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CAMBODIAN HEALTH AND EDUCATION FOR COMMUNITY

RESEARCH STUDY REPORT ON

**LGBTIQ CHALLENGES AND PROBLEMS IN THEIR
DAILY LIVING AND SOCIAL COMMUNICATION**

June 2024

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LIST OF ACRONYMS

CCHR	Cambodian Center for Human Rights
CCWC	Commune Committee for Women and Children
CHEC	Cambodian Health and Education for Community
CSO	Civil Society Organization
FGD	Focus Group Discussion
GBV	Gender-Based Violence
KI	Key Informant
KIIs	Key Informant Interviews
LBT	Lesbian, Bisexual, and Transgender
LGBT	Lesbian, Gay, Bisexual, and Transgender
LGBTIQ	Lesbian, Gay, Bisexual, Transgender, Intersex and Queer
NGO	Non-Government Organization
NGO-CEDAW	The Cambodian NGO Committee on CEDAW
RoCK	Rainbow Community Kampuchea Organization
UNHR	United Nations Human Rights

EXECUTIVE SUMMARY

This report provides an overview of the key findings of the study on 'LGBTIQ challenges and problems in their daily living and social communication,' in Cambodia. With this in mind, the study seeks to provide answers to vital issues, such as the knowledge about LGBTIQ people rights, status of LGBTIQ people in family and society, LGBTIQ people experience of sexual harassment at educational institutions, LGBTIQ people access to basic health, education, and social security services, challenges faced by LGBTIQ people in family and society, challenges for LGBTIQ students in schooling, and challenges of LGBTIQ people in getting job.

This study was conducted in four target districts such as Kien Svay, Kampong Tralach, Peam Chor, and Srey Santhor during the month of May - June 2024. There were four target groups of respondents in this study: LGBTIQ youth, parents, and local authorities, including health staff (key informants).

Based on the research design, from each target district, except Srey Santhor, 50 LGBTIQ people were selected for the study. In addition, from Kampong Tralach and Peam Chor, 30 parents, and from Kien Svay and Srey Santhor, 32 and 35 parents, respectively, were selected. Also, in total, 42 local authorities (focal persons of the Commune Committee for Women and Children [CCWC]) and 36 health staff were taken into account as key informants (KIs) of the study. As such, in total, 413 respondents were selected for the study. Trained enumerators administered the field survey using a semi-structured questionnaire. The data were analyzed primarily through frequency tables and cross tabulations to filter the required information. A thematic approach was used to analyze the responses gathered from the key informant interviews.

The main findings of the study are as follows:

Rights of LGBTIQ People

56.3% of the surveyed LGBTIQ respondents knew about the rights of LGBTIQ people, whereas 43.7% did not know it.

52.8% of parents were unaware of LGBTIQ rights. Also, 33.3% of health staff and 26.2% of local authorities did not know the rights of LGBTIQ people.

Of the surveyed youth who knew the rights of LGBTIQ (n = 117), 69.2% expressed their knowledge about the rights to freedom of expression, followed by 59.0% on the rights to participate in social development. Thus, although more than half of the LGBTIQ knew their rights, all of them were only aware of some rights.

Among the surveyed parents who knew the rights of LGBTIQ (n = 60), 83.3% expressed their knowledge about the right to freedom of expression, followed by 46.7% on the right to equality before the law.

Among the local authorities (n = 31) and health staff (n = 24) who knew about the rights of LGBTIQ people, the right to freedom of expression was known to all local authorities (100.0%), compared to 87.5% of health staff.

Of the LGBTIQ surveyed people who did not know their rights (n = 91), 80.2% expressed their willingness to learn about their rights. Similarly, of the parents who did not know the rights of LGBTIQ (n = 67), 74.6% expressed their willingness to learn.

To find out the reasons for the surveyed LGBTIQ people's unwillingness to know about their rights, 50.0% felt that learning about their rights is not essential for them. Also, among the unwilling parents, more than half of them (52.9%) were busy with their work and, as such, were reluctant to know about the rights of LGBTIQ.

Status of LGBTIQ People in Family and Society

45.7% of parents were in favor of the acceptance of LGBTIQ children, while 27.6% disagreed, and 26.8% were unsure about it.

Of the surveyed parents who supported the acceptance of LGBTIQ children, 51.7% of them considered personal belief followed by social and cultural norms (36.2%) and challenges LGBTIQ children face in society (25.9%) as the factors that led to their acceptance.

57.5% of parents perceive building awareness, followed by 47.2% considering legal protection for LGBTIQ rights, and 45.7% believe education can help them better understand LGBTIQ for their acceptance.

44.9% of parents supported society's acceptance of LGBTIQ people, while, 18.9% felt they should be partly accepted.

23.6% and 28.4% of the surveyed LGBTIQ people were uncomfortable in their families and communities, respectively.

40.1% of parents felt uncomfortable discussing LGBTIQ issues in their families.

56.7% of the surveyed LGBTIQ respondents experienced sexual harassment at their educational institution or workplace.

The LGBTIQ respondents who reported sexual harassment at their educational institution or workplace encountered a range of behaviors, such as 94.1% experienced verbal harassment followed by sexual jokes (20.3%) and unwanted touching (11.0%).

Regarding LGBTIQ respondents' access to essential services, such as health care, education, and social security, while 84.1% of them agreed, 15.9% disagreed.

Among the LGBTIQ respondents who reported accessing basic services, 16.0% of them experienced poor quality of services followed by delay in service delivery (14.3%), lack of attention (8.6%), and inadequate care (6.9%).

61.1% of the surveyed LGBTIQ respondents felt that on-time service delivery followed by trained staff (51.4%), supportive staff (15.4%), and improved infrastructure (13.9%) to improve essential services.

Challenges Faced by LGBTIQ People

According to the surveyed LGBTIQ respondents, several challenges faced by them include social exclusion (39.9%), sexual harassment/molestation (26.4%), discrimination in employment (23.6%), violence (18.3%), and institutional discrimination (13.5%).

According to the local authorities the challenges faced by LGBTIQ people include employment discrimination (69.1%), institutional discrimination (61.9%), violence (52.4%), sexual harassment/molestation (33.3%), and social exclusion (26.2%).

According to the health staff, LGBTIQ people face several health-related challenges that include HIV infection (83.3%), followed by reproductive and sexual health issues (72.2%). Other challenges include inaccessibility of health services (33.3%) and irregular health services (25.0%).

To respond to the health-related challenges of LGBTIQ people, health staff conducted HIV and STI testing (83.3%) followed by counselling for mental stability (58.3%), setting up isolated rooms for counselling (30.6%), offering adequate medical services (13.9%), and referring to national-level medical care (11.1%).

Local authorities reported addressing the problems/challenges faced by LGBTIQ people through several measures, including counselling for mental stability (83.3%), acting against violence (83.3%), combating discrimination (73.8%), promoting inclusion (73.8%), referring to health (59.5%), and educational services (19.1%).

Regarding the challenges for LGBTIQ students in schooling, 52.9% of LGBTIQ respondents and 34.7% of parents felt stigma, followed by the rejection of participation (17.8% of LGBTIQ; 21.3% of parents). The other challenges in schooling include depression and anxiety (LGBTIQ: 13.5%; parents: 33.1%), violence (LGBTIQ: 13.0%; parents: 12.6%), and bullying (LGBTIQ: 11.5%; parents: 20.5%).

The LGBTIQ respondents and parents perceived the challenges encountered by LGBTIQ people in getting a job as including poor knowledge (Parents: 48.0%; LGBTIQ: 5.8%), lack of employment information (Parents: 26.0%; LGBTIQ: 12.0%), employment discrimination (Parents: 9.5%; LGBTIQ: 35.1%), sexual discrimination (Parents: 25.2%; LGBTIQ: 22.1%), and limited education and no skill training (Parents: 17.3%; LGBTIQ: 13.0%).

The suggestions for overcoming challenges faced by LGBTIQ include the creation of a safe and welcoming educational environment (LGBTIQ: 78.8%; Parents: 58.3%) followed by strengthening of civil rights and law enforcement (LGBTIQ: 40.9%; Parents: 38.5%), increased access to quality healthcare services (LGBTIQ: 31.7%; Parents: 50.4%), inclusive labor practices (LGBTIQ: 23.1%; Parents: 12.6%), and increased access to social security benefits (LGBTIQ: 22.6%; parents: 48.0%), etc.

On the basis of these findings, this comprehensive study considers the following recommendations as crucial:

Increasing acceptance and community support:

A more inclusive understanding and representation of culture is urgently needed for a greater acceptance of LGBTIQ identities in families and society.

Building awareness and educating people about LGBTIQ rights:

Equipping LGBTIQ people, parents, local authorities, health staff, and the community with knowledge about LGBTIQ rights would help them to navigate society and instill confidence and capability. Civil society organizations (CSOs) and government have a definite role in this regard.

Removing barriers and promoting reporting of discrimination and bullying:

For prompt reporting of discrimination and bullying to appropriate authorities by LGBTIQ people, creating awareness about the complaint process among LGBTIQ people is required. This could be achieved by sharing information with social media and conducting training workshops and public meetings.

Increasing visibility and representation of LGBTIQ people:

For wider societal acceptance of LGBTIQ people, greater visibility and representation of them in public life is required. As such, adequate space needs to be created for LGBTIQ people in political, social, cultural, and business spheres through the willingness of the community and political leaders.

Increasing protection through non-discrimination laws, regulations, and policies:

To build more inclusive communities and societies, the government should enact non-discrimination laws and policies aimed at nondiscriminatory impact on LGBTI people. In addition to constitutional protection against discrimination based on sexual orientation, the authorities should enforce the laws to protect the rights of LGBTIQ students and workers. Educational institutions should develop rules and regulations to prohibit and prevent harassment and discrimination of LGBTI students. Likewise, discrimination based on sexual orientation and gender identity should be prohibited in businesses.

I. INTRODUCTION

I.1. Background

Sexual orientation and gender identity should never lead to discrimination or abuse. Any discrimination based on one's sexual orientation, gender identity, and sex characteristics has a devastating effect on the physical, mental, and emotional well-being of those forced to endure it. While we are protected against such discrimination under international human rights law, the fact that 64 countries have enacted laws that criminalize homosexuality is a stark reminder of the work that still needs to be done.¹

Cambodia's young population suffers from many forms of physical, psychological, sexual, and economic violence and abuse more than any other age groups. Especially domestic violence and Gender-based violence (GBV) are prevalent, caused by unequal power relations within families, communities, and states. Stigmatization, discrimination, and even aggression towards the LGBTIQ community have increased during the last years and become an important societal challenge in Cambodia.

In this context, there is a need for research to understand the challenges and other issues faced by the LGBTIQ community in Cambodia in their daily lives, social communication, and accessing support services from local authorities and health facilities. This study is crucial as it will fill the existing knowledge gaps and support the development of effective policy measures. Furthermore, these challenges and issues contribute to lobbying with national and local grassroots levels in the present and future to improve the current service deliveries to support LGBTIQ from relevant stakeholders, promoting their rights to access openly and freely support services both local authorities and health facilities.

I.2. Objectives of the Study

The study's overarching goal is to urgently address the pressing challenges and problems faced by LGBTIQ individuals in their daily lives and social interactions. Specifically, the study aims to:

1. Develop an intervention strategy that can be integrated into the current project or a new strategic plan to address LGBTIQ rights in CHEC target areas.
2. Improve service delivery when they access support services from local authorities and health facilities.
3. Ensure their living is safe and humanized in families and communities.
4. Improve on the sustainability of the project and its outcomes in cooperation with relevant stakeholders from the government sector and local authorities to respond LGBTIQ.

I.3. Study Questions

The study seeks to answer the following main research questions:

1. What are the rights of LGBTIQ people known to target respondents?
2. What is the level of comfort of LGBTIQ people in their families and communities based on their sexual orientation?
3. What is the status of LGBTIQ people in society?
4. What is LGBTIQ people's access to basic health, education, and social security services?

