Guide on working with migrant and refugee boys and men survivors of sexual violence

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Introduction

Sexual violence against migrant and refugee boys and men is a deeply underrecognized and stigmatized issue. Due to rigid gender norms and societal misconceptions, male survivors are often overlooked in research, policy, and support services. Studies suggest at least 1 in 6 men have experienced sexual abuse, though this likely underrepresents the true scale—especially in conflict zones, where the risk is heightened.

Key factors contribute to this underestimation: cultural norms discourage disclosure due to shame and fear of emasculation, and sexual violence is often used as a weapon of war, particularly in detention settings. Most data and support systems focus

on women and girls, leaving male survivors largely invisible. Additionally, humanitarian and legal frameworks often fail to address the specific needs of male survivors, limiting access to psychological, medical, and legal aid.

Men may delay seeking help for years, and many report long-term impacts such as anger, substance abuse, and reduced quality of life. Addressing this issue requires targeted research, inclusive support services, and a shift in societal attitudes to ensure all survivors are recognized and supported. This guide offers practical insights for professionals working with male survivors in migrant and refugee populations.



Men may delay seeking help for years

What is sexual violence?

Sexual violence involves coercing or forcing someone into unwanted sexual acts. Refugees are especially vulnerable due to trauma, displacement, loss of support, and lack of legal protection. Perpetrators can include other refugees, traffickers, aid workers, or host community members, making justice and support harder to access.

Most common forms of sexual violence:

Rape or sexual assault.

This refers to any form of sexual activity or penetration carried out without consent or under coercion. It can involve physical force, threats, or manipulation to obtain sexual contact.

Child sexual assault and incest.



Child sexual assault is any sexual activity with a minor, which is always considered non-consensual due to a child's inability to give informed consent. Incest involves sexual contact between family members who are too closely related to legally or ethically engage in such a relationship.

Intimate partner sexual assault.

This occurs when one partner forces or coerces the other into sexual acts without consent. It can be accompanied by emotional, psychological, or physical abuse.

Unwanted sexual contact/touching.

This encompasses any nonconsensual physical contact of a sexual nature, such as groping or fondling.

Sexual harassment and exploitation.

Sexual harassment involves unwelcome sexual advances or conduct of a sexual nature that creates a hostile environment. Exploitation refers to taking advantage of someone's vulnerability or power imbalance for sexual gain or other benefits.

Insertion of objects into the genitals.

This refers to forcibly or nonconsensually inserting an object into another person's genital area, causing severe physical and psychological harm. It is considered a grave form of sexual violence and can be used as a method of torture.

Showing one's genitals or naked body to others without consent.

Often termed indecent exposure, this involves displaying intimate body parts without the onlookers' agreement. It is a form of sexual misconduct that can create fear, distress, or intimidation.

Watching someone in a private act without their knowledge or permission. This includes spying on or recording a person engaged in private activities, such as undressing or sexual acts. It is a violation of privacy

and considered a form of sexual exploitation.

Prostitution and human trafficking.

Prostitution involves exchanging sexual services for payment or other benefits, but it becomes exploitative when individuals are forced or coerced. Human trafficking is the recruitment, transportation, or harboring of persons through force, fraud, or coercion for the purpose of exploitation, including sexual exploitation.

The perpetrator is always responsible for the sexual violence and never the survivor!

Recognizing the sexual violence refugees face highlights the need for comprehensive protections, survivor-centered support, and accountability. Humanitarian actors, communities, and policymakers must collaborate to create safer environments, provide care, and prevent further harm.

Common survivors' reactions to sexual violence

Sexual violence affects people differently—there's no "right" or "wrong" reaction. Responses can

include freezing, fighting back, fleeing, or feeling powerless. Memory gaps are common, and many survivors may choose not to disclose or report. The key is never to pressure anyone to share before they're ready.

What to do if a person shares that he experienced sexual violence?

Supporting those who have experienced sexual violence requires a respectful, empathetic approach that centers their needs and autonomy. Creating a safe, confidential space builds trust. Avoid assumptions or judgments to prevent adding to survivors' shame or guilt. Use empowering language like "survivor," but respect individuals' preferred terms, especially with men. Always prioritize consent and autonomy by asking permission before touching or discussing sensitive topics, allowing survivors to control their own narrative and maintain body autonomy. Active listening creates a safe, confidential space where survivors feel heard and

validated. Approach with empathy, avoid judgment, and recognize their emotions as normal trauma responses to support healing.

