

**NGO Joint Parallel Report on the Government of Turkmenistan's
Third Report on the Implementation of the
International Covenant on Economic, Social and Cultural Rights**

*Submitted to the
UN Committee on Economic, Social and Cultural Rights
for consideration in the formulation of the
List of Issues during the 77th Pre-Sessional Working Group*

by:

Science for Democracy

Rue Ducale 41,
1000 Bruxelles, Belgium

Contact: Dr. Laura Convertino

laura.errans@gmail.com

International Human Rights Center

Loyola Law School, Los Angeles

919 Albany Street
90015, Los Angeles, CA, USA

Contact: Prof. Cesare Romano

cesare.romano@lls.edu

and

Progres Foundation

USA

Contact: turkmen.progres@gmail.com

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PURPOSE OF THIS PARALLEL REPORT

(1) The purpose of this parallel report is to assist the Committee on Economic, Social and Cultural Rights in the formulation of the List of Issues during the 77th Pre-Sessional Working Group (10 Feb. 2025 – 28 Feb. 2025), leading to the discussion of the Government of Turkmenistan’s Third Periodic Report on the implementation of the Covenant on Economic, Social and Cultural Rights (“CESCR” or “Covenant”). Turkmenistan acceded to the Covenant on 1 May 1997.¹

(2) Unfortunately, gender inequality is widespread in Turkmenistan. Sexual and reproductive healthcare, specifically resources, data and information, are inadequate or lacking altogether. This is exacerbated by state-controlled media and its failure to disseminate scientific knowledge and evidence-based information. Sexual and reproductive health information is desperately needed for women to have an opportunity to reach their full potential, particularly to ensure health, economic security and legal protections.

(3) This report recommends that change should originate in school curriculums and be reinforced by removing regulations and restrictions that deny women and girls their right to bodily autonomy. Further, we propose that adequate reporting processes for discriminatory virginity testing must be created and utilized, and meaningful family planning initiatives must be implemented. Turkmenistan’s third periodic report, submitted in November 2023, does not reference abortion care, comprehensive sexuality education, virginity testing or family planning.² However, we do recognize and commend the attention brought to gender-based violence within and outside the family in the state report.³

¹ International Covenant on Economic, Social and Cultural Rights (CESCR), https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=156&Lang=EN [last accessed 17 Apr. 2024].

² CESCR, *Third periodic report submitted by Turkmenistan under articles 16 and 17 of the Covenant, due in 2023*, E/C.12/TKM/3, 28 Nov. 2023.

³ *Ibid.* at para. 135-36.

ABOUT THE AUTHORS OF THIS REPORT AND SOURCES

(4) This report has been prepared by Megan Mars (Science for Democracy), and by Chandra Ingram (JD Candidate 2025) and Marilyn Escúñ Yac (JD 2024) of the International Human Rights Center of Loyola Law School, Los Angeles, working under the supervision of Professor Cesare Romano, and in collaboration with Progres Foundation.

(5) Science for Democracy is a Brussels-based NGO that promotes the right to science as a structural component of liberal democracies through dialogue between the scientific community and decision-makers all over the world.⁴

(6) The International Human Rights Center of Loyola Law School, Los Angeles is committed to achieving the full exercise of human rights by all persons and seeks to maximize the use of international and regional political, judicial, and quasi-judicial bodies through litigation, advocacy, and capacity-building.⁵ Loyola Law School, Los Angeles is the school of law of Loyola Marymount University, a Jesuit university.

(7) Progres Foundation is a non-governmental organization based in the United States. Progres Foundation works to support various progressive, educational initiatives that benefit the public in Turkmenistan. Saglyk.org has been working to improve public health literacy in Turkmenistan over the last 14 years. Progres.online is an online analytical journal that promotes better, nuanced understanding of the societal trends in Turkmenistan by providing quality research and policy analysis. Progres.online is a journal by and of Progres Foundation³ Saglyk.org, an informational portal, provides the public in Turkmenistan with access to quality sexuality and reproductive health and rights information.⁷

BACKGROUND

(8) Science-based best practices and structural changes in sexual and reproductive health systems in Turkmenistan are urgently needed.⁸ Due to the lack of public health data and comprehensive information on sexual and reproductive health issues, gender health inequalities are deeply entrenched in Turkmenistan.⁹

(9) The government of Turkmenistan heavily restricts access to information through a highly censored Internet and no freedom of media.¹⁰ For example, the government removes negative information and criticism of the country and its policies from the Internet and intentionally makes the Internet speed very slow.¹¹ The government warns opponents to not speak with outside foreign journalists about the human rights problems within its borders.¹² Journalists often face threats of physical harm, arrest, and prosecution.¹³ The state media is the main resource for information in Turkmenistan and, even more troubling, the government recently announced a plan to build a sovereign Internet that will be disconnected from the global Internet.¹⁴

(10) The government oversees and directly controls almost all print media in the State, including books.¹⁵ It also blocks access to websites (including 133 websites considered to be the most popular across the globe) and virtual

⁴ <https://sciencefordemocracy.org/> [last accessed 17 Apr. 2024].

⁵ <https://www.lls.edu/academics/centers/internationalhumanrightscenter/> [last accessed 17 April 2023].

⁶ <https://progres.online/about-us/> [last accessed 17 Apr. 2024].

⁷ <https://saglyk.org/english/about-us.html> [last accessed 23 Apr. 2024].

⁸ Aynabat Yaylymova, *Women's health in Turkmenistan: 'Silence strips us of agency. This must change.'* The Guardian, 31 Jan. 2023, <https://www.theguardian.com/global-development/2023/jan/31/turkmenistan-womens-health-change-saglyk> [last accessed 4 Apr. 2024].

⁹ *Ibid.*

¹⁰ Human Rights Watch, *Turkmenistan Events of 2021*, last updated 18 Jan. 2022, <https://www.hrw.org/world-report/2022/country-chapters/turkmenistan> [last accessed 18 Apr. 2024].

¹¹ Progres, *The State Directed Internet Blockade Continued in Turkmenistan in 2023*, 13 Feb. 2024, <https://progres.online/reports/internet-freedom/the-state-directed-internet-blockade-continued-in-turkmenistan-in-2023/> [last accessed 24 Sept. 2024].

¹² U.S. Bureau of Democracy, Human Rights, and Labor, *2022 Country Report on Human Rights Practices: Turkmenistan*, p. 8, <https://www.state.gov/reports/2022-country-reports-on-human-rights-practices/turkmenistan/> [last accessed 18 Apr. 2024].

