About OutRight

Every day around the world, LGBTIQ people’s human rights and dignity are abused in ways that shock the conscience. The stories of their struggles and their resilience are astounding, yet remain unknown—or willfully ignored—by those with the power to make change. OutRight Action International, founded in 1990 as the International Gay and Lesbian Human Rights Commission, works alongside LGBTIQ people in the Global South, with offices in six countries, to help identify community-focused solutions to promote policy for lasting change. We vigilantly monitor and document human rights abuses to spur action when they occur. We train partners to expose abuses and advocate for themselves. Headquartered in New York City, OutRight is the only global LGBTIQ-specific organization with a permanent presence at the United Nations in New York that advocates for human rights progress for LGBTIQ people.

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Human Rights Report

Being Transgender in Iran
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Acknowledgements
Glossary

The following is a list of the most commonly used terms or institutions referred to in this report.

(Many of the definitions included here were borrowed or adapted from online materials produced by the National Center for Transgender Equality, GLAAD, the National Center for Lesbian Rights, and the University of Michigan’s Spectrum Center.) The definitions below are not comprehensive, and are included and organized to be most useful to understanding this report.

**Cisgender:**
A term for people whose gender identity and/or gender expression aligns with the gender typically associated with the sex assigned to them at birth. For example, a baby assigned female at birth, and is raised to be a woman, who grows up to have a sense of herself as a woman, might be described or recognized as cisgender.

**Cross-Dresser:**
While any person may wear clothes commonly associated with a gender other than the gender they typically express or identify with, the term “cross-dresser” is used to refer to individuals who occasionally wear clothes, or temporarily adopt grooming styles, makeup, and/or accessories culturally associated with another gender (e.g. men who occasionally dress as women). This activity is a form of gender expression and is not done for entertainment purposes. Cross-dressers do not wish to permanently change their sex or live full-time as another gender.
**Gender:**
The social construction of a person’s identity into notions of manhood, womanhood, both, or neither. Masculinity often refers to a set of behaviors conventionally attached to manhood, and femininity often refers to a set of behaviors conventionally attached to womanhood. However, in reality, men can be feminine and women can be masculine, or can exhibit both masculinity and femininity, or neither. Notions of gender shift over time and across location and culture.

**Fatwa:**
Religious decree issued by top Muslim religious authorities.

**Figh:**
Islamic jurisprudence or interpretation of Sharia law by Muslim scholars.

**Gender Confirmation Surgery (GCS):**
Refers to doctor-supervised surgical interventions, which some trans individuals may pursue as an aspect of their gender transition. Not all trans people choose to, are given access to, or can afford to undergo medical surgeries. These processes are often referred to as Sex Reassignment Surgery (SRS), and that terminology is occasionally used throughout this report, particularly in quoted material.

**Gender Dysphoria:**
A medical term occasionally used to describe feelings associated with being transgender, particularly feelings of dissonance with regard to one’s gender identity and the gender socially ascribed to a person.

The American Psychiatric Association (APA) changed the criteria for diagnosis in 2013. Some transgender advocates believe it is import to include gender dysphoria in the Diagnostic and Statistical Manual of Mental Disorders (DSM) in order for medical treatments to be covered by health insurers. However, this remains a controversial topic, as others believe that the term perpetuates the notion of trans experience as pathological.

In recent years, some Iranian trans individuals and organizations, including the Iranian Society to Support Individuals with Gender Identity Disorder (ISIGID), prefer to use the term “gender dysphoria” over “gender identity disorder,” viewing the former as less stigmatizing than the latter.

Gender dysphoria translates as *Malale Jensiyati* in Persian.
<p>| <strong>Gender Expression:</strong> | External manifestations of gender, expressed through one’s name, pronouns, clothing, haircut, behavior, voice, or body characteristics. Society identifies these cues as masculine and feminine, although what is considered “masculine” and “feminine” changes over time and varies by culture. Typically, transgender people seek to make their gender expression align with their gender identity, rather than with the sex they were assigned at birth. |
| <strong>Gender Identity:</strong> | One’s internal, deeply held sense of one’s gender. For transgender people, their own internal gender identity does not match the sex they were assigned at birth. For some people, their gender identity does not fit neatly into the options of “man” or “woman.” Unlike gender expression, gender identity is not necessarily visible to others. |
| <strong>Gender Identity Disorder (GID):</strong> | The term used by Iranian state, legal, and medical officials to refer to the experience of being trans. Iranian media and government officials generally refer to trans individuals as individuals with gender identity disorder. Gender identity disorder translates as <em>Ekhtelale Hoviyate Jens</em> in Persian. With regard to medicalization of experience, many trans individuals and advocates prefer the term “gender dysphoria.” |
| <strong>Gender Transition:</strong> | Gender transition may or may not include some or all of the following personal, medical, and legal steps: telling one’s family, friends, and co-workers one is trans; using a different name and new pronouns; dressing differently; changing one’s name and/or sex on legal documents; hormone replacement therapy (HRT); and possibly (though not always) one or more types of surgery. The exact steps involved in transition vary from person to person. |
| <strong>Hijab:</strong> | The Islamic dress code for women that requires them to dress modestly and cover their heads. |
| <strong>Hormone Replacement Therapy (HRT):</strong> | The process of administering hormones (i.e. estrogen, testosterone) to trans individuals in order to align their sexual characteristics with their gender identity. |
| <strong>Human Rights Commision</strong> | The expert UN body that monitors implementation of the ICCPR. |
| <strong>ICCPR:</strong> | International Covenant on Civil and Political Rights. Iran ratified ICCPR in 1975. |</p>
<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
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<tr>
<td><strong>Intersex/Intersexuality:</strong></td>
<td>Being born with sex characteristics that do not fit the typical classification of male or female, such as reproductive organs and chromosomal patterns. Traits may become discernable at different stages such as at birth or during puberty, or may not appear at all, as is the case with some chromosomal variations. An intersex person may identify as male, female, or neither.</td>
</tr>
<tr>
<td><strong>Iranian Society to Support Individuals with Gender Identity Disorder (ISIGID):</strong></td>
<td>The first and only legally registered advocacy NGO for trans rights in Iran, founded in late 2007. The organization’s website is accessible at gid.org.ir.</td>
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<tr>
<td><strong>Islamic Penal Code (IPC):</strong></td>
<td>The Islamic Penal Code is the official name of the Iranian penal code, which was amended in May 2013.</td>
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<tr>
<td><strong>Legal Medicine Organization (LMO):</strong></td>
<td>An independent medical institution affiliated with the Iranian judiciary, and is the legally recognized medical authority responsible for fielding court-related medical inquiries and determining issues such as cause of death; performing autopsies; “confirming” the occurrence of rape, sexual assault, physical assault, and sodomy; and for confirming the qualification of individuals to undergo medical gender transition processes. The LMO is known as Pezeshk-Ghanoni in Persian. For more information, please visit the official website of the Iranian Legal Medicine Organization, available at <a href="http://www.lmo.ir/">http://www.lmo.ir/</a>.</td>
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<tr>
<td><strong>LGBTIQ:</strong></td>
<td>In English, this acronym has come to represent lesbian, gay, bisexual, and transgender. This acronym frequently replaces the term gay, and is constantly developing as activists are seeking to be inclusive of individual experiences by adding, for example, “Q,” which represents queer, and “I,” which represents intersex.</td>
</tr>
<tr>
<td><strong>Military Draft Board (MDB):</strong></td>
<td>The recruitment and registration of all Iranian men for compulsory military service in Iran is the responsibility of the Military Draft Board (MDB) (Nezam Vazife in Persian), which is a unit of Iran’s law enforcement agency. Their official website is accessible at <a href="http://vazifeh.police.ir">http://vazifeh.police.ir</a>.</td>
</tr>
<tr>
<td><strong>National Organization for Civil Registration (NOCR):</strong></td>
<td>The state agency in charge of issuing national identification cards (Karte- shenasayi- Melli) and birth certificates (known as Shenasnameh) in Iran. NOCR is part of the Iranian Ministry of Interior. For more information, please see their official website, available in Persian at <a href="https://www.sabteahval.ir/">https://www.sabteahval.ir/</a>.</td>
</tr>
<tr>
<td><strong>OutRight:</strong></td>
<td>OutRight Action International, formerly the International Gay and Lesbian Human Rights Commission</td>
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<td><strong>Queer:</strong></td>
<td>This term has different meanings to different people. It can be an expression of political outlook, and it can also be an umbrella term for anyone who does not identify as heterosexual, or who feels they do not fit into the definitions of other labels. In the past, it has been used as a derogatory term to insult people, but it has been largely re-appropriated by communities.</td>
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<td><strong>Sex:</strong></td>
<td>The classification of people as male, female, or other category based on bodily sex characteristics. At birth, infants are generally assigned a sex, usually based on the appearance of their external anatomy. (This is what is written on the birth certificate.) However, a person’s sex is actually a combination of bodily characteristics, including: chromosomes, hormones, internal and external reproductive organs, and secondary sex characteristics, which may or may not conform to conventional notions of maleness and femaleness.</td>
</tr>
<tr>
<td><strong>Sexual Orientation:</strong></td>
<td>An individual's enduring physical, romantic, and/or emotional attraction to a specific category of gender or to more than one gender. Gender identity and sexual orientation are not the same. For example, transgender people may be straight, lesbian, gay, or bisexual, among other identity categories. Some people identify as asexual, which may indicate that they do not experience a feeling of physical, romantic, and/or emotional attraction to other people.</td>
</tr>
<tr>
<td><strong>Sex Reassignment Surgery (SRS):</strong></td>
<td>A series of surgeries and medical procedures to alter physical sexual characteristics in order to align the individual's physical characteristics with the gender with which they identify. Not all trans persons desire or have access to such medical procedures.</td>
</tr>
<tr>
<td><strong>Social Crisis Intervention Center:</strong></td>
<td>Part of the social emergency coordination center of the State Welfare Organization (SWO) in Iran, and is responsible for assisting individuals struggling with personal, family, or social crises. Established in 1999, the center runs a 24-hour hotline (known as “123 hotline”) and has branches in all provinces in Iran.</td>
</tr>
</tbody>
</table>
**Sharia law:** The legal system for Islam that derives from the Quran, Islam's holy text, and the Sunnah, or religious traditions based on the sayings of the Prophet Muhammad. It acts as a code of conduct governing many aspects of the personal and public lives of Muslims. In Iran, Sharia law is based on the Imamiyyah school of Shia Islam, which is the official state religion and religion of the majority of Iranians.

**SOGI:** Sexual Orientation and Gender Identity

**State Welfare Organization (SWO):** A state agency established in 1980 to serve “disabled and underserved segment of the society,” called Beh-zisti in Persian.

**The Support Center for Transgender Iranians (Mahtaa):** An online trans group inside Iran that provides helpful information and resources for trans community members. Their website is mahtaa.com.

