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Rosemary Kimani-Dupuis
Wilfrid Laurier University, rkimani-dupuis@balsillieschool.ca

Allison Petrozziello
Wilfrid Laurier University, apetroziello@balsillieschool.ca

Carol B. Duncan
Wilfrid Laurier University, cduncan@wlu.ca

Jenna L. Hennebry
Wilfrid Laurier University, jhennebry@wlu.ca

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Up/Rooted: Gender, Sexuality and Refuge in Canada

R. Kimani-Dupuis, A. Petrozziello, C. Duncan, and J. Hennebry[1]

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Introduction

Issues of gender and sexuality affect refugee experiences of flight, resettlement and integration, yet often remain unacknowledged and unaddressed in policy and programming to support those seeking refuge in Canada. There exists a power dimension between those being served (refugees) and those providing services and policymakers. The economic, legal and social situation of refugees and asylum-seekers with respect to employment, health and nutrition, housing, family reunification, and education is one of precarity. Within the discourse of 'immigrant newcomers' there is a lack of understanding of important differences between the experiences of immigrants (economic class and family class) and refugees, with little to no appreciation for the profound effects of "flight" on refugee migration experiences. There is an 'immigrant newcomer' presumptive knowledge that leads to a distinct lack of compassion for refugees in host countries (Dippo, Basu & Duran, 2013; Kimani-Dupuis, 2018). This *Policy Points* presents core issues at the intersection of gender, sexuality and seeking refuge discussed during the *Up/Rooted 2: Gender, Sexuality and Refuge in Canada[2]* workshop held in May 2019 at the Balsillie School of International

[1]Rosemary Kimani-Dupuis, PhD student in Global Governance, Wilfrid Laurier University and Balsillie School of International Affairs (BSIA), rkimani-dupuis@balsillieschool.ca. Allison Petrozziello, PhD student in Global Governance, Wilfrid Laurier University and BSIA, apetroziello@balsillieschool.ca. Carol B. Duncan, Professor, Department of Religion and Culture, Wilfrid Laurier University, cduncan@wlu.ca. Jenna L. Hennebry, Associate Professor, Communications Studies, Wilfrid Laurier University and BSIA, jhennebry@wlu.ca
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[2]The workshop was a follow-up to the highly successful 2017 international conference *Up/Rooted: Refugees, Resettlement, Community*, which was organized with the support and input of several community partners, held at Wilfrid Laurier University and the Balsillie School of International Affairs. The 2017 conference was attended by hundreds of members of the community

Affairs, Waterloo, Ontario, which explored challenges and opportunities for people arriving from refugee experiences in the Kitchener-Waterloo and Cambridge region.

Methodology

The workshop consisted of 23 participants, from a range of community organizations working with refugees in the Kitchener-Waterloo and Cambridge region. Community members, persons with refugee backgrounds, researchers, and students came together to engage in a dialogue on gender, sexuality and the experiences of resettlement in Canada. The first phase of the workshop began with an inductive exercise in 'naming the issues' where participants discussed the broader contexts around refugee resettlement and integration in the Kitchener-Waterloo and Cambridge region. The second phase used the World Café conversation strategy to create a living network of collaborative conversations[3] to discuss particular challenges to the everyday realities of refugees settled in the Kitchener-Waterloo and Cambridge municipalities, and best practices within four broad themes: (1) Health and wellness; (2) Families; (3) Social protection and economic security; and (4) Communities and identities. The third phase of the workshop was a roundtable discussion on gaps in knowledge and opportunities and policy recommendations; the Sli.do polling platform was utilized as an interactive tool. The following findings and policy recommendations are the result of our work (deep conversations) during the workshop.