¹³ *Ibid.*

¹⁴ Progres, *The State Directed Internet Blockade Continued in Turkmenistan in 2023*, *supra* note 11.

¹⁵ U.S. Bureau of Democracy, Human Rights, and Labor, *2022 Country Report on Human Rights Practices: Turkmenistan*, *supra* note 12.

private network connections.¹⁶ Public musical, art and cultural exhibitions are both monitored and censored by the government through the Ministry of Culture.¹⁷ The government has also stopped or denied funding to research projects that it deems politically sensitive.¹⁸ Even the presidential election held in March 2022 was considered a formality for the power to pass within the Berdimuhamedov family, as the State has yet to prove the election processes are free and fair.¹⁹

(11) With information suppression rampant in Turkmenistan, knowledge and scientific information about health is scarce and often inaccessible, especially on matters the government finds controversial. For example, throughout the Coronavirus pandemic, data and information about how to stay safe was unavailable to the public.²⁰

(12) Regrettably, information concerning women's healthcare is also largely absent in Turkmenistan. The government's failure to provide fundamental and essential knowledge has dire outcomes for women and girls. A recent study found that nearly 60% of women in Turkmenistan feel unable to make autonomous decisions on issues like healthcare, contraception, and giving consent to sex.²¹ According to the latest United Nations Population Fund (UNFPA) figures, only 50% of Turkmen women who are married or in a relationship are using a modern form of contraception.²² And across all women aged 15-49, 8% have an unmet need for family planning.²³

(13) Turkmen women's lives are significantly impacted by patriarchal social norms. These discriminatory social standards are contributing to the government's failure to provide sexual and reproductive health information. Turkmenistan has recently imposed additional discriminatory restrictions on women.²⁴ Reports suggest that many women are not allowed to obtain driver's licenses and bans are being enforced to prevent hair coloring, cosmetic use, manicures, and tight-fitting clothing.²⁵

(14) These restrictions are extremely problematic, yet these day-to-day choices are not all that is at stake in Turkmenistan. In fact, women's physical and mental well-being are at risk simply from being born female. The findings of "The Health and Status of a Woman in the Family Survey"²⁶ in 2022 revealed that 16% of women in the country have experienced some form of abuse by an intimate partner, and 12% have been exposed to physical or sexual violence.²⁷ The 2019 Turkmenistan Multiple Indicator Cluster Survey found that a majority of women (58%) accept and justify intimate partner violence.²⁸ The survey also demonstrated that women subjected to husband/partner violence are more likely than women without experience of such violence to face problems with

¹⁶ *Ibid.* at p. 9-10.

¹⁷ *Ibid.* at p. 10-11.

¹⁸ *Ibid.*

¹⁹ *Ibid.* at p. 1.

²⁰ Hashim Talib Hashim, Ahed El Abed El Rassoul, John Bchara, Attaullah Ahmadi, Don Eliseo Lucero-Prisno, III, *COVID-19 Denial in Turkmenistan Veiling the Real Situation*, Arch Public Health, 4 Jan. 2022, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8724746/>

²¹ UNFPA, *Empowering women and young people in Turkmenistan Ensure reproductive rights for all*, 2021, p. 21,

https://turkmenistan.unfpa.org/sites/default/files/pub-pdf/united_nations_population_fund_in_turkmenistan_2021-2025_web_0.pdf [last accessed 18 Apr. 2024].

²² UNFPA, *World Population Dashboard Turkmenistan*, <https://www.unfpa.org/data/world-population/TM> [last accessed 18 Apr. 2024].

²³ *Ibid.* at p. 12.

²⁴ U.S. Bureau of Democracy, *2022 Country Report on Human Rights Practices: Turkmenistan*, *supra* note 12.

²⁵ Farangis Najibullah and RFE/RL's Turkmen Service, *Beauty Ban: Turkmenistan Puts Severe Restrictions on Women's Appearance, Ability to Travel*, Radio Free Europe/Radio Liberty, 4 May 2022, <https://www.rferl.org/a/turkmenistan-restrictions-women-appearance-travel/31834476.html> [last accessed 18 Apr. 2024].

²⁶ Economic Commission for Europe: Conference of European Statisticians, *Gender Statistics in Turkmenistan in the light of Survey on the Health and Status of a Woman in the Family*, 18 Apr. 2023, https://unece.org/sites/default/files/2023-04/E3_WP17_Yamatov_EN.pdf [last accessed 18 Apr. 2024]. This is the first-ever research to measure the prevalence of violence against women in families. For many years, the country did not have methodologically sound and comparable data on violence against women making the phenomenon invisible and difficult to address leaving thousands of women vulnerable and unprotected against violence including physical, sexual, psychological and economic.

²⁷ *Ibid.* at p. 1.

²⁸ *Ibid.* MICS 2019 data in Turkmenistan does not include men, yet other countries do include men in the survey. Thus, it is unclear what men think about domestic violence (DV) and how many would justify it. Considering that 60% of women do justify DV, it is likely that even more men justify DV. Therefore, the data provided may not be reflective of the true situation in Turkmenistan.

reproductive health. Among women who experienced physical and/or sexual violence by their husband/partner, 33.5% resorted to an abortion, 26% had a miscarriage, and 6.3% gave birth to stillborn children.²⁹

(15) In an effort to promote gender equality and remedy these concerns, Turkmenistan developed two National Action Plans on Gender Equality in Turkmenistan (NAPGE) between 2015-2020 and 2021-2025.³⁰ The commitments include addressing gender-based violence against women, collecting data and statistics, and reproductive health and rights.³¹

(16) Despite these commitments, since President Serdar Berdimukhamedov's appointment in March 2022, Turkmenistan's government has further restricted women's equal rights,³² including women's rights to reproductive and sexual health.³³ In April 2022, the government made public a law restricting abortion access from 12 weeks to just five weeks.³⁴

(17) The following sections explain how Turkmenistan is failing to fulfill its duties and obligations under the Covenant (specifically Articles 2, 3, 12, 13 and 15) because of inadequate comprehensive sexuality education, virginity testing in schools, and failing to provide meaningful contraceptive and family planning services and information.