¹ LGBTI rights. <https://www.amnesty.org/en/what-we-do/discrimination/lgbti-rights/>

5. What is the level of challenges faced by LGBTIQ people in their families and society?
6. What are the challenges for LGBTIQ students in schooling?
7. What are the challenges for LGBTIQ people in getting a job?
8. What policy options could be proposed based on the results for overcoming the challenges faced by LGBTIQ people?

1.4. Scope of the Study

Within the given timeframe and budget, the scope of the study on 'LGBTIQ challenges and problems in their daily living and social communication,' involves conducting a desk review and field survey to collect primary data from 208 LGBTIQ individuals and 127 parents, ensuring their voices are heard and valued. In addition, the study collected primary data from 78 key informants (36 health staff and 42 local authorities) in the target areas. Further, four FGDs were conducted with the participation of 32 LGBTIQ individuals to gather qualitative information for the study, further emphasizing the inclusivity of our research. This evidence-based research report has been prepared based on the review of the relevant literature and documents, including primary data collected from interviews.

1.5. Organization of the Report

This study report consists of five sections and is organized as follows: Section 2 presents a review of literature; Section 3 describes the methodology used in the study; Section 4 presents the findings of the study broken out into four subsections: i) socio-demographic profile of the survey respondents; ii) rights of LGBTIQ people; iii) status of LGBTIQ people in family and society; iv) challenges faced by LGBTIQ people; and finally, section 5 discusses the main findings of the study, and presents its conclusions and recommendations. The report is appended with research instruments used in the study for primary data collection.

2. LITERATURE REVIEW

2.1. LGBTIQ

The term LGBTIQ refers to a broad category of people, including those who identify as lesbian, gay, bisexual, transgender, intersex, or queer. The terminology used can vary widely depending on historical, cultural, and societal contexts. It is crucial to understand and respect this diversity in terminology, as it is well established in international human rights law that states must take steps to safeguard the rights of LGBTI people (Amnesty International, 2024).

2.2. Improving LGBTIQ Health and Well-being

Despite the challenges, evidence suggests that many LGBTIQ individuals demonstrate remarkable resilience. Common experiences affecting LGBTIQ health and well-being include inaccessibility of health services and engagement with healthcare workers due to stigma and discrimination, resulting in adverse physical and mental health outcomes. They can also experience human rights violations, including violence, criminalization, and discrimination. In addition, they face denial of care, discriminatory attitudes, and inappropriate healthcare settings. According to Gnan et al. (2019), LGBTQ people are at a much higher risk of anxiety and depression and also tend to have a higher rate of substance abuse, which can cause serious physical health issues if not appropriately treated. Also, LGBTIQ people have challenged finding medical professionals they feel comfortable with (Shapiro & Powell, 2017). It is crucial for healthcare providers to listen to

LGBTIQ patients and take their problems seriously, as many do not receive the attention and care they deserve.

2.3. Employment Discrimination

Employment discrimination against LGBT people continues to be persistent and widespread. A report on LGBT people's experiences of workplace discrimination and harassment in the US states that due to their sexual orientation or gender identity, 46% of LGBT workers experienced unfair treatment at work, including being fired, not hired, or harassed at some point in their lives. Also, 31.1% of LGBT respondents reported that they experienced discrimination or harassment within the past five years (Williams Institute, 2021).

2.4. Harassment at School

LGBTIQ students face discrimination and harassment at school frequently. Harassment is one of the most pervasive, frightening, and potentially damaging threats LGBT students face in public schools. They are mostly bullied, called names, threatened, or physically harmed at schools because of their sexual orientation (ACLU -District of Columbia, 2024).

A study on LGBT bullying in Cambodia's schools conducted in 2015 revealed that 62.7% of respondents experienced bullying during their time in school. Among them, 93.6% admitted that the bullying was because of their sexual orientation or gender identity. Further, of those who were bullied at school, 42% were bullied "often" or "every day," and most of them (84.5%) were verbally bullied (CCHR, 2015).

2.5. Violence and Social Exclusion

According to the Los Angeles LGBT Center's Finding Safety study (2020), LGBTIQ people experience a higher rate of violence compared to others. The study revealed that 1 in 5 hate crimes in the US are due to sexual orientation, while another 2% of those hate crimes are due to gender identity (Holt & Whirry, 2020). Further, LGBTIQ people move away from their friends and family due to intolerance, hatred, and abuse in their home community. Exclusion from family, communities, work, and school, and abuse by people led to the social exclusion of LGBTIQ people.

A study on family violence towards LBT people in Cambodia revealed that 81% of the surveyed LBT people under 35 years faced emotional violence, including physical, sexual, and economic violence, which was caused by their family members (RoCK, 2019). Notably, LBT people admitted that family violence most negatively impacts their lives compared to non-family violence towards them. The study also highlights the complexity of the issue, as it reveals that the causes of violence vary based on intersecting factors, including traditional parenting methods, rigid social norms, religion, and ethnicity.

The study on LGBT bullying in Cambodia's schools in 2015 revealed that of those who were bullied at school, 46.2% experienced social exclusion followed by physical bullying (39.7%) such as pushing, hitting, spitting, violence, being locked in a toilet and having belongings stolen (CCHR, 2015).

3. RESEARCH METHODOLOGY

3.1 Target Area and sample Design

As proposed, the study's target area consists of four districts in four different provinces, as shown in Table 3.1.

Table 3.1: Target areas of the study

Target Districts	Provinces
Kien Svay	Kandal
Kampong Tralach	Kampong Chhnang
Peam Chor	Prey Veng
Srey Santhor	Kampong Cham

CHEC's previous experience is the reason for selecting these areas. In earlier projects, in areas relating to GBV, youth and their behaviors, the transmission of sexual diseases and lack of access to health care, and support for women, children, LGBTIQ, etc., CHEC has shown its expertise in understanding the deep-rooted problems.

This study had four target groups of respondents: LGBTIQ youth, parents, and local authorities, including health staff (key informants).

Based on the research design, from each target district, except Srey Santhor, 50 LGBTIQ people were selected for the study. In addition, from Kampong Tralach and Peam Chor, 30 parents, and from Kien Svay and Srey Santhor, 32 and 35 parents, respectively, were selected. Also, in total, 42 local authorities (focal persons of the Commune Committee for Women and Children) and 36 health staff were taken into account as key informants of the study. As such, in total, 413 respondents were selected for the study (Table 3.2).

Table 3.2: Sample size of respondents from each target area

Target District	Primary Respondents		Key Informants	
	LGBTIQ	Parents	Local authorities	Health staff
Kien Svay	50	32	08	08
Kampong Tralach	50	30	10	09
Peam Chor	50	30	10	10
Srey Santhor	58	35	14	09
Total	208	127	42	36

In addition to the interviews with primary respondents and key informants, four FGDs (one in each district) were conducted with the participation of 32 LGBTIQ people.

In selecting samples, the research team used convenience sampling to include the target categories of respondents. All LGBTIQ people (sample respondents) and parents were Cambodians (*Please see the socio-demographic profile in Section 4*).

3.2 Questionnaire Design and Pre-testing

For the research study, four sets of questionnaires were prepared for the sample LGBTIQ people, parents, and key informants (local authorities and health staff). These questionnaires were designed by identifying topics to be addressed in the study, such as rights of LGBTIQ youth, acceptance of LGBTIQ children, sexual harassment, access to basic health, education, and social

security services, challenges in your family and society, challenges for LGBTIQ students in schooling, challenges for LGBTIQ youth in getting a job, etc. These topics were then clustered into challenges and problems LGBTIQ people face in their daily living and social communication with open and close-ended questions. Questions and answer options were discussed and adjusted based on feedback and comments from the study team. In addition, relevant questions were designed for FGDs. The questionnaires were translated from English to Khmer with utmost care and attention to detail, and then translated back to ensure comprehension and accuracy. Sample questionnaires can be found in Annex 1- 5.

The enumerators pre-tested the draft questionnaires after training for language, understanding, skip patterns, and time consumed before finalizing for field data collection. Aside from the time it took (around 45 minutes) to interview a respondent, the enumerators raised no other issues in the pre-testing of the questionnaire. As such, the draft questionnaire was finalized for administration in the field.

3.3 Data Collection

Desk Review: Prior to the primary data collection, the research team reviewed relevant literature and materials, including policies and legislation on similar and/or relevant topics. This helped broaden the scope of the current study and provide further information for validation against other sources (*please see the literature review in Section 2*).

Field Survey: After receiving verbal consent from respondents, trained enumerators conducted face-to-face interviews using a semi-structured questionnaire. The final administered questionnaire includes close-ended questions.

Key Informant Interviews (KIs): The KI interviews were semi-structured and covered the topics mentioned earlier. The research team conducted these interviews through face-to-face. Verbal consent was sought from the key informants before the interview was conducted. Each key informant interview took approximately one hour to complete.

Focus Group Discussions (FGDs): In each target district, one FGD was conducted with the active participation of members to supplement and cross-check the information gathered from primary respondents and KIs through interviews. Each FGD took approximately one and a half hours to complete.

Field Observation: During the field survey, careful field observation was carried out, which captured the prevailing environment in target areas and related to the research topic.

3.4 Data Analysis and Reporting

The data analysis in this study was both qualitative and quantitative. The primary data, obtained from LGBTIQ people, and parents through surveys, and from Key Informants (KIs) through interviews, underwent a meticulous editing process before being entered into Excel for analysis. Open-ended responses were coded to form clusters, which were then used to tabulate percentage responses. The data was primarily analyzed using frequency tables and cross-tabulations to filter the required information. A thematic approach was used to analyze the responses gathered from the KIs and FGDs.

3.5 Ethical Considerations

To ensure the sample respondents' privacy, safety, and security in all phases, the study team employed a number of ethical principles. Before the survey, potential respondents were informed that they had no obligation to participate and would face no penalty if they chose not to participate. As such, their participation in the survey was completely voluntary. Respondents were informed that they could withdraw their participation during the interview. They were guaranteed that there would be no pressure on them to withdraw, and accordingly, enumerators were instructed to ensure this during the field survey strictly. To protect the anonymity and confidentiality of the respondents, information gathered would not be shared with any other organization except the donors. Additionally, the study team will clean the database after finalizing the report. Finally, it was guaranteed that the data collected would be used solely for the study and any further follow-up action.

3.6 Limitations of the Study

The potential limitations of the survey include response bias and recall bias. There are many reasons why respondents may provide socially desirable answers (less-than-truthful responses) or incorrectly recall details. The survey attempted to reduce this potential bias by providing respondents with clear information about the purpose of the study and why they were selected for the interview. Further, respondents were ensured that their responses would have no bearing on their participation or lack of involvement in this research study. To guarantee their anonymity, all data was collected and stored in a secure manner, and they would never be identified individually or by name in the study report.

Another limitation of the analysis and interpretation is the selection of survey areas and distribution of samples in the target areas. The survey was carried out in four districts under four different provinces, and the sample distribution among the LGBTIQ people and parents was made with an understanding of their availability. This understanding should be kept in mind while comparing the data between the categories of respondents, ensuring that the audience is informed and aware of the study's limitations.

During the data collection process, it proved challenging to find sample respondents according to their category in the target areas. To carry out the field survey smoothly, enumerators approached sample respondents at their convenience to conduct interviews.

Lastly, it is important to remember that this study is not intended to represent the LGBTIQ challenges and problems in their daily lives and social communication in Cambodia. However, considering the study's target areas, we consider the study representative of those areas, thereby making the audience feel connected and involved in the study.

4 STUDY FINDINGS

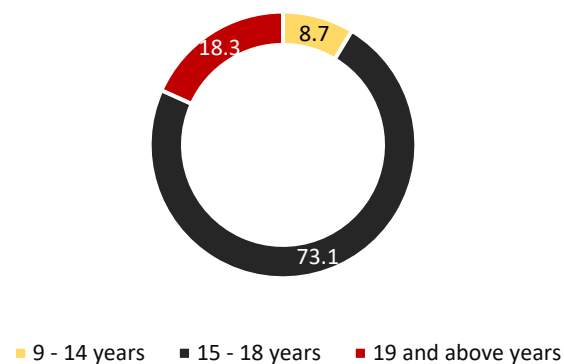
4.1. Socio-Demographic Profile of the Survey Respondents

This section presents the brief profile of the survey respondents (LGBTIQ people and parents), key informants (local authorities and health staff), and FGD participants.

