

EL*C BRIEF REPORT ON
LESBIAN* LIVES IN (PARTS OF) EUROPE

FOCUS TOPICS:
DISCRIMINATION AND HEALTH

VIENNA, 5-8 OCTOBER, 2017



**EUROPEAN
LESBIAN*
CONFERENCE**

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Authors

Magdalena Siegel, Maria von Känel, and the European Lesbian* Conference

Designer

Dovilė Alseikaitė

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This report was launched in October 2017, in the context of the European Lesbian* Conference ("EL*C"), which took place in Vienna between 5-8 October, 2017.

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PREFACE:

SCOPE,

METHODOLOGY,

NOMENCLATURE, AND

LIMITATIONS

LESBIAN* LIVES IN EUROPE: DIVERSE YET MARGINALIZED

Too often, lesbian* lives in Europe are invisible to the public eye. Their unique experiences are marginalized, their colourful identities overlooked and their powerful stories do not find their way into the public discourse. The consequences of this invisibility and marginalization are particularly concerning when public policies overlooking lesbians* affect their lives and loved ones. One of the main goals of this report is to highlight some ways in which lesbians* lives are overlooked or in other forms discriminated against and how this impacts lesbians* in (parts of) Europe.

Apart from covert discrimination arising from invisibility, lesbians* in Europe also experience overt discrimination in many specific ways: For example, in some European countries, lesbians* are still not granted the right to marry or to form legally recognized families and partnerships (e.g., through the use of reproductive technologies). They are being discriminated against at their workplace or when accessing healthcare services, and some are even subject to lesbophobic violence and harassment either at home or in the streets. In addition, lesbians* in Europe do not only face discrimination based on their sexual orientation: They are also confronted with sexism, misogyny, transphobia, interphobia, racism, ableism and other forms of prejudice against diverse aspects of their identities.

For decades, countless lesbian* activists have dedicated their spirit, time, and energy into fighting for lesbian* rights in Europe and have paved the way to social equality for generations to come. Still, and in contrast with many other groups that together form the vibrant and colourful LGBTQIA* community, lesbians* (until recently) lacked the fundamental structures, forums and tools dedicated to their experiences and needs.

THE EUROPEAN LESBIAN* CONFERENCE (EL*C): A PLATFORM TO UNITE AND EMPOWER

In 2016, the European Lesbian* Conference (EL*C) was founded by a core group of dedicated activists throughout Europe to provide such a space for lesbian*-centered activism. Since then, the EL*C has already become a platform aiming at empowering lesbian* communities throughout Europe and uniting them in their fight for equality and against discrimination – both outside and within the LGBTQIA* community.

The EL*C is committed to pushing for an inclusive approach. At the same time, the word “lesbian”, is put forward to promote the use of the term to counter the still remaining vast political and cultural struggle for lesbian* visibility, empowerment and representation. Yet, it is acknowledged that, as with any category or label, the use of the term ‘lesbian*’ may be contested or not comprehensive enough to describe the diversity within the community. Anyone who considers themselves to have a connection to the word ‘lesbian*’ is invited to take part in the EL*C and its movement. The asterisk (*) next to “lesbian” was therefore chosen to encourage a broad range of people to join in the fight for social equality for lesbians*.

THE EL*C BRIEF REPORT: SHEDDING LIGHT ON LESBIAN* LIVES

One of the tools of the EL*C that is aimed at empowering and informing lesbians* throughout Europe is this paper – the EL*C Brief Report. The EL*C Brief Report is meant to highlight recent empirical findings on lesbian* lives in Europe in an easy and accessible way for everyone. As there is scarce public data and research on the diverse experiences in all areas of lesbian* lives, our aim is to publish annual focus topics. For the launch report, the two focus topics are *Discrimination* and *Health* because of their various interrelations as well as their fundamental and positive impact on lesbians* lives when properly addressed by key stakeholders. In this line, the EL*C Brief

Report is an ongoing project, that is meant to grow over the years with the contribution of researchers and activists alike. Please let us know (see our contact box below) about any research endeavour that could contribute to the EL*C Brief Report and shed light on lesbian* lives.

THE METHODOLOGY BEHIND THE EL*C BRIEF REPORT

Finding out more about lesbian* lives in Europe can bring about interesting challenges for several reasons: The majority of findings on LGBTQIA* people stems from North America. In addition, lesbian* experiences are oftentimes also scientifically marginalized, with mainstream research focusing either on non-heterosexual (cis) men or treating participants of various sexual orientations, sex characteristics and/or gender identities as one, homogenous group. We strongly believe in disaggregated research and, in our case, its potential to help advocate for the improvement of lesbians* lives.

The sources of the EL*C Brief Report are as diverse as the lesbian* experiences behind their results: For our first focus topic *Discrimination*, we have drawn on data from the authoritative survey on LGBT¹ people in Europe, launched by the European Union Agency for Fundamental Rights (“FRA”) in 2012², that focuses on experiences of discrimination and hate crimes. The FRA’s data was accessed via the official data explorer³ of the EU LGBT survey, a web-based tool that presents national statistics as well as EU averages for all survey items. Over 93,000 LGBT participants from (then) 27 EU Member States and Croatia took part in this survey, among them 15,236 lesbians. More and detailed information about the EU LGBT survey conducted by the FRA

1 the EU LGBT survey conducted by the FRA classified their participants in the categories lesbian, gay, bisexual, and transgender, which is why we use the acronym „LGBT“ instead of „LGBTQIA*“ when referring to the survey

2 The World Bank, in cooperation with the FRA, has completed data collection on a replicaton of the EU LGBT survey in eight countries/territories in Southeast Europe in June, 2017. First analyses are expected to be published in autumn of 2017:
<http://fra.europa.eu/en/news/2017/world-bank-replicates-fras-eu-lgbt-survey-southeast-europe>

3 <http://fra.europa.eu/en/project/2011/surveying-lgbt-people-and-authorities/data-explorer>

can be found in their publications on main results⁴ and in the technical report⁵ on the survey.

In this section of the report, our aim was to highlight key findings of the FRA survey concerning lesbian participants. With this goal in mind, we present an EU average (using weights according to population size) and three countries where the most or the fewest lesbians endorsed a respective survey item. National statistics for every question included in the survey can be accessed by everyone using the data explorer³.

For our second focus topic *Health*, we have drawn on research recently published in peer-reviewed journals as well as on survey results conducted by LGBTQIA* organizations. Research papers were retrieved by conducting searches in the scientific database Web of Science, using various lesbian*-related search terms (e.g., “women who have sex with women”, “sexual minority women”, etc.) and restricting the results to European countries. Studies that presented overall findings for LGBTQIA* participants were checked for separate analyses conducted on the lesbian* subsample. Additionally, a search for systematic reviews on LGBTQIA* people (i.e., papers that summarize existing research evidence on a topic of interest) was conducted and relevant systematic reviews were assessed for the inclusion of studies with European participants. To avoid the sampling bias in studies using LGBTQIA* community sampling, special emphasis was put on large-scale and population-based studies as far as possible to highlight health disparities between lesbians* and heterosexual women*. Whenever possible, we included evidence that is corroborated by a larger body of research stemming from countries outside Europe (mainly North America).

Surveys conducted by LGBTQIA* organizations include the British “Prescription for Change” survey (focusing on lesbian* health), a survey of the Swiss Organization for LGBTQIA* families (focusing on children and family life), as well as the recent survey “What are we lesbian women like?” (on various aspects of lesbian* identities and relationships) from (predominantly) Spain and Mexico. Please refer to

4 <http://fra.europa.eu/en/publication/2014/eu-lgbt-survey-european-union-lesbian-gay-bisexual-and-transgender-survey-main>

5 https://fra.europa.eu/sites/default/files/eu-lgbt-survey-technical-report_en.pdf

the section *References* under the respective countries for full citation of these surveys.

We have decided to include both peer-reviewed research and data stemming from surveys conducted by LGBTQIA* organizations in our report because we find both sources to be complimentary. Additionally, research conducted within LGBTQIA* communities has the potential to highlight aspects of LGBTQIA* lives that have been overlooked in mainstream research, thus further stimulating the generation of scientific hypotheses with regard to sexual and gendered minorities. Still, we encourage our readers to consult the original publications and draw their own conclusions about the suitability for their project and the quality of the data presented. For more information about all cited publications and the methodology behind them, we are happy to answer any questions directed at us via info@europeanlesbianconference.org.

