“This group is essential to our survival”: urban refugees and community-based protection

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Nearly 60% of all refugees now live in cities, a trend that will continue as camps increasingly become an option of last resort. Already, this urban shift is catalysing monumental changes across the sector, including in how humanitarians think about, and embark upon, community-based protection.

The ‘communities’ at the heart of community-based protection are not predetermined. Communities can cohere around any number of shared characteristics, and be more or less inclusive or exclusive depending upon their own internal social norms and power dynamics. Ensuring that every refugee has access to community-based protection requires, in the first instance, seeing them as individual rights holders. So while community-based protection arises through collective action, an overarching goal of protection programming is to empower individuals to know and claim their rights – and to recognise which ‘community’ may be most relevant for helping them do so.

To help deepen understanding of urban refugees’ particular protection needs, in particular the risks of gender-based violence (GBV) and avenues for supporting them in mitigating those risks, in 2015 the Women’s Refugee Commission (WRC) conducted research in four cities with sizeable refugee populations: Beirut, Delhi, Quito and Kampala. Over 500 urban refugees across the four cities were interviewed, plus a variety of local stakeholders in each city.

Findings from this research emphasise key areas of risk affecting all urban refugees, especially risks related to finding safe accommodation and trying to earn enough money to survive in the city. Perhaps more surprisingly, the findings highlight significant differences in how these and other risks manifest for different groups of urban refugees. For this reason, WRC then disaggregated its findings for the following subpopulations: women and girls; men and boys; lesbian, gay, bisexual, transgender and intersex (LGBTI) refugees; refugees engaged in sex work; persons with disabilities; and male survivors of sexual violence.

A similar pattern of differences unfolded regarding self-protection strategies and refugees’ efforts to constitute, or to tap into, a particular community that could serve as a protective social network. But what this ‘community’ looked like varied enormously across and within refugee subpopulations, underscoring that, for many refugees, notions of a broader ‘refugee community’ neither resonate with nor reflect their day-to-day reality.

Questions of identity

Sometimes communities that refugees identified as being most relevant for their protection were not primarily made up of other refugees at all but rather of certain members of the host community. This was especially true for marginalised populations, such as sexual and gender minorities, but it was also true for refugees engaged in certain types of labour, including sex work.

This is because for some refugees, the aspect of their identity most relevant to their protection – both as a vulnerability factor, and as a shared characteristic around which networks of peers coalesce – is not their identity as refugees. Any number of identities (racial, ethnic, gender) or personal or environmental characteristics (the language they speak, the job they work at, the neighbourhood they live in) might weigh most heavily for an individual in terms of being important for them in accessing or forming a protective community.

The importance of prioritising refugees’ own assertions of identity is perhaps best illustrated by refugees who...
Local communities: first and last providers of protection

are especially at risk of violence because they are members of stigmatised and marginalised subpopulations. Sexual- and gender-minority refugees, for instance, are often ostracised by broader refugee communities, including by their own families. LGBTI refugees often experience violence at the hands of other refugees as well as members of the host community; they also experience discrimination and abuse when attempting to rent apartments, find jobs or even access services, including mainstream refugee services.

Enhancing community-based protection for LGBTI refugees therefore requires, in the first instance, supporting them in defining the contours of the communities that are most relevant – and safe – for them. This community may include LGBTI members of the host community, as for example is the case for many LGBTI Syrian refugees currently living in Lebanon. Members of the Lebanese LGBTI community share information and offer peer support to LGBTI Syrian refugees, and help connect them with local LGBTI organisations and LGBTI-friendly service providers. Syrian LGBTI refugees said that they turn to a local LGBTI organisation in emergency situations (such as if they are caught without ‘correct’ papers or arrested because of their sexual orientation or gender identity) since they feel this organisation is their best option for receiving responsive and knowledgeable legal support.

Kinship and security

By contrast, in Quito, WRC interviewed Luisa, a gay woman who had fled violence in Colombia to seek safety and asylum in Ecuador. Although Luisa participated in a support group for women hosted by an NGO in Quito, she broke down in tears when describing how isolated and alone she felt, unable to disclose who she “really is” to the women in the support group, and living in fear of being “found out” as a lesbian. She did not know any other gay individuals in Quito, refugees or Ecuadorians, and was surprised to learn that there were multiple LGBTI civil society organisations in Quito, including one run by and for gay women.

