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**Violation of the economic, social and cultural rights**

**of trans persons in Chile**

**List of suggested issues submitted to the Working Group on Chile’s Report**

**Committee on Economic, Social and Cultural Rights**

**65° Pre-Session of the Working Group**

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**Report presented by:**

* **Asociación OTD Chile – Organizando Trans Diversidades**
* **Akahatá – Equipo de trabajo en sexualidades y géneros**
* **Synergia - Initiatives for Human Rights**
* **SRI – Sexual Rights Initiative**

Asociación OTD Chile – Organizando Trans Diversidades; Akahatá – Equipo de trabajo en sexualidades y géneros; Synergia – Initiatives for Human Rights; and the SRI – Sexual Rights Initiative, are honored to submit the following list of issues to the Committee on Economic, Social and Cultural Rights with the aim of assisting the Committee in the production of the List of Issues about the implementation of the International Covenant on Economic, Social and Cultural Rights by the State of Chile.

**List of issues and questions suggested to the Committee**

**Obstacles in the application of Law 20.609, which establishes measures against discrimination**

**Article 2.2**

1. On July 12, 2012, Law 20.609[[1]](#footnote-1) came into force, establishing measures against discrimination. This law mandates that state administration institutions should implement public polices “aimed at guaranteeing for every person, without any arbitrary discrimination, the enjoyment and exercise of their rights and liberties acknowledged in the Political Constitution of the Republic, laws and international treaties ratified by Chile and that are into force”. However, up to date no general program exists nor a cross-cutting institution has been created to solve that situation, and therefore today there are not official data about access to education, health and work by LGBTIQ+[[2]](#footnote-2) persons, nor there are any disaggregated data regarding discrimination[[3]](#footnote-3).

**Questions to the State of Chile**

1. Which measures are to be advanced by the State to comply by the commitment to turn law 20.690 into a general frame law against discrimination, just as it was stated in the previous report to the Committee on Economic, Social and Cultural Rights?
2. Which statistics or any other quantification studies do the State possess regarding discrimination? If there are no such statistics, how will the state put in place methods allowing it to produce official, disaggregated data to gain knowledge of the situation of LGBTIQ+ persons and which public entities will carry out such research?
3. Does the State plan to create any cross-cutting entity to co-ordinate actions and public policies in order to ensure LGBTIQ+ persons’ access without discrimination to work, education and health?

**Violation of the right to work and, as a consequence, to the right to an adequate standard of living for trans persons.**

**Articles 6 and 7**

1. The job market is one of the fields where trans people suffer the greatest discrimination. In October, 2017, OTD Chile published the T Survey, the first survey about trans persons in Chile. The survey found 53% of trans persons hide their gender identity during much of the application process to a new job. Another 12% of interviewed persons said they avoid talking about their gender identity during employment application processes whereas 6% said they have applied to jobs only in places where trans persons are explicitly included. All this is due to discriminatory attitudes during staff selection processes, because employers avoid hiring trans persons, especially for positions of customers’ service, alleging they want to prevent having trouble with transphobic clients. Therefore, the prevailing discriminatory treatment in the work world prevents trans people from accessing and retaining formal jobs.
2. The situation is aggravated by the lack of state incentives for companies that apply inclusive criteria for LGTBQ+ persons in their staff hiring processes, nor there are any labor quotas for trans persons, a positive measure in place in other countries in the region for LGBTQ+ persons and for persons with disabilities in Chile, for whom a labor quota of 1% of positions in all public and private institutions in the country has been established[[4]](#footnote-4).
3. These difficulties to access a registered job, together with the difficulties to access education and training, lead to sex work being the only surviving means for trans people –and especially for trans women–, a clandestine work with no state regulation of any kind and therefore without the possibility to access to any social security system[[5]](#footnote-5).