TURKMENISTAN FAILS TO FULFILL ITS INTERNATIONAL OBLIGATIONS UNDER THE COVENANT CONCERNING SEXUAL AND REPRODUCTIVE HEALTH RIGHTS

I) The criminalization of abortion denies women and girls bodily autonomy and contributes to substantial health risks

(18) The law in Turkmenistan restricts abortion access after only five weeks, a point in pregnancy before most women even realize they are pregnant.³⁵

(19) This prohibition of abortion affects women and their reproductive health decisions and obstructs the enjoyment of their human rights. Criminalizing abortion violates multiple international human rights standards including the right to health (Art. 12), the right to equal enjoyment of rights enshrined in the covenant (Art. 3), and the right to enjoy the benefit of scientific progress (Art. 15).³⁶

(20) The law in Turkmenistan is vague in its reach, leaving women vulnerable to prosecution if they self-manage their abortions. The law limits legal abortion for social or medical reasons up to 22 weeks, thus getting an abortion after five weeks for these reasons requires women to provide evidence to a medical committee for seeking an

²⁹ See Figure 1, *Ibid.* at p. 9.

³⁰ *Ibid.* at p. 2. NAPGE for 2021-2025 has not been published online yet.

³¹ *Ibid.* at p. 2-3.

³² Other restrictive laws include: imposing a virtual ban on abortion care, enforcing a ban on a range of beauty services, forbidding women from sitting in the front seat of private cars, and prohibiting male taxi drivers from offering rides to women. See International Planned Parenthood Federation, *Turkmenistan ramps up policing of women's bodies*, 12 May 2022, <https://europe.ippf.org/news/turkmenistan-ramps-policing-womens-bodies> [last accessed 18 Apr. 2024]; Serdar Aitakov, *Turkmenistan: Car and Beauty Bans Further Erode Women's Rights*, Institute for War & Peace Reporting, 9 May 2022, <https://iwpr.net/global-voices/turkmenistan-car-and-beauty-bans-further-erode-womens-rights> [last accessed 18 Apr. 2024].

³³ International Planned Parenthood Federation, *Turkmenistan ramps up policing of women's bodies*, 12 May 2022, <https://europe.ippf.org/news/turkmenistan-ramps-policing-womens-bodies> [last accessed 18 Apr. 2024].

³⁴ Aynabat Yaylymova, *Turkmenistan cut our abortion rights overnight. Our 'allies' did nothing*, Open Democracy, 4 May 2022, <https://www.opendemocracy.net/en/5050/turkmenistan-abortion-rights-five-weeks-un-eu/> [last accessed 18 Apr. 2024].

³⁵ Amnesty International, *Turkmenistan 2022*, <https://www.amnesty.org/en/location/europe-and-central-asia/eastern-europe-and-central-asia/turkmenistan/report-turkmenistan/> [last accessed 18 Apr. 2024].

³⁶ Covenant on Economic, Social, and Cultural Rights (CESCR), Art. 3., Art. 12, Art. 15.

abortion and must obtain approval, a difficult hurdle for most women to overcome. After 22 weeks gestation, abortion may be permitted for medical reasons but requires a council of doctors to approve the procedure.³⁷

(21) Article 3 of the Covenant requires States Parties to ensure men and women enjoy all economic, social, and cultural rights, equally.³⁸ Denying women safe and legal access to abortions results in less economic and educational opportunities and can trap women in unsafe relationships.³⁹ This is especially problematic given the high rates of domestic violence in Turkmenistan.⁴⁰ Unfortunately, in its report, the government of Turkmenistan makes no reference to abortion or the dangerous change in their enforcement of the law that now prohibits abortion at five weeks (previously 12 weeks).⁴¹

(22) Article 15.1.b of the Covenant recognizes “the right of everyone to enjoy the benefits of scientific progress and its applications.”⁴² Prohibiting abortion at five weeks infringes on the enjoyment of the scientific progress in the field of reproductive health because abortion is medically safe when performed legally, yet women in Turkmenistan may have to seek care outside of clean, controlled medical settings.⁴³

(23) Further, Article 12 of the Covenant recognizes “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.”⁴⁴ The right to health includes a right to sexual health, including abortion care.⁴⁵ The denial of abortion services often leads to maternal mortality and morbidity and this Committee has recognized the role that unsafe abortion plays in contributing to these medical conditions.⁴⁶ General Comment 22 provides that access to reproductive health must not be denied nor limited by the State through laws criminalizing reproductive health services.⁴⁷ Turkmenistan’s abortion law is not only unaligned with this Committee’s guidance, but it threatens dangerous outcomes for women.

II) Comprehensive sexuality education is necessary for gender empowerment and the enjoyment of rights under the Covenant

(24) School-based comprehensive sexuality education (CSE) is an “essential component” of a quality education and is central to guaranteeing sexual and reproductive health.⁴⁸ Young people must have the tools and information necessary to make “healthy and respectful” decisions concerning relationships, sex, and reproduction.⁴⁹ CSE does not exist within the schools in Turkmenistan. Education on reproductive health and rights in Turkmenistan,

³⁷ *Turkmenistan Law on Public Health*, 2015, <https://abortion-policies.srhr.org/documents/countries/03-Turkmenistan-Law-on-Public-Health-2015.pdf#page=9> [last accessed 27 Nov. 2024]; *Turkmenistan Penal Code*, 1997, <https://abortion-policies.srhr.org/documents/countries/02-Turkmenistan-Criminal-Code-2013.pdf> [last accessed 27 Nov. 2024].

³⁸ CESCR, Art. 3.

³⁹ World Health Organization, *Abortion*, 25 Nov. 2021, <https://www.who.int/news-room/fact-sheets/detail/abortion> [last accessed 18 Apr. 2024]; Eirliani Abdul Rahman, *Abortion bans trap victims in a cycle of domestic violence*, Harvard Public Health, 22 July 2022, <https://harvardpublichealth.org/equity/how-abortion-bans-trap-victims/> [last accessed 18 Apr. 2024].

⁴⁰ Economic Commission for Europe: Conference of European Statisticians, *Gender Statistics in Turkmenistan in the light of Survey on the Health and Status of a Woman in the Family*, *supra* note 26 at p. 1.

⁴¹ CESCR, *Third periodic report submitted by Turkmenistan under articles 16 and 17 of the Covenant, due in 2023*, *supra* note 2.

⁴² CESCR, Art. 15.1.b.

⁴³ CESCR, *General Comment No. 25 (2020) on science and economic, social and cultural rights (article 15 (1) (b), (2), (3) and (4) of the International Covenant on Economic, Social and Cultural Rights)*, E/C.12/GC/25, 30 Apr. 2020, para. 25 & 70.

