NETHERLANDS

ASYLUM

Although the LGBTI Asylum Policy was amended in 2018 to abandon several stereotype-based credibility criteria, COC found that its implementation remains seriously flawed.

In April, the State Secretary made it easier for LGBTI people from Nigeria to obtain asylum, but announced in July that Iranian LGBTI asylum seekers will no longer be granted asylum automatically, as the situation has allegedly improved. COC sent a letter to the Secretary and Parliament arguing the contrary.

BIAS-MOTIVATED SPEECH

In April, Steven Anderson, a preacher of anti-LGBTI hate, announced a visit to the Netherlands. Following civil society protests, the government banned Anderson from entering the country.

BIAS-MOTIVATED VIOLENCE

Several cases of anti-LGBTI violence caught national attention. An action plan against anti-LGBTI violence was sent to Parliament in April, but civil society warned that it lacks concrete measures and instead focuses on existing achievements. After a protest, the Parliament demanded additional measures, such as obligatory training for the police, more support for LGBTI-teams within the police, and a pilot with specialised hate crime officers.

In May, the Lower House increased penalties for inciting discrimination.

BODILY INTEGRITY

In May, the Lower House requested the government to draft a bill banning LGBT conversion therapy, to research its forms and prevalence, and how to end it.

The government failed to implement the 2018 recommendation of the UN Committee against Torture (CAT) this year, to ban non-consensual and medically unnecessary treatment on intersex children, and provide redress for victims. However, in December the Lower House requested the government to investigate these practices.

EDUCATION

Education on respect for sexual diversity was made obligatory in all vocational schools, as had been the case for all primary and secondary schools since 2012. Education on sex diversity is not obligatory.

EMPLOYMENT

In May, the Parliament requested the government to investigate barriers for trans people in employment, including regarding leave and sick leave, and how to improve their employment situation.

EQUALITY AND NON-DISCRIMINATION

250 prominent orthodox-protestants signed the Dutch version of the anti-LGBTI Nashville Declaration, leading to public outcry. Many churches raised the rainbow flag in response.

On 3 July, the Equal Treatment Act was successfully amended by the Senate, introducing gender identity, gender expression, and sex characteristics as prohibited grounds of discrimination in Article 1. Although the Act includes sex characteristics, the intersex persons continue to be medicalised. The Minister of Health has repeatedly referred to intersex as a disease.

In August, COC called for adding an explicit ban on discrimination against LGBTI people in the Constitution. Three parties proposed an amendment to do so.

FAMILY

In July, the government announced it would not issue a bill to recognise three or four parents to a child, breaking a promise of the Rainbow Ballot Agreement and ignoring the advice of a Commission of State. Civil society protested.

The government announced that it would issue a surrogacy bill, expected in 2020.

FOREIGN POLICY

In September, the King called on the UN General Assembly to support LGBTI rights. In November, the government announced that supporting LGBTI rights worldwide will remain a priority. The Lower House voted for a resolution asking that LGBTI human
rights are one of three priorities of the Dutch membership of the UN Human Rights Council.

**FREEDOM OF ASSEMBLY**

For the second year in a row, the intersex community joined different Pride activities in multiple cities, but continued to struggle with a lack of visibility and acceptance.

**HEALTH**

Delivering on its promise, the Department of Health, Welfare and Sports introduced a subsidy for breast augmentation for trans women who are ineligible to receive coverage through the basic health insurance.

The Quartermaster (process leader) on trans healthcare, appointed in 2018, presented the first results of their work this year. In June, they published guidelines on providing multidisciplinary care. Although waiting times have decreased, they remain too long.

In November, the Quartermaster convened a symposium on the future of trans healthcare, featuring presentations on depathologisation and informed consent models. However, the new somatic trans healthcare standard, published in November, requires a mental health diagnosis for accessing trans healthcare.

From February, men who have sex with men (MSM) will are able to donate blood four (instead of 12 months) after their last sexual intercourse. Civil society called for removing the time referral period altogether.

“We find this unnecessarily discriminatory. In our opinion, risk behavior should be the criterion: not with whom you have sex, but whether you have safe sex.” - Philip Tijsma, COC Netherlands

Fulfilling its promise made last year, on 1 August the government introduced almost full cost coverage of PrEP and other related care for MSM - long fought for by NGOs. Civil society is concerned that only 6,500 men will be covered and the medication will only be available in Community Health Services (GGD), not at GPs.

**LEGAL GENDER RECOGNITION**

In March, the Parliament adopted a motion to study the opportunities and barriers of not having gender markers on IDs and passports. In April, NGOs urged the government to remove gender markers from Dutch EU IDs, allowed by the new EU regulation.

The Evaluation of the Transgender Law was finalised on 10 April: the law will be amended to bring legal gender recognition (LGR) more in line with the principle of self-determination. Trans people will no longer need an expert declaration from a doctor or psychiatrist. A four-week reflection will allow individuals to change their mind. Trans youth under 16 will be able to change their gender marker by going to court and if needed, will also be able to change it back without a court date. A public consultation was launched on 10 December on the draft law. A final proposal is expected in 2020.

Local LGBTI organisations partially welcomed the change, but warned that it still violates the right of trans youth to self-determination. They are also concerned that X gender markers are only available through the court system, failing anyone, including intersex and trans people, who do not identify as either male or female or want to leave the gender category on their ID blank.

On 29 July, Nanoah Struik became the first trans person and the second adult citizen allowed by the court to have an X gender marker on their passport.

**SEXUAL AND REPRODUCTIVE RIGHTS**

In March, Minister for Medical Care Bruno Bruins (VVD) announced that health insurance will only cover medically assisted insemination in case of infertility, excluding single women and lesbian couples. A petition against the decision was successful. In the end, a new subsidy will cover the treatment for these groups from 1 January 2020.