The Situation of LGBT Children in Iran

Submission to the Committee on the Rights of the Child

The 71 Pre-sessional Working Group
(8 - 12 June 2015)
Introduction

1. This is a submission by the Iranian Lesbian and Transgender Network (6Rang) for the occasion of the third periodic review of the Islamic Republic of Iran by the UN Committee on the Rights of the Child. The submission focuses on human rights abuses suffered by lesbian, gay, bisexual and transgender (LGBT) adolescents in Iran, which require immediate attention.

2. The information contained in the submission is based on a comprehensive report that the Iranian Lesbian and Transgender Network and Justice For Iran jointly published in June 2014 to expose how LGBT individuals in Iran, including those under 18, are subjected to widespread discrimination and violence, including through harmful medical procedures aimed at changing their sexual orientation and gender identity. The report was based on more than 88 testimonies collected by the Iranian Lesbian and Transgender Network and Justice For Iran between February 2011 and November 2013.

I. General Principles

Non-Discrimination (Article 2)

3. LGB adolescents in Iran experience widespread discrimination in every area of their lives, based on their real or perceived sexual orientation and gender identity. This is caused first and foremost by provisions in Iran’s Penal Code that criminalize same-sex sexual conduct with penalties ranging from flogging to the death penalty (Articles 233-240). These penalties apply to those under the age of 18 as the age of criminal responsibility in Iran is nine lunar years for girls and 15 lunar years for boys (Article 147).

4. Discrimination against LGBT adolescents also stems from mandatory dress codes that are used by police, paramilitary basij forces, school administrators and other public officials to harass, abuse and detain individuals with “religiously inappropriate clothing or appearance”.

5. Article 638 of the Penal Code punishes teenage girls and women who fail to cover their head and wear loose fitting outfits in public spaces, with a cash fine or imprisonment. While discriminatory toward all girls and women, this provision has had a particularly severe impact on female adolescents (and adults) who do not conform to stereotypical models of femininity, and wish, for example, to cut their hair short, discard compulsory dress and headscarves, and wear items of clothing stereotypically associated with men.

6. The same article imposes flogging on those who engage in conduct that is “religiously forbidden” (haram) or otherwise “offends public morals”, which is understood to include “cross-dressing”. This has exposed male adolescents (and adults) who wear make-up and display expressions and behaviors stereotypically regarded as “feminine” to all forms of violence, including arbitrary arrest and detention and torture and other ill-treatment.

7. In recent years, discrimination against LGBT adolescents has also manifested itself in state policies and practices that require transgender individuals to undergo sex reassignment procedures, including sterilization, to enjoy the right to gender recognition.
and obtain identity documents matching their appearance, that would in turn allow them to enroll in school and access other social services necessary to their enjoyment of social and economic rights.

8. Of concern in the area of discrimination are also states policies and practice that allow, and indeed promote, harmful “reparative therapies” such as electroshock therapy, psychoactive medications and shaming techniques, that seek to “correct” children’s sexual orientation and gender identity.

- Abolish the death penalty for consensual same-sex sexual conducts, particularly when they are committed by individuals under 18.
- Prohibit the imposition and execution of all forms of torture and other cruel, inhuman or degrading treatment or punishment, such as flogging, for same-sex sexual conducts, particularly when they are committed by individuals under 18.
- Repeal all laws that impose mandatory veiling on girls and ensure that children are not criminalized or punished for modes of clothing deemed to be in violation of Islamic dress codes.
- Take effective measures, including enacting or rescinding legislation, to prevent and eliminate discrimination against children on the grounds of sexual orientation and gender identity.
- Ensure that lesbian, gay, bisexual and transgender children are not subjected to “reparative therapies” or otherwise ill-treated on account of their sexual orientation or gender identity.
- Remove the requirement that transgender individuals undergo sterilization and genital reassignment surgeries as a precondition for obtaining legal recognition of their gender.

Best Interest of the Child (Article 3)

9. In Iran, the best interests of LGBT are systematically disregarded in favour of maintaining a highly gendered society wherein many public spaces are segregated by gender and individuals’ sex/gender determines what rights they hold, what clothes they can wear, which schools they can enroll in, where they sit on a bus or train, which sport centers they can access, and even which entrance door they can use to access government buildings. State policies and practices in the areas of family, education, labor, employment and politics are all based on gender stereotypes and seek to perpetuate stereotypical notions of masculinity and femininity.

10. School children face a real risk of being suspended or expelled when they do not comply with mandatory gendered dress codes or have gender expressions that defy social expectations of femininity or masculinity. Transgender children are required to undergo sterilization and other surgical procedures to access identification documents reflecting their preferred gender presentation. Parents are encouraged to discipline their children
and present them to medical professionals for treatment, when they exhibit gender atypical expressions. These practices constitute a violation of children’s right to self-determination.

- Review all legislation and administrative measures to ensure that the principle of the best interests of the child is reflected therein and implemented in all actions concerning children.
- Ensure that the best interests of LGBT children are not disregarded for the sake of maintaining a strict female-male binary.
- Allow transgender adolescents to determine their gender identity and obtain matching identification documents, without the requirement to undergo gender reassignment surgeries.