THE NOMENCLATURE USED IN THE EL*C BRIEF REPORT

Since social sciences draw on different operationalizations of sexual orientation – including sexual behaviour (e.g., women* who have sex with women*), sexual attraction (e.g., women* who are attracted to women*), or sexual identity (e.g., women* who label themselves “lesbian”) – the samples used in the cited studies vary in their composition and in the degree of certainty that the included participants actually label themselves as “lesbian”. Particularly, large-scale and population-based studies (which are typically indicative of higher quality), draw on various proxies for assessing sexual orientation, for example using marriage registries or the gender identity of a participant’s partner. For this reason, we chose the following nomenclature throughout the report:

Lesbian*: if the sample of a cited study included women* of different non-heterosexual orientations (for example lesbians, bisexuals, etc.) or if non-heterosexual identity was assumed because of other

characteristics (e.g., the gender identity of a participant's partner, reported attraction, past sexual behaviour)

Lesbian: if the sample of a cited study included only women* with an explicitly declared lesbian identity, as was the case for the EU LGBT survey conducted by the FRA.

Use of the phrase „in the European Union and Croatia“: As mentioned above, this report draws on the EU LGBT survey conducted by the FRA in 2012 in the 27 member states of the EU at that time as well as Croatia. As of 2017, Croatia is a member of the European Union, still, we have decided to use the phrase „in the European Union and Croatia“ to emphasize the point of data collection (2012) and the respective member states at that time.

THE REFERENCING SYSTEM USED IN THE EL*C BRIEF REPORT

Throughout the report, readers will find a country flag and a number next to every piece of cited information. The flag represents the country the research was conducted in and the number represents the alphabetical order of references from this country. The full reference can be found in the *References* section at the end of the report, which is organized by countries to facilitate extracting national information.

LIMITATIONS OF THE EL*C BRIEF REPORT

Regional limitations: findings from various European countries are cited throughout the EL*C Brief Report. These regions and countries include: Denmark, France, Germany, Iceland, the Netherlands, Norway, Spain, Sweden, Switzerland, the United Kingdom, and the EU-average for all 27 countries in the European Union in 2012 and Croatia (weighted according to population size), as well as single-item national statistics from Austria, Belgium, Bulgaria, Cyprus, the Czech Republic, Estonia, Finland, Greece, Hungary, Latvia, Lithuania, Luxembourg, Romania, Poland, and Slovenia. These findings, mostly

stemming from Western European countries, underscore the empirical dearth of high-quality evidence on lesbian* lives in various regions throughout Europe, most importantly from Eastern and South-Eastern countries. Given the relative lack of LGBTQIA* rights equality in these countries, as compared to Western parts of Europe (see, for example in the ILGA Europe Rainbow Index⁶ or the Transgender Europe Trans Rights Index⁷), this regional constraint on empirical data is particularly concerning, since we seem to know the least about those who are discriminated against the most.

By critically recognizing and emphasizing this regional limitation, we want to encourage and welcome researchers and activists from all parts of Europe (but particularly from those that are currently underrepresented in our report!) to inform us about their research findings on lesbian* lives. As an inclusive, on-going and collaborative effort, we strive to continually expand our empirical body of research on lesbian* lives in all parts of Europe and make it accessible to all people interested in findings on lesbians* in Europe.

Gender identity-related limitations: In most cases, the gender identities of the lesbians* participating in the surveys or studies presented are unknown. For example, population-based studies employing a binary categorization of gender (male vs. female) are not able to capture the full range of gender identities of their participants.

In the EU LGBT survey conducted by the FRA, transgender* participants were coded as “transgender” (no further differentiation), regardless of their sexual orientation. Consequently, the findings presented on the EU LGBT survey in our report unfortunately include cis-gendered lesbians only.

We therefore strongly recommend using a more inclusive approach to assess gender identity in scientific endeavours and an analytical approach that treats sexual orientation and gender identity as two aspects of identity present in everyone (as opposed to conflating sexual orientation and gender identity). For more information on being trans in the EU, we recommend the report on findings from the

⁶ <https://www.ilga-europe.org/resources/rainbow-europe/rainbow-europe-2017>

⁷ <http://tgeu.org/trans-rights-map-2017/>

EU LGBT survey on transgender people published by the FRA⁸, as well as the numerous resources from Transgender Europe⁹. We also want to stress that virtually nothing is known about inter lesbians* throughout Europe and invite researchers and activists to let us know about their research projects with regard to inter lesbians*.

Generalizability: research on LGBTQIA* people is often, if not always, limited with regard to generalizability, since there is no evidence on the composition of the “true” population of LGBTQIA* people in a given country: Studies drawing on population-based data may yield relatively robust findings, but participants may have chosen not to disclose their sexual orientation. In addition, surveys that rely on convenience samples (for example through recruitment at LGBTQIA* venues) are especially prone to yielding samples that are not representative of the true LGBTQIA* population, since their participants are particularly engaged with the LGBTQIA* community. The disparity between participants in a survey about LGBTQIA* lives and the “true” population of LGBTQIA* people may even be greater in countries, where LGBTQIA* people face more discrimination and therefore have only limited access to LGBTQIA* resources and organizations (through which they could know about a survey), in relation to LGBTQIA* people that live in countries without criminalization or harsh social stigma targeting them. For example, lesbians participating in the FRA survey were as a whole very well educated (presumably above average), with over 59% having received tertiary education (33% were students at the time of the survey) and 2% having received primary education only. In addition, they were predominantly urban-dwelling, with 57% living in a city. For this reason and because we present mostly country-specific findings, we discourage readers from making generalizations about the European lesbian* community as a whole, as well as about one country or another.

8 <http://fra.europa.eu/en/publication/2014/being-trans-eu-comparative-analysis-eu-lgbt-survey-data>

9 <http://tgeu.org/resources/>

Within the scope of these limitations, we hope that we have provided an enriching and empowering report for anyone interested in the lives and experiences of lesbians in Europe. A report, that can serve as a source of information, a call for action, and a visible reminder of what we have achieved as a community and how much there still is to achieve for its members.*

*Magdalena Siegel & Maria von Känel
for the European Lesbian* Conference*



<https://europeanlesbianconference.org/>



info@europeanlesbianconference.org



[https://www.facebook.com/
Europeanlesbianconference-1860721560840038/](https://www.facebook.com/Europeanlesbianconference-1860721560840038/)

DISCRIMINATION

AND

EXPERIENCES OF

HARASSMENT

Lesbians in Europe are faced with discrimination on a daily basis – ranging from legal barriers in various aspects of their lives to informal discrimination by family members, peers, or service personnel. In this focus topic, we want to highlight these various experiences of discrimination and, in some instances, highlight cases of harassment and violence. In doing so, we have drawn on the most extensive survey on discrimination and hate crime to date, conducted in 2012 throughout the European Union and Croatia – the EU LGBT survey by the European Union Agency for Fundamental Rights (FRA; for additional information on the methodology behind the survey, please consult our preface or the official technical report¹).*

In this section, we present findings from 15,236 lesbian participants and their experiences of discrimination. If not otherwise stated, we present an averaged response over all 28 countries included in the survey, which is weighted by population size. To highlight the variability in responses across countries, we also included the three countries with the least endorsement and the three countries with the most endorsement on some questions. Please note that, since the survey was conducted in 2012, some of the findings presented may be different as of 2017, since legal changes could have taken place in a given country during that time. Still, the EU LGBT survey conducted by the FRA is the most extensive and valuable survey to date about LGBT lives in Europe.

For this report, we included only parts of the extensive survey. We also chose not to include figures from other groups of participants from within the LGBTQIA community (for example gay men or bisexual women), to avoid (in our view over-simplistic) comparisons between groups that are all affected by various forms of discrimination. For readers interested in conducting these analyses or in finding out more about results from a specific country, we recommend exploring the survey online via the data explorer².*

1 https://fra.europa.eu/sites/default/files/eu-lgbt-survey-technical-report_en.pdf

2 <http://fra.europa.eu/en/publications-and-resources/data-and-maps/survey-data-explorer-lgbt-survey-2012>

Our subsection on discrimination towards lesbian families is further accompanied by findings from a survey conducted by the Swiss organization for LGBTQIA* families (“Dachverband Regenbogenfamilien”) in early 2017 on various experiences of LGBTQIA* families in Switzerland*

 1. For this report, findings from the subsample of lesbian-identified participants (n=398) were used. Additionally, we included findings from the British “Prescription for Change” survey conducted in 2007 on health implications for lesbians* with multiple minority status.  3

LEGAL RECOGNITION OF LESBIAN* LIVES IN EUROPE

As of 2017, same-sex practices between consenting adults are legal in all 49 European countries (including Kosovo), with Northern Cyprus as the last part of Europe having decriminalized same-sex practices between men in 2014*¹. However, this positive development highlights a crucial point in the legal visibility of lesbian* sexuality: whereas same-sex practices between men have typically been criminalized in the past (for example through laws punishing sodomy), intimate relations between women have often been ignored by legislation (for example in Albania, Armenia, Azerbaijan, Greece, Norway, Portugal or Spain). For interested readers, we highly recommend the ILGA Report “State Sponsored Homophobia”^{*1} for more and country-specific information about the decriminalization of same-sex practices in Europe.

