

# Anti-LGBT persecution in El Salvador, Guatemala, Honduras

*US barriers to asylum block path to safety.*

HRW (07.10.2020) – <https://bit.ly/33Urfc> – The governments of El Salvador, Guatemala, and Honduras have failed to effectively address violence and entrenched discrimination against lesbian, gay, bisexual, and transgender (LGBT) people, leading many to seek asylum in the United States, Human Rights Watch said in a report released today. Yet policies by the administration of US President Donald Trump have made it almost impossible for them to obtain asylum.

The 138-page report, “‘Every Day I Live in Fear’: Violence and Discrimination against LGBT People in El Salvador, Guatemala, and Honduras, and Obstacles to Asylum in the United States,” documents violence experienced by LGBT people in the three Northern Central American countries collectively known as the Northern Triangle, including at the hands of gangs, law enforcement officials, and their own families. Human Rights Watch found that Northern Triangle governments fail to adequately protect LGBT people against violence and discrimination, and that they face major obstacles if they attempt to seek asylum in the United States.

“LGBT people in the Northern Triangle face high levels of violence that their own governments appear unable or unwilling to address,” said Neela Ghoshal, senior LGBT rights researcher at Human Rights Watch. “For some LGBT people in the region, seeking asylum in the United States is the only hope of

safety, but the Trump administration has blocked them at every turn.”

Human Rights Watch interviewed 116 LGBT people from the three countries. Some described violence by family members, leading them to flee home as young as at age 8. Others described bullying and discrimination that drove them out of school. Many said family rejection and discrimination led to economic marginalization, particularly for trans women, and poverty was likely to increase the risk of violence.

LGBT people sometimes face violence and discrimination from the very law enforcement agents charged with keeping them safe. Carlos G., a gay refugee who traveled to the United States from Honduras in 2018, said that gang members there shot him, telling him: “Today you’re going to die, faggot.” He was afraid to report the incident to the police, who had previously harassed him for being gay and demanded sexual favors. Carlitos B., a non-binary person from Guatemala, fled after their brother assaulted and threatened to rape them. When Carlitos reported to the police, they laughed at Carlitos’s gender expression.

Pricila P., a trans woman from El Salvador, said police forced her off a bus and beat her. “One of the police officers grabbed my testicles and squeezed,” she said. “He said, ‘You’re realizing you’re a man because you feel pain.’ He said that I would become a man by force.” She fled to the United States in 2019, after gang members assaulted her, abducted her gay friend, and warned her that she would be next.

Both Honduras and El Salvador have passed hate crimes legislation in the last 10 years, but neither country has convicted anyone on hate crimes charges. In a landmark ruling in July 2020, a court in El Salvador convicted three police officers of murdering Camila Díaz, a trans woman who had been deported in 2018 after attempting to seek protection in the United States, but a judge dismissed hate crimes charges against them.

None of the three countries has comprehensive civil law protections against discrimination, Human Rights Watch said. While Honduras outlaws employment discrimination on the grounds of sexual orientation and gender identity, activists said they know of no cases in which the law had been enforced. In Guatemala, a pending Life and Family Protection Bill could be used to justify discriminatory denial of services on “freedom of conscience” grounds.

Given the persecution that many LGBT people face in the Northern Triangle, the US government should rigorously protect their ability to safely enter the United States and apply for asylum. Instead, the US government has increasingly closed doors to them with a series of policies that restrict access to asylum and that narrowly interpret the refugee definition in ways that exclude LGBT people from protections they previously enjoyed.

In March 2020, the US government entirely closed its land borders to asylum seekers based on the pretext of Covid-19, leaving them to suffer persecution in their home countries or be stranded in Mexico. In June, the US Departments of Justice and Homeland Security proposed a major regulatory change to the US asylum system that would severely restrict LGBT

people's ability to be granted asylum by barring asylum on the basis of "gender." In September, the Justice Department issued yet another regulation that puts asylum even further beyond their reach, tightening time limits on asylum applications and allowing immigration judges to introduce their own evidence into asylum cases, even if such evidence reflects biases such as anti-LGBT prejudice.