**Questions to the State of Chile**

1. Which mechanisms are going to be advanced by the State to guarantee that trans persons are not discriminated against during staff selection processes, taking into account the high discrimination rates prevailing in such areas?
2. Which public policies are planned by the State to implement work training programs focused on LGTBIQ+ persons, especially on trans persons, in order for these persons to increase their chances of getting a registered job?
3. Has the State included or is going to include gender identity as a variable when creating tax incentives for private companies in order to encourage hiring of trans persons?
4. Which concrete measures are going to be adopted by the State to prevent and eradicate violence and discrimination hampering the ability of LGTBIQ+ persons to retain their jobs?
5. How many trans and intersex persons are currently working in the public system? Has the creation of a labor quota been considered for staff selection processes in the public system?
6. How will the State advance the regulation of sex work, so persons who perform it can access to health and pensions social security systems?

**Violation of the right to family protection for LGBTIQ+ persons**

**Articles 2.2 and 10**

1. By the end of 2018, Chile passed law 21.120 recognizing and protecting the right to gender identity[[6]](#footnote-6), in a historical advancement regarding recognition of trans identities by the State. This law includes some essential principles, such as non-pathologization (art. 5, letter a) and prohibits changes in appearance or medical or surgical treatments from being requested to access the change in registered name and sex (article 2).
2. However, the law establishes a different procedure for married people: the same sentence from the Family Court approving of the change in registered name and/or sex terminates the marriage of the trans person (art. 19, par. 4°), declaring both parts as legally divorced for all purposes (art. 19, par. 5°), without even taking into account the opinion of the spouse of the petitioner about their will whether to continue the marriage or not. This rule was included as a result of the pressure of conservative sectors in an attempt to avoid cases of same-sex marriage no matter what, since in Chile same-sex marriage does not legally exist yet. In these cases, the option to transform marriages into civil unions agreements was neither allowed, in spite of these kind of unions being regulated by Law 20.830[[7]](#footnote-7) which legally recognizes same sex couples.
3. As a result, when married trans persons change their registered sex, they, their spouses and children loss many rights and guarantees associated with marriage and related to social security, such as health insurances, job benefits, among others.
4. In addition to that, the legal framework does not recognize a legal parentage relationship between the biological children of a person and their same-gender partner, however they may have shared childrearing during years.

**Questions to the State of Chile**

1. Which measures are going to be adopted by the State to prevent rights from being lost when a married person changes their registered name and sex, especially regarding social security, which also affects their family?
2. How is the State going to advance equals rights recognition for families formed by LGBTIQ+ parents?
3. Which measures are going to be adopted by the State to legally recognize the parentage relationship among a person belonging to the LGBTIQ+ community and the children of their partner that have been reared by both persons in a shared home?

**Violation of the right to health of trans and intersex persons**

**Article 12**

1. Regarding health care, the above mentioned T Survey showed that 96% of interviewed persons have felt discrimination when their identity was called into question by almost all the health care personnel, especially by receptionists and nursery staff (46%).
2. Chile does not have a regulation to standardize the access to hormone replacement therapies or sex reassignment surgeries, and therefore access to these practices depends on the will of each public hospital staff, and also on their economic and professional resources. Lack of regulation has given place to discriminatory acts in public health centers, as it was the case in Hospital Barros Luco, in Santiago, where care was denied to a trans person because they did not produce a psychiatric certificate with a “gender dysphoria” diagnosis[[8]](#footnote-8). The Court hearing the case decided in favor of the hospital, contending that the requisite was in accordance with a ministerial order which is in fact pathologizing[[9]](#footnote-9). A similar case took place in a private medical consultation, where the Court considered the appeal to be unacceptable, although a violation to the constitutional right to equality was being denounced[[10]](#footnote-10).
3. The Clinical procedure for bodily modification in persons with incongruence between physical sex and gender identity[[11]](#footnote-11) (2010) recommends the application of the Real Life Experience (from now on, RLE) as a requisite prior to begin medical, surgical and hormonal procedures associated to gender transition. This RLE requires the patient to fulfill a series of tasks unilaterally determined and not always desired by the patient, which presuppose fitness within social gender role[[12]](#footnote-12). In addition to this, this ministerial order violates the principle of non-pathologization of trans persons established in article 5, letter a of Law 21.120 which recognizes and protects the right to gender identity[[13]](#footnote-13).
4. On the other hand, circular 18[[14]](#footnote-14)–enacted on December 22, 2015– rules over some aspects of health care for intersex children. Through this circular, all public hospitals across the country were ordered to stop performing unnecessary “genital normalization” surgeries. The circular also included the creation of a multidisciplinary working group to address these cases.
5. However, on August 23, 2016, circular 7 was published to complete circular 18, but it meant a setback on the issue, because it played down the order to stop surgeries by giving parents of the intersex newborn the capacity to give their substitute consent to authorize the surgery. Since this disposition was not accompanied by a proper orientation to parents, it has given place to a significant rise in genital mutilations, which cause life-long physical and psychological pain to the intersex person[[15]](#footnote-15).

