### UNCT submission<sup>1</sup> for the 2012 Universal Periodic Review of Turkmenistan (2<sup>nd</sup> cycle)

#### **Background and framework**

Turkmenistan gained independence in October 1991 following the dissolution of the Soviet Union. The country borders the Caspian Sea, Afghanistan, Iran, Kazakhstan and Uzbekistan. Turkmenistan became a full member of the United Nations in March 1992. In December 1995, the United Nations General Assembly adopted a resolution on the status of permanent neutrality of Turkmenistan. Since then, Turkmenistan's neutrality status became a predominant factor in its foreign policy. Along with other twelve ex-USSR republics, Turkmenistan joined the Commonwealth of Independent States (CIS) in December 1991.

## **Scope of international obligations**

Turkmenistan has ratified the International Covenant on Civil and Political Rights (CCPR) and its two Optional Protocols (OP), the Convention on Economic, Social and Cultural Rights (CESCR), the Convention on Elimination of Racial Discrimination (CERD), the Convention Against Torture (CAT), the Convention on Elimination of All Forms of Discrimination Against Women (CEDAW) and its OP in April 2009, the Convention on the Rights of the Child (CRC) and its two OPs on Children in Armed Conflicts and on Sale of Children, Child Prostitution and Child Pornography, and most recently (2008) the Convention on the Rights of Persons with Disabilities (CRPD) and its OP in 2010. From the overall list of international human rights treaties Turkmenistan has not signed or ratified the Convention on Migrant Workers (CMW), and Convention Against Enforced Disappearances CCPED, nor OP-s on CAT, CESCR, and/or Article 14 to the CERD.

In September 2010, the Mejlis (Parliament) of Turkmenistan approved the country's accession to the OP of the CRPD and the ILO Convention 182, concerning the prohibition and immediate action for the elimination of the worst forms of child labour. The country acceded to the Convention on the Status of Stateless Persons (CSSP, December 2011) and the Convention on Reduction of Statelessness (CRS, August 2012), and is a party to the 1951 Convention relating to the Status of Refugees and its 1967 Protocol since March 1998. The country ratified the UN Framework Convention on Tobacco Control (May 2011).

### A. Constitutional and legislative framework

Turkmenistan is governed by three branches of power: (i) the executive branch is represented by the Cabinet of Ministers chaired by the President; (ii) the legislative branch is led by the Mejlis; and (iii) the judicial branch is headed by the Supreme Court.

Turkmenistan adopted a new version of its Constitution in September 2008. Efforts have been made to bring Turkmen legislation in line with its international treaty obligations, including in the area of the rule of law and protection of human rights.

#### Democratic Governance

In recent years, the Government has enacted a number of laws and regulations intending to bring its legislation in conformity with its international obligations in the sphere of human rights. In May 2010, the Parliament amended the Criminal Code, which, inter alia, lowers the maximum jail sentence for certain serious criminal offences from 25 to 15 years, and penalizes trafficking in human beings. The Criminal Code was further amended (August 2012) following the dialogue with the Committee against Torture. The amended Criminal Code gives the definition of torture in line with article 1 of the UN CAT and provides for 3-8 years (5-10 years in aggravating circumstances) of imprisonment for anyone found guilty of practicing torture. Other amendments to the Criminal Code introduced in August 2012 included the clause on penal punishment for committing torture towards women (Article 1821) and special provisions aimed to improve the living conditions of women in custody. The recommendations of the UN and the legal experience of other countries were taken into account when drafting this amendment. The Parliament also adopted a new Law on legal defence and legal defence activities. The Parliament also increased the age for military conscription to 18, to comply with the Concluding Observations of the Committee on the Rights of the Child and age of marriage to 18 in accordance with CEDAW.

<sup>&</sup>lt;sup>1</sup>This joint UNCT submission, which summarises key human rights developments since the 1s<sup>t</sup> cycle of the UPR of Turkmenistan (9 December 2008), is based on information from UNDP, UNHCR, UNFPA, UNICEF, UNODC, WHO, IOM and UNRCCA.