Hence it may be that for LGBTI refugees, their access to community-based protection will involve linkages to host community LGBTI organisations – and humanitarian actors should enable and encourage these linkages. They can do this by reaching out to local LGBTI organisations in the early stages of response to consult them about their interest or capacity to engage LGBTI refugees and to share their knowledge and experiences about how to live safely as a sexual or gender minority in the host community.

As Luisa’s story suggests, subcommunities can be a vital component of community-based protection for marginalised refugees. In Beirut, in addition to being a part of broader, primarily Lebanese, LGBTI social networks and community activities, Syrian trans women refugees have formed a smaller, more tightly knit peer community of their own. They are a circle of friends, coworkers and housemates who engage in activities that mitigate their individual and collective risks of day-to-day violence: small yet essential actions that range from sharing information (for example, about a dangerous checkpoint) to sharing taxis. They are also the first people they will phone for emotional support and referral information when they are victims of physical violence. Trans women in Ecuador, Beirut and Kampala report that such violence, including rape, is a regular occurrence, and that they are especially targeted because of their dual status as transgender individuals who are also refugees.

There are examples of marginalised refugees forming their own subcommunity-based protection organisations in other cities as well. In Kampala, an organisation called OGERA was formed by refugee sex workers to facilitate their access to the types of peer support, specialised services, and health and safety information they deem most relevant and urgent for them. Also in Kampala, an organisation called Angels, led by and for LGBTI refugees, engages in a variety of protection activities: emergency food rations, a safe space, peer counselling, and access to a computer so that members do not have to visit cyber cafes to send emails or Skype with friends or relatives abroad. Angels’
headquarters also serve as a makeshift shelter for homeless LGBTI refugees. In one group discussion, members of Angels said that the group is “essential to our survival”.

OGERA and Angels arose organically, through conversations among and collective actions by refugees with shared identities, yet both organisations struggle to keep their organisations afloat, to pay rent on their offices and fund their activities. Neither of them – nor the LGBTI organisation in Beirut – receives any financial support from humanitarian donors for their work with LGBTI refugees.

**Doing more to strengthen community-based protection**

Two key strategies emerged from WRC’s consultations for strengthening community-based protection in ways that would enhance at-risk refugees’ access to protective peer networks and to specialised services and information.

The first strategy is brokering linkages between refugee at-risk subpopulations, such as LGBTI refugees or refugees engaged in sex work, and relevant host community organisations (whether civil society groups or private service providers). This requires international actors to systematically map potential host community partners or referral pathways, and reach out to them proactively to learn what barriers they may face in engaging refugees and what types of assistance might help them overcome those barriers.³

The second strategy is actively supporting community-based organisations (CBOs) led by or involving refugees. These CBOs engage in varying protection-related activities, depending on their members’ primary needs and concerns as well as their organisational capacity. Yet, among the groups consulted by WRC very few were receiving support from UNHCR or one of its partners; in particular, financial support for activities was cited as being difficult if not impossible to obtain. At the same time, the few who **were** able to secure some form(s) of support – be it help with programme management, access to a physical meeting space, or seed money – said that it was critical to their existence and ability to engage in activities.

Supporting local community-based protection in urban settings calls for humanitarian actors to pursue both of the above strategies simultaneously. Doing this will not necessarily require new financial resources but it will require proactive efforts to re-channel or re-programme existing resources, both human and financial. Both strategies will require reworking existing funding mechanisms to enable greater flexibility in the awarding of grants to a diverse array of host community organisations.⁴

Making it easier for refugee CBOs to receive small grants will also be essential to realising community-based protection and translating it into something that can have a tangible impact on refugees’ daily lives.

And at the heart of both strategies – at the heart of community-based protection – should be direct consultations with refugees. Such consultations are key not only to identifying refugees’ most urgent risks but to supporting the refugees in defining, in the first instance, the communities most relevant for them in mitigating those risks.

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1. For more information on research methodology and results, including separate reports for each subpopulation, see (2016) *Mean Streets: Identifying and Responding to Urban Refugees’ Risks of Gender-Based Violence.*
www.womensrefugeecommission.org/gbv/resources/1272-mean-streets

2. Name changed.

3. WRC is currently piloting a tool for urban practitioners that guides them sector by sector (health, education, etc) and subpopulation by subpopulation to identify potential partners in enhancing refugee protection, especially around GBV prevention and response.


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