1. Finally, it should be noted that the cited circulars are binding for public health facilities only but do not oblige private hospitals and health centers in any way, where surgeries on intersex newborns have never stopped.
2. In situations when the medical personnel have reported the sex of the newborn to be “undefined”, the Civil Registry has rejected the registration. As a consequence, intersex children and their families are prevented from accessing the social security system and the health system, hampering the family’s wellbeing until the results of more specific medical examinations are obtained. This results in delays and administrative difficulties in accessing benefits and services associated to the birth of a person, such as family leaves for parents or application to health insurances[[16]](#footnote-16).
3. The Civil Registry Service was asked about the number of trans persons dead because of HIV or its associated illnesses, because of the rise in HIV[[17]](#footnote-17) infections at the national level. The entity answered that “the requested information does not exist in this Service” [[18]](#footnote-18). This situation is the result of insufficient and inadequate public policies for the treatment of this part of the population.

**Questions to the State of Chile**

1. Through which public polices will the State eradicate discriminatory practices against LGBTIQ+ persons in health services, practices that constitute a barrier for access to health, especially for trans persons?
2. How many funds has the State allocated to awareness and training programs on LGTBIQ+ persons directed towards public hospital personnel with the aim of reducing discrimination and barriers to access?
3. How is the State going to guarantee access to hormone replacement therapies across the Republic, for persons who decide to start or who are in the process of transition?
4. Which mechanisms will be put in place to stop unnecessary surgeries on intersex persons who are not of enough age to give their free, previous and informed consent, both in public as in private hospitals?
5. Which measures have been adopted to provide families with intersex children with adequate counseling and support?
6. Through which mechanisms will the access to justice be safeguarded for intersex persons who have been subjected to surgeries or other unnecessary medical procedures without their free, previous and informed consent?
7. How will the State safeguard timely access to registration in the Civil Registry when an intersex child is born and whose sex is reported as “undefined”?
8. How will the State safeguard the timely access to the social security system and to the health system for intersex children and their families when the medical personnel report the sex as “undefined” and the Civil Registry rejects the registration?
9. How will the State guarantee access to name or sex change for intersex persons affected by genital surgeries soon after birth who may want to rectify the decision made by the medical team and their families?
10. Which mechanisms will be used to begin gathering statistical information about the trans population regarding the rise in HIV infections at the national level, to be able to design an effective policy for this population group?