While lesbians* are still faced with legal barriers, the social policy landscape for lesbians* is rapidly changing across Europe. For example, positive developments are on their way when it comes to achieving marriage equality, legal gender recognition, the possibility to foster/adopt children or the possibility to make use of reproductive technologies. For a full report on a country’s current legal situation (which would be beyond the scope of this brief report), we recommend the ILGA Europe’s Rainbow Europe Tool^{*2} and the Transgender Europe’s Trans Rights Index and Map^{*3}

*1 International Lesbian, Gay, Bisexual, Trans and Intersex Association, Carroll, A. & Mendes, L.R. (2017). State Sponsored Homophobia 2017: A world survey of sexual orientation laws: criminalisation, protection and recognition. Geneva: ILGA. Retrieved from: http://ilga.org/downloads/2017/ILGA_State_Sponsored_Homophobia_2017_WEB.pdf

*2 <https://rainbow-europe.org/>

*3 <http://tgeu.org/trans-rights-map-2017/>

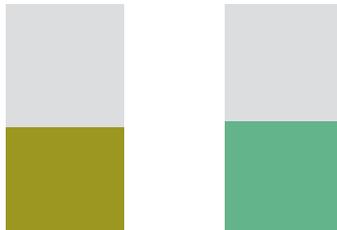
LESBIANS AVOID GOING PUBLIC



Throughout the European Union and Croatia, lesbians are confronted with a substantial fear of exposing their sexual orientation. For many, this fear discourages them from visiting certain places or showing their affection for their partners in public:

For fear of being assaulted or harassed...

- 46% of lesbians **avoid holding hands** with their same-sex partner in public
 - Lesbians in Croatia (74%), Cyprus (73%), and Romania (65%) are the most afraid to hold hands in public
 - Lesbians in Finland (23%), Denmark (27%), and Germany (28%) are the least afraid
- 49% of lesbians **avoid certain places** or locations
 - In Hungary (68%), Croatia (61%), and Lithuania (60%), the most lesbians avoid certain places or locations
 - In Finland (26%), Denmark (27%), the Netherlands and Sweden (both 35%), the fewest lesbians avoid certain places or locations



Lesbians avoid being open about their sexuality in the following places:

- in public transportation: 63%
- in the street, square, car, parking lot: 62%
- in public premises or buildings: 52%
- in a park: 43%
- at work: 43%
- at a café, restaurant, club, or pub: 40%
- at a sports club: 29%
- at school: 26%
- at other places: 22%
- at home: 16%



EXPERIENCES OF DISCRIMINATION IN DAILY LIFE

78% think that discrimination on grounds of sexual orientation *in general* is fairly or very widespread in their country. Fewer lesbians (66%) think that discrimination on grounds of being *lesbian* is fairly or very widespread in their country.

Many lesbians have experienced discrimination themselves:

55% of lesbians have **felt discriminated against or harassed** because of their sexual orientation in the 12 months prior to the survey.

- In Croatia (71%), Poland, and Slovenia (both 65%) the most lesbians experienced discrimination and harassment.
- In Denmark (32%), the Netherlands (35%), and Belgium (39%), the fewest lesbians experienced discrimination and harassment.

Note: These numbers correspond well with findings from the Eurobarometer in 2012, which state that acceptance of LGBT people is greatest in Western EU member states and least common in a number of eastern European states³.

Situations and places where lesbians have experienced discrimination or harassment in the 12 months prior to the survey:

- at a café, bar, restaurant or club (23%)
- at work (20%)
- by school/university personnel (as parents or students) (20%)
- looking for housing (16%)
- looking for a job (12%)
- by healthcare personnel (12%)
- at a shop (10%)
- by social service personnel (9%)
- at a sport or fitness club (7%)
- in a bank or insurance company (4%)
- when showing an official document identifying their sex (4%)



Only **8% of lesbians reported** their last incident of discrimination to any institution or authority⁴.

- In Cyprus, Estonia and Latvia, no lesbian (0%) reported their last incident of discrimination.
- In Malta, Italy (both 17%) and the Netherlands (15%), the most lesbians reported their last incident of discrimination.

3 European Commission (2012). Special Eurobarometer 393. Discrimination in the EU in 2012. Retrieved from: http://ec.europa.eu/public_opinion/archives/ebs/ebs_393_en.pdf

4 the original itemtext used in the survey was „reported it anywhere“

The three most common reasons for not reporting incidents of discrimination were:

- nothing would happen or change: 53%
- not worth reporting, it happens all the time: 44%
- the incident would not have been taken seriously: 34%



88% know about an organization in their country of residence that can offer support or advice to people who have been discriminated against because they are lesbian.

- The most lesbians know about an organization in their country in Luxembourg (98%), Austria, and the Netherlands (both 95%).
- The fewest lesbians know about an organization in their country in Greece (64%), the Czech Republic (74%) and Lithuania (76%).

Note: As the survey was conducted with the aid of national LGBTQIA organizations, these numbers may be positively biased: participants invited to take part in the survey via an organization will arguably also know about an organization that can offer support and advice for victims of discrimination.*

EXPERIENCES OF DISCRIMINATION TOWARDS LESBIAN* FAMILIES



Throughout the EU and Croatia, about 70% of lesbians live in a relationship:

- 37% live together with a partner or spouse
- 32% are involved in a relationship without living together
- 30% are not involved in a relationship

- 13% of lesbians are married or in a registered partnership. The most lesbians are married / in a registered partnership in: Denmark (30%), Luxembourg (24%), and Germany (22%).



Note: because the survey was conducted in 2012 and because several countries have changed their legislation since then, the average number of lesbians in a legally recognized relationship is most likely higher for 2017 across the European Union and Croatia.

Structural discrimination with regard to marriage seems to be a substantial barrier to lesbians' well-being:

- 81% of lesbians agree or strongly agree that the possibility to marry or register a partnership in their country would allow for a more comfortable life.
- 96% agree or strongly agree that the recognition of same-sex partnerships across the European Union would allow for a more comfortable life.



Even among their families, lesbians do not always feel safe to express their sexual orientation:

- 57% of lesbians are open with most or all family members (apart from their partner) about their lesbian identity.
- 16% are not open with anyone from their family (apart from their partner) about their lesbian identity.



36% of lesbians in the EU and Croatia are parents or legal guardians of a child and 17% live with children (under 18) in the same household.

- In Denmark (67%), the Netherlands (61%), and Germany (60%), the most lesbians have children.
- In Croatia (2%), Greece (8%), and Cyprus (14%), the fewest lesbians have children.

As with marriage, structural discrimination concerning adoption rights seems to be a substantial barrier to lesbians' well-being:



87% of lesbians agree or strongly agree that the possibility to adopt or foster a child in their country would allow for a more comfortable life.



Findings from a survey conducted by the Swiss organization for LGBTQIA* families further illustrate aspects of informal discrimination that lesbians face with regard to their family life:

35% of lesbians who took part in the survey have experienced homophobic or transphobic discrimination against their families.

LESBIAN* PARENTING

Drawing on the substantial body of empirical evidence available, there seems to be general consensus that LGBTQIA* people are just as fit to be parents as their heterosexual, cis-gendered peers and that the outcomes for their children are at least as favourable as for children in heterosexual families*¹ *². This is particularly noteworthy, since LGBTQIA* people face substantial challenges in fulfilling their family lives, such as legal barriers and informal discrimination with regard to the recognition of their families.



For example, a study conducted in the Netherlands found no differences in problematic behaviour in adolescents raised by lesbian* parents and adolescents raised by heterosexual parents. However, the study also suggests that homophobic discrimination with regard to their parents' sexuality can have an impact on children: adolescents of lesbian* parents who experienced homophobic stigmatization exhibited more problematic behaviour than adolescents of lesbian* parents who did not experience homophobic stigmatization.

