cisgender men or transgender women.

ANNEX C: LIST OF RESOURCES

Resources for Secondary Data Analysis

We will first use existing reliable data, before collecting new data. This section includes useful resources for secondary data analysis. This list is a starting point, to be enriched with context-specific resources, as each context will have specific organizations serving persons with diverse SOGIESC, different academic or civil society reports, a specific legal framework and implementation practices.

Community Resources

- Civil society organizations (if none are visible, Stonewall, ILGA, UNHCR, UNAIDS, and some embassies may be able to connect you with them)
- Local community organizations
- Groups representing refugees or migrants
- Community centres inclusive of people with diverse SOGIESC
- Health centres inclusive of people with diverse SOGIESC
- In some cases, women's rights or gender-focused organizations, if they are inclusive
- HIV/AIDS organizations
- University or college groups
- US Embassy human rights office
- Other diplomatic representations who support human rights groups
- [ORAM](#)

Reports – Country Level

- [Amnesty International](#)
- [Asia Pacific Transgender Network](#)
- [Human Rights Watch](#)
- [ILGA](#)
- [Stonewall](#) – Global workplace briefings and more reports
- [Outright Action International](#) (formerly International Gay and Lesbian Human Rights Commission)
- [Sexual Minorities Uganda](#) (SMUG)
- [US State Department](#) (especially the annual country reports, human rights sections)
- Country of Origin reports (by Governments and UNHCR) have a section on the situation and risks for persons with diverse SOGIESC in the country
- [Trans murder monitoring project](#)

Reports – Regional or Global

- [European Union Agency for Fundamental Rights](#) (FRA) (especially surveys)

- [The Human Rights Council](#) (particularly sessions 19, 29, 35, 38, 41 and 44)
- Stonewall, “[Out of the margins](#)” report, and country reports are available. IOM is a partner organisation and part of their Champions Programme
- UNHCR. Resources on Asylum, [International Protection Guidelines Number 9](#)
- ILO. [Survey on migrant workers with diverse sexual orientation, gender identity and expression in South-East Asia](#)

Tools

- IOM SOGIESC Glossary of Terms (<https://www.iom.int/sites/g/files/tmzbd1486/files/documents/Training-Aide-IOM-SOGIESC-Glossary-of-Terms.pdf>)
- International Migration Law Information Note: *International standards on the protection of people with diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC) in the context of migration*: <https://www.iom.int/sites/g/files/tmzbd1486/files/documents/InfoNote-International-Standards-Protection-of-People-with-Diverse-SOGIESC.pdf>
- IOM Gender-Inclusive Communication Guidelines (<https://www.iom.int/resources/iom-gender-inclusive-communication-guidance>)
- HLCM UN inter-agency glossary on Diversity, Equity and Equality
- [ILGA maps on sexual orientation laws](#)
- International Commission of Jurists (ICJ), [Yogyakarta Principles](#)
- [Edge Effect 42 Degrees Glossary and Lexicon](#)
- [Global Action for Trans* Equality \(GATE\)](#) fact sheets
- [ICJ SOGI Legislative Database](#)
- [interACT Advocates for Intersex Youth informational](#) brochures
- [IOM SOGIESC IN EMERGENCY SETTINGS Tip Sheet](#)
- [ORAM guidance documents](#)
- [Organisation Intersex Europe \(OII\)](#) various resources
- [International Lesbian, Gay, Bisexual, Transgender, Queer and Intersex Youth Organisation \(IGLYO\)](#) various resources
- [Transgender Europe](#) resources
- [UN Free and Equal](#) fact sheets

Learning resources for IOM personnel and partners

- [IOM SOGIESC and Migration Training Package](#) “*Sexual Orientation, Gender Identity, Gender Expression, and Sex Characteristics (SOGIESC) and Migration*” and « *Orientation sexuelle, identité ou expression de genre et caractères sexuels (SOGIESC) dans le contexte migratoire* ». Personnel of IOM and partner organisations are encouraged to take these courses, which provide basic knowledge about each population group and identities comprised in the LGBTIQ+ acronym. The objective of the course is to assist IOM employees in facilitating effective and respectful interactions with people with diverse SOGIESC that preserve their dignity and humanity by:
 - Encouraging the use of correct terminology per international guidelines;

- *Identifying appropriate and sensitive communication techniques and recognizing problematic assumptions that can impact assistance;*
- *Discussing the unique protection challenges and vulnerabilities that people with diverse SOGIESC face;*
- *Creating safe spaces and inclusive workplace for people with diverse SOGIESC.*
- Short E-learning available on E-Campus, to anyone: [English](#), Spanish, [French](#) and on I-Learn to IOM staff only: [English](#), Spanish, [French](#)
- Training on “**Safely Managing Incidents Disclosures** ” is available at: <https://dtm.iom.int/dtm-partners-toolkit/trainings>. It includes clear roles and responsibilities of coordinators, protection colleagues and enumerators on how to safely respond to incidents disclosures. Contact PIM Field Support Network in HQ for help in providing the training (PIM-Support@iom.int)