**Violation of the right to education of LGBTIQ+ persons**

**Articles 2.1 and 13**

1. Since the creation of the Superintendence of Education, in 2012, reports of discrimination against trans students[[19]](#footnote-19) have been constant. Discrimination leads to school leave and it entails an attack against integrity and psychic and physical health of the affected persons, which sometimes ends in suicide[[20]](#footnote-20). The situation pushed this entity to issue circular 0768[[21]](#footnote-21) in 2017, establishing a series of obligations for elementary and high schools in the country regarding trans children, including respect for social name and the use of uniforms and toilettes preferred by the person. Soon after its implementation, it was clear that resistance against accepting gender transition processes of the students still exists in schools and situations of discrimination have not decreased. Most of the cases we know about are from urban areas, because LGBTIQ+ persons living in rural areas face greater barriers to report discriminatory situations and to get support.
2. On the other hand, Chile still has men-only and women-only schools: this gender segregation in education is based on conservative and heteronormative prejudices which historically have only perpetuated inequalities. In men-only schools, male chauvinist biases are more present, and therefore there is discrimination against LGBTIQ+ persons. Students attending those schools who go through a gender transition are more exposed to discrimination from teachers or from other students and many times they are forced to change to a school for the other gender. Such was the situation faced by Arlén Aliaga, the first trans student in a historical women-only high school, who managed to get admitted into that school thanks to civil society pressure: Arlén asked to change school after being harassed by teachers and authorities in a men-only school[[22]](#footnote-22). Trans students have also been discriminated against in non-segregated schools: in high school “Liceo Augusto D´Halmar”, in Santiago, the director himself has refused to respect the social name and the pronouns of a trans girl student who asked for that, as is provided in Circular 0768[[23]](#footnote-23). The Superintendence of Education even sent the case to the Public Prosecution Office because some statutory offenses might have been committed in this case[[24]](#footnote-24).
3. Although many research articles focused on discrimination against LGBTIQ+ persons in education have been presented in our local context[[25]](#footnote-25), there are still no standardized school programs on sex education or affective education designed with a focus on equity and integration of different sexualities and genders, to promote respect for the human rights of LGBTIQ+ persons as well as their visibility, as a means of preventing discrimination and bullying based on sexuality and gender.
4. Law 20.418 establishes that “educational institutions with a State recognition should include a sex education program in their Middle School Cycle” [[26]](#footnote-26), and therefore in Chile sex education is mandatory only for students 14 years old or more, and although the government announced it would send a bill lowering that age to 10 years, it has not been debated yet[[27]](#footnote-27).
5. In accordance with the dispositions of Law 20.418, in March 2011 the Ministry of Education made seven programs on sex and affectivity available to education institutions. Those programs were produced by universities and private centers[[28]](#footnote-28). In what was seen as a very troublesome statement, one of those programs considered lesbianism and homosexuality as a sex identity disorder[[29]](#footnote-29). Titled “Educational program on sexuality and affection based on values”, it was produced by the Centro de Estudios de la Familia (Center for the Study of the Family) belonging to Universidad San Sebastián and it still remains among the three available programs[[30]](#footnote-30) after the other four were removed by the government.
6. In addition to that, the sex education programs to be applied are chosen by those responsible for each education institution: when it comes to public education, the decision-makers are city councils and their criteria change with the political will of the major in office at the time. One research found that out of 11.442 city schools and private subsidized schools in Chile, only 467 implemented sex education programs in 2015[[31]](#footnote-31).
7. When talking of private education, the commercial societies or private right corporations who own the school or high school are who decide which program to implement: in their vast majority, these education institutions do not apply any program and when they do, they choose biased programs that exclude sexual, bodily and affective diversity, alleging to be protected by the constitutional right to academic freedom.

**Questions to the State of Chile**

1. Which measures are going to be promoted by the State to reduce discriminatory bullying and violence perpetrated in education institutions by some students against other children and adolescents because they are LGBTIQ+?
2. How will the State train teachers, workers and authorities of public and private educational institutions to eradicate discriminatory attitudes against LGBTIQ+ children and adolescents?
3. Which measures are going to be promoted by the State to prevent LGBTIQ+ persons from leaving school, especially trans students, and which measures are going to be taken to reduce suicide among LGBTIQ+ adolescents?
4. How will the State monitor that anti-discriminatory legislation and rules are applied in educational institutions located in rural areas?
5. How will the State guarantee that sex education and affective education programs offered by the Ministry of Education to public and private educational institutions will not be discriminatory and biased against LGBTIQ+ persons?
6. Which measures are going to be adopted by the State to guarantee sex education and affective education programs are applied in all schools across the Republic, as mandated by Law 20.418 and in accordance with international human rights standards?
7. Which actions are going to be taken by the State to put an end to gender segregation in the admission processes for the education system or, if that does not occur, how will it protect the psychic and physical integrity of trans students who go through their gender transition while in gender-segregated schools?

