Joint Submission to the United Nations Human Rights Council for the Third Universal Periodic Review of the Kingdom of Cambodia

Sexual Orientation, Gender Identity and Expression and Sex Characteristics (SOGIESC) Rights and Sexual Reproductive Health and Rights (SRHR) in Cambodia

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1. Introduction

1. This joint submission to the third Universal Periodic Review (“UPR”) of the Kingdom of Cambodia (“Cambodia”) was prepared by the Cambodian Center for Human Rights (“CCHR”),1 Rainbow Community Kampuchea (“RoCK”),2 Destination Justice (“DJ”),3 Micro Rainbow International (“MRI”)4, and the Reproductive Health Association of Cambodia (“RHAC”),5 and is also endorsed by the International Lesbian, Gay, Bisexual, Trans and Intersex Association (“ILGA”),6 ILGA Asia,7 ASEAN Sexual Orientation and Gender Identity/Expression Caucus (“ASC”),8 the Swedish Association for Sexuality Education (“RFSU”),9 ActionAid Cambodia,10 DanChurchAid (“DCA”) Cambodia,11 and CamASEAN.12 This submission focuses on Cambodia’s compliance with its international human rights obligations in respect to Sexual Orientation, Gender identity and Expression and Sex Characteristics (“SOGIESC”) rights and Sexual and Reproductive Health and Rights (“SRHR”).

2. During Cambodia’s second UPR in 2014, no recommendations were made to the Royal Government of Cambodia (“RGC”) specifically regarding the rights of Lesbian, Gay, Bisexual, Transgender, Intersex, Queer (“LGBTIQ”) people, two recommendations addressed SRHR specifically.13

3. Cambodia’s LGBTIQ communities and activists enjoy relative visibility, with a wide range of LGBTIQ events taking place and with select support from members and institutions of the Royal Government of Cambodia (“RGC”). The Ministry of Education Youth and Sport (“MOEYS”)’s current work to revise the ‘Life skills’ curriculum to include SOGIESC rights is particularly commendable. However, several discriminatory laws and policies remain in place, as do discriminatory practices, including by the Cambodian police. While commendable progress has been made in respect of LGBTIQ inclusion in Cambodia, LGBTIQ people in Cambodia continue to endure various forms of legal and social discrimination, and significant steps by the RGC are required to ensure Cambodia’s compliance with its international human rights obligations in respect of LGBTIQ rights.
Methodology

4. Ahead of the third UPR of Cambodia, CCHR and RoCK held a national consultation to prepare a submission focused on SOGIESC rights and SRHR. Partners came together during several consultation meetings with civil society organizations (“CSOs”) and communities, in order to identify the most pressing issues regarding the rights of LGBTIQ people in Cambodia. This joint submission examines the following key issues: legal discrimination against LGBTIQ people; social discrimination against LGBTIQ people; employment opportunities and the economic situation of LGBTIQ people; the status of intersex persons; health rights of LGBTIQ people; and achieving SOGIESC-inclusive comprehensive sexuality education (“CSE”) in schools.

2. Legal discrimination against LGBTIQ people

5. LGBTIQ people in Cambodia face numerous forms of discrimination, partly because of a legal framework which denies them basic equality. Four forms of legal discrimination are presented in this section: the lack of legal protection against discrimination and violence against LGBTIQ people; the absence of legal recognition of self-defined gender identity; the absence of marriage equality in Cambodian law; and the denial of full adoption rights to rainbow couples.

Protection against discrimination and violence

6. The Cambodian legal framework contains no explicit protections against discrimination on the grounds of SOGIESC. Article 31 of the Cambodian Constitution guarantees equal rights to all Cambodians regardless of personal characteristics, and while LGBTIQ people are arguably protected under the “other status” category, the explicit inclusion of nine other categories appears to diminish this argument. The Criminal Code of the Kingdom of Cambodia (“Criminal Code”) similarly does not include SOGIESC as a prohibited basis for discrimination.

7. The Criminal Code contains no defined sanctions for those who commit hate crimes against LGBTIQ people. The lack of explicit anti-discrimination protections, combined with the absence of defined sanctions for those who commit hate crimes, is particularly concerning in the Cambodian context, where LGBTIQ individuals face numerous forms of
discrimination and violence in their daily lives.\textsuperscript{18} For instance, 92\% of transgender women surveyed by CCHR in 2016 reported experiencing verbal abuse in public spaces because of their trans identities, while 43\% reported experiencing physical violence and 31\% experiencing sexual assault.\textsuperscript{19} The high incidence of violence against LGBTIQ people was also noted by the UN Special Rapporteur on the situation of human rights in Cambodia in 2017.\textsuperscript{20}

\begin{enumerate}
\item Article 2(1) of the International Covenant on Civil Political Rights (the “ICCPR”) has been authoritatively interpreted by the UN Human Rights Committee to prohibit discrimination on the basis of sexual orientation and gender identity.\textsuperscript{21} As a party to the ICCPR, Cambodia has a positive obligation to ensure ICCPR rights, including by taking legislative measures to protect individuals against violations of ICCPR rights committed by state and private actors.\textsuperscript{22}

\textit{Legal gender recognition}

\item Legal gender recognition entails that legislative and administrative procedures are put in place which enable transgender people’s self-defined gender to be reflected on their official identification documents, such as birth certificates, ID cards, passports and driver’s licenses. In Cambodia, there is no legislation which supports transgender people’s right to be legally recognized according to their self-defined gender. However, there is no specific legal provision prohibiting legal gender recognition either. The lack of clarity surrounding the current legal situation leaves transgender Cambodians subject to individual decisions of relevant officials.\textsuperscript{23}

\item Although the right to legal gender recognition is not explicitly listed as a stand-alone right in any of the international human rights treaties to which Cambodia is a party, its realization is required in order to fulfill a range of other fundamental human rights for transgender people which Cambodia has a specific obligation to protect, such as the right to recognition everywhere as a person before the law,\textsuperscript{24} the right to free development of personality,\textsuperscript{25} and the right to be free from discrimination.\textsuperscript{26}

\item Legal recognition of self-defined gender identity is also inextricably linked to the ability to found a family, marry and adopt children, especially in Cambodia where one survey
conducted by CCHR revealed that 99.17% of the cohabiting same-sex couples surveyed were comprised of one partner who identifies as transgender, and one who does not. Legal gender recognition would therefore enable a vast majority of these couples to marry and adopt under the existing laws governing marriage and adoption, without requiring any amendment to marriage or adoption laws.

**Marriage equality**

12. Legal recognition of same-sex partnerships is impossible under the current Cambodian legal system. The Cambodian Constitution, at Article 45, determines that marriage is between a “husband” and a “wife”, which effectively excludes the possibility of same-sex marriage. Encouragingly, however, the adoption of the 2007 Civil Code, and the 2011 Law on the Implementation of the Civil Code, repealed a previous explicit prohibition on same-sex marriage. While there is no longer any explicit legal prohibition of same-sex marriage, there are no explicit provisions facilitating same-sex marriage. As a result, unofficial wedding ceremonies and parties can be held; however, legal recognition of these partnerships is impossible. International human rights law has not yet recognized an explicit right to marriage equality; however, it does guarantee non-discrimination in all areas of life.