**Tooman:** Iranian unit of money. Technically, Iranian currency is referred to as Riyal, but in day-to-day business dealings, Iranians use Tooman as the unit of money. Each Tooman is 10 Riyals. Over the past few decades, the Iranian Tooman has been sharply devalued against other international currencies. The following charts demonstrate the exchange rate between Tooman and US dollar based on the official rate of Iran’s Central Bank (the actual black market rate is always higher):

![OFFICIAL CURRENCY RATES IN IRAN (IN TOOMANS) FROM JANUARY 2000 TO JANUARY 2016](source: Iran Central Bank, http://www.cbi.ir/ExRates/rates_fa.aspx)

<table>
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<tr>
<th><strong>Trans:</strong></th>
<th>Used as shorthand to mean transgender or transsexual, or sometimes to be inclusive of a wide variety of identities under the transgender umbrella.</th>
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<tbody>
<tr>
<td><strong>Transgender:</strong></td>
<td>An umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they were assigned at birth. People under the transgender umbrella may describe themselves using one or more of a wide variety of terms—including, but not limited to, transgender, transsexual, or gender non-binary. Some of those terms are defined below. For the purposes of inclusiveness, the abbreviated term “trans” is most often used throughout this report. It is always most considerate to use the descriptive term preferred by the individual. Some transgender people pursue medical transition processes such as receiving hormones from their doctors or undergoing surgery to change their bodies. However, not all transgender people can or will take those steps, and a transgender identity is not dependent upon medical procedures.</td>
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<tr>
<td><strong>Transgender man or “trans man”:</strong></td>
<td>People who were assigned female (or a sex other than male) at birth but identify and live as a man may use this term to describe themselves. Some may also use FTM, an abbreviation for female-to-male. Some may prefer to simply be called men, without any modifier. It is best to ask which term an individual prefers.</td>
</tr>
<tr>
<td><strong>Transgender woman or “trans woman”:</strong></td>
<td>People who were assigned male (or a sex other than female) at birth but identify and live as a woman may use this term to describe themselves. Some may also use MTF, an abbreviation for male-to-female. Some may prefer to simply be called women, without any modifier. It is best to ask which term an individual prefers.</td>
</tr>
</tbody>
</table>
**Transsexual:** An older term that originated in the medical and psychological communities. Still preferred by some people who have permanently changed—or seek to change—their bodies through medical interventions (including, but not limited to, hormones and/or surgeries). Unlike transgender, transsexual is not an umbrella term. Many transgender people do not identify as transsexual and prefer the word transgender. It is best to ask which term an individual prefers. In the Persian language, “transsexual” is often used to describe both transgender and transsexual individuals. This is mainly due to the fact that the concept of gender is new to the language, and many people do not differentiate between sex and gender. Such a linguistic ambiguity should be kept in mind while reading some of the quotes in this research, in which individuals used the word “transsexual” in reference to a broader trans experience.

**UN:** United Nations

**UNHCR:** UN High Commissioner for Refugees, the UN refugee agency
Executive Summary

The Islamic Republic of Iran conceptualizes trans people through the clinical framework of gender identity disorder (GID) and, in response, provides limited subsidized support to specific forms of transition-related healthcare—including gender confirmation surgery (GCS), hormone replacement therapy (HRT), and various forms of psychosocial counseling.

Although the medicalization of issues related to gender identity has allowed for some legal recognition for members of the trans community, it has also reinforced the stigma rooted in the notion that trans individuals suffer from psychological and sexual disorders and require treatment to become “normal.”

Iranian law allows for the legal recognition of trans individuals’ gender identity; however, such recognition is only granted to individuals officially diagnosed with GID and upon their successful completion of a long process of legal and medical gender transition. The government’s position has led some observers to conclude that Iran is progressive on trans rights. While there are positive aspects to the government’s policies, trans Iranians continue to face serious discrimination and abuse in both law and practice, and they are rarely treated as equal members of society.

Iranian law fails to recognize the gender identity of any trans individual who is not granted access, does not wish, or cannot afford to pursue GCS. This deprives many of legal recognition and renders them particularly vulnerable to harassment and discrimination. The law utterly fails

to recognize transgender individuals who do not desire medical intervention or may wish to decide for themselves which medical procedures are right for them.

Over the past decade, several Iranian government agencies and institutions have made efforts to act in a coordinated and deliberate way to raise awareness and address the urgent needs of transgender Iranians. Yet, sizeable gaps in support persist. The absence of comprehensive legal protection, the lack of access to comprehensive and culturally competent healthcare, the often-extreme violence and abuse at the hands of private and state actors, and the narrow definition of trans identities combine to severely limit the safety, wellbeing, and opportunities available to trans Iranians.

Trans individuals recognized by the state, seeking recognition by the state, and/or living without state recognition generally experience discrimination and abuse based on their gender identity. The Iranian trans community faces pressure from both state and non-state actors, ranging from hostile public attitudes to acts of extreme violence, risk of arrest, detention, and prosecution. Most trans individuals interviewed for this report highlighted their personal experiences with bullying, domestic violence, social discrimination, and legal persecution as a result of their gender identity. Their experience is heightened by Sharia-based laws—including mandatory segregation of women and men in schools and major public transportation systems, along with a strict gender-specific public dress code—that restrict behavior or expression viewed as gender non-conforming, and prohibit individuals from publicly “cross-dressing” or “appearing as members of the opposite sex.”

This report was developed through interviews with 34 trans Iranians, within and outside Iran, as well as through research into a wide range of text-based sources and through limited responses from the Iranian government. This report is intended primarily as a resource for the Iranian trans community and for trans rights advocates working in and around Iran.

2 According to Dr. Morteza Rostami, an Iranian sociologist who teaches at Tabatabai University in Tehran, the social pressures on trans individuals are so high that Dr. Rostami speculates that “100% of trans individuals have had at least one suicidal thought, and 70% of them attempt suicide.” For additional information, see the April 17, 2014, Panel Discussion on “Living Transsexual in Iran,” available in Persian at http://mehrkhane.com/fa/news/10770/

3 According to Dr. Morteza Rostami, an Iranian sociologist who teaches at Tabatabai University in Tehran, the social pressures on trans individuals are so high that Dr. Rostami speculates that “100% of trans individuals have had at least one suicidal thought, and 70% of them attempt suicide.” For additional information, see the April 17, 2014, Panel Discussion on “Living Transsexual in Iran,” available in Persian at http://mehrkhane.com/fa/news/10770/[accessed January 5, 2016].

Methodology

This report documents the collective experiences of trans Iranians based primarily on their own testimonials.

The goal of OutRight Action International (OutRight) has not been to present these testimonials as those of a “sample group” or to extract statistical information as part of a quantitative study, but rather to elucidate commonalities in experience that point to shared challenges and targets for continued advocacy, while remaining attentive to the nuances and layers in the narratives that were shared with us. The report is based on interviews and documents gathered by OutRight from the public domain. It is organized according to the most frequent categories of rights violations, including occasionally detailed descriptions of discrimination, harassment, physical violence, and marginalization, which many trans Iranians reported experiencing throughout their lives.

OutRight spoke with 34 Iranian trans people between September 2012 and January 2015. During this period, OutRight staff travelled twice to Turkey (in September 2012 and again in November 2014) and once to Canada (in August 2013) to meet and interview trans refugees and asylum seekers. The Iranian government does not allow NGOs such as OutRight to enter the country to conduct independent investigations into human rights abuses. However, we also interviewed other Iranian trans individuals inside and outside Iran through phone, Skype, and online messenger services. Interviewees ranged in age (from 22 to 38 years old), as well as in socio-economic class, educational achievement, area and level of professional

Many individuals inside Iran are not comfortable having extended conversations on human rights issues via telephone or e-mail, fearing they are subject to government surveillance.
skill, culture, religion, and geographic locality of upbringing.

Finally, OutRight used over 50 text-based sources (existing transcripts of interviews, legal documents, Iranian government communications, conference reports, and publications) related to the situation of the trans community in Iran. The English translation of the interviews and the first draft of the report, which were in Persian, and the subsequent extensive consultations with a number of country and thematic experts to ensure the accuracy of the reports, was an involved process. Though the process was time-consuming, it helped us to prepare a report that aspires to portray the growing needs and the evolving nature of the Iranian trans community.

Throughout the interviews, the names of several state agencies were frequently brought up as institutions that directly or indirectly interact with the Iranian trans population throughout various stages of their lives. These government institutions, whose policies and practices impact the lives of the Iranian trans community to varying degrees, include the police; judiciary; Ministry of Health and Medical Education (Ministry of Health); Ministry of Education; Ministry of
As part of OutRight’s investigation, we reached out to these state agencies directly for response regarding their position on the treatment of trans individuals. Unfortunately, with the exception of the Ministry of Education (Welfare Department), none of the agencies responded.8

Many individuals inside Iran are not comfortable having extended conversations on human rights issues via telephone or e-mail, fearing they are subject to government surveillance. Some who are outside the country do not feel comfortable revealing their identities for fear of their safety or retribution against their families inside Iran. In order to protect the privacy and safety of individuals interviewed as part of this research, we have changed the names of the interviewees and used pseudonyms. Similarly, some of the identifying details of the testimonies were changed to protect the identities of trans individuals whose testimonies were used in this publication. This report was developed through the efforts of trans individuals both within and outside of the Iranian community and was shared with members of the Iranian trans community prior to publication for refinement as a record and resource.

OutRight Action International extends its thanks to those who provided information for this report.

5 Legal Medicine (Pezeshk-Ghanoni in Persian) is an independent medical institution affiliated with the Iranian judiciary, and is the legally recognized medical authority responsible for fielding court-related medical inquiries and issues such as determining cause of death; performing autopsies; “confirming” the occurrence of rape, sexual assault, or physical assault; performing anal probes (for men accused of sodomy); and confirming the qualification of individuals to undergo gender-confirmation surgery. For more information, see the official website of the Iranian Legal Medicine Organization, available at http://www.lmo.ir/.

6 State Welfare Organization of Iran (Beh-zisti) is a state agency established in 1980 to serve the “disabled and underserved segment of the society.” In 2011, the Iranian Parliament passed legislation, bringing the organization under the supervision of the Ministry of Cooperatives, Labor and Social Welfare. For more information about the history of Beh-zisti, see the “About Us” section of the organization’s official website, available at http://www.behzisti.ir/RContent/0007Z.aspx [accessed October 30, 2015].

7 The recruitment and registration of all Iranian men for compulsory military service in Iran is the responsibility of Military Draft Board (MDB) (Nezam Vazife in Persian), which is a unit of Iran’s law enforcement agency. Their official website is available at http://vazifeh.police.ir.

8 In an email dated April 4, 2015, and signed by the head of the department, the Ministry of Education acknowledged the receipt of OutRight’s email without offering any response or clarification.
Background

Transgender Rights Recognition in Iran

Iranian trans advocates have been crucial to the advancement of trans rights recognition in Iran.

In 1986, after years of petitioning and repeated inquiries, Iranian trans woman and advocate, Ms. Maryam Khatoon Molkara, convinced the late Supreme Leader, Ayatollah Khomeini, of the importance and urgency of specific forms of transition-related healthcare—such as HRT and GCS—for Iranian trans individuals. The result was a famous religious decree, or fatwa, by Ayatollah Khomeini declaring these forms of healthcare to be religiously acceptable. In doing so, Ayatollah Khomeini argued that the religious justification for the ruling was based on the “priority of the soul over flesh.” Ayatollah Khomeini’s fatwa revolutionized the traditional understanding of

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9 For more information, see the following page and “Maryam Khatoon Molkara,” available in Persian at http://www.mahtaa.com/1391/05/


11 The original fatwa of Ayatollah Khomeini in his own handwriting and with his seal is on the website of the Support Center for Iranian Trans (Mahtaa in Persian), available at http://www.mahtaa.com/1391/05/
Maryam Khatoon Molkara (1950 – March 25, 2012) is considered to be pioneer of the trans rights movement in Iran. Assigned male at birth with the name Fereydoon, she lost her job in Iran’s state-run radio and TV after the 1979 Islamic revolution for identifying as a trans woman. Maryam Khatoon Molkara became active on issues of trans rights, and in 1974 she managed to meet with then Queen of Iran Farah Pahlavi to obtain her verbal support for the issues and concerns of trans individuals. After the Islamic Revolution, Molkara advocated with various influential religious and political leaders, including then Speaker of the Parliament Hashemi Rafsanjani (who later became Iran’s president), and persuaded Iranian revolutionary leaders to support transgender rights. In 1984, she wrote a letter to Ayatollah Khomeni’s office (which was passed to him through his representative Ayatollah Janati), but the answer she received from Khomeini’s office concerned intersex rather than trans experiences. It took Maryam another two years, and a physical fight with Aatollah Khomeini’s security guard, to finally meet the late Iranian Supreme leader and to convince him to issue the famous religious decree on the permissibility of gender confirmation surgery in Islam. Following the fatwa, then Iranian president (and the current Supreme Leader) Khamenei presided over a ceremony in which Maryam was officially acknowledged as a woman. In 2007, she established the Iranian Society to Support Individuals with Gender Identity Disorder (ISIGID) (http://gid.org.ir), as the first legally registered advocacy organization for transgender people in Iran.
sexuality and gender in Shia Islam and in Iran, and eventually opened the door for trans Iranians seeking transition-related health-care and legal identity recognition, so long as they were willing to submit to judicial and medical approval. (For more information on the rights gains resulting from advocacy by the trans community, please see page 28 of this report under the section titled “Military Service.”)

