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**AMPLIFYCHANGE**

*Education Materials for*  
**Police, Healthcare Providers and  
Government Stakeholders on  
SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS  
of Sexual and Gender Minorities**

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2021



# FOREWORD



Sexual and Gender minorities experience various forms of violence mainly because of their sexual orientation and Gender identity. Violence against LGBT persons is particularly in the form of societal stigmatization, homophobic violence and discrimination which impacts access to sexual and reproductive health right (SRHR) services.

The Constitution of Nepal has ensured the provision of basic health rights to every citizen. Everyone has the right to information and education regarding sexual and reproductive health rights. Although the constitution provides for the right to reproductive health under women's rights, it does not explicitly address the issues of diversity within women, especially the sexual rights of lesbian, bisexual and transgender women.

The limited access of LGBT persons to SRHR as well as HIV and AIDS services obstructs the realisation of their human rights. The key rights affected are the right to a standard of living adequate for health and wellbeing; the right to health and reproductive health; the right to equal treatment and non-discrimination; the right to a family; the right to life and to dignity and personal integrity; the right to privacy and the right to freedom of expression, association, participation and assembly. The LGBT community is also 'left out' of policies, contrary to the principle underlying the Sustainable Development Goals, of 'leaving no one behind'.

In addition, due to lack of information on the part of healthcare providers themselves, the community is deprived of access to healthcare and facilities in many cases. They are discriminated or mistreated by the health care providers when they get health treatment.

When talking about sexual and reproductive health rights, only safe motherhood, pregnancy and menstruation are discussed. The law does not address the need of sexual and reproductive health issues of sexual and gender minorities. There is a lack of information about sexual and reproductive health and rights in the community and the general public as well as among various stakeholders.

Therefore, this information booklet is intended to briefly inform the sexual and reproductive health issues of people belonging to sexual and gender minorities and make the state responsible and accountable for creating an environment in which these rights can be exercised.

Mitini Nepal would like to thank all those who have contributed to the production and publication of this information booklet.

Thank You!

A handwritten signature in black ink, appearing to read 'Laxmi Ghalan', with a horizontal line drawn underneath it.

**Laxmi Ghalan**

Chairperson  
Mitini Nepal

# ABBREVIATION

<b>MN</b>	- Mitini Nepal
<b>SRHR</b>	- Sexual and Reproductive Health and Rights
<b>LGBTIQ</b>	- Lesbian, Gay, Bisexual, Transgender, Intersex, Queer
<b>SOGIE</b>	- Sexual orientation, gender identity and expression
<b>SGM</b>	- Sexual and Gender Minorities
<b>FTM</b>	- Female to Male
<b>MTF</b>	- Male to Female
<b>NHSS</b>	- Nepal's Health Sector Strategy
<b>ICPD</b>	- International Conference on Population and Development
<b>PoA</b>	- Program of Action
<b>BPfA</b>	- Beijing Platform for Action
<b>MDGs</b>	- Millennium Development Goals
<b>ICCPR</b>	- International Covenant on Civil and Political Rights
<b>UDHR</b>	- Universal Declaration of Human Rights
<b>ICESCR</b>	- International Covenant on Economic, Social and Cultural Rights
<b>CEDAW</b>	- Convention on Elimination of All Forms of Discrimination against Women
<b>CRC</b>	- Convention of the Rights of the Child
<b>SDGs</b>	- Sustainable Development Goals
<b>V-Wash</b>	- Intimate wash for women
<b>PrEP</b>	- Pre-Exposure Prophylaxis
<b>PEP</b>	- Post Exposure Prophylaxis