### Women and Children

The Government passed the Criminal Executive (Penitentiary) Code (2011) which has a separate section on children under 18 as stipulated in international norms governing justice for children. It also passed the Labour Code with a section responding to the 2006 concluding observations to the Country's CRC report, the law on Political Parties (2012), a new Family Code (2012), and a Law on Refugees (2012), all pay special attention to the status of women. In the years following the first cycle of UPR, the Government also aligned with international standards the Law on State Guarantees of Equality of Women (2007).

#### Health

Article 35 of the Constitution of Turkmenistan guarantees the right of citizens to health care services. This article and the Law on "Health Protection of the Citizens of Turkmenistan" (December 2002), plus a number of other health-related laws (Promotion and Protection of Breast Feeding and Requirements to Child Nutrition such as the Quality and Safety of Products, Prevention of HIV), provide the legal framework of the implementation of the right to health.

Article 14 of the Law on State Guarantees of Equality for Women (2007) provides for quality reproductive health services and stipulates quantities and type of medication.

Article 16 of the Law of Turkmenistan on the Health Care of Citizens (2009) guarantees the right of pregnant women and mothers to healthcare services including family planning, qualified antenatal, intra-natal and postpartum care. Chapter 5 on Family Reproductive Health of the same Law reassures the rights to reproductive health services including medical-genetic consultations for couples, artificial insemination and embryo implantation as well as safe abortion. The right to reproductive health is reinforced in Articles 66-80 of the Code of Turkmenistan on Social Security (2007) by guaranteeing certain types of maternity leave and the amount of allowances.

#### Education:

Article 38 of the Constitution guarantees the right to education for all citizens with free and compulsory secondary education. Turkmenistan joined the 2000 Dakar Framework for Action, Education for All, which sets education goals to be met by 2015. Turkmenistan also participated in the Rio+20 UN Conference on Sustainable Development, thereby reinforcing the country's commitment to quality education in the Framework Program of Action of the Outcome Document.

In 2009, Turkmenistan adopted a new Law on Education, defining six levels of education, including the preschool education and re-established post-graduate study. The law also specifies the licensing of the private education establishments.

In 2011, the Government endorsed the National Programme on Early Childhood Development and School Readiness for the period of 2011-2015. In June 2012, the President endorsed the State Programme on the Education System Development for the period of 2012-2016, which envisages the establishment of the capacity development standards for teachers as well as the development of the standards for pre-school education establishments and preschool teaching curriculum.

#### Religion

Freedom of religion and activities of religious organizations are regulated by the Law on the Freedom of Religion and Religious Organizations (2003). The law recognizes the right of citizens to freedom of religion as a constitutional right and stipulates equality of all citizens regardless of their attitude to religion.

#### I. Institutional and human rights infrastructure and policy measures

Turkmenistan is the first country in Central Asia to become a member of UNHCR's Executive Committee on 27 April 2011. Turkmenistan also opened in 2011 a permanent mission to the UN in Geneva and was elected as a member of UNHCR's Executive Committee, the UN Commission on Population and Development and the UN Commission on Narcotic Drugs. This increased engagement at the international level was also reflected in developments in the field of human rights.

Turkmenistan's institutions and bodies related to human rights are: Interdepartmental Commission for Ensuring Turkmenistan's Compliance with International Obligations in the Field of Human Rights and Humanitarian Law, the National Institute for Democracy and Human Rights under the President of Turkmenistan (NIDHR), the Committee on Human Rights of the Turkmenistan Parliament. The NIDHR is not an independent HR institution in line with Paris Principles. The discussion on establishing such a body has begun. The first step towards developing a National Human Rights Action Plan began with a workshop

organized by the EU/UNDP/OHCHR project in June 2012. The national counterparts have expressed a wish to continue that work.

#### Other national plans and policy measures

Turkmenistan developed a national programme on Early Learning and Development of Child for the period of 2011-2015. The Government also developed the General Programme on Juvenile Justice System Development for 2012-2016 to prevent delinquencies among children under 18. The juvenile justice programme was developed in partnership with UNICEF, National Institute of Democracy and Human Rights, law enforcement agencies and public organizations of Turkmenistan. National Workpan on fighting illicit trafficking of drugs, psychotropic substances, precursors and rendering assistance to drug addicts for 2011-2015 was endorsed.

It also approved the state programme of health sector development for 2012-2016 and Action Plan (2012). A National strategy on HIV was approved in 2012 for the period 2012-2016. A HIV action plan is being currently developed. Both documents suggest a more proactive approach to combating HIV/AIDS and measures to overcome stigma and discrimination associated with HIV.