The text of the original fatwa by Ayatollah Khomeini about sex reassignment surgery for trans individuals, which reads: “In the name of the Almighty. God willing, Sex reassignment if advised by a reliable doctor is permissible, I hope you are safe and those who you have mentioned treat you well.” Photo courtesy of gid.org.ir.

Twenty-seven years later, in 2013, for the first time the issue of “sex reassignment” was codified in law by Iran’s parliament. Pursuant to Section 18 of Article 4 of The Family Law, ratified in March 2013, decisions regarding “sex reassignment” are within the purview of the family court. In an advisory opinion issued by the judiciary’s Legal Department (Opinion number 4/8/92-1444/92/7), the agency further clarified the legal process for those applying for gender confirmation surgery (referred to below as sex reassignment surgery, or SRS):

Before going through SRS and applying for a change of gender in identity cards, the applicant is first required to obtain court authorization...In considering the request, the court should refer the issue to the LMO. Based on the opinion of the LMO, as well other circumstances, and after investigating the situation of the applicant, the court will issue the appropriate decision.

The judiciary's advisory opinion makes it clear that the court opinion “is merely meant to confirm the need for the surgery [and not to force the applicant to undergo the process] and is subject to appeal.” Yet only after the completion of GCS can the applicant request the court to compel the National Organization for Civil Registration (NOCR) to issue a new identification card with a gender marker reflective of the trans individual's gender

[accessed January 6, 2016]. Ayatollah Khomieni's fatwa reads: “In the name of the Almighty. God willing, Sex reassignment if advised by a reliable doctor is permissible, I hope you are safe and those who you have mentioned treat you well.” Since then, Khomeini's argument about “priority of soul over flesh” has been used as authorization for Iranian medical community to perform gender confirmation surgery. For example, see the 2014 interview of the head of SWO in Kermanshah province, available in Persian at http://www.farsnews.com/printable.php?nn=13930520000272 [accessed January 6, 2016]. Also see a more detailed examination of the Shiite Jurisprudence on SRS, “Figh' and Sex Reassignment Surgery,” Mahboubeh Hossein Zadeh, available in Persian at http://mehrkhane.com/fa/news/8209 [accessed January 6, 2016].

13 To read the full text of this opinion (Opinion number 4/8/92-1444/92/7), see the Iranian Bar Association Union’s website, available at http://www.scoda.ir/?p=3328 [accessed January 6, 2016].
14 National Organization for Civil Registration (NOCR) is the state agency in charge of issuing national identification cards (Karte- Shenasayi- Melli) and birth certificates (known as Shenasnameh) in Iran. NOCR is part of Iranian Ministry of Interior. For more information, see the official website of the organization, available in Persian at https://www.sabteahval.ir/tab-24.aspx.
identity, rather than of the gender marker assigned to them at birth.15

As a result, trans individuals in Iran who do not wish to pursue medical transition processes, who cannot afford such processes, or who wish to pursue some forms of medical gender transition but not others, are wholly deprived of legal identity recognition and face severe barriers to maintaining and pursuing education, to accessing housing and employment, and to moving freely and safely through society. The law does not recognize such trans individuals, nor does it provide space or legal recognition for individuals who identify across or outside of the gender binary. (For more on this topic please see, “Rights of Trans Individuals Who Have Not Pursued Medical Transition Processes,” on page 27.)

Ghazal Zaferani, an Iranian lawyer who has represented dozens of trans clients in family court, further explained the legal process for obtaining a new ID card in a local paper:

First, the applicant should apply for an SRS permit from the local branch of the family court. After reviewing the application, the court refers him/her to the LMO so that they can examine the person and issue their medical opinion. If the LMO approves the individual’s need for SRS, the court will issue the permit so that she/he can start treatment and ultimately undergo surgery. Upon completion of the SRS, the applicant must

15 Based on Section 14 of Article 20 of Civil Registration Law, NOCR can reissue a new ID card with a different gender marker only for individuals “who have [already] changed their gender and [have obtained] a[n] order from the court of competent jurisdiction for their new gender to be reflected in their official identification documents.” The regulation page is available at https://www.sabteahval.ir/default.aspx?tabid=81 [accessed January 6, 2016].
submit the medical records and proof of the SRS to the court, along with a petition to the NOCR to amend the national ID to reflect his/her new name and gender. Based on these documents, the court then issues an order for the NOCR to update and reissue the trans person’s official records.  

As of January 2016, there was no other legislation besides this in Iran that defined or protected the rights of trans individuals, either before or after the judicial and medical transition processes requisite for legal gender recognition. In 2005, two trans individuals filed a complaint with Iran’s Islamic Human Rights Commission (IHRC), reporting systematic abuse and discrimination on the basis of gender identity. The IHRC declared that transgender rights are not adequately respected in Iran and noted the absence of any legislation protecting the community. Yet, no specific legal protections have thus far been adopted.  

Over the past few years, the State Welfare Office has reportedly been working on a draft bill to support the rights of trans individuals. Though the full text of the draft bill has never been made public, Mr. Valiollah Nasr, the Head of the Social Vulnerability Office at the SWO, maintains that, if passed, the law would officially designate trans experience as a disorder [gender identity disorder] and “require all state agencies to offer services to these individuals” in an effort to solve problems related to “health issues, military service, student dorms, etc.” On March 16, 2015, SWO officials were quoted by the media that the draft bill is still being reviewed by various departments within the Ministry of Cooperatives, Labor and Social Welfare, and has not yet been submitted to President Hassan Rouhani’s cabinet for review, nor to parliament for approval. As of May 24, 2016, the last day of the ninth post-Islamic revolution parliament, no bill on trans rights was presented or passed by the Iranian parliament.


17 IHRC (ihrc.ir) is an Iranian NGO registered as the national human rights institution of Iran with the UN Office of the High Commissioner of Human Rights. For more information, see http://nhri.ohchr.org/EN/Contact/NHRI/Lists/National%20Institutions/DispForm.aspx?ID=89&ContentTypeId=0x010600AD1066A1AC573D44BEF88779E4AEA368 [accessed January 11, 2016]. No information is available on the official website of the IHRC about its mandate, its constituencies, and its source of funding. The website, though, lists all pro-government or state-funded organizations as Iranian NGOs, available at http://www.ihrc.ir/Links.aspx?Group=6&Title=‌%دولتی%غیر%ایران%داخلی‌نهادهای [accessed January 11, 2016]. The organization was established in March 1995 to serve as the National Human Rights Institute of Iran, based on the Paris Principles. For more information, see http://www.yaserziaee.blogfa.com/post-183.aspx [accessed January 11, 2016].

18 For more information, see “Gender Dissatisfaction and Patriarchal Society,” Zakeri, O., in Behroozi, the digital publication of SWO’s Yazd Branch, March 2015, page 11, available at http://www.yazdehrooz.ir/content/newspaper/Version1/0/Page11/Block1054/newspaperb_1054.jpg [accessed January 8, 2016].


Trans Advocacy Groups Inside Iran

As of May 2016, there was only one registered NGO representing the interests of the trans community inside Iran. The Iranian Society to Support Individuals with Gender Identity Disorder (ISIGID) is the first and only legally registered trans advocacy group in the country. It was established by the late Maryam Khatoon Molkara, who is widely regarded as the “mother of trans community in Iran.” In her 2007 interview with the Iranian daily Etemad, she described the difficulties of securing government permission for this organization:

After several years, our request [to establish a legally recognized NGO for the trans community] was finally approved by then Iran’s President [Khatami] and his Intelligence Minister. We subsequently successfully completed the bureaucratic registration process. But during the new administration [of President Ahmadinejad], the head of the Social Affairs Office at the Ministry of Interior rejected our NGO application and we have not yet been able to register the group.

In the same article, the newspaper noted that Ms. Molkara was using her private residence in Karaj to “provide trans individuals with pro bono post-surgery recovery care and helping them gain access to sound legal and medical advice.” Shortly after the Etemad interview, however, Ms. Molkara’s organization was reportedly allowed to register with the State Registration’s General Office after being approved by the “NGO Supervision Office of the Ministry of Health” and by “several ministries and state agencies.” Based on government records, ISIGID’s declared mission at the time of registration was “to identify, organize, support and [help] treat individuals with gender identity disorder.” To achieve its objectives, the organization outlined six areas of activities: 1) public education and outreach; 2) compiling a national database of trans individuals; 3) follow-up on old SRS cases to evaluate their level of success; 4) collecting public donations for the trans community; 5) connecting with international academic centers; and 6) improving the treatment of trans individuals.

Following the death of Ms. Molkara in March 2012, the society’s activities came to a temporary halt. In January 2015, the Interior Ministry renewed ISIGID’s NGO license for another two years and officially listed Mr. Mohammad Ali

23 Karaj is a city outside the Iranian capital, Tehran.
Taherkhani as the new executive director of the organization.\(^\text{29}\) In a September 2015 interview with the Iranian state-run newspaper, Iran, Mr. Taherkhani clarified that ISIGID, which operates from a small room in the basement of the Social Service Center of a local municipal building, had very limited financial resources. He explained that the organization’s main activity was convening bi-monthly support groups for trans community members.\(^\text{29}\) As of January 2016, the organization’s website lists its activities as distribution of educational DVDs on GID,\(^\text{31}\) organizing workshops on HIV prevention and care,\(^\text{32}\) and offering self-help workshops for members.\(^\text{33}\) As of 2016, the ISIGID’s website has limited the scope of the organization’s activities to public education, organizing workshops, and supporting trans individuals.\(^\text{34}\)

ISIGID currently advocates for the use of the term “gender dysphoria” instead of “gender identity disorder,” maintaining that “the most common treatment for gender dysphoria is medical treatment, especially gender reassignment through SRS...along with hormone therapy.”\(^\text{35}\)

In addition to ISIGID, an online group known as The Support Center for Transgender Iranians (Mahtaa in Persian) covers stories of interest to the trans community in Iran. The group, which does not seem to be legally registered as a trans advocacy group, has an extensive presence on Facebook\(^\text{36}\) and other social media,\(^\text{37}\) and its website provides a lot of resources to assist members of the Iranian trans community.\(^\text{38}\) In light of the limited resources available to Iranian trans advocates, many seek the support of local institutions, such as municipalities and influential religious figures. In January 2016, Empowerment and Support Committee of Tehran Municipality,\(^\text{39}\) an NGO, sponsored ISIGID’s “first Gathering of Individuals with Gender Identity Disorder.” The event brought together members of the trans community, as well as a number of religious, medical, and state representatives, and was widely publicized by the Iranian media, including in the state-run newspaper, Iran.\(^\text{40}\) Some trans individuals have also reported getting local religious and


\(^{30}\) To read the entire interview of Mr. Taherkhani with Iran Newspaper, see http://iran-newspaper.com/Newspaper/BlockPrint/86639 [accessed January 13, 2016].

\(^{31}\) For more information about this DVD, which was produced with support from Tehran’s Municipality, see http://gid.org.ir/پروژه-توریم-محصولات-الزمن/ [accessed January 13, 2016].