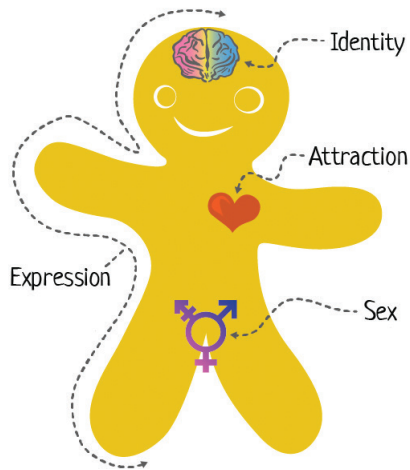
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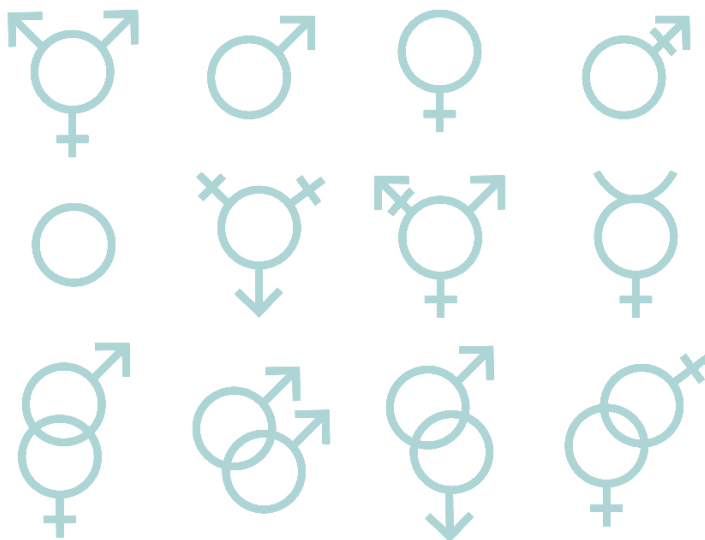
# GLOSSARY

- **Sexual Orientation-** An enduring emotional, romantic or sexual attraction primarily or exclusively to people of a particular gender or genders
- **Gender identity** - Individual's internal sense of their own gender; Individual's deeply felt sense of their gender.
- **Sex characteristics** - Physical and anatomical traits (sex organs, reproductive systems, sex chromosomes and hormones) of a human being that are indicative of their sex.



- **Heterosexuality-** An enduring emotional, romantic or sexual attraction primarily or exclusively to people of opposite gender. People who are heterosexual often identify as 'straight'.
- **Homosexuality-** An enduring emotional, romantic, or sexual attraction primarily or exclusively to people of the same gender. People who are homosexual often identify as 'gay' or 'lesbian'.
- **Heteronormativity-** The presumption that everyone is heterosexual or the belief that heterosexual people are naturally superior to gender and sexual minorities.
- **Bisexuality-** An enduring emotional, romantic or sexual attraction to people of more than one gender.
- **Asexuality-** An enduring absence of sexual attraction. People who are asexual often identify as 'asexual'.
- **Biological sex-** A medical term used to refer to the chromosomal, hormonal and anatomical characteristics that are often used to classify an individual as female, male or intersex.

- **Intersex-** An umbrella term that refers to a variety of chromosomal, hormonal and anatomical conditions in which a person does not seem to fit the typical definition of female or male.
- **Sex assigned at birth** - When an individual is assigned as male or female based on their genital visible at birth.
- **Transgender-** An umbrella term referring to an individual whose gender identity is different from the sex they were assigned at birth. 'Trans' is shorthand for 'transgender'.
- **Transgender Man-** A term for a transgender individual who was assigned female at birth and currently identifies as a man (also 'FTM').
- **Transgender Woman-** A term for a transgender individual who was assigned male at birth and currently identifies as woman (also 'MTF').
- **Non-binary** - Individuals who do not identify in the binary of male or female, is a spectrum of gender identities that are not exclusively masculine or feminine—identities that are outside the gender binary.
- **Third gender** - People who do not identify as man or woman, identify as neither man nor woman, based on traditional South Asian Hindu cultures.





## INTRODUCTION

At a time when Lesbian, Gay, Bisexual, Transgender, Intersex and Queer (LGBTIQ) people are an increasingly open, acknowledged, and visible part of the society, healthcare providers and researchers are faced with incomplete information about their sexual and reproductive health status. Although LGBTIQ is used as an umbrella term that suggests homogeneity, the community is diverse wherein each of them represents a distinct population with its own health concerns. What binds them together with respect to healthcare are common experiences of stigma, discrimination and lack of awareness of Sexual and Reproductive Health and Rights (SRHR) by healthcare providers. Insufficient laws and practices, combined with inadequate legal protection, expose them to a gross violation of their human rights thus preventing them from achieving the highest possible level of health.