These are resources where you can get help or share that you or someone you know experienced sexual violence:

Prabilk.lt

Vaikų linija

Jaunimo linija

Vyrulinija.lt

Lietuvos moterų linija (Although primarily aimed at women, many services are equipped to assist all survivors of sexual violence)

Consequences of sexual violence/abuse

Sexual violence can have a wide range of outcomes, with each individual experiencing its effects uniquely. Here are some more common examples:

- Isolation: Individuals may withdraw from friends and family, finding it challenging to trust others and often feeling emotionally detached.
- Anxiety: Many experience ongoing anxiety, panic attacks, and intense fears triggered by reminders of the trauma, often associated with specific places or situations.
- **Depression:** A sense of emotional numbness can set in, leading to a loss of interest in activities that were once enjoyable, along with pervasive hopelessness about the future.
- Problems: Difficulties in maintaining healthy personal and professional relationships can arise due to challenges in trust.

- Physical Symptoms: Persistent bodily pain, such as recurring headaches, stomach aches, chronic exhaustion, and low energy, can manifest as a direct response to the trauma.
- of shame, powerlessness, and worthlessness are common, as survivors may internalize negative beliefs about themselves.
- Sexual Difficulties: Survivors may develop a fear of intimacy, experience flashbacks or emotional numbness during sexual encounters. Sometimes engage in risky sexual behavior.
- Addictions/Obsessions: As a coping mechanism, some might turn to substance abuse, compulsive shopping, gambling, or overworking in an attempt to suppress painful memories.

Working with survivors

- Using trauma informed care. Using a trauma-informed care approach is vital when supporting male survivors of sexual violence. This method recognizes the deep emotional and psychological impact of trauma and emphasizes sensitivity, safety, and support. Male survivors may face pressure to suppress emotions, making trust and openness difficult. Professionals should respond with patience, compassion, and a gradual approach to building rapport.
- Respectful and culturally sensitive services. Trauma-informed care should be respectful, culturally sensitive, and accessible. Refugee boys and men may have specific cultural and linguistic needs, so support must align with their values and backgrounds to ensure effective, appropriate care.
- Establishing a relationship of trust. Building trust with survivors takes time and can't be rushed.

 Let them share at their own pace without pressure. Start by connecting through their interests, using games or activities or sharing favorite

videos. These casual interactions can strengthen bonds and open the door to deeper conversations.

- Getting to know individual
- triggers. Professionals should be aware of emotional triggers that may remind survivors of past trauma—such as certain places, sounds, or words. While some survivors can name their triggers, others may simply show distress. Being observant and flexible helps reduce retraumatization. If signs of discomfort arise, it's important to acknowledge them and offer the survivor space or a break.
- Education about emotions

 and coping mechanisms. For male
 survivors of sexual violence, learning
 healthy coping skills and emotional
 regulation is key to healing. Trauma
 can disrupt emotional responses,
 leading to shame, anger, or confusion.
 Normalizing emotional expression
 helps survivors feel empowered.
 Teaching mindfulness techniques
 like deep breathing, grounding,
 and meditation can reduce anxiety,
 flashbacks, and panic, helping
 survivors regain a sense of calm and
 control.

- Another important area of focus is cognitive reframing or challenging negative thoughts. Cognitive reframing is key to healing, as many survivors struggle with guilt, shame, or self-blame. Helping them challenge these thoughts and recognize the trauma wasn't their fault supports self-esteem and resilience. Teaching stress management can also help refugee boys and men cope with ongoing pressures and improve well-being.
- A key aspect is **focusing on empowerment.** Empowerment is
 vital for healing, as sexual violence
 often leaves survivors feeling
 powerless. Supporting their strength
 and resilience by offering choices
 in care and daily decisions helps
 restore agency. Educating survivors

- about consent, physical boundaries, and body autonomy is also key to rebuilding control and self-respect.
- Also, encouraging to form communities and support networks is vital for recovery. Connecting with peer groups, trusted friends, family, and mental health professionals provides ongoing support. Group therapy and community programs offer safe spaces to share experiences, gain insights, and learn from others facing similar challenges.
- Lastly, **healing is not linear**, and setbacks are common. Survivors may face emotional ups and downs, so it's important to be patient, consistent, and normalize seeking support, creating a safe space for healing at their own pace.

In sum, trauma-informed care is an essential framework for working with male refugees who have survived sexual violence. By being empathetic, patient, and respectful, and by ensuring that services are flexible and empowering, we can help survivors navigate the complex path toward recovery.