\(^{33}\) For example, see the announcement for the workshop on developing skills for sympathy and solidarity, available at http://gid.org.ir/کارگاه-آموزش-مهمت-حیات‌های-محافظه‌کاری [accessed January 13, 2016].

\(^{34}\) See the “About Us” section of ISIGID, available at http://gid.org.ir/آمریکا‌سود [accessed January 13, 2016].

\(^{35}\) You can see the full list of questions and answers on ISIGID’s website, available at http://gid.org.ir/سوالات-مشترک [accessed January 8, 2016].

\(^{36}\) See the Facebook page of Mahtaa, available at https://www.facebook.com/transe.gomnam [accessed January 13, 2016].


\(^{38}\) To learn more about Mahtaa, see their website, available at http://www.mahtaa.com/donate-us/ [accessed January 13, 2016].

\(^{39}\) For more information about this committee, see their official website, available at http://www.tehransaman.ir/.

\(^{40}\) To read the report from this gathering, see the January 16, 2016 story in Iran Newspaper, available at http://iran-newspaper.com/Newspaper/BlockPrint/111967 [accessed January 21, 2016].
municipal leaders to counsel their families about their experiences and desire to pursue transition-related medical care.\(^{41}\)

**State Support for Trans People**

Under existing regulations, there are several key government agencies tasked with addressing various aspects of the trans community’s needs. According to the government’s guidelines on “Supporting Patients with Gender Identity Disorder,” the official diagnosis of GID is the responsibility of the Legal Medicine Office. Providing medical care to trans individuals is primarily the responsibility of the Ministry of Health. The provision of social and psychosocial support for trans patients is assigned to the State Welfare Office.\(^{42}\) Other state agencies involved in supporting Iranian trans community members include the Ministry of Labor, which coordinates national political and legal advocacy efforts in support of the trans community; the Law Enforcement Agency, which refers trans individuals that are reported to them to the SWO; the NOCR, which reissues national ID cards after judicial and medical approval; and the Military Draft Board, which assesses whether trans individuals should be exempted from compulsory military service.\(^{43}\) In addition to these agencies, Iran’s state-run Imam Khomeini Relief Foundation,\(^{44}\) which is in charge of providing services to low-income and vulnerable populations, provides financial assistance to qualified trans individuals, and (on a limited basis) offers disability benefits to trans individuals who are not able to work.\(^{45}\)

“The authorities arrested my friend Ramin [on suspicion of being gay]. They kept him in jail for two years, and even though they had nothing against him, he was lashed in public. The fear of execution, torture, humiliation and being beaten always stayed with me. I was scared all the time even though I was never caught.”

- Martha from Arakn

The SWO leads national efforts to support trans community members through initiatives such as “the admission of individuals with gender identity disorder to Crisis Intervention Centers,”\(^{46}\)

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44. The official website of the foundation is available at http://www.emdad.ir/.


46. Crisis Intervention Centers are part of Social Emergency Coordination Center of SWO and are responsible for assisting individuals struggling with personal, family, or social crises. Established in 1999, the center runs a 24-hour hotline (known as “123 hotline”) and has branches in all provinces of Iran. For
the provision of social services, “psychosocial counseling, legal aid, and medical transition-related care.”47 The SWO’s website lists two main objectives in connection with its trans-related outreach and provision of services: “1) improving the quality of life of individuals with gender identity disorder through social and psychological support and 2) educating and training the public, families of individuals with gender identity disorder, and the individuals who have gender identity disorder.”48 In its report to the 57th session of UN Committee on the Status of Women (CSW), which took place between March 3 and March 15, 2013, the Office of Iran’s Vice President in Charge of Family and Women’s Affairs, Shahindokht Mowlaverdi, highlighted these activities of the SWO with regard to Iran’s record in relation to the transgender community.49

The history of government involvement in trans issues dates back to the late 1990s. The LMO was first tasked with authorizing transition-related medical care in 1999.50 In the same year, more information, please see the Center’s website, available at http://123.behzisti.ir/RContent/00027M.aspx [accessed January 14, 2016].

The Ministry of Health formed a committee to address trans issues and took the lead on managing the medical treatment of trans individuals. The provision of social and psychosocial support fell on the SWO. Unfortunately, the Ministry of Health committee never reconvened, and no follow-up took place.51 This resulted in significantly diminishing the role of the Ministry in helping trans individuals, reducing its primary function to providing a list of recommended, reputable doctors and medical centers that provide GCS-related services.52 In early 2000, the Iranian government established the National Committee to Organize Individuals with Gender Identity Disorder in order to address trans-specific issues and concerns. Shortly thereafter, this committee came under the supervision of the Office of Social Vulnerability Affairs at the SWO.53

51 The interview with Valiollah Nasr, the head of the Social Vulnerability Office at the State Welfare Organization, March 16, 2015, is available at http://www.ilna.ir/بخش-اجتماعی-2015-2016-سوم-سالانه-برگزاری-سیمینار-به-اختلال-جنسی [accessed January 7, 2016]; also see “They want the right to vote: the hidden and the obvious about individuals with gender identity disorder,” published in Shargh newspaper on February 16, 2004, the original article is no longer available online, but a copy of the article is available at http://helpts.blogspot.se/2013/04/blog-post_3600.html?zx=a79d843e65ec64f2 [accessed January 9, 2016].


53 For a list of responsibilities of this committee, in Persian, please see the official website of the Iranian State Welfare Organization, available at http://www.behzisti.ir/Modules/Show_PrintDetails.aspx?TableName=tblServices&SelectId=54 [accessed January 6, 2016]; also see “They want the right to vote: the hidden and the obvious about individuals with gender identity disorder,” published in Shargh newspaper on February 16, 2004, the original article is no longer available online, but a copy of the article is available at: http://helpts.blogspot.se/2013/04/blog-post_3600.html?zx=a79d843e65ec64f2 [accessed January 9, 2016].
In 2001, the Shaheed Navab Safavi Crisis Intervention Center launched a pilot project to “organize and support trans patients” as part of the government’s efforts to address the needs of the trans community.54 According to the former head of the Navab Safavi Center, Maryam Hosseini, “services provided in this center include providing information and guidance to clients to start the treatment process, helping them with the LMO application for SRS... and counseling family members of the clients.” Other services provided by the center include temporary housing, job training and placement, and providing life skills for trans individuals to “adopt a new gender role.”55

Intersex and Trans: Cultural Confusion and Social Misunderstanding

One of the challenges facing the Iranian trans community is the issue of widespread public misinformation and linguistic ambiguity around concepts related to gender and sexuality. In Persian, similar to several other Middle Eastern languages such as Arabic and Turkish, words used to describe sexual orientation (Gerayesh Jensî) and gender identity (Hoviyat Jensî) are newly coined, and many people still do not fully understand the difference between sexuality and gender. In addition, there seems to be an overall confusion in regard to individuals who are intersex (do Jensî56 or miyan Jensî57) and trans community members (tarajensi or terans58).59 This linguistic error is partly due to the fact that the term bi-gender59 is translated to Persian as “do jensiyati,”60 which is often confused with “do Jensî.” In response to this confusion, in recent years several trans advocates, including a prominent Iranian actress and an outspoken ally of the trans community in Iran, Behnoush Bakhtiari,61 have reached out to traditional and

55 Interview with Maryam Hosseini, the head of the Navab Safavi’s branch of SWO, Etmed newspaper, September 3, 2007, the original webpage of Etmed newspaper is no longer available, but a repost in Persian is available at http://helpits.blogspot.se/2013/04/blog-post_1589.html [accessed January 8, 2016].
social media to educate the public about the difference between homosexuality, bisexuality, intersex status, and trans.\textsuperscript{63} Despite these efforts, it is still common to see mainstream media, and even trans advocates, use the word intersex (\textit{do jensi}) in reference to the trans community.\textsuperscript{64}

Although discussing the situation of the Iranian intersex community is beyond the scope of this research, it should be noted that from the legal perspective, the Iranian Civil Code (ratified in April 1927), assigns certain rights to intersex individuals, who are referred to by the religious term “\textit{khonsa}.”\textsuperscript{65} Article 939 of the Iranian Civil Code describes how inheritance shall be divided up among beneficiaries if one of them is intersex. The regulation follows the deeply problematic and discriminatory rule that “men inherit twice as [much as] women,” however, the fact that Iranian law assigned rights to intersex individuals shows that being intersex has, to some degree, been recognized by Iranian law. The law argues that when it comes to dividing up inheritance, the decision about the amount of inheritance to go to an intersex individual depends on the person’s physical characteristics:

If the male characteristics [in the person] is dominant, the person’s inheritance is equivalent to a boy in his category and if the person dominantly displays female characteristics, she will inherit [the] equivalent of a girl in her category. If the person does not display characteristics of neither of male or female, the [intersex individual] is entitled to the half of the combined inheritance of a boy and a girl in that category.\textsuperscript{66}

From a religious perspective, Shiite scholars, from early Shiite saints (or Imams) to contemporary Ayatollahs, have debated the rights and responsibilities of intersex (\textit{khonsa}) individuals. In today’s Iran, all Shiite scholars are supportive of corrective surgeries for intersex individuals, and there is no legal ban on this medical procedure in Iran.\textsuperscript{67}

It should be noted that there is another rather confusing gender-non-conformity-related

\textsuperscript{63} For example, see this Instagram post on Behnoosh Bakhtiari’s Instagram page, available at https://www.instagram.com/p/44NDtZt2Wn/?taken-by=behrnoosh_bakhtiari&hl=en [accessed May 19, 2016]. Ms. Bakhtiari’s Instagram page has over 4.4 million followers.

\textsuperscript{64} Sharoom, an Iranian singer, uses an example of such word choice in one of his songs. In his fall 2015 hit, titled “Transexual,” Sharoom uses the term “\textit{do jensi},” which drew a lot of criticism from trans community members for the use of such term in describing trans issues. They argued that such a misuse of words would contribute to cultural misunderstanding of trans versus intersex. In his interview with Mahtaa, Sharoom rejected such criticisms and argued that his song was meant to promote social tolerance of all people, adding that he is neither trans nor a gender researcher, and his song was not meant to educate the public about the specifics of sexuality and gender. See the November 16, 2015, interview in Persian, available at http://www.mahtaa.com/1394/08/

\textsuperscript{65} In religious texts, intersex individuals are referred to as “\textit{khonsa},” a term that in Islamic jurisprudence refers to individuals with both male and female sexual organs. Shiite scholars have for centuries debated the rights and responsibilities assigned to “\textit{khonsa}” individuals, including the issue of inheritance, dress code, religious obligations, social responsibilities (including \textit{jihad}), and their criminal liabilities. For more details about these opinions, see http://www.wikifeqh.ir/\textit{خنسى} [accessed May 19, 2016]. The use of the term “\textit{khonsa}” to refer to intersex individuals is considered to be unacceptable.


\textsuperscript{67} Please see the January 4, 2011, speech by Hojatol-Islam Karimi Nia’s at “Sex Reassignment from Religious, Legal, and Medical Perspective” Conference at Mofid University, available online at http://www.mofidu.ac.ir/Desktod/modules/News/NewsView.aspx?TabID=1&Site=DouranPortal&Lang=fa-IR&ItemID=411&mid=12387&wVersion=Staging [accessed May 19, 2016].
concept in Persian, which sounds similar to the notion of “khonsa,” but refers to a different reality. Islamic scholars have long used the term “Takhanos” to discuss the situation of men who behave like women. These effeminate men are also referred to as “Mokhanas,” both in religious context and in Persian literature. Some religious scholars have even argued that “Mokhanas” individuals should be punished in a similar manner to those who engage in sodomy. In Persian literature, these derogatory terms have often been used to portray “sissy” men, homosexuals, and men suspected of sexual impotency.