This information booklet reviews LGBTIQ terminologies, situational analysis, health disparities affecting LGBTIQ people, national and international commitments and outlines steps the government, healthcare providers and media can take to provide access to patient-centered care for LGBTIQ people.

### ***Sexual and Reproductive Health and Rights***

*incorporates the rights of all people, regardless of age,  
gender and other characteristics, to make choices  
regarding their own sexuality and reproduction, provided  
that their rights do not infringe on the rights of others.*

### ***Reproductive Health***

*It is a state of complete physical, mental and social well-  
being and not merely the absence of disease or infirmity,  
in all matters relating to the reproductive system and its  
functions and processes.*



## LGBTIQ TERMINOLOGIES

Providing compassionate healthcare to members of the LGBTIQ people requires an understanding of basic terminologies along with awareness of the various barriers LGBTIQ patients often face when seeking competent and inclusive healthcare.



**Lesbian:** A woman who is primarily attracted to woman.



**Gay:** A man who is primarily attracted to man; sometimes a broad term for individuals primarily attracted to same sex.



**Bisexual:** An individual attracted to people of their own and opposite gender.



**Transgender:** A person whose gender identity differs from their assigned sex at birth.



**Transexual:** An outdated term that originated in the medical and psychological communities for people who have permanently changed their gender identity through surgery and hormones.



**Queer:** An umbrella term to be more inclusive of the many identities and variations that make up the LGBTQ+ community.



**Questioning:** The process of exploring and discovering one's own sexual orientation, gender identity and /or gender expression.



**Intersex:** An individual whose sexual anatomy or chromosomes do not fit with the traditional markers of "female" and "male".



**Ally:** Typically a non-queer person who supports and advocates for the queer community; an individual within the LGBTQ+ community can be an ally for another member that identifies differently than them.



**Asexual:** An individual who generally does not feel sexual desire or attraction to any group of people. It is not the same as celibacy and has many sub-groups.



**Pansexual:** A person who experiences sexual, romantic, physical and/or spiritual attraction to members of all gender identities/ expressions, not just person who fit into the standard gender binary.



## SITUATION ANALYSIS OF SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF LGBTIQ

Although the Constitution of Nepal promotes the rights of LGBTIQ people, this has not caused a turnaround in the access to healthcare services and resources. LGBTIQ people often face disturbing rates of healthcare discrimination, humiliation, harassment and disrespect by healthcare providers to being turned away by hospitals, pharmacists, and doctors. LGBTIQ people are at significantly higher risk of poor mental health compared to the general population which includes higher incidence of depression, suicidal thoughts, substance misuse, anxiety, and deliberate self-harm.

LGBTIQ people have often had their specific health needs overlooked by healthcare providers, which leaves them with a lack of trust in their healthcare provider. Multiple needs are often not taken into account, which affects some of the most vulnerable LGBTIQ people. Some LGBTIQ people aren't open about their sexual orientation and gender identity when seeking medical help because of fear of unfair treatment and invasive questioning. Refusal to make clinic appointments, refusal to treat, or treatment with gross disrespect, violation of medical privacy, private shaming and public disparagement are among the discriminatory practices and abuses that have been reported, along with inferior care. Such attitudes from healthcare providers make them reluctant to share personal and medical information, jeopardizing their overall health and their access to health services including those of sexual and reproductive health. There is a lack of information and resources around sex-change surgeries for LGBTIQ people in Nepal as well as a lack of human resources on health which makes it difficult for them to access quality health services.

The COVID-19 pandemic has further exacerbated the healthcare disparities LGBTIQ people already experience. LGBTIQ people with possible symptoms of COVID 19 hesitate to go to hospitals for testing or treatment due to the fear of mistreatment and prejudice. Many LGBTIQ individuals have been discriminated and have been denied to stay in the quarantine centres thus forcing them to stay illegally under unsafe situations. These circumstances have had a significant impact on their mental health. A spike in suicide cases have been reported during the pandemic.



The general lack of information on LGBTIQ friendly healthcare facilities further limits their access to medical care especially for those living in rural areas. In some cases, healthcare providers violate the right to confidentiality of LGBTIQ people, thereby putting them at risk for public forms of discrimination, stigma and violence. As a result, they continue to face barriers to access holistic health services and information, including hormone treatment, mental health services and legal aid.