**Right to Life (Article 6)**

11. Iran’s Penal Code imposes the death penalty on certain types of same-sex sexual activity. According to Article 234 of the Penal Code, the receptive or “passive” partner in “sodomy” (livat) is sentenced to death while the insertive or “active” partner is sentenced to death if he has access to a wife for sexual intercourse, and to one hundred lashes if he does not. “Sodomy” (livat) is defined as “penetration of a man’s sex organ, up to or beyond the point of circumcision, into the anus of another man” (Article 233). If penetration does not take place, the lesser punishment of one hundred lashes for tafkhiz may apply, which is defined as “placing a man’s sex organ between the thighs or the buttocks of another man” (Article 235). A fourth time conviction of tafkhiz will result in a death sentence.

12. Sexual acts between two women constitute mosaheqeh when “a woman places her sex organ on another woman’s sex organ” and are punishable with one hundred lashes (Articles 238-239). As with tafkhiz, a fourth time conviction will result in a death sentence.

13. The punishments described above are applicable to those under the age of 18 as the age of criminal responsibility in Iran is nine lunar years for girls and 15 lunar years for boys (Article 147). Since May 2013 when a new Penal Code was passed, a limited exception to the death penalty may apply if the juvenile offender is deemed to have not understood the nature of the crime or its consequences, or if there are doubts about his or her mental capacity (Article 91).

14. As various UN Special Rapporteurs have noted, criminalization has legitimized community violence and police brutality against LGBT individuals, both adolescent and adult, and made them “more vulnerable to violence and human rights abuses, including death threats and violations of the right to life, which are often committed in a climate of impunity.”

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1 Interim report of the Special Rapporteur of the Commission on Human Rights on extrajudicial, summary or arbitrary executions, A/57/138, 2 July 2002, para. 37. See also Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, A/HRC/14/20, 27 April 2010, para. 20.
• Abolish the death penalty for consensual same-sex sexual conduct, particularly when they are committed by individuals under 18.

• Exercise due diligence to protect LGBT children from having their right to life violated by state or non-state actors.

II. Civil Rights and Freedoms

Right to Preserve Identity (Article 8)

15. The Iranian authorities do not recognize diverse sexual orientations and gender identities and confront children who experience same-sex desires and transgender expressions with three equally devastating options: seek harmful “reparative therapies” intended to cure “homosexuality”, apply for gender reassignment surgeries to restore “gender normalcy”, or keep their identities discreet amid ongoing threats of discrimination and violence. None of these respect the right of the child to preserve his or her identity.

16. In Iran, individuals who do not conform to stereotypical models of femininity and masculinity are divided into two distinct yet inter-related categories: “transsexual-patients” and “homosexual-perverts”. The first label is applied to those who seek gender “normalcy” through gender reassignment surgeries while the second to those who transgress socially constructed gender expectations without seeking treatment or professing themselves to be a “transsexual”.

17. This dichotomous approach has placed LGBT individuals in Iran in an unenviable situation where they have to “choose” some human rights at the expense of others. Enjoying all human rights is not an option available to them. They must either seek to “cure” themselves of same-sex desires and transgender expressions in order to obtain equal recognition before the law or live a marginalized life marked by homophobic hate crimes, police abuse, torture, family and community violence and widespread discrimination in access to education, employment, and other goods and services.

18. Transgender individuals who were interviewed by the Iranian Lesbian and Transgender Network reported experiencing extreme stress and anxiety during their adolescence and how simple tasks such as buying clothes, registering for school, spending time with friends, and presenting identification documents were often fraught with family tensions and risks of coming into conflict with the law.

• Refrain from assigning a diagnosis of mental disorder to children with homosexual feelings and transgender expressions and reclassify aspects relevant to the provision of health care in a non-stigmatizing health category.
• Take effective measures, including enacting or rescinding legislation, to ensure that LGBT adolescents are not discriminated against, in law or practice, on account of their sexual orientation or gender identity and that they enjoy their human rights on an equal footing with others.

• Abolish requirements to undergo psychiatric assessment and receive a diagnosis of “transsexuality” for obtaining legal gender recognition.

Right to Information and Protection From Material Harmful to Well-Being (Articles 13 and 17)

19. LGBT adolescents in Iran are deprived of access to accurate information on sexual orientation and gender diversity. The Iranian government censors positive discussions of issues related to sexual orientation and gender identity, and actively disseminates materials that reinforce demeaning stereotypes and forms of prejudice which contribute to the social exclusion, discrimination and denial of human dignity historically experienced by LGBT people.