Trans Community Population Estimates

Despite over a decade of community advocacy and of service provisions to trans individuals by multiple government agencies, the general size of the trans population in Iran remains unclear. Although over the years, Iranian media have published statistics in this regard, the numbers cited vary widely from one source to another. Iranian officials have long maintained the view that the total number of individuals with GID is about 4,000. This number was first cited by Hojatol-Islam Seyed Mahdi Seyed Mohammadi, the deputy director of the SWO, in charge of social affairs. Two years later, in June 2007, Dr. Kamran Bagheri Lankarani, the former Iranian Minister of Health (2005-2009), repeated the same statistics. In May 2014, Dr. Saberi, the chair of the board of directors of ISIGID, estimated the number of trans individuals to be between 1,000 to 3,000. His 2014 estimate was twice as high as his 2012 estimate, when he told an Iranian newspaper that, “between 750 to 1,500 people suffer from gender identity disorder.”

Many activists and experts believe the number of trans individuals in Iran is much higher, though OutRight is not in a position to independently assess or verify the accuracy of their claims. In April 2009, the late Ms. Molkara told an Iranian news website that “there are close to 50,000 adult individuals with gender identity disorder in Iran.” She claimed, “if we want to include all people (including minors and those who, in one form or another, can be considered transgender), the number stands at 180,000 to 200,000 people.”

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68 Please see the discussion of the term Takhanos in Wiki Feqh, available at http://www.wikifeqh.ir/ [accessed May 19, 2016].
69 For examples of the usage of this term in Persian literature, see http://parsi.wiki/dehkhodaworddetail-034fa12cf-dca42f3bd8721842d63681-fa.html [accessed May 19, 2016].
73 The interview in Persian is available at http://www.jahan-
was given by Dr. Shahriar Cohanzad, the prominent Iranian sex reassignment surgeon. In an interview in August 2015, Dr. Cohanzad said:

The truth is there are between 120,000 to 150,000 individuals with gender identity disorder in Iran...this is the truth and we can't change the statistics. There is no difference between Iran, Scandinavian countries, and South Africa [when it comes to the percentage of transgender individuals in each country.]

In 2004, Dr. Kahani, an expert with the LMO, claimed that the “trans phenomenon [in Iran] is four times more common among biologically-born men than women.”

In October 2013, Dr. Mahdi Sabari, an LMO psychologist, put the number much higher, telling an Iranian news agency that the number of trans women was three to eight times higher than trans men. These numbers have been questioned by other officials. In January 2015, Dr. Bahram Mirjalali, a pioneer of gender confirmation surgery in Iran, told the Islamic Republic News Agency, IRNA, that the ratio is 50-50.

In another interview, Dr. Mirjalali explained his theory further:

The ratio of trans men to women is almost equal...But the percentage of trans women and trans men who need to go through SRS is different. Trans women are more visible, so they are more likely to attract the negative attention of society and are more in need of the surgery, whereas trans men attract less attention.

It is important to keep in mind that most of these observations are based more on generalizations and less on scientific evidence and field studies, since not all Iranian trans women are necessarily “more visible” than trans men. Furthermore, given the extent of social stigmas against trans individuals, some transgender individuals choose not to openly disclose their identity to medical professional, family members, or government official.

Unfortunately, there are also no official numbers available regarding the number of individuals who have registered as “individuals with gender identity disorder” with various government agencies, although various online sources provide a range of information in this regard.

The following is a compilation of statistics from various online sources in this regard:

news.com/vdcc0sq0.2bqpo8laa2.txt [accessed January 8, 2016].
75 To read the full interview of Dr. Cohanzad with ISCANews, see http://www.khabaronline.ir/detail/444201/society/social-damage [accessed January 8, 2016].
76 The original source of this report is currently unavailable, but the interview is available at the Fighh and Law Society of Ferwodsi University in Mashahd, at http://www.aef.blogfa.com/84122.aspx [accessed January 7, 2016].
77 To read the full interview, see http://www.mehrnews.com/news/2161099/
78 The full text of Mr. Mirjalali’s interview with IRNA is available at http://www.irna.ir/fa/News/81448695/[accessed January 8, 2016].
## Individuals Registered as Having “Gender Identity Disorder” by Various Government Agencies in Iran

<table>
<thead>
<tr>
<th>Month</th>
<th>Source</th>
<th>Details</th>
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<tr>
<td>February 2004</td>
<td>Seyed Hassan Mousavi, the social affairs expert at the Management and Planning Organization of Iran, told Iranian media that while “neither the LMO nor SWO have any statistics about the number of trans individuals, we know that so far 300 individuals with gender identity disorder have registered with the LMO for SRS.”</td>
<td>80 Management and Planning Organization is the State Agency that is tasked with planning the state budget. 81 The original article was titled, “They want the right to vote: the hidden and the obvious about individuals with gender identity disorder,” published in Shargh newspaper, February 16, 2004, this article is no longer available online, but a copy is available at <a href="http://helpts.blogspot.se/2013/04/blog-post_3600.html?zx=a79d843e65ec64f2">http://helpts.blogspot.se/2013/04/blog-post_3600.html?zx=a79d843e65ec64f2</a> [accessed January 9, 2016].</td>
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<td>April 2012</td>
<td>Dr. Abdul Razak Barzegar, then vice-president of the LMO, announced, “annually around 160 individuals suffering from gender identity disorder register with the LMO.”</td>
<td>83 Please see the full report in Persian, “Individuals with Gender Identity Disorder have no problem for Sex Reassignment,” available at <a href="http://www.yjc.ir/fa/news/3673054/">http://www.yjc.ir/fa/news/3673054/</a> افراد دچار اختلال هویت جنسی همچنین ممکن برای تغییر جنسیت ثبتدند [accessed January 7, 2016].</td>
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<td>May 2012</td>
<td>The semiofficial Iranian Students’ News Agency, ISNA, reported, “since 1987, 2,054 trans individuals have registered with the Legal Medicine Organization,” and that “there are believed to be an estimated 10,000 transgender individuals in Iran.”</td>
<td>84 “Individuals with Gender Identity Disorder will be Covered by Health Insurance,” ISNA, May 21, 2012, available at: <a href="http://isna.ir/fa/news/91030100083/">http://isna.ir/fa/news/91030100083/</a> مدیرکل-آسیب‌های-اجتماعی-وزارت-رفاه-مسئولیت [accessed January 7, 2016].</td>
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<tr>
<td>December 2012</td>
<td>Several Iranian media outlets published statistics based on the LMO claims that between 2006 and 2010, 1,366 individuals applied to this agency for gender confirmation surgery. Out of this number, 56 percent were reported trans women and 44 percent were trans men. This puts the number of applicants at around 270 people per year (170 people in 2006, 297 people in 2007, 294 people in 2008, 286 people in 2009, and 319 people in 2010).</td>
<td>85 See the full article, along with additional statistics, at <a href="http://www.khabaronline.ir/detail/260988/society/health">http://www.khabaronline.ir/detail/260988/society/health</a> [accessed January 7, 2016].</td>
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<tr>
<td>October 2013</td>
<td>Dr. Mahdi Saberi, the head of the Medical Examination Unit at the LMO of Tehran province, announced, “on average about 60 cases of gender identity disorder are being introduced to the Legal Medicine Organization every year.” He said that “out of this number, 40 people are granted authorization to undergo SRS, and a third of them are diagnosed with other disorders that do not allow them to have surgery.”</td>
<td>86 To read the full interview, see <a href="http://www.mehrnews.com/news/2161099/">http://www.mehrnews.com/news/2161099/</a> شرایط تغییر جنسیت ایران-شامل بیشتر مردان برای راه شدن [accessed January 8, 2016].</td>
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Legal Challenges for Trans Individuals

Official Classification of Trans as a Disorder

The Iranian government officially uses the term “gender identity disorder” to describe trans people.

Although the medicalization of issues related to gender identity has allowed for some legal recognition for members of the trans community, it has also reinforced the stigma rooted in the notion that trans individuals suffer from psychological and sexual disorders and require treatment to become “normal.”

Asked by a reporter if trans experiences are considered a mental disease, Dr. Mahdi Saberi, a psychologist with the LMO, said,

Yes, it is. But I must clarify that I do not mean that it is a severe mental disorder that causes the person to commit bizarre acts. There are a wide variety of mental disorders, some are very subtle and hard to diagnose...Gender identity disorder is among those disorders that may not be diagnosed for a long time.87

Some medical professionals have sought to link trans experience to trauma. Dr. Bahram Mirjalali,

one of the most prominent sex reassignment surgeons, once asserted that some incidents of trans experience observed in his patients could very well be linked to the 1980-1988 Iran-Iraq War. In a May 2006 interview, Dr. Mirjalali told an Iranian news website:

We ask the mothers of all trans clients if they suffered from immense psychological pressure or a nervous breakdown during the first trimester of their pregnancy. Most of them say yes. Horrible events, such as the loss of husband or a loved one...occurred during their pregnancy. Most of my patients are from south and southwestern Iran. It doesn’t take much to figure out that their mothers were in their first or second trimester when the Iran-Iraq war broke out. This shows that a psychological trauma can cause the release of a hormone in the mother’s womb that can affect the brain of the fetus. 88

Other professionals, like Dr. Saberi, publically discounted this theory, but left open the possibility that a chemical imbalance in the brain of the fetus may contribute to GID:

There is a theory...about the cause of [trans experience] being the imbalance in fetus’ hypothalamus during the first trimester of pregnancy, as the result of psychological trauma suffered by the mother...and some research has been conducted by our colleagues at Tehran University regarding the anatomical shift of the brain in transgender individuals. The results of these studies seem to all but confirm this hypothesis. However, the real cause of transsexuality is not clear...

Dr. Mirjalali has worked with many trans individuals and may have some data, but I am not aware of those statistics. Our observations do not confirm Dr. Mirjalali’s hypothesis [about the correlation between prevalence of being trans and the Iran-Iraq war]. 89

Many members of the Iranian trans community have found the expression of such views both frustrating and dismaying. On their website, ISIGID now recommends use of the term “gender dysphoria” instead of GID 90 because the latter is seen by many as more stigmatizing. 91

Mr. Arastoo, a well-known television and movie star in Iran and arguably the most famous Iranian trans man, described the challenge of being treated as a person with mental disability in an interview with the state-run “Young Journalist Club” website:

People like me are not sick. Like other members of the society, we have the right to employment and make a living, without being discriminated against. I am frustrated with being treated unfairly. 92

88 “No one believed I was a woman in the body of a man,” http://www.pezeshkan.org/?p=2927 [accessed January 7, 2016].
90 See the full list of questions and answers on the ISIGID website, at http://gid.org.ir/سوالات-مشابه [accessed January 8, 2016].
91 See the “About Us” section of the ISIGID, at http://gid.org.ir/درباره-ما [accessed January 8, 2016]. ISIGID also explains that use of the term “gender identity disorder” in the name of the organization reflects the organization’s (and community’s) prevailing view back in 2007, when the organization was first registered.
Dr. Morteza Rostami, a trans rights advocate and a sociologist who teaches at Tehran’s Alameh Tabatabai University, agrees:

These people are not mentally sick...Sociologists believe this is not a disease or a disorder. Gender is a social function...The problem is ignorance. Not just ignorance among ordinary people, but ignorance that also exists in academic centers...The problem stems from the [views of] society at large and intellectual elites."

Since the state and many members of the medical community see being trans as a disease, they regard trans experience as a condition to be “cured” through medical transition processes such as hormone replacement therapy and surgery. As Dr. Cohanzad, the author of Purgatory of the Body: Surgeon’s Memoirs of Transsexuals in Iran, puts it: “Transsexuality is not curable by psychotherapy. Those who claim otherwise are utterly uneducated. Gender identity disorder is only treatable by surgery.”