### **BARRIERS LGBTIQ FACE IN ACCESSING SRHR SERVICES**

1. Lack of knowledge and understanding of the sexual and reproductive health needs among healthcare providers.
2. High level of discrimination, harassment and mistreatment from healthcare providers hinder access to quality healthcare services.
3. SRHR services are not tailored to meet the unique needs of LGBTIQ individuals. They are structured to respond to heterosexual men and women.
4. Fear of disclosure of gender identity, sexual orientation, or sex characteristics.
5. Inadequate information around the availability and access to healthcare services for LGBTIQ.
6. LGBTIQ healthcare facilities are mostly located in urban areas which make it difficult for people living in rural areas.
7. LGBTIQ people are sometimes refused healthcare services due to their sexual orientation and gender identity.





## KEY SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS NEEDS OF LGBT PERSONS

LGBT persons are a diverse category. Each of these categories has got their unique needs as individuals. While some needs are cross cutting, some are unique and specific to each.

For example, some of the SRHR products/consumables are unique to specific LGBT persons. Specific products such as male and female condoms, lubricants, tubes, specific types of gel, specific types of hygiene maintenance items like V-wash among others were more needed by some than others. For example, voice moderators were mentioned by transgender men and transgender women and not others. Body shapers were also mentioned by transgender men and women and not others. Other unique and specific needs like surgeries and hormonal therapies were mentioned by transgender and no other categories.

### SRHR needs for lesbians or WSW

- Family planning
- Engage more lesbian health workers at some friendly health centers
- V-washes and La-wash
- Female condoms
- Lubricants for sexual satisfaction
- SRHR counseling and guidance specific to the needs of lesbians
- Abortion services in case raped
- Intimacy
- Sensitization and awareness creation among lesbians about SRHR issues to make informed choices
- STI screening and treatment,
- Confidentiality in providing of these services (self-testing kits for HIV are now made available),
- HIV Testing Services; HIV prevention services including PrEP and PEP



### SRHR needs for Gay or MSM

- Screening for Hepatitis B
- ART for HIV positive LGBT persons
- Need of Lubricants, condoms and Anusols
- Douches
- Sex education before and after sex
- Health workers who understand the SRHR needs of MSM
- Sensitization and awareness creation for MSM about SRHR issues affecting them
- LGBT friendly services
- STI screening and treatment
- Confidentiality in providing of these services (self-testing kits for HIV are now made available) HIV Testing Services
- HIV prevention services including PrEP and PEP

### SRHR needs for Transgender women

- Health facilities that are tailored to the needs of transgender women
- Hormonal therapies
- Gender affirming surgeries
- Family Planning services tailored to the needs of transgender women
- Oils that fight and remove beards and clears up voice reducers or moderators
- Consumables like Female condoms; lubricants
- Information on use of female condoms
- Douching machines to clean after or before having sex with a man
- Need for intimacy, to fall in love and feel loved
- LGBT friendly services
- STI screening and treatment
- Confidentiality in providing of these services (self-testing kits for HIV are now made available)
- HIV Testing Services; HIV prevention services including PrEP and PEP,
- Screening for Hepatitis B
- Counseling
- ART for HIV positive LGBT persons
- Sexuality education talk tailored to the unique needs of LGBT persons





### SRHR needs for Transgender men

- Dental derms to protect one from getting infections as they lick your partner
- Preventive medical tubes
- Menstrual hygiene management
- Specific health facilities for transgender men to avoid form of discrimination and stigma
- Hormones not therapies to transform fully, change voice and grow beard
- La-wash to maintain hygiene during sexual intercourse
- Need for intimacy, marriage and reproduction
- Gender affirming surgeries
- Sexuality education particularly discussion around hygiene during sexual intercourse (maintaining cleanliness/ hygiene)
- Information and awareness on HIV and safe abortion for circumstances under rape to prevent unwanted pregnancies. Most transgender men have been reportedly experienced high cases of rape
- HIV Testing Services; HIV prevention services including PrEP and PEP