13. Many currently co-habiting couples with two partners of the same sex or in which one or both partners identify as transgender (“rainbow couples”) across Cambodia already live as spouses, and some of them conduct unofficial wedding ceremonies. The institution of marriage is exceptionally highly-valued in Cambodia, and excluding LGBTIQ people from the institution of marriage excludes them from one of the foundations of Cambodian society. A 2017 survey of rainbow couples revealed that 21.50% of them had received legal recognition in the form of family books issued by local authorities, despite the apparent lack of a legal basis. Many of these family books navigate legal restrictions by classifying these couples as husband and wife or siblings. There is however a significant disparity among the different provinces in terms of issuance of family books to rainbow couples, highlighting an inconsistent interpretation and application of the laws at local levels.
14. Encouragingly, most rainbow couples in Cambodia feel generally and increasingly accepted by their communities: 48.60% of respondents in CCHR’s survey stated that their community was “very accepting” of them as part of a rainbow couple, and another 29.91% “somewhat accepting”. An overwhelming majority of currently co-habitating rainbow couples (87.85% of respondents in CCHR’s survey) perceive marriage equality to be vital in reducing remaining discrimination.

15. Due to rainbow couples’ inability to get legally married, they are also denied numerous rights and privileges arising from marriage, including in relation to joint ownership of property, custody of children, taxation, inheritance and protection from domestic abuse. However, a vast majority of rainbow couples lack understanding regarding their legal rights or lack thereof in these respects, and often believe they have more rights than they actually have, leaving them in a highly vulnerable position. This lack of legal knowledge means that rainbow couples are far less likely to take steps to mitigate the lack of privileges and rights afforded to them, such as making a will.

Adoption

16. The Civil Code establishes that “full adoption” is only available to married couples, effectively denying full adoption rights to rainbow couples as long as marriage equality remains unavailable. The Civil Code also outlines one other type of adoption, “simple adoption”, which enables a single person to adopt. In theory, this permits one person in a rainbow couple to adopt a child on behalf of the couple. Many currently co-habitating rainbow couples across Cambodia already have children in their care, in 32.71% of such couples surveyed by CCHR (in 2016), one partner had adopted a child. Over two-thirds of these adoptions were based on “simple adoption” or informal agreements, and 40% of couples had adopted family members such as nephews or nieces.

17. However, in simple adoptions, the partner who has not adopted the child is left without essential legal protection in the event of the death of the adoptive parent or the end of the relationship. Furthermore, the rights of the adoptive parent under simple adoption are not as protected as they are in respect of full adoption. Simple adoption, unlike full adoption, maintains a legal relationship between the child and their biological parents, and
apparently does not establish any hierarchy of rights between the adoptive parent and the biological parents, creating legal uncertainty and vulnerability for the adoptive parent.

18. The Convention on the Rights of the Child ("CRC"), to which Cambodia is a party, provides that “State Parties shall act in accordance with their national laws to ensure alternative care” for a child who is temporarily or permanently deprived of his or her family environment, and states that within a system of adoption the paramount consideration shall be “the best interests of the child.” In Cambodia, nearly one in 100 children live in residential care institutions, and the RGC has recently made a commitment to reduce the number of children in residential care. Enabling full adoption rights for rainbow families could go some way toward ensuring that all Cambodian children are provided with a loving, protective family environment, in support of the government’s commitment, and of the Sustainable Development Goals’ principle of “leaving no one behind.”

Recommendations

i. Introduce an Anti-Discrimination Law by the end of 2023, which guarantees equality and explicitly prohibits discrimination of all kinds, including on the basis of SOCIESC, in all areas of public and private life, including in employment, education and access to health care, by all private and state actors, in line with SDG 5.1.

ii. Introduces the specific offence of “hate crimes” into the Criminal Code by the end of 2023, in line with international best practice, including appropriate punishments for the perpetrators of hate crimes against LGBTIQ people and other minorities, in line with SDGs 5.1, 5.2, 16.1 and 16.2.

iii. Introduce a Gender Recognition Law by the end of 2021, which guarantees every person the right to have their self-defined gender identity recognized on all official documents issued by the state (including ID cards, family books, passports, etc.) through a simple administrative procedure based on self-determination.

iv. Amend Article 45 of the constitution to enable legal marriage equality by the end of 2022, and ensure that any two consenting adults can marry each other in the same manner currently available to heterosexual couples.
v. Amend the relevant provisions of the Civil Code (Articles 1008-1015) governing adoption to guarantee that full adoption rights are made available to any couple, provided it can be shown that the adoption is “in the best interests of the child” without discrimination on the basis of SOGIESC or any other status, by the end of 2021.

vi. Issue a directive which clearly articulates the right of all rainbow families to receive family books that classify them according to their self-defined gender identities and actual family relationships, by the end of 2021.

3. Social discrimination against LGBTIQ people

19. Despite the fact that the LGBTIQ community in Cambodia is becoming more visible, in part due to a growing LGBTIQ rights movement and a context lacking strong religious or institutional opposition, Cambodian LGBTIQ people continue to be discriminated against and excluded in several areas of social life. This section reviews general perceptions of LGBTIQ people in Cambodia and presents specific forms of social discrimination and exclusion of LGBTIQ people within the family sphere and in schools, as well as the extent of gender-based violence (“GBV”) committed against LGBTIQ people. These forms of discrimination and exclusion in the social sphere have considerable consequences for the lives of LGBTIQ people and perpetuate a situation of inequality. Moreover, it is the responsibility of the RGC to put policies in place which ensure the social protection and inclusion of LGBTIQ people, in order that their human rights can be fulfilled and protected.

**Discrimination from family members**

20. Despite increasing acceptance by their communities, LGBTIQ people in Cambodia continue to face some level of exclusion from their families. In a 2015 country-wide survey, RoCK found that LGBTIQ people limit their coming out to close friends (77%) and immediate family members (54%) for fear of being discriminated, judged, bullied, and harassed in their daily lives. The survey also revealed that almost one-third of LGBT people never “come out” (29%) and more than one-fifth of LGBT respondents (21%) wish they were straight.
21. Almost one-fifth of heterosexual parents interviewed in RoCK’s survey (17%) said they would force their children to date the opposite sex and ultimately may force them into a marriage, ignoring the fact that forced marriage is in breach of the Cambodian Constitution.\(^{57}\) In a survey of transgender women in urban centers in 2016, over half of the respondents (53.49%) said a family member had tried to force them to get married in the past.\(^ {58}\) This survey also revealed that 48.85% of respondents have felt they needed to leave home because of their gender identity, and that 15.27% have at some point been kicked out of their family home, which points to the extent of exclusion from families due to transgender identity.\(^ {59}\)

**General public perceptions of LGBTIQ people**

22. The RGC has taken some steps in order to address the representation of LGBTIQ people in the media. In 2015, the Ministry of Information issued a statement calling on members of the media to stop mocking the LGBT community.\(^ {60}\) The same year, after talks with LGBTIQ activists, Information Minister Khieu Kanharith indicated support for an LGBTIQ roundtable on State television.\(^ {61}\) In 2017, the Information Minister also announced the creation of a committee to observe and receive complaints from auditors witnessing discriminatory content in the media.\(^ {62}\)

23. Pride celebrations have been organized in Cambodia since 2009, with increasing visibility and participation.\(^ {63}\) Despite this, persistent discrimination and exclusion continue to hamper the realization of the rights of LGBTIQ people.\(^ {64}\)

24. CCHR’s 2017 survey encouragingly highlights that rainbow families report high levels of acceptance from their communities.\(^ {65}\) Many of the survey respondents reported an improvement in this regard because of Cambodia’s LGBTIQ rights movement gaining in prominence. Encouragingly, this suggests that further advances in the legal recognition of LGBTIQ rights could lead to increased levels of acceptance, inclusion and understanding of SOGIESC in Cambodia.\(^ {66}\)
Bullying and exclusion in schools

25. A survey of LGBTIQ youth conducted by CCHR in 2015 revealed that 62.71% of respondents experienced bullying at any point during their time in school, and 93.59% of them felt the bullying was either partly or entirely because of their SOGIE. Such SOGIE-related bullying can have a damaging effect on the academic potential of many of Cambodia’s LGBTIQ youth, and also significantly impact their emotional and psychological wellbeing. In addition to other forms of bullying, widespread gendered uniform policies make LGBTIQ children feel particularly uncomfortable. For instance, over a quarter of participants (26.89%) in CCHR’s survey said that their teacher did enforce uniform standards with which they felt uncomfortable, and this number rose to 40.48% for survey takers who identified as transgender.