Since lesbian* parenting and family life is an extensive topic that touches various legal and psychological aspects, it would be beyond the scope of this brief report. We therefore strongly recommend the extensive resources from ILGA Europe*³ and Transgender Europe*⁴ for those wishing to find out more about LGBTQIA* parenting in Europe.

*1 Short, E., Riggs, D. W., Perlesz, A., Brown, R., & Kane, G. (2007). Lesbian, Gay, Bisexual and Transgender (LGBT) Parented Families. A Literature Review prepared for the Australian Psychological Society. Melbourne: The Australian Psychological Society Ltd. Retrieved from: <https://www.psychology.org.au/Assets/Files/LGBT-Families-Lit-Review.pdf>

*2 Crowl, A., Ahn, S., & Baker, J. (2008). A Meta-Analysis of Developmental Outcomes for Children of Same-Sex and Heterosexual Parents. *Journal of GLBT Family Studies*, 4, 385-407

*3 <https://www.ilga-europe.org/what-we-do/our-advocacy-work/family>

*4 <http://tgeu.org/issues/children-families/>

Most common was discrimination by other family members or friends (45%), by people on the street (24%), or at work or at school (both 18%). These discriminatory acts were most often expressed by stereotyping (44%), refusing to recognize their family as such (42%), or outspoken insults and defamations (35%).

The survey also asked about the wishes and worries of lesbian parents. Their answers also centered around structural and informal forms of discrimination:

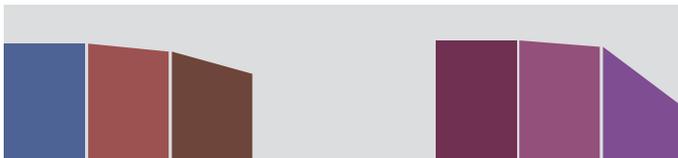


What lesbians hope for when fulfilling their desire to have children:

When asked about their wishes and needs with regard to family planning, the three most common topics for lesbians were ● legal counseling (74%), ● the possibility to exchange their experiences (69%), and ● combatting homophobia, transphobia and prejudices (55%).

What lesbians worry about when fulfilling their desire to have children:

When asked about their worries with regard to family planning, lesbians stated that they ● feared a lack of legal recognition (76%), ● that their child would experience homophobia, transphobia, or discrimination (72%), or ● that they themselves would experience homophobia, transphobia or discrimination (34%).



EXPERIENCES OF DISCRIMINATION IN EMPLOYMENT

- 74% of lesbians hid their sexual orientation during employment in the 5 years prior to the survey (45% did so always or often).
- 44% of lesbians experienced negative comments or conduct at work because of being a lesbian (always or often: 9%).
- 70% saw or heard negative comments or conduct because a colleague was perceived to be LGBT (always or often: 30%) and perceived a general negative attitude at work against people who are LGBT (always or often: 29%).
- 25% experienced unequal treatment with respect to employment conditions or benefits (for example leave, pension, etc) because they were in a relationship with a woman* (always or often: 10%).



EXPERIENCES OF VIOLENCE AND HARASSMENT

Many lesbians throughout Europe have been the victim of violence or harassment:

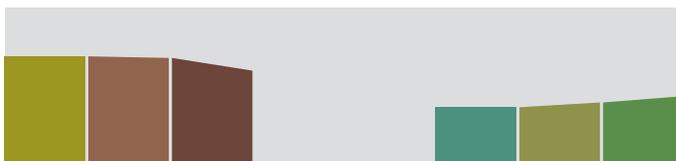
In the 5 years prior to the survey **52% were personally harassed** by someone or a group for any reason in a way that really annoyed, offended or upset them:

In ● Croatia (69%), ● Austria (68%), and ● Romania (60%)

the most lesbians were personally harassed

In ● Luxembourg (37%), ● Denmark (40%), and ● Spain (44%)

the fewest lesbians were personally harassed



23% were physically/sexually attacked or threatened with violence at home or elsewhere (street, on public transport, at their workplace, etc.) for any reason

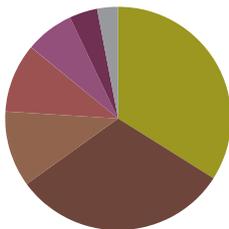
- In Romania (42%), Finland, and Croatia (both 34%), the most lesbians were physically/sexually attacked or threatened with violence
- In the Netherlands, Spain (both 15%), and Cyprus (17%), the fewest lesbians were physically/sexually attacked or threatened with violence.

EXPERIENCES OF PHYSICAL OR SEXUAL VIOLENCE

Lesbians' most serious incident of a physical or sexual attack

Lesbians who were physically/sexually attacked or threatened with violence reported the following as their most serious incident:

- physical attack 34%
- threat of physical violence 31%
- threat of both physical and sexual violence 11%
- sexual attack: 10%
- physical and sexual attack 7%
- threat of sexual violence 4%
- do not know 3%



Of those lesbians who experienced a physical or sexual attack or threat, **54% think that the most serious incident happened because they were perceived to be LGBT**

- In Slovakia (73%), Spain (69%), and Croatia (67%), the most lesbians who were victims of violence or threats, believe that the most serious incident happened because they were perceived to be LGBT
- In Cyprus (29%), Finland (33%), and Estonia (41%), the fewest lesbians who were victims of violence or threats, believe that the most serious incident happened because they were perceived to be LGBT

21% of lesbians who have experienced a physical or sexual attack or threat reported their most serious incident to the police

- In Luxembourg (56%), Slovenia (32%), and the UK (31%), the most lesbians who experienced a physical or sexual attack or threat reported their most serious incident to the police.
- In Cyprus (0%), Estonia (7%), and Romania (10%), the fewest lesbians who experienced a physical or sexual attack or threat reported their most serious incident to the police.

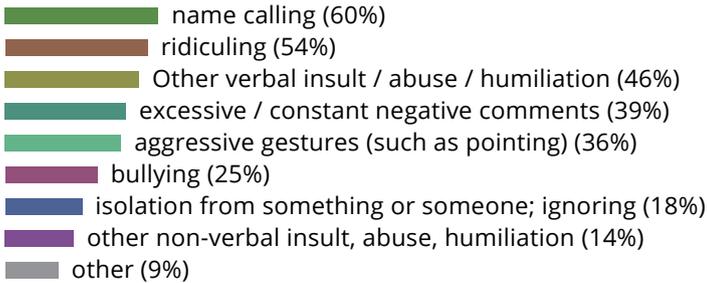
The three most frequent reasons for not reporting it were:

- too minor / not serious enough / never occurred to me 37%
- did not think they would do anything 35%
- did not think they could do anything 29%



EXPERIENCES OF HARASSMENT

Lesbians who have been harassed in any way that offended or upset them (either online or offline) reported the following as their most serious incident:



Of those lesbians who experienced harassment in any form, **76%** think that the **most serious incident happened because they were perceived to be LGBT**

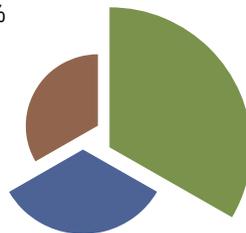
- In Luxembourg (94%), Malta and Greece (both 82%), the most lesbians who were harassed, believe that the most serious incident happened because they were perceived to be LGBT
- In Lithuania (61%), Finland (63%), and Romania (64%), the fewest lesbians who were harassed, believe that the most serious incident happened because they were perceived to be LGBT

5% of lesbians who have been harassed **reported their most serious incident to the police**

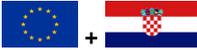
- In Slovenia (10%), Sweden (9%), and Croatia (8%), the most lesbians who were harassed reported their most serious incident to the police.
- In Cyprus (0%), Greece (1%), Estonia and Romania (both 2%), the fewest lesbians who were harassed reported their most serious incident to the police.

The three most frequent reasons for not reporting it were:

- too minor / not serious enough / never occurred to me 53%
- did not think they would do anything 32%
- did not think they could do anything 27%



DISCRIMINATION BASED ON OTHER ASPECTS OF IDENTITY



34% of lesbians in the European Union and Croatia have felt discriminated against or harassed during the 12 months prior to the survey on the grounds of gender.

- The most lesbians have experienced discrimination on the grounds of gender in Austria (48%), Sweden (42%), and Poland (41%).
- The fewest lesbians have experienced discrimination on the grounds of gender in the Netherlands (17%), Denmark (22%), Belgium and Bulgaria (both 23%).