⁴⁴ CESCR, Art. 12.

⁴⁵ CESCR, *General Comment No. 14: The Right to the Highest Attainable Standard of Health* (Art. 12), E/C.12/2000/4, 11 Aug. 2000, para. 8.

⁴⁶ CESCR, *General Comment No. 22: on the right to sexual and reproductive health* (Art. 12), E/C.12/GC/22, 2 May 2016, para. 10 & 28.

Turkmenistan also has the highest child morbidity rate in Central Asia. IGME UN Inter-agency Group for Child Mortality Estimation, *Child Mortality, Stillbirth, and Causes of Death Estimates*, <https://childmortality.org/> [last accessed 1 Oct. 2024].

⁴⁷ *Ibid.* at para. 38.

⁴⁸ UNESCO, UNAIDS, UNFPA, UNICEF, UN WOMEN, WHO, *International technical guidance on sexuality education: an evidence-informed approach*, 2018, p. 3, https://cdn.who.int/media/docs/default-source/reproductive-health/sexual-health/international-technical-guidance-on-sexuality-education.pdf?sfvrsn=10113efc_29&download=true [last accessed 18 Apr. 2024].

⁴⁹ *Ibid.*

alongside gender equality and life skills education is covered as part of the Basics of Life Skills mandatory subject for grades 7-10 in secondary schools. However, the education is abstinence-focused and does not cover contraception, sexuality education or gender-based violence. Therefore, reaching out to every adolescent in Turkmenistan to teach them about contraception and sexuality is not realistic. In addition, the website of the Ministry of Education does not provide curriculum information and programs for schools, hence it is not clear what is in the government's plan when it comes to sexuality education.

(25) There are other projects that the government in Turkmenistan conducts in collaboration with UN organizations, such as three UNFPA-supported Peer Education Youth Centres, launched under the MoE and Youth Organisation in Ashgabat and Mary cities, that promote adolescent reproductive health and gender equality. The Y-PEER education and Yashlyk also works with traditional sensitive issues, such as HIV/STIs, unwanted pregnancy, contraceptives, and gender-based violence.

(26) It is important to note that there are only a few Peer Education Youth (PEY) centers, and most are inaccessible or unknown to most of the public. Data about the PEY activities is not shared with the public, making it difficult to assess the validity and its impact. Similar to the government-backed subject Basics of Life Skills, UNFPA Turkmenistan tends to provide information in a similar fashion: mostly using the language of “reproductive health” and not “sexual education” in its content and materials. This implies that the government of Turkmenistan with the support of UNFPA view any sexual activity in the context of “reproduction” for the purpose of growing families, and not outside of marriage. This narrow view of sexual activity is problematic given the young population in Turkmenistan does not receive CSE programs neither from the government nor from UNFPA and its affiliated centers for youth.⁵⁰

(27) The messaging pushed in state media is to have eight-child families while accurate, age-appropriate discussions on sexuality and sexual behavior are nonexistent.⁵¹ The deprivation of science-backed information and the spread of dangerous gender norms and standards that are offered in place of CSE is a violation of numerous rights under the Covenant, including the right to health (Art. 12), science (Art. 15), education (Art. 13), and to the equal enjoyment of rights (Art. 3).⁵²

(28) States have a core obligation “[t]o ensure all individuals and groups have access to comprehensive education and information on sexual and reproductive health that are non-discriminatory, non-biased, evidence-based, and that take into account the evolving capacities of children and adolescents.”⁵³

(29) Research clearly shows that CSE contributes to delayed and decreased frequency of sexual intercourse, lower numbers of sexual partners, and higher rates of condom and contraception use.⁵⁴ In addition, the benefits may also include gender equitable attitudes, confidence, and a reduction in gender-based and intimate partner violence and discrimination.⁵⁵ General Comment 22 points out: “[a]ll individuals and groups, including adolescents and youth, have the right to evidence-based information on all aspects of sexual and reproductive health, including maternal health, contraceptives, family planning, sexually transmitted infections, HIV prevention, safe abortion and post-abortion care...”⁵⁶

(30) UNFPA's 2022 report revealed that, in 2019, only 31% of women aged 15-49 had comprehensive knowledge about HIV transmission and 4.8% of children were already married or in union.⁵⁷ Between 2015-2019 there were a

⁵⁰ Progres, *Adolescent pregnancy in Turkmenistan: little attention, big consequences*, March 2024, <https://progres.online/society/adolescent-pregnancy-in-turkmenistan-little-attention-big-consequences/> [last accessed 27 Nov. 2024].

⁵¹ Aynabat Yaylymova, *Women's health in Turkmenistan: 'Silence strips us of agency. This must change,' supra* note 8.

⁵² CESCR, Art. 3., Art. 12, Art. 13, Art. 15.

⁵³ CESCR, *General Comment No. 22, supra* note 46 at para. 49(f).

⁵⁴ UNESCO, UNAIDS, UNFPA, UNICEF, UN WOMEN, WHO, *International technical guidance on sexuality education: an evidence-informed approach, supra* note 48 at p. 28-29.

⁵⁵ *Ibid.*

⁵⁶ CESCR, *General Comment No. 22, supra* note 46 at para. 18.

⁵⁷ UNFPA, *Empowering women and young people in Turkmenistan Ensure reproductive rights for all, supra* note 21 at p. 32 & 35.

total of 205,000 unintended pregnancies, and 83% of those unintended pregnancies ended in abortion.⁵⁸ These concerning issues may be remedied (among other measures) through CSE.⁵⁹ This is life-saving and life-altering information that the government must ensure the Turkmen youth are receiving.