20. Iran’s Cyber Crime Act sets out a penalty of 91 days to one year’s imprisonment and a cash fine between 5 million and 20 million rials (about $750) for anyone who uses online and digital communications – including social media, blogs, and websites – to incite the public to “participate in crimes against chastity … or acts of sexual perversion.” The Cyber Crime Act tasks a “Committee Charged with Determining Offensive Content” with identifying and blocking sites that carry prohibited content, and with communicating the standards to be used for identification of unauthorized websites to the Telecommunications Company of Iran, the Ministry of Information and Communication Technology and major Internet Service Providers. To date, this Committee has provided a list of 78 topics of forbidden content, including “stimulation, encouragement, persuasion, threats or invitation to immoral acts, prostitution, crimes against chastity or sexual perversion” as well as redistribution and re-publication of any content that “violates public decency.”

21. Similar restrictions are applied to the print media in order to suppress and censor discussion of issues related to homosexuality. The Press Law imposes a prohibition upon “promotion of prostitution and vice, and publication of photos, images and articles found to be against public decency.” Circular Number 660 of the Supreme Council for Cultural Revolution bans publications from crossing boundaries that may result in “anti-family propaganda”, “the weakening of family values” and “the promotion of deviant and immoral individuals and movements.”

22. Laws and policies censoring discussions of homosexuality have impaired and denied public access to credible medical information. This has contributed to the stigmatization of LGBT individuals, including children, and perpetuated false and negative stereotypes concerning sexuality and gender identity. It has also set the stage for medical abuse, in the form of attempts to ‘cure’ those who engage in same-sex activity or exhibit transgender expressions. The mental and physical harm caused by these attempts will be explained in greater detail below.
23. The majority of lesbian, gay and transgender persons interviewed by the Iranian Lesbian and Transgender Network recounted that their health-care providers did not provide them and their parents with accurate information about various crosscutting issues relating to sexual orientation and gender diversity. Some of the issues about which they were kept unaware were as follows:

- Homosexuality had been removed from the second edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-II) in 1973 because it had been recognized that “homosexuality per se implies no impairment in judgment, stability, reliability, or general social or vocational capabilities”.

- The World Professional Association for Transgender Health (WPATH) has affirmed that gender variance is not in and of itself pathological and that having a cross- or transgender identity does not constitute a psychiatric disorder; and

- International standards of care for the health of transgender, transsexual and gender-nonconforming people have recognized that not all transgender people necessarily need or want “the complete therapeutic triad [of] … real-life experience in the desired role, hormones of the desired gender, and surgery to change the genitalia and other sex characteristics.”

24. They were also given materials and types of advice that pathologized homosexual orientation and gender variance; assigned a diagnosis of disordered gender identity based on social non-conformity to gender stereotypes, including same-sex attraction; gave a false or deceptive impression about the clinical or scientific basis of psychiatric efforts intended to change people’s sexual orientation or gender identity; or misrepresented the efficacy and the potential for harm of sex reassignment surgeries when counseling individuals distressed by their sexual orientation and gender variance.

- Refrain from censoring, withholding or intentionally misrepresenting health information, including with regard to sexual orientation and gender identity.

- Repeal laws that ban positive or neutral discussions about homosexuality, ensuring freedom of expression and access to information about sexual orientation and gender identity related issues.

- Ensure that no one is imprisoned, tortured or otherwise ill-treated for exercising the right to freedoms of expression, assembly and association.

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2 Response of the World Professional Association for Transgender Health to the Proposed DSM 5 Criteria for Gender Incongruence (by DeCuypere, G. Knudson G. & Bockting, W. airs of the WPATH consensus building process on recommendations for revision of the DSM diagnoses of Gender Identity Disorders), May 2010, at: http://www.wpath.org/uploaded_files/140/files/WPATH%20Reaction%20to%20the%20proposed%20DSM%205%20Final.pdf, accessed 15 January 2015.

• Ensure technically competent health care professionals can provide adolescents with quality sexual health education and information, including with respect to sexual and gender diversity.

III. Violence Against Children

Protection from Violence (Article 19)

Family violence

25. LGBT children report being subjected to various forms of physical or mental violence in their families. These include beatings and flogging as well as forms of psychological abuse such as enforced seclusion and isolation from friends and society, neglect and abandonment, verbal insults and death threats. For lesbians and female-to-male transgender persons, these abuses are often accompanied by threats or realities of being coerced into arranged marriages. LGBT individuals in Iran often have no recourse to justice or support for the abuse and violence they routinely suffer in their families. This impunity emboldens abusive family members to commit more homophobic and transphobic abuses (see Annex 1).

26. Iran’s Penal Code allows parents and legal guardians to subject children to corporal punishment in so far as “they ensure that it does not exceed disciplinary norms” (Article 158 (T)). Under Iran’s Penal Code, fathers or grandfathers who kill their child or grandchild are exempt from the punishments ordinarily applicable to murder (Article 301) and may be only given a sentence of between three to ten years in prison (Article 612). The Iranian Lesbian and Transgender Network is concerned that the lack of appropriate and proportionate penalties may exacerbate the risk of violence and threats to the lives of LGBT children.