The EU LGBT survey also asked participants about their belonging to certain minority groups:

80% of lesbians consider themselves to be part of a **sexual minority** in their country of residence.

- In Poland (98%), Finland (98%), and Estonia (97%), the most lesbians consider themselves to be a sexual minority.
- In Slovenia (53%), Spain (66%), and Luxembourg (69%), the fewest lesbians do so.

In their country of residence...

- 6% of lesbians consider themselves to be part of an ethnic minority
- 6% of lesbians consider themselves to be part of a religious minority
- 4% of lesbians consider themselves to be a part of a minority in terms of disability

While the EU LGBT survey has not further investigated experiences of discrimination based on these minority status, evidence from the British "Prescription for Change" survey suggests that having multiple minority status can lead to a heightened risk of experiencing deleterious health conditions:



3

- The risks of engaging in self-harming behaviour and substance use were elevated in **lesbian* ethnic minority** participants. For self-harming behaviour, these disparities emerge at a young age: an alarming 83% percent of surveyed black and ethnic minority lesbian* girls have engaged in self-harming behaviour (compared with 71% of white lesbian* girls).
- **Lesbians* with a disability** also face heightened risks with regard to their mental and physical health: they are more likely to experience domestic abuse in a relationship (39% versus 24% of lesbians* who don't have a disability), to suffer from an eating disorder (32% vs. 20%), to have attempted suicide in the year prior to the survey (10% vs. 4%) or to deliberately harm themselves (31% vs. 18%). However, they are less likely to regularly drink alcoholic beverages (30% vs. 44%) and to take illegal drugs (30% vs. 36%).

As outlined in the previous section, lesbians are not able to fully participate in their daily lives: About every second lesbian throughout the European Union and Croatia is afraid to show their affection to their partner or to reveal their sexual orientation in public places. Indeed, lesbians do experience discrimination, violence and harassment in their everyday lives – may it be at home, at their workplace or in the health care system.

In addition, a strikingly low number of lesbians who have been victims of discrimination, violence or harassment have reported these incidents. The most frequently endorsed reasons for not reporting incidents of unequal or violent treatment to authorities all encompass lesbians' doubts about positive outcomes of such reports, as well as the notion that their experiences might not be serious enough for reporting.

The legal recognition of lesbians families and the concrete applicability to form such families are pressing issues for lesbians* throughout Europe. These human right inequalities still exist in many European countries today (for more information on your country refer to the ILGA Europe Rainbow Tool: <https://rainbow-europe.org>) and are further aggravated by the*

informal homophobic or transphobic discrimination that lesbian families experience in their daily lives. Therefore, full access to adoption, fostering and reproductive technologies throughout Europe is urgently needed to enhance the quality of lesbian* family life.*

In addition to being discriminated against on grounds of their sexual identity, about every third lesbian also experiences discrimination because of their gender identity. Multiple minority status can also have adverse consequences, as the evidence suggests: when it comes to adverse health-related conditions, lesbians with multiple minority status seem to be even more at risk. Throughout Europe, there is a pressing need to further investigate the outcomes of the intersection between sexual orientation, sex characteristics, gender identity, ethnicity, ability, religion, socioeconomic status, and all other aspects of identity in lesbians*.*

As we stated in the preface of this report, we emphasize the regional constraints that limit the generalizability of these findings. Countries that were not members of the European Union (except for Croatia) in 2012, were not included in the EU LGBT survey. Therefore, we want to restate our point from the preface: we seem to know little about those lesbians, who may be discriminated against the most. We also want to point out, that the participants in the survey were highly educated, urban-dwelling and to an extent connected to the LGBTQIA community, that allowed them to find out about and participate in the survey. As a consequence, the data presented may not be generalizable to lesbians who do not display these characteristics.*

LESBIAN*

HEALTH

The second focus topic in our brief report is lesbian health, including mental, physical, and sexual health. As we will see, this focus topic is interrelated with our first focus topic, discrimination, since (at least some) health disparities between members of sexual and gender minorities and the sexual and gender majority may be attributable to experiencing “minority stress” (see below). Due to a lack of cross-European surveys (besides the EU LGBT survey on discrimination conducted by the FRA), we relied on single-country, preferably population-based research papers as well as the British “Prescription for Change” survey on lesbian and bisexual health (data collection in 2007)  and a finding on sex toy use from the Spanish-Mexican “what are we lesbian women like” survey  +  for this chapter. Obviously, these regional limitations make it difficult to generalize findings to lesbians* throughout Europe. However, it also underscores the crucial need for cross-national surveys and sound national prevalence estimates on lesbian* health.*

MENTAL HEALTH

Throughout their lives, lesbian, gay, bisexual, transgender and inter people are at a heightened risk of developing a variety of adverse mental health conditions (including depression, anxiety and even self-harm and suicide attempts), when compared to their heterosexual and cis-gendered peers^{1 2 3}. From what we know, lesbians* in Europe are also at a heightened risk of developing adverse mental health conditions, compared with heterosexual women*:

1 Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129, 674–697.

2 Plöderl, M., & Tremblay, P. (2015). Mental health of sexual minorities. A systematic review. *International Review of Psychiatry*, 27, 367-385.

3 Reisner, S. L. et al (2016). Global health burden and needs of transgender populations: a review. *Lancet*, 388, 412-436.

Lesbians* are at risk of developing adverse mental health conditions



Lesbians* in Europe (compared to heterosexual women*) have been found to experience a heightened risk of suffering from (or receiving medical care for) adverse mental health conditions at some point in their lives, including:

- longstanding psychological or emotional conditions in general,
- depression,
- general anxiety disorder,
- eating disorders,
- symptoms of attention deficit hyperactivity disorder (ADHD)⁴
- difficulties in their job because of emotional problems



For depression, these disparities have been found to emerge as early as **age 11**.



In a Dutch study, a positive attitude towards their lesbian* identity, an absence of negative reactions from others towards their sexual orientation, and being open about their lesbian* identity has (among other factors) contributed to better mental health in lesbian* participants.

⁴ The heightened risk of displaying symptoms of ADHD in sexual minorities is a somewhat novel finding. The authors (Frisell et al., 2010) speculate, that this might be the case because some of the symptoms surveyed are not specific to ADHD and could also be indicative of anxiety (for example restlessness or forgetfulness). More research into this issue is therefore needed.

Lesbians* are at risk of engaging in self-harming behaviour and (at worst) thinking about, attempting to, or committing suicide

Self-harming behaviour



Lesbians* are more likely to engage in (or receive medical care for) self-harming behavior (e.g., cutting themselves, swallowing pills, punching walls, etc.) and are younger than heterosexual women*, when they first self-harm.

For example, in the British “Prescription for Change” survey, **one in five lesbians*** said that they have deliberately harmed themselves during the year prior to the survey. In lesbians* **under the age of 20, half of them** stated that they have self-harmed.

Suicidal ideation, suicide attempts and suicide risk



In a Danish study, **19.7%** of lesbians* reported having **thought about suicide** (compared with 8.3% of heterosexual women*), while **11.8%** (vs. 4.2%) had attempted **suicide**. In another Danish study based on national mortality data from 2000 – 2010, women* in a registered partnership with another woman* were more likely to commit suicide than (current or past) heterosexually married people.



In a nationally representative sample from France, lesbians* were more likely to think about suicide, but not to attempt suicide, when compared with heterosexual women*.



In an Icelandic population-based sample of adolescents, **45%** of lesbian* girls stated that they had attempted suicide one or more times (compared to 7% of heterosexual girls).



3

In the “Prescription for Change” survey (UK), 5% of lesbians* said that they had attempted **suicide** during the year prior to the survey. For lesbians* under 20, this number rose to 16%.



2

In Sweden, the **suicide risk** for **women*** married to another woman* is **about the same** as for women in opposite-sex marriages (although non-significantly elevated).

Life-satisfaction across the European Union and Croatia



In general: How satisfied are lesbians with their life across the European Union and Croatia?

- Lesbians are the most satisfied with their lives in: Denmark, the Netherlands, and Finland
- Lesbians are the least satisfied with their lives in: Poland, Bulgaria, and Cyprus

WHY ARE LESBIANS* AT RISK OF DEVELOPING ADVERSE MENTAL HEALTH CONDITIONS?

According to psychological models, mental health disparities amongst lesbians* (and sexual and gender minorities in general) seem to stem from growing up and living in a society that discriminates against non-heterosexuals and/or cis-males. This is called “minority stress”.