**Violation of the economic, social and cultural rights of**

**trans persons in Chile**

**Appendix**

**Note 1: On sex and affective education and discrimination against LGBTIQ+ persons in education**

The T survey showed 40% of trans persons reports discrimination in their education places, and 27% marked it was high or very high during high school. In half of the cases, social name and preferred pronouns were not respected, especially by direction teams (39%, vs 30% of teachers and 31% of students)[[32]](#footnote-32).

The 2016 National Survey on School Environment, carried out by Fundación Todo Mejora, showed even more alarming figures with 59,9% of students having heard discriminatory remarks[[33]](#footnote-33). All this leads to depression that many times translates into suicides: 56% reports having attempted it and 27% of this group attempted it for the first time when they were between 16 and 18 years old but even more striking is the 57% who attempted suicide even before 16 years of age. A paradigmatic case of trans suicide due to discrimination is that of Matías Silva, who put an end to his life in May after repeated discriminatory acts in his school[[34]](#footnote-34).

**Note 2: Recommendations made by the Committee on Economic, Social and Cultural Rights about official statistical data.**

In 2015, the Committee on Economic, Social and Cultural Rights observed with concern “the few up to date statistical data presented by the State party about the implementation of economic, social and cultural rights”, and a similar situation can be seen regarding sex and gender diversity. In the previous report by the State of Chile to the Committee on Economic, Social and Cultural Rights, it took a commitment to “a comprehensive review of Law 20.609 to turn it into a frame law”[[35]](#footnote-35). However, no bill has been introduced until now regarding that issue, in spite of the repeated recommendations by the Committee on Economic, Social and Cultural Rights about access to work, to social security, to health and to education by LGBTIQ+ persons, including the recommendation to include “regulations allowing compensations to be granted in discrimination cases”[[36]](#footnote-36).

**Note 3: On the rise of genital surgeries performed on intersex children.**

Annual surveys directed to all public hospitals across the country have registered a total of 21 surgeries between 2015 and 2017, with 13 surgeries on persons aged 18 or less during 2017 alone, making it the year with the highest number of cases[[37]](#footnote-37). These are 12 more cases than that registered during 2015 and have taken place in three public hospitals: Hospital San Borja Arriarán, Hospital Regional de Concepción and Hospital San Juan de Dios. This rise in figures overlaps with the issuing of Circular 7 on August 23, 2016. Out of a total of 21 cases registered at the national level in the public health system between 2015 and 2017, 18 were justified under a diagnosis of congenital suprarenal hyperplasia and of these about 67% were cases of persons aged from 8 months of life to 8 years.

The above described situation was already informed to the UN CEDAW Committee in February 2018, when the State of Chile underwent its seventh review. In its concluding observations, the Committee recommended to the State of Chile: “a) To pass legislation explicitly prohibiting surgeries or other unnecessary medical treatments to be performed on intersex children until they reach an age when they can give their free, previous and informed consent, to watch over physicians being informed about that legislation and to provide families of intersex children with proper counseling and support; b) Watch over effective access to justice for intersex persons who have been subjected to surgical procedures or other unnecessary medical treatments without their free, previous and informed consent and to analyze the possibility of establishing a State fund for compensations”[[38]](#footnote-38).