These policies followed other severe measures the Trump administration has taken to prevent asylum seekers from ever reaching the United States and to limit their access to asylum if they do, including family separation; prolonged detention; the "Remain in Mexico" program; an expedited asylum review process allowing for little or no contact with lawyers; an attempt to bar asylum seekers who transited through third countries before arriving at the US border; and a policy of transferring Salvadoran and Honduran asylum seekers to Guatemala, where they lack effective protection. Among the asylum seekers affected by all these measures are LGBT people, who may be particularly at risk of violence and discrimination in northern Mexico.

"The governments of El Salvador, Guatemala, and Honduras need to stem rampant anti-LGBT violence and ensure that laws and policies protect LGBT people from persecution, including by police," Ghoshal said. "As long as LGBT people continue to experience threats to their lives and safety based on their identity in their countries of origin, the US should welcome them with open arms, rather than slamming the door on them."

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# USA: Sikhs and Covid-19

*A solution for Sikh medical students, physicians caught between their religion and their profession.*

By Paul M. Sherer

Direct Relief (28.09.2020) – <https://bit.ly/3cKQdc2> – He was a third-year medical student, training to become an emergency medicine doctor. By May, more than two months into the Covid-19 pandemic, the situation had stabilized enough for the hospital to allow medical students to resume a vital part of their education: following attending physicians and residents during their morning rounds of patient visits, learning by observing.

But the student, who asked to be identified only as Mr. Singh, found himself facing a dilemma that cut to the core of his identity.

Before allowing students to resume their rounds, the hospital required them to pass a fit test for N95 respirators, the heavy-duty face masks that block most very small particles. Occupational Safety and Health Administration (OSHA) regulations state that N95 respirators can only be worn over a clean-shaven face to ensure a tight seal.

As a practicing member of the Sikh religion, Mr. Singh wears an unshorn beard, one of the five “articles of faith” of the

religion that “serve as an external uniform that unifies Sikhs and binds them to the beliefs of the religion.” Requiring a Sikh to shave is asking him to violate a central practice of his faith.

Mr. Singh approached his superiors to discuss his concern. “As per my faith I can’t shave,” he told them, asking if there were any other alternatives. He was sent to speak to a hospital administrator, who he expected would help him find a solution.

Instead, “she told me I needed to reevaluate my priorities, in terms of practicing medicine or practicing my faith,” Mr. Singh recounts.

The ultimatum threatened to knock Mr. Singh off his life’s path. “I need to finish these core rotations before I can go on to take licensing exams,” Mr. Singh said. “I was really worried I wouldn’t be able to rotate, and that would set off a cascade of consequences.”

This past spring, Sikh doctors and medical students across the U.S. and Canada found themselves in the same bind. In one widely publicized case in Montreal, a pair of physician brothers made the agonizing decision to shave their beards. “In this time of pandemic, I am faced with an existential crisis,” one of the brothers said in a widely viewed video. “This is a decision that has left me with great sadness, and I truly mourn the loss of something that has been a major part of my identity.”

“Sadly, that video worked against a lot of our clients,” said Amrith Kaur Aakre, legal director of the Sikh Coalition, a civil rights group that has been helping Sikh medical workers pressured to shave their beards. “A lot of the hospitals then started to think that shaving one of your religious articles of faith was a choice that you can get a dispensation for.”

Tightening the personal bind, many Sikh medical workers have described their feeling that continuing to treat patients amid the crisis was a way of honoring one of the three daily principles of Sikhi, “service to humanity.” They joined other medical professionals across the United States who showed great bravery and sacrifice, caring for gravely ill patients at a time when health workers faced severe shortages of personal protective equipment in the early months of the pandemic.

Mr. Singh sat down with his parents for a very difficult conversation. Should he compromise his religious beliefs, or give up his dream of becoming a doctor? “They’ve been here since the 1970s, and said that dealing with institutional discrimination isn’t new to them, but they never expected their kids would face something like this,” he said.