For example, growing up in a family that reacts negatively to one’s sexual (or gender) identity can reduce a person’s self-esteem, which is known to be a risk factor for developing symptoms of depression. We highly recommend reading seminal reviews^{1,*1} for more information on this topic.

*1 Hatzenbuehler, M. L. (2009). How does sexual minority stigma “get under the skin”? A psychological mediation framework. *Psychological Bulletin*, 135, 707–730.

PHYSICAL HEALTH

Research on health disparities among lesbians* (and sexual or gendered minorities in general) has typically focused on mental (and, to a lesser extent, sexual) health. As a consequence, less is known about the physical health of lesbians*. A recent systematic review⁵ has summarized findings on disparities between lesbians* and heterosexual women* on nine physical health conditions typically addressed in the literature (asthma, arthritis, cancer, cardiovascular disease, diabetes, high cholesterol, hypertension, obesity, and general physical health; for outcomes please refer to the review). However, all of the studies included stemmed from the US, which points to a relative lack of population-based evidence regarding the physical health of lesbians* in Europe (and other parts of the world).

General Health



As a notable exception, two recent, population-based studies from the UK and Sweden address physical health conditions among lesbians* (and sexual minorities in general): In addition to an increased risk of suffering from a longstanding psychological or emotional condition (see above), British lesbians* reported worse general health than their heterosexually-identified peers. Findings from Sweden suggest that health disparities between lesbians* and heterosexual women* may vary with age and seem to diminish after the age of 35.

Lesbians* mortality



In Denmark (from 2000-2011), women* married to another woman* displayed a **heightened mortality risk** compared with women* married to a man*, most notably from suicide (see above) and cancer.

⁵ Simoni, J. M., Smith, L., Oost, K. M., Lehavot, K., & Fredriksen-Goldsen, K. (2017). Disparities in Physical Health Conditions Among Lesbian and Bisexual Women: A Systematic Review of Population-Based Studies, *Journal of Homosexuality*, 64, 32-44.

Health-related behaviors (alcohol, nicotine, and drug use)

Lesbians* drinking habits



Findings on lesbians* drinking habits are mixed: Some suggest that lesbians* are less likely to completely abstain from alcohol than heterosexual women* or are more likely to engage in risk or binge drinking. Other studies, however, find no such risk of problematic alcohol use.

Lesbians* smoking habits and experiences with drugs



In a Swedish study, no difference in drug or nicotine use was detected for lesbians* compared to heterosexual women.



In the British “Prescription for Change” survey, lesbians* were more likely to have smoked sometime in their lives (two thirds compared to half of women in general), but not at the moment. They were also less likely to smoke more than 20 cigarettes a day, compared to the general population. However, they were more likely to have taken other drugs, for example cannabis or cocaine.



In a French study, lesbians* were more likely to have consumed Cannabis and to have taken other drugs in their lifetime. In the use of other psychotropic substances, no differences were detected.

WHY ARE LESBIANS* (BASED ON SOME STUDIES) MORE LIKELY TO ENGAGE IN DRINKING, SMOKING, OR TAKING OTHER DRUGS?

Scientists draw on two different explanations: first, as with mental health in general, experiences of discrimination and the additional stress that results from them, may be associated with engaging in substance use, as a way of coping. Second, some researchers postulate permissive social norms with regard to substance use as another possible explanation: due to the lack of other venues or options for meeting, members of the LGBTQIA* community often rely on going to bars, clubs, or parties (where alcohol or other substances are consumed) for LGBTQIA* people to meet others like themselves. This depends however on how accepting a given society is towards LGBTQIA* people and to what extent it is safe for them to meet at public venues. Different outcomes in the presented studies may stem from different levels of discrimination in the countries the studies were conducted in (and therefore different levels of stress), and also from different sampling approaches and participants. For example, Bloomfield et al. (2011)  found no differences in the risk of heavy drinking for lesbians* in a pooled dataset of European countries (for lesbians* in North America, however, differences were found, which suggests that the risk for alcohol dependence or heavy drinking may vary by country or even region). In this study, only partnered lesbians* (and heterosexuals) were included, who may be at a lower risk than other lesbians* (being in a relationship can serve as a protective factor and lesbians* may feel less need to attend clubs and parties, for example to “hook up”). Again, we recommend reading a comprehensive review*¹ for more information on this topic.

SEXUAL HEALTH

Lesbians*’ sexual pleasure



Lesbians* regard a good sex life just as important as heterosexual women* (about three quarters find it important or very important). Lesbians* experience sexual desire as often as heterosexual women* and are equally satisfied with their current sex life. However, more lesbians* than heterosexual women* think that their sexual needs are not met. A Swedish study found this to pertain particularly to sexual activities during their youth, whereas in middle and old age, the amount of satisfaction with their sex life is the same as for heterosexual women*.

LEZ TALK ABOUT SEX, BABY



Most common sexual practices for lesbians* (over 95% surveyed do it occasionally or often) are:

- oral sex (mouth-vagina),
- vaginal penetration with fingers,
- mutual masturbation



Lesbians* also like to use sex toys: in the Spanish/Mexican “What are we lesbian women like” survey, 43% reported they use or have used sex toys from time to time. In another survey among British and U.S.-American lesbians*, 61% of lesbians reported to have used a vibrator with their partner in the year prior to the survey.

Sexually transmitted infections and safe sex



Evidence from Scandinavian countries suggests that women* exclusively engaging in intimate relations with other women are at a

lower risk of acquiring a sexually transmitted infection (STI), compared to women* who also engage in intimate relations with partners of another gender.

Still – and contrary to a common belief – lesbians* exclusively engaging in intimate relations with other women are able to acquire sexually transmitted infections (STIs) when they share bodily fluids with their partner.



In the “Prescription for Change” survey (UK), less than half of the lesbians* surveyed had been tested for an STI.

Over half of those who had been tested, had an STI (25% of all respondents).

Of those who had not been tested, 75% thought that they were “not at risk”.



A common STI among lesbians* is bacterial vaginosis or a vaginal thrush. Lesbians* who smoke seem to be particularly at risk.



When it comes to safe sex with (presumably cis-)female partners, lesbians* seem to be reluctant:

For example, 86% of lesbians* who reported engaging in oral sex with a (presumably cis-)female partner have never used a dental dam.

SAFE IS SEXY

For more information regarding safer sex among lesbians*, we recommend the brochure “Beating About the Bush” from the LGBT foundation.

<http://lgbt.foundation/get-support/downloads/detail/?downloadid=91>

HEALTH SERVICE UTILIZATION AND EXPERIENCES WITH HEALTH CARE PROVIDERS



When it comes to general health, lesbians* visit health services providers (for example their general practitioner) as often as other women*.



In a German study, ● 88% of lesbians* had a primary care physician. However, only ● 40% had disclosed their sexual orientation to them.



When it comes to sexual and reproductive health, lesbians* use services less often than other women*:



About one in ten lesbians* has never had a gynaecological check up (compared to 1% of other women*)

About 15%-21% of lesbians* (over 25) never had a vaginal swab (compared to 6-9% of women* in general)

WHY ARE LESBIANS* LESS LIKELY TO RECEIVE SEXUAL HEALTH CHECK-UPS?



Qualitative data suggests that lesbians* who don't attend a check-up, don't think that they are at risk. Some assume that they are fine, because they don't have any symptoms. In some cases, lesbians* are even told by healthcare professionals that they do not need a test. Others are too scared to get tested. Lesbians* also experience difficulties in talking openly about their sexuality or have received negative or inappropriate comments by health care professionals in previous visits.



3

In the British "Prescription for Change" survey, over half of the respondents have never been to a sexual health check-up

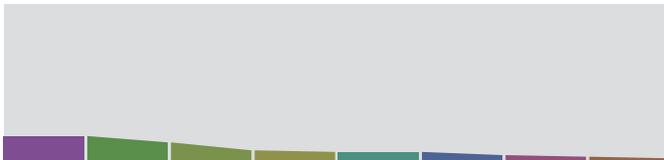


6

In getting mammograms, lesbians* do not differ from other women*.