26. The RGC has taken some positive and noteworthy steps in order to address the issue of bullying of LGBTIQ children in schools. In 2015, the Cambodian Ministry of Education, Youth and Sports (“MOEYS”) partnered with NGOs to conduct sensitivity training for teachers in order to combat bullying of LGBTIQ youth. Moreover, the MOEYS, in partnership with NGOs, developed a proposed new “Life Skills” curriculum in 2017 that offers inclusive instruction on LGBTIQ issues, sexual education and GBV. This new handbook is meant to become part of the mandatory curriculum in public schools and is scheduled to be available nationwide by 2023 (see further details in section 7).

27. Cambodia is a party to the CRC which provides for the right to education, and contains provisions on non-discrimination which have been interpreted by the Committee on the Rights of the Child to include a prohibition of LGBTIQ discrimination. Although non-binding, the Yogyakarta Principle number 16 states that “Everyone has the right to education, without discrimination on the basis of, and taking into account, their sexual orientation and gender identity.” and alludes to the existence of seven positive obligations on states to take legislative measures which are aimed at eliminating all forms of discrimination against LGBTIQ people in the education system, including the formulation of policies and laws to combat bullying on the basis of SOGIE.
Gender-Based Violence

28. Although Cambodia did not receive any specific recommendations on SOGIESC and LGBTIQ rights during its second UPR review, the RGC received two recommendations on gender equality and gender-based discrimination and violence, which are also relevant for LGBTIQ individuals.75

29. In 2014, The Ministry of Women’s Affairs’ five-year strategic plan noted that bisexual women and trans persons are among the most vulnerable groups in society, facing a higher risk of discrimination, stigma and GBV.76 Despite this acknowledgment by the RGC, LGBTIQ people in Cambodia still endure high levels of GBV, affecting in particular transgender women.

30. In a 2016 survey conducted by CCHR, nearly all trans women surveyed reported having experienced some kind of harassment while in public spaces because of their trans identities, in most cases multiple times over the course of a year.77 92% of trans women surveyed experienced verbal abuse, 43% physical violence, 31% sexual assault, and 25% rape.78 Similarly, in a 2016 study by the National Center for HIV/AIDS, Dermatology and STD (“NCHADS”), 39.2% of trans women reported having been sexually abused and 23.6% reported having been physically abused or beaten.79

31. In addition 38.7% of transgender women surveyed by CCHR had been arrested by the police at least once, of which 91.67% believed the police arrested them because of their gender identities, and 33.58% reported having been wrongly accused of a crime.80 Furthermore, CCHR’s study revealed that trans women working as sex workers experience significantly higher harassment by the police compared to non-sex workers trans women: 58.33% of trans women working as sex workers reported being harassed or bullied by the police because they are transgender, and 46.94% of sex workers report being wrongly accused of a crime by the police, in comparison with 25.88% of non-sex workers.81
Recommendations

vii. Adopt specific policies of non-discrimination on the basis of SOGIESC across all Cambodian public services, in priority in the education system (in line with SDG 4), health sector (in line with SDG 3), in the media, and in the police departments at the local and national level (in line with SDG 16), by 2020, and pursue proactive awareness raising initiatives to increase understanding of LGBTIQ rights among the general public and government officials.

viii. Establish child protection mechanisms in schools to ensure that they are capable to monitor and respond to SOGIESC-based discrimination and violence, before 2020.

ix. Ensure that all students are permitted to choose to wear school uniforms which conform to their self-defined gender identity, in public and private education systems, by 2020.

4. Employment opportunities and the economic situation of LGBTIQ people

32. LGBTIQ people in Cambodia face discrimination in accessing and keeping employment, as well as discrimination and exclusion in the workplace. This section also addresses the economic situation of LGBTIQ people, and the stigmatization and discrimination suffered by LGBTIQ sex workers.

Discrimination in accessing employment and in the workplace

33. Article 12 of the Cambodian Labor Law contains provisions on non-discrimination in employment, but fails to explicitly recognize SOGIESC as a basis for non-discrimination. Article 6 of the International Covenant on Economic, Social and Cultural Rights (“ICESCR”), to which Cambodia is a party, recognizes the “right to work”, and the UN Committee on Economic, Social and Cultural Rights has authoritatively interpreted this right as meaning that the labor market should be open to everyone, without any discrimination, including based on sexual orientation. Furthermore, pursuant to article 2 of the ICESCR, States Parties must “guarantee that the rights enunciated in the present Covenant will be exercised without discrimination of any kind as to […] or other
“status”, and the Committee stated that “other status” includes sexual orientation and gender identity.

34. Research on transgender women in Cambodia conducted by CCHR in 2016 revealed that transgender women face significant discrimination in employment, with difficulties in gaining and keeping formal employment. More than one-third (34.35%) of all respondents reported having been refused a job because they are transgender, and 26.62% of all respondents said they had been dismissed from a job because of their SOGIE. Similar findings from a study conducted by the NCHADS in 2016 found that 42.1% of trans women surveyed experienced problems getting a job, whereas 24.3% experienced losing a job.

35. In addition to discrimination in accessing employment, LGBTIQ people in Cambodia also experience exclusion and discrimination in the workplace. CCHR has previously collected evidence of high levels of reported mistreatment in the workplace for transgender women, including harassment and bullying: 26.72% of trans women surveyed by CCHR reported having been previously harassed or bullied by a boss or colleagues on the basis of their SOGIE.

**Economic situation of LGBTIQ people**

36. A nationwide survey conducted by RoCK in 2015 found that the top 6 occupations for LGBTIQ individuals in Cambodia are: (1) farmer; (2) self-employed / merchant; (3) student; (4) garment worker; (5) service industry; and (6) agricultural worker. The study of transgender women in urban centers carried out by CCHR in 2016 revealed that, in large part as a result of discriminations in employment, trans women face high rates of unemployment and are often relegated to seeking work in narrow, marginalized or feminized occupations (such as sex work, hairdressing, makeup artistry, or laundry). CCHR’s study and other research also indicated these narrow career sector choices might also partially result from internalized self-limitation developed by transgender women within the wider context of social discrimination.
37. LGBTIQ people in Cambodia work principally in certain marginalized sectors, which prevents them from escaping the cycle of poverty. This is exacerbated by widespread family rejection and exclusion in schools and the wider community,\textsuperscript{94} which leads many LGBTIQ people to leave their hometowns and in turn, creates additional precariousness.\textsuperscript{95} Fully incorporating LGBTIQ people into the Cambodian workforce would firstly reduce the poverty of LGBTIQ people themselves, and secondly reap economic benefits for the country as a whole.