Turkmenistan supported a Joint Declaration and a Joint Plan of Action calling for the implementation of the UN Global Counter-Terrorism Strategy for Central Asia (November, 2011) during a Ministerial meeting of Central Asian states organized by UNRCCA and CTITF (Counter-Terrorism Implementation Task Force). An important part of the Plan of Action is the stipulation to observe human rights while countering terrorism. The Government also expressed its determination to improve standards of prisons, particularly facilities for women and under 18s. In this regard, a plan for the construction and renovation of prisons was prepared.

Quality and safe medical care is a recognized priority of action for the government. Several normative documents dedicated for this purpose were developed to support strategic directions for safe immunization practices, injection safety, blood safety, and bio waste management. The National Program for safe handling and disposal of medical waste in healthcare was developed in accordance with WHO recommendations, and approved, while the guidelines for the safe treatment of medical waste in Turkmenistan have been recently finalized. The Ministry of Health has started working on establishing a system of laboratory quality assurance by adopting national standards and developing a number of normative documents. It has also started working on the process of quality assessment and quality improvement, which is essential to realize an increase in quality of primary healthcare. Evidence based clinical practices are being standardized through introduction of national guidelines and clinical protocols mostly in maternal care, childhood illnesses, TB, HIV and malaria. Currently 11 protocols in emergency obstetric services was developed, national guidelines together with 6 clinical protocols on HIV are being finalized.

The MOH DevInfo system, SaglykInfo (or Health Info), has been adapted to be the health indicator database and is currently in process of development. The site is available within the MOH but not to external users. The national computerized logistic management system CHANNEL for contraceptive management (better forecasting, supply management for prevention of out stocks) is gradually being introduced in the country and currently covers 4 regions and integrated into the Primary Health Care structure.

# II. Cooperation with human rights mechanisms

#### A. Cooperation with treaty bodies

Turkmenistan started to systematically engage in a constructive dialogue with the UN human rights monitoring bodies and submitted its core and several periodic reports to all treaty bodies in accordance with their plan for 2007–2010. Some of the reports were critically overdue. Turkmenistan has so far taken part in dialogues with most Treaty Bodies: ICCPR (March 2012) ICESCR (November 2011), CERD (August 2005, February 2012) CEDAW (June 2006, October 2012) CAT (May 2011), CRC (May 2006). The dialogue with the CRPD has not been scheduled yet as the committee has been established only recently.

The most recent consultations ones are: a) On 23-24 February 2012, the UN Committee on the Elimination of Racial Discrimination reviewed Turkmenistan's implementation of the International Convention on the Elimination of Racial Discrimination. On 9 March, the Committee issued its recommendations; b) On 15-16 March 2012, the UN Human Rights Committee reviewed Turkmenistan's implementation of the International Covenant on Civil and Political Rights. On 29 March 2012, the Committee issued its recommendations; c)

The first cycle of the UPR, at the session held in December 2008 examined the reports on Turkmenistan, and the working group issued its report on 9 January 2009.

#### **B.** Cooperation with special procedures

In September 2008, Special Rapporteur on Freedom of Religion or Belief visited the country. In April 2010, the UN Secretary General visited Turkmenistan.

#### C. Cooperation with the Office of the High Commissioner for Human Rights

The OHCHR is one of the partners in implementation of the joint EU/UNDP/OHCHR Project "Strengthening the capacity of Turkmenistan to promote and protect human rights." In the absence of OHCHR presence in Turkmenistan, the Government's cooperation with OHCHR is maintained through the office of the UN Resident Coordinator. OHCHR delegations visited several times the country to discuss Turkmenistan's increasing cooperation with the UN system in the area of human rights. The latest visit of the Regional Representative of OHCHR to Turkmenistan was in June 2011. As part of the cooperation with the OHCHR, the project facilitated participation of Turkmen specialists in different study visits hosted by OHCHR Office in Geneva, and OHCHR staff served as experts in several workshops organized by the project. As a result of the project activities, the Government improved its interaction with UN Treaty Bodies through the intensive work on enhancing the knowledge of Turkmen officials representing Turkmenistan before the Committees, such as Economic Social and Cultural Rights; Human Rights; the Committee against Torture and they provided more in-depth consideration and preparation of periodic reports. As a result of the project the Government has a group of human rights trainers who provide training to relevant government stakeholders. Government officials, wide public, students and teachers benefited from dissemination of some 700 information packages, containing publications of various international human rights instruments (covenants and conventions) translated into Turkmen.