Profile of the LGBTIQ youth

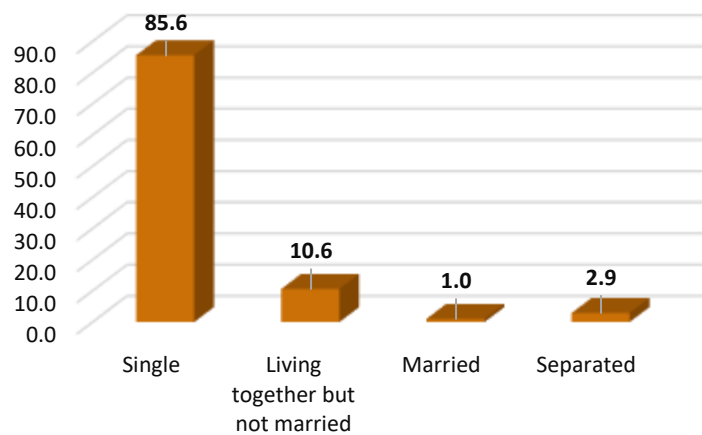
The percentage of LGBTIQ respondents aged 15 - 18 was close to three-fourths (73.1%) of the total respondents. The lowest percentage representation (8.7%) was found for the age group of 9 – 14 years. The remaining 18.3% of LGBTIQ respondents were in the age group of 19 and above years (Figure 4.1). As such, the study is dominated by respondents from the 15 - 18 age group.

Figure 4.1: Age group of sample LGBTIQ respondents (%)



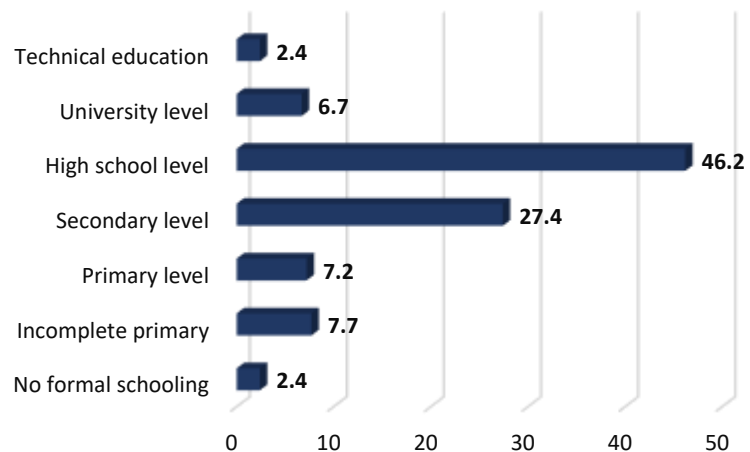
The survey results reveal a stark contrast in the relationship status of LGBTIQ people. A significant majority (85.6%) were single, while a smaller portion (10.6%) were in the category of 'living together but not married.' Only 2.9% and 1.0% of them, respectively, were separated and married (Figure 4.2). This contrast underscores the dominance of the single category among LGBTIQ people.

Figure 4.2: Marital status of sample LGBTIQ respondents (%)



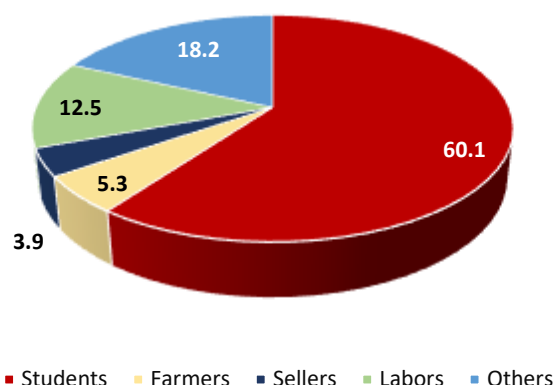
Most survey respondents (46.2%) were high school graduates, followed by more than a quarter (27.4%) of them attained secondary education. Less than one-tenth of surveyed LGBTIQ had incomplete primary (7.7%), primary level (7.2%), and university level (6.7%) education. Only 2.4% of respondents had no formal schooling. Also, 2.4% of them had earned technical education. Thus, considering the levels of education, the majority of the surveyed youth had a high school level of education (Figure 4.3).

Figure 4.3: Educational levels of sample LGBTIQ respondents (%)



The surveyed LGBTIQ people had varied levels of activity. While three-fifths (60.1%) were students, close to one-fifth (18.2%) worked as receptionists, restaurant service staff, online sellers, make-up staff, etc. The remaining 12.5% were laborers, and 5.3% and 3.9% were farmers and sellers, respectively (Figure 4.4). Thus, the distribution of occupations shows that most of the survey respondents were students.

Figure 4.4: Occupation of sample LGBTIQ respondents (%)



Profile of the parents

Among the 127 surveyed parent respondents, 73.2% were female, and 26.8% were male. The age group classification shows that more than half (55.9%) of the surveyed parents were in the 50 and above age group, whereas 29.9% were in the 40 - 49 age group, followed by 14.2% of them being younger parents and the age group of 30 – 39 years (Figure 4.5). Thus, among surveyed parents, the presence of senior members was observed.

Figure 4.5: Age group of parent respondents (%)

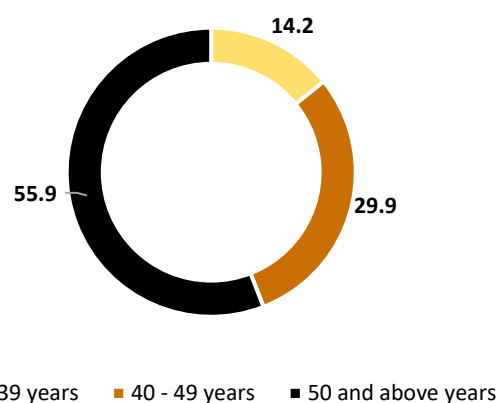
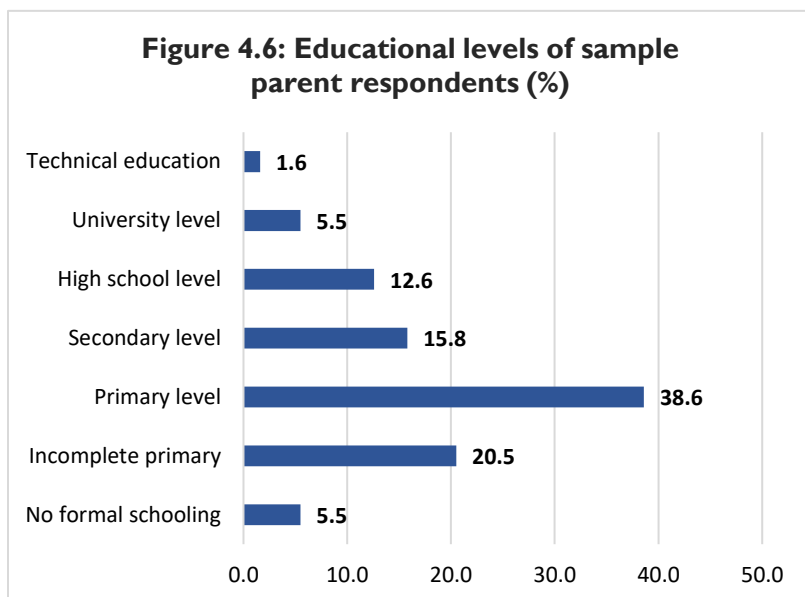


Table 4.1: Marital status of the parent respondents

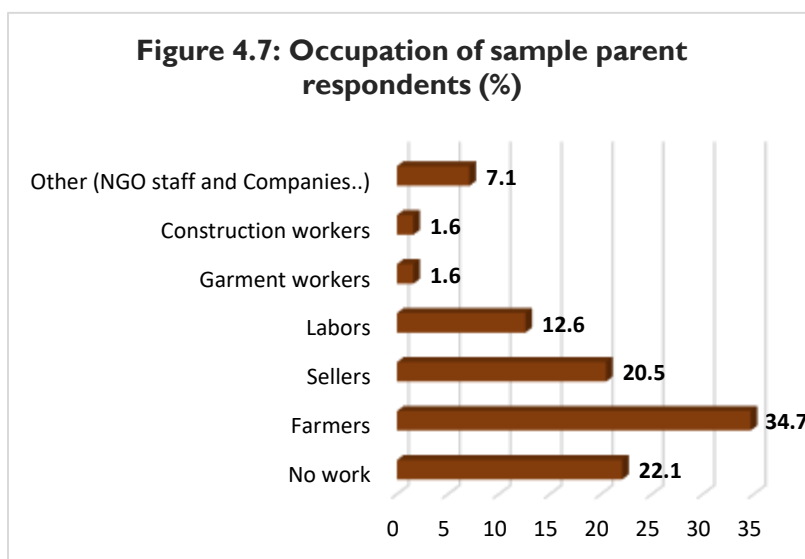
Marital status	% of parents
Married	83.5
Living together but not married	5.5
Separated	4.7
Widow	5.5
Widower	0.8
All	100.0

Regarding marital status, more than four-fifths (83.5%) of the parents were married. While 5.5% were in the category of 'living together but not married,' 4.7% were separated. The remaining 5.5% were widows, and 0.8% were widowers (Table 4.1). Thus, married parent respondents dominated the survey

The highest, 38.6% of surveyed parents, had a primary level of education, followed by just above one-fifth of them having an incomplete primary level. Also, 15.8% and 12.6% had secondary and high school levels of education, respectively. However, the percentage of parents with technical education is notably low at 1.6%. Also, 5.5% each had university-level and no formal schooling (Figure 4.6). Thus, the findings reveal that more than half of the respondents were having primary and lower educational levels.



The majority of the surveyed parents were engaged in farming, with more than one-third (34.7%) of them in this occupation. This was followed by one-fifth (20.5%) who were sellers, 12.6% who were laborers, and a minimal percentage (1.6%) who were garment workers and construction workers. More than one-fifth (22.1%) of the parents were unemployed (Figure 4.7). This data underscores the dominant role of farming in the surveyed population.



Study key informants

The study engaged a diverse group of 42 local authorities from four districts as key informants. Among them, 57.2% were CCWC members, 35.7% were from the commune council, and 7.1% were commune leaders. The female participants represented 80.9%, and the male participants were 19.1%.

Additionally, we interviewed 36 staff from health centres in four districts, with a gender distribution of 63.9% females and 36.1% males.

Focus Group Discussions

Regarding the FGDs, the study organized four focus group discussions with the participation of 32 LGBTIQ people. These discussions were a crucial part of our research, providing valuable

information to supplement the data collected through the survey among the LGBTIQ people. Several topics were discussed, such as participants' understanding and awareness about the rights of LGBTIQ people, gender-based violence, sexual harassment, challenges while accessing support services, challenges in continuing education and jobs, etc.

4.2. Rights of LGBTIQ People

This section presents the knowledge and understanding of the surveyed LGBTIQ people and parents about LGBTIQ rights. The information gathered through FGDs and KI interviews supplements it.

Article I of the Universal Declaration of Human Rights affirms that all human beings are born free and equal in dignity and rights and that everyone is entitled to all rights and freedoms without distinction. The Charter of the United Nations and human rights treaties also embody these principles of universality, equality, and non-discrimination (UNHR, 2015).