\textit{Stigmatization and discrimination against LGBTIQ sex workers}

38. CCHR’s 2016 survey of transgender women suggest that discrimination on the part of employers could be a major factor in leading trans women to turn toward sex work.\textsuperscript{96} CCHR’s survey also revealed that transgender women who engage in sex work suffer from severe discrimination in most areas of life.\textsuperscript{97} Significantly, of those who reported engaging in sex work at some point in the past, 95.74\% have been verbally harassed, 91.3\% physically assaulted and 85.11\% sexually assaulted while engaging in sex work.\textsuperscript{98} Stigma and discrimination against transgender women engaging in sex work also extends to their private lives.\textsuperscript{99}

\textbf{Recommendations}

x. Amend Article 12 of the 1997 Labor Law to include a provision prohibiting discrimination in employment on the basis of SOGIESC, in public and private employment, including in relation to vocational training, recruitment, promotion, dismissal, conditions of employment and remuneration, by the end of 2021, in line with SDG 8.5.\textsuperscript{100}

xi. Implement initiatives aimed at ensuring LGBTIQ people’s right to work, including vocational training programmes.

xii. Ensure the effective protection of LGBTIQ people who engage in sex work, in line with SDG 8.
5. Status of intersex persons\textsuperscript{101} in Cambodia

39. The status of intersex people is largely unexplored in Cambodia. There is a complete absence of government data and published research on intersex people and the issues they may face in Cambodia with regards to access to physical and psychological health services, with regards to bullying and exclusion, or surgery practices regarding the sex characteristics of intersex infants and children.

Recommendations:

xiii. Respect, protect and fulfill intersex persons rights in all legislation, policies and programs in particular in health, employment and education.

xiv. Undertake research on the situation and needs of intersex people in Cambodia after consulting with intersex expert(s) and communities, by 2022.

xv. Ensure that all medical procedures are consistent with applicable human rights standards including psychological support to the intersex community. In particular safeguard that no non-consensual, medically unnecessary surgeries or procedures are performed on intersex infants and children.

6. Health Rights of LGBTIQ people

40. During its Second UPR, Cambodia received and supported 16 recommendations on the right to health, two of which directly address SRHR.\textsuperscript{102} However, LGBTIQ people in Cambodia continue to face several barriers to the full enjoyment of their right to health. There is limited knowledge and understanding on SOGIESC among health professionals in Cambodia, and sensitization and capacity-building on this issue has been very limited so far. As a result, limitations remain in terms of offering LGBTIQ friendly health services that address the needs of LGBTIQ people. This section reviews access to treatment for LGBTIQ people living with HIV/AIDs, access to holistic health care for transgender people, and access to safe and legal abortions for lesbians and transgender men.
Access to treatment for LGBTIQ individuals living with HIV/AIDS

41. Under the Second UPR cycle, the RGC accepted the recommendation to “Provide free treatment to women and men living with HIV/AIDS to prevent mother-child transmission.” There have been positive developments in Cambodia’s HIV response in the past two decades.

42. Despite this progress, HIV prevalence remains high among at-risk populations including entertainment workers, men who have sex with men, transgender women and people who inject drugs. Furthermore, young LGBTIQ people under the age of eighteen are ordinarily denied access to HIV testing under existing laws and policies, which often impedes their ability to get tested. Critical legal and structural barriers and stigma and discrimination towards at-risk communities remain, which continues to hamper access to HIV-related health and non-health services by these groups. Furthermore, consistent condom use among these groups HIV testing, and sexually transmitted infections screening remain low.

43. Cambodia has committed to ending AIDS by 2025, which is 5 years before the global target set in SDGs. To do so, more efforts need to be made, particularly to ensure key populations who are at high risk are effectively reached with continuum prevention-to-care and treatment services packages, and undiagnosed people living with HIV know their status and enroll in HIV prevention and treatment cascade.

Access to holistic health services and information for transgender persons

44. Under the Second UPR cycle, the RGC received and supported the recommendation to “Increase its ongoing efforts aimed at promoting equitable health rights for all Cambodian people.” Despite efforts by the RGC in increasing access to health care, transgender Cambodians continue to face barriers to access holistic health services and information, including hormone treatment, psychological health and legal aid.

45. Gender affirming healthcare services are not available and there are no laws, regulations or administrative documents stating whether such services are legal or illegal. As a consequence, any such services that are available are unregulated. For this reason, trans
people in Cambodia typically travel to other countries for surgeries,\textsuperscript{112} and many LGBTIQ people depend on their friends for information about gender-confirming procedures and some administer medical care by themselves, as result of which severe complications and side effects have been reported.\textsuperscript{113}

46. In addition, LGBTIQ people face many mental health related issues, in part as a result of discrimination linked to their SOGIESC. Indeed, 22\% of LGBTIQ report feeling shameful of being themselves based on a RoCK study conducted in 2015.\textsuperscript{114} Currently, there is very limited mental health services specifically designated for LGBTIQ people in Cambodia.

\textbf{Access to information on reproductive health, and safe and legal abortions for lesbians, bisexual women, intersex persons and transgender men}

47. Under the Second UPR cycle, the RGC received and supported the recommendation to “Step up information on sexual and reproductive health, including modern contraceptive methods, in particular for women living in rural areas.”\textsuperscript{115} Transgender men who have not undergone gender affirming surgery and lesbians may be victims of sexual violence and/or of forced marriage,\textsuperscript{116} and therefore constitute a particularly vulnerable group who needs to have access to information on reproductive health and safe and legal abortions. Despite relatively progressive legislation on abortion, which was passed in 1997,\textsuperscript{117} lack of access to safe abortion,\textsuperscript{118} and lack of awareness about the legality of abortions,\textsuperscript{119} remains a challenge in Cambodia, infringing on women’s and trans men’s reproductive health and rights.

\textbf{Recommendations}

\textit{xvi.} Ensure that all health-care professionals are trained on SOGIESC, including through the inclusion of SOGIESC in the medical and nursing school curriculums, by the next UPR cycle, in line with SDG 3.\textsuperscript{120}

\textit{xvii.} Ensure access to affordable and quality medication and counselling services for LGBTIQ people living with HIV/AIDS, including those under the age of eighteen, and guarantee adequate national budget allocation and long term sustainable financing for these services, by the next UPR cycle, in line with SDG 3.3.\textsuperscript{121}
xviii. Set up a ‘Technical Working Group’ within the Ministry of Health in charge of providing holistic health services to transgender people (including medical treatment and counselling services), to be implemented within existing structure of public health, and guarantee adequate national budget allocation and long term sustainable financing for these services, by the end of 2022, in line with SDG 3.8.\textsuperscript{122}

xix. Increase access to information on safe and legal abortions for vulnerable populations, including lesbians, bisexual women, intersex persons and transgender men, including through a National Public Campaign, in line with SDG 3.7.\textsuperscript{123}

7. Achieving SOGIESC-inclusive Comprehensive Sexuality Education in Schools

48. Under the 2\textsuperscript{nd} UPR cycle, the RGC received and supported the recommendation to “Step up information on sexual and reproductive health, including modern contraceptive methods, in particular for women living in rural areas.”\textsuperscript{124} Since then, the government has increased its efforts in implementing Comprehensive Sexuality Education (“CSE”), as stated in the National Population Policy.\textsuperscript{125}

49. In July 2016, Health Education was approved as a core and compulsory subject for all grades, ensuring that there were no grades and students “left out”, for the comprehensive integration of CSE into Sexual and Reproductive Health from grades 5 to 12. The CSE topics contained in the core curriculum include Puberty, Gender, Gender-Based Violence, Drugs, Life Skills (Values, Rights, Ethics, Decision-Making, Future Planning, and Emotions), Pregnancy, Family Planning (FP), STDs, and HIV/AIDS.