### Bisexual persons

- Education and awareness creation about the sexual reproductive health issues reason
- Access to SRH information for LGBT including acquisition of sexually transmitted infections, accessing the services to some health centres,
- Health facilities and health workers that understand the need of Bisexuals
- Treatment for common STIs like genital warts
- Safe abortions given that majority of people are now accessing illegal abortions with high fatalities
- Consumables like Condoms, lubricants
- Access to services beyond HIV services, STI screening and focus on family planning, menstrual hygiene management
- Sex education around body changes including experiences of young people during puberty

# LEGAL FRAMEWORK ON LGBTIQ ISSUES IN NEPAL

## A. The Rights of LGBTIQ

Nepal is the first country in South Asia that recognizes gender and sexual minorities' rights by its Constitution and the Supreme Law of the country.<sup>1</sup> It acknowledged that LGBTIQ people should benefit from the same legal rights as other citizens and also legally established a third gender category 'other' for the purpose of legal recognition.

The **Constitution of Nepal, 2015** has adopted several articles for the rights of LGBTIQ people:



- **Article 12:** Right to acquire descent citizenship with preferred gender identity.
- **Article 18:** Right to Equality. **Clause 3:** The State shall not discriminate citizens on the grounds of sex and shall have special provisions by law for sexual and gender minorities.
- **Article 18, Clause 4:** Provision of non-discrimination on the basis of gender with regard to remuneration and social security for the same work.
- **Article 42:** Right to Social Justice i.e the Right to participate in state mechanisms and public services based on the principle of inclusion.

## B. The Right to Health

The **Constitution of Nepal** has established basic healthcare as a fundamental right for all its citizens. It has ensured that:



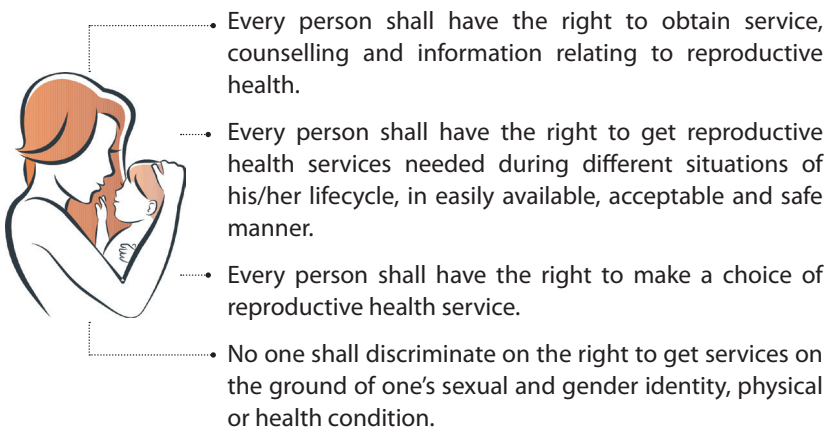
- Every citizen shall have the right to free basic health services from the State, and no one shall be deprived of emergency health services.
- Every person shall have the right to get information about his or her medical treatment.

1. Art 18 of the Constitution of Nepal, (2015)



- Every citizen shall have equal access to health services.
- Every citizen shall have the right of access to clean drinking water and sanitation.

**Nepal's Health Sector Strategy (NHSS) Implementation Plan 2016-2021** recognizes the Constitutional provision to guarantee access to basic health services as a fundamental right of every citizen. The **Right to Safe Motherhood and Reproductive Health Act, 2018** further expands access to reproductive health services. It ensures that:



**National Health Policy, 2019** ensures the fundamental health rights of citizens. This policy has been formulated on the basis of the guiding principles:

1. Universal access to, continuous availability of, transparency and comprehensiveness in quality health services
2. Special health services targeted to ultra-marginalised, Dalit and indigenous communities
3. Health and multi-sectoral coordination and collaboration in all policies

Despite these provisions, many social, cultural, political and legal arrangements discriminate against the LGBTIQ people on the basis of their gender identity and sexual orientation to access their basic sexual and reproductive health and rights.



## INTERNATIONAL HUMAN RIGHTS COMMITMENTS TO PROTECT LGBTIQ



LGBTIQ's sexual and reproductive health is related to multiple human rights, including the right to health, right to life, the right to be free from torture, the right to privacy, the right to education, and the prohibition of discrimination. Nepal has shown its commitments for LGBTIQ people by ratifying major international human rights instruments such as the International

Conference on Population & Development (ICPD) Program of Action (PoA), Beijing Platform for Action (BPfA), Millennium Development Goals (MDG) and the International Covenant on Civil and Political Rights (ICCPR).

