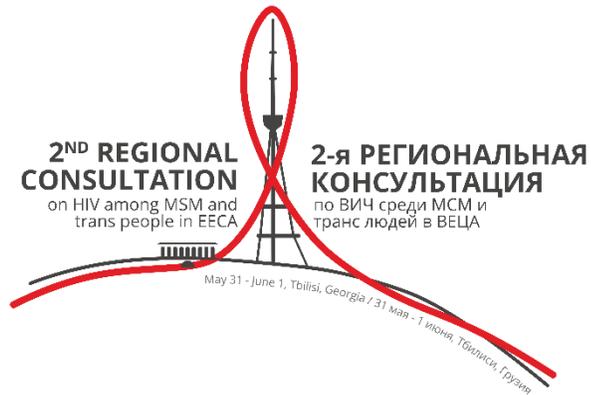


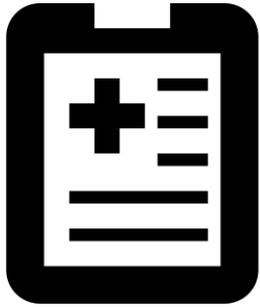
Presentation on Study Results on violations of human rights of MSM and trans people and presentation of legal protection tools

Yuri Yoursky
Human Rights and Legal Issues Officer
ECOM



ECOM Partners' Reports were accumulated

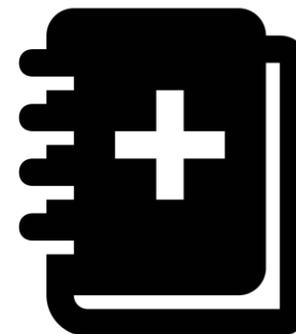
- Armenia (Humanitarian NGO «New Generation»)
- Belarus (RYPA «Vstrecha»)
- Georgia (NGO "Equality Movement»)
- Kyrgyzstan («Initiative LGBT Group «Yug-Antilopa,» PO «Kyrgyz Indigo»)
- Macedonia (Association of PLHIV Support «Stronger Together,» NGO «EGAL,» sex workers association «STAR-STAR»)
- Russia («Positive Wave» Foundation)
- Ukraine (PO «ALLIANCE.GLOBAL,» ZRCF «Gender Z»)



In 2017, 35 Cases Were Documented:

- Adoption of legislative acts of a discriminatory character both general and those aimed at healthcare assurance
- Full or partial absence of services in the healthcare
- Provision of unsatisfactory services
- Disregard of confidentiality and medical ethics principles by the medical personnel
- Direct discrimination related to marginalized groups, which encounter discriminatory practices and other rights violations regarding healthcare services acquirement rights

Right to Health



Elements of the Right to Health

- Sufficient amount of functioning facilities, goods, and services in the healthcare field
- Accessibility of healthcare facilities, goods, and services (both physically and financially),
- Availability of information on health
- Eligibility that is based on principles of medical ethics, observance of confidentiality and preservation of health.
- Quality assumes a conformity with proper scientific and medical standards



«Right to health may be considered assured if all its elements are present: availability, accessibility, eligibility, and quality, all of which are secured by an appropriate observance of an obligation to respect, realize, and protect by the state»



1. Obligation to Respect

- Certain laws aimed at healthcare assurance circumstantially promote stigmatization of the marginalized groups representatives and their formation of a marginal behavior
- Adoption of general legal acts, which discriminate the marginalized groups representatives and limit the right to health, may testify to an inappropriate observance of the obligation to respect dignity
- At the same time, the executed measures related to healthcare by the state may have a negative influence on the possibility of realization of other rights



2. Obligation to Realize

- The right to health is assured on a constitutional level in all EECA countries
- The obligation to realize also demands that states ensure the provision of services in the healthcare field (availability as an element of the right to health)
- While realizing the right to health, states have to ensure such an element of the right to health as its accessibility (physical, economic, and informational)

Physical accessibility assumes that the healthcare facilities, goods, and services are to be within a physical reach of all population groups, especially, the marginalized ones

Economic accessibility (accessibility in terms of costs) means that all those who need them have to have access to the healthcare facilities, goods, and services

Informational accessibility includes the right to research, receive, and spread the information related to healthcare issues



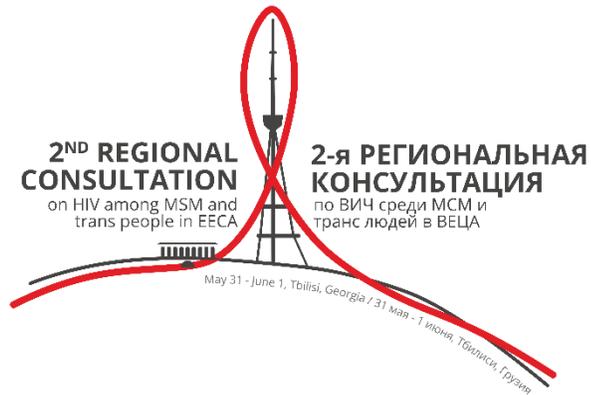
2. Obligation to Realize

- While observing the right to health, states are to guarantee the reception of high-quality services in the healthcare facilities.
- All healthcare facilities, goods, and services are to be adequate, in accordance with medical ethics and aimed at preservation of confidentiality.