50. In 2017, the MoEYS, in consultation with CSOs, developed a proposed new “Life Skills” curriculum for grades 1-12 that offers inclusive instruction on sexual orientation issues, sexual education and Gender Based Violence (“GBV”).\textsuperscript{126} The proposed curriculum include teaching safe sex, non-discrimination of LGBTIQ people and self-determination for romantic relationship including marriage choices. This proposed new CSE curriculum is meant to become part of the mandatory curriculum in public schools, and is scheduled to be available nationwide by 2023. The School Department of Health Study of the MoEYS, is now in the process of updating the health education syllabus and writing
textbooks, with the assistance of NGOs and UN Population Fund (“UNFPA”). NGOs also continue to work in cooperation with the MoEYS to ensure the curriculum is fully comprehensive and SOGIESC-inclusive, for instance by advocating for the inclusion of the topics of sexual pleasure and gender identity and expression.

Recommendations

xx. Ensure that all teachers receive comprehensive training on SRHR, including SOGIESC rights, by the end of 2022.


ENDNOTES

1 The Cambodian Center for Human Rights (“CCHR”), founded in 2002, is a non-aligned, independent, non-governmental organization (“NGO”) that works to promote and protect democracy and respect for human rights – primarily civil and political rights – throughout the Kingdom of Cambodia (“Cambodia”). CCHR’s vision is of a non-violent Cambodia in which people can enjoy their fundamental human rights, are empowered to participate in democracy, and share equally the benefits of Cambodia’s economic development. CCHR has participated actively in the UPR Process since the first UPR cycle in 2009. In preparation for Cambodia’s Second UPR in January 2014, CCHR produced two joint-submissions, and CCHR staff participated in pre-sessions in Geneva. Following the adoption of the Outcome Report in June 2014, CCHR co-organized a two-day National Consultation in Phnom Penh. In 2017, CCHR and the United Nations Office of the High Commissioner for Human Rights in Cambodia (“OHCHR Cambodia”) cooperated with UPR Info, based in Geneva, and with the government’s Cambodian Human Rights Committee, to co-organize Cambodia’s ‘Mid-Term Universal Periodic Review National Consultation and Assessment Workshop,’ which was held on 29 and 30 June 2017 in Phnom Penh. Ahead of the Third Universal Periodic Review of Cambodia to be held in 2019, CCHR, UPR Info, and OHCHR Cambodia organized a two-day ‘National Consultation Workshop on CSOs submissions’, a two-day ‘follow-up Workshop on CSOs submissions’ in Phnom Penh’ and one day ‘workshop for the validation of CSO Submissions for the Third UPR of Cambodia’.

2 Rainbow Community Kampuchea (“RoCK”) is a Cambodian non-government organization dedicated to supporting LGBT rights in Cambodia. RoCK works closely with LGBT communities and respective local authorities across the country to ensure long-term protection and support of equal rights and acceptance for LGBT people and their families. 

3 Destination Justice (“DJ”) is a social change organization. We are changemakers who believe that justice is key to a peaceful society - particularly a society where people can resolve their issues by resorting to independent, fair and transparent justice; a society where laws are made by the people, for them and freely accessible to them; and furthermore, a society where everybody is equal no matter who they are, what they think, or who they love. Destination Justice previously submitted a joint-submission for the Second Universal Periodic Review of France.
include government, private, civil society organizations, and grassroots groups with equal conditions. Communities, people’s poverty eradication. Throughout the world, ActionAid works to strengthen the capacity and active agency of people, especially women, living in poverty and exclusion, to assert their rights. We work directly with communities, people’s organizations, women’s movements, groups and networks, social movements and other allies to overcome the structural causes and consequences of poverty and injustice.

Micro Rainbow International Organization’s (“MRI’s:) vision is to create a world where lesbian, gay, bisexual, trans and intersex (“LGBTI”) people are free from discrimination, persecution and have equal opportunities in life, including in accessing employment, training, education, financial services, healthcare, housing, places of faith, and public services.

Established in 1996, Reproductive Health Association of Cambodia (RHAC) is a not-for-profit organization, and an accredited member of the International Planned Parenthood Federation (IPPF) with over 170 member-associations. The development of RHAC’s program is guided by RHAC’s Strategic Framework 2016-2022. The framework seeks to ensure that Sexual and Reproductive Health and Rights (SRHR) is respected, protected and fulfilled; people are empowered to act freely on their SRHR; integrated SRHR services are delivered; and a high performing and accountable RHAC.

RHAC is one of the largest and well-respected NGO in health sector and continues to play the leading role in the areas of sexual and reproductive health. Comparing to the previous years, in 2018, we see RHAC expanding our coverage from 11 to 17 provinces, after succeeding in getting grants for TB and HIV prevention project in the Northern Zone of Cambodia. RHAC continues its focus on quality women’s health; strengthens comprehensive sexual and gender based violence (SGBV) services; expands collaboration with the Ministry of Education Youth and Sport in the areas of sexuality education for in-school students; increases our efforts in advocacy through building core activist groups of youth, women groups, and TGs; establishes partnership with local Civil Society Organizations (CSOs) and youth organizations; and strengthens our concrete effort in demand generation activities in the proximity of the clinics to cover more and more factory workers, university students, and selected villages. We also put much effort in investing in ICT infrastructure for improved operation and efficiency of our works.

ILGA—the International Lesbian, Gay, Bisexual, Trans and Intersex Association- is the world federation of national and local organizations dedicated to achieving equal rights for lesbian, gay, bisexual, trans and intersex (LGBTI) people across the globe. Established in 1978, ILGA enjoys consultative status at the UN Ecosoc Council. It speaks and lobbies in international for a on behalf of more than 1,200 member-organizations from 132 countries, who are based in our six regions: Pan Africa ILGA, ILGA Asia, ILGA-Europe, ILGALAC (Latin America and the Caribbean), ILGA North America and ILGA Oceania.

ILGA Asia is the Asian Region of ILGA, representing more than 100 member-organizations in East, South, Southeast, and West Asia. Our missions are to promote universal respect for and observance of human rights and fundamental freedoms, including the elimination of all forms of discrimination and stigmatization based on (SOGIEB); to work for the equality of all people regardless of sexual orientation or gender identity / expression and bodies, as well as liberation from all forms of discrimination and stigmatization; and to empower and support LGBTI communities, organizations and individuals in Asia, while encouraging community building and networking.

A ASEAN Sexual Orientation and Gender Identity/Expression Caucus (“ASC”) is a regional organization of LGBTIQ human rights defenders. Our work is to empower local groups and activists in doing innovative and diverse advocacy tactics to influence domestic, regional and UN human rights mechanisms. We apply an intersectional approach in our work by collaborating with fellow civil society actors in shaping an inclusive and transformative ASEAN region. We are legally registered as an NGO in Manila, Philippines, and our work covers 11 countries in the Southeast Asian region.

The Swedish Association for Sexuality Education (“RFSU”) was founded in 1933. RFSU work is based on the conviction that sexuality has a central role in individuals’ lives and in society. RFSU aims towards an open and evidence-informed view of sexuality and relationships. RFSU believes that everyone is of equal value and should have equal rights and freedoms. RFSU aims to facilitate engagement, increase knowledge, create opinion, advocate politicians and decision makers, and demand accountability of sexual and reproductive rights at local and national level in Sweden, as well as at the international level.

ActionAid is a global justice federation working in 45 countries to achieve social justice, gender equality and poverty eradication. Throughout the world, ActionAid works to strengthen the capacity and active agency of people, especially women, living in poverty and exclusion, to assert their rights. We work directly with communities, people’s organizations, women’s movements, groups and networks, social movements and other allies to overcome the structural causes and consequences of poverty and injustice.

In Cambodia and globally, DanChurchAid prides itself on its partner-based approach, whereby we work with and provide assistance to local organizations. Our work focuses on food security and improved livelihoods, building resilience, community empowerment, climate justice, accountability and equal rights.

