The Rights of LGBTI Children in The Netherlands

A shadow report to the UN Committee on the Rights of the Child







Organizations: COC Nederland (with ECOSOC consultative status), NNID, TNN

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Introduction

This is a joint submission by COC Netherlands, Transgender Network Netherlands, and Netherlands Network Intersex/DSD and constitutes the first national civil society report on the rights of LGBTI¹ children in the Netherlands. This CRC shadow report is a summarized and translated version of the report "LGBTI children in the Netherlands, Report on the situation and rights of a forgotten group" ² (2013), presented to the State Secretary of Health, Wellbeing and Sports in February 2014, and was written by COC Netherlands and financed by the Ministry of Education, Culture and Sciences.

Methodology

The original version of this report is a first exploration of these issues in the Netherlands, so it constitutes both a baseline research and a data collection. The data that were accessible were fragmented and had never before been analyzed in the light of the Convention on the Rights of the Child. Thirty-nine transgender children and young people participated in a survey for the report, and 27 interviews with experts were conducted. With regard to intersex the report drew on a dissertation by Margriet van Heesch, based on in-depth interviews with and life stories of more than 45 people with an intersex condition in the Netherlands.³

Background

The Dutch government invests substantially in research, policy, and projects aimed at combating discrimination on the grounds of sexual orientation and gender identity. Most of these measures, however, are aimed at LGBT adults. With regard to children, the government is particularly active in education, but in other areas the government should pay more attention such as the rights of transgender children and children with an intersex status. The fact that little is known about children with an intersex status, does not mean that they do not suffer discrimination.

State Party Report

In the State Party Report the rights of LGBTI children are only mentioned once. Under a recommendation on sexual health, two measures are highlighted: First, the Gay Straight Alliances system, a program that is conducted by COC Netherlands with the support of the Ministry of Education. This program is a good way to empower students in high schools; the percentage of schools participating in the yearly Day against Homophobia has grown from 23% in 2010 to 74% in 2013. Secondly, the government writes that they promote "safe online meeting places for young LGBT people"⁴. The Ministry of Education supports a website that is hosted by COC Netherlands with 3,000 members under 19 years old, and monthly meetings for this group are organized.⁵ Both programs are best practices for protecting the rights of LGBT children. However, the government has communicated to COC Netherlands that it is unclear whether the support will be continued in 2015.

¹ This reports uses the acronym "LGBTI" which stands for lesbian, gay, bisexual and transgender children and children with an intersex status. In many cases, no data is available for transgender children and/or children with an intersex status, in which cases the acronym is modified to reflect only those groups being represented, such as "LGB" or "LGBT." The absence of the group being reflected in the research and/or statistics does not indicate the right at issue is not relevant to that group.

² http://www.coc.nl/wp-content/uploads/2014/02/Rapport-LHBTI-kinderen-in-Nederland-2014.pdf

³ Margriet van Heesch, "Do I Have Xy Chromosomes?" In *Critical Intersex*, ed. Morgan Holmes, 123-47. Farnham: Ashgate, 2009, and *Ze wisten niet of ik een jongen of een meisje was. Kennis en keuze rondom geslachtsvariaties (proefschrift)*. Amsterdam: Universiteit van Amsterdam (forthcoming November 2014).

⁴ Fourth Periodic Report of the Kingdom of the Netherlands concerning the Implementation of the International Convention on the Rights of the Child (October 2006 – December 2012), CRC/C/NDL/4.

⁵ www.jongenout.nl. A recent survey (august 2014) among members shows that 97% experience the website as a safe space and for 42% the website played a crucial role in their coming out.

I. General Principles

Article 2. Non-discrimination

Lesbian, gay, and bisexual (LGB) children experience discrimination in every area of their lives. The number of attempted suicides is 4 to 5 times higher for LGB children than for heterosexual children. Research shows that there is a strong correlation between negative experiences in schools and suicidal thoughts. There are no data available for suicidal thoughts or attempts among transgender children or children with an intersex status in the Netherlands.