Legal Discrimination

The Iranian legal system already discriminates against cisgender women and girls. The law requires a more restrictive Islamic dress code for women (hijab) than for men; impedes the rights of women in personal status matters such as marriage, divorce, inheritance, and child custody; and prohibits the full participation of women in employment and public affairs. The recently-amended Iranian Islamic Penal Code (IPC), which came into effect in 2013, also treats women and girls differently from boys and men in matters ranging from the value of their testimony (a woman’s testimony is equal to half of a man’s), severity of punishment, age of criminal responsibility, and recovery of “blood money.” The discriminatory nature of the Iranian legal system with regard to gender further complicates the existing personal, social, and legal challenges trans individuals must navigate, whether or not they elect to transition medically and obtain legal identity recognition.

If a person is in a legally recognized heterosexual marriage and decides to pursue medical and legal gender transition processes, the marriage will be nullified following completion of those processes and attainment of legal gender recognition. As “parental guardianship” rights are already restricted to men, Iranian trans women who are parents also face severely reduced custody rights following legal and medical transition. Unfortunately, the law...
does not recognize paternal guardianship rights for trans men who are parents.*

A further complicating factor is the IPC's criminalization of consensual sex acts deemed to lie outside the bounds of traditional marriage, including adultery and same-sex acts. Iran's criminalization of same-sex acts adversely impacts all members of the lesbian, gay, bisexual, transgender, intersex, and queer (LGBTIQ) community, including trans individuals whose gender identity is not legally recognized by the state.† The IPC mandates

in this regard." Indeed, the opinion explains that based on late Ayatollah Khomeini's fatwa in the fourth volume of his Tahrir Al- Wasilah, “if the gender of the father changes to the opposite his paternal guardianship over his kids will be nullified.” Please see the full text of the advisory opinion on Iran's Official Gazette's website, at http://rooznameharsmi. ir/Laws/ShowLaw.aspx?Code=2225 [accessed January 6, 2016]. Under Iran's civil code, in cases of separation and divorce, women may only have legal custody of the child until the age of seven, after which the father automatically retains custody (unless a court deems it is not in the best interest of the child). Iranian Civil Code, Article 1169.

98 For more legal analysis around the impacts of gender confirmation surgery on the status of marriage and the custody of children, see “SRS and Its Legal Implications,” Ali Awsat Fallah Nejad, September 2012, available in Persian at http://www.vekalatonline.ir/print.php?ToDo=ShowArTi-
cles&AID=11845 [accessed February 29, 2016].

99 Adultery, defined as penetrative heterosexual sex with someone other than the spouse (defined as zinayeh mohseneh under Iran's penal code), is generally punishable via death by stoning. Islamic Penal Code, Articles 221-32. The punishment for someone who is not married but engages in penetrative heterosexual sex with another (i.e. fornication) is 100 lashes. Islamic Penal Code, Article 230. Ayatollah Khomeini's fatwa on GCS, which declares the superiority of “soul over body,” might suggest that a trans man would be legally recognized as a man, whether or not he has elected to undergo GCS. In such a case, the individual would arguably be immune from prosecution under the penal code for same-sex acts. In fact, however, Iranian law requires a GCS permit from the court as a condition to recognize the preferred gender of the trans individual. In an advisory opinion on this matter (Opinion number 4/8/92-1444/92/7) the judiciary noted, “the applicant for SRS is criminally liable for violating the Islamic Penal Code [such as cross-dressing, appearing as a member of the opposite sex in public, etc.] if the act took place prior to the court’s authorization of the person to undergo SRS.” For the full text of this opinion, see the Iranian Bar Association's website, at http:/

the death penalty for individuals engaged in lavat (sodomy), defined as consensual or forced penetrative sex between two men. It requires 100 lashes, but not death, for the “active” participant of consensual same-sex relations, provided he is not married and has not engaged in rape.100 Under the IPC, the punishment for non-penetrative sex acts between two men (foreplay, or tafkhiz in Persian) is 100 lashes.101 The punishment for same-sex acts between women (mosaheqeh) under the IPC is 100 lashes.102 The IPC also subjects other same-sex conduct between men and women not involving sexual organs, such as passionate kissing, to flogging.103

The criminalization of same-sex acts can negatively impact both the public and private lives of trans individuals who decide not to undergo medical and legal transition, whose applications are pending, or those who are denied permission to transition by government agencies overseeing SRS. These trans individuals risk being apprehended as the gender assigned to them at birth, and therefore risk the harassment, arrest, detention and prosecution


100 Islamic Penal Code, Articles 233-234. Unlike the pre-amended code, however, the amended IPC limits application of the death penalty in consensual same-sex acts between men depending on whether the individual was “active” or “passive” (the latter gets the death penalty, while the former is punished by way of flogging). The differential treatment does not apply to non-Muslims, however. Non-Muslims convicted of sodomy with a Muslim receive the death penalty regardless of whether they are deemed to be the “active” or “passive” partner. 101 Here, too, the penal code discriminates against non-Muslims by requiring judges to issue a death sentence for the “active” partner accused of unlawful foreplay if he is non-Muslim and the “passive” partner is Muslim. Islamic Penal Code, Article 236, note.

102 Islamic Penal Code, Article 238-40. The IPC defines mosaheqeh as an act where a “woman places her sexual organs on the sexual organs of [another woman].”

103 Islamic Penal Code, Article 237. Individuals convicted of these acts may receive between 31 and 74 lashes.
for which those perceived to be engaging in consensual sexual relations are liable. Some individuals report that these hazards influence their decision to pursue medical and legal gender transition, as obtaining legal gender recognition may serve to legitimate behavior otherwise deemed unlawful.

It is also important to note that, under Iranian law, the concept of rape is vastly different from international standards: the Iranian Sharia-based penal code criminalizes any form of sexual intimacy outside of heterosexual marriage, which includes zina (sex outside marriage) and lavat (sodomy). While the law requires punishment for “forced” zina and “forced” lavat, there is no reference to “rape” per se in the penal code. Despite the fact that rape, as an act of power and discrimination, is totally different from sexual desire or orientation, the crime of marital rape does not exist at all under Iran's penal code,104 and, as such, rape is only punishable in cases of non-consensual adultery, fornication, or sodomy.105 The lack of standalone legislation identifying and criminalizing rape renders all victims of sexual violence in Iran vulnerable: if such victims fail to “adequately prove” they were raped, they run the risk of being found guilty of engaging in consensual sex outside of marriage. Placing the burden of proof on the victims of sexual violence particularly puts trans and LGB individuals at an extremely disadvantaged position, as they frequently face violence (including sexual violence) on the basis of their gender identity, gender expression, and/or sexual orientation.

Members of the trans community in Iran are also targeted by the state on the basis of alleged engagement in vaguely defined acts prohibited under the state’s interpretation of Sharia law. Pursuant to Article 638 of the IPC, which criminalizes haram (acts generally considered sinful or prohibited by Sharia law), authorities can arbitrarily harass, arrest, detain, and prosecute anyone perceived to have committed sinful acts in public.106 Individuals convicted under this article can spend between 10 days and 2 months in prison, or be subjected to 74 lashes. A note to Article 638 specifically states that all women appearing in public without the proper hijab can be prosecuted and sentenced under this article regardless of their religious beliefs or opinions.107 The hijab generally

104 Under Iran’s civil code, a wife must generally submit to the will of her husband (tamkeen), which includes her being sexually available to her husband whenever he desires. Iranian Civil Code, Article 1108.
105 Islamic Penal Code, Article 224.
requires women to cover their hair and dress in loose-fitting clothes that do not reveal the shape of the body, yet there is no distinction or specificity in the law regarding what constitutes improper hijab. Article 638 can and has been used by the authorities to target individuals who are perceived to be cross-dressing.\textsuperscript{108}

In a May 2014 interview, Dr. Saberi, the chair of board of directors of ISIGID (the Iranian Society to Support Individuals with Gender Identity Disorder) confirmed that law enforcement agents often target trans individuals for appearing in public wearing clothes “of the opposite sex”–an act considered haram. “If individuals with gender identity disorder run into police, the police immediately arrest them and keep them in custody until they can establish their disorder through legal and medical channels,” Dr. Saberi said.\textsuperscript{109} Dr. Saberi was hopeful that the problem would eventually be resolved by the LMO issuing “permits for these individuals so that they do not run into any problems while in public,”\textsuperscript{110} but it should be noted that these permits are issued only to those who apply for GCS (gender confirmation surgery) and are valid only for a limited time. In May 2015, Mr. Habibullah Mazaheri, Deputy Director of the SWO in charge of social affairs, confirmed to the semi-official Iranian Students’ News Agency, ISNA, that LMO authorization only allows trans individuals to “cross-dress” publicly between 6 months and 2 years after they have received their LMO permit.\textsuperscript{111}

The challenges faced by trans individuals wishing to freely express their gender identity in public are many; even trans advocates and government officials tasked with helping the trans community either willfully or inadvertently undermine this right. Nazanin, a 21-year old trans woman who lives in a city in Western Iran, told OutRight: “I dress like a woman in my own town. But...once I went to the LMO office dressed as a woman. The secretary called out my birth name and refused to let me in until I was forced to explain my story.”\textsuperscript{112} Mohammad Ali Sohrabimehr, a lawyer and a legal expert, was quoted in the Iranian media as saying:

Cross-dressers follow a different path. They want to declare their membership in a subculture and want to show off to others by dressing differently than others. These people suffer from personality disorder and do cross-dressing as a subconscious act. They should not be confused with trans people.\textsuperscript{113}


\textsuperscript{109} To read Mr. Saberi’s full interview in Persian, see http://zistboom.com/fa/news/24274/ [accessed January 8, 2016].

\textsuperscript{110} Ibid.


\textsuperscript{113} “When Soul is not in sync with the Flesh,” Quds Newspaper, December 11, 2006, no longer available online, but a copy of the article is available at https://www.facebook.com/TreataHospital/posts/402458689881719 [accessed January 8, 2016].
While many trans people—who live their lives day-to-day in accordance with the gender with which they identify—would distinguish themselves from self-identified cross-dressers—who may cross-dress on occasion but mostly live in accordance with the gender assigned to them at birth—other cross-dressers would self-identify as trans, seeing this as a core aspect of their identity or as a means of temporarily accessing their gender identity. As such, Mr. Sohrabimehr’s comments may inadvertently serve to restrict the rights of trans people who cross-dress, or of trans people perceived to cross-dress, as well, of course, as cross-dressers who do not identify as trans. Finally, there is no law in Iran that clearly defines and protects the rights of trans individuals, exposing members of this community (both those whose gender identity is legally recognized, and those who do not pursue medical transition processes and are prevented from securing national ID cards reflecting their gender identity) to social, legal, and family-based harassment, abuse, and discrimination.