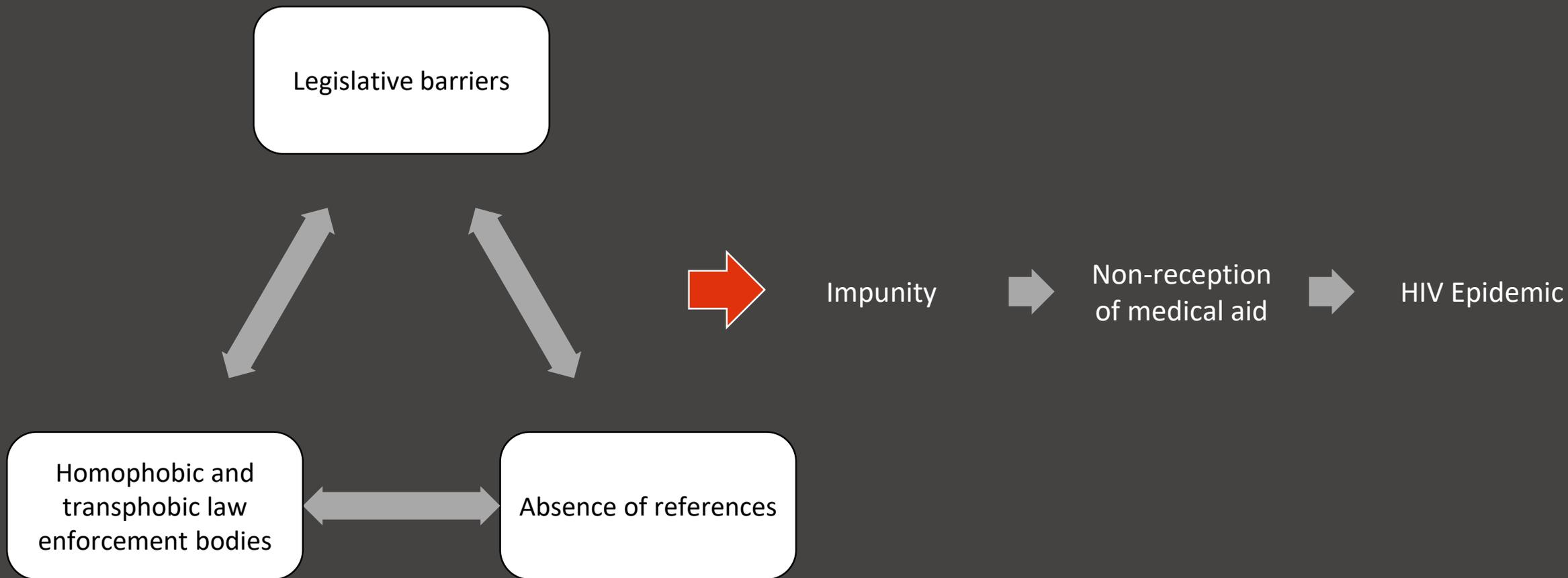


3. Obligation to Protect

International Covenant on Economic, Social, and Cultural Rights forbids discrimination, including discrimination based on sexual orientation, gender identity and state of health (including HIV/AIDS).



«High levels of homophobia and transphobia, social stigma, discriminatory legislation, non-fulfillment of their obligations by states - all of the aforementioned remain to the main inhibitory factors in the realization of the right to health by MSM and trans people in the EECA region»



2ND REGIONAL
CONSULTATION
on HIV among MSM and
trans people in ECEA

2-я РЕГИОНАЛЬНАЯ
КОНСУЛЬТАЦИЯ
по ВИЧ среди МСМ и
транс людей в ВЕЦА

May 31 - June 1, Tbilisi, Georgia / 31 мая - 1 июня, Тбилиси, Грузия

Recommendations



2ND REGIONAL
CONSULTATION
on HIV among MSM and
trans people in ECEA

2-я РЕГИОНАЛЬНАЯ
КОНСУЛЬТАЦИЯ
по ВИЧ среди МСМ и
транс людей в ВЕЦА

May 31 - June 1, Tbilisi, Georgia / 31 Мае - 1 июня, Тбилиси, Грузия

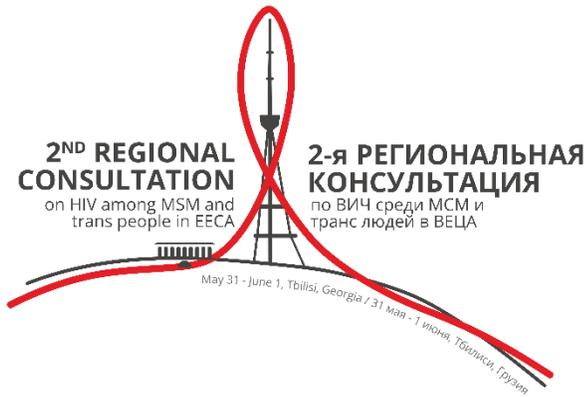
For decision-makers:

- Assurance of execution of obligations, contained in international agreements on human rights and guarantee of rights protection of every person with no exceptions;
- Ensure the availability, accessibility, eligibility, and quality of healthcare facilities, goods, and services while observing the principles of equality and non-discrimination;
- Integrate the anti-discrimination legislation with regard to accessibility and effectiveness of mechanisms of the protection and holding the guilty liable.



For public organizations:

- Demand protection from discrimination based on sexual orientation and/or gender identity;
- Raise the awareness and knowledge regarding human rights among MSM, LGBT, and PLHIV groups;
- Monitor and document cases of discrimination, stigmatization, and violence due to homophobia and/or transphobia.



Thank you for the attention!