The prevailing gender normativity in Dutch society is a cause for discrimination and exclusion of LGBTI children. Ideas about 'manhood' and 'womanhood' make LGBTI children vulnerable to homophobic bullying. Dutch youth policy is also rooted in a binary idea of gender, with special attention to the rights of 'boys' and 'girls', which precludes room for gender diversity and diversity of LGBTI children.

Multiple Forms of Discrimination

Some LGBTI children are particularly vulnerable, such as LGBTI children who live in youth care centers, juvenile justice facilities, or asylum centers as well as those who live in poverty and/or homelessness. Research shows that LGB children with conservative religious parents or parents with a Surinam, Moroccan, Turkish or Chinese background experience more problems. Additional factors such as gender, education, social class, age and disability can play an aggravating role.

 Policy for LGBTI children should be rooted in an intersectional approach that is mindful of the diverse backgrounds of LGBTI children.

Article 3. Best Interest of the Child

In the youth policy of the Netherlands, LGBTI children and their needs are invisible. The effects of youth policy on children with diverse sexual orientations, gender identities, expressions and bodies is not measured or monitored. This means that the best interests of LGBTI children are not given primary consideration.

Legal Gender Recognition for children

A new law on legal gender recognition that went into effect in June 2014, no longer requires transgender individuals to undergo sterilization and other surgical procedures. However, it is still impossible for children younger than sixteen years to change their gender marker in their official documents. Additionally, it is still necessary to obtain a supporting opinion from an expert. These elements constitute a violation of children's right to self-determination. Our research shows that 80% of transgender children would like to change the gender marker in their official documents before they turn 16 because they experience a multitude of problems when the gender indicated on their documents does not correspond with their gender presentation. (See also article 8).

• With parental consent, it should be possible for transgender children from the age of 12 to change the gender marker in their birth certificate. This should be possible without interference from a judge, medical criteria or third party intervention such as the 'expert opinion' that is still necessary under the new law. 6 (see also article 8).

Sex Registration

In the Netherlands, the biological sex of infants is registered at birth, which constitutes a violation of their right to self-determination. The registration of biological sex leads to problems for transgender children (see above and article 8), because they are not legally able to change their sex marker until they turn 16 years old. In cases where the sex of a child is not immediately clear, there is a legal exception indicating the gender marker can remain empty. However, this option is almost never used, and it would not benefit children with an intersex condition as it singles them out and this would lead to more discrimination and practical barriers. Abolishing the gender registration might have positive consequences for LGBTI children, because the social emphasis on gender differences could diminish.

• The Dutch government should facilitate a dialogue and explore the option of abolishing the sex registration in official documents.⁷

Article 6. Right to Life and Development

Almost 50% of LGB children have had suicidal thoughts, 12% have attempted suicide and 13% frequently experience depression. Suicide rates are 4 to 5 times higher among LGB children than among heterosexual children.⁸ There are not enough data to establish the suicide rate of transgender children and children with an intersex status. In some cases, children are sent to 'reparative therapy', in order to 'cure them' of their sexual orientation, especially in the Dutch Caribbean. This severely harms their development.

- The Dutch government should take measures to decrease the number of suicidal thoughts and attempts among LGB children.
- The Dutch government should stimulate research into the wellbeing of transgender children and children with an intersex status.
- The Dutch government should do research into existing curative therapies, their harmful impact, and violence by family or parents.

⁶ In its response to the Dutch version of this report, the Ministry of Health has committed to pay particular attention to the age limit in its planned evaluation of the transgender law in 2019. The Ministry commits to listening to the views of transgender children in this evaluation. See 'Reactie rapportage LGBTI kinderen in Nederland', Kenmerk 615127-122828-J, 9-7-2014.

⁷ In its response to the Dutch version of this report, the Ministry of Safety and Justice wrote that they requested a study by the University of Utrecht into the possibility of abolishing the sex registration. It is to be recommended that there is a broad dialogue on the outcomes of that research. See 'Reactie rapportage LGBTI kinderen in Nederland', Kenmerk 615127-122828-J, 9-7-2014.