#### Cooperation under other international frameworks

As a result of the cooperation with UNHCR, the Turkmen government granted citizenship to 3,318 stateless persons. Discussions are going on to grant residence permit to 57 mandate refugees<sup>2</sup> residing in the country, who are somewhat socially and economically integrated in society, some of them having established families with citizens of Turkmenistan. To follow up on the government's decision to locally integrate mandate refugees, UNHCR has prepared and submitted the list of refugees eligible for Turkmen citizenship/residence permit. Also, the Government cooperates with IOM under the Assistance to Voluntary Return Program in recovering the lost documents of Turkmen citizens abroad and victims of trafficking.

# III. Implementation of the international human rights obligations, taking into account applicable international humanitarian law

### A. Equality and non-discrimination

Articles 19-20 of the Constitution of Turkmenistan set forth the principles of equality between women and men and equal opportunities for them. The Law on State Guarantees of Equality for Women (2007), Labor Code (2009), and Family Code (2012) contain guarantees of equality between men and women and set forth the principles of non-discrimination. However, CEDAW Committee recommendations in the Concluding Observations call for ensuring substantive, that is de facto, equality as opposed to de jure equality.

The Constitution as well as laws on migration and on legal status of foreign citizens also contains non-discrimination principles in relation to migrants, asylum seekers and refugees. Turkmenistan, in accordance with its international obligations, provides refuge to foreign citizens and stateless persons.

#### B. Right to life, liberty and security of the person

The law concerning corporal punishment of children in Turkmenistan does not explicitly prohibit all forms of corporal punishment in all settings. The Committee on the Rights of the Child recommended doing so. By law, only corporal punishment which is considered to cause harm is prohibited. Article 24(3) of the Law on Guarantees of the Rights of the Child (UNICEF)(2002) states: "Humiliation of the child's dignity, intimidation, corporal punishment or other physical abuse harmful for the child's mental and physical health is inadmissible." Corporal punishment is considered to be unlawful in schools and in penal institutions, though prohibition has yet to be explicitly reflected in legislation. In alternative care settings, corporal

<sup>&</sup>lt;sup>2</sup>Mandate refugees are refugees recognized under the Mandate of UNHCR

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punishment which reaches the threshold of being considered harmful is prohibited under the same provision but there is no explicit prohibition of all corporal punishment.

The Law on combating human trafficking (2007), which is line with the ratified Protocol to prevent, suppress and punish trafficking in persons, especially women and children, supplementing the UN Convention against transnational organized crime (2005), determines punishment for illegal human trafficking and forced labor. Other activities in the area of preventing human trafficking include the opening of 2 hotlines and one rehabilitation center run by local registered NGOs, and identification and investigating of over 11 human trafficking cases since 2010. Law enforcement agencies have had a number of relevant training to address human trafficking.

#### C. Administration of justice, including impunity, and the rule of law

The General Juvenile Justice System Development Programme (2012) has yet to be translated into appropriate practice. Development of appropriate policies in line with the above mentioned programme is needed to bring existing practices into compliance with the international standards on juvenile justice. Consideration is given by the Government to programmes that identify children at risk of offending and provide them with appropriate assistance.

#### D. Right to privacy, marriage and family life

Following recommendation No. 41 made in the Concluding Observations of the CEDAW committee to the national combined 1<sup>st</sup> and 2<sup>nd</sup> periodic reports (2006), the Government of Turkmenistan raised the age of marriage to 18 years (new Family Code adopted in 2012). The new Family Code further promotes the principles of equal responsibilities of men and women in the family.

#### E. Freedom of movement

In 2007, the Government abolished all internal land border checks, special permissions are no longer necessary to travel to border areas. This measure positively affected refugees, especially former prima facie refugees living in remote border areas and enables them to travel to nearby towns for trade and medical treatment. However, the Government still does not issue travel and identity documents to refugees recognized under the mandate of UNHCR, which creates many administrative difficulties for refugees and limits their access to social and economic benefits they are entitled to by law. This is particularly the case for refugees without valid national passports from their country of origin and for refugees from former Soviet republics.