Policy Context

Who is seeking refuge in Canada? The diversity of countries that produce refugees reflect a historical trajectory of international crises (Hungary, Bosnia and Herzegovina, Iraq, Afghanistan, Syria, Bangladesh, Sri Lanka, Columbia, Chile, Haiti, Sudan, Somalia, Rwanda, the Congo, Ethiopia, etc). Within this long history, Canada has provided protection to and resettlement of refugees and other survivors of human rights abuses including those in the LGBTQ2S+ (lesbian, gay, bisexual, transgender, queer/questioning, and two-spirit) community. Indeed, in 1991, Canada became one of the first countries to grant refugee status based on Sexual Orientation and Gender Identity and Expression (SOGIE) (d'Entremont, 2012;LaViolette 2007; LaViolette 2009a; LaViolette 2009b; Lee & Brotman, 2011), and has one of the highest acceptance rates (Millbank, 2009). Canada admits approximately 1,500 LGBTQ2S+ refugees per year (LaViolette, 2014), and LGBTQ2S+ Syrians were among those settled in Canada as part of the #WelcomeRefugees initiative that has overall settled more than 40, 081 Syrian refugees since 2015 (Government of Canada, 2019). Between 2015-2016, Canada resettled 40, 615 refugees of whom 47.9% were women and 52.1% were men (Statistics Canada, 2019) from Syria, Afghanistan, Iraq, Eritrea, Democratic Republic of Congo, Latin America, and other countries. Further, between 2017-2018, Canada received 55,400 new claims for asylum (UNHCR, 2018a), of which approximately 19,000 claims were asylum seekers crossing into Canada from the United States. The data shows that refugees resettled in Canada are a diverse group, with a range of identities, experiences, and socio-demographic characteristics (e.g., gender, age, ethnicity, religion, social-economic background, education levels, country of origin, etc). Recognizing this diversity is important in formulating policies on resettlement and integration, and has implications for broader service provision and social rights.

Sexual and Gender-based violence (SGBV), where it fits in— Gender as a cultural construct, means that conceptions of femininity and masculinity differ cross-culturally and across different geographical locations and time periods including how the structure of power between women and men, and between

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over three days; it was a pivotal event in drawing attention to, and providing insights into refugee issues in contemporary and historical contexts in the Waterloo region and the world beyond.
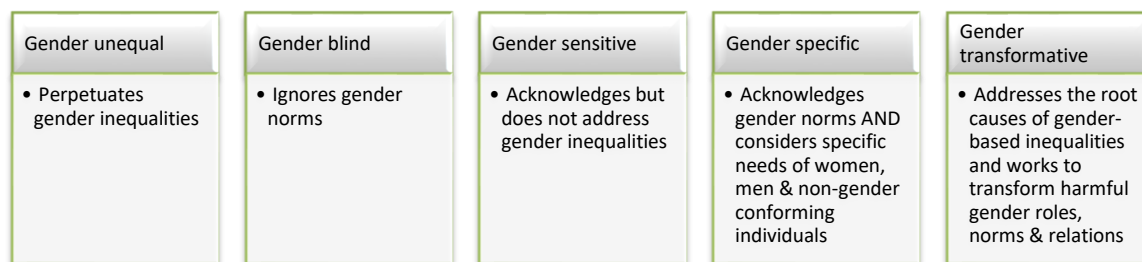
[3]World Café conversations are based on the principles and format developed by the World Café, a global movement to support conversations that matter in corporate, government, and community settings around the world. It is a provocative metaphor for the power of conversations (Source: The World Café Community Foundation [2015], Creative Commons Attribution).

children and parents is governed. Private and public gender dynamics (performing gender) play an important role in our perception of gender equality. SGBV (and in particular violence against women [VAW]), is linked to gender inequalities. Canadian statistics show that women have a 20% higher risk of SGBV than men (Perreault, 2015). The risk for SGBV/VAW is higher for refugee women and girls, and persons who identify as LGBTQ2S+ than other women groups in Canada because their experiences of violence are interwoven with experiences of racism and discrimination. The discourse of discrimination and 'othering' tends to 'culturalize' violence in ways that dehumanize women and girls and LGBTQ2S+ individuals making them vulnerable to violence by different types of perpetrators.

The transformation of family structures as a result of shifting gender roles and changing family dynamics (due to forced displacement), is a major risk factor for SBGV/VAW directed at women, girls and LGBTQ2S+ refugees. Community-based research has shown that for refugee women and girls, SGBV/VAW is linked to immigration-based abuse (Tabibi et al., 2018) where legal status heightens vulnerability and exacerbates the violence they experience. Refugees who identify as LGBTQ2S+ not only face SGBV/VAW, but also discrimination as a result of homophobia (Seitz, 2017). This is because, most often, refugee/asylum claims are linked to the family unit or sponsor, leaving women, girls and non-gender conforming refugees dependant on family members or sponsors who are the perpetrators of the abuse. However, how SGBV/VAW intersects with the transformation of family structures is missing in policy and service provider narratives with negative consequences for refugees and refugee families.

Why do we need more gender-responsive policies and practices to respond to the experiences and needs of people seeking refuge in Canada? Much of the policymaking around the immigration and refugee protection, health care provision, social security, and the labour market remain gender-blind neglecting the role of gender (Hennebry, 2018; Percival et al., 2018). Ideas about masculinity, femininity and sexuality are imbricated in both the migration experiences and the policy and institutional responses to refugee resettlement. As a principle, gender-responsive strategies acknowledge that gender makes a difference, and "responds" in order to address gender-specific needs, and transforms practices to foster gender equality. Gender-responsive policies, service provision and programs are paramount for responding to the needs and experiences of those seeking refuge in Canada.