(31) This Committee recently called on Indonesia in its concluding observations to “ensure that comprehensive sexual and reproductive health education is included in the national education curriculum and guarantee the accessibility and availability of appropriate, good-quality sexual and reproductive health-care services and information...”⁶⁰ To ensure sexuality education materials and curriculums are comprehensive, this Committee has also recommended that “adequate pedagogical programmes for their teaching be developed.”⁶¹

(32) While we commend Turkmenistan for developing “new methods of teaching gender equality in mainstream schools” there cannot be gender equality without CSE being taught in the mainstream schools as well.⁶²

(33) Article 3 requires States Parties to “ensure the equal right of men and women to the enjoyment of all...rights set forth in the present Covenant.”⁶³ However, without CSE, and specifically “the integration of a gender perspective throughout CSE,” girls are left without essential knowledge about their bodies and their sexual and reproductive choices.⁶⁴ Additionally, all young people will not have the exposure to “building awareness of the centrality and diversity of gender in people’s lives; examining gender norms shaped by cultural, social and biological differences and similarities; and encouraging the creation of respectful and equitable relationships based on empathy and understanding.”⁶⁵

(34) Further, according to the United Nations Educational, Scientific and Cultural Organization (UNESCO), CSE is “five times more likely to be successful in preventing unintended pregnancy and sexually transmitted infections when it pays explicit attention to the topics of gender and power.”⁶⁶ Therefore, while biological components of reproduction are necessary to discuss, gender equality, consent and toxic masculinity must be included in the curriculum as well. This is especially relevant in Turkmenistan where 34% of women cannot say no to sexual intercourse with their partner or husband.⁶⁷

(35) The right to “benefit” from science includes “the right of having scientific knowledge disseminated” and the duty of States to “form critical and responsible citizens who are able to participate fully in a democratic society.”⁶⁸ The lack of scientific information shared pertaining to sexual and reproductive health among women and girls is inconsistent with Article 15.1.b.⁶⁹ This concept is further engrained through General Comment 14, where this Committee put forth the specific legal obligation that “[s]tates should refrain from... censoring, withholding or intentionally misrepresenting health-related information, including sexual education and information...”⁷⁰ Currently, the government of Turkmenistan is withholding vital scientific, health-related information from the youth in the State by failing to provide CSE in schools.

⁵⁸ Guttmacher, *Country Profile: Turkmenistan*, <https://www.guttmacher.org/regions/asia/turkmenistan> [last accessed 18 Apr. 2024].

⁵⁹ UNESCO, *The journey towards comprehensive sexuality education: Global status report*, 2021, p. 11, https://cdn.who.int/media/docs/default-source/hrp/379607.pdf?sfvrsn=5b6761dc_7&download=true [last accessed 18 Apr. 2024].

⁶⁰ CESCR, *Concluding observations on the second periodic report of Indonesia*, E/C.12/IDN/CO/2, 14 March 2024, para. 59.

⁶¹ CESCR, *Concluding observations on sixth periodic report of Denmark*, E/C.12/DNK/CO/6, 12 Nov. 2019, para. 61.

⁶² CESCR, *Third periodic report submitted by Turkmenistan under articles 16 and 17 of the Covenant, due in 2023*, *supra* note 2 at para. 105.

⁶³ CESCR, Art. 3.

⁶⁴ UNESCO, UNAIDS, UNFPA, UNICEF, UN WOMEN, WHO, *International technical guidance on sexuality education: an evidence-informed approach*, *supra* note 48 at p. 16-17.

⁶⁵ *Ibid.*

⁶⁶ UNESCO, *Comprehensive sexuality education: For healthy, informed and empowered learners*, last updated 16 Nov. 2023, <https://www.unesco.org/en/health-education/cse> [last accessed 18 Apr. 2024].

⁶⁷ UNFPA, *Empowering women and young people in Turkmenistan Ensure reproductive rights for all*, *supra* note 21 at p. 36.

⁶⁸ CESCR, *General Comment No. 25 (2020) on science and economic, social and cultural rights*, *supra* note 43 at para. 8.

⁶⁹ *Ibid.*

⁷⁰ CESCR, *General Comment No. 14: The Right to the Highest Attainable Standard of Health*, *supra* note 45 at para. 34.

III) Autonomous decision-making includes access to family planning and contraceptives

(36) Under Article 12 of the Covenant, the right to sexual and reproductive health entails a set of freedoms and entitlements, including the right to make free and responsible decisions and choices, free of violence, coercion, and discrimination, regarding matters concerning one's body and sexual and reproductive health.⁷¹

(37) In General Comment 22, this Committee explained that the realization of rights of women, both in law and practice, requires repealing or reforming discriminatory laws, policies, and practices in the area of sexual and reproductive health.⁷² Specifically, Turkmenistan is required “to adopt legal and policy measures to guarantee all individuals access to affordable, safe and effective contraceptives.”⁷³ This includes “respecting the right of women to make autonomous decisions about their sexual and reproductive health.”⁷⁴ Essential medicines should also be available, including a wide range of contraceptive methods, such as condoms and emergency contraception.⁷⁵

(38) As noted above, in Turkmenistan, nearly 60% of women cannot make independent decisions on fundamental issues such as healthcare, contraception and consenting to sex.⁷⁶ The government promotes the pro-natalist messages of eight-child families, reinforcing the idea of women's primary role as subservient wives and mothers.⁷⁷

(39) According to Article 15.1.b of the Covenant, Turkmenistan must “recognize the right of everyone to enjoy the benefits of scientific progress and its applications.”⁷⁸ Modern contraceptive options are continuing to evolve and improve. Therefore, women in Turkmenistan should have a variety of contraceptive options depending on their preferences and circumstances.⁷⁹ This right is further explained in General Comment 25, where this Committee explained that to ensure the right to sexual and reproductive health “States parties must ensure access to up-to-date scientific technologies necessary for women in relation to this right.”⁸⁰ This Committee further interpreted State obligations to include ensuring “access to modern and safe forms of contraception, including emergency contraception, medication for abortion, assisted reproductive technologies, and other sexual and reproductive goods and services.”⁸¹

(40) In Turkmenistan, contraceptive prevalence among married women ages 15-49 is only 50%.⁸² Another 27%, or about 190,000 women, are defined as having an unmet need for modern contraception, meaning they would like to delay or avoid childbearing but do not have means or access to contraception.⁸³ The reasons are different for each woman and range from a lack of information about services to a lack of support from their parents,

⁷¹ CESCR, *General Comment No. 22*, *supra* note 46 at para. 5.

⁷² *Ibid.* at para. 28.

⁷³ *Ibid.*

⁷⁴ *Ibid.*

⁷⁵ *Ibid.* at para. 13.

⁷⁶ United Nations Population Fund, *Empowering women and young people in Turkmenistan Ensure reproductive rights for all*, *supra* note 21 at p. 21.

⁷⁷ Aynabat Yaylymova, *Women's health in Turkmenistan: 'Silence strips us of agency. This must change'*, *supra* note 8.

⁷⁸ CESCR, Art. 15, para. 1(b).

⁷⁹ Erica Cahill & Simranvir Kaur, *Advances in contraception research and development*, *Current Opinion in Obstetrics and Gynecology*, 32(6): p. 393, Dec. 2020, https://journals.lww.com/co-obgyn/abstract/2020/12000/advances_in_contraception_research_and_development.4.aspx, [last accessed 15 Apr. 2024].