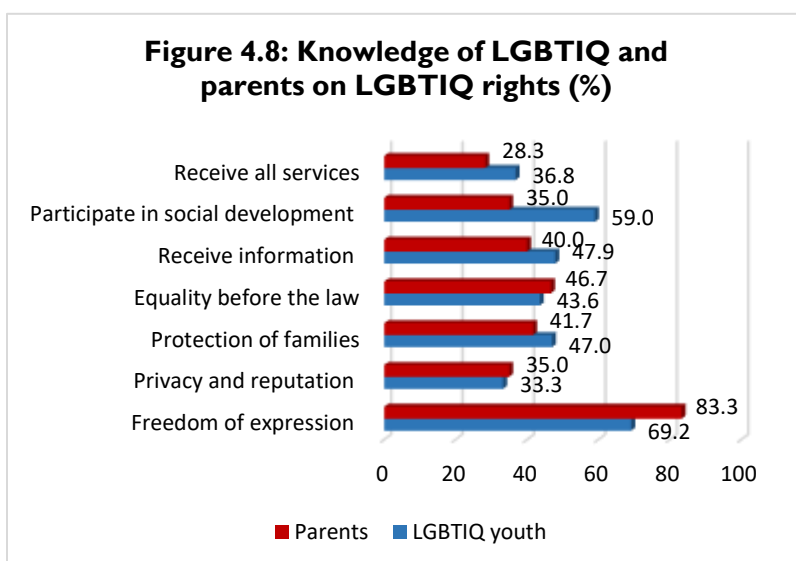
The Cambodian Constitution, particularly in Article 31, plays a crucial role in upholding human rights. It reaffirms the principles of the Universal Declaration of Human Rights and international treaties, ensuring that every Khmer citizen is "equal before the law, enjoying the same rights, freedom and fulfilling the same obligations regardless of race, color, sex, language, religious belief, political tendency, birth origin, social status, wealth or other status". Furthermore, Article 35 of the Cambodian Constitution grants Khmer citizens the right to "participate actively in the political, economic, social and cultural life of the nation" (Press OCM, 2017).

Existing legislation in Cambodia does not explicitly prohibit discrimination based on sexual orientation and gender identity. There are no sanctions for those who violate the human rights of LGBT persons. Although same-sex relations are not criminalized, they are neither protected nor recognized by Cambodian law. As such, LGBT people in Cambodia face a legal vacuum (CCHR, 2015).

Our research reveals a significant disparity in the understanding of the rights of LGBTIQ people, like everyone's rights. While 56.3% of the LGBTIQ respondents in our sample acknowledged these human rights, a substantial 43.7% of them denied it. Equally striking is that more than half of the parents (52.8%) were unaware of these human rights. In addition, one-third (33.3%) of health staff and more than one quarter (26.2%) of local authorities did not know the rights of LGBTIQ people, like everyone's rights. This stark variation underscores the vital importance of targeted interventions to improve awareness of LGBTIQ rights, like everyone's rights and, more importantly, to foster a culture of understanding and acceptance within the community.

Of the surveyed youth who knew the rights of LGBTIQ (n = 117), nearly seven out of 10 (69.2%) expressed their knowledge about the rights to freedom of expression, followed by 59.0% on the LGBTIQ's rights to participate in social development. The other rights, such as the right to receive information, the right to the protection of families, and the right to equality before the law, were known to 47.9%, 47.0%, and 43.6% of LGBTIQ respondents, respectively. Only

one-third and slightly more LGBTIQ respondents knew the rights to privacy and reputation (33.3%) and the rights to receive all services (36.8%). The findings reveal that although more than half of the LGBTIQ knew their rights, all of them were only known to some rights (Figure 4.8).



Likewise, of the surveyed parents who knew the rights of LGBTIQ (n = 60), eight out of 10 (83.3%) expressed their knowledge about the rights to freedom of expression, followed by 46.7% on the right to equality before the law. Only two-fifths knew about the right to protect families (41.7%) and the right to receive information (40.0%). The other rights, such as the right to privacy and reputation, the right to participate in social development, and the right to receive all services, are known to only 35.0%, 35.0%, and 28.3% of parents, respectively. Thus, not only did less than half of the parents understand the rights of LGBTIQ but also many of them did not know all LGBTIQ rights (Figure 4.8).

Among the local authorities (n = 31) and health staff (n = 24) who knew about the rights of LGBTIQ people, the right to freedom of expression was known to all local authorities (100.0%) against 87.5% of health staff. Also, while the right to equality before the law was known by nine among ten government authorities (90.3%), it was known to two-thirds (66.7%) of health staff. Similarly, 77.4% of local authorities knew the right of LGBTIQ to participate in social development, which was known to 50.0% of health staff. The knowledge of local authorities and health staff on other rights of LGBTIQ include the right to protect families (local authorities: 74.2%; health staff: 41.7%), the right to receive information (local authorities: 71.0%; health staff: 50.0%), the right to receive all services (local authorities: 64.5%; health staff: 20.8%), and the right to privacy and reputation (local authorities: 38.7%; health staff: 41.7%). Thus, in all cases, except the right to privacy and reputation, a higher percentage of local authorities knew about LGBTIQ rights than the health staff (Table 4.2).

Table 4.2: Knowledge of local authorities and health staff on LGBTIQ rights

Rights of LGBTIQ	Local authorities (%)	Parents (%)
Right to freedom of expression	100.0	87.5
Right to equality before the law	90.3	66.7
Right to participate in social development	77.4	50.0
Right to protect families	74.2	41.7

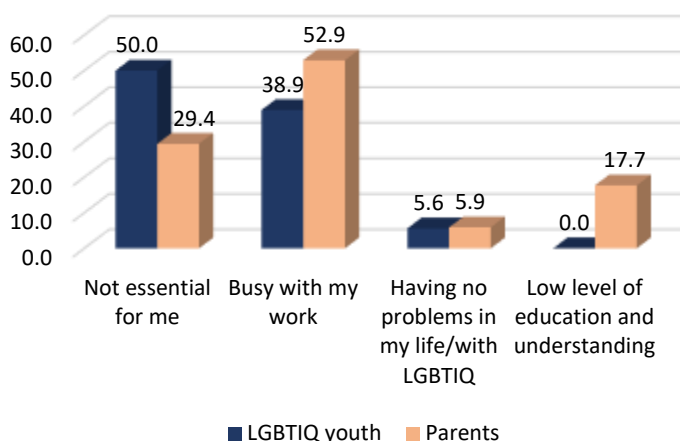
Right to receive information	71.0	50.0
Right to receive all services	64.5	20.8
Right to privacy and reputation	38.7	41.7

In the FGDs, participants expressed that they have the right to live in society like others and were aware of certain rights of LGBTIQ people. These include, the right to receive various services, such as healthcare and education, the right to protection, the right to participate in community development, the right to express opinions and make decisions, the right to employment, and the right to marry. While the participants had a basic understanding of their rights, they were unable to articulate the details. Therefore, it is crucial to build awareness and educate LGBTIQ people about their rights like others, empowering them with the knowledge they need to navigate society.

Of the LGBTIQ surveyed people who did not know their rights (n = 91), eight out of 10 (80.2%) expressed their willingness to learn about the rights, a testament to their open-mindedness and eagerness to understand. Similarly, of the parents who did not know the rights of LGBTIQ (n = 67), three quarters (74.6%) expressed their willingness to learn, showing a positive attitude towards education and acceptance. This willingness to learn indicates a potential for change and a need for accessible educational resources.

To find out the reasons for the surveyed LGBTIQ people's unwillingness to know about their rights, notably, half of them (50.0%) felt that learning about their rights is not essential for them, a sentiment that calls for a deeper understanding of their perspective. Among the unwilling parents, more than half of them (52.9%) were busy with their work, while 29.4% felt that knowing the rights of LGBTIQ is not essential for them. In addition, 17.7% of unwilling parents perceived their education and understanding were low for them to understand about the rights of LGBTIQ, highlighting the need for targeted educational programs (Figure 4.9).

Figure 4.9: Unwillingness to know LGBTIQ rights (%)



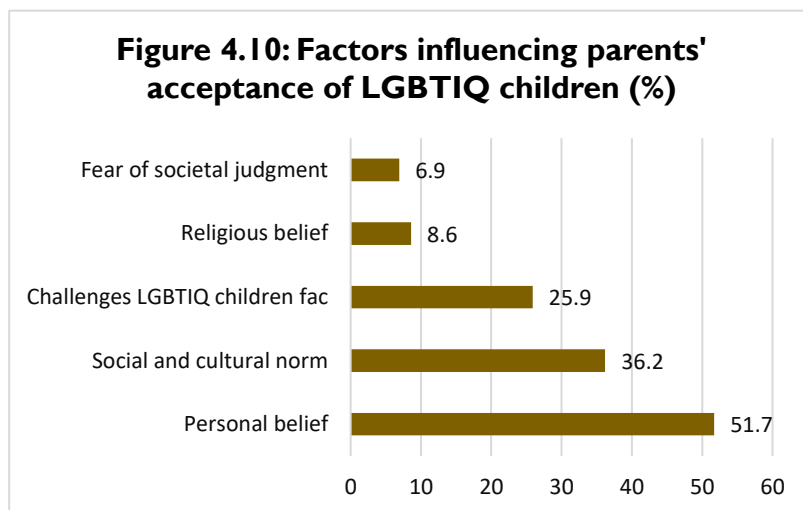
4.3. Status of LGBTIQ People in Family and Society

This section discusses the acceptance of LGBTIQ children by parents and society, the level of comfort of LGBTIQ people in their family and community, the level of comfort of parents in discussing LGBTIQ issues, sexual harassment faced by LGBTIQ children, and their access to basic services and limitations. The information gathered through FGDs and KI interviews supplements it.

Acceptance of LGBTIQ children

Despite the challenges, the trend in parental acceptance of LGBTIQ children is moving in a positive direction. More than two-fifths (45.7%) of parents were in agreement, while 27.6% disagreed, and 26.8% were unsure. This indicates a growing understanding and acceptance of LGBTIQ rights.

Of the surveyed parents who supported the acceptance of LGBTIQ children, they expressed the factors that led to their acceptance, such as personal belief (51.7%), social and cultural norms (36.2%), challenges LGBTIQ children face in society (25.9%), religious belief (8.6%), and fear of societal judgment (6.9%). These factors demonstrate a growing understanding and acceptance of LGBTIQ rights (Figure 4.10).



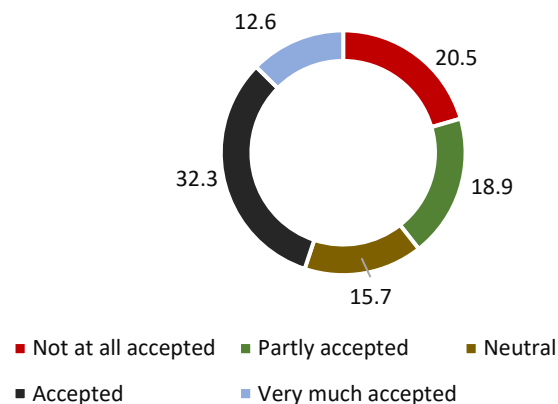
As for the approaches that parents thought of to become more accepting of LGBTIQ children, 57.5% of them perceive building awareness, followed by 47.2% considering legal protection for LGBTIQ rights. Also, more than two-fifths of parents (45.7%) believe education can help them better understand LGBTIQ for their acceptance. For 22.8% and 6.3% of parents, supporting attitude and social pressure, respectively, can help them become more accepting of LGBTIQ children. Thus, when it comes to the approaches that parents believe can foster more acceptance of LGBTIQ children, building awareness and education emerge as critical factors (Table 4.3). This underscores the importance of knowledge and understanding in promoting acceptance and inclusivity.

Table 4.3: Approaches parents perceive for more accepting LGBTIQ children

Approaches	Opinion of parents (%)
Building awareness	57.5
Legal protection for LGBTIQ rights	47.2
Education	45.7
Supporting attitude	22.8
Social pressure	6.3

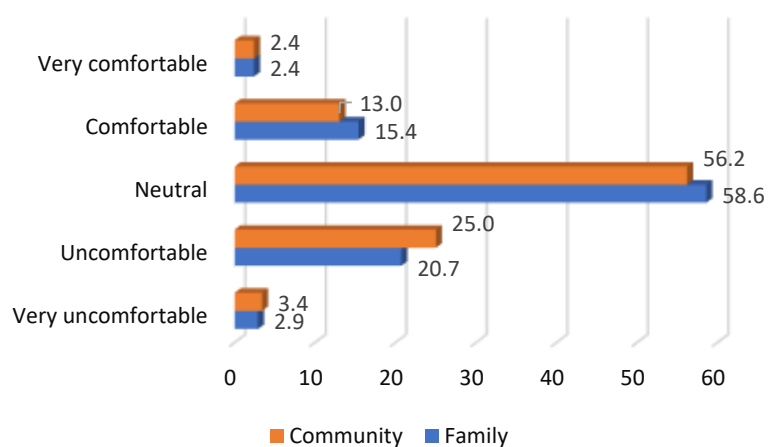
There is a positive trend regarding society's acceptance of LGBTIQ people that should be celebrated. While around one-fifth of parents (20.5%) favored not being accepted, 18.9% felt they should be partly accepted. Although 15.7% of parents preferred to remain neutral, more than two-fifths of them (44.9%) were in support of society's acceptance of LGBTIQ people, showing a growing wave of support and understanding (Figure 4.11).