International human rights law codified in treaties such as the International Covenant on Civil and Political Rights (ICCPR), to which Iran is a signatory without reservations, requires all state parties to respect and to ensure to all individuals within its territory...the rights recognized in the present Covenant, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.114

Similarly, the ICCPR is clear about the right to privacy, honor, and reputation: “No one shall be subjected to arbitrary or unlawful interference with his privacy, family, home or correspondence, nor to unlawful attacks on his honour and reputation.”115 Iran is also a signatory to the International Covenant on Economic, Social and Cultural Rights (ICESCR), which clearly recognizes “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.”116

It is important to note that Iran’s Constitution also abolishes all forms of “undesirable discrimination” and declares: “All citizens of the country, both men and women, equally enjoy the protection of the law and enjoy all human, political, economic, social, and cultural rights.”117 The constitution calls for “equitable opportunities for all, in both the material and intellectual spheres.”118 Despite these international and national rights guarantees, however, Iranian law, including labor law, provides no protection from discrimination and abuse for trans individuals.119

119 Iran is a signatory to Convention concerning Discrimination in Respect of Employment and Occupation, available at http://www.ilo.org/dyn/normlex/en/?p=NORMLEX-PUB:12100:0:NO::P12100_ILO_CODE:C111. For more information about this, see http://rc.majlis.ir/fa/law/show/95510 [accessed January 16, 2016]. Article 38 of the Iranian labor law requires equal pay to both men and woman for equal work and prohibits discrimination in pay based on “age, gender, race, nationality, and political or religious beliefs,” see http://www.mcls.gov.ir/fa/law/267/فصل-سوم-شرایط-کار [accessed January 16, 2016]. In her interview with the Official Iranian news agency, IRNA, on September 6, 2015, Ms. Bahareh Rahmani, Deputy Director of State Welfare Organization in Qazvin province, specifies “joblessness” as a major issue that trans individuals, especially after GCS, have to deal with. To read...
Rights of Trans People Who Have Not Pursued Medical Transition

In Iran, only LMO-approved individuals are considered to be “individuals with gender identity disorder.” Such a designation allows these individuals to apply for a GCS permit, legally appear in public as the gender with which they identify, benefit from SWO’s services, and, ultimately, receive a new national ID card after the completion of medical transition. Individuals who are not deemed to have GID (and, therefore, not allowed to pursue medical transition processes) or who do not desire to pursue medical transition, must live and act according to the gender identity assigned to them at birth, or risk abuse, arrest, detention, and prosecution. In the words of Dr. Saberi:

For those applicants who don’t get approved [for medical transition] their desire for gender transition is not due to their gender identity disorder. They may suffer from multiple personality disorder, depression, or other issues. Many of these individuals could be treated with therapy and medication and live a normal life afterwards. Not everyone who wants to change their gender suffers from gender identity disorder.120

Bousseh, a trans woman from the northwestern city of Urmia, told us that she does not wish to undergo GCS:

I went to see the judge...He said, “Please come in, Madam.” I said, “What did you

In the old days, when there was no such thing as GCS, many women lived with male sexual organs. I am not against GCS, but doctors told me I shouldn’t do it if I don’t think I am ready. My psychiatrist told me I should not do the GCS because I will regret it later.121

To summarize: trans individuals who are not deemed eligible for, cannot afford, or choose not to pursue medical transition are also not eligible for legal gender recognition and for the limited protections afforded to those who do obtain medical and judicial approval. The lack of legal recognition for these individuals means that they cannot obtain state-issued identity cards that correspond to their gender identity, hence extremely limiting their ability to secure a job, pursue higher education, or rent a place to live.122 Since current regulations in Iran do not allow the recognition of the gender identity of trans people who have not pursued medical transition, neither the SWO nor the judiciary are able to protect trans individuals by ordering the NOCR to issue legal identification cards with appropriate gender markers, which may otherwise help to resolve instances of discrimination and legal exclusion. Bousseh explains her experience trying to persuade a judge to help her get legal documents as a woman:

Ms. Bahareh Rahmani’s full interview with IRNA, see http://www.irna.ir/fa/News/81749161/ [accessed January 7, 2016].


121 Interview in Turkey on November 12, 2014.

122 This is an issue that even government officials openly admit to. For example, Valiollah Nasr, the head of Social Vulnerability Office at the SWO, told reporters in November 2014, that, “[Trans] individuals face many problems dealing with their national ID, health issues, military service, student dorms, etc.” Please read the full interview at http://shafaonline.ir/fa/news/42026/ [accessed January 9, 2016].
call me? Can you say it again? You called me miss, right? But I have a condition [as a trans person] and have not yet undergone the surgery. Do I have to go through the butchery so that you can give me a new ID card? I also told him I did not have any money to pay for the operation. The judge contacted the local branch of NOCR to see if they could do anything to help. They responded that for a new ID [that reflects my gender] they would need the hospital’s documents confirming SRS. So the judge told me it was really impossible to do anything to help. They said that we need the hospital’s documents confirming SRS. So the judge told me it was really impossible to do anything to help.

The absence of any laws or legal mechanisms protecting trans individuals against discrimination and abuse from both state and private actors, along with the refusal of the state to legally recognize the gender of trans individuals prior to medical transition or those not choosing medical transition, has made trans individuals who are not deemed eligible for, do not wish to, or cannot afford medical transition processes extremely vulnerable. Several trans people told us they could not take legal action against their rapists because they were afraid: if the issue became public, their family and society would find out about their gender identity, and explicitly or implicitly blame them for the sexual assault.

In fact, many trans individuals are fearful of being blamed for all acts of violence they may have experienced, making them extremely reluctant to seek help from authorities or family members in such cases.

Military Service

In Iran, military service is compulsory for all men who reach 18 years of age. As of May 2016, the duration of military service was ordinarily 21 months. There are various grounds that can exempt young men from military service, such as being the only son of the family, the sole caretaker of a parent or ill sibling, or demonstrating “exceptional scholastic achievement.” Individuals can also be exempt if they suffer from a mental or physical illness or disability that renders them unable to carry out military service. Once an individual is deemed exempt, they are issued a military participant in a prohibited sexual act. The lack of proper laws against rape arguably adversely impact members of the LGBT community, including trans individuals, even more since they are particularly vulnerable to sexual abuse and violence.

125 Ana Roujina, an Iranian trans woman from Iran’s Kurdistan, describes how she was sexually assaulted by one of her relatives at the age of six or seven: “I didn’t even know what that meant. Later I found out what he did to me was sexual abuse. After that, I have witnessed numerous sexual assaults and gender humiliation both at home and in school.” She never dared to discuss these transgressions with her parents, since her father used to physically and verbally abuse her for acting like a girl, and her mother blamed the collapse of the family life and her divorce on her “sissy behavior.” More of Roujina’s testimony is available in Persian at http://www.khanehamn.org/archives/tag/‌تراجنسی [accessed January 14, 2016].

126 Depending on the task assigned to the soldiers and the condition under which they serve, the duration of compulsory military service can range from 18 to 24 months. For more information, see the Q and A session of the official website of Iran’s Military Draft Board (MDB), available in Persian at http://vazifeh.police.ir/?pageid=516&siteid=25 [accessed May 18, 2016].
exemption card, which identifies the reasons for their exemption. The recruitment, registration, and determination of eligibility for compulsory military service in Iran is the responsibility of the Military Draft Board (MDB) (Nezam Vazifeh in Persian), which is a part of Iran's Law Enforcement Agency.

Trans women seeking exemption from the military draft can do so pursuant to the “Regulations on Medical Exemption from the Draft,” which were approved by the president's cabinet on May 11, 2014. Under these regulations, the exemption of trans individuals from military service is mentioned under “Chapter 5: Psychiatric Diseases,” which covers mental and psychological conditions such as schizoaffective disorder, delusional disorder, or schizophrenia, and certain intellectual and developmental disabilities. Section 12 of Chapter 5 stipulates: “Gender Identity Disorder (TS) that is certified by the LMO and confirmed by the Armed Service's medical centers [is grounds for] for permanent exemption.” The regulations also address the issue of exemption for gay men, but do so under Article 7, which states, “perversions that violate the social and military code of conduct (such as sexual perversion and homosexuality) [warrant] a six-month deferment.” Under Article 7, “after six-months’ deferment, and upon confirmation by the Armed Service's medical centers, [the applicant is eligible] for a permanent exemption.” Based on these regulations, the MDB is allowed to issue two different types of exemptions for trans individuals:

1) a permanent medical exemption for those diagnosed with gender identity disorder; and 2) a temporary exemption [that is granted in two stages and is valid for one year], for individuals approved by the SWO, who have applied, but are waiting, for their SRS permit to be issued.

The official classification of trans experience as a mental disorder under Section 12 of the medical exemption regulations means that those trans individuals who succeed in securing a medical exemption run the risk of being stigmatized, harassed, or discriminated against by their future employers.

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127 “Iran: Military service, including recruitment age, length of service, reasons for exemption, the possibility of performing a replacement service and the treatment of people who refuse military service by authorities; whether there are sanctions against conscientious objectors,” March 28, 2014, available at http://www.refworld.org/docid/550fd7e64.html [accessed September 30, 2015].

128 Please see the official website of the MDB, available in Persian at http://vazifeh.police.ir [accessed January 18, 2016].

129 The current regulations were jointly proposed by the Ministry of Defense and Armed Forces Logistics and the Ministry of Health and Medical Education, were endorsed by the Armed Forces General Staff, and were approved by the government based on Section (1) of Article 39 of the Amended Military Draft Act, which was passed in 2011. The full text of the law is available on MDB’s website at http://vazifeh.police.ir/?siteid=25&pageid=4265 [accessed January 18, 2016]. The full text of the regulation is also available as a PDF at http://dotic.ir/download/news/156/156.pdf [accessed January 18, 2016].


131 TS is spelled out in English letters in the original Persian text, and stands for transsexuality.

132 To see more about the categorization of homosexuality as an “Innate Perversion” in the Iranian legal system, please read Dr. Hassan Ghafouri’s, the Head of Social Services Office of the Iranian Ministry of Justice, post on the official website of the Tehran Prosecutor’s Office, available at http://www.ghavanin.ir/PaperDetail.asp?id=741 [accessed January 18, 2016].

133 Ibid.

or anyone who is legally allowed to review their military exemption card. As Dr. Hadi Motamedi, a private psychologist, told Iran’s Jam-e Jam newspaper: “Exemption from draft because of a mental disorder results in the deprivation of the trans individual’s social rights. [Because of this designation] these individuals will face tremendous challenges finding a job in the future.”

The 2014 regulations on medical exception for compulsory military service effectively continue the policies of the old regulatory scheme under which trans individuals could only apply for a permanent medical exemption if they were classified as suffering from “moral or sexual perversion, such as transsexuality.” Article 33 (8) of the old regulations directly linked trans experience to “behavioral disorder (such as psychological and mental imbalance), and perversions that are against military code of conduct.”

But Iranian trans activists were not happy with the designation and worked hard to persuade the government to get rid of the practice of identifying trans individuals as suffering from a mental disorder altogether in order to secure an exemption. In August 2007, Iranian media reported that a group of trans activists met with representatives from the SWO and the Armed Forces to discuss the problems that such a designation can cause for members of the trans community. Following the meeting, both the SWO and the representative of the Armed Forces General Staff reportedly acknowledged the problematic nature of such a designation.

On November 27, 2007, the Medical Council of the Military Recruitment and Exemption Office of the MDB issued guidelines (Memo No. 23/701/04/308) recommending that the military exemption of trans individuals be granted based on a classification suggesting that they are suffering from an endocrine, instead of psychological, disorder. After a January 2010 meeting between Iranian trans activists and representatives from the SWO and the Armed Forces, the head of the Social

Vulnerability Office at the SWO reportedly confirmed that trans individuals would, from now on, be exempted under diabetes classification or other endocrine-related disorders.\textsuperscript{141}

OutRight has been able to confirm that some trans individuals were, in fact, able to secure military exemption cards with no mention of their suffering from a mental disorder or disability. \textbf{Arsalan}, a 32-year-old trans man from Tehran, told OutRight that when he was drafted at the age of 18, he tried several times and finally managed to convince the MDB to issue his military exemption based on Article 46 of the pre-2014 military exemption regulations.\textsuperscript{142} Article 46 does not mention psychological disabilities and merely authorizes the MDB to exempt individuals suffering from disorders not identified by the current regulation but which “render patients unable to perform their combat and noncombat military activities.”\textsuperscript{143}

Not all trans individuals, however, were able to secure exemptions pursuant to Article 46. \textbf{Kasra}, a 26-year-old trans man from Tehran, told us that he managed to secure his draft exemption card in 2011, but the card classified his medical exemption pursuant to provisions of the Article 39 (46) of the old regulations that identified him as being intersex.\textsuperscript{144}

In addition to the challenges of securing exemption from military service—for those who seek it—in a manner that does not destructively impact the individual’s future employment prospects among others, applicants for exemptions also report a lack of privacy in the MDB’s offices. Kasra describes his experience this way: “When I went there to explain my case there were other applicants sitting there and I had to answer all the questions in front of them. Everyone there could hear me.”\textsuperscript{145}

\section*{Abuse by the Police and Judiciary}

People perceived as trans by the broader society are likely to experience violence and abuse by both state and non-state actors. Trans men are often arrested for not wearing the mandatory \textit{hijab}, and trans women for “cross-dressing in public,” wearing heavy makeup, or generally dressing in a manner perceived to be inconsistent with the strict government-enforced dress code. This harassment and targeting by the police can occur even when trans individuals have secured an official letter from the LMO certifying a GID diagnosis.