⁸⁰ CESCR, *General Comment No. 25 (2020) on science and economic, social and cultural rights* *supra* note 43 at para. 33.

⁸¹ *Ibid.*

⁸² The World Bank, *Contraceptive prevalence, any method (% of married women ages 15-49) - Turkmenistan*, <https://data.worldbank.org/indicator/SP.DYN.CONU.ZS?locations=TM> [last accessed 15 Apr. 2024]; International Planned Parenthood Federation, *Turkmenistan ramps up policing of women's bodies*, *supra* note 33; Saglyk, *TÜRKMENISTANDA AÝALLARYŇ 50% NÄHILI ÝAGDAYDA*, <https://saglyk.org/makalalar/sagdyn-durmus/zenan-saglygy/1763-turkmenistanda-ayallaryn-50-nahili-yagdayda.html> [last accessed 18 Apr. 2024].

⁸³ Guttmacher, *Country Profile: Turkmenistan*, *supra* note 58.

husband, or communities, as well as the ability to decide or purchase contraceptives by themselves.⁸⁴ In Turkmenistan's conservative society, most women aren't able to independently decide on these fundamental issues that greatly affect their lives and health.⁸⁵ Adolescent girls are a population particularly affected by access to family planning, with 88% of adolescent women aged 15-19 who want to avoid a pregnancy having an unmet need for contraception.⁸⁶

(41) To ensure the enjoyment of the highest attainable standard of physical and mental health under Article 12 of the Covenant, Turkmenistan must implement comprehensive and effective family planning strategies.⁸⁷ Additionally, in the 2011 concluding observations, this Committee called on Turkmenistan to “intensify its efforts with a view to further reducing its maternal, child and infant mortality rates, including through educational programmes on sexual and reproductive health and by focusing on prevention and treatment.”⁸⁸

(42) In the report “Improving Reproductive Health Services and Access to Family Planning in Turkmenistan,” the study highlighted how a childbirth spacing policy could contribute to the reduction in Turkmenistan's maternal and child mortality.⁸⁹ According to the United Nations Population Fund, family planning is central to ensuring women's health and reducing maternal and child mortality.⁹⁰ The current family planning program in Turkmenistan only covers 4.3% of women.⁹¹ According to the National Reproductive Health Center of Turkmenistan, there are 1.5 million women of fertile age in Turkmenistan and nearly 16 percent are registered as most at risk women.⁹² “Identifying women in need and equipping them with modern methods of contraception in a timely manner through the newly established mechanism will help us significantly improve maternal and child health in our country,” said Ms. Akjemal Durdyeva, Director of the Center.⁹³ At-risk women may be eligible to receive free contraceptives in the State, but this is only effective if women know about the programs, and most do not.⁹⁴ Target vulnerable groups can qualify for free-of-charge contraceptive commodities, yet free-of-charge *services* are only available for women who have certain medical conditions that put them at risk of death or deteriorating health because of pregnancy.⁹⁵ All other women within the target groups pay for services, but at a reduced price, not including travel costs and other costs such as lost wages or childcare.⁹⁶

⁸⁴ Radio Free Europe Radio Liberty, *Turkmenistan's Ban On Abortion Paving The Way For Bribery*, 18 Sept. 2022, <https://www.rferl.org/a/turkmenistan-abortion-ban-bribery-restrictions/32039527.html>, [last accessed 18 Apr. 2024].

⁸⁵ *Ibid.*

⁸⁶ Gutmacher, *Country Profile: Turkmenistan*, *supra* note 58.

⁸⁷ CESCR, Art. 12.

⁸⁸ CESCR Committee, *Concluding Observations: Turkmenistan*, E/C.12/TKM/CO/1, 2011, para. 23.

⁸⁹ UNFPA Asia and Pacific Division, *Improving Reproductive Health Services and Access to Family Planning in Turkmenistan*, EUR/00/5022249, 2000,

<https://iris.who.int/bitstream/handle/10665/108290/E68637.pdf;jsessionid=A09F9BA05B5FB2BF2B1FF99E66A4FA46?sequence=1>, [last accessed Apr. 10, 2024].

⁹⁰ UNFPA Turkmenistan, *Family Planning*, <https://turkmenistan.unfpa.org/en/node/9691>, [last accessed Apr. 10, 2024].

⁹¹ UNFPA, *Investment Case on Ending Unmet Need for Family Planning in Turkmenistan*, 2021, p. 9,

https://turkmenistan.unfpa.org/sites/default/files/pub-pdf/investment_case_on_ending_unmet_need_for_family_planning_in_turkmenistan_0.pdf [last accessed 20 Oct. 2024].

⁹² United Nations Turkmenistan, *Increasing Women's Access to Reproductive Health*, 7 Nov. 2017, <https://turkmenistan.un.org/en/418-increasing-womens-access-reproductive-health#:~:text=Nearly%20half%20of%20women%20of.means%20or%20access%20to%20contraception>,

[last accessed 15 Apr. 2024].

⁹³ United Nations Turkmenistan, *Increasing Women's Access to Reproductive Health*, 7 Nov. 2017, <https://turkmenistan.un.org/en/418-increasing-womens-access-reproductive-health#:~:text=Nearly%20half%20of%20women%20of.means%20or%20access%20to%20contraception>,

[last accessed 15 Apr. 2024].

⁹⁴ UNFPA, *Empowering women and young people in Turkmenistan Ensure reproductive rights for all*, *supra* note 21 at p. 12.

⁹⁵ UNFPA, *Investment Case on Ending Unmet Need for Family Planning in Turkmenistan*, *supra* note 91 at p. 4. Target vulnerable groups include women with chronic diseases, women with disabilities that are the result of chronic diseases, women in vulnerable life situations, women between 15-19 years of age, sexually active and needing contraception. Women with chronic diseases and women with disabilities that are the result of chronic diseases must obtain certification by a doctor.