⁸ J. van Lisdonk en D. van Bergen, "SameFeelings: een onderzoek onder homojongeren", in: Steeds gewoner, nooit gewoon, Acceptatie van homoseksualiteit in Nederland, Saskia Keuzenkamp (red.), Sociaal en Cultureel Planbureau, Den Haag, juni 2010. (SameFeelings 2010).

Article 12. Views of the Child

LGBTI children are hardly ever consulted by Dutch government in policy making processes that concern their needs.

• The views of transgender and intersex children should be considered in their medical treatment and policy making (see article 3 and 19).

II. Civil Rights and Freedoms

Article 8. Right to Preserve Identity

The Dutch government does not recognize the true gender identity of transgender children. Transgender children that were interviewed for this report say that they experience stress whenever they have to complete simple tasks such as register for school, show a pass for public transportation or show any identification documents. Dutch children are legally obliged to be able to show proper identification from the age of 14.

 With parental consent, it should be possible for transgender children from the age of 12 to change the gender marker in their birth certificate. This should be possible without interference from a judge, medical criteria or third party intervention such as the 'expert opinion' that is still necessary under the new law (see also article 3 and 12).

Article 17. Right to Information

For LGBTI children, access to information on sexual diversity, gender diversity and intersex status is of the utmost importance. This is particularly true for transgender children and children with an intersex status. Statistics demonstrate that transgender children often think they are the only people like themselves.⁹ No such data are available for children with an intersex status.

Information should be easily accessible, while a child also has the right to privacy to do research and explore. Role models are very important for LGBTI children and adolescents, in order to improve their self-acceptance, empowerment and positive image of the future and prevent suicide.

• The Dutch government should develop an informative website on intersex status and collaborate with The Netherlands Network Intersex/DSD (NNID).

⁹ From an interview with Ruth Kaufmann, sexologist from NVVS/VPO and sexological pedagogue at Transvisie Zorg, 24 april 2013.

III. Violence Against Children

Article 19. Protection from Violence

Homophobic Bullying in Schools

The word 'homo' (Dutch for 'gay') is one of the most commonly used forms of verbal violence in and around schools. Bullying leads to physical and mental health problems, it obstructs the personal and social development of the child, leads to depression and increases the risk for children to become violent themselves. The Committee on the Rights of the Child, in General Comment 13, states that protection from violence includes protection from psychological and physical bullying. The Netherlands has the obligation to prevent violence against LGBTI children and adolescents.

• The Dutch Ministry of Education and the Children's Ombudsman should actively transmit the message that bullying children with the word 'homo' is a form of violence. Schools should ensure that the use of the word 'homo' is not allowed in and around schools.

In March 2013, the government presented policy that requires schools to implement an anti-bullying approach. This was partly a response to a recommendation of the Committee on the Rights of the Child. The anti-bullying policy, however, does not mention vulnerable groups such as LGBTI children, even though the CRC General Comment nr. 13 does advise to do so. The policy therefore does not address how schools should counter homo- and transphobic bullying.

The new anti-bullying approach for schools replaces the law on incident registration of violence and discrimination in schools. ¹¹ This is problematic. Homophobic bullying is often invisible for teachers, and therefore it is important to have insight into the nature and extent of bullying of LGBTI pupils.

- The anti-bullying policy should explicitly include vulnerable groups such as LGBTI children and specify how to address homo- and transphobic bullying.
- The Netherlands should encourage the registration of incidents of violence and bullying against LGBTI pupils in schools.¹²

Medical Procedures Without Informed Consent

In 2013, the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment called on states to repeal any law allowing intrusive and irreversible treatments, including forced genital-normalizing surgery, involuntary sterilization, "reparative therapies" or "conversion therapies", when enforced or administered without the free and informed consent of the person concerned. He also called upon them to outlaw forced or coerced sterilization in all circumstances.¹³

• The Dutch government should not allow 'normalizing' surgical procedures on infants and children with an intersex condition when there is no medical necessity.