Spectrum of Gender-responsiveness in Policy and Programming

Gender unequal	Gender blind	Gender sensitive	Gender specific	Gender transformative
• Perpetuates gender inequalities	• Ignores gender norms	• Acknowledges but does not address gender inequalities	• Acknowledges gender norms AND considers specific needs of women, men & non-gender conforming individuals	• Addresses the root causes of gender-based inequalities and works to transform harmful gender roles, norms & relations

Source: Adapted from British Columbia Centre of Excellence for Women's Health (2018)

Making a policy or program **gender-responsive[4]** means:

1. Considering gender norms, inequalities, the different situations, roles, needs and interests of women, men, girls and boys, and acknowledging power differentials within gender relations that function within and between different institutional levels (household, state and market).

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[4] See: Gender + Migration Hub https://gendermigrationhub.org/ for information and resources on making migration policy and governance practices gender-responsive.

2. Taking measures to actively address the implications of the policy or programme for women, men, girls and boys so that gender inequality is not perpetuated including adopting tools for conducting gender analysis to understand underlying causes of gender inequality.
3. Creating a safe and respectful environment that promotes human dignity to produce positive outcomes for women, men, girls, and boys.

Key Findings

I.   Health and Wellness Café

Many refugees and asylum seekers come from countries afflicted by conflict and disrupted health systems, exposing them to many health risks (WHO, 2018). Even when they arrive in countries of first asylum, as urban refugees, or detained in camps, access to health services and nutrition programs is limited and/or restricted. When refugees and asylum seekers arrive in resettlement countries like Canada, access to health services, particularly mental health services, is still a major challenge (Mental Health Commission Canada [MHCC], 2009). Barriers to access include lack of knowledge about the existence of services, language barriers, financial barriers, stigma and isolation, and cultural practices and beliefs (MHCC, 2009). Significantly, legal status determines access to health care and intersects with other social and cultural barriers impacting the health of refugees. These barriers are compounded by the hurdles refugees and refugee claimants encounter while in flight in accessing health services, which have direct implications on their health. In the Kitchener-Waterloo and Cambridge region, refugees and refugee claimants struggle to make meaningful ties with their new communities resulting in social isolation that can negatively affect their health.

Addressing the impact of trauma on the physical and mental health of refugees around issues of family separation means incorporating different coping strategies and conflict resolution strategies that are non-conventional and go beyond traditional psychological therapy. The lack of support for mental health, particularly where past traumas remain unaddressed, was a major concern for refugees in the region, and in particular for LGBTQ2S+ refugees who face unique barriers to accessing support and services for violence or abuse. Importantly, in the region, refugee women, girls and non-gender conforming individuals need to access gender-specific interventions for sexual and reproductive health that are culturally-sensitive. Studies show that the cultural context in the provision and delivery of health service is important (Coburn & Gormally, 2018; Due et al., 2014), thus including refugees as key stakeholders in the policymaking process is paramount.

Best Practices Highlight:
- **Health Information Sessions for Refugees**: The refugee clinic at the Centre for Family Medicine[5] identified specific needs of their clientele and organized health information sessions on those topics. Translation was arranged in conjunction with the Kitchener-Waterloo Multicultural Centre[6]. **One-stop refugee health care**: Sanctuary Refugee Health Centre[7] offers patient-centred, evidence-based health care for vulnerable refugee newcomers to the Waterloo region, free of cost. Coverage during the interim period before claimants have a health card is key, as is the provision of all services in one place and translation services.

II.   Families Café

Many refugees and refugee claimants resettled in the Kitchener-Waterloo and Cambridge region are visible minorities and discrimination is a real threat to their welfare and integration into their

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[5]Center for Family Medicine, Waterloo, http://family-medicine.ca/
[6]Kitchener-Waterloo Multicultural Centre, https://kwmulticultural.ca/
[7]Sanctuary Refugee Health Centre, https://sanctuaryrefugee.ca/

communities. There is an 'othering' of refugees—notions about their families, structure of family units and family dynamics, parenting styles, sexual orientation, cultures, beliefs, and ideologies—by community members, service providers and policymakers. Policies on settlement and integration not only make assumptions rooted in the hetero-normative understanding of family as the nuclear family, but also in the ideas of masculinity and 'othering' of cultures. For some refugee families in the region, these assumptions have resulted in a breakdown between refugee parents/guardians and social service providers (child and family services). For example, single-parent refugee mothers are chastised as 'bad parents' for not attending school meetings attributed solely to cultural stereotypes rather than realities related to structural and systemic barriers. Family separation driven by violence, war and persecution, exile, and forced displacement is a source of trauma that transforms refugee family dynamics. The fragmentation of the family unit challenges refugee families to negotiate shifting gender and generational family roles. Thus, when thinking about refugee families, the idea of single-parent, orphan children, transnational and multigenerational families is fundamental, and avoiding narratives of 'empowering' women underlined by the assumptions of 'oppressed' and/or 'victim' is necessary.