School Violence

27. School children perceived as being lesbian, gay, bisexual or transgender tend to psychological and physical bullying in Iran. School authorities are believed to rarely take any effective action against such bullying, which is known to lead to depression and other physical and mental health problems, obstruct children’s personal and social development, and increase their risks of becoming violent themselves (see Annex 2).

28. LGBT individuals interviewed by the Iranian Lesbian and Transgender Network also reported experiencing physical and mental violence at the hands of teachers and school administrators themselves. For some of them, the violence reached a level of severity that they felt they had to drop out of school (see Annex 3).

Community Violence

29. As various Special procedures mandate holders have recognized, the criminalization of private consensual homosexual acts increases stigmatization and make people with diverse sexual orientations and gender identities, including minors, more vulnerable to community violence. Research carried out by the Iranian Lesbian and Transgender Network shows that LGBT adolescents tend to experience homophobic taunts, insults and
threats on a constant basis and this is in fact so common that many of them decide to isolate themselves in order to avoid being harassed or assaulted by members of the public.

30. During its research, the Iranian Lesbian and Transgender Network interviewed several individuals who said they were sexually assaulted and raped when they were below the age of 18 because of their sexual orientation or gender identity. In all these cases, the victims said they not only did not feel protected by the law but also feared that they will be arrested and charged with sexual offences, if they were to file complaints with the police (see Annex 4).

- Take effective legislative and other measures to prohibit and prevent all forms of physical and mental violence against LGBT children, including corporal punishment and sexual abuse, in the family, in schools, and in other institutions, and ensure that all those who abuse children are punished without discrimination on the grounds of sexual orientation or gender identity.

- Provide comprehensive, gender-sensitive training for judicial and law enforcement officials, parents and other care-givers, including teachers and healthcare workers, about homophobia, transphobia, and sexual and gender diversity.

- Initiate public education campaigns to raise awareness about homophobic and transphobic violence.

- Establish a system whereby disaggregated data are collected on all forms of violence against LGBT children, and use such data to assess progress and design policies and programmes to eliminate violence against LGBT children.

Protection from Torture and other Ill-Treatment (Articles 37 and 39)

“Reparative Therapies”

31. In 2001, the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment raised concern about reports that indicated members of LGBT minorities were being “subjected to forced treatment on grounds of their sexual orientation or gender identity, including electroshock therapy and other “aversion therapies”, reportedly causing psychological and physical harm.”

32. In 2013, the Special Rapporteur on torture reiterated his concerns about “homophobic ill-treatment on the part of health-care professionals” and called on states to repeal any law allowing intrusive and irreversible treatments, including forced genital-normalizing

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4 Report of the Special Rapporteur on the question of torture and other cruel, inhuman or degrading treatment or punishment, A/56/156 (3 July 2001), para. 24.
5 Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, A/HRC/22/53 (11 February 2013), para. 76.
surgery, involuntary sterilization, “reparative therapies” or “conversion therapies”, when enforced or administered without the free and informed consent of the person concerned.

33. In is research, the Iranian Lesbian and Transgender Network has documented the experiences of several LGBT adolescents who were given electroshocks or prescribed hormones or strong psychoactive medications such as thioridazine, citalopram, fluoxetine, risperidone, and bipyridine, in order to control or modify their sexual arousal patterns. These treatments generally took place in a context of social stigma and parental rejection, lack of access to resources that would aid self-awareness and self-acceptance, and inadequate disclosure of the risks and benefits associated with reparative therapies.

34. The LGBT individuals interviewed generally said that these reparative therapies made them sink further into depression, and adversely affected their concentration and academic ability (see Annex 5)

35. The Iranian authorities are complicit or otherwise responsible for these improssible treatments, which can amount to torture or other ill-treatment, as they not only fail to exercise due diligence to prevent and punish such harmful procedures but also encourage them through their various policies and practices. In an interview with Channel 2 of the Islamic Republic of Iran Broadcasting in March 2013, head of Iran’s Human Rights Commission Mohamamd Javad Ardeshir Larijani said:

_Homosexuality is an illness, a very bad illness… Homosexuals are sick people who must be treated. They have to be put under psychiatric care and sometime even biological and physical care. We need to adopt a clinical and medical approach toward this issue. The West intends to introduce [homosexuality] as a normal social behavior and we are completely against this notion._

- Take all the necessary measures to ensure that persons under 18 are not subjected to torture and other cruel, inhuman or degrading treatment or punishment, in health-care settings.

- Outlaw all forms of “reparative therapies”, including medications and electroshocks, designed to change children’s sexual orientation and gender identity.

- Conduct prompt, impartial and thorough investigations into allegations of torture and other ill-treatment in health-care settings, and ensure that the perpetrators are brought to justice in fair trials.

