BATA AT BAHAGHARI
Experiences of LGBT Children in the Philippines
BATA AT BAHAGHARI: EXPERIENCES OF LGBT CHILDREN IN THE PHILIPPINES
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ASEAN SOGIE CAUCUS is a regional network of human rights defenders advocating for the protection, promotion and fulfillment of the rights of all persons regardless of sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC). The organization envisions a SOGIESC-inclusive ASEAN community.

EXPLANATORY NOTE:

The goal of this paper is to discuss points of interest documented during “Bata at Bahaghari: Children’s Workshop on the Rights of LGBT Children”, a workshop conducted on 20 to 21 April 2016 by ASEAN SOGIE Caucus in cooperation with the Civil Society Coalition on the Convention on the Rights of the Child (CSC-CRC), and to offer recommendations for children’s rights groups. Participants consented to document their feedback and publish it for wider use. Names and other identifying markers have been removed.
INTRODUCTION: Can we do better for our LGBT Children?

People respond to the topic of lesbian, gay, bisexual, and transgender (LGBT) children in different ways. There is the shock at their experience of violence based on nothing more than, as our workshop participants put it, “who they are” – that is, based on their sexual orientation and gender identity and expression (SOGIE). More shocking is that it has come to be expected, in light of research that speaks, seemingly in perpetua, of LGBT children’s vulnerabilities.[1,2,3] To others, there is the shock of saying “children” and “LGBT” in the same breath: there is the gut response to attributing sexual feelings to children, that it is disruptive to nations and cultures, and so on.[4] But at their core is the recognition that, as adults, we seem helpless: whether it’s keeping LGBT children safe or keeping children away from sexuality entirely, there is a sense that we might be failing them.

That we need to do better for our children ought to be non-controversial. The principle of the “best interests of the child” as enshrined in the Convention on the Rights of the Child (CRC) makes it clear that all children be protected from harm. And while it is not always understood how pervasive stigma causes harm, the existing researches make it clear that it does.[5,6] More troubling is its ubiquity in social life, as one study youth puts it: “Most respondents had experienced some form of victimization, with no social environment being free from risk of harm.”[7] This appreciation of the information can serve as the primary entry point for engagement.

One example comes from a 2015 statement by the Catholic Bishops Conference of the Philippines, who wrote that discrimination “is contrary to the Gospel spirit” and that “any measure that counters discrimination of this kind is a gesture of charity”. While it came with many caveats, the shift in language gives us much-needed ground to move discussions on the treatment of LGBT children in religious institutions forward. Even when the paradigm assumes that being LGBT was a physical disease, as in the case of Indonesia where being LGBT was classified as a mental disorder by The Indonesian Psychiatrists Association[10], a case can still be made: if it is true that being LGBT is an “illness”, it is also true that it cannot be “cured” in unsafe environments social stigma creates. Of course, these two examples come with concessions many of us are deeply opposed to. But for now, it is enough to say that dialogue with those we have serious differences in principle with is still possible.

Where human rights discourse is the primary instrument, activists turn to international law – in this case, the CRC, which holds the distinction for being the most ratified human rights treaty. Though there are no binding provisions dealing specifically with LGBT children, a provision under General Comment No. 15 of the Committee on the Rights of the Child writes that “States parties have an obligation to ensure that children’s health is not undermined as a result of discrimination”, citing sexual orientation and gender identity.[12] Some institutions interpret the CRC in this way: UNICEF, for example, identifies non-discrimination “as a general principle of fundamental importance for implementation of the whole CRC”; similarly, the Council of Europe writes that protecting LGBT children is “clearly laid out in the UN Convention on the Rights of the Child”[14].

For ASEAN, one important development – important because it is the only ASEAN document that references “LGBT” at all – comes from the ASEAN Regional Plan of Action on Elimination of Violence against Children.[15] Under the section on vulnerable groups, it specifically lists “children from the lesbian, gay, transgender or transsexual community.” That said, but how these provisions will be used remains to be seen. It is up to stakeholders to take advantage of this and hold ASEAN member states accountable.