CamASEAN has a vision for Cambodia and ASEAN to advocate for peace through promoting, respecting, protecting and fulfilling human rights, socio-economic justice of minorities, marginalized and diversity citizens in Cambodia and ASEAN receiving full & equal respect, acceptance and protection from all sectors of society include government, private, civil society organizations, and grassroots groups with equal conditions. CamASEAN have mission of combating discrimination against minority diversity people include lesbian, gay,
bise
gen
ter, intersex and queer (LGBTIQ), young girls live with HIV/AIDS, sex workers, drug user, people with disability, widowed/single parent, elderly people, indigenous and other ethnic people in Cambodia and ASEAN through strengthening capacity of as many activists as possible.

13 See Annex ‘Second Cycle UPR Recommendations to Cambodia related to the right to health and gender’

The authors of this submission met for a SOGIE UPR Consultation meeting organized by CCHR on 15 February 2018, with partner civil society organizations (“CSOs”) working on SOGIESC and SRHR issues in Cambodia.

The authors also met and discussed this joint submission project during the “Civil Society Submission Workshop in Preparation of the Third Universal Periodic Review of Cambodia”, co-organized by CCHR, OHCHR and UPR Info on March 12-13, 2018. The co-submitters met again in May 2018 during the “Civil Society Submission Follow-up Workshop in Preparation of the Third Universal Periodic Review of Cambodia”, co-organized by CCHR, OHCHR and UPR Info on 9-10 May 2018, to discuss the first draft of the submission. The authors met again during the “Workshop for the validation of CSO submissions for the Third UPR of Cambodia”, organized by CCHR, OHCHR and UPR Info on 2 July, to present their final drafts to other participating CSOs.

Two of the authors of this submission, RoCK and DJ presented the first draft of this joint-submission to LGBTIQ communities during Pride Celebrations on 18 May 2018. During this presentation with 79 community members and local authorities, the organizations presented the UPR mechanisms to participants and presented the key issues included in the draft joint-submission and collected feedback by community members on each key issue and recommendations.

CCHR, DJ and RoCK organized a consultation meeting with LGBTIQ communities on 28 June 2018. During this meeting with 17 community members, the authors presented the UPR mechanism to participants and presented the key issues and recommendations included in the draft joint-submission and collected feedback by community members on each key issue and recommendations.

CCHR, DJ and RoCK also organized a meeting with selected CSOs working on issues related to LGBTIQ people’s rights (mainly from the child right, women’s rights and health sectors) on 28 June 2018. During this meeting with 14 NGO representatives from 9 organizations, the authors presented the key issues and recommendations included in the draft submission, and collect their feedback and input based on their respective expertise.

15 The term “Rainbow couples” is an umbrella term used throughout this joint-submission to describe couples with two partners of the same sex, or in which one or both partners identifies as transgender or gender non-conforming.

16 “Every Khmer citizen shall be equal before the law, enjoying the same rights and freedoms fulfilling the same obligations regardless of race, color, sex [...] or other status.” - Article 31 of the Constitution of the Kingdom of Cambodia, 21 September 1993.

17 Article 265 of the 2009 Criminal Code of the Kingdom of Cambodia.


21 Article 2, para 1. of the International Covenant on Civil and Political Rights (“ICCPR”) determines that “Each State Party to the present Covenant undertakes to respect and to ensure to all individuals within its territory and subject to its jurisdiction the rights recognized in the present Covenant, without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status” The addition of “other status” indicates this list is non-exhaustive and can include other categories, such
as sexual orientation and gender identity. Indeed, “other status” has been referenced consistently as including sexual orientation and gender identity by treaty bodies and in decisions of the UN Human Rights Committee.


In addition, Article 31 of the Constitution guarantees respect for human rights as stipulated in the UN Charter, the Universal Declaration of Human Rights (“UDHR”) and other international covenants and conventions related to human rights which Cambodia has ratified, including the ICCPR, the Convention on the Elimination of all Forms of Discrimination Against Women (“CEDAW”), and the International Covenant on Economic, Social and Cultural Rights (“ICESCR”). The position of international human rights law within the Cambodian legal system was strengthened by the Constitutional Council’s decision of 10 July 2007, which authoritatively interpreted Article 31 as meaning that international treaties ratified by Cambodia are directly applicable in domestic law. (Constitutional Council of the Kingdom of Cambodia, Decision No. 092/003/2007 (10 July 2007)).

Some transgender persons are being issued with ID cards conforming to their gender identity, yet in most cases local officials deny such requests. “Cambodia’s Rainbow Families: Marriage, Adoption & Gender Recognition Rights in the Kingdom”, Cambodian Center for Human Rights, November 2017, Page viii, available at: http://cchrcambodia.org/admin/media/report/report/english/2017-11-22-CCHR-Report-Cambodia-Rainbow-Families_ENG.pdf (last visited 15 March 2018). This report is based on field research based on surveys conducted across several provinces, of 121 current or former members of rainbow couples, nine local authority representatives and three government representatives.

Article 16 of the ICCPR, to which Cambodia is a party, grants “recognition everywhere as a person before the law”. The inability of transgender people to be recognized true to their fundamental identity in official documents denies them this right. Principle Three of the Yogyakarta Principles elaborates on the duties surrounding this right, emphasizing that it requires states to take legislative or administrative measures to ensure that people can have their self-defined gender identity reflected on official documents. (International Commission of Jurists, Yogyakarta Principles - Principles on the application of international human rights law in relation to sexual orientation and gender identity, March 2007, available at: http://www.refworld.org/docid/48244c602.html [last visited 20 March 2018].)

In addition, Article 31 of the Constitution guarantees respect for human rights as stipulated in the UN Charter, the Universal Declaration of Human Rights and other international covenants and conventions related to human rights which Cambodia has ratified, including the ICCPR, CEDAW, and the International Covenant on Economic, Social and Cultural Rights. The position of international human rights law within the Cambodian legal system was strengthened by the Constitutional Council’s decision of 10 July 2007, which authoritatively interpreted Article 31 as meaning that international treaties ratified by Cambodia are directly applicable in domestic law. (Constitutional Council of the Kingdom of Cambodia, Decision No. 092/003/2007 (10 July 2007)).

Article 22 of the UDHR states that everyone is entitled to the “free development of [their] personality”. A similar provision in the Colombian Constitution was interpreted by their Constitutional Court to include a right to choose one’s own gender identity. (“Cambodia’s Rainbow Families: Marriage, Adoption & Gender Recognition Rights in the Kingdom”, Cambodian Center for Human Rights, November 2017, page 31, available at: http://cchrcambodia.org/admin/media/report/report/english/2017-11-22-CCHR-Report-Cambodia-Rainbow-Families_ENG.pdf (last visited 15 March 2018)).

Article 2(1) of the International Covenant on Civil Political Rights (the “ICCPR”) has been authoritatively interpreted by the UN Human Rights Committee to prohibit discrimination on the basis of sexual orientation and gender identity.

Article 2, para 1. of the International Covenant on Civil and Political Rights (“ICCPR”) determines that “Each State Party to the present Covenant undertakes to respect and to ensure to all individuals within its territory and subject to its jurisdiction the rights recognized in the present Covenant, without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status” The addition of “other status” indicates this list is non-exhaustive and can include other categories, such as sexual orientation and gender identity. Indeed, “other status” has been referenced consistently as including sexual orientation and gender identity by treaty bodies and in decisions of the UN Human Rights Committee.