IV. Basic Health and Welfare

Right to Health (Article 24)

6 Mohamamd Javad Ardeshir Larijani, Channel 2 of the Islamic Republic of Iran Broadcasting, available at: [https://www.youtube.com/watch?v=8Wh0sniDCX0](https://www.youtube.com/watch?v=8Wh0sniDCX0), accessed 18 June 2014.
36. In Iran, there is no specific focus on the needs of LGBT adolescents in youth care, sexual health care, medical care and psychological health care. Many LGBT adolescents suffer social isolation, distorted self-image and emotional anguish as a result of being stigmatized and criminalized for their expressions of gender variance and same-sex attraction. This leads some of them to self-present to health care professionals in order to discuss the uncertainty and emotional distress that they experience regarding their gender identification and sexual orientation. However, health care professionals do not often know how to address issues with regard to sexual orientation and gender identity. This lack of knowledge reinforces homophobia and transphobia, leading to distress and poor mental health in LGBT individuals.

37. Many Iranian mental health professionals believe that homosexuality is a form of mental illness, and gender variance is in and of itself a pathological condition. Accordingly, instead of supporting their clients in identity exploration and development without pursuing predetermined outcomes, they prescribe treatments that mainly revolve around converting homosexual orientation and aligning sex, gender and sexuality. Broadly speaking, these treatments for changing sexual arousal patterns and modifying gender expressions fall into one of the two following models:

38. The first model advocates a range of psychoanalytical and behavioral treatments that are focused on creating a qualitative mental change involving aversion to homosexuality, and disattachment to trans-dressing and other gender variant tendencies. In practice, these treatments tend to be accompanied by a reinforcement plan in which shaming techniques, nausea-inducing and psychoactive medications, and electroshocks are used. Mental health professionals in Iran who follow this model insist on the efficacy and benefit of such sexual orientation and gender identity change efforts even though these practices have been internationally denounced as unscientific, harmful and a violation of human rights.7

39. The second model concedes that treatments aimed at converting one’s experienced sexual orientation and gender identity are generally without success, and advocates instead that the body of transgender people be altered and brought into conformity with their psyche through hormone therapy and sex reassignment surgeries. Mental health professionals who follow this model are generally inclined to assign a diagnosis of Gender Identity Disorder to lesbian, gay and transgender persons, and to take social gender non-conformity, homosexual orientation, and consequences of social prejudice and stigma (such as depression, isolation, confusion and distorted self-image) as symptomatic of this disorder. This has rendered lesbian, gay and transgender persons susceptible to being misdiagnosed as having a “Gender Identity Disorder”, and rushed into irreversible hormone therapy and sex reassignment surgeries without having a meaningful opportunity to explore their same-sex desires and gender expressions, and access accurate health information on issues related to sexual orientation and gender identity (see Annex 6).

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7 An example of this approach is found in a scholarly project published in the LMOI quarterly reports, in which three psychiatrists explain a reparative method based on long-term psychiatric medication which they allegedly successfully tested on four individuals who presented physical or behavioral characteristics associated with the gender other than the one assigned at birth and expressed desire for the same sex: Dr. Alireza Zahiroddin et al, “ravan daman-i movaffaghiat amiz-i chihar mored-i ikhtelal-i hoviat-i jensi [Effective Psychotherapeutic Treatment of Four Cases of Gender Identity Disorder]” (Spring 2005) 37 Majaley-i Elmi-i Pezeshky-i Qaruni Scientific 37 [The Scientific Journal of the Legal Medicine Organization], online: http://www.sid.ir/fa/VEWSSID/I_pdf/60613843707.pdf (Retrieved on 4 May 2014).
• Ensure that adolescents can receive quality mental health care for issues relating to sexual orientation and gender identity.

• Ensure that medical professionals do not diagnose gender non-conforming adolescents with a gender identity disorder based on stereotypical notions of masculinity and femininity.

• Adopt medical policies, practices and protocols that are respectful of the right to free and informed consent, autonomy, self-determination and human dignity, without any distinction on the basis of sexual orientation or gender identity.

V. Education, Leisure and Cultural Activities

Right to Education (Article 28)

40. Homophobic discrimination is extremely common in schools in Iran. Boys deemed by others to be too effeminate or young girls seen as tomboys endure teasing and harassment because of their appearance and behavior, which is perceived as failing to fit in with a heteronormative gender identity. School authorities also discriminate against young people because of their sexual orientation or gender expression, sometimes leading to their being refused admission or being expelled (see Annexes 2 and 3).

41. Because of gender segregation in the Iranian school system, transgender adolescents whose appearance contradicts their identification documents are particularly at risk of violation or denial of their right to education. They may be excluded from schools that correspond with their biological sex because of their transgender status but they will not be allowed to register in schools that correspond with their preferred gender until they undergo gender reassignment surgeries and obtain new identification documents reflecting their gender (see Annex 6).

Right to Recreational Activities (Article 31)

42. LGBT adolescents, as with all other adolescents, have a need for being in touch with peers and engage in recreational activities, because that prevents isolation and can empower and support them. However, many LGBT adolescents report that they avoid recreational spaces because they are a hostile environment for them or their school teachers and authorities exclude them from such spaces because they hold homophobic or transphobic attitudes toward them (see Annex 7).

• Take all necessary legislative, administrative and other measures to ensure equal access to primary and secondary education and recreational activities without discrimination on the grounds of sexual orientation or gender identity.