Figure 4.11: Level of society's acceptance of LGBTIQ people (%)



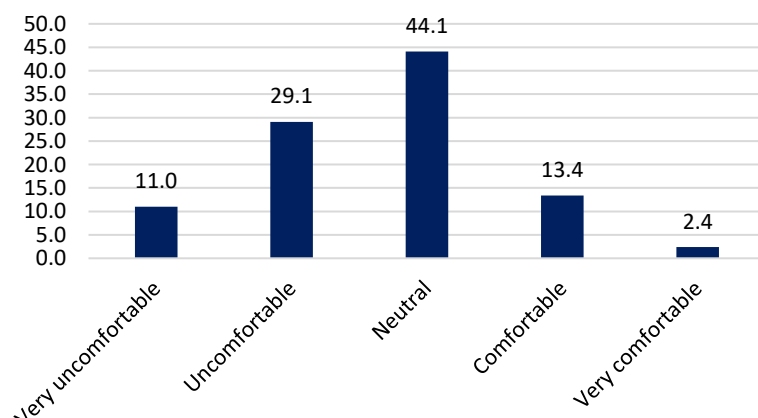
Based on their sexual orientation, around a quarter of the surveyed LGBTIQ people neither felt comfortable in their families nor their communities. Although more than half of the respondents preferred to remain neutral, less than one-fifth felt comfortable (family: 17.8%; community: 15.4%). This revelation calls for a deeper sense of empathy, as it is unfortunate to note that more than a quarter of surveyed LGBTIQ people were uncomfortable in their families and communities (family: 23.6%; community: 28.4%) (Figure 4.12).

Figure 4.12: Level of comfort of LGBTIQ people in their family and community (%)



It is ironic that in contrast to the comfortable parents (15.8%), a much higher percentage of surveyed parents were uncomfortable (40.1%) discussing LGBTIQ issues in their families. Also, 44.1% of parents preferred to remain neutral on this aspect. The survey underscores the importance of encouraging open discussions, as less than one-tenth of parents (15.8%) felt comfortable (Figure 4.13)

Figure 4.13: Level of comfort of parents in discussing LGBTIQ issues (%)



discussing LGBTIQ issues in families (only a meagre 2.4% of them felt very comfortable).

Sexual harassment faced by LGBTIQ children and access to services

Upon query to the surveyed LGBTIQ people, it is revealed that a significant majority of them (56.7%) agreed of having experienced sexual harassment at their educational institution or workplace. This high percentage underscores the gravity of the situation and the urgent need for action.

The LGBTIQ respondents who reported sexual harassment at their educational institution or workplace encountered a range of behaviors. Verbal harassment, the most prevalent form, was experienced by nearly all respondents (94.1%), followed by sexual jokes (20.3%). Unwanted touching was reported by more than one-tenth of the respondents (11.0%), while discussions about sexual life and sexual favors were less common, reported by only 2.5% and 0.8% of respondents, respectively (Table 4.4).

Table 4.4: Types of sexual harassment faced by LGBTIQ respondents

Types of sexual harassment	LGBTIQ respondents (%) (n = 118)
Verbal harassment	94.1
Sexual Jokes	20.3
Unwanted touching	11.0
Discussions about sexual life	2.5
Sexual favors	0.8

In the FGDs, most of the participants shared their experiences as victims of gender-based violence in family and society. Despite these challenges, they demonstrated remarkable resilience. In the community, they faced discrimination and felt that people looked down on them. They endured verbal abuse and stigma, and felt that their choice of dress was not appreciated. Within their families, they faced verbal abuse and physical violence, including being forcefully removed from the house, forced into marriage, and beaten due to dissatisfaction with their behaviors. The participants also believed that the harassment they experienced was due to their gender identity and lack of reproductive capacity.

The FGD participants' experiences of discrimination and stigma from communities, school teachers, and local authorities due to their gender identity are deeply unjust. They were not invited to join ceremonies in their communities, and many parents did not allow their children to play with them for fear that their children may develop an attitude like LGBTIQ people. They were called

Box 4.1: Experiencing sexual harassment

".... we have been experiencing sexual harassment quite often in terms of others wanted to kiss us without asking for, touched our private parts, called us for a walk, asked us for having a sex, and threatened by touching a knife to the body."

-FGD participants

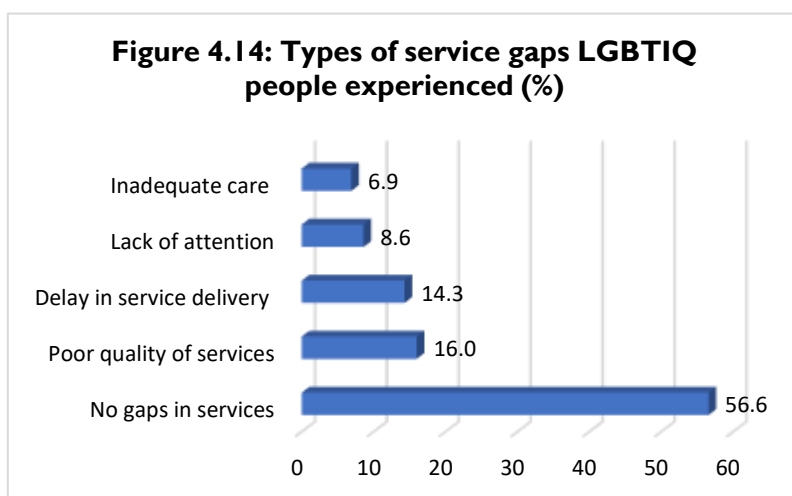
derogatory names and faced employment discrimination. In schools, they experienced harassment due to their gender identity and were told that there was no need to study for LGBTIQ people. Local authorities, except for one FGD group, did not address their issues, making it challenging

for them to request an official letter for any purpose due to their gender identity. These injustices faced by the FGD participants should evoke a sense of indignation in all who hear their stories.

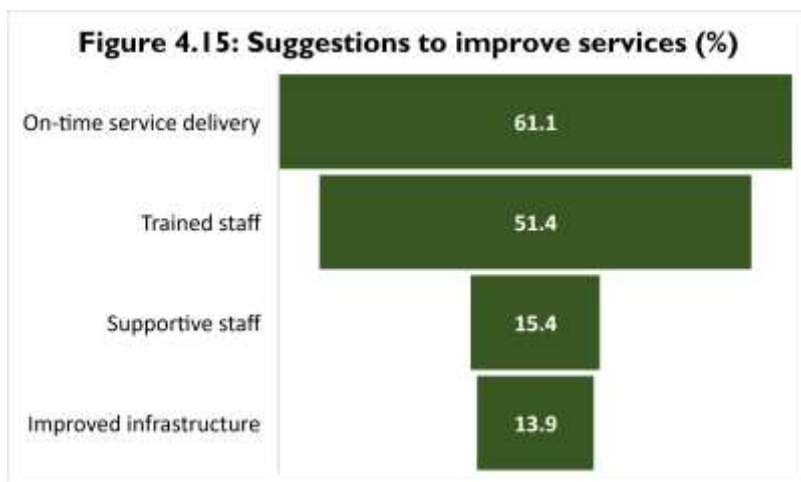
When it came to reporting any discrimination or bullying, they faced, the FGD participants admitted that they never approached local authorities, primarily due to a lack of awareness about the complaint process. They feared a lack of response from authorities due to their gender identity. Some felt their issues were too small to complain about, while others felt it was not appropriate to complain due to parental influence. These findings underscore the urgent need for action to address these barriers and promote the reporting of discrimination and bullying.

Regarding LGBTIQ respondents' access to essential services, such as health care, education, and social security, while most of them (84.1%) agreed, only 15.9% disagreed.

The LGBTIQ respondents who reported accessing basic services also identified the types of service gaps they experienced. While a majority (56.6%) felt no gaps in the services they availed of, the issue of poor quality of services was the most prominent, with 16.0% of them reporting this. This highlights the urgent need for improvement in service quality. Other service gaps included delay in service delivery (14.3%), lack of attention (8.6%), and inadequate care (6.9%) (Figure 4.14).



The suggestions provided by LGBTIQ respondents for improving basic services are of utmost importance. Their call for on-time service delivery (61.1%) and trained staff (51.4%) should be heeded. Other suggestions, such as supportive staff (15.4%) and improved infrastructure (13.9%), also carry significant weight and should be considered in the improvement process (Figure 4.15).



4.4. Challenges Faced by LGBTIQ People

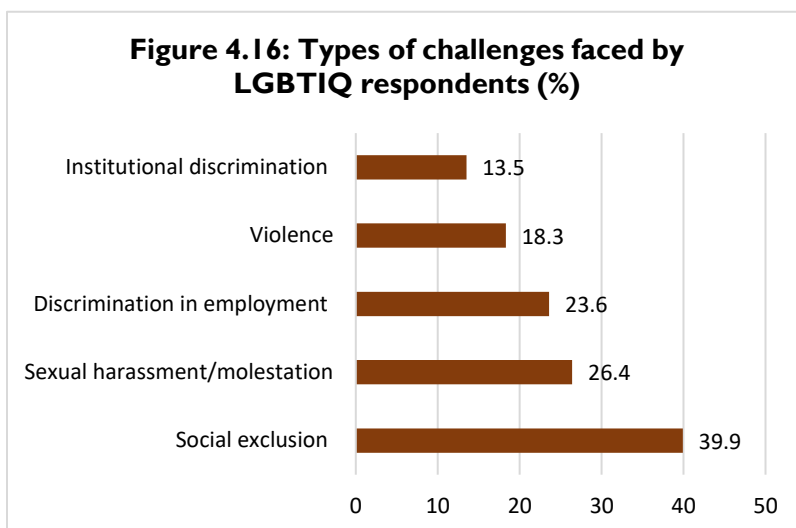
This section presents the levels and types of challenges faced by LGBTIQ children and youth, based on the primary data collected from the field survey. It includes the kinds of challenges faced by LGBTIQ students in school and the types of challenges faced by LGBTIQ people in securing a job in the government and private sector. In addition, suggestions for overcoming the challenges

faced by LGBTIQ people perceived by parents and LGBTIQ respondents are presented. The information gathered through FGDs and KI interviews supplements it.

Level and types of challenges faced by LGBTIQ

The study underscores the need to understand and address the challenges faced by LGBTIQ respondents in their families and society. Although a quarter of them (25.0%) chose to remain neutral, unfortunately, three out of ten individuals faced significant challenges. Equally, another three out of ten individuals admitted to facing some challenges, and only 13.9% reported facing very few challenges. This highlights the importance of empathy in addressing these issues.

The LGBTIQ respondents revealed a complex array of challenges they face in their families and society. These include social exclusion (39.9%), sexual harassment/molestation (26.4%), discrimination in employment (23.6%), violence (18.3%), and institutional discrimination (13.5%) (Figure 4.16). This variety underscores the multifaceted nature of the issue.