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- [IOM Guidance on Gender Inclusive Communication](#) (FORMS, SURVEYS AND DATABASES p 7)
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- IOM and Samuel Hall, 2023, *Mapping and research to strengthen protection and assistance measures for migrants with diverse SOGIESC*, IOM, Geneva. – forthcoming publication
- UNHCR – [Working with Lesbian, Gay, Bisexual, Transgender, Intersex and Queer \(LGBTIQ+\) Persons in Forced Displacement](#)
- IRC – [Cycles of Displacement : Understanding Exclusion, Discrimination and Violence against LGBTQI People in Humanitarian Contexts](#)
- WRC – [Addressing Sexual Violence against Men, Boys, and LGBTIQ+ Persons in Humanitarian Settings](#)
- Edge Effect – [Out of the Margins : An Intersectional Analysis of Disability and Diverse Sexual Orientation, Gender Identity, Expression and Sex Characteristics in Humanitarian and Development Contexts](#)
- Edge Effect 2021, [The Only Way Is Up: Monitoring and Encouraging Diverse SOGIESC Inclusion in the Humanitarian and DRR Sectors](#)
- Edge Effect 2021, [“We don’t do a lot for them specifically” A scoping report on gaps and opportunities for improving diverse SOGIESC inclusion in cash transfer and social protection programs, during the COVID-19 crisis and beyond](#)
- Rumbach and Knight 2013, [Sexual and Gender Minorities in Humanitarian Emergencies](#)
- Yarwood, V. 2021, LGBTQI + Migrants: A Systematic Review and Conceptual Framework of Health, Safety and Wellbeing during Migration, International Journal of Environment Research and Public Health, <https://www.mdpi.com/1660-4601/19/2/869/htm>

ANNEX D: CATEGORIES FOR DATA ON SEX, DATA ON GENDER IDENTITY, DATA ON SEXUAL ORIENTATION

IOM personnel, including case workers, will ask about individuals' sex when necessary, but **should never ask about individuals sexual orientation, gender identity and expression and sex characteristics**. **When unsolicited disclosures happen and follow up is necessary to provide protection and assistance**, case management personnel will have to record and store such data safely and appropriately. For this, they will use forms and IM systems with appropriate categories to record the information. Following the IOM Guidelines on Gender Inclusive Communication,¹²⁷ options should be adapted to the fact that individuals are not asked about their SOGIESC, that is recorded only if disclosed without prompting the disclosure, as below:

- o Sex (If in question form: What is the sex marker on your official document?)
 - F – Female;
 - M – Male;
 - A - Another designation (O, T, X);
 - P - Prefer not to disclose¹²⁸

- o Gender Identity (**Do not ask, only record if voluntarily disclosed**)- *record exactly as the individual answers, choosing among the following options:*
 - W - Woman (note this term is inclusive of both cisgender and trans/transgender women);
 - M - Man (note this term is inclusive of both cisgender and trans/transgender men);
 - NG - No gender
 - NB - Non-binary
 - T - Trans/transgender
 - TM - Trans/transgender man
 - TW - Trans/transgender woman
 - ID - My gender is: _____ [with write-in]

- o Sexual Orientation (**Do not ask, only record if voluntarily disclosed**)- *record exactly as the individual answers, choosing among the following options:*
 - A - Asexual
 - B – Bisexual
 - G - Gay
 - H - Heterosexual (Straight)
 - L - Lesbian
 - P - Pansexual
 - Q - Queer
 - ID - Sexual orientation is: _____ [with write-in]
 - P - Prefer not to disclose

¹²⁷ <https://www.iom.int/sites/g/files/tmzbd1486/files/documents/IOM-Gender-Inclusive-Communication-Guidance-June2021.pdf>.

¹²⁸ Responses will be recorded as they were provided. For modalities to ask about sex, see the “DTM Guidance on Data collection on Sex and Age Disaggregated Data,” available in Annex E and at: <https://dtm.iom.int/dtm-partners-toolkit/population-data>.

ANNEX E: COLLECTING DATA ON SEX

Extract from “DTM Guidance on Data collection on Sex and Age Disaggregated Data.” See entire guidance here: <https://dtm.iom.int/dtm-partners-toolkit/population-data>.

DTM **will not include** questions on gender identity and expression, sexual orientation and sexual characteristics in their data collection exercises. This applies to any method of data collection used by DTM, from key informant interviews to group interviews, individual interviews to household interviews. DTM is aware of the limitations of using such approach, but DTM considers first and foremost the safety of enumerators and interviewees and adheres to the principles of Do No Harm, Defined Purpose, Necessity and Proportionality as per *Inter-Agency Standing Committee Operational Guidance on Data Responsibility*.