EXPERIENCES OF DISCRIMINATION IN HEALTH CARE

- inappropriate curiosity: 16%
- specific needs ignored or not taken into account: 12%
- foregoing treatment for fear of discrimination or intolerant reactions: 7%
- having to change their general practitioner or specialists due to their negative reaction: 6%
- receiving unequal treatment when dealing with medical staff: 6%
- never accessed healthcare services: 4%
- pressured or being forced to undergo any medical or psychological test: 3%
- difficulty in gaining access to healthcare: 2%



In line with the seemingly universal finding that sexual and gendered minorities seem to be at risk of experiencing adverse mental health conditions, this also seems to be the case for lesbians in Europe. Particularly concerning are the high rates of suicide attempts and thoughts about suicide, especially among younger lesbians*. Again, these findings are especially concerning, since they stem from fairly liberal and accepting countries towards sexual and gendered minorities (e.g., Scandinavian countries or the UK). Due to the lack of sound empirical data in other parts of Europe, we can only tentatively speculate about the mental health conditions of lesbians* living in countries, where prejudices and discrimination against LGBTQIA* people may be even more prevalent.*

Apart from substance use habits, less is known about the physical health of lesbians in Europe, with some findings suggesting worse general health than their heterosexual peers (at least in some age groups). More research is needed on this topic to further investigate the soundness and the causes of these findings.*

When it comes to sexual health, lesbians seem to be considered a “low risk” group by both professionals and by lesbians* themselves. This can result in fewer visits to sexual health specialists or a reluctance on their part to perform certain checkups, such as vaginal swabs. These findings on a low attendance rate at sexual health clinics and the notion of a general “low risk” when it comes to sexual health are concerning, since lesbians* have diverse sexual histories and are able to acquire sexually transmitted infections.*

**RECOMMENDATIONS
FOR IMPROVING
THE LIVES OF LESBIANS*
IN EUROPE**

In the last decades, tremendous progress has been made throughout Europe in achieving human rights equality and improving the lives of LGBTQIA people in general and lesbians* in particular. Still, as we have seen in the previous sections, lesbians* continue to experience discrimination on various grounds and in various situations. Particularly so, because lesbians* are confronted with a marginalization on many levels: By being lesbian* in a heteronormative society and by being a woman* in patriarchal structures benefiting cis-males, they experience not only lesbophobia but also misogyny, transphobia and interphobia within both the general population and the LGBTQIA* community. In addition, they may experience discrimination on the grounds of their ethnicity, religion, ability, or any other aspect of their identity. We are therefore making several recommendations for increasing the well-being and the visibility of lesbians* in both the general public and the LGBTQIA* community:*

STRUCTURAL AND INSTITUTIONAL RECOMMENDATIONS

- **Ensuring that lesbians* in all parts of Europe can live without fear for their lives and the lives of their family and loved ones** by introducing and further promoting policies that protect human lives and human dignity
- **Ensuring protection from violence throughout Europe** by extending hate crime laws and policies to sexual and gender identity in all parts of Europe, introducing and monitoring national complaint bodies and raising awareness in authorities and professionals (e.g. police officers) on hate crimes and homo-, trans- or interphobic violence
- **Further promotion of LGBTQIA* rights by extending the possibility to form and live in legally recognized families to all lesbians*** throughout Europe (e.g. marriage legislation, reproductive and adoptive rights, access to reproductive technologies, partner benefits)

- **Further promotion and protection of the rights of trans, inter, and other non-binary people** by removing structural barriers and introducing laws on gender recognition, ensuring discrimination-free access to healthcare, education, employment, and other spheres of life
- **Further promotion of women*s rights** by introducing national action plans to remove structural barriers (such as the gender pay gap) throughout Europe
- **Raising awareness about the interaction of sex characteristics, gender and sexual identity in healthcare providers** by objectively informing them about specific needs and living conditions of lesbians* (e.g., sexual health needs, heightened mental health vulnerability) through targeted campaigns and sensitivity training led by experts on LGBTQIA* health
- **Raising awareness about sexual and gender identity in students of health sciences (and related disciplines)** by introducing lectures on sexual and gender identity and sex characteristics as well as sensitivity training sessions to health science curricula (e.g. in medicine, psychology, or social work)
- **Raising awareness about the interaction of gender identity, sexual identity and various other aspects of identity in other professionals**, such as people working in law enforcement, schools and universities or the service sector to prevent discrimination by targeted campaigns and sensitivity training

RECOMMENDATIONS FOR PROMOTING RESEARCH ON LESBIANS*

- **Inclusion of items on sexual identity and a broader spectrum of gender identity in large-scale surveys** to promote population-based research on lesbians* and their health needs and conditions in Europe
- **Promotion and funding of scientific inquiries on lesbians* in understudied regions**, specifically countries with low rankings on the

ILGA Europe Rainbow Index¹ and the TGEU Trans Rights Europe Index², where discrimination and harassment are especially prevalent

- **Raising awareness of social science researchers** on challenging heterocentrist scientific perspectives and on the importance of including sexual identity (and other aspects of identity) in their scientific work
- **Presentation of separate findings** instead of treating LGBTQIA* people as one homogenous group (e.g. conducting and presenting separate analyses for lesbians*)
- **Sharing of scientific work on lesbians* with the LGBTQIA* community** by submitting it to relevant conferences and reaching out to lesbian* organizations

RECOMMENDATIONS FOR DECISION MAKERS IN THE LGBTQIA* COMMUNITY

- **Inclusion of lesbian* voices and opinions in decision-making processes of LGBTQIA* organizations** (e.g., on executive boards and in committees, during funding decisions)
- **Raising awareness about discrimination within the LGBTQIA* community** in LGBTQIA* umbrella organizations and their members
- **Promotion of lesbian*-specific projects** by ensuring funding and raising visibility by promotion through organizational networks
- **Creation of further safe venues for lesbians* outside clubs, bars, and parties** to provide safe spaces and programmes for personal well-being and empowerment
- **Strengthening evidence-based activism** by connecting with researchers interested in LGBTQIA* issues

1 <https://www.ilga-europe.org/rainboweurope>

2 <http://tgeu.org/trans-rights-map-2017/>

**WHAT LESBIANS* LIKE
ABOUT THEIR
IDENTITY**

In the previous sections we have seen some of the challenges experienced by lesbians in (parts of) Europe: Lesbians* face discrimination including violence, they are afraid to show their affection in public, and they are at a heightened risk of developing various forms of health problems. Still, being a lesbian* can also be an empowering experience.*

As a platform meant to empower lesbians throughout Europe, we feel that it is important to also present evidence on positive aspects of having a lesbian* identity. Because evidence from Europe is lacking, we drew on a qualitative American study¹ (with 553 gay* and lesbian* participants from the U.S.) applying grounded theory to investigate some of the aspects that lesbian* and gay* people like about their identity. Three overarching topics and eleven themes have emerged in lesbian* participants (and, with one exception, in gay* participants) that we will present below. For consistency throughout the report, we refer to lesbian* participants only.*

DISCLOSURE AND SOCIAL SUPPORT

- **Belonging to a community:**

being part of a larger lesbian* or women's* community that conveys a sense of belonging and understanding emerged as the most common aspect that lesbians* like about their identity.

„LESBIAN COMMUNITIES: BOTH THE SOCIAL CONNECTION AND A KIND OF INTANGIBLE SENSE OF POWER/EMPOWERMENT IN BEING A PART OF A LARGE GROUP OF VERY CAPABLE, INDEPENDENT, AND CREATIVE WOMEN.“

¹ Riggle, E. D. B., Whitman, J. S., Olson, A., Rostosky, S. S., & Strong, S. (2008). The positive aspects of being a lesbian or gay man. *Professional Psychology: Research and Practice*, 39, 210–217.

"I FOUND IT TO BE THE LESBIANS WHO SHOWED UP, MY FRIENDS WHO BECAME MY FAMILY WHEN NO ONE ELSE WAS AROUND TO HELP WITH THE HARD THINGS ..."

- **Creating families of choice:**

being sometimes faced with a lack of understanding in their families of origins, lesbians* develop other social networks that can offer emotional or physical support (for example, lesbian* or supportive

straight friends). These families of choice are viewed as an important part of their lives, especially in emotionally difficult times.

- **Having strong connections with others:**

lesbians* enjoy their ability to form friendships with many people, regardless of their sexual or gender identity. Being unbound by heteronormative rules and conventions of gendered friendships allows them to connect more deeply with other people. Lesbians* also felt that they connected more deeply with their lesbian* partner than they had with (presumably cis-)male partners before.

- **Serving as a positive role model:**

some lesbians* who are out to colleagues and friends noted that they enjoy being positive role models for other LGBTQIA*-people in their daily lives.