One other important challenge concerns intersex children. “Intersex” is a broad label encompassing “a variety of conditions that lead to atypical development of physical sex characteristics.”[16] The challenge stems primarily from the idea that their sex characteristics “do not fit typical binary notions of male or female bodies.”[17] The issues vary: one study, for example, highlights “the negative impact of societal ignorance, lack of acceptance of body difference and the journey from silence to disclosure and acceptance of individuality and choice in gender identification”[18]; others highlight the debate on the ethics of medical interventions.[19, 20, 21] Sadly, data on the lives of intersex persons in Southeast Asia is severely limited. One exception comes from a report by the Asia Pacific Forum of National Human Rights Institutions, which devote a chapter to intersex persons.[22] Because intersex children’s issues were not raised during our workshop, we are unable to tackle it here. But as we move forward, our reference to intersex persons in our advocacy cannot remain tokenistic.
INSIGHTS: What did we learn from LGBT Children?

The goal of this section is to share some points of interest that surfaced during our workshop, with the hope that they can offer much-needed perspective on some issues activists may encounter in respect to LGBT children.

Domestic Tension and Silence

LGBT children are often forced into stressful circumstances, the usual suspects being a complicated mix of emotional abuse (such as verbal harassment and neglect) and outright violence (such as battery and sexual assault), often perpetrated by parents, siblings, or other relatives. Sadly, these were reported to different degrees by our participants, echoing a disturbing trend on the experiences of LGBT people generally. It is not just about protecting children when they express themselves; we must create environments where this freedom of expression is encouraged. It is our hope that such initiatives can be sustained at a larger scale.

Second is that they often choose to do nothing. For one child, it is because these experiences were a given: it has always been this way, so they should just persevere until they are independent enough to leave on their own accord. For another child, it is because trying to address the issue would expose them to greater harm, as the erring family member may seek retribution. And for one other child – and this is something shared by the others – they simply love their family too much to embarrass them or put them in harm’s way. In all three cases, the children cope through other means because the broader culture of silence makes redress impractical or even impossible. Met with silence, they turn silent themselves.

Equally difficult is when these experiences do not fall under the typical rubric of “abuse”. For example, one child who identified as transgender reported the animosity that had grown between her parents, who accuse one-another of bad parenting as the reason their child is transgender. The conflict between their parents generated in the child feelings of shame, and she blamed herself for “not being normal” as the cause of her parents’ conflict. The lack of outright abuse, although a good thing, also makes intervention by outside parties more difficult to justify. So the question is how we can respond effectively to similarly ambiguous situations.

Rejection and its Varieties

The experience of rejection among LGBT children by loved ones is insidious, not only because it is terrible in and of itself – it is a powerful and disruptive experience linked to all manner of negative health outcomes[24, 25] – but because it happens so often. It can also be difficult for responders, who must calculate their response to these cases carefully. The most obvious form of rejection comes when family members literally reject an LGBT child, with statements such as “wala akong lesbianang anak” (“I have no lesbian child”), as one of our participants reported. But it can also take subtler forms. One participant was told by their parents, “Wala naman sa lahi natin ang lesbiana” (“Being lesbian isn’t in our genes”),
Using Minority Stress to Understand LGBT Children’s Experiences

The way stigma works does not only constitute a unique stressor for LGBT children, but compounds on existing stressors all children already go through. In schools, for example, LGBT children also have to deal with everyday tasks: studying for classes, building and maintaining friendships, and dealing with the novel feelings of puberty, among others. But because of their SOGIE, they are forced into circumstances wherein “stigma, prejudice, and discrimination create a stressful social environment that can lead to mental health problems in people who belong to stigmatized minority groups” – a concept referred to in psychological research as the Minority Stress Model. For one transgender child, it was not just about passing exams: she also had to plan her visits to the restroom to avoid the harassment from using the girl’s restroom. For another, it was not just studying for class: he also had to make sure he got to class without dirt or rocks thrown at him by bullies. These cases – having to plan out visits to the restroom and avoiding violent students, among many others – constitute not only a violation of the children’s right to education and security but also an unnecessary burden on their wellbeing.

Community Redress Mechanisms

In the experience of our participants, the response of local government units often compounded on rather than alleviated their problems. Even in places such as Quezon City, the only city as of this writing whose anti-discrimination ordinance has existing Implementing Rules and Regulations, taking action on LGBT children’s issues has not been straightforward. One child who tried to report her abusive uncle was not taken seriously by the barangay officials, and told that she was just exaggerating. And even in the presence of a responsive local government unit, LGBT children are unable to seek redress either because they do not know where to go or because traveling to these places – centered mostly in Metro Manila – is costly.