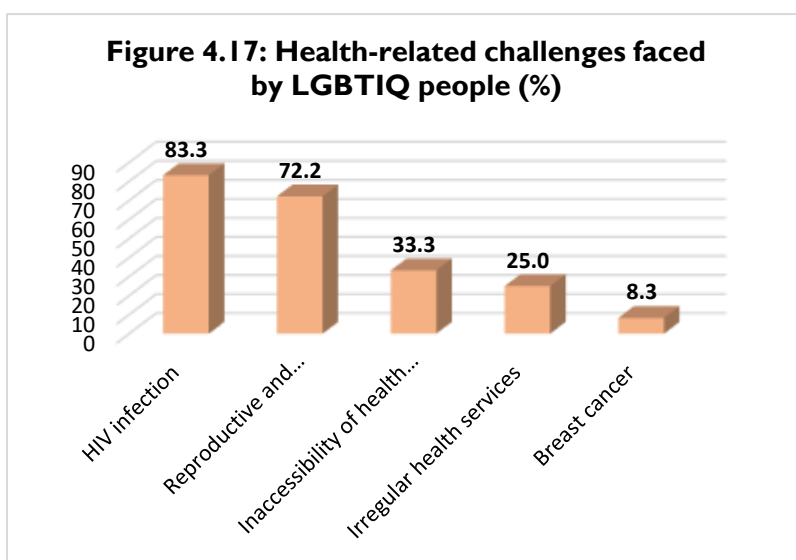


The local authorities, as key players in addressing the challenges faced by LGBTIQ people, also responded to these issues. More than two-thirds of them (69.1%) revealed employment discrimination, followed by 61.9% stated about institutional discrimination. Also, more than half of the local authorities (52.4%) viewed violence as one of the challenges LGBTIQs faced. The other challenges are sexual harassment/molestation (33.3%) and social exclusion (26.2%) (Table 4.5).

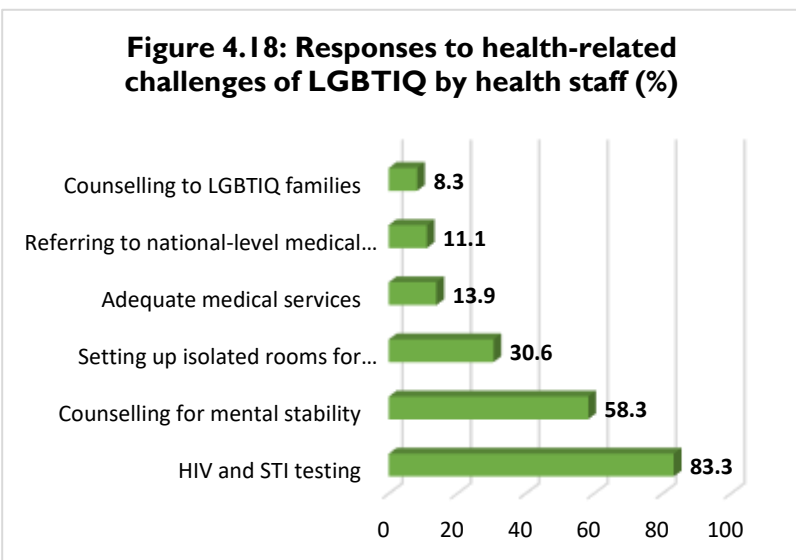
Table 4.5: Challenges faced by LGBTIQ people as viewed by local authorities

Types of challenges	Local authorities (%)
Employment discrimination	69.1
Institutional discrimination	61.9
Violence	52.4
Sexual harassment/molestation	33.3
Social exclusion	26.2

According to the health staff, LGBTIQ people face several health-related challenges that draw attention. The insights of the health staff are crucial in understanding these challenges. Among several challenges, the most significant one was HIV infection, as revealed by 83.3% of health staff, followed by 72.2% of them viewing reproductive and sexual health issues. The inaccessibility of health services and irregular health services were cited by one-third (33.3%) and 25.0% of health staff, respectively. In addition, 8.3% of health staff expressed breast cancer as another health-related challenge faced by LGBTIQ people (Figure 4.17).



To respond to the health-related challenges of LGBTIQ people, health staff in their areas conducted several activities, which include HIV and STI testing, as reported by 83.3% of them, followed by the provision of counselling for mental stability (58.3%). In addition, nearly one-third of health staff (30.6%) expressed setting up isolated rooms for LGBTIQ counselling, offering adequate medical services, and referring to national-level medical care, as cited by 13.9% and 11.1% of health staff, respectively (Figure 4.18).



In FGDs, participants shared their experiences, such as the unavailability of an isolated room for consultation, the lack of interest on the part of the health staff to listen to their problems, and verbal abuse by health staff as challenges when accessing health services as required. Similarly, participants also reported that local authorities did not pay attention to their problems due to their gender identity, and they did not receive an official letter of marriage. These challenges not only hindered their access to necessary healthcare and support services but also had a detrimental impact on their mental and emotional well-being.

Local authorities are working collaboratively to address the problems/challenges faced by LGBTIQ individuals in their areas. They have adopted several measures, such as counselling for mental stability, as reported by 83.3%. Additionally, 83.3% of local authorities reported acting against violence, with 73.8% combating discrimination and promoting inclusion. Many local authorities referred LGBTIQ people to health (59.5%) and educational services (19.1%). This

collaborative effort should make the audience feel involved in the collective response to the challenges faced by LGBTIQ individuals (Table 4.6).

Table 4.6: Responses to challenges of LGBTIQ by local authorities

Responses to challenges	Local authorities (%)
Counselling for mental stability	83.3
Action against violence	83.3
Action against discrimination	73.8
Promoting inclusion	73.8
Referring to health services	59.5
Referring to educational services	19.1

Regarding the challenges for LGBTIQ students in schooling, both parents and LGBTIQ respondents expressed their views. While 34.7% of parents and 26.4% of LGBTIQ respondents viewed having no challenges for LGBTIQ students in schooling, the remaining respondents admitted that there are challenges for LGBTIQ students in education. Among the challenges, stigma topped the list, accepted by 52.9% of LGBTIQ respondents and 34.7% of parents. The rejection of participation was felt by 17.8% of LGBTIQ respondents and 21.3% of parents. The other challenges for LGBTIQ students in schooling include depression and anxiety (LGBTIQ: 13.5%; parents: 33.1%), violence (LGBTIQ: 13.0%; parents: 12.6%), and bullying (LGBTIQ: 11.5%; parents: 20.5%) (Table 4.7).

Table 4.7: Types of challenges faced by LGBTIQ students in schooling

Types of challenges	LGBTIQ respondents (%)	Parents (%)
Stigma	52.9	34.7
Rejection in participation	17.8	21.3
Depression and anxiety	13.5	33.1
Violence	13.0	12.6
Bullying	11.5	20.5

Participants in the FGDs also expressed their challenges in continuing education, such as sexual abuse and harassment, discrimination, undervaluing their knowledge due to gender identity, and bullying. They felt that the lack of open dissemination of their rights and information in schools was a significant issue. This led to a lack of serious consideration of the situations of LGBTIQ individuals, thereby exacerbating these challenges.

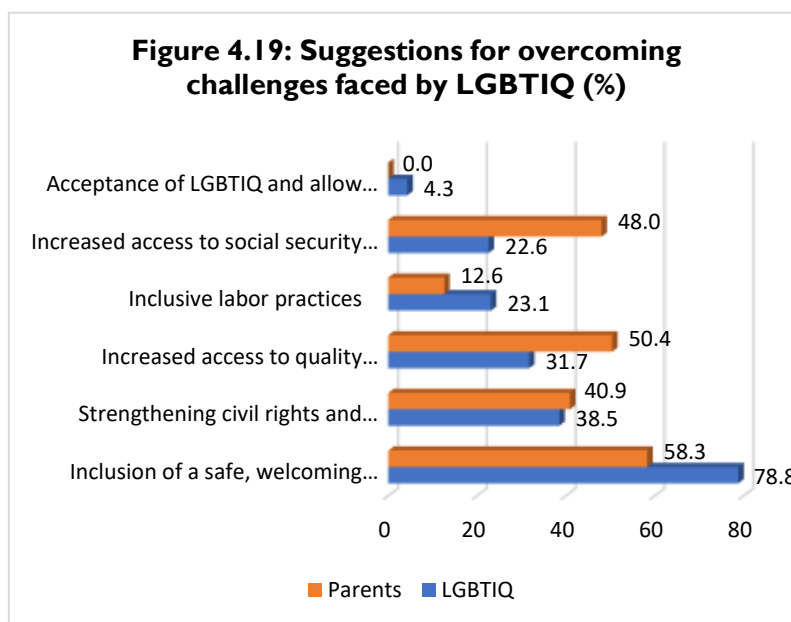
Regarding the challenges LGBTIQs face in getting a job in the government or private sector, both parents and LGBTIQ respondents perceived it differently. This difference in perception highlights the need for understanding and empathy. For instance, while 48.0% of parents perceived poor knowledge as one of the challenges in securing a job, it was agreed by only 5.8% of LGBTIQ respondents. Likewise, 26.0% of parents believed that lack of employment information, which was considered by 12.0% of LGBTIQ as one of the challenges in getting a job. The other challenges in securing a job include employment discrimination (LGBTIQ: 35.1%; parents: 9.5%), sexual discrimination (LGBTIQ: 22.1%; parents: 25.2%), and limited education and no skill training (LGBTIQ: 13.0%; parents: 17.3%) (Table 4.8). The remaining three out of ten respondents (LGBTIQ: 31.7%; parents: 33.1%) believed that LGBTIQ faced no challenge in getting a job.

Table 4.8: Types of challenges faced by LGBTIQ people in getting a job

Types of challenges	LGBTIQ respondents (%)	Parents (%)
Employment discrimination	35.1	9.5
Sexual discrimination	22.1	25.2
Limited education and no skill training	13.0	17.3
No employment information	12.0	26.0
Poor knowledge	5.8	48.0

Most FGD participants were students who needed to be fully aware of the challenges of securing a job. However, those who had applied for jobs and were not selected perceived their gender identity as a factor, highlighting a potential issue in job selection.

To overcome the challenges faced by LGBTIQ individuals, both parents and LGBTIQ respondents shared their insights. The creation of a safe and welcoming educational environment was the most favored suggestion, endorsed by 78.8% of LGBTIQ respondents and 58.3% of parents. Following this, more than two-fifths of the LGBTIQ respondents (40.9%) supported the strengthening of civil rights and law enforcement (parents: 38.5%). Other suggestions include increased access to quality healthcare services (LGBTIQ: 31.7%; parents: 50.4%), inclusive labor practices (LGBTIQ: 23.1%; parents: 12.6%), and increased access to social security benefits (LGBTIQ: 22.6%; parents: 48.0%). Finally, 4.3% of LGBTIQ respondents proposed the acceptance of LGBTIQ individuals by families and society and the legalization of their marriages (Figure 4.19).



Equally important, the local authorities and health staff have contributed their valuable insights on how to address the challenges faced by LGBTIQ individuals in their respective areas. Their suggestions, such as the paramount need for increased access to quality healthcare services (local authorities: 78.6%; health staff: 80.6%), underscore their crucial role in this issue. However, there were differing views on creating a safe and welcoming educational environment, with 78.6% of local authorities and 44.4% of health staff supporting it. More than two-thirds of local authorities (69.1%) saw the potential in increased access to social security benefits (health staff: 33.3%), and 52.4% of them believed in the power of inclusive labor practices (health staff: 5.6%) as solutions. Finally, 47.6% of local authorities advocated for strengthening civil rights and law enforcement to address the challenges faced by LGBTIQ individuals (Table 4.9).

Table 4.9: Suggestions of local authorities and health staff on overcoming challenges faced by LGBTIQ (%)

Ways to overcome challenges	Local authorities (%)	Health staff (%)
Increased access to quality healthcare services	78.6	80.6
Safe and welcoming educational environment	78.6	44.4
Increased access to social security benefits	69.1	33.3
Inclusive labor practices	52.4	5.6
Strengthening civil rights and law enforcement	47.6	30.6

Participants in FGDs shared their thoughtful ideas on improving the conditions of LGBTIQ people and enabling them to receive better services from the local authorities. They stressed the crucial need for laws and policies to safeguard the interests of LGBTIQ people, underlining the role of policymakers in ensuring legal protection. First and foremost, they highlighted the need to increase awareness of the rights and needs of the LGBTIQ people in the community. Creating adequate space for participation and particularly allowing LGBTIQ people to join at sub-national and national level meetings and discussions about their issues and needs would be a welcome move. The other suggestions include strengthening the LGBTIQ network for advocacy among all stakeholders to reduce discrimination and verbal abuse in communities, schools, and workplaces. There should be a commitment on the part of the service providers to serve the LGBTIQ community, and their rights must be protected.

