

Input by civil society organisations to the Asylum Report 2023

Fields marked with * are mandatory.

Dear Colleagues,

The production of the *Asylum Report 2023* is currently underway. The annual [Asylum Report series](#) presents a comprehensive overview of developments in the field of asylum at the regional and national levels.

The report includes information and perspectives from various stakeholders, including experts from EU+ countries, civil society organisations, UNHCR and researchers. To this end, we invite you, our partners from civil society, academia and research institutions, to share with us your reporting on developments in asylum law, policies or practices in 2022 (and early 2023) by topic as presented in the online survey.

Please note that the Asylum Report does not seek to describe national systems in detail but rather to present key developments of the past year, including improvements and challenges which remain. Your input can cover practices of a specific EU+ country or the EU as a whole. You can complete all or only some of the sections.

All submissions are publicly accessible. For transparency, 2023 contributions will be published on the EUAA webpage. For reference, contributions to the 2022 Asylum Report by civil society organisations can be accessed [here](#), under 'Acknowledgements'. All contributions should be appropriately referenced. You may include links to supporting material, such as analytical studies, articles, reports, websites, press releases or position papers. If your organisation does not produce any publications, please make reference to other published materials, such as joint statements issued with other organisations. Some sources of information may be in a language other than English. In this case, please cite the original language and, if possible, provide one to two sentences describing the key messages in English.

The content of the Asylum Report is subject to terms of reference and volume limitations. Contributions from civil society organisations feed into EUAA's work in multiple ways and inform reports and analyses beyond the Asylum Report.

Your input matters to us and will be much appreciated!

Please complete the online survey and submit your contribution to the Asylum Report 2023 by Friday, 3 February 2023.

Instructions

Before completing the survey, please review the list of topics and types of information that should be included in your submission.

For each response, only include the following type of information:

- New developments and improvements in 2022 and new or remaining challenges; and
- Changes in policies or practices, transposition of legislation or institutional changes during 2022.

Please ensure that your responses remain within the scope of each section. Thus, kindly refrain from including information that goes beyond the thematic focus of each section or is not related to recent developments.

Contributions by topic

1. Access to territory and access to the asylum procedure (including first arrival to territory and registration, arrival at the border, application of the non-refoulement principle, the right to first response (shelter, food, medical treatment) and issues regarding border guards)

Intersex applicants face the following remaining challenges in relation to the asylum procedure: Intersex applicants continue to face discrimination and intersexphobic responses/remarks by border personnel, as well as being denied access to (in some, not all cases) vital healthcare services, such as access to hormones or other necessary medication. It is vital that information is provided about the need for intersex applicants to have access to healthcare services.

It is also vital to ensure that intersex applicants are not subjected to humiliating and degrading “body-searches” where their gender identity/expression does not match the gender identity marked in their official documentation, and that they are treated with respect, especially as regards respect to the gender they identify with/pronouns they wish to be used when referring to them.

Upon arrival, where shelters are gender-segregated, it is also vital to ensure that intersex applicants are not placed in shelters based on their perceived gender, but that applicants are placed in the appropriate shelter based on their self-identified gender.

2. Access to information and legal assistance (including counselling and representation)

Intersex applicants face the following remaining challenges in relation to access to information: The clear provision of information to intersex applicants about the possibility of claiming asylum on the grounds of SOGIESC (and for intersex specifically, on the grounds of “membership of a particular social group”), and support during the process of doing so, is in many cases lacking. Additionally, such information should be in an easy-read format and should be available in different languages, as well as be accessible to persons with disabilities.

3. Provision of interpretation services (e.g. introduction of innovative methods for interpretation, increase/decrease in the number of languages available, change in qualifications required for interpreters)

Intersex applicants face the following remaining challenges in relation to interpretation services:
There remains a gap to be filled around the required sensitivity to the reality of intersex persons, including an awareness and understanding of the fact that intersex persons may identify/self-describe using a range of different 'terms'.
It is essential that interpreters with knowledge about LGBTI issues, including knowledge about the correct terminology (non-stigmatising, non-pathologising/medicalising) language to be used. Avoid references to pathology (WHO ICD 11) unless the intersex person themselves is self-identifying or self-describing using a specific medical term. And even in these situations, ensure always asking the applicant which pronouns and terms they would like to be used.

4. Dublin procedures (including the organisational framework, practical developments, suspension of transfers to selected countries, detention in the framework of Dublin procedures)

5. Special procedures (including border procedures, procedures in transit zones, accelerated procedures, admissibility procedures, prioritised procedures or any special procedure for selected caseloads)

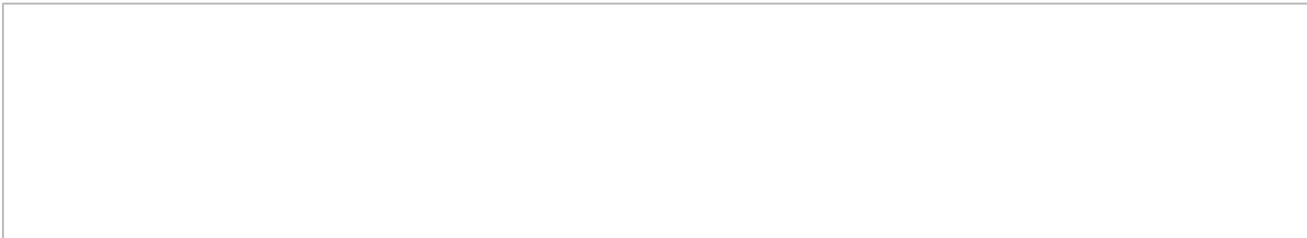
6. Reception of applicants for international protection (including information on reception capacities – increase/decrease/stable, material reception conditions - housing, food, clothing and financial support, contingency planning in reception, access to the labour market and vocational training, medical care, schooling and education, residence and freedom of movement)

Intersex applicants face the following remaining challenges in relation to material reception conditions and other areas such as medical care, residence, freedom of movement and access to the labour market:
Intersex asylum seekers have specific healthcare needs that are often not attended to: for example, some intersex applicants may require access to: hormones or hormone blockers, access to gender-affirming care, other necessary medication (steroids for salt-wasting, etc.)