# F. Freedom of religion or belief, expression, association and peaceful assembly, and right to participate in public and political life

The right to religion and expression, association and peaceful assembly and the right to participate in the public and political life are stipulated in articles 28-32 of the Constitution. These rights are further elaborated in the laws on freedom of religion and religious organizations (2003), on public associations (2003), on representative bodies of local power (2011), local executive power (2010), on Gengeshes (2007), on elections of members of khalk maslakhaty and gengeshes (2012). Adoption of laws regulating the work of local authorities (local representative and executive authorities) are seen as consistent realization of government's intention to reform its governance system, which started in 2008. Amendments of electoral laws were introduced as an effort to harmonize the country's electoral legislation, with an overall objective to develop Unified Electoral Code. Following the adoption of the Law on political parties the new "Party of Industrialists and Entrepreneurs" was launched in August 2012.

#### G. Right to work and to just and favorable conditions of work

The Law of Turkmenistan "On guarantees of the rights of youth to work" outlines the right of youth to work. Child labor is illegal. The labor code of Turkmenistan and other related legislative documents stipulate just and favorable conditions of work have to be put in place. However, enforcement of these laws has to be improved. This also relates to families using their children in seasonal agricultural labor.

Employment opportunities for refugees recognized under UNHCR's mandate ("mandate refugees") are limited mostly due to high levels. The lack of identity documents issued by the government to mandate refugees further reduces already limited employment opportunities. It is believed that if mandate refugees had state issued ID-cards their chances for employment in the country would increase. The residence registration system (widely referred to as "propiska") is another serious obstacle for refugees to access the labour market. A propiska is needed for any employment with the Government or a private company, and is issued based on the place of residence. The established practice in Turkmenistan is that foreign nationals can only get a propiska after they received a resident permit in Turkmenistan.

#### H. Right to social security and to an adequate standard of living

Turkmenistan provides guarantees of universal access to social security for all its citizens stipulated in the Social security Code and other normative and regulatory frameworks.

There is an established state system of social security that provides support to people with disabilities and children in need in terms of procedures and mechanisms. However, there are challenges to institute more effective and child-sensitive social protection at the local level. Gaps in family and child support system of services at local level include:

- Lack of access to information for families eligible for the entitlements;
- Complex procedures that require submitting various kinds of necessary supporting documents to be obtained in different government organizations due absence of "one-stop shops";
- Lack of capacity of relevant staff to provide clear guidelines.

#### . Right to health

The right to health protection is fixed in Article 35 of the Constitution (2008). The National "Health" Programme (1995) is the main document identifying strategic and policy priorities of the country's health system development. The new 2012-2016 programme of health sector development envisages improvement of the legal framework for healthcare; introducing modern methods of treatment and organization of scientific research; increasing public awareness of risk factors and diseases; ensuring supply of high-quality medical services to the entire population; improving medical education through revising curricula; introducing the principles of evidence-based medicine; developing and improving the infrastructure of health facilities.

Limited access to official data and the quality of official data that are publicly available have proven a major impediment to development planning of the Government and all international partners. The lack of data disaggregated by sex and other stratifiers, such as income and education, presents a limitation to the capacity to address gender and other social determinants of health. In the absence of such data, it is difficult to look at health inequalities and to understand the profiles of the most disadvantaged groups. There is no practice to use health and human rights indicators which can show the extent to which governments and other entities are meeting their health-related human rights obligations, highlight areas where further efforts might lead to increased fulfillment of these obligations and, by extension, improve health outcomes. Access to information and the general awareness level on the right to reproductive health remains low among adolescents. However, some steps have recently been taken, such as introduction of healthy lifestyle lessons in school curricular from 1st up to 10th grade.

Under the health sector reform, a growing focus is on the primary care level and an optimization of hospital facilities and the organization of tertiary care. Primary care facilities are well distributed around the country. A network of ambulatory health facilities in cities and villages include: 30 city health centers, 683 village health centers and 958 village health facilities employing family doctors and nurses (1 family doctor per 1,000 people). In 5 regions (velayats) of the country, a network of principal health centers works in close collaboration with a hospital on district level (etrap). Family planning services are being offered in 105 family planning centers and offices. Public health services are provided by the Sanitary Epidemiological Service which is responsible for surveying the environmental situation including vector control and occupational safety, communicable diseases surveillance, immunization and hygiene certification. High childhood vaccine coverage under the Expanded Immunization programme (EPI) is reported.