¹⁰ Tweede Kamer, vergaderjaar 2012-2013, 29 240, nr. 52 (kst-29249-52).

¹¹ 'Plan van aanpak tegen pesten', 2-3-2013, bijlage bij kst-29240-52, pp. 7-8.

¹² In its response to the Dutch version of this report, the Ministry of Health has indicated that there will not be any mandatory registration of incidents of violence in schools. See 'Reactie rapportage LGBTI kinderen in Nederland', Kenmerk 615127-122828-J, 9-7-2014.

¹³ Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Juan E. Medez, Human Rights Council, 1 February 2013 (A/HRC/22/53)

'Reparative Therapies'

In 2012, it became clear that the government's health care plan also financially covered treatment by Christian centers to 'cure homosexuality'. The Ministry of Health put a stop to the financial coverage. This however is not enough to stop these kinds of services altogether.¹⁴ The treatments these organizations provide are a form of psychological violence. In the Caribbean part of the Kingdom, religion plays a large role in society, and its influence can lead to punishment, violence or 'treatment'.

The Dutch government should not fund as well as ensure that LGB children are not subjected
to treatment aimed at 'curing' their sexual orientation, including in the Caribbean parts of
the Kingdom.

IV. Disability, Basic Health and Welfare

Article 24. Right to Health

Focus on Needs of LGBTI Children

There is no specific focus on the needs of LGBTI children in youth care, sexual health care, medical care and psychological health care. Parents and caregivers often do not know how to address issues with regard to sexual orientation, gender identity and intersex status. The lack of knowledge can have harmful consequences and uphold homophobia and transphobia.

• The Dutch government should do more research into the situation and wellbeing of LGBTI children in health care services and train professionals accordingly.¹⁵

Transgender and Intersex Care

Research into sexual health among Dutch LGBT minors¹⁶ shows that transgender adolescents face particular risks with regard to sexual health. Regular information on sexual health often does not apply to them; for example, it is hard for transgender adolescents to enter into relationships. There is little information on the sexual health of adolescents with an intersex status.

In the Netherlands, there is unique medical support for transgender children, for example through the use of puberty blockers. This has an immediate, positive effect on the psychological wellbeing of transgender children.¹⁷ However, waiting lists for diagnosis and treatment can go up to a year. For children at a critical age, who have a strong and continuous wish to transition to the other gender, this is too long.

• The Dutch government should ensure there are no waiting lists for transgender children to access transgender care.

¹⁴ 'Besluit Schippers over Different reikt niet ver genoeg', COC Nederland, 6 June 2012, www.coc.nl

¹⁵ In its response to the Dutch version of this report, the Ministry of Health has committed to issuing a research into the situation of LGBTI children in youth care. The results are expected in October 2014. See 'Reactie rapportage LGBTI kinderen in Nederland', Kenmerk 615127-122828-J, 9-7-2014.

¹⁶ Tamar Doorduin and Laura van Lee, 'Gaat het ook over mij? De behoeften van LHBT-jongeren aan informatie en hulpverlening rondom seksuele gezondheid', januari 2013, Rutgers WPF.

¹⁷ From an interview with Annelou de Vries, child and youth psychiatrist, on 1 July 2013, and her research 'Gender dysphoria in adolescents. Mental health and Treatment Evaluation', 2010, pp. 120-128.

There are not enough facilities in the Netherlands that offer transgender care (Amsterdam and Leiden offer diagnosis, Transvisie Zorg in Amsterdam offers psychological support). In the regular health care system, there is not enough expertise to offer psychological support to transgender children. The wrong treatment can be harmful for these children. ¹⁸

The gender teams and Transvisie Zorg hardly see transgender children of Moroccan, Turkish or Antillian descent, even though these are large minority groups in the Netherlands. Equally underrepresented are transgender children with a Christian background. This does not mean that there are no transgender children in these groups, but that they are not able to access transgender care.