What do we mean by collecting data on sex?

Sex data are collected using various methods, and the exact meaning of the data will vary depending on the method. It is therefore crucial to explain the details of how data were collected, recorded and aggregated in the methodological section accompanying each dataset and report.

In key informant interviews the data on sex will be recorded as communicated by key informants about members of the community. When conducting most individual or household level interviews, DTM does not collect data on sex based on identity documents, but rather based mostly on observation by enumerators and sometimes a respondent’s answer. The person is able in this situation to answer what they consider their sex to be. If a registration exercise is being conducted, DTM might need to record sex as identified on a person’s ID document, if this information is required to access services and ensure consistency between the registration record and the individual’s ID.

In some cases, asking someone what sex they are is considered inappropriate, could be damaging for the continuation of the interview and may even jeopardise the enumerator’s safety. In these cases, data will be collected based on enumerator’s observation of the person, not of their documents. The decision of what method to use will remain with the DTM team in country. Enumerators will be instructed to choose a safe modality that avoids harm to themselves and the people they interview.

Categories to record data on sex

DTM will record sex data using the following categories:

- Female
- Male
- Another designation
- Do not Know/Prefer not to disclose

This is the language agreed in IOM and included in the 2021 IOM Gender Inclusive Communication Guidance. This helps appropriately record sex data in a manner that is respectful for all people.

Note that enumerators should not follow up with questions regardless of the answer they receive. Enumerators should record the answer provided and move to the following question. This also applies in case the interviewee answered with “another designation.” No additional details on the issue should be collected. This is to ensure respectful and safe data collection in line with the IASC Operational Guidance on Data Responsibility principles of Do No Harm, Defined Purpose and Necessity and Proportionality and in line with the concept of Data Minimization.¹²⁹

¹²⁹ <https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance-data-responsibility-humanitarian-action>.

Explanation on Age and Sex data in Methodology and Limitations section

Remember to include the following in the methodological section accompanying each dataset and report the information relevant to the method used to facilitate accurate understanding of your data and analysis:

- The method used in the data collection exercise to collect data (for example, Key informants in Admin 1, Key informants at admin 3, Individual Interviews, Household...)
- *When relevant*, the text of the questions used (e.g., “How old are you?” or “What is your month and year of birth?”, “What is your sex?”)
- The specific modality used to provide the data (e.g., Key Informant had a list, estimated without a list or a summary, DTM used a Demographic Calculator...) – use results of relevant core questions in Data Dictionary (M-0435: *What methodology/ies was/were used to get the population sex and age breakdown? Select all that apply*).
- How were age data recorded (single age category or age brackets)
- How data on age was aggregated (Women, men, boys and girls, or 0 to 5, 6 to 10, 11 to 15...)
- When relevant, 3 options to obtain information about sex that the enumerators could choose from: Ask, Confirm or Observe (see Section *How to obtain information about sex: three options for Household or Individual interviews* below)

Collecting Sex and Age of community members through Key Informant Interviews: Summary Table

The table below summarises the information on age and sex breakdown of the population recommended at each administrative level when using Key Informant Interviews:

Level	Preferred Source	Recommended disaggregation	Disaggregation When SADD are estimated without a list, summary or demographic calculator
Admin 1 & Admin 2	List or summary	<p>Use cohorts according to the age categories decided for the country (Standard). <i>Source: OCHA and IMWG, or Clusters/Sectors</i></p> <p><i>When those are not available, use:</i></p> <ul style="list-style-type: none"> • Girls (females under 18 years of age), • Boys (males under 18 years of age) • Women (females between 18 and 59 or 64 years of age- depending on the country) • Men (males between 18 and 59 or 64 years of age- depending on the country) • Older Women (females 60 years old and over or 65 years old and over- depending on the country) • Older Men (males over 60 years old and over or 65 years old and over-depend on the country) 	<ul style="list-style-type: none"> • Women (females 18 and over) • Men (males 18 and over) • Children (Males and females under 18 years of age)