INSIGHT INTO AND EMPATHY FOR SELF AND OTHERS

- **Authentic self and honesty:**

Feelings of being true to oneself and being honest about one's identity is a positive aspect that emerged for some lesbians* throughout their coming-out process and beyond. This feeling of authenticity contributed to their well-being and joy in life.

- **Personal insight and sense of self:**

Being faced with discrimination or rejection from the heteronormative society, being lesbian* can lead to a search for inner sources of strengths and acceptance.

"I AM LESS JUDGMENTAL, BECAUSE I KNOW HOW EASILY OTHERS CAN JUDGE ME. BEING 'OTHER' HAS MADE ME MORE SENSITIVE TO OTHER MINORITIES AND MORE CONSCIOUS OF THE WORK OF ACCEPTANCE THAT NEEDS TO BE DONE IN THE WORLD."

- **Increased empathy and compassion for others:**

being part of a minority, lesbians* felt that these experiences contributed to a deeper empathy for other people who belong to minority groups.

- **Social justice and activism:**

some lesbians* noted that they enjoyed being part of a larger social and political movement that fights for equal human rights.

"I LIKE THE FIGHT FOR HUMAN RIGHTS AND CONTINUING WORK TOWARD EQUALITY. BEING A LESBIAN IS MAKING THE PERSONAL POLITICAL, BEING POLITICALLY ACTIVE JUST BY BEING OUT."

FREEDOM FROM SOCIETAL DEFINITIONS OF ROLES

- **Freedom from gender-specific roles:**

lesbians* enjoy their freedom from conventional gender-roles that the heteronormative society places on women*. This includes freedom from conventions with regard to family planning (e.g., having children or marrying) as well as from conventions with regard to appearance and behavior. This freedom is often accompanied by feelings of strength and competence.

„IT GIVES ME THE FREEDOM TO BE WHO I AM, RATHER THAN TRYING TO FIGURE OUT HOW TO BE THE WOMAN SOCIETY EXPECTS ME TO BE. THAT IS VERY EMPOWERING!“

- **Exploring sexuality and relationships:**

for some lesbians*, being free from gender-specific roles also means being able to explore their sexuality and their relationship conventions more freely.

"BEING A LESBIAN IS POSITIVE BECAUSE IT PROVIDES THE OPPORTUNITY TO CREATE A LOT OF THE RULES OF LIFE AND RELATIONSHIPS. ... IT HAS A FREEDOM TO CREATE NEW TYPES OF RELATIONSHIPS."

- **Egalitarian relationships:**

lesbians* noted that the freedom from patriarchal conventions and power struggles in relationships has allowed them to form more egalitarian relationships with their partners. This finding is specific to lesbian* participants only and has not been noted by gay* participants.

"...WE DON'T FALL INTO TRADITIONAL PATTERNS OF BEHAVIOR BECAUSE WE ARE CONSCIOUS OF THE WAYS THAT THESE PATTERNS OF BEHAVIOR HAVE OPPRESSED WOMEN."

"UNLIKE PREVIOUS RELATIONSHIPS, MY RELATIONSHIPS WITH WOMEN ARE NOT FILLED WITH CONSTANT POWER STRUGGLES OR STRUGGLES TO HAVE MY VOICE HEARD AND MY NEEDS MET. . . MY GIRLFRIENDS AND PARTNERS UNDERSTAND WHAT IT MEANS TO BE SCARED TO WALK ALONE AT NIGHT, UNDERSTAND FEARS OF RAPE AND THE FRUSTRATIONS OF INEQUALITY."

Note: These findings stem from an American survey and involved participants, who were, for the most part, out to family members, friends or colleagues. Both of these conditions (i.e., living in a fairly liberal country with regard to LGBTQIA human rights and being able to be open about one's sexual identity) facilitate the ability to enjoy above mentioned aspects. Lesbians* who reside in other regions and countries that are still rife with discrimination and lesbophobic prejudices and must therefore, out of safety considerations, conceal their sexual identity, cannot enjoy these benefits of being open and authentic to themselves. They might regard above-mentioned aspects cynically with regard to their involuntary living conditions. Still, the inclusion of these findings seem important to us, since they underscore the need to make social equality and the possibility to lead a life free from discrimination a reality for every lesbian* throughout the world.*

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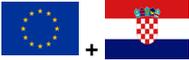


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Note 1: due to different weighting procedures, statistics used in print FRA reports may differ from those found in the data explorer
Note 2: due to the categorization scheme used in the survey, only cis-gendered lesbians are included in the results for lesbians

View their main publication on the survey here: <http://fra.europa.eu/en/publication/2014/eu-lgbt-survey-european-union-lesbian-gay-bisexual-and-transgender-survey-main>

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We thank the various people who have made this report possible: We thank all the **lesbians*** brave enough to share their experiences with the world and the **researchers** who dedicated their energy, time, and creativity to collecting and analyzing these experiences. We thank the Fundamental Rights Agency of the European Union for conducting the invaluable and unique EU LGBT survey and sharing their disaggregated data with everyone. We thank the **EL*C Board-Members** for providing their valuable feedback throughout all stages of drafting this report. We thank **Mari-Liis Sepper** from Transgender Europe and **Kseniya Kirichenko** from The International Lesbian, Gay, Bisexual, Trans and Intersex Association for providing their professional opinion on various aspects of this report. We thank **Dovilė Alseikaitė** and **Helene Traxler** for working their magic and sharing their incredible talent with us in designing this brochure and the corresponding infographics. We thank **Katrin Gyga**x for her tremendous and professional proof-reading. We thank the **participants of the first EL*C** and the innumerable **volunteers** and **local organization teams** for making it a colourful, vibrant, empowering, and unique experience for everyone. Last but not least, we thank our **partners, families, and friends** for bringing love and joy into our lives.

LESBIANS*

REACT AND ACT

SILVIA CASALINO:

To improve lesbian* visibility and advocacy, it is fundamental now to rely on disaggregated data on lesbians. And to achieve this key issue, we, lesbian activist, need political engagement from our public representatives at local and European level and financial investments.



MIHAELA RODICA DESPAN:

Together we can create the change everyone is waiting for. The EL*C gives us the power to take life-changing action and speak loudly for lesbians all over the world.



EWA DZIEDZIC:

We need protection against all forms of discrimination. Being the victim of discrimination can be emotionally and psychologically painful. We don't want to be victims at all, so let's keep protecting and promoting the fundamental rights of lesbians*: Cheers up and keep on fighting!

KATRIN GYGAX:

I experienced firsthand the evolution of lesbian life in Canada over 35 years, from brutal discrimination to marriage and family equality, as well as anti-discrimination legislation based on gender identity and expression. I support the EL*C so we can achieve the same throughout Europe.



MARIA VON KÄNEL:

The key to our future lies in starting a dialogue and establishing networks to share our visions. It's through sharing our passion, resources, knowledge and privilege and respecting our different views that we'll be able to build a diverse, rich and sustainable lesbian* movement throughout Europe.



LEILA LOHMAN:

The EL*C Brief Report is a first hand result of the unstoppable European Lesbian* Network that is about to take over! This first edition focuses on health issues & discrimination, two areas often too familiar to lesbians*. At the end of the day, this project is about helping to increase and make more visible the available data and research on the lives of lesbians* to help activists and policy makers better advocate around lesbian issues at all levels.



MARIELLA MÜLLER:

We need to achieve visibility in daily life without fear of harassment or negative consequences. Building networks, supporting and inspiring each other across borders will strengthen our lesbian movement and communities.



OLENA SHEVCHENKO:

We need to protect our identities in all public spheres on all levels. You exist only if you are visible and outspoken. So we need to invest resources in visibility. If you are a woman and lesbian* you will face multiple discrimination and patriarchal pressure, it means we need to be united in feminist movement and in our lesbian leadership.



PIA STEVENSON:

The time has long been overdue for us lesbians* to break down the social and economic barriers, preventing us from taking our place in the sun.



MAGDALENA SIEGEL:

Stigma for being lesbian* comes in many forms - all of them detrimental to physical and mental health. Combating these social inequalities and celebrating our diversity benefits all of our well-being. However, we must not let our experiences of discrimination define us.



ILARIA TODE:

Lesbians* are still discriminated and made invisible by the patriarchal society. The good news is that we can defeat it, building a strong and inclusive lesbian* community, that fights against all forms of oppression and celebrates all our differences.



MICHAELA TULIPAN:

As a lawyer working in the LGBTQIA* field I represent many lesbians* and I know what discrimination can do and I will always fight against it.



2017