



Medicalization of Sexual Orientation and Gender Identity

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Under Iran's Islamic Penal Code, consensual same-sex sexual relations between adults carry flogging and the death penalty while transgender expressions including cross-dressing may attract a punishment of 74 lashes and a fine. Transexuality is, however, recognized as a Gender Identity Disorder (GID) curable through sex reassignment surgeries, which were made legal in Iran after a 1986 fatwa by the previous Supreme Leader, Ayatollah Khomeini. As a result of this legal framework, LGBT individuals who do not conform to culturally approved models of femininity and masculinity have to choose between risking harassment, persecution, and arbitrary arrest and detention by police and paramilitary *basij* forces because of their actual or perceived homosexual orientation on the one hand, and seeking a diagnosis of GID with a view to undergo sex reassignment procedures on the other. Medical professionals frequently lead LGBT individuals to choose the latter course, which accounts for Iran's reputation as a leader in the number of gender reassignment surgery. While Iranian officials have never published the statistics, many scholars suggest that after Thailand Iran has the highest number of sex reassignment surgeries in the world. Thailand welcomes many medical tourists while Iran targets its own citizens. At a recent public event in the University of Tehran, an Iranian surgeon announced she performs an average of 30-40 surgeries a month! This is just one doctor in a single city!

Lacking access to information about sexual orientation and gender identity and fearing laws criminalizing any positive speech about homosexuality, medical professionals frequently assign a diagnosis of GID to LGBT individuals merely on account of their same-sex desires and gender non-conformity. According to the first paragraph the Ethics code for psychiatrists and counsellors which they are obliged to follow, therapists must "continue to observe ethical standards and religious values of the Islamic Republic of Iran in counselling and therapy services." Consequently, they are unable to inform their clients about the fact that non-heterosexual desires are normal and acceptable.

Setting aside exceptional cases, the medical professions coax LGBT individuals to either receive reparative therapies (including electroshock therapy and psychoactive medications) aimed at "curing" them of homosexuality or undergo sterilization and genital reassignment surgeries (GRS) aimed at turning them into "normally gendered" men or women. These abusive practices are taking place at the instigation of or with the consent or acquiescence of Iranian officials. One important development since the last UPR is the increasing number of instances where Iranian officials, organs and state media include incendiary and dehumanizing language to alienate LGBT individuals. References that endorse hatred and promote a culture of violence against individuals based on their real or perceived homosexual orientation are appearing in more statements by officials and infuse state-affiliated media outlets. For example, In March 2013, Mohamad Javad Larjani, the head of Iran's Human Rights Commission, for example called homosexuality "a serious illness" for which "people must be put under psychiatric care and sometime even biological and physical care."

In a joint research project with Iranian Lesbian and Transgender Network, JFI has documented the accounts of dozens of LGBT individuals who have been prescribed reparative treatments without being given accurate and complete information whether about the risks, benefits, efficacy and scientific validity of such procedures or



about issues relating to sexuality and gender diversity. Iranian health care system also engages in the administration of sex reassignment surgeries that drastically fall short of international clinical standards and result in long-lasting health complications including chronic chest pain, kidney malfunction, severe back pain, unsightly scarring, loss of sexual sensation, debilitating infections, recto-vaginal and recto-urethral fistula and incontinence.

The medical abuses documented as part of our report engage the responsibility of the Iranian government, as they are being committed to prevent and respond to acts of violence against LGBT people with due diligence.

We have also documented the plight of transgender individuals who were unable to obtain identity documents reflecting their gender and therefore enjoy their basic human rights, including to liberty, freedom of gender expression, freedom from torture and other ill-treatment, education, and employment until and unless they completed sterilization and other sex change procedures which are required by the authorities for obtaining new identity documents. These practices are in direct violation of the right to free and informed consent, which is an integrative component of the right to health; they may even exceed the scope of violations of the right to health and amount to torture and other cruel, inhuman and degrading treatment.

RECOMMENDATIONS

During its first UPR, only three countries made recommendations concerning the human rights of LGBT individuals, including their right to life and Iran refused all of them. JFI is grateful to the countries that included recommendations regarding the rights of LGBT during the last round of UPR and encourage other countries to follow the same during this round. In this vein, JFI offers the following recommendations:

- Pending full decriminalisation of same-sex sexual relations remove the death penalty and flogging for offences relating to consensual same-sex relations between adults;
- End discrimination and violence against LGBT people, both in law and practice;
- Protect gender non-conforming people from harassment, arbitrary arrest and detention, and torture and other ill-treatment, whether by state or non-state actors;
- Adopt a comprehensive legislation to streamline legal sex change procedures and protect the right to health of transsexuals, without imposing sterilization and genital reassignment surgeries as a prerequisite for gender legal recognition;
- Outlaw reparative therapies including electric shock therapies and psychoactive medications aimed at converting people's sexual orientation and gender identity;
- Exercise due diligence to prevent, investigate and hold accountable surgeons who administer substandard or negligent sex reassignment surgeries without informed consent or in reckless disregard of international standards of care for transsexual people
- Promote freedom of expression and access to accurate information and prohibit the use of hate speech against people with different sexual orientation and gender identity, which leads to more domestic, social and political violence against one of the most marginalised groups in Iran.