As a party to the ICCPR, Cambodia has an obligation to guarantee non-discrimination, including on the basis of SOGIE. Article 2 of the ICCPR determines that a state guarantees rights “to all individuals within its territory and subject to its jurisdiction... without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.” The addition of “other status” indicates this list is not exhaustive and can include other categories, such as sexual orientation and gender identity. Indeed, “other status” has been referenced consistently as including sexual orientation and gender identity by treaty bodies and in decisions of the UN Human Rights Committee (‘Cambodia’s Rainbow Families: Marriage, Adoption & Gender Recognition Rights in the Kingdom’, Cambodian Center for Human Rights, November 2017, page 9, available at: http://cchrcambodia.org/admin/media/report/report/english/2017-11-22-CCHR-Report-Cambodia-Rainbow-Families_ENG.pdf (last visited 15 March 2018).)

Only 5% of the Cambodian population remain unmarried throughout their lives. (Dorine Van De Keur, ‘Legal and Gender Issues of Marriage and Divorce in Cambodia’, The Cambodia Law and Policy Journal, Vol. 3:2 (2014).)


38 See: The Civil Code of the Kingdom of Cambodia (8 December 2007), Articles 971, 972 and 1161(1). The Law on the Prevention of Domestic Violence and the Protection of Victims (16 September 2005), Article 2; The Law on Taxation (8 January 1997), Article 46(2).

39 For instance, 80.37% of co-habiting couples interviewed by CCHR believed that unmarried same-sex couples have equal rights to each other’s property during their relationship, and 76.64% believed that if a member of a same-sex couple dies, their partner has a legal claim to their property. “Cambodia’s Rainbow Families: Marriage, Adoption & Gender Recognition Rights in the Kingdom”, Cambodian Center for Human Rights, November 2017, pages 23-24, available at: http://cchrcambodia.org/admin/media/report/report/english/2017-11-22-CCHR-Report-Cambodia-Rainbow-Families_ENG.pdf (last visited 15 March 2018).


41 The Civil Code of the Kingdom of Cambodia (8 December 2007), Book Seven, Chapter Four, Articles 1008-1015.

42 The Civil Code of the Kingdom of Cambodia (8 December 2007), Book Seven, Chapter Four, Articles 1020-1025.


45 The Civil Code of the Kingdom of Cambodia (8 December 2007), Book Seven, Chapter Four, Articles 1020-1025.


48 A recent study showed that there are an estimated 48,775 children living in residential care institutions in Cambodia; equal to nearly 1 in every 100 Cambodian children. Lindsay Stark et al, ‘National estimation of children in residential care institutions in Cambodia: a modelling study’, BMJ Open 2017, 1, available at: http://bmjopen.bmj.com/content/7/1/e013888 (last visited 8 May 2018).


50 UN General Assembly. Transforming our world: the 2030 Agenda for Sustainable Development. 21 October 2015. A/RES/70/1, preamble, para 4, para 26, para 48, para 72, para 74(e).

51 Sustainable Development Goals Target 5.1 “End all forms of discrimination against all women and girls everywhere”; “Target 5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other forms of exploitation”; Target 16.1 “Significantly reduce all forms of violence and related death threats”; Target 16.3 […] Ensure equal access to justice for all. UN General Assembly, Transforming our world: the 2030 Agenda for Sustainable Development, 21 October 2015, A/RES/70/1, available at:

57 In this submission, discrimination ranges from verbal and physical abuse, bullying and threats to being given no food, held captive in the home or forced out of home or a job.


59 When asked to identify the biggest problems faced by LGBTIQ people in Cambodia by using a prompt list, both straight and LGBTIQ people surveyed by RoCK in 2015 identified: (1) Discrimination related to SOGIE (86% of straight people; 82% of LGBTIQ people); (2) Exclusion from families (62% of straight people; 64% of LGBTIQ people); and (3) Harassment (51% of straight people; 60% of LGBTIQ people). See: “Opinions, Attitudes and Behavior toward the LGBT Population in Cambodia”, RoCK and TNS, December 2015, page 62, available at: https://www.rockcambodia.org/?page=document&type=Research%20and%20Reports&lg=en (last accessed on 30 March 2018). This country-wide survey surveyed 1,563 respondents, across 11 provinces.


61 Article 45 of the Constitution of the Kingdom Cambodia, 21 September 1993.


64 A report by the National Center for HIV/AIDS, Dermatology and STD (“NCHADS”) revealed that 18.1% of trans women surveyed had been denied or thrown out of housing because of their SOGIE. “Integrated Biological and Behavioral Survey among Transgender Women in Cambodia”, National Center for HIV/AIDS, Dermatology and STDs, June 2016, page 21, available at: http://www.nchads.org/Publication/SSS/IBBS%20Report_V08Low.pdf (last visited 4 April 2018).


74 See paragraphs 20-21, 25-27, 28-31

75 Almost half of the couples interviewed felt that their community is “very accepting” (48.60%), and just under a third feel that they are “somewhat accepting” of them (29.91%). “Cambodia’s Rainbow Families: Marriage, Adoption & Gender Recognition Rights in the Kingdom”, Cambodian Center for Human Rights, November


Implement all measures, including national awareness-raising campaigns, and efforts aimed at amending or eliminating patriarchal attitudes and stereotypes discriminating against women, including those based on the Chbab Srey. (Uruguay - Supported)

Continue to combat discrimination suffered by the children of marginalized and vulnerable groups and eradicate gender-based stereotypes (Colombia - Noted)


A study by CCHR for instance revealed that 15.27% of transgender women surveyed have at some point been kicked out of their family home, and 48.85% of respondents have felt they needed to leave home because of their trans identity.


82 Basis for non-discrimination in employment include: “race, color, sex, creed, religion, political opinion, birth, social origin, membership of workers’ union or the exercise of union activities”, 1997 Labor Law of Cambodia, Article 12.


94 A study by CCHR for instance revealed that 15.27% of transgender women surveyed have at some point been kicked out of their family home, and 48.85% of respondents have felt they needed to leave home because of their trans identity.

Based on discussions held during the National Dialogue on LGBTIQ Policy on 29 May 2018 in Phnom Penh, the various forms of discrimination and exclusion from community, in schools and by family members described previously lead many LGBTIQ people to leave their hometowns, which often result in them lacking proper documents to apply for social services or employment. RHAC, through the implementation of its projects, also identified that newcomers to urban areas due to those above reasons lack information to SRHR and health services available to them, putting them at greater risk of contracting HIV and other health issues.


Over half (57.14%) of sex workers reported having been refused a job because they are transgender, compared with only 20.73% of non-sex workers. Equally significantly, 40.82% of sex workers report being dismissed from a job because of their trans identity, compared with a far lower 14.81% of non-sex workers. These significant differences suggest that discrimination on the part of employers could be a major factor in leading trans women to turn toward sex work. “Discrimination Against Transgender Women in Cambodia’s Urban Centers”, Cambodian Center for Human Rights, 2016, page 21, available at https://cchrcambodia.org/admin/media/report/report/english/2016 09 21 SOGI_Report_Eng.pdf (last visited 30 March 2018).


Intersex people are born with sex characteristics (including genitals, gonads and chromosome patterns) that do not fit typical binary notions of male or female bodies. Intersex is an umbrella term used to describe a wide range of natural bodily variations. In some cases, intersex traits are visible at birth while in others, they are not apparent until puberty. Some chromosomal intersex variations may not be physically apparent at all. https://unfe.org/system/unfe-65-Intersex_Factsheet_ENGLISH.pdf https://www.unfe.org/intersex-awareness/

"Second Cycle UPR Recommendations to Cambodia related to the right to health and gender"


Cambodia’s HIV response in the past two decades has been very successful in the past two decades resulting in decline of HIV prevalence in the adult general population aged 15-49 to 0.6% in 2017 and has led the country to be one of the seven countries globally to achieve the 90-90-90 targets in 2017 which translates to 73% of all people living with HIV in Cambodia being virally suppressed. "Strategic Plan for HIV/AIDS and STI Prevention and Control in the Health by National Centre for HIV/AIDS, Dermatology & STD (NCHADS) published by the Ministry of Health. October 2016. Page 35.