7. Detention of applicants for international protection (including detention capacity – increase /decrease/stable, practices regarding detention, grounds for detention, alternatives to detention, time limit for detention)



8. Procedures at first instance (including relevant changes in: the authority in charge, organisation of the process, interviews, evidence assessment, determination of international protection status, decisionmaking, timeframes, case management - including backlog management)



9. Procedures at second instance (including organisation of the process, hearings, written procedures, timeframes, case management -including backlog management)

Intersex applicants face the following remaining challenges in relation to detention practices:

During hearings, especially in relation to the burden of proof, many intersex persons may be forced to prove their “being intersex/having a variation of sex characteristics” through medical examinations or the requirement to provide medical certificates/attestations which is re(traumatising) and does not respect the intersex person’s dignity and privacy. This is a remaining challenge for intersex applicants, and all staff involved in such procedures should avoid unnecessary, invasive and/or insensitive questions about the applicant’s body.

10. Availability and use of country of origin information (including organisation, methodology, products, databases, fact-finding missions, cooperation between stakeholders)

Intersex applicants continue to face challenges in relation to accurate country of origin information on the situation of intersex persons on the ground. Due to the systemic lack of data on the situation of intersex persons in many countries of origin globally, it is especially important that asylum and reception officials reach out to local intersex organisations, and if there is no intersex organisation, to reach out to the local LGBTIQ+ organisation who may be able to provide more information about the reality faced by intersex persons in their CoO whilst assessing the application (persecution/ discrimination/threat of violence/intersex genital mutilation).

11. Vulnerable applicants (including definitions, special reception facilities, identification mechanisms/referrals, procedural standards, provision of information, age assessment, legal guardianship and foster care for unaccompanied and separated children)

Intersex applicants should be considered among the groups of vulnerable applicants (among other LGBTIQ+ applicants). Intersex applicants have specific needs, and some of the remaining challenges that should be addressed relate to:

The need for a comprehensive understanding of PTSD and complex trauma; It is also important that there is an awareness among reception officials of what “coming out” means for intersex applicants, and that this process may be difficult/traumatic for some, as they may feel like they need to “come out” as intersex

repeatedly, for example when interacting with reception staff, or medical personnel. Here the principle of confidentiality is also very important: reception officials need to be extra careful to not “out” or disclose information about a person being intersex. It is also equally important to understand the need to access psychological support throughout the asylum procedure - including in a language that is accessible to the applicant - especially after the first interview, where the applicant may have had to recount and relive especially traumatic events.

12. Content of protection (including access to social security, social assistance, healthcare, housing and other basic services; integration into the labour market; measures to enhance language skills; measures to improve attainment in schooling and/or the education system and/or vocational training)

As regards housing/shelter for intersex applicants, where assistance is provided to help the applicant find housing solutions during the integration process - we recommend specifying that responsible officers should take into consideration the “self-identified gender” of applicants when deciding on the best placement in housing for intersex applicants in shared housing facilities.

It is vital that intersex applicants for asylum do not face discrimination during the procedure to apply for social security, where attempting to access healthcare services or any other basic services because of any real or perceived mismatch between the gender marker in their official identification documents and that of their self-identified gender/ or gender-expression.

13. Return of former applicants for international protection

14. Resettlement and humanitarian admission programmes (including EU Joint Resettlement Programme, national resettlement programme (UNHCR), National Humanitarian Admission Programme, private sponsorship programmes/schemes and ad hoc special programmes)

15. Relocation (ad hoc, emergency relocation; developments in activities organised under national schemes or on a bilateral basis)

16. National jurisprudence on international protection in 2022 (please include a link to the relevant case law and/or submit cases to the [EUAA Case Law Database](#))

17. Other important developments in 2022

References and sources

18. Please provide links to references and sources or upload any related material in PDF format

Link to OII Europe flyer on the needs and challenges on intersex refugees and asylum seekers outlining some of the points mentioned above:
<https://www.oiiurope.org/wp-content/uploads/2022/12/refugeeAsylum-flyer-oiiurope-2022.pdf>

19. Feedback or suggestions about the process or format for submissions to the Asylum Report

Please upload your file

The maximum file size is 1 MB

Contact details

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I accept the provisions of the EUAA [Legal and Privacy Statements](#)

Useful links

[EUAA Asylum Report 2022 \(https://euaa.europa.eu/asylum-knowledge/asylum-report\)](https://euaa.europa.eu/asylum-knowledge/asylum-report)

[Executive Summary -Asylum Report 2022 \(https://euaa.europa.eu/executive-summary-asylum-report-2022\)](https://euaa.europa.eu/executive-summary-asylum-report-2022)

[Sources on Asylum 2022 \(https://euaa.europa.eu/publications/sources-asylum-2022\)](https://euaa.europa.eu/publications/sources-asylum-2022)

[National asylum developments database \(https://euaa.europa.eu/national-asylum-developments-database\)](https://euaa.europa.eu/national-asylum-developments-database)

Background Documents

[Word template to submit input](#)

Contact

[Contact Form](#)