Language acquisition also directly impacts the harmony of the family unit. In the Kitchener-Waterloo and Cambridge region, women linger behind men in language acquisition yet, it is women (especially mothers) who interact with Canadian institutions (e.g., attending parent-teacher school meetings, doctor visits, meeting with social workers, etc.). Attending public schools accelerates language acquisition for refugee children and youth because it is an immersive system of language acquisition. As children's language skills outpace those of the parents, there is a direct impact on intergenerational relations because language is connected to parents' identities and power/authority. An important question raised during the café discussion was how the younger generation (generation 1.5) can be empowered to assist their parents and extended family with language acquisition without this in itself becoming a burden on the children. There is a need for policymakers to consider how language acquisition, including resistance to learning a new language, is gendered and how it impacts both gender and intergenerational relations.

Best Practice Highlight:
- **Welcome to Guelph program**: The city of Guelph has created a program to issue Welcome to Guelph cards to refugees who have arrived in Canada in the last 12 months and reside in the city, as a way of supporting their transition. This gives newcomer refugees temporary free access to public transportation throughout the city, museums, public swimming and skating facilities, and other community recreational centres.

III.   Social Protection and Economic Security Café

In the Kitchener-Waterloo and Cambridge region, housing and food security were highlighted as intertwined challenges for refugees and especially those who arrive in Canada as government-assisted refugees (GARs), refugee claimants (Convention refugees), and asylum seekers. Homelessness and food insecurity are driven by lack of housing capacities, housing affordability and precarious employment within the region. According to the report released by Employment and Social Development Canada (2019), in 2016 there were 1,991 refugees, nationally, using emergency homeless shelters (not counting designated refugee shelters). This was a significant increase from 2014 (approx. 1,096 refugees in shelters). Importantly, shelters were accessed mainly as part of family units rather than individuals, and refugee families stayed almost twice as long in shelters as individual refugees.

Access to employment, training and recognition of skills is crucial to securing economic security. In the region, refugee men often jump into work for which they are ill-prepared and may feel exploited and vulnerable, while women refugees are channelled into care work, housekeeping and cleaning. Regardless, entry into the labour market ignores skills level and/or education levels. Access to childcare services is a key facilitator to labour market participation, especially for single-parent families, and as such family reunification becomes crucial for refugee families who have limited resources. Most refugee families

cannot sponsor family members and there are restrictions on admittance of older relatives and other family members, which presents a hardship for single-parent families who could use the support. Uprooted and without childcare, single-parent refugee families face a greater risk of social isolation, homelessness, food insecurity, and even SGBV/VAW. Refugee social protection requires more comprehensive and gender-responsive policies that increase employability, and reduce systemic barriers to help ensure the economic security for refugee families.

Best Practice Highlight:

- **Bank accounts for everyone**: In addition to helping refugees to learn how to search for information and navigate systems, Reception House[8] helps each individual—men and women—to open their own bank account and learn to use online banking. They also help create smoother pathways to employment.

IV.   Communities and Identities Café

In Ontario, refugees are usually settled in communities that reflect their ethno-cultural backgrounds as a way to mitigate social isolation and to speed up integration. There is an assumption, at the policy level, that the ethno-cultural community in which refugees are settled and its connections will absorb them, and services will be accessed through that community. However, many racialized immigrant communities, including those in the Kitchener-Waterloo and Cambridge region are usually located in isolated, stigmatized, underprivileged and underserved areas, and stereotypes about these communities are used to offer or withhold services. Regardless, the ethno-cultural communities to which refugees belong may not be as welcoming and may even see refugees as threatening the integrity of their communities. Moreover, service provision through the ethno-cultural community is difficult when one does not want to be seen as belonging to a particular marginalized group for fear of further persecution. For example, individuals from LGBTQ2S+ communities are a doubly 'hidden population' within the broader refugee population. For them their multiple identity intersections (e.g., trans, gay, black, woman, man, race, sexuality, religion, etc.) (d'Entremont, 2012; Morgan, 2006) are overshadowed by their refugee and cultural identities highlighting a blind spot around refugees as a heterogeneous social group set apart from their ethno-cultural community identity. This places LGBTQ2S+ individuals and families at risk of further persecution from within their own ethno-cultural communities in the region that identify strongly with hetero-normative ideals resulting in discriminatory practices in service provision and delivery. The welfare of refugees is interwoven with their experiences of exile (flight), their 'refugee' identity and/or their sexual identity. In this regard, the ethno-cultural community is not always well suited to address or even absorb refugees as they may still be 'at risk' for discrimination and/or SGBV/VAW. Policies that open up spaces for service provision and delivery not bound to ethno-cultural communities is a necessary step in preventing vulnerability through anonymity.