• Exercise due to diligence to prohibit, prevent and punish homophobic or transphobic violence and bullying in school environments.
• Ensure that school officials who harass or abuse children because of their actual or perceived sexual orientation or gender identity are punished with proportionate penalties.

• Ensure that students are not marginalized or segregated because of their actual or perceived sexual orientation or gender identity and their best interests are identified and respected in a participatory manner.

• Introduce into education curricula modules about diversity and about the human rights of all, including lesbian, gay, bisexual and transgender people.
Annex 1 – Testimonies on Family Violence

Soheil, a female-to-male transgender, told the Iranian Lesbian and Transgender Network that his father repeatedly beat him throughout his childhood, which left him with no choice but to leave the family house at the age of 20:

My father was an extremely aggressive and ill-tempered man. He routinely beat me up with a belt. On several occasions, he got a knife and threatened to kill me. I was ultimately forced to leave the house. It was my family who actually told me to leave because they said they never wanted to see me again.8

Rayan, who described herself as a “butch” lesbian, shared with the Iranian Lesbian and Transgender Network a similar experience of abuse and harassment from his brother:

My brother would tell me that I was filthy and nothing but a piece of garbage. He would say I deserved to be beaten up because I had to be turned into a [normal] human. These insults damaged me so much emotionally that I did not even feel the physical pain anymore. I felt sorry for myself because I was being tortured for no reason. I did not understand why our brother-sister relationship could not be nicer. I felt sorry for my brother even more than I did for myself.9

Akan is another female-to-male transgender who experienced family violence because of his sexual orientation and gender identity:

My father would tie my hands and legs, throw me into the bathroom, and whip me with his belt, because I did not dress like a girl. I do not understand how he could justify beating me just for not being able to fall in love with boys. He beat me all the time and I could not do anything to stop that. I ultimately attempted suicide by slitting my wrists. When my father found me, he did not take me to the hospital because he did not want others to find out. He was trained in medicine and he stitched up my hand himself. Despite this, he continued to beat me and even threatened to kill me.

Towards the end of my stay in Iran, he told me that I would not be allowed to enroll in university unless I agreed to getting married. My parents were going to marry me off to an acquaintance. My father always said that I had been brainwashed into thinking that I was not a girl and that I should stop harboring these thoughts… I told him that I would set myself on fire if I was forced to marry but he did not listen and continued to go ahead with the marriage arrangement. This was when I decided to leave Iran.10

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8 Interview with Soheil, July 2012.
9 Interview with Rayan, August 2012.
10 Interview with Akan February 2011.
Annex 2 – Testimonies on School Bullying

Ali, a 29 year-old gay man, recounted how his school classmates used to humiliate and harass him because they considered his behaviors and hand gestures to be “girly”:

The memories of those years are still fresh in my mind. My classmates always harassed and abused me. The abuses were not as serious as a beating but they slapped me on the face and followed me around to tease and taunt me. They would call me ‘Miss Ali’ or other names. At high school, they called me do-jense [bi-sexed] because they said my hand gestures were like those of a girl… These insults, taunts and threats ultimately forced me to quit school in the last year of high school. The school authorities used to repeatedly call me parents to school. There was a rumor going around that there is a boy in the school who is do-jense, or from their perspective, hamjensbaz [foggot]. This was despite the fact that I was super careful about how I acted. I tried to control my mannerisms but there was always something for them to find and make fun of."11

Pedram, a 24 year-old gay man, said his classmates raped him when he was 14 years old:

When I was in grade eight, I expressed my feelings to a classmate, which ended up being a huge mistake. At the end of the school day, he and his friends stopped me in the street to rape me. I had thought he had the same feelings for me that I had for him but that was not true. The entire school had come to find out about me and everyone began jeering at me. My schoolmates threatened that if I did not agree to have sex with them, they would tell everyone in my neighborhood about me. I ended up giving in to their demands to the extent that I had become suicidal. They would rape me once every couple of weeks, sometimes in groups of five or six. I was so disturbed that, every now and then, I would climb our rooftop to contemplate suicide. I was not feeling well… I would escape school and hide in a movie theatre until my money ran out and I had to call my mom. My mother could not figure out what was going wrong and she would beg me to tell her what the problem was. She would often visit the school, and my teachers would tell her that I was not doing well in my studies. I had come to hate school. Ultimately, I found the courage to tell my mother about the situation and she changed my school."12

11 Interview with Ali February 2011.
12 Interview with Pedram January 2013.
Annex 3 – Testimonies on Violence by School Officials

Farzam, a 22 year-old female-to-male transgender, described to the Iranian Lesbian and Transgender Network the day in Year 9, when his school principal beat him and asked him to quit the school:

The school authorities had called the police to the school on three separate occasions because I would refuse to wear the school uniforms that girls must wear in Iran. In grade ten, I had to change three high schools, because my classmates would tell their parents about how I looked and the parents would immediately assume that I was a boy in disguise who meant to get close to their girls…The last time I went to school, my friends told me that the day before, the school had called the police on me again. As I was being told about this news in the school hallway, the principle suddenly appeared and took me to her office.