1. Article 1º, paragraph 2º, Law 20.609 which establishes measures against discrimination. July 24, 2012. Library of the National Congress, Republic of Chile. Available at: <http://bcn.cl/1uyqt> [Accessed: August-2-2019]. [↑](#footnote-ref-1)
2. We use the acronym LGBTIQ+, which is based on the acronym LGBTI but adding Q for queer persons and the “+” to give space to any other gender or identity not included in the former acronym. The Inter-American Court of Human Rights defines the LGTBI acronym in the following way: *“Lesbian, gay, bisexual, trans or transgender and intersex. The acronym LGTBI is used to describe diverse groups of people who do not adjust to conventional or traditional masculine and feminine gender roles. About this acronym in particular, the Court wants to remind that the terminology associated with these human groups is not fixed and it’s rapidly evolving, so there are diverse formulations that include asexual persons, queer persons, travestis, transsexuals and others. In addition to that, different cultures may use other terms to describe persons engaged in same-sex sexual relationships and those who self-identified or show non-binary gender identities (such as, among others, the hijra, meti, lala, skesana, motsoalle, mithli, kuchu, kawein, queer, muxé, fa’afafine, fakaleiti, hamjensgara or two-spirit). This notwithstanding, although the Court will not take a position on which acronyms, terms and definitions represent in a fairest and most precise way the analyzed populations, to the effects of the present opinion only, and as it has been used in previous occasions, and as it has been customary practice in the OAS General Assembly, this acronym will be used in an indifferent way, without that meaning to deny other manifestations of gender expression, identity or sexual orientation”.* Inter-American Court of Human Rights: “Advisory opinion OC-24/17 of November 24 of 2017 requested by the Republic of Costa Rica – Gender identity, equality and non-discrimination against same-sex couples”, p. 21-22. Available at: <http://www.corteidh.or.cr/docs/opiniones/seriea_24_esp.pdf> [Accessed: August-2-2019]. [↑](#footnote-ref-2)
3. See APPENDIX, Note 2. [↑](#footnote-ref-3)
4. See Law 21.015 which promotes inclusion in the work world of persons with disabilities. Available at: <http://bcn.cl/20zja> [Accessed: August-2-2019]. [↑](#footnote-ref-4)
5. The Clinic (2017): Prostituta VIP transgénero cuenta sobre los vacíos legales que debe enfrentar dentro del comercio sexual chileno. February 12. Available at: <https://www.theclinic.cl/2017/02/12/prostituta-vip-transgenero-cuenta-sobre-los-vacios-legales-que-debe-enfrentar-dentro-del-comercio-sexual-chileno/> [Accessed: August-1-2019]. [↑](#footnote-ref-5)
6. Law 20.830 which creates the civil union agreement. April 21, 2015. Library of the National Congress, Republic of Chile. Available at: <http://bcn.cl/1uvyy> [Accessed: August-2-2019]. [↑](#footnote-ref-6)
7. Law 20.830, which created the civil union agreement, included the civil partner among the persons who may be granted child care, but that only occurs once the biological mother or father is dead or physically or morally disabled and it never generates parentage relationships with the rearing mother or father, and therefore there are not mutually valid rights nor duties. [↑](#footnote-ref-7)
8. Santiago Court of Appeals, rol Protección-3854-2018. Available at: <https://oficinajudicialvirtual.pjud.cl/ADIR_871/apelaciones/documentos/docCausaApelaciones.php?valorDoc=C06F7E02BD256AF7B93BA47C44AE8408019CB0D1168A649564907A7DF1503537> [Accessed: August-2-2019]. [↑](#footnote-ref-8)
9. Chile, Ministry of Health (2011): Ministerial order B22/2988 “Envía Vía Clínica para la adecuación corporal en personas con incongruencia entre sexo físico e identidad de género”, September 9. Available at: <http://www.saludtrans.cl/wp-content/uploads/2012/09/via-clinica-para-la-adecuacic3b3n-corporal-ministerio-de-salud-de-chile.pdf> [Accessed: August-2-2019]. Also cited in circulars issued by the Ministry of Health on September 13, 2011, number 34 (Available at: <https://saludtranschile.files.wordpress.com/2012/09/circular-nc2b0-34.pdf>) and in the repetition of June 14, 2012, number 21 (Available at: <https://saludtranschile.files.wordpress.com/2012/09/circular-21.pdf>). [↑](#footnote-ref-9)