Financing healthcare in Turkmenistan is done through a combination of national budget funds, user fees and voluntary health insurance. The government finances "core" services, i.e. a basic benefit package, for the entire population. The core package is a combination of age-based exemptions, e.g. free pediatric care for under-14s; disease-based exemptions for socially significant diseases e.g. diabetes and tuberculosis; and other categories such as specialist services for psychiatry, neurology and oncology. The system of state voluntary health insurance (VHI) introduced in 1996, unlike more conventional definitions, is essentially a discount program for user fees: subscribers receive a 90 percent discount on pharmaceuticals and a 50 percent discount on user fees. However, only nationals and holders of national medical insurance cards are entitled to the healthcare services at reduced costs. The Ministry of Health is preparing for restructuring the health financing system to introduce compulsory medical insurance, starting from 2016.



Access to safe drinking water is on the government's agenda. The Safe Water program is proposing improvement and provision of access to safe drinking water all over the country, including in remote rural areas. Despite the demonstrable progress in reducing maternal and child mortality and being on track to achieve MDG 4 and 5 (Countdown to 2015:Tracking progress on maternal, newborn and child survival, the 2008 report, WHO/UNICEF), levels of infant mortality (56 per 1,000) and under five child mortality (67 per 1,000) remains high (MICS 2006). Child's survival and development are affected by stunting (15 percent, MICS 2006) and high iron deficiency anemia rates (over 40 percent among children of 6-59 months).

#### J. Right to education

The education reform in 2007 initiated changes in the school curricula. Access to knowledge about a healthy lifestyle has become one of the priorities, and in 2008 the "Basics of a healthy lifestyle" discipline was introduced into the primary and secondary school curricula. Inclusive education is not part of the national education reform agenda, although Turkmenistan has been signatory to the CRPD. The current focus of the Ministry of Education on the institutionalization of the Child Friendly School (CFS) initiative, with inclusion of children with disabilities as an essential part of the CFS model, is a significant step towards practical implementation of the right to education of these children. While quality of education at times remains a challenge, the government's commitment to create a child-friendly environment ensuring health, safety, protection, gender sensitivity, inclusiveness, democratic participation and – equally important – teaching and learning effectiveness in schools nation-wide provides a platform to advance the quality of education as per international standards. At the same time, frequent and prolonged participation of children and students in cultural or political festivities affects learning achievements.

#### K. Cultural rights

Inhabitants of the capital and regions have access to international TV and radio channels. However, restrictions in the media environment, including social media, limit freedom of expression and access to information.

#### L. Persons with disabilities

Data about the status of children with disabilities is insufficient. In many cases, children with disabilities are admitted to special institutions and not raised in family environments in their community. However, there are also legal, procedural, physical and attitudinal barriers to a fully-fledged participation of children with disabilities in society, including their visibility in the media. Public attitudes do not favour inclusion of children with disabilities. They remain invisible in the media. Community-based services and support to children with disabilities and their families is lacking. Promoting social inclusion and integration of persons with disabilities and establishing networking between DBST and other institutions such as government, local authorities, private sector, and international development community are encouraged under the ongoing joint UN project "Advancement of Social Inclusion and Integration of Persons with Disabilities" with the Deaf and Blind Society of Turkmenistan (DBST).

#### M. Migrants, refugees and asylum-seekers

The rights of migrants and stateless persons are regulated by the laws on migration and on legal status of foreign citizens in Turkmenistan. However, these rights are limited to labor, health and rest only. As of September 2012, Turkmenistan hosts 57 Mandate refugees<sup>3</sup> registered with UNHCR. Out of the 57 refugees, 30 are female, 27 are male and most are between the age of 18 and 59. The national refugee protection framework includes the new Law on Refugees effective from 11 August 2012. Although it includes some UNHCR recommendations and has clauses related to the name of the government agency dealing with refugee issues, it still lacks a clear framework for state agencies to take responsibility for asylum and refugee issues and provisions on how to properly consider gender-related claims by instituting gender-sensitive Refugee Status Determination (RSD) procedures (according to UNHCR's Guidelines on gender-related persecution<sup>4</sup>), which would bring the existing mechanisms closer to international standards. The guidelines set forth a number of measures to ensure that gender-related claims are properly considered in the refugee