There was a den inside her office where the student files were kept. She pushed me inside there and began beating me while removing my clothes forcibly to find out how my body looked like. She said she wanted to know if I had a male or female body even though all my school records from grade one indicated that I was a girl. I was resisting this, crying and holding on tightly to my clothing so she could not remove them… She slapped me in the face and finally managed to open the buttons of my dress. I could only cry in response. When she saw that I had strapped my breasts, she let go of me.

I was traumatized, and cannot recall what she exactly told me at that point time. I only remember her saying that I had to leave the school. Even though she saw my female body, I think she still suspected that I was an intersex. She asked for a doctor’s note testifying that I was a girl. I did not go back to that school after this incident.13

Sayeh, a 25 year-old lesbian woman, shared an experience of mental violence in her school:

Our high school vice principle used to give me a really hard time. She would look at me in a peculiar way, and never held any respect for me. She even would talk all my friends out of befriending me. For example, she told them to not be friends with me or asked them what we did together. Once she deducted marks from a friend of mine who had persisted with our friendship in spite of the vice president’s advice to end our friendship. She would also call my friends’ mothers, and ask them to prohibit their daughters from befriending me.

Once I was spending time with one of my friends in the school’s prayer hall… I remember being scared when she came up to us, because she always harassed me. She asked: “what are you two doing in here?” I said, “Nothing, we’re just conversing.” She asked,

13 Interview with Farzam, September 2013.
“only conversing?” and I responded, “yes.” This is precisely what happened then: she started roaming the room and sniffing the air. The room was crowded with chairs and was very difficult to walk in. She then asked my friend to leave the room. I wanted to leave too, but she asked me to stay and said: “don’t you dare think that I don’t know about what the f* you’re up to here! I am just waiting to catch you! And then I’ll screw you over!”

I was only sixteen or seventeen years old at the time. I told her that I had no idea what she was talking about. She then said, “We will see” and called me filthy names. Those were very difficult moments for me; she precisely wanted to know if we are physically intimate.14

14 Interview with Sayeh September 2013.
Annex 4 – Testimonies on Community Violence

Faraz, a female-to-male transgender, told the Iranian Lesbian and Transgender Network the following about his experiences of harassment and violence when he was under 18 years of age:

I got harassed in the street all the time. At the time, I wore men’s clothing when I went out and had started taking hormones. My voice had not yet changed though and so I was ridiculed and insulted because of its high-pitched tone. This made me not want to talk. Whenever I opened my mouth to say something, strangers and friends laughed at me and said that my voice is like that of girls.

Ali who identifies as gay said he was raped when he was 15 years old:

I have been raped on two occasions: The first incident was in 2004. My friend from high school Mohammad asked me to go with him to his house and help him fix his computer’s speakers. At his house, I turned on his computer and realized that the speakers worked fine. As I came to tell him this, I saw a muscular boy entering the room. This boy held me up by my collar and said, “Move! Lie down on the floor”. I asked what this was all about. As someone who had never experienced rape before, the idea of rape never even crossed my mind. I was shaking like a leaf, begging him to let me go but he wouldn’t budge. He slapped me in face a couple of times and forcefully removed my clothes… They then both raped me and called me swear words.

After some time, they allowed me to wear my clothes and leave the place. Despite feeling devastated, I did not know where to go or who to ask for help. I was afraid to go to the police. I feared that they may say I had asked to be raped myself and that instead of charging the offenders, they would accuse me of a crime. I had heard of such cases happening before.

When I arrived home that day, I cried for hours in my room and stayed home for a few days. I became severely depressed and began feeling weak and nauseous… I felt like I had no rights, absolutely no rights, and that I was treated like an animal.
Annex 5 – Testimonies on Reparative Therapies

Mehrad, a seventeen-year-old female-to-male transsexual, said he was given psychoactive medications when he was fifteen years old in order to eliminate “his homosexual tendencies”:

*My stepmother recommended that we pay a visit to a psychiatrist. In the city of Shahroud there was a young psychiatrist renowned for his work. I visited him and talked to him about my characteristics and behaviors. He said: “You are not transsexual. Rather, you have homosexual tendencies.” I expressed my doubts but he insisted on his opinion and right there he prescribed a combination of drugs that he said would fix me.*

Kia is another female-to-male transsexual who was prescribed large doses of psychoactive medication because of his homosexual desires. He shared with the Iranian Lesbian and Transgender Network the repercussions of such unjustified medication:

*I was a happy, healthy 17 year old who did sports and did not suffer from any severe depression. I just had a [Gender Identity] disorder. The pills that I was given are normally prescribed to people with severe mental conditions who must be hospitalized. I was given such pills just because I had expressed a sense of dissatisfaction with my gender situation.