⁹⁶ *Ibid.*

(43) Access to information is essential for family planning.⁹⁷ Turkmenistan is also obliged to ensure that adolescents have full access to appropriate information on sexual and reproductive health, including family planning and contraceptives, the dangers of early pregnancy and the prevention and treatment of sexually transmitted diseases.⁹⁸ In Turkmenistan's concluding observations in 2011, this Committee urged the government of Turkmenistan to "increase its efforts with a view to providing women and young persons with effective access to services in the area of sexual and reproductive health, with specific attention to education, prevention and treatment."⁹⁹

(44) One of Turkmenistan's institutionalized practices affecting reproductive and sexual health is encouraging women to have more children to make up for its shrinking population.¹⁰⁰ In 2012, the Turkmen Initiative for Human Rights (TIHR) provided a report to CEDAW highlighting some of the government's policies encouraging women to give birth.¹⁰¹ Specifically, in 2008 all women who gave birth to and raised eight and more children were awarded with the honorary title of "Ene Mahri" ("Mother's Kindness"). They were entitled to an amount of \$351 USD and several benefits, but only if the eighth child reached the first year of life and all the other children remained alive.¹⁰² Many women refuse to have more than two children as the maternity monthly allowance is not more than \$16 USD, which is insufficient, especially following the recent increase of food prices.¹⁰³

(45) Since 2022, the government made amendments to the Code of Turkmenistan on social protection of the population to increase the financial incentive for women to have more children.¹⁰⁴ Under the law, the payment for pregnancy and childbirth increased from the previous 2008 law described above. Three times more will be paid for the first child, and for the eighth child they will pay twelve times more than the payment under the 2008 law.¹⁰⁵ The monthly childcare allowance is also being increased by around 30%.¹⁰⁶ Mothers who have received the honorary title of "Mother's kindness" will receive a 30% increase in their pensions, reduced child care allowances, and disability and social welfare benefits.¹⁰⁷ In addition, mothers with many children can retire 2 years earlier (i.e. at 52).¹⁰⁸

⁹⁷ CESCR, *General Comment No. 22*, *supra* note 46 at para. 18.

⁹⁸ *Ibid.* at para. 44.

⁹⁹ CESCR Committee, *Concluding Observations: Turkmenistan*, *supra* note 88 at para. 22.

¹⁰⁰ CIA, *World Factbook: Turkmenistan*, 9 Apr. 2024, <https://www.cia.gov/the-world-factbook/countries/turkmenistan/>, [last accessed 15 Apr. 2024]; Carolyn O'Hara, Foreign Policy, *In Turkmenistan, having 8 kids will earn you \$250*, <https://foreignpolicy.com/2008/03/06/in-turkmenistan-having-8-kids-will-earn-you-250/>, [last accessed 15 Apr. 2024]; Radio Free Europe Radio Liberty, *Turkmenistan's Ban On Abortion Paving The Way For Bribery*, *supra* note 84.

¹⁰¹ Turkmen Initiative for Human Rights (TIHR), "Submission to the United Nations Committee on the Elimination of Discrimination against Women (CEDAW) 53rd Session, Geneva, 1-19 October 2012", <https://iphronline.org/articles/turkmenistan-ngos-submit-joint-report-for-women-s-rights-review/>, [last accessed Apr. 10, 2024].

¹⁰² TIHR, "Chronicles of Turkmenistan": "Large families are uncommon in today's Turkmenistan", 25 Mar. 2008, <http://archive.chrono-tm.org/en/?id=1054>, [last accessed 15 Apr. 2024].

¹⁰³ *Ibid.*

¹⁰⁴ Turkmenportal, *Türkmenistanda köp çagaly maşgalalara goldaw bermek bilen bagly täze kanunlar güýje girdi*, 1 Jan. 2022, <https://turkmenportal.com/tm/blog/42956/turkmenistanda-kop-chagaly-mashgalalara-goldaw-bermek-bilen-bagly-taze-kanunlar-guyje-girdi>, [last accessed 15 Apr. 2024].

¹⁰⁵ *Ibid.*

¹⁰⁶ *Ibid.*

¹⁰⁷ *Ibid.*

¹⁰⁸ *Ibid.*

IV) Virginity testing in schools violates girls' right to physical and mental health, disregards consent, and invades privacy

(46) Article 2 emphasizes the guarantee for everyone to exercise their rights in the Covenant free of discrimination based on sex.¹⁰⁹ This includes the implementation of Article 12, which is for all to enjoy the “highest attainable standard of physical and mental health.”¹¹⁰

(47) In General Comment 15, this Committee emphasizes States parties' obligation to “provide a safe and supportive environment for adolescents, that ensures the opportunity to participate in decisions affecting their health...[.]to acquire appropriate information,...and to negotiate the health-behaviour choices they make.”¹¹¹ More specifically, “the realization of the right to health of adolescents is dependent on the development of youth-friendly health care, which respects confidentiality and privacy and includes appropriate sexual and reproductive health services.”¹¹²

(48) Turkmenistan has made various efforts to arbitrarily enforce “moral standards” upon women and girls, undermining their bodily autonomy. For example, Turkmenistan authorities have forced girls and women to undergo “virginity tests” conducted by doctors at homes or schools.¹¹³ A virginity test is a “two-finger” or per vaginal examination of the female genitalia meant to determine whether a girl or woman has had vaginal intercourse. This is based on the incorrect belief that a torn hymen means the person has engaged in sexual intercourse.¹¹⁴ In Turkmenistan, anyone who fails the test is typically reported to the police. Recently, in February 2024, the provincial government of Balkan ordered all female high school students to undergo mandatory virginity tests to evaluate their morality and serve as a preventative measure for teenage pregnancies.¹¹⁵ Many of these virginity tests were conducted without the consent of the girls or the parents.¹¹⁶ Turkmenistan denies that mandatory or forced virginity testing occurs within the State, as reflected in a recent CEDAW session in February 2024, yet the Committee acknowledged that alternative reports claimed the practice was still persisting.¹¹⁷ Turkmenistan should take measures to prove this practice has in fact ceased by setting up a complaint mechanism for the public.

(49) Turkmenistan's use of virginity testing is a violation of Article 2 because it is enforced upon girls and women. In General Comment No. 20, this Committee stated that discrimination based upon sex includes “social construction of gender stereotypes, prejudices and expected roles, which have created obstacles to the equal fulfillment of economic, social and cultural rights”.¹¹⁸ Turkmenistan has enacted various laws and policies to exert control over women's bodies including, but not limited to, the practice of virginity testing, a ban of abortion care, and a ban on certain beauty services.¹¹⁹ By restricting bodily autonomy from women, Turkmenistan perpetuates its

¹⁰⁹ CESCR, Art. 2.2.

¹¹⁰ CESCR, Art. 12.