We met \textbf{Martha}, a 27-year-old trans woman from Arak, when she was in Turkey applying for refugee status. She told us

\begin{quote}
When I was in Iran, I was constantly worried about being executed [for being gender non-conforming]. But more than
\end{quote}

\textsuperscript{141} To read Hasan Mousavi Chelk’s interview with Fars news agency, January 6, 2010, see http://www.farsnews.com/newsstext.php?nn=8810160882 [accessed January 18, 2016].

\textsuperscript{142} Interview in Turkey on November 6, 2014.

\textsuperscript{143} To view the 2003 Amended Bill on Medical Examination and Exemption from Draft, see http://www.vekalatonline.ir/laws/27752/ اصلاحیه-آئین-نامه-معاینه-و-معافیت-مشمولان-خدمت-وظیفه-عمومی [accessed January 28, 2016].

\textsuperscript{144} Interview in Turkey on November 8, 2014. To view the 2003 Amended Bill on Medical Examination and Exemption from Draft, see http://www.vekalatonline.ir/laws/27752/ اصلاحیه-آئین-نامه-معاینه-و-معافیت-مشمولان-خدمت-وظیفه-عمومی [accessed January 18, 2016].

\textsuperscript{145} Interview in Turkey on November 7, 2014.
that I was afraid of being tortured. The authorities arrested my friend Ramin [on suspicion of being gay]. They kept him in jail for two years, and even though they had nothing against him, he was lashed in public. The fear of execution, torture, humiliation and being beaten always stayed with me. I was scared all the time even though I was never caught.146

Yavar, a 34-year-old from Tehran who identifies as queer, told OutRight that he and three of his friends who identified as cross-dressers were arrested, prosecuted, and flogged for engaging in gender non-conforming behavior. They were arrested by law enforcement agents in the Shahrak-e Gharb district of Tehran and kept for ten days without trial in the same jail. Their case was sent to a revolutionary court, which primarily deals with national security or drug trafficking cases, rather than to a civil court. He told us,

The 72 flogging sentence was executed at the Vozara Detention Center. We were also fined 400,000 Toomans each. We had no lawyer, nor any right to appeal. My family was too embarrassed to talk to lawyers who were our family-friends, and even kept my father in the dark about the arrest. The authorities prohibited the four of us from seeing each other [after our release]. [During our detention], we were afraid of discussing our gender identity. We kept telling them we just [cross-dressed] for fun. They severely beat us up. The officers started beating us up on the street in front of others [during our arrest], and continued their beatings at the detention center. Even the driver of the police car assaulted us. At the detention center they kept bullying and humiliating us.147

For trans individuals, seeking judicial recourse, including by filing complaints with the police, can also be an unattainable dream. Honey, a 28-year-old trans woman from the northwestern town of Bukan, had a troubling experience. Honey’s brother was abusive, and after he found out about her being trans, he decided to go after Honey and her boyfriend. She told OutRight that her boyfriend’s legs were permanently damaged during a crash in her brother’s car that, she believes, was meant to kill them both. She told OutRight:

If my boyfriend had tried to file a complaint, my brother would have revealed our relationship. The court would have subsequently dropped the case against him and instead opened a new case against us. My boyfriend and I were both scared. I was under the impression that if I had filed that complaint, they would know about me being a trans [person] and would force me to reveal my relation [to my boyfriend].148

Shiva, a 45-year-old trans woman from the northwestern city of Tabriz, was arrested by the police for cross-dressing in public. She was beaten by the police prior to standing trial. After an appearance in court that did not last more than a few minutes, she was sentenced to 30 lashes for public cross-dressing, a punishment that was implemented within three days of her arrest. She had no access to a lawyer and no contact with her family while she was in detention. She was sent to court after spending

146 Interview in Turkey on November 9, 2014.
147 Interview via Viber on April 2, 2015.
148 Interview in Turkey on November 4, 2014.
two days in a men’s prison without any food. She told OutRight, “I told the judge that I had gender identity disorder and I thought I was a woman. I hoped he would support me when he found out [I was trans]. Instead he said people like me should be ‘corrected’ by being flogged.”

**Hasti**, a 30-year-old trans woman from Khansar, told us that because of her appearance and feminine makeup, she faced humiliation and harassment from the police. Hasti has been arrested frequently when attending private parties:

The [police] would lift up my dress, look at my ID card and ask me if I was a man or a woman. In the end they would force me to sign a pledge letter [to promise that I would no longer dress as a woman] and then release me.

**Assal**, a trans woman who had applied for refugee status in Turkey, described how when she travelled back to Iran from Thailand following GCS, an Iranian border police agent called his colleagues to “examine” her medical documents. She said they started passing around her GCS documents to each other and laughed at her. “I felt I was a monkey at the zoo and they were watching me,” she told OutRight.

Videos of Iranian police appearing to harass trans individuals can be found on various social media sites. In an undated video allegedly recorded in Kermanshah province, police appear to be handcuffing and verbally abusing a trans woman. The person arrested in the video introduces herself as **Amir**, which seems to be her birth name. A voice in the background asks her about her last name and her father’s name (though the names are digitally removed from the recording). The voice then asks her why she “did this.” Amir remains defiant and refuses to say she has done anything wrong. The sound of a crying woman can be heard in the background as she begs for forgiveness on behalf of “her sister.” A male voice in the background interrupts the woman and asks, “Is she your brother or your sister?” The video ends when a man approaches Amir and begins to slap her in the face several times.

**Ghazal Sadat Asadiyan**, a trans woman who was preparing for GCS, told the official publication of the SWO in March 2015 that she used to be repeatedly harassed by the morality police when she presented as a man in public: “My feminine face dressed in a male outfit made them suspect that I may be a female cross dresser. I was stopped and interrogated dozens of times.”

149 Interview in Turkey on June 4, 2014.
150 Interview in Canada, August 2013.
151 Interview in Turkey, September 2012.
152 The video is available on Facebook at https://www.facebook.com/tavaana/videos/998352473544099/ [accessed January 7, 2016].
The Right to Health

In his March 2015 report to the United Nations Human Rights Council, the UN Special Rapporteur on the situation of human rights in Iran expressed concerns regarding serious problems with health-related services available to the transgender community in Iran.

He noted, “the quality of healthcare they received was, at times, clearly substandard and not in line with professional norms or the right to adequate and attainable healthcare provided in the ICCPR and ICESCR.” In his report, Dr. Ahmed Shaheed specifically listed some of the side effects of GCS, such as “serious complications, including severe bleeding, severe infection, scarring, chronic pain, and recto-vaginal fistulas.” He noted that some “transgender Iranians also reported that their operations resulted in abnormally shaped or located sexual organs and vaginal stenosis.”

Misdiagnoses by Health Care Professionals and Misinformation by “Experts”

Many trans individuals and their families turn to health care professionals to seek help and find answers to the challenges they face. Unfortunately, not all doctors and mental health professionals

have the requisite expertise to counsel them on issues related to gender identity and transsexuality. This can sometimes lead to incorrect, problematic, and/or dangerous advice or proposed “solutions.”

We interviewed Amir, a 26-year-old trans man from the southern city of Shiraz, who started seeing doctors at a very young age. But, instead of offering psychological or medical counseling, the doctors merely intimidated Amir. He told OutRight:

It all started when I was eight or nine years old. My parents took me to see a doctor because I kept saying I was a boy. The doctors never talked to me. They just told horrible and terrifying stories to shut me up. They said things like “you will die if you undergo SRS,” or “many girls who wanted to become boys died during the surgery”... All of them treated me like I was delusional....They would tell me: “It’s not possible, you were born like this.” But I knew I had to do this operation and change my sex. I was convinced there was a way and I was just looking for some kind of confirmation, from someone, who would tell me “yes, it’s possible!” Instead, one of the doctors gave me pills, and another other one injections...[Another] told me to “get out and close the door behind [me],” as if I was a dirty and untouchable person.155

Arsalan, a 32-year-old trans man from Tehran, also had a negative experience with health care professionals. He saw six or seven different psychologists, hoping that one of them could help him understand his situation:

Most of them knew nothing about transsexuality. One of them started calling me a lesbian...Others thought I was going through a phase and will get over it. One of the psychologists wanted to change me through hypnosis! When this idea of hypnotism came up, I stopped going. But that was not the end of the story—my family still believed in curing me and wanted to try the hypnotism.156

Martha, a 27-year-old trans woman from the central town of Arak, remembers how she decided to cut her hair short and behave more manly under pressure from her university’s administration. She started feeling very depressed. Faced with increasing pressures both at school and at home, she decided to go to a psychiatric doctor to deal with her problems:

The psychologist never mentioned anything related to gender or sexuality, even though I told the doctor that my depression started after I cut my hair. I also told him that I had feminine feelings.... My uncle was under the impression that I was addicted to drugs and took me to a rehabilitation center...I spent one week there before they confirmed I was not addicted to anything.157

Minou, a 38-year-old trans woman from Tehran, recalls the many instances of unhelpful advice she received from health care professionals when she was struggling to discover her gender identity:

I was about 18 when I went to see a psychologist. I read many articles in English
on the Internet, as well as the biography of some trans individuals, but I still felt guilty. The first counseling session was helpful, other sessions not so much. Two years later, I went to see another counselor who did not have enough information on trans issues and thought negatively of it. He called me a “faggot” and said [people like me] should be wiped from society. Two years ago I went to see a counselor in northern Tehran, and it cost me a lot. I paid all that money to hear, [again], that I was a “faggot,” that we were disgusting people, and that I had to stop acting like this. Those sessions really disturbed me and had a devastating impact on my psyche.158

Medical misinformation about trans experiences are not limited to health care professionals. Iranian media outlets occasionally invite “experts” who encourage families to show tough love when dealing with their gender non-conforming children. On February 2, 2013, Iran’s state-run Islamic Republic of Iran News Network (IRINN) TV aired an interview with Dr. Gholam Hossein Ghaedi, a psychologist, who argued that “research has shown that the reaction of a family to the gender non-normative behavior of their children can play a role in [developing or preventing] gender identity disorder.” He continued, “For example, parents who do not stand up against their daughter’s boyish behavior, or their son’s girly conduct, and instead find this behavior to be cute may reinforce and encourage such behavior in their children.”159

In a January 2015 interview with the state-run Islamic Republic News Agency (IRNA), Dr. Behnam Ouhadi, a psychologist and sexologist, noted there was a lack of adequate medical education among Iranian doctors with regard to gender identity. “Unfortunately, Iranian psychologists are not very skilled in dealing with transsexual patients, and there are very few doctors who understand transsexuality,” he said. “Over the past few years we had cases of unprofessional treatment of trans patients by doctors who used electric shock therapy, or prescribed heavy doses of antipsychotic drugs that amount to torture.”160

Not all members of the Iranian medical community are uninformed about trans issues. In our interviews, we met several trans people who managed to explore their identity and discuss their trans experiences with their loved ones, through the assistance of health care professionals. Arsalan, a 32-year-old trans man from Tehran who discovered his gender identity with the help of his psychologist and eventually came out to his family, said:

I was in my last year of high school when I