5 CONCLUSIONS AND RECOMMENDATIONS

This research study covers the broad spectrum of LGBTIQ challenges and problems in daily life and social communication. This section presents the study's main findings, along with its conclusions and recommendations.

5.1. Conclusions

Rights of LGBTIQ People

Regarding the knowledge about the rights of LGBTIQ, 56.3% of the surveyed LGBTIQ respondents knew, whereas 43.7% did not know it.

More than half of the parents (52.8%) were unaware of LGBTIQ rights. Also, 33.3% of health staff and 26.2% of local authorities did not know the rights of LGBTIQ people.

Of the surveyed youth who knew the rights of LGBTIQ (n = 117), 69.2% expressed their knowledge about the rights to freedom of expression, followed by 59.0% on the rights to participate in social development. Thus, although more than half of the LGBTIQ knew their rights, all of them were only aware of some rights.

Among the surveyed parents who knew the rights of LGBTIQ (n = 60), 83.3% expressed their knowledge about the right to freedom of expression, followed by 46.7% on the right to equality before the law. Thus, not only did less than half of the parents understand the rights of LGBTIQ, but many of them did not know all LGBTIQ rights.

Among the local authorities (n = 31) and health staff (n = 24) who knew about the rights of LGBTIQ people, the right to freedom of expression was known to all local authorities (100.0%), compared to 87.5% of health staff.

Of the LGBTIQ surveyed people who did not know their rights (n = 91), 80.2% expressed their willingness to learn about their rights. Similarly, of the parents who did not know the rights of LGBTIQ (n = 67), 74.6% expressed their willingness to learn.

To find out the reasons for the surveyed LGBTIQ people's unwillingness to know about their rights, 50.0% felt that learning about their rights is not essential for them. Among the unwilling parents, more than half of them (52.9%) were busy with their work and, as such, were reluctant to know about the rights of LGBTIQ.

Status of LGBTIQ People in Family and Society

Regarding parental acceptance of LGBTIQ children, 45.7% of parents were in agreement, while 27.6% disagreed, and 26.8% were unsure.

Of the surveyed parents who supported the acceptance of LGBTIQ children, 51.7% of them considered personal belief followed by social and cultural norms (36.2%) and challenges LGBTIQ children face in society (25.9%) as the factors that led to their acceptance.

57.5% of parents perceive building awareness, followed by 47.2% considering legal protection for LGBTIQ rights, and 45.7% believe education can help them better understand LGBTIQ for their acceptance.

Regarding society's acceptance of LGBTIQ people, while 44.9% of parents were in support, 20.5% favored not being accepted, and 18.9% felt they should be partly accepted.

28.4% of the surveyed LGBTIQ people were uncomfortable in their communities, and 23.6% of them were painful in their families.

40.1% of parents felt uncomfortable discussing LGBTIQ issues in their families compared to 15.8% of comfortable parents.

56.7% of the surveyed LGBTIQ respondents agreed that they had experienced sexual harassment at their educational institution or workplace.

The LGBTIQ respondents who reported sexual harassment at their educational institution or workplace encountered a range of behaviors, such as 94.1% experienced verbal harassment followed by sexual jokes (20.3%) and unwanted touching (11.0%).

Regarding LGBTIQ respondents' access to essential services, such as health care, education, and social security, while 84.1% of them agreed, 15.9% disagreed.

Among the LGBTIQ respondents who reported accessing basic services, 16.0% of them experienced poor quality of services followed by delay in service delivery (14.3%), lack of attention (8.6%), and inadequate care (6.9%).

61.1% of the surveyed LGBTIQ respondents felt that on-time service delivery followed by trained staff (51.4%), supportive staff (15.4%), and improved infrastructure (13.9%) to improve essential services.

Challenges Faced by LGBTIQ People

Several challenges faced by LGBTIQ people include social exclusion (39.9%), sexual harassment/molestation (26.4%), discrimination in employment (23.6%), violence (18.3%), and institutional discrimination (13.5%).

Local authorities admitted that the challenges faced by LGBTIQ people include employment discrimination (69.1%), institutional discrimination (61.9%), violence (52.4%), sexual harassment/molestation (33.3%), and social exclusion (26.2%).

According to the health staff, LGBTIQ people face several health-related challenges that include HIV infection (83.3%), followed by reproductive and sexual health issues (72.2%). Other challenges include inaccessibility of health services (33.3%) and irregular health services (25.0%). Also, 8.3% of health staff expressed breast cancer as another health-related challenge faced by LGBTIQ people.

To respond to the health-related challenges of LGBTIQ people, health staff conducted several activities, which include HIV and STI testing (83.3%) followed by the provision of counselling for mental stability (58.3%), setting up isolated rooms for counselling (30.6%), offering adequate medical services (13.9%), and referring to national-level medical care (11.1%).

Local authorities reported addressing the problems/challenges faced by LGBTIQ people through several measures, including counselling for mental stability (83.3%), acting against violence (83.3%), combating discrimination (73.8%), promoting inclusion (73.8%), referring to health (59.5%), and educational services (19.1%).

Regarding the challenges for LGBTIQ students in schooling, 52.9% of LGBTIQ respondents and 34.7% of parents felt stigma, followed by the rejection of participation (17.8% of LGBTIQ; 21.3% of parents). The other challenges in schooling include depression and anxiety (LGBTIQ: 13.5%; parents: 33.1%), violence (LGBTIQ: 13.0%; parents: 12.6%), and bullying (LGBTIQ: 11.5%; parents: 20.5%).

The LGBTIQ respondents and parents perceived the challenges encountered by LGBTIQ people in getting a job as including poor knowledge (Parents: 48.0%; LGBTIQ: 5.8%), lack of employment information (Parents: 26.0%; LGBTIQ: 12.0%), employment discrimination (Parents: 9.5%; LGBTIQ: 35.1%), sexual discrimination (Parents: 25.2%; LGBTIQ: 22.1%), and limited education and no skill training (Parents: 17.3%; LGBTIQ: 13.0%).

The suggestions for overcoming challenges faced by LGBTIQ include the creation of a safe and welcoming educational environment (LGBTIQ: 78.8%; Parents: 58.3%) followed by strengthening of civil rights and law enforcement (LGBTIQ: 40.9%; Parents: 38.5%), increased access to quality healthcare services (LGBTIQ: 31.7%; Parents: 50.4%), inclusive labor practices (LGBTIQ: 23.1%; Parents: 12.6%), and increased access to social security benefits (LGBTIQ: 22.6%; parents: 48.0%), etc.

5.2. Recommendations

Based on the study findings, the following recommendations are given:

Increasing acceptance and community support:

Increasing acceptance and community support is a crucial step in overcoming the challenges posed by rigid norms and beliefs around sexual orientation and gender identity. A more inclusive understanding and representation of culture is urgently needed for a greater acceptance of LGBTIQ identities in families and society.

Building awareness and educating people about LGBTIQ rights:

Building awareness and educating people is a powerful tool for empowerment. Equipping LGBTIQ people, parents, local authorities, health staff, and the community with knowledge about LGBTIQ rights would help them to navigate society and instill confidence and capability. Civil society organizations (CSOs) and government have a definite role in this regard.

Removing barriers and promoting reporting of discrimination and bullying:

Addressing the obstacles and encouraging reporting of discrimination and bullying is a collective responsibility. The LGBTIQ community, along with the authorities, has a role to play in this process. For prompt reporting of discrimination and bullying to appropriate authorities by LGBTIQ people, creating awareness about the complaint process among LGBTIQ people is required. This could be achieved by sharing information with social media and conducting training workshops and public meetings. Civil society organizations (CSOs) and the government should positively contribute to creating awareness.

Increasing visibility and representation of LGBTIQ people:

For wider societal acceptance of LGBTIQ people, greater visibility and representation of them in public life is required. As such, adequate space needs to be created for LGBTIQ people in political, social, cultural, and business spheres through the willingness of the community and political leaders.

Increasing protection through non-discrimination laws, regulations, and policies:

To build more inclusive communities and societies, the government should enact non-discrimination laws and policies aimed at nondiscriminatory impact on LGBTI people. In addition to constitutional protection against discrimination based on sexual orientation, the authorities should enforce the laws to protect the rights of LGBTIQ students and workers. Educational institutions should develop rules and regulations to prohibit and prevent harassment and discrimination of LGBTI students. Likewise, discrimination based on sexual orientation and gender identity should be prohibited in businesses.

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ANNEXES

ANNEX I: SURVEY QUESTIONNAIRE FOR LGBTIQ PEOPLE



ការកម្ពុជាដើម្បីសុខភាព និងការអប់រំសហគមន៍
CAMBODIAN HEALTH AND EDUCATION FOR COMMUNITY

Questionnaire code			Date of interview:
Q. No.	Questions	Answers	
Y1	Name of the interviewer		
Y2	Name of the respondent		
Y3	Contact number (optional)		
	Village		
	Commune		
	District		
	Province		

Section I: Demographic Profile				
No.	Question	Code	Response	Note
1.	Age group	1	9 - 18 years	√ one
		2	19 years and above	
2.	Marital status	1	Single	√ one
		2	Living together but not married	
		3	Married	
		4	Separated	
3.	Education	1	No formal schooling	√ the highest one
		2	Incomplete primary	
		3	Primary level	
		4	Secondary level	
		5	High school level	

		6	University level	
		7	Technical education	
4.	Occupation	1	Student	√ one
		2	Farmer	
		3	Seller	
		4	Labor	
		5	Garment worker	
		6	Other (specify)	
Section II: Rights of LGBTIQ People				
5.	Do you know of the rights of LGBTIQ people?	1	Yes	√ one
		2	No	If no, skip to Q. 7.
6.	If yes, what rights do you know are LGBTIQ rights?	1	Rights to freedom of expression	√ one or more
		2	Rights to privacy and reputation	(Multiple choice)
		3	Rights to the protection of families	
		4	Rights equality before the law	
		5	Rights to receive information	Skip to Q. 9.
		6	Rights to participate in social development	
		7	Rights to receive all services	
		8	Other (specify)	
7.	If not, would you be interested in learning about the rights of LGBTIQ people?	1	Yes	√ one
		2	No	If yes, skip to Q. 9.
8.	Why are you not interested to know about the rights of LGBTIQ people?	1	It is not essential for me	√ one or more
		2	I am busy with my work	(Multiple choice)
		3	I do not have any problems in my life	
		4	My education and understanding are low	
		5	Other (specify)	
Section III: Status of LGBTIQ People in Society and Services Received				
9.	What is your level of comfort in your family based on your sexual orientation?	1	Very uncomfortable	√ one
		2	Uncomfortable	

		3	Neutral	
		4	Comfortable	
		5	Very comfortable	
10.	What is your level of comfort in your community based on your sexual orientation?	1	Very uncomfortable	√ one
		2	Uncomfortable	
		3	Neutral	
		4	Comfortable	
		5	Very comfortable	
11.	Did you ever experience sexual harassment at your educational institution or workplace?	1	Yes	√ one
		2	No	If no, skip to Q. 13.
12.	If yes, what kinds of sexual harassment do you face?	1	Sexual Jokes	√ one or more
		2	Verbal harassment	
		3	Unwanted touching	
		4	Sexual Favors	
		5	Discussion about sex life	
		6	Other (specify)	
13.	Do you have access to basic health, education, and social security services?	1	Yes	√ one
		2	No	If no, skip to Q. 15.
14.	If you have access to basic services, are there any service gaps?	1	No gaps in services	√ one or more
		2	Delay in service delivery	
		3	Poor quality of service	
		4	No proper care was given	
		5	No attention given	
		6	Other (specify)	
15.	What are your suggestions to improve the basic services?	1	Trained staff	√ one or more
		2	Supportive staff	
		3	Improved infrastructure	
		4	On-time delivery of services	
		5	Other (specify)	
Section IV: Challenges Faced by LGBTIQ People				
16.		1	Very much	√ one
		2	Much	

	What is the level of challenges you face in your family and society?	3	Neutral	
		4	Little	
		5	Very little	
17.	What are the challenges you face?	1	Social exclusion	√ one or more (Multiple choice)
		2	Institutional Discrimination	
		3	Employment discrimination	
		4	Sexual harassment/Molestation	
		5	Violence	
		6	Other (specify)	
18.	In your opinion, what are the challenges for LGBTIQ students in schooling?	1	No Challenges	√ one or more (Multiple choice)
		2	Rejection in participation	
		3	Bullying	
		4	Violence	
		5	Depression and Anxiety	
		6	Stigma	
		7	Other (specify)	
19.	According to you, what are the challenges for LGBTIQ people in getting a job in the government or private sector?	1	No challenge	√ one or more (Multiple choice)
		2	Sexual discrimination	
		3	No employment information	
		4	Limited education and no skill training	
		5	Employment discrimination	
		6	Poor knowledge	
		7	Other (specify)	
20.	What are your suggestions for overcoming the challenges faced by LGBTIQ people?	1	Increase access to quality healthcare services	√ one or more (Multiple choice)
		2	Increase access to social security benefits	
		3	Inclusive labor practices	
		4	Strengthening civil rights and enforcement of law	
		5	Inclusion of a safe, welcoming educational environment	
		6	Other (specify)	

Thank the respondent for participating in the interview.