<sup>&</sup>lt;sup>3</sup>Mandate refugees are refugees recognized under the Mandate of UNHCR

<sup>&</sup>lt;sup>4</sup>UN High Commissioner for Refugees, Guidelines on International Protection No. 1: Gender-Related Persecution Within the Context of Article 1A(2) of the 1951 Convention and/or its 1967 Protocol Relating to the Status of Refugees, 7 May 2002, HCR/GIP/02/01, available at: http://www.unhcr.org/refworld/docid/3d36f1c64.html.



status determination process by ensuring that female claimants have access to individual interviews as well as female interviewers and interpreters.

Furthermore, Article 3(3) of the Law was amended to provide for the return of refugees in cases related to national security and public order, which undermines the principle of non-refoulement as set forth in Article 33 of the 1951 Convention. UNHCR does not have access to international transit zones and border areas. The new law states that refugees in the country enjoy the same rights and freedoms as nationals of Turkmenistan, with some exceptions, which are not specified. The Law contains a naturalization clause in article 11(11), providing the right to apply for Turkmen citizenship in a manner established by the law (after 7 years of permanent residence). So, the mandate refugees, who have been residing in the country for over 7 years, are eligible to be granted Turkmen citizenship or permanent residence in line with 1992 Citizenship Law.

National legal norms regulating pertinent areas do not refer specifically to the rights of refugees. There is no statistical information related to detained foreigners that would permit UNHCR to determine whether there are persons of concern among detainees and to consider assistance by UNHCR or its partners as well as on foreigners who have been expelled, returned, or otherwise refused entry at Turkmenistan's borders to understand the scope of forcible returns from Turkmenistan and allow the Office to assist the Government in determining possible international protection needs of apprehended persons.

There are some 8000 persons with unidentified nationality identified by the Government that need to get legal status, which would provide them with access to basic rights, such as medical care, education and the opportunity to travel. Turkmenistan's ability to meet its obligations towards stateless persons would be enhanced through establishment of a formal statelessness determination procedure, including for women and girls, on its territory, pursuant to the 1954 Convention.

There is a need to further improve the 1992 Citizenship Law in order to address statelessness in case a child is born in Turkmenistan to foreign parents who are unable to transmit their nationality to the child; in case children are born to stateless parents (who only acquire citizenship if their parents are permanent residents in Turkmenistan (Articles 12-15); in case citizens of Turkmenistan permanently reside abroad (if a child is born to one Turkmen parent and a foreign citizen, citizenship is only granted on the basis of a written agreement between parents) (Article 13(2); in case an individual renounces Turkmen nationality before obtaining assurances of having acquired another nationality (Article 22); and given the absence of a simplified naturalization procedure for stateless persons as a group (Article 22).

#### Recommendations

### **Public health**

- 1. Further enhance quality of health services especially in remote areas;
- **2.** Continue developing and implementing evidence-based policies, guidelines, protocols and primary health care programmes;
- 3. Develop Quality assurance and control systems especially in primary health care
- **4.** Develop approaches and programmes to increase knowledge and skills on healthy behavior of the population and parents' knowledge on health nutrition practices;
- **5.** Strengthen the Health Information System in accordance with core international standards, ensure collection of relevant data for implementation and evaluation of national action plans and global strategies for health issues;

#### Childhood development and children's health

- 1. Encourage the Government to increase the amount for maternity and child benefits, and consider increasing the age of eligibility for child allowances from 3 to 5 years.
- 2. Develop effective and improve current monitoring and accountability mechanisms at different levels, including monitoring of early childhood health and development;
- 3. Develop capacity to provide legal and psychosocial assistance to children at risk and their families; enhance measures to rehabilitate and reintegrate young offenders.
- 4. Develop effective age-appropriate media for young children and caregivers