• There should be more research into the access to and quality of health care for transgender and intersex children.

International Children's Programs

In the area of international cooperation, the Dutch government supports projects to improve the sexual and reproductive health and rights of children. Many of the partner organizations have a lack of knowledge and expertise on the topic of LGBTI, and sometimes there is even overt homophobia.

 The Dutch government should stimulate organizations in the field of children's (health) rights and SRHR to address the needs of LGBTI children in the programs funded by the Dutch government.

V. Education, Leisure and Cultural Activities

Article 28. Right to Education

Mandatory Education on Sexual Diversity

The Netherlands deserves appreciation for their structural commitment to improving the situation of LGBTI children within the education system. The government supports and stimulates research, interventions, and projects to diminish bullying and improve the social safety of LGBT pupils. The Ministry of Education monitors the wellbeing and social safety of LGB students every two years. In 2012, the core targets ('kerndoelen') were adjusted; schools are now required to educate on sexual diversity. (See also Article 29). The Ministry performed a pilot project in 140 schools in order to support them to implement the new targets.

Article 29. Education and Development

As described in the paragraph on article 28, schools in the Netherlands are required by law to pay attention to sexual diversity in their curriculum. It is, however, unclear whether and how this is done. It is also unclear whether and how this is being monitored, even though the parliament has adopted a motion that calls for the monitoring of this target. ²⁰

¹⁸ From an interview with Ruth Kaufmann, sexologist from NVVS/VPO and sexological pedagogue at Transvisie Zorg, 24 april 2013.

²⁰ Tweede Kamer, vergaderjaar 2012-2013, 20420, nr. 185 (kst-30420-185).

• The government should provide clarity on the monitoring and implementation of the requirement to pay attention to sexual diversity in the school's curriculum.

This policy also applies to the Caribbean part of the Netherlands. However, it is still unclear when the policy will go into effect on the islands and no date has been decided yet.

The core targets also include attention for gender diversity. This is critically needed, as transgender students state that they are incessantly bullied. Many transgender children do not want to go to school because they receive threats and face violence. Many of them receive inappropriate questions about their genitals, which creates a profound feeling of unsafety. Because their boundaries are being violated, this can be seen as a form of sexual violence. Transgender children and adolescents are harmed by strict male/female gender norms and stereotypical ideas of teachers. It is clear that most teachers do not know how to address gender diversity and how to deal with students who do not conform to existing gender norms. With regard to intersex students, there is even less knowledge or capacity to act.

 The government should ensure that there is explicit and structural attention in teacher training programs for sexual diversity, gender diversity and intersex status to increase knowledge among teachers.²³

There is widespread recognition of the need to integrate sexual diversity in regular teaching materials and lessons on primary and secondary schools. Subtle changes, such as depicting diverse families rather than only heteronormative families in language books and science books, can have a powerful impact on 'normalizing' sexual diversity for students and teachers. With regard to intersex status, it is important that diversity in biological sex, sexual development and sexuality receive ample attention.

• The Ministry of Education should stimulate educative publishers to integrate sexual and gender diversity into teaching materials.

In the Dutch education system, particular education (*bijzonder onderwijs*) refers to a separate category of education distinct from both public and private education, in which a school is administered by an independent board, as opposed to a government authority, while still receiving government funding. Often, these schools are grounded in a particular religious denomination, such as Christianity or Islam. The requirement to integrate sexual diversity in the curriculum poses a particular challenge for these schools. Research among adolescents in Amsterdam shows that minors with a Turkish or Moroccan background are 4 to 5 times more likely to have a negative attitude towards homosexuality.²⁴ It is an urgent challenge to ensure that attention for this negative attitude is part of education, the core targets, the anti-bullying approach, and citizenship education. In some schools, the attention that is given to sexual diversity is of a harmful nature, teaching that homosexuality is only wrong if you act on it. Some Christian schools make students and teachers sign an 'identity declaration', stating that they will not engage in homosexual behavior.