The pills turned out to be a heavy substance for a teenage body that had never consumed any narcotics or alcohol. They numbed my entire body… to the point that I had become incontinent. I burst into tears when I found myself to be wet in the morning. I felt like I had been raped. The notion of rape should not be understood only in relation to sexual relations; I really felt as if this doctor had raped and violated me. This experience made me lose trust in all doctors.*

Polina is a 23 year-old lesbian woman who was given medication and electroshocks when she was 14 years old. Her parents took her to a psychiatrist in Tehran for her anger, anxiety, depression and suicidal thoughts, which they believed were caused by her sexual orientation.

In her interview with the Iranian Lesbian and Transgender Network, Polina said that her distress was linked, in her view, to isolation, stigma, shame, and her deteriorated relationships with her mother, who apparently controlled her movements, prevented her from developing friendships with other girls, and subjected her to hostile remarks. Her psychiatrist at the time did not, however, address any of these environmental factors, and made the treatment entirely focused on changing Polina’s sexual orientation:

*My doctor did not usually talk to me in our sessions with each other. He would often only listen and take notes of what I said and then hand me a prescription. When he said anything, his main talking point was*
that “ok you want to be friends with a girl, go ahead and do that but it is not necessary that you tell this to your mom. He asked me why I continue with this behavior and why I insist on talking to my girlfriend on the phone when my mom is at home. But I did this because I wanted the tension to be resolved and that my parents accept who I am.

In that period, I cried day and night. I did not study and could not do much. I had grown so tired of the tensions and conflicts at home that I accepted to take all the drugs that my doctor had prescribed me. The drugs caused weight gain and made my whole body to swell. I slept all night and most of the day and did not understand life anymore.

Polina said that after she shared her negative emotions of self-hatred and suicidality with her psychiatrist, he expressed disappointment that she still has feelings for women and proceeded to recommend hospitalization as well as 12 sessions of electrohock therapy:

My doctor said that it looks like that I do not want to stop these kinds of [homosexual] actions and become ‘corrected’. He said he had thought my feelings for women will end after one time of being with a girl but they have clearly not. After saying this, he asked me to leave the room and called in my parents. After sometime, he called me back to his office and said “Polina, I have prescribed you ECT”. This was exactly his sentence. I did not know what ECT was. He said that his opinion is that I should be hospitalized for 20 days and remain under his care because I am at risk of committing suicide. In order for this to happen, he said he needs my father’s consent. Convinced that I am schizophrenic, my father gave his permission for ECTs but disagreed with my hospitalization as he had the experience of his brother getting worse after hospitalization.

Polina subsequently received six courses of electroshock therapy, which she said resulted in extreme confusion and memory loss for about six months. She added that in the years following the treatment, her speech became slurred and her eyebrows kept shaking abnormally during argument situations.
Annex 6 – Testimonies on Discrimination in Access to Education

Farzam, a female-to-male transgender, was denied permission to enroll in high school because he did not have identification documents reflecting his gender identity:

I went to the ministry of education and begged them to register me at a school. I was a good student, and after three months of begging and crying, I finally managed to see the minister of education – as there was no one higher up than him. I was subsequently referred to a school in Tehran.

There, they told me that because I wore men’s clothes, they could not allow me to sit in a classroom with girls. I proposed that I study at home, and come back at a specified date to write my test at the school’s office. They accepted my suggestion and proceeded to register me. The two women in the registration team asked me some very rude questions. This was enraging this but I had to answer their questions because my enrollment at the school depended on it. They asked me, for example, “what I have got down there and what does it look like?”

I studied for five or six months. On the scheduled date, I arrived at the school early, eager and ready to take my examination. I was walking around by myself around the schoolyard when the janitor asked me to visit the principle’s office. When I entered the office, the principle put my file on her table and informed me that I could not write the test anymore. I burst into tears and lost my speech. She did not explain the reason for her decision but I already figured from the way she had laid my file on the table that it was pointless to try to change her mind. I took my file and wandered aimlessly through the streets while crying. All those efforts, all those back and forth trips to the ministry had come to nothing.
Annex 7 - Testimonies on Discrimination in Access to Recreational Activities

Akan, a 21 year-old female-to-male transgender, said his school officials routinely separated him from his peers and excluded him from school activities because of his transgender identity:

I was subjected to a lot of abuse in the school. The school authorities prevented me from participating in school activities with other students. They said I am a sexual pervert and have a corrupting effect on my classmates. I was not allowed to form friendships with others.

I was a soccer player and I used to play in the premier league, but I was not allowed to take part in the school competitions. I was told that it was because I would corrupt the other students. I felt like a I am a prisoner. The school authorities always kept an eye on all my actions and friendship.

Sayeh, a lesbian woman, shared a similar experience of exclusion:

“Our high school vice principle used to give me a really hard time. She would look at me in a peculiar way, and never held any respect for me. She even would talk all my friends out of befriending me. For example, she told them to not be friends with me or asked them what we did together. Once she deducted marks from a friend of mine who had persisted with our friendship in spite of the vice president’s advice to end our friendship. She would also call my friends’ mothers, and ask them to prohibit their daughters from playing or spending time with me.