#### Strengthening juvenile justice system

- 1. Strengthen the capacity of commissions on minors to provide children at risk and their families with access to the services they need.
- 2. Take measures to create children's courts or appoint specialized judges and prosecutors and ensure they have the appropriate knowledge, skills and aptitude.
- 3. Allocate resources to the development of legal assistance to ensure all juveniles receive adequate services, including complementary psychosocial services, whenever possible.
- 4. Develop mechanisms for investigating violations of the rights of children; when sanctions are imposed for ill-treatment, they should be proportionate to the gravity of such crimes.
- 5. Incorporate child rights and juvenile justice into the curricula of professional training institutions. Training should include methodologies and techniques for communicating with children, assessing their best interests and ensuring their views are heard effectively and taken into account.
- 6. Data on offending by juveniles and juvenile justice is scarce and out-of-date. Indicators should be identified to undertake evidence-based planning and monitoring in compliance with international standards; tools for collecting them should be developed; national systems for compiling and analysing data should be created; and key data should be published annually.
- 7. Relevant international organizations should be allowed to visit the correctional-educational facility for juvenile offenders, women's prisons to better assess the needs of their personals and be able to provide assistance to meet those needs.

# Combating human trafficking

1. The Government should take more leadership in identification of victims of trafficking, protection of victims of trafficking by the state and in the establishment of national referral system, for victims of trafficking and state funds for shelter and hotlines' support.

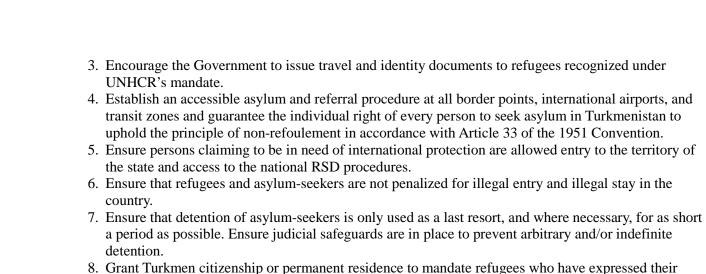
# **Disability rights and social inclusion**

- Realization of cultural rights could be further improved through wider access to media for children (both print and broadcast) developed with consideration of age, developmental and educational needs and cultural diversity. Capacity development of media professionals could also help to address existing challenges.
- 2. Further efforts could be undertaken to ensure the implementation of inclusive education of children with disabilities, including training of teachers, ensuring the accessibility of physical school environments, the availability of assistive devices and support in classrooms, as well as allocating sufficient budget
- 3. Efforts should be made to collect adequate data on children and adults with disabilities, including women and girls with disabilities, and use disaggregated data and results of studies to develop policies and programmes to promote equal opportunities for them in society.
- 4. The Government should (i) set up a follow-up framework including independent mechanisms to promote, protect and monitor the implementation CRPD; (ii) designate focal points for implementation of CRPD; (iii) establish coordination mechanisms to facilitate related activities in different sectors and at different levels; (iv) comply with reporting obligations on CRPD; and (v) significantly improve monitoring and evaluation by collecting more reliable and higher-quality data and statistics with regard to disability.
- 5. All health care services should be made available to persons with disabilities, including all mental health care and services, based on the free and informed consent of the person concerned. In accordance with the CRPD, involuntary treatment and confinement are not permitted by law
- 6. Communicating information on the CRPD is critical in order to better understand rights and obligations enshrined in the Convention and contribute to the promotion and protection and full enjoyment of all human rights by persons with disabilities, including children.

#### Support to refugees and reduction of statelessness

- 1. Respective legal provisions to facilitate access of refugees to national healthcare services;
- 2. Revisit the current practice in regard to treatment of mandate refugees accessing healthcare services.

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- 8. Grant Turkmen citizenship or permanent residence to mandate refugees who have expressed their intention to remain in the country and have been residing in the country for over 7 years and to
- registered stateless persons within a reasonable period of time. 9. Review nationality legislation and procedures to ensure compliance with international standards aimed at preventing and reducing statelessness.
- 10. Establish a status determination procedure for stateless persons to ensure their protection, particularly stateless women and girls.
- 11. Provide UNHCR with access to statistical data related to detained foreigners, and to foreigners who have been expelled, returned or otherwise refused entry at Turkmenistan's borders.

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12. Share with UNHCR statistics on the number of stateless persons and information about the processing of the applications for naturalization.