“We eventually agreed that ultimately if this was going to get in the way of rotating, I would have no choice about complying,” Mr. Singh said. “But I didn’t want to do that before using all the resources we had.”

Mr. Singh asked his medical school to back him up. The school reached out to the hospital but was rebuffed, and declined to

push the issue, reluctant to risk its relationship with the hospital.

Mr. Singh then approached the Sikh Coalition. The Coalition went to the hospital's parent organization (a large health network in the Northeastern United States), where it found officials who were more sensitive to the situation and were willing to seek a solution.

The hospital arranged for Mr. Singh to have access to a then-scarce powered air-purifying device (PAPR). Unlike tight fitting respirators like the N95, PAPRs cover the user's full face, head and shoulders under a hood with a clear visor. PAPRs don't require that the wearer be clean shaven.

Just as with N95 respirators, PAPRs became very difficult to obtain as the pandemic spread and the need far outstripped supply. Hospitals that tried to secure PAPRs faced months-long waits for delivery.

The Sikh Coalition, together with its partner the North American Sikh Medical and Dental Association, began working to obtain a supply of controlled air purifying respirators (CAPRs) – another type of loose-fitting respirator that does not require the wearer to be clean shaven – that could be loaned to Sikh medical workers.

Direct Relief Executive Vice President and Senior Advisor Bhupi Singh, who sits on the Sikh Coalition's strategic advisory board, heard about the effort.



***Direct Relief was able to secure 24 PAPRs for the Sikh Coalition, drawing from a donation of 6,000 PAPRs from 3M that Direct Relief was distributing to hospitals and health clinics across the United States.***

### ***Reasonable accommodation***

Beyond the challenge of building awareness and support among medical leaders, Sikhs and others who need some accommodation for their religious practices face a legal hurdle.

Under Title VII of the Civil Rights Act of 1964, as amended in 1972, employers must provide “reasonable” accommodations for their employees’ religious beliefs and practices, unless those accommodations would impose an “undue hardship” on them. However, in 1977’s *Trans World Airlines, Inc. v. Hardison*, the U.S. Supreme Court ruled that an “undue hardship” exists whenever an accommodation would require “more than a de minimis cost” to the employer.

The Sikh Coalition in July filed an amicus brief in a case currently pending before the Supreme Court that would overturn *Hardison*, arguing that “since *Hardison*, case after case has denied Muslim and Sikh workers’ requests for reasonable accommodations under the current de minimis rule—often because of a speculative harm or small financial cost.”

Moreover, the Sikh Coalition has found that many Sikh medical

professionals and students are reluctant to publicly voice their concern about the issue.

“A lot of doctors, residents and medical students who reached out to us are really concerned about retaliation and workplace hostility if they make a stink, or publicize the fact they had to go through this process and reach out to a civil rights organization in order to make the accommodations happen,” said the Sikh Coalition’s Aakre.

“We don’t want there to be this misrepresentation of how difficult or challenging it is to accommodate Sikhs,” she said, expressing concern that “all of a sudden medical schools will start pretextually not allowing Sikhs in.”

### ***Back to work***

Ironically, during the remainder of the spring Mr. Singh never needed to use the PAPR or even an N95 respirator. He was working in a ward that had no COVID-19 patients, and the staff wore surgical masks rather than N95s. Mr. Singh started his fourth year of medical school on Aug. 31.

“I don’t think it should have been this complicated for me to practice my faith and follow my career passion to help others—I’m going to continue to do both for the rest of my life,” Mr. Singh said. “But I’m thankful to those who helped me through this process, and I’m hopeful that my experience will show anyone else who is told ‘no, you can’t do this’ that there is a way forward for them, too.”