10. Santiago Court of Appeals, rol Protección-73.669-2017. Available at: <https://oficinajudicialvirtual.pjud.cl/ADIR_871/apelaciones/documentos/docCausaApelaciones.php?valorDoc=141FBD3C5B8E6CDCEE2FF7D910A3F617D55389B3C24F8AD2856634075480ADD8> [Accessed: August-2-2019]. [↑](#footnote-ref-10)
11. Division for Disease Prevention and Control (2010): “Vía Clínica para la adecuación corporal en personas con incogruencia entre sexo físico e identidad de género”, June, p. 4. Deputy Secretary of Public Health, Ministry of Health. Available at: <https://www.minsal.cl/portal/url/item/d126e58ba4cb53f5e040010165017912.pdf> [Accessed: August-2-2019]. [↑](#footnote-ref-11)
12. Among the requirements are: “To keep a part-time or full-time job with the new role; to keep being a student with the new role; to take part in a community volunteering activity with the new role; to undertake some combination of the first three and to provide documentation proving the functioning in the new role”. [↑](#footnote-ref-12)
13. Ley 21.120 which recognizes and protects the right to gender identity. December 10, 2018. Library of the National Congress, Republic of Chile. Available at: <http://bcn.cl/283xn> [Accessed: August-2-2019]. [↑](#footnote-ref-13)
14. Circular 18: gives directions over some aspects of health care of intersex children. Ministry of Health, Republic of Chile. December 22, 2015. Available at: <https://ihra.org.au/wp-content/uploads/2016/01/Circular-08-22.12.15-Instruye-Sobre-Ciertos-Aspectos-de-la-atencion-de-Salud-a-Ninos-y-Ninas-Intersex.pdf> [Accessed: August-2-2019]. [↑](#footnote-ref-14)
15. See APPENDIX, Note 3. [↑](#footnote-ref-15)
16. It must be noted that in cases where the Civil Registry has registered intersex newborns with “undefined sex”, new problems have emerged as a result, such as the impossibility to change name or sex in an expedite way through an administrative procedure, in order to safeguard the gender identity of intersex persons. See La Tercera (2018): “269 niños han sido inscritos con sexo indefinido en el Registro Civil en los últimos 12 años”, March 14. Available at: <https://www.latercera.com/tendencias/noticia/269-ninos-inscritos-sexo-indefinido-registro-civil-los-ultimos-12-anos/98520/> [Accessed: August-2-2019]. [↑](#footnote-ref-16)
17. According to the last report from UN AIDS, Chile is the Latin-American country with the highest increase in HIV infections, with a 67,8% rise in ten years, affecting especially men between 15 and 24 years of age. See UN AIDS, Country factsheets. Available at: http://www.unaids.org/es/regionscountries/countries/chile/ [Accessed: August-2-2019]. [↑](#footnote-ref-17)
18. Service of the Civil Registry and Identification. Answer to a request for information. ID: AK002T0005682. March 5, 2019. Santiago, Chile. [↑](#footnote-ref-18)
19. OTD Chile (2018): Superintendencia de Educación recibió 18 denuncias de discriminación por identidad de género en 3 años. July 25. Available at: <https://otdchile.org/superintendencia-de-educacion-recibio-18-denuncias-de-discriminacion-por-identidad-de-genero-en-3-anos/> [Accessed: August-2-2019]. See also Diario Universidad de Chile (2018): Aumentan denuncias de discriminación por identidad de género en los colegios. July 28. Available at: <https://radio.uchile.cl/2018/07/28/cambio-cultural-aumentan-denuncias-por-discriminacion-por-identidad-de-genero-en-los-colegios/> [Accessed: August-2-2019]. [↑](#footnote-ref-19)
20. See APPENDIX, Note 1. [↑](#footnote-ref-20)
21. Superintendence of Education (2017): Circular 0768. Rights of intersex children and adolescents in the field of education. April 27. Available at: <https://www.supereduc.cl/wp-content/uploads/2017/04/ORD-N%C2%BA0768-DERECHOS-DE-NI%C3%91AS-NI%C3%91OS-Y-ESTUDIANTES-TRANS-EN-EL-%C3%81MBITO-DE-LA-EDUCACI%C3%93N-A-SOSTENEDORES.pdf> [Accessed: August-2-2019]. [↑](#footnote-ref-21)
22. See Chilevisión Noticias (2019): Ministra de Educación respalda a alumna transgénero: “Tiene derecho legal a estudiar en el liceo de su elección”, February 28. Available at: <https://www.chvnoticias.cl/sucesos/ministra-educacion-respalda-alumna-trans_20190228/> [Accessed: August-2-2019]. [↑](#footnote-ref-22)
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