International and regional human rights standards and a growing body of health standards that respect and protect human rights, provide clear benchmarks on how the health and human rights of LGBTIQ should be respected, protected and fulfilled.

The **Universal Declaration of Human Rights**, Article 25 proclaims that everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing, medical care and necessary social services.

The **International Covenant on Economic, Social and Cultural Rights (ICESCR)**, recognizes the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. It established that non-discrimination, in the context of the right to sexual and reproductive health, also encompasses the right of all persons, including LGBTIQ to be fully respected for their sexual orientation and gender identity.

The **Committee on the Elimination of Discrimination against Women (CEDAW)** Article 12 obliges state parties to eliminate discrimination against women in the health sector and take all appropriate measures to eliminate discrimination in the field of healthcare.

The **Convention of the Rights of the Child (CRC)**, Article 24 refers to the right of the child to the enjoyment of the highest attainable standard of health and facilities for the treatment of illness and rehabilitation of health.



On September 2015, twelve United Nations entities released a joint statement calling for an end to violence and discrimination against LGBTIQ people explicitly urging states to repeals discriminatory laws which perpetuate stigma and impede access to inter alia, health and HIV services.<sup>2</sup>

The **International Conference on Population and Development (ICPD+25)** Program of Action recognized the right to sexual and reproductive healthcare even in humanitarian and fragile contexts as pillars of sustainable development.

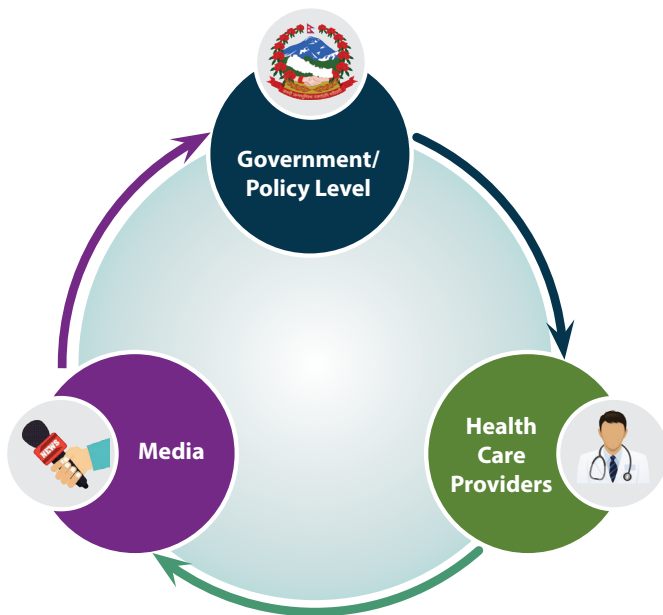
The **2030 Agenda for Sustainable Development** offers opportunities for the advancement of the LGBTIQ people and contains several targets related to reproductive health. Sustainable Development Goal 3 seeks to ensure healthy lives and promote well-being for all.



2. United Nations Joint Statement, Ending Violence and Discrimination against Lesbian, Gay, Bisexual, Transgender and Intersex People (2015)



## KEY DOMAINS OF ADVOCACY TO ENSURE SRHR OF LGBTIQ



Breaking down access barriers requires an effort across multiple fronts. To assist in bringing about radical change and determining priorities and strategies, concrete steps can be taken by the government, healthcare providers and media to advance access to quality SRHR interventions for LGBTIQ people.

### THE ROLE OF THE GOVERNMENT

The government has an obligation to prioritize, respect, protect and fulfil the human rights of LGBTIQ. They must ensure access to healthcare related services for LGBTIQ on an equal basis with others. Laws and policies are critical foundations for the protection of sexual diversity and ensuring access to healthcare facilities. The cultural shift towards the inclusion of LGBTIQ is of utmost importance.