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# CHINA: Uyghur Forced Labor Prevention Act

*U.S. House of Representatives House passes legislation to crack down on business with companies using China's forced labor. HRWF welcomes the House of Representatives' passage of the Uyghur Forced Labor Prevention Act and calls upon the European Union to take a similar initiative.*

**House passes legislation to crack down on business with companies that utilize China's forced labor**

By Juliegrace Brufke

The Hill (22.09.2020) – <https://bit.ly/33Vzb6Z> – The House on Tuesday overwhelmingly passed legislation aimed at tamping down the exchange of goods made in forced labor camps by Uighur Muslims in China's Xinjiang region.

The Uyghur Forced Labor Prevention Act – introduced by Rep. Jim McGovern (D-Mass.) and passed in a 406-3 vote – would “prevent certain imports from Xinjiang and imposing sanctions on those responsible for human rights violations” from the region.”

Lawmakers on both sides of the aisle have stressed the need for the U.S. to take action to combat the human rights abuses

in China.

“It is time for Congress to act. Over the past several years we have watched in horror as the Chinese government first created and then expanded a system of mass internment camps,” McGovern said on the floor ahead of the vote.

“As many as 1.8 million Uighurs and members of other predominantly Muslim ethnic minority groups have been arbitrarily detained in the camps and subjected to forced labor, torture, political intimidation, and other severe human rights abuses.”

Rep. Michael McCaul (R-Texas) likened the abuses to what was seen in concentration camps in Nazi Germany.

“In July. U.S. Customs and Border Protection seized a 13-ton shipment of human hair. Madam Speaker, human hair that originated in the forced labor system,” he said on the floor.

“We haven’t heard about human hair since the nazis in the concentration camps of the war that my father fought in, World War II. It’s brazen and sickening. We must refuse to be complicit financially or otherwise. And the CCPs crimes against the Uighurs, the Muslim Uighurs, for that reason I support this bill before us today.”

The House is also slated to pass legislation that would require publicly traded companies in the United States that do

business within the region to disclose information on their supply chains and whether their products are made by forced labor.

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## **US: More migrant women say they did not consent to surgeries at Ice center**

*AP review finds no evidence of mass hysterectomies but files show growing allegations of operations women did not fully understand.*

By Nomaan Merchant

The Guardian (18.09.2020) – <https://bit.ly/3clezJ8> – Sitting across from her lawyer at an immigration detention center in rural Georgia, Mileidy Cardentey Fernandez unbuttoned her jail jumpsuit to show the scars on her abdomen. There were three small, circular marks.

The 39-year-old woman from Cuba was told only that she would undergo an operation to treat her ovarian cysts, but a month later, she's still not sure what procedure she got. After Cardentey repeatedly requested her medical records to find out, Irwin county detention center gave her more than 100 pages showing a diagnosis of cysts but nothing from the day of the surgery.

“The only thing they told me was: ‘You’re going to go to sleep and when you wake up, we will have finished,’” Cardentey said this week in a phone interview.

Cardentey kept her hospital bracelet. It has the date, 14 August, and part of the doctor’s name, Dr Mahendra Amin, a gynecologist linked this week to allegations of unwanted hysterectomies and other procedures done on detained immigrant women that jeopardize their ability to have children.

An Associated Press review of medical records for four women and interviews with lawyers revealed growing allegations that Amin performed surgeries and other procedures on detained immigrants that they never sought or didn’t fully understand.

Although some procedures could be justified based on problems documented in the records, the women’s lack of consent or knowledge raises severe legal and ethical issues, lawyers and medical experts said.

Amin has performed surgery or other gynecological treatment on at least eight women detained at Irwin county detention center since 2017, including one hysterectomy, said Andrew Free, an immigration and civil rights lawyer working with attorneys to investigate medical treatment at the detention center. Doctors on behalf of the attorneys are examining new records and more women are coming forward to report their treatment by Amin, Free said.

“The indication is there’s a systemic lack of truly informed and legally valid consent to perform procedures that could ultimately result – intentionally or unintentionally – in sterilization,” he said.

The AP’s review did not find evidence of mass hysterectomies as alleged in a widely shared complaint filed by a nurse at the detention center. Dawn Wooten alleged that many detained women were taken to an unnamed gynecologist whom she labeled the “uterus collector” because of how many hysterectomies he performed.