• Teaching materials and identity declarations that promote negative attitudes toward homosexuality should be prohibited. The Inspection for Education should play an active role.

²¹ Interview with Sophie Schers, policy officer at Transgender Network Netherlands, 14 May 2013.

²² Interviews with Sophie Schers and Ruth Kaufmann.

²³ In its response to the Dutch version of this report, the Ministry of Health has committed to ensuring attention for homophobic bullying and sexual diversity in training programs for teachers. It is unclear when and how this will be implemented. See 'Reactie rapportage LGBTI kinderen in Nederland', Kenmerk 615127-122828-J, 9-7-2014.

²⁴ L. van Vuuren e.a., 'Zo gezond zijn Amsterdamse jongeren! Stadsrapport Amsterdamse Jeugdgezondheidsmonitor voortgezet onderwijs 2012-2011', GGD Amsterdam, oktober 2012.

Up until 2014, it was possible for schools to fire teachers or expel students because they were openly gay or lesbian. The so-called 'one fact construction' stated that this could not be done because of the sole fact that someone has a certain sexual orientation, but that when there are 'additional circumstances', such as when someone is actually in a same sex relationship, this is sufficient grounds to expel or fire someone. This discriminatory policy, part of the Law on Equal Treatment, has recently been abolished, granting LGBTI students and teachers equal protection under the law.

Human Rights education

Various reports show that it would be better to link education on sexual and gender diversity to human rights education or citizenship education, rather than only discussing these issues in health or sexuality lessons. The National Human Rights Institute (*College voor de Rechten van de Mens*) states, "[i]ssues that call for special attention, like LGBT emancipation and bullying, can be better integrated in education when they are linked to human rights." The Children's Ombudsman report the same: "Human rights education can be supportive in combating discrimination and bullying against LGBTI children". The Committee on the Rights of the Child made a recommendation to the Netherlands in 2009 to establish an education and trainings program that stimulates knowledge about children's rights among children, parents and professionals who work with children. Attention in these programs for sexual and gender diversity would help prevent stigmatization of and can empower LGBTI children.

• Education on sexual and gender diversity should be linked to human and children's rights education and citizenship education, rather than only to sexuality and biology.

Article 31. Right to Recreational Activities

Research shows that LGB adolescents have a need for being in touch with peers, because that prevents isolation and can empower and support them. The government has explored which initiatives are taken for and by LGBT adolescents and stimulates those initiatives, for example the Gay Straight Alliances and Jong en Out. For transgender children, it is hard to meet other transgender minors. ²⁸ There is no knowledge about the social needs of children with an intersex status.

• The government should do research on whether and how children with an intersex status are in need of peer contact.

For LGBTI children access to sports is often limited. Research shows that sports clubs can be a hostile environment for them.²⁹ Currently, research is being conducted on the acceptance of homosexuality in sports. However, there is no attention for children's rights or their situation in this research.

The access for LGBTI children to sports facilities should be guaranteed.

²⁵ SameFeelings 2010, p. 204.

²⁶ 'Mensenrechten in Nederland 2012', Jaarlijkse rapportage van het College voor de Rechten van de Mens, p.139.

²⁷ Kinderrechtenmonitor 2013, de Kinderombudsman, 2013, p. 128

²⁸ SameFeelings 2010

²⁹ SameFeelings 2010

VI. Conclusions and Main Recommendations

LGBTI children are a vulnerable group. In order to improve their wellbeing and social safety, there should be more expertise and insight on LGBTI children and adolescents. That should lead to ongoing efforts by adults to improve the situation of these children, but also to empower them to improve their situation themselves. LGBTI children and adolescents would like to see these issues to be treated as normal. This calls for a greater capacity to act on the part of parents, teachers and health care professionals. The Dutch government should stimulate that capacity.