“All HIV tests shall be done with voluntary and informed consent from the individual. For those who are minor, a written informed consent shall be obtained from his/her legal guardian. In case that such written consent could not be obtained from the legal guardian of the minor, and the test is considered to provide most interest to the individual, the test still can be performed only with an informed consent from the individual.” Law on the Prevention and Control of HIV/AIDS. Article 19. Available at: http://www.naa.org.kh/files/en/G127E.pdf (accessed 19 June 2018)

For instance, in NCHADS study conducted in 2014, among the MSM who reported having sex in the past six months, only 69.4% reported always using condom when having sexual intercourse with their partners. Approximately two-thirds of transgender women surveyed by NCHADS in 2016 (61.9%) reported not using a condom in their last sex, with 62.1% and 40.0% reported inconsistently using condoms with commercial and non-commercial partners, respectively in the past three months. See: NCHADS IBBS MSM 2014 available at: http://www.nchads.org/index.php?id=16&lang=en (accessed 9 July 2018)) and NCHADS IBBS TG 2016. Phnom Penh, p. 2, available at: http://www.nchads.org/Publication/SSS/IBBS%20Report_V08Low.pdf (accessed 9 July 2018)

Only two-thirds of men having sex with men reported having been tested for HIV (66.6%), and even fewer (49.3%) reported having been screened for sexual transmitted infections (STI) in the past six months. 80.4% reported having been tested for HIV at least once in their lifetime, but only 44.3% reported having been tested for HIV in the past six months. Among TG women who reported having at least one symptom of sexually transmitted infections (STI) in the past 12 months (14.0%), 29.2% did not seek treatment for the most recent symptoms. See: NCHADS IBBS MSM 2014 available at: http://www.nchads.org/index.php?id=16&lang=en (accessed 9 July 2018)) and NCHADS IBBS TG 2016. Phnom Penh, p. 2, available at: http://www.nchads.org/Publication/SSS/IBBS%20Report_V08Low.pdf (accessed 9 July 2018)


Religious barriers also exist, as the majority of Cambodian people are devoted Buddhists, and due to Buddhist beliefs, people tend to believe abortion is a “killing” which further complicates women’s ability to access available services. The cultural and religious stigmatization makes abortion as a taboo in general. Due to perceived lack of proper understanding about the SRHR of women and socio-cultural pressures, many women seek abortion, particularly towards younger women. Service providers are often reluctant to carry out legal abortion because of ill health, pre-existing conditions or which may cause danger to the mother’s life, (2) the baby who is going to be born may have a serious and incurable disease, and a mother is a victim of a rape and got pregnant. However, in all such cases the abortion can be performed up on request from individuals if they are 18 years old or above and a request from parent or guardian if individuals are below 18 years old. All documents related to abortion, shall be kept confidential, and incurred cost of transportation to a hospital if necessary.

Abortion was allowed to carry out for specific conditions included (1) the fetus probably does not develop itself as a normal child, (2) the baby who is going to be born may have a serious and incurable disease, and a mother is a victim of a rape and got pregnant. However, in all such cases the abortion can be performed up on request from individuals if they are 18 years old or above and a request from parent or guardian if individuals are below 18 years old. All documents related to abortion, shall be kept confidential, and may be provided to concerned person or court only after there is a written request. It is only allowed to carry out only in a hospital, health center, public or private clinic which is authorized by Ministry of Health. In addition, to ensure for a safe abortion, all health facilities should have a technical capacity in providing emergency medical treatment for any consequence which may result from abortion and means of transportation to a hospital if necessary.

Abortion was allowed to carry out for young people. (MoP Cambodia, 2015). However, as in many developing countries, there is limited data on abortion in Cambodia. Although abortion is accessed by older women, the high adolescent fertility rate (12%) remains a key issue, impacting unsafe abortion rates as a result of the conditions placed on access to abortion for young people. (MoP Cambodia, December 2015)

RHAC’s own clinical experience over the years has revealed that when they do access it, women have abortions because of ill health, pre-marital pregnancy, short birth interval, competing family responsibilities, and poverty. However, as in many developing countries, there is limited data on abortion in Cambodia. Although abortion is accessed by older women, the high adolescent fertility rate (12%) remains a key issue, impacting unsafe abortion rates as a result of the conditions placed on access to abortion for young people. (MoP Cambodia Demographic and Health Survey, 2014)

RHAC’s own clinical experience over the years has also witnessed the strong stigmatization women face when seeking abortion, particularly towards younger women. Service providers are often reluctant to carry out legal abortions due to lack of proper understanding about the SRHR of women and socio-cultural pressures. The majority of Cambodian people are devoted Buddhists, and due to Buddhist beliefs, people tend to believe abortion is a “killing” which further complicates women’s ability to access available services. The cultural and religious barriers also make it difficult to gather data on abortion that can be used to advocate for reproductive rights within the context of legal access, thereby ensuring the right to safe abortion.

117 Cambodia has enacted law of abortion since 1997 which consisted of 15 articles. Abortion was defined as “a termination of the fetus by medication or any other method”. It shall be performed by a medical doctor, medium medical practitioner or mid-wife. Through procedure and condition for abortion, it was allowed to carry out only inside a hospital, health centers, public or private clinic which is authorized by Ministry of Health. In addition, to ensure for a safe abortion, all health facilities should have a technical capacity in providing emergency medical treatment for any consequence which may result from abortion and means of transportation to a hospital if necessary.

Abortion was allowed to carry out for those fetuses under 12 weeks old. Abortion procedure still can be authorized to perform only under specific conditions included (1) the fetus probably does not develop itself as usual or which may cause danger to the mother’s life, (2) the baby who is going to be born may have a serious and incurable disease, and a mother is a victim of a rape and got pregnant. However, in all such cases the abortion can be performed up on request from individuals if they are 18 years old or above and a request from parent or guardian if individuals are below 18 years old. All documents related to abortion, shall be kept confidential, and may be provided to concerned person or court only after there is a written request.

118 RHAC’s own clinical experience over the years has revealed that when they do access it, women have abortions because of ill health, pre-marital pregnancy, short birth interval, competing family responsibilities, and poverty. However, as in many developing countries, there is limited data on abortion in Cambodia. Although abortion is accessed by older women, the high adolescent fertility rate (12%) remains a key issue, impacting unsafe abortion rates as a result of the conditions placed on access to abortion for young people. (MoP Cambodia Demographic and Health Survey, 2014)
Despite notable progress towards strengthening safe abortion services between 2010 and 2016, unsafe abortion remains a significant contributor to maternal mortality and morbidity in the country. Furthermore, there has been little progress towards decreasing the proportion of women seeking multiple abortion services and the proportion of women reporting unsafe abortions. (MoH, National Strategy for Reproductive and Sexual Health in Cambodia (2017-2020), 2017)


Negative beliefs and stigma associated with abortion are also strong in Cambodian society due to a social and cultural taboos surrounding abortion. Report from Cambodia Demographic and Health Survey 2014 showed that proportion of women receiving help for abortion services from appropriate health care providers has been declining from 67% in 2010 to only 61% in 2014. And it contrasted from women who report having no help from anyone has increased from 22% in 2010 to 30% in 2014. (MoP Cambodia Demographic and Health Survey, 2014)

This can be result from a lack of awareness on abortion law as well as comprehensive information and services of abortion. In 2014, there were more urban and poorly educated women that reported having abortion than their rural and educated counterpart (MoH, National Strategy for Reproductive and Sexual Health in Cambodia (2017-2020), 2017)