## RECOMMENDATIONS .....

1. Ensure the access, affordability, availability and quality of sexual and reproductive health services including medication and counselling services for LGBTIQ people.
2. Undertake appropriate legislative, administrative, budgetary and judicial actions to ensure equal sexual and reproductive health rights and opportunities to LGBTIQ people.
3. Sensitize legislators, parliamentarians, judiciary and law enforcement agencies to work towards replacing the current punitive laws, policies and practices with more rights-based approaches for sexual and reproductive health services.
4. Create safe spaces for dialogue between LGBTIQ people through a multi-sectoral approach including community members, patients, healthcare providers, media, CSOs, researchers and policy makers.
5. Provide training on sensitivity and effective response to LGBTIQ discrimination and hate crime for police, security services and the criminal justice system, or support those groups already providing such trainings.
6. Initiate national campaigns to tackle stigma and discrimination in healthcare services and raise awareness about the sexual and reproductive needs of LGBTIQ people.
7. Create mechanisms to monitor the disparities in healthcare access and consider the mental health facilities, treatment of HIV & AIDS, and hormonal therapy as an essential for LGBTIQ people.
8. Support research related to LGBTIQ's sexual and reproductive health and rights.
9. Fund community-based LGBTIQ organizations and service providers who are in a better position to reach LGBTIQ people and ensure meaningful engagement with them.
10. Pursuant to the Right to Safe Motherhood and Reproductive Health Act 2018 the government should ensure universal access to safe abortion and ensure accessibility, availability, affordability, adequacy, awareness on comprehensive sex education and quality of sexual and reproductive health services to LGBTIQ people.

## THE ROLE OF HEALTHCARE PROVIDERS

Despite significant advancements, the LGBTIQ people continue to face difficulties in accessing healthcare. To provide services and care to LGBTIQ people in the most effective way, healthcare providers need to understand



how LGBTIQ people's identities, experiences, and relationships with the world around them might affect their health. There is a need to enhance their capacity and skills to deliver information, treatment and care for LGBTIQ. To take proper care of their sexual and reproductive health and for healthcare providers to offer a safe space for LGBTIQ, there is a need for radical change within the field of sexual education. Healthcare providers need to be taught about sexual orientation to properly address the issues of sexual and reproductive health.

## **RECOMMENDATIONS** .....

1. Enhance the capacity of healthcare providers to respond to the sexual and reproductive health needs of LGBTIQ people through trainings and sensitization programs.
2. Offer a wide range of SRHR related services to address issues from HIV and STDs to positive prevention, non-communicable conditions (such as male and female specific cancers), mental health, sexual dysfunctions, family planning, and parenting choices.
3. Provide manuals to health departments, including healthcare centres and pharmacies on providing friendly services to LGBTIQ people.
4. Maintain a list of LGBTIQ inclusive and affirming mental health resources to offer their patients in healthcare facilities.
5. Provide counselling and mental health services that focus on the acceptability and rights of people of diverse sexualities and gender identities.
6. Conduct a more rigorous research and development program to understand the health implications of hormone use such as the need for proper counselling on medication, dosage, and surgery, as well as psychological support.
7. Ensure all healthcare facilities-general, mental or sexual and reproductive include LGBTIQ people by displaying non-discrimination policies, educational brochures on LGBTIQ health in the counters and revise intake forms to include sexual orientation and gender identity.

## **THE ROLE OF MEDIA**

Although the role of the media in educating the public about sexual and reproductive health rights is significant, the coverage of LGBTIQ people is poor due to their lack of understanding of sexual orientation and gender identities. Though some of the issues are regularly covered in the media, it has focussed mainly on scandalous stories which has further increased stigma, distorted





the public's views of sexual orientation and gender identity and reinforced harmful stereotypes.

The mass media can contribute greatly to address these challenges by focussing public attention on the need for sexual and reproductive healthcare, making them more visible in development discourses and providing accurate and comprehensive information to the public. In doing so, the media can help break the culture of silence and discrimination associated with SRHR by promoting openness and public discussion.