Best Practice Highlight:

- **Ethno-cultural meet-ups**: Community kitchen programming is another place where connections are formed and food security enhanced, especially among women refugees. House of Friendship[9] runs an emergency food hamper program that assists individuals and families. MCRS[10] helps bridge refugees and communities through advocacy and support networks.

Policy Recommendations

1) *Inclusive policies and funding mechanisms*: Gender-transformative policies are inclusive policies that work in tandem with inclusive funding strategies that go beyond supporting the same old 'siloed' organizations. This involves consulting and supporting new grassroots organizations, and funding innovative refugee-led programs and initiatives, while providing education/training

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[8]Reception House, https://receptionhouse.ca/
[9]House of Friendship, Food - House Of Friendship
[10]MCRS (Mennonite Coalition for Refugee Support), https://mcrs.ca/

for these organizations to continue providing their services in gender-transformative ways. This is a whole-system outlook that engages lateral thinking and a system-wide approach that addresses interwoven risk factors and barriers to integration.

2) ***Commitment to equity and gender-responsive training***: Working on transforming gendered cultural assumptions, and the narrative of women refugees as 'oppressed', 'victims' and 'vulnerable' on the part of policymakers, service providers, and community organizations. Addressing the gendered nature of violence and trauma in line with WHO (2018) recommendations, and providing preventive and remedial supports for both victims and perpetrators of SGBV/VAW to think through, dialogue, and cope with shifting gender expectations.

3) ***Building leadership capacity and scaling up community-based initiatives***: Supporting mentorship programs and information sessions on rights and employment norms. Developing educational programs for service providers for better programming, and training peer support organizations and facilitators/mentors for the purpose of knowledge creation to avoid continual creation of gendered and monolithic policies.

The key recurring motif for policy recommendation was inclusion

4) ***Inter-agency support and cooperation***: Collaboration between service providers is an important aspect of gender-responsive strategies. This includes providing a resource that advertises access (identify service providers) such that the people who need the services can identify, reach and navigate service providers and areas of safe spaces. This means making sure service providers in the region are aware of other services available in their local area to refer clients.

5) ***Robust referral system for LGBTQ2S+ individuals***: Creating a referral system between service providers, other social service agencies in the region, and with organizations that specifically serve and create safe spaces for LGBTQ2S+ individuals to enhance access and utilization of services. This includes increasing funding to LGBTQ2S+ service organizations so they may broaden their client base to include refugee LGBTQ2S+ community members.

Four Overall Policy Insights

***Accommodate diverse families*:** Refugee families may be transnational, intergenerational, multigenerational and/or LGBTQ2S+. Extended family and community members are important for both emotional support and practical assistance. Gender-responsive programming that accommodates all gender identities and family forms will strengthen diverse families.

***Use inclusive language*:** Non-binary, gender inclusive language that goes beyond "mom/dad" in outreach and programming materials signals a commitment to recognize and uphold the human rights of LGBTQ2S+ newcomers. Inclusive language promotes the dignity of refugees that puts people first, and respects their sexual and gender identities, ability, religion, race, and ethnicity.

***Consult & engage communities*:** Fostering dialogue about gender and sexuality, including sexual and gender-based violence (SGBV) and LGBTQ2S+ rights, within and across ethno-cultural communities and organizations serving refugees enhances capacity to identify and meet hidden needs. Talking together and sharing experiences in safe spaces fosters understanding and respect.

***Promote equal access to services*:** Building gender-responsive capacities in organizations and communities helps ensure non-discriminatory access to services including sexuality and gender services, reproductive health, counselling, gender confirming surgery, and beyond. Gender-responsiveness training and sharing of resources further enables the identification of and response to gender-specific needs of those seeking refuge in Canada.

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