We call on the Committee on the Rights of the Child to recommend to the State Party:

Education

1. Stop homophobic bullying

The anti-bullying approach should be inclusive of LGBTI children. Schools should ensure that the use of the word 'homo' is not allowed in and around schools. The Dutch Ministry of Education and the Children's Ombudsman should actively convey the message that bullying children with the word 'homo' is a form of violence.

2. Monitor the requirement to integrate sexual diversity in schools' curriculum.

The ministry of Education should provide clarity on how the core targets are being implemented and monitored. The ministry should also ensure that teaching material that is negative about homosexuality and leads to social unsafety of LGBTI children, is prohibited.

3. Encourage the registration of incidents of violence against LGBTI students in schools.

Schools should be required to register incidents of violence and discrimination on the grounds of sexual orientation, gender identity and intersex status.

4. Improve the capacity of teachers to deal with the situation of LGBTI children.

Education on sexual and gender diversity should be mandatory and taught at all the teachers training programs. Additionally, educators should be trained in how to discuss these issues in school.

5. Integrate sexual and gender diversity into 'regular' teaching materials.

The Ministry of Education should stimulate educative publishers to integrate sexual and gender diversity into teaching materials.

6. Link sexual diversity to human rights education and children's rights education.

The Ministry of Education should guarantee a quick implementation of human rights education about LGBTI people in schools.

More knowledge about LGBTI children

7. Stimulate research into the situation of LGBTI children.

Research into the wellbeing and sexual health of LGBTI children is an indispensable source to base policy on. The Ministries of Education and Health should continue to stimulate this kind of research.

8. Improve the awareness of the situation of children with an intersex status.

There is hardly any knowledge on the situation of children with an intersex status. It is impossible to monitor their children's rights without this data. The Ministries of Education and Health should stimulate research into the wellbeing and rights of this group of children.³⁰

9. Children's rights organizations should develop expertise on LGBTI

Children's rights organizations should report on the situation of LGBTI children.

10. Increase awareness of the situation of LGBTI children within youth care

The Ministry of Health should support the mapping of the child rights of LGBTI children in these services, improve expertise of civil society and parents and develop policy.

Views and participation of LGBTI children

11. Consider the views of LGBTI children

The ministries of Education and Health should improve the participation of LGBTI children in the development of policy on their situation.

Self-determination

12. Recognize the gender identity of transgender children.

With parental consent, it should be possible for transgender children from the age of 12 to change the gender marker in their birth certificate. This should be possible without any interference from a judge, without any medical criteria and without the 'expert opinion' that is still necessary under the new law.

13. Explore the possibility of abolishing sex registration on official documents.

In the Netherlands, the sex of infants is registered at birth. This is an obstruction to their right to self-determination. Transgender children are not legally able to change the sex marker until they turn 16 years old. For intersex children, if biological sex is not registered at all, it would mean that there is less social pressure for 'normalizing' surgical procedures. Abolishing the sex registration might also have positive consequences for LGBTI children, because the emphasis on gender differences could diminish.

³⁰ The Ministry of Education has conducted a first explorative study on the situation of people with an intersex status, which was presented in June 2013. The report focuses on adults, so there is still need for research into the rights and situation of children with an intersex status.

http://www.scp.nl/Publicaties/Alle_publicaties/Publicaties_2014/Living_with_intersex_DSD.

Foreign Policy

14. Defend human rights of LGBTI children around the world.

The Dutch government should stimulate organizations in the field of children's (health) rights and SRHR to address the needs of LGBTI children in the programs funded by the Dutch government.

Caribbean Part of the Netherlands

15. The Netherlands, Aruba, Sint Maarten and Curacao should improve awareness of the situation of LGBTI children.

The governments should support civil society in the Caribbean part of the Netherlands to enable them to report on the situation of LGBTI children to relevant human rights mechanisms, such as the Committee on the Rights of the Child.

16. Protect LGBTI children in the Caribbean part of the Netherlands against violence.

LGBTI children should be protected against all forms of violence. The governments in the Netherlands, Aruba, Curacao and Sint Maarten should offer psychosocial support and security to victims.