ANNEX 2: SURVEY QUESTIONNAIRE FOR PARENTS

Questionnaire code				Date of interview:
Q. No.	Questions	Answers		
P1	Name of the interviewer			
P2	Name of the respondent			
P3	Contact number (optional)			
	Village			
	Commune			
	District			
	Province			

Section I: Demographic Profile				
No.	Question	Code	Response	Note
2.	Respondent's sex	1	Male	√ one
		2	Female	
3.	Age group	1	19 years to 29 years	√ one
		2	30 years to 39 years	
		3	40 years to 49 years	
		4	50 years and above	
3.	Marital status	1	Single	√ one
		2	Living together but not married	
		3	Married	
		4	Separated	
		5	Widow	
		6	Widower	
4.	Education	1	No formal schooling	√ the highest one
		2	Incomplete primary	
		3	Primary level	
		4	Secondary level	
		5	High school level	

		6	University level	
		7	Technical education	
5.	Occupation	1	No work	√ one
		2	Farmer	
		3	Seller	
		4	Labor	
		5	Garment worker	
		6	Construction worker	
		7	Other (specify)	
Section II: Status of LGBTIQ People in Family and Society				
6.	Do you believe that parents should accept LGBTIQ children?	1	Yes	√ one
		2	No	
		3	Not Sure	If no or not sure, please skip to Q. 8.
7.	Which factors do you think influence parents' acceptance of LGBTIQ children?	1	Personal belief	√ one or more
		2	Religious belief	
		3	Social & cultural norms	
		4	Fear of societal judgment	(Multiple choice)
		5	Challenges LGBTIQ children face in society	
		6	Other (specify)	
8.	Which approaches do you think can help parents become more accepting of LGBTIQ children?	1	Awareness	√ one or more
		2	Education	
		3	Supporting attitude	
		4	Social pressure	(Multiple choice)
		5	Legal protection for LGBTIQ rights	
		6	Other (specify)	
9.	In your opinion, what should be the level of society's acceptance of LGBTIQ people?	1	Not at all accepted 20.5	√ one
		2	Partly accepted 18.9	
		3	Neutral 15.7	
		4	Accepted 32.3	
		5	Very much accepted 12.6	
10.	What is the level of comfort of parents in discussing LGBTIQ issues in the family?	1	Very uncomfortable	√ one
		2	Uncomfortable	
		3	Neutral	
		4	Comfortable	
		5	Very comfortable	
11.	In your opinion, what are the challenges for LGBTIQ students in schooling?	1	No Challenges	√ one or more
		2	Rejection in participation	
		3	Bullying	
		4	Violence	
		5	Depression and Anxiety	(Multiple choice)

		6	Stigma	
		7	Other (specify)	
12.	What are the challenges for LGBTIQ people in getting a job in the government or private sector?	1	No challenge	√ one or more
		2	Sexual discrimination	
		3	No employment information	
		4	Limited education and no skill training	(Multiple choice)
		5	Poor knowledge	
		6	Other (specify)	
13.	What are your suggestions for overcoming the challenges faced by LGBTIQ people?	1	Increase access to quality healthcare services	√ one or more
		2	Increase access to social security benefits	
		3	Inclusive labor practices	(Multiple choice)
		4	Strengthening civil rights and enforcement of law	
		5	Inclusion of a safe, welcoming educational environment	
		6	Other (specify)	
Section III: Rights of LGBTIQ People				
14.	Do you know of the rights of LGBTIQ people?	1	Yes	√ one
		2	No	If no, skip to Q. 16.
15.	If yes, what rights do you know are LGBTIQ rights?	1	Rights to freedom of expression	√ one or more
		2	Rights to privacy and reputation	
		3	Rights to the protection of families	(Multiple choice)
		4	Rights equality before the law	
		5	Rights to receive information	End the interview.
		6	Rights to participate in social development	
		7	Rights to receive all services	
		8	Other (specify)	
16.	If not, would you be interested in learning about the rights of LGBTIQ people?	1	Yes	√ one
		2	No	If yes, end the interview.

17.	Why are you not interested to know about the rights of LGBTIQ people?	1	It is not essential for me	√ one or more (Multiple choice)
		2	I am busy with my work	
		3	I do not have any issues with LGBTIQ people	
		4	My education and understanding are low	
		5	Other (specify)	

Thank the respondent for participating in the interview.

ANNEX 3: KI QUESTIONNAIRE FOR LOCAL AUTHORITIES

Questionnaire code					Date of interview:
Q. No.	Questions	Answers			
L1	Name of the interviewer				
L2	Name of the respondent				
L3	Category	Local authorities/CCWC <input type="checkbox"/>		Health Staff <input type="checkbox"/>	
L4	Sex	Male <input type="checkbox"/>		Female <input type="checkbox"/>	
L5	Age	----- years old			
L6	Contact number (optional)				
	Village				
	Commune				
	District				
	Province				

Section I: Issues concerning LGBTIQ People				
1.	Do you know about LGBTIQ people in your target areas?	1	Yes	√ one
		2	No	
2.	Do you know the rights of LGBTIQ people?	1	Yes	√ one
		2	No	
3.	If yes, what rights do you know are LGBTIQ rights?	1	Rights to freedom of expression	√ one or more (Multiple choice)
		2	Rights to privacy and reputation	
		3	Rights to the protection of families	
		4	Rights equality before the law	
		5	Rights to receive information	
		6	Rights to participate in social development	
		7	Rights to receive all services	

		8	Other (specify)	
4.	What are the challenges faced by LGBTIQ people?	1	Social exclusion	√ one or more (Multiple choice)
		2	Institutional discrimination	
		3	Employment discrimination	
		4	Sexual harassment/Molestation	
		5	Violence	
		6	Other (specify)	
5.	How do you currently respond to the problems/challenges of LGBTIQ people in your areas?	1	Provide counseling for mental stability	√ one or more (Multiple choice)
		2	Refer to educational services	
		3	Refer to health services	
		4	Take action against violence	
		5	Take action against discrimination	
		6	Promoting inclusion	
		7	Other (specify)	
6.	What are your suggestions for overcoming the challenges faced by LGBTIQ people?	1	Increase access to quality healthcare services	√ one or more (Multiple choice)
		2	Increase access to social security benefits	
		3	Inclusive labor practices	
		4	Strengthening civil rights and enforcement of law	
		5	Inclusion of a safe, welcoming educational environment	
		6	Other (specify)	

Thank the respondent for participating in the interview.

ANNEX 4: KI QUESTIONNAIRE FOR HEALTH STAFF

Questionnaire code				Date of interview:
Q. No.	Questions	Answers		
H1	Name of the interviewer			
H2	Name of the respondent			
H3	Category	Local authorities/CCWC <input type="checkbox"/> Health Staff <input type="checkbox"/>		
H4	Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>		
H5	Age	----- years old		
H6	Contact number (optional)			
	Village			
	Commune			
	District			
	Province			

Section I: Issues concerning LGBTIQ People				
1.	Do you know about LGBTIQ people in your target areas?	1	Yes	√ one
		2	No	
2.	Do you know the rights of LGBTIQ people?	1	Yes	√ one
		2	No	
3.	If yes, what rights do you know are LGBTIQ rights?	1	Rights to freedom of expression	√ one or more (Multiple choice)
		2	Rights to privacy and reputation	
		3	Rights to the protection of families	
		4	Rights equality before the law	
		5	Rights to receive information	

		6	Rights to participate in social development	
		7	Rights to receive all services	
		8	Other (specify)	
4.	What are the health-related challenges faced by LGBTIQ people?	1	Inaccessibility of health services	√ one or more (Multiple choice)
		2	Irregular health services	
		3	HIV infection	
		4	Breast cancer	
		5	Reproductive and sexual health issues	
		6	Other (specify)	
5.	How do you currently respond to the health-related challenges of LGBTIQ people in your areas?	1	Provide counseling for mental stability	√ one or more (Multiple choice)
		2	Provide adequate medical services	
		3	HIV and STI testing	
		4	Refer to National Level Medical Care	
		5	Set up the isolated room for LGBTIQ counseling	
		6	Other (specify)	
6.	What are your suggestions for overcoming the challenges faced by LGBTIQ people?	1	Increase access to quality healthcare services	√ one or more (Multiple choice)
		2	Increase access to social security benefits	
		3	Inclusive labor practices	
		4	Strengthening civil rights and enforcement of law	
		5	Inclusion of a safe, welcoming educational environment	
		6	Other (specify)	

Thank the respondent for participating in the interview.

ANNEX 5: FGD QUESTIONS FOR LGBTIQ PEOPLE

ថ្ងៃខែ Date.....	ម៉ោងចាប់ផ្តើម Start.....	ម៉ោងបញ្ចប់ End.....
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ចំនួនអ្នកចូលរួម # of participants.....	អាយុ Ages 9 – 18 ឆ្នាំ/Years: _____ 19 and above: _____
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ស្រុក District.....	ឃុំ Commune.....	ភូមិ Village.....
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សំណួរទី ១.	តើអ្នកយល់ដឹងអ្វីខ្លះ ពីសុខផ្លូវភេទលំទូលាយ? សូមលើកព័ត៌មានដែលបានដឹង Q1. What do you understand by CSE?
សំណួរ ២.	តើអ្នកយល់ដឹងអ្វីខ្លះ ទាក់ទងនឹងសិទ្ធិរបស់សហគមន៍ស្រលាញ់ភេទដូចគ្នា? Q2. What do you understand about the rights of LGBTIQ people? Which rights of LGBTIQ people are you aware of?

សំណួរទី ៣ តើកន្លងមកអ្នកធ្លាប់ជាជនរងគ្រោះនៃអំពើហិង្សាដែរឬទេ? ហេតុអ្វី? Q3. Are you a victim of GBV? How?	
ក្នុងសហគមន៍ In Community	ក្នុងគ្រួសារ In Family

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សំណួរទី ៤ តើកន្លងមកអ្នកធ្លាប់ទទួលការរើសអើងមកដោយពីសំណាក់សហគមន៍ គ្រូបង្រៀន និងអាជ្ញាធរ អំពីនិន្នាការភេទរបស់អ្នកដែរឬទេ? តើគេរើសអើងមកដោយបែបណា?

Q4. Are you a victim of discrimination and stigma from communities, school teachers, and local authorities on your gender identity? How did they discriminate against you?

សហគមន៍ Communities	ក្នុងសាលា In school	អាជ្ញាធរ Local authorities

សំណួរទី ៥ តើកន្លងមកអ្នកធ្លាប់ទទួលរងនូវការបំពានលើរូបរាងកាយដែរឬទេដោយសារតែនិន្នាការភេទរបស់អ្នក?

Q5. Did you suffer sexual harassment because of your gender identity?

Q6. Did you ever report any discrimination or bullying you faced? If so, to whom did you report, and what was the outcome?