¹¹¹ CESCR, *CESCR General Comment No. 14: The Right to the Highest Attainable Standard of Health*, *supra* note 45 at para. 23.

¹¹² *Ibid.*

¹¹³ International Partnership for Human Rights (IPHR) and Turkmen Initiative for Human Rights (THR), *Submission on Turkmenistan to the Committee on Economic, Social, and Cultural Rights*, Oct 2018, https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/DownloadDraft.aspx?key=gmqpVjIkVZfCteOsbUBadm5wVr4OtmIdGernJyjJy1AkQfc4y2LTXL9D9/Me/OjP1SN+pPhRzEpkFo0oTHPUg== [last accessed 15 Apr. 2024].

¹¹⁴ World Health Organization, United Nations Human Rights Office of the High Commissioner, UN Women, *Eliminating Virginity Testing: An Interagency Statement*, 2018, p. <https://iris.who.int/bitstream/handle/10665/275451/WHO-RHR-18.15-eng.pdf?sequence=1> [last accessed 15 Apr. 2024]; Abeer Ahmed Zayed, Reham Nafad Elbendary, and Asmaa Mohammad Moawad, *Questioned Virginity Has No Definite Reply*, National Library of Medicine, 12 Apr. 2022, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9192407/> [last accessed 16 Apr. 2024].

¹¹⁵ Radio Free Europe/Radio Liberty, *'Restrictive Measures A New Normal': Turkmen Region Imposes Unofficial Nighttime Curfew*, 11 Feb. 2024, <https://www.rferl.org/a/turkmenistan-province-nighttime-curfew/32818231.html> [last accessed 14 Apr. 2024].

¹¹⁶ Radio Free Europe/Radio Liberty, *Turkmenistan Conducting Virginity Tests To 'Evaluate Teenagers' Morality'*, 11 Feb. 2024, <https://www.rferl.org/a/turkmenistan-virginity-tests-morality-security-services/32814240.html> [last accessed 14 Apr. 2024].

¹¹⁷ CEDAW, *Summary Record of the 2038th Meeting*, 2 Feb. 2024, CEDAW/C/SR.2038.

¹¹⁸ CESCR, *General Comment No. 20 Non-discrimination in economic, social and cultural rights (art. 2, para. 2, of the International Covenant on Economic, Social and Cultural Rights)*, E/C.12/GC/20, 2 July 2009, para. 20.

¹¹⁹ International Planned Parenthood Federation, *Turkmenistan ramps up policing of women's bodies*, *supra* note 33.

patriarchal social norms where women are valued only as mothers, and seen as symbols of purity and modesty.¹²⁰ (50) Turkmenistan’s use of virginity testing is also a violation of Article 12. First, there is no scientific evidence to show that the state of the hymen accurately relays whether a person is already engaged in sexual intercourse.¹²¹ Second, performing a virginity test may cause damage to the genitalia, bleeding, or an infection.¹²² Sadly, the implications for virginity testing in Turkmenistan are beyond physical health issues. The stigmatization of failing a virginity test in Turkmenistan’s society “can lead to social ostracization, mental health issues, and even instances of honor killing.”¹²³

(51) In Turkmenistan’s reply to CEDAW’s inquiry to the virginity tests, Turkmenistan reported no information “regarding the forcing of women and girls to undergo gynecological examinations to determine their virginity.”¹²⁴ Turkmenistan also did not hold any recorded complaints or appeals on this matter.¹²⁵ CEDAW and the Committee on the Rights of the Child (CRC), in their Joint General Recommendation 31, state that virginity testing is a harmful practice that is based on stereotypes.¹²⁶

(52) The World Health Organization, UN Human Rights Office of the High Commissioner, and UN Women released a statement in 2018 calling for the elimination of virginity testing as it has no scientific purpose or merit and is a violation of human rights.¹²⁷

¹²⁰ *Ibid.*

¹²¹ World Health Organization, United Nations Human Rights Office of the High Commissioner, UN Women, *Eliminating Virginity Testing: An Interagency Statement*, *supra* note 114 at p. 10; Abeer Ahmed Zayed, Reham Nafad Elbendary, and Asmaa Mohammad Moawad, *Questioned Virginity Has No Definite Reply*, National Library of Medicine, 12 Apr. 2022, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9192407/> [last accessed 16 Apr. 2024].

¹²² *Ibid.*

¹²³ Wybe News, *Outrage over Forced “Virginity Testing” of High School Girls in Turkmenistan*, 7 Apr. 2024, <https://wybenews.com/outrage-over-forced-virginity-testing-of-high-school-girls-in-turkmenistan/> [last accessed 16 Apr. 2024].

¹²⁴ CEDAW, *Replies of Turkmenistan to the list of issues and questions in relation to its sixth periodic report*, CEDAW/C/TKM/RQ/6, 1 Nov. 2023.

¹²⁵ *Ibid.*

¹²⁶ CEDAW & CRC, *Joint general recommendation/general comment No. 31 of the Committee on the Elimination of Discrimination against Women and No. 18 of the Committee on the Rights of the Child on harmful practices*, CEDAW/C/GC/31-CRC/C/GC/18, 4 Nov. 2024, para. 8.

¹²⁷ World Health Organization, United Nations Human Rights Office of the High Commissioner, UN Women, *Eliminating Virginity Testing: An Interagency Statement*, *supra* note 114.

RECOMMENDATIONS

(53) We respectfully recommend this Honorable Committee include at least one of the following questions in the List of Issues it will prepare for Turkmenistan.

- 1. Please explain what steps Turkmenistan intends to take to repeal the law criminalizing abortion and amending the law to include exceptions for rape and incest.*
- 2. Please explain what reporting processes are in place for victims of virginity testing in schools that are confidential and not tied to the police.*
- 3. Please explain what, specifically, is included in Turkmenistan's plan for a CSE curriculum, including the existence of comprehensive, science-based content and implementation plans, resource allocation, and monitoring processes, including teacher training.*
- 4. Please explain what steps Turkmenistan intends to take to lower the rates of unintended pregnancies in its jurisdiction.*
- 5. Please explain what steps Turkmenistan intends to take to lower the rates of teenage pregnancies in its jurisdiction.*
- 6. Please explain what steps Turkmenistan intends to take to disseminate knowledge about sexual and reproductive health and rights to women and girls.*
- 7. Please explain what steps Turkmenistan intends to take to increase contraception use.*
- 8. Please provide up-to-date data on the number of girls who have undergone virginity testing and what the government did with the data and results from the testing.*