Admin 3 & Admin 4	<ul style="list-style-type: none"> List, Summary from a List, Demographic calculator <p><i>(Always try to use Demographic Calculator in addition to list or summary from list, to crosscheck)</i></p>	<p>Use cohorts according to the age categories decided for the country (Standard). <i>Source: OCHA and IMWG, or Clusters/Sectors</i></p> <p><i>When those are not available, agree with data users on feasible and useful categories or use as a minimum:</i></p> <ul style="list-style-type: none"> Girls (females under 18 years of age), Boys (males under 18 years of age) Women (females between 18 and 59 or 64 years of age- depending on the country) Men (males between 18 and 59 or 64 years of age- depending on the country) Older Women (females 60 years old and over or 65 years old and over- depending on the country) Older Men (males over 60 years old and over or 65 years old and over-depending on the country) 	<ul style="list-style-type: none"> Girls (females under 18 years of age) Boys (males under 18 years of age) Women (females 18 and over) Men (males 18 and over)
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DTM uses the age of majority (when someone is an adult) as defined by the Convention on the Rights of a Child (UN General Assembly resolution 44/25): “a child means every human being below the age of eighteen years;” someone becomes an adult upon turning 18 years of age. Age-cohorts can be agreed with partners in the country of operation, but DTM must always be able to disaggregate between children under 18 and adults over 18. Check with partners (e.g., OCHA, Protection cluster, specialized organizations) the cut-off date for older men and women in your context (for example, is it ≥ 60 or ≥ 65 years of age?)

Household-level Interviews:

Household-Level Interviews will include a demographic roster to provide Sex and Age Disaggregated Data at the individual level. The roster will capture single-year age cohorts, which will then allow DTM to tailor the aggregation of Sex and Age data to the specific information needs of each partner.

Core indicators included in Household Interviews:

- Admin levels (to pair with Mobility Tracking master list) *[not required if the demographic calculator is integrated in the form]*
- Consent of the respondent to collect and to share data
- Respondent household status (i.e., head of household – y/n)
- Respondent age is over 16 years
- Total size of the household (HH)
- Individual Sex and Age Disaggregated Data (administered as a repeat group for each member using calculation to consolidate HH demographic fields)
 - o Head of household
 - Age (years)
 - Sex (Female, Male, Another designation, Do not Know/Prefer not to disclose)
 - o Member
 - Age (years, with addition of months for members under 2 years as optional)
 - Sex (Female, Male, Another designation, Do not Know/Prefer not to disclose)

Ensure enumerators understand how to obtain the information in a respectful way, in line with the cultural context and in a way that ensures their safety and that of the persons they interview.

Additional/ optional indicators for Household Interviews:

- HH Area of origin (admin 1-2 recommended, admin 3-4 optional)
- Reason for displacement (Primary recommended, secondary/ tertiary optional)
- Washington Group Short Set of Questions¹³⁰ (without any modification) – see section [below](#) for more information and IOM guidance on Data for Disability Inclusion.¹³¹
- Ethnicity/ minority status (optional, discuss with protection whether this is appropriate to collect, and how to phrase the question and options for reply. *Always consider this information as CONFIDENTIAL as per IOM Data Protection Principles and should not be included in reports.*)

For more guidance on the implementation of household-level surveys please contact DTMSupport@iom.int and Joseph Slowey jslowey@iom.int.

Individual-Level Interviews:

Individual-Level Interviews may provide Sex and Age Disaggregated Data of the persons interviewed and should collect single-year age-cohorts as directed by the guidance on household surveys above. For some indicators such as fertility, morbidity or mortality statistics precise date of birth captured either as day/month/year or month/year of birth may be required, for example in DHS-7 surveys. Individual surveys may be generalizable to the general population only where the assessment is randomly sampled. Flow monitoring surveys or other assessments conducted using a convenience sample are NOT built and implemented to be generalizable to the larger population, and findings should be presented with appropriate limitations clearly described.

Core indicators included in Individual Interviews:

- Admin levels [not required if the demographic calculator is integrated in the form]
- Consent of the respondent to collect and to share data
- Respondent age is over 16 years old
- Individual Sex and Age Disaggregated Data
 - Age (years) or date of birth where required for DHS-7 or similar surveys
 - Sex (Female, Male, Another designation, Do not Know/Prefer not to disclose)

Ensure enumerators understand how to obtain the information in a respectful way, in line with the cultural context and in a way that ensures their safety and that of the persons they interview. See next section: [How to obtain information about sex: 3 options for Household or Individual interviews](#)

How to obtain information about sex: three options for Household or Individual interviews

Depending on the context and the situation they are in, enumerators can choose amongst three options:

Option 1: ASK: enumerator can explain that the form asks for the sex and then ask the interviewee to answer about themselves and each member. The enumerator will not read the options aloud and will wait for the interviewee to answer before selecting the option closest to the answer amongst the standard answers: either Female, Male, Another designation or Do not Know/Prefer not to disclose. *NOTE that the enumerator will write down the actual answer provided by the interviewed person, without questioning or changing the answer: for example, if a transgender person responds “female,” the enumerator will record the answer as “female;” if a*

¹³⁰ <https://www.washingtongroup-disability.com/question-sets/>

¹³¹ <https://dtm.iom.int/dtm-partners-toolkit/guide/dtm-msla-disability-inclusion>



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