The complaint sparked a furious reaction from congressional Democrats and an investigation by the Department of Homeland Security’s inspector general. It also evoked comparisons to previous government-sanctioned efforts in the US to sterilize people to supposedly improve society – victims who were disproportionately poor, mentally disabled, American Indian, Black or other people of color. Thirty-three states had forced sterilization programs in the 20th century.

But a lawyer who helped file the complaint said she never spoke to any women who had hysterectomies. Priyanka Bhatt, staff attorney at the advocacy group Project South, told the Washington Post that she included the hysterectomy allegations because she wanted to trigger an investigation to determine if they were true. Wooten did not answer questions at a press conference Tuesday, and Project South did not respond to interview requests Thursday on behalf of Bhatt or Wooten.

Amin told the Intercept, which first reported Wooten’s

complaint, that he has only performed one or two hysterectomies in the past three years. His attorney, Scott Grubman, said in a statement: "We look forward to all of the facts coming out, and are confident that once they do, Dr Amin will be cleared of any wrongdoing."

Grubman did not respond to new questions Thursday.

Since 2018, US Immigration and Customs Enforcement says it found records of two referrals for hysterectomies at the jail, which is in Ocilla, Georgia, about 150 miles (240km) from Atlanta.

"Detainees are afforded informed consent, and a medical procedure like a hysterectomy would never be performed against a detainee's will," Dr Ada Rivera, medical director of the ICE Health Service Corps that oversees healthcare in detention, said in a statement.

LaSalle Corrections, which operates the jail, said it "strongly refutes these allegations and any implications of misconduct".

Women housed at Irwin County detention center who needed a gynecologist were typically taken to Amin, according to medical records provided to the AP by Free and lawyer Alexis Ruiz, who represents Cardentey. Interviews with detainees and their lawyers suggest some women came to fear the doctor.



Records reviewed by the AP show one woman was given a psychiatric evaluation the same day she refused to undergo a surgical procedure known as dilation and curettage. Commonly known as a D&C, it removes tissue from the uterus and can be used as a treatment for excessive bleeding. A note written on letterhead from Amin's office said the woman was concerned.

According to a written summary of her psychiatric evaluation, the woman said: "I am nervous about my upcoming procedure."

The summary says she denied needing mental health care and added: "I am worried because I saw someone else after they had surgery and what I saw scared me."

The AP also reviewed records for a woman who was given a hysterectomy. She reported irregular bleeding and was taken to see Amin for a D&C. A lab study of the tissue found signs of early cancer, called carcinoma. Amin's notes indicate the woman agreed 11 days later to the hysterectomy.

Free, who spoke to the woman, said she felt pressured by Amin and "didn't have the opportunity to say no" or speak to her family before the procedure.

Doctors told the AP that a hysterectomy could have been appropriate due to the carcinoma, though there may have been less intrusive options available.

Lawyers for both women asked that their names be withheld for

fear of retaliation by immigration authorities.

In another case, Pauline Binam, a 30-year-old woman who was brought to the US from Cameroon when she was two, saw Amin after experiencing an irregular menstrual cycle and was told to have a D&C, said her attorney, Van Huynh.

When she woke up from the surgery, Huynh said, she was told Amin had removed one of her two fallopian tubes, which connect the uterus to the ovaries and are necessary to conceive a child. Binam's medical records indicate that the doctor discovered the tube was swollen.

"She was shocked and sort of confronted him on that – that she hadn't given her consent for him to proceed with that," Huynh said. "The reply that he gave was they were in there anyway and found there was this problem."

While women can potentially still conceive with one intact tube and ovary, doctors who spoke to the AP said removal of the tube was likely unnecessary and should never have happened without Binam's consent.

The doctors also questioned how Amin discovered the swollen tube because performing a D&C would not normally involve exploring a woman's fallopian tubes.

Dr Julie Graves, a family medicine and public health physician in Florida, called the process "absolutely abhorrent".