## **RECOMMENDATIONS** .....

1. Initiate widespread public information campaigns and awareness programs on gender identity, sexuality and sexual and reproductive health needs of LGBTIQ.
2. Disseminate correct information on sexual and reproductive health rights of LGBTIQ so that the society will become familiar with alternative and legitimate models of a family.<sup>3</sup>
3. Build cooperation between LGBTIQ and mainstream media organisations to establish sensitivity towards mainstreaming sexual and gender diversity within SRHR programs.
4. Build the capacity of journalists and enhance journalists' interest and motivation for reporting to understand and improve the quality and quantity of mass media coverage of SRHR issues through training and competitive grants for outstanding reporting.
5. Establish and maintain trust and mutual relationships between journalists and researchers. Build formal partnerships with professional media associations and individual journalists.
6. Ensure greater coverage on the sexual and reproductive healthcare of LGBTIQ to ensure that different voices are heard so that the diversity of the community can be demonstrated.
7. Build up media as a watchdog to promote the SRHR of LGBTIQ and promote sensitivity.
8. Recruit LGBTIQ people in the team so that issues related to sexual and reproductive health needs are highlighted.

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3. BEING LGBT IN ASIA, Nepal Country Report, UNDP



## Day Celebration of **LGBTIQ** Community

**31 March**

*Transgender  
Visibility Day*

**26 April**

*Lesbian Visibility*

**17 May**

*International Day  
against Homophobia,  
Biaphobia and  
Transphobia*

**14 July**

*Non- Binary  
People's Day*

**23 September**

*Bisexual  
Visibility Day*

**11 October**

*National Coming  
Out Day*

**26 October**

*Intersex  
Awareness Day*

Source [https://en.wikipedia.org/wiki/List\\_of\\_LGBT\\_awareness\\_periods](https://en.wikipedia.org/wiki/List_of_LGBT_awareness_periods)



## INTRODUCTION

Mitini Nepal (MN) is led and driven by community based organization for the rights of people who identify themselves as lesbian, bisexual and transgender. MN was established in 2006 with a vision to build a peaceful, prosperous society where sexual and gender minorities' community can live with self-esteem and dignity while enjoying human rights without any discrimination, violence, assault, and fear.

It was established by the first lesbian couple of Nepal Laxmi Ghalan & Meera Bajracharya. MN advocates for the access of political, legal, social, economic and educational rights of LBT people by strengthening coordination, collaboration, network and by developing mutual understanding among all concerned stakeholders as well as by capacitating excluded and vulnerable LBT individuals in order to create an egalitarian environment for sexual and gender minorities.

Mitini Nepal has been working in 3 provinces of Nepal with local communities and on a national level with the mission to improve the human rights and well-being of sexual and gender minorities in Nepal.

## MISSION

To advocate for the access of political, legal, social, economic and educational rights of LBT people by strengthening coordination, collaboration, network and by developing mutual understanding among all concerned stakeholders as well as by capacitating excluded and vulnerable LBT individuals in order to create an egalitarian environment for sexual and gender minorities

## GOAL

A just society where LBT can live a dignified life with fruitful participation in public spheres, highly protected socially, economically, legally and politically.

## OUR PROGRAMS

### 1. Lobby and Advocacy Program

We advocate for equal rights of LBT people through interaction with policymakers and government stakeholders, media and other members of civil society. We also organize discussion, seminars, workshops, rally, sit-ins, press meetings, etc.

### 2. Awareness and sensitization Program

We conduct awareness-raising programs to sensitize community on Sexual Orientation, Gender Identity and Expression (SOGIE) and LGBTI issues through street dramas, radio program, cultural programs, posters and pamphlets publications, orientation in academic institutions including schools and colleges, awareness raising programs for community service organizations (CSOs), parliamentarians, government stakeholders, community police and media.

### 3. Skill development programs

We provide skill development and income generating training to LBT and women for marginalized and poor communities. Some of the income generation training are tailoring, weaving, driving, beautification training, coffee making, mushroom cultivation training, an candle making. We also sell products for fundraising.

### 4. Capacity development programs

We conduct capacity development programs such as leadership development, human rights, legal awareness and other training on sexual and gender rights.

### 5. Psychosocial and Legal counseling

We provide both psychosocial and legal counseling services to lesbians, bisexual women, and transgender.

### 6. Research and study

We conduct qualitative and quantitative research on LBT women's issues including challenges and also document their stories as narratives.



Mitini  
N E P A L

*(An Organization for the rights and dignity of Lesbian, Bisexual & Transgender)*

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Instagram: [https://www.instagram.com/mitini\\_jewellery/](https://www.instagram.com/mitini_jewellery/)