The Potential Role of Vicarious Trauma in LGBT Children’s Lives

One other issue was the possible impact of vicarious trauma, also known as “secondary traumatic stress”, defined broadly as “the emotional duress that results when an individual hears about the firsthand trauma experiences of another.” Vicarious trauma can be understood as trauma rippling outwards, extending out to others who identify with the victims – in this case, those who identify as being part of the LGBT community. To illustrate, one of our participants expressed their fear that they would end up like Jennifer Laude, the transgender woman who was brutally murdered by an American soldier in Olongapo City, and others who were similarly attacked. “One day,” another child said, “words may not be enough and people will actually
hurt us.” In some cases, vicarious trauma’s impact mimic symptoms of post-traumatic stress disorder. So it is important to consider how LGBT children’s continued exposure to the collective trauma of LGBT people affects their own health.

The Dilemma of “Compensating” for one’s SOGIE

A common but understudied occurrence is how many LGBT people respond to stigma through “compensation,” when people attempt to deflect attention from or make up for one’s perceived faults and shortcomings — in this case, their sexual orientation or gender identity — such as by excelling in particular activities or over-achieving in one’s career. For LGBT people, compensation can be motivated by internalized homophobia (i.e. learned responses of shame and guilt for one’s own sexual orientation), deflect conflict with unsupportive family members (i.e. the idea that they cannot justify hurting or berating you if you are successful), and to protect oneself from the potential social and economic backlash of being LGBT in unsupportive environments. These were illustrated in the way some participants thought how best to address discrimination: that they should be “magalang” (“respectful”), that they should wear “kaaya-ayang damit” (“decent clothes”), and that they should study and work harder.

This is dangerous in two ways. First, from a human rights perspective, it teaches them that their rights are conditional, based how well one performs in school or how “decent” their clothes are. Second, from a psychological perspective, to teach people that there is something wrong with them — that being LGBT is a something you need to be redeemed from — and that they must work harder to be considered a human being is both dishonest and cruel.
At the end of the workshop, our participating organizations came together to consolidate their insights. We have outlined here three salient points which came up during our discussions which we believe are worth considering as we move forward with LGBT children.

1. **Encourage dialogue towards an inclusive child rights framework.**

   Our participants’ experiences echo a much older historical trend, in which conservative religious values played a role in perpetuating stigma in all areas of community and family life. But this is not always the case, as religious values are also widely interpreted as accommodating to LGBT issues, the fight against discrimination a moral duty by many religious sectors locally and abroad. Using an example from our workshop, representatives from a child rights organization shared that they wanted to incorporate LGBT rights into their policies, because they were in-line not just with accepted human rights standards but also with church doctrine. Many religious sectors may not be as accommodating. That said, framing LGBT issues as a critical or non-negotiable aspect of children's rights – for the simple reason that social stigma puts children in real danger – may help advocates get one foot in the door and make collaboration possible.

2. **Make LGBT issues concrete and actionable in your organization’s projects and policies.**

   While vocal support is a welcome change, more important are plans of action. In our workshop, one child rights organization said how much they appreciated how courageous the children were, but this is as much about being in an enabling environment as it is about being courageous: they were outspoken because the workshop explicitly guaranteed their freedom and offered them every opportunity it could to express their views. Living in conditions that makes being outspoken dangerous trains LGBT children to be silent, silence often being a matter of survival. As such, the willingness of LGBT children to participate should not be taken as self-evident; we must make sure that resources are devoted to creating these enabling environments. For example, in reiterating their organization's vision of becoming a source of support for LGBT children, another child rights organization committed to the initiatives such as adding items for SOGIE in their future research projects (e.g. adding “sexual orientation” and/or “gender identity” in demographic measures); revising response mechanisms to include provisions for LGBT children (e.g. protocols for best practices, explicit non-discrimination policy, etc.); and incorporating material on LGBT and SOGIE issues into their educational material.
3. Make children a part of your LGBT advocacy.

It is often said that mainstream LGBT advocacy has focused primarily on young adults, at the expense of both older LGBT people and LGBT children. The unfortunate consequence is that many LGBT organizations are unprepared to deal with their unique issues, which in the case of LGBT children include laws and special protocols for the ethical treatment of minors, caring for traumatized children, and so on. One child rights organization reiterated that while children should be given the opportunity to do their part in understanding SOGIE issues, organizations should also take steps to preparing themselves. This includes understanding the ethics of advocacy with children, designing programs to allow for their greater involvement in their advocacy work, and becoming up-to-date with the latest research on LGBT children's issues.

REFERENCES


12. UN Committee on the Rights of the Child (CRC). General Comment No. 15 (2013) on the right of the child to the enjoyment of the highest attainable standard of health (Article 24), 17 April 2013, CRC/C/GC/15.