“It’s established US law that you don’t operate on everything that you find,” she said. “If you’re in a teaching hospital and an attending physician does something like that, it’s a scandal and they are fired.”

Binam was on the verge of deportation Wednesday, but Ice delayed it after calls from members of Congress and a request for an emergency stay by her lawyer.

Grubman, Amin’s lawyer, said in a statement that the doctor “has dedicated his adult life to treating a high-risk, underserved population in rural Georgia”.

Amin completed medical school in India in 1978 and his residency in gynecology in New Jersey. He has practiced in rural Georgia for at least three decades, according to court filings. State corporate records also show Amin is the executive of a company that manages Irwin County Hospital.

In 2013, state and federal investigators sued Amin, the hospital authority of Irwin county and a group of other doctors over allegations they falsely billed Medicare and Medicaid.

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# USA: A century after women gained the right to vote, still a lot of work to do on gender equality

*About three-in-ten men say women's gains have come at the expense of men.*

By Juliana Menasce Horowitz & Ruth Igielnik

Pew Research Center (07.07.2020) – <https://pewrsr.ch/2ZNAumx> – A hundred years after the 19th Amendment was ratified, about half of Americans say granting women the right to vote has been the most important milestone in advancing the position of women in the country. Still, a majority of U.S. adults say the country hasn't gone far enough when it comes to giving women equal rights with men, even as a large share thinks there has been progress in the last decade, according to a new Pew Research Center survey.

Among those who think the country still has work to do in achieving gender equality, 77% point to sexual harassment as a major obstacle to women having equal rights with men. Fewer, but still majorities, point to women not having the same legal rights as men (67%), different societal expectations for men and women (66%) and not enough women in positions of power (64%) as major obstacles to gender equality. Women are more likely than men to see each of these as a major obstacle.

Many of those who say it is important for men and women to have equal rights point to aspects of the workplace when asked about what gender equality would look like. Fully 45% volunteer that a society where women have equal rights with men would include equal pay. An additional 19% say there would be no discrimination in hiring, promotion or educational opportunities. About one-in-ten say women would be more equally represented in business or political leadership.

In terms of the groups and institutions that have done the most to advance the rights of women in the U.S., 70% say the feminist movement has done at least a fair amount in this regard. The Democratic Party is viewed as having contributed more to the cause of women's rights than the Republican Party: 59% say the Democratic Party has done at least a fair amount to advance women's rights, while 37% say the same about the GOP. About three-in-ten (29%) say President Donald Trump has done at least a fair amount to advance women's rights, while 69% say Trump has not done much or has done nothing at all. These views vary considerably by party, with Republicans and Republican leaners at least five times as likely as Democrats and those who lean Democratic to say the GOP and Trump have done at least a fair amount and Democrats far more likely than Republicans to say the same about the Democratic Party.

Views of the role the feminist movement has played in advancing gender equality are positive overall, though fewer than half of women say the movement has been beneficial to them personally. About four-in-ten (41%) say feminism has helped them at least a little, while half say it has neither helped nor hurt them. Relatively few (7%) say feminism has hurt them personally. Democratic women, those with a bachelor's degree or more education and women younger than 50 are among the most likely to say they've benefitted personally

from feminism.

Views about how much progress the country has made on gender equality differ widely along partisan lines. About three-quarters of Democrats (76%) say the country hasn't gone far enough when it comes to giving women equal rights with men, while 19% say it's been about right and 4% say the country has gone too far. Among Republicans, a third say the country hasn't made enough progress, while 48% say it's been about right and 17% say the country has gone too far in giving women equal rights with men.

There is also a gender gap in these views, with 64% of women – compared with 49% of men – saying the country hasn't gone far enough in giving women equal rights with men. Democratic and Republican women are about ten percentage points more likely than their male counterparts to say this (82% of Democratic women vs. 70% of Democratic men and 38% of Republican women vs. 28% of Republican men).

The nationally representative survey of 3,143 U.S. adults was conducted online from March 18-April 1, 2020.1

[Click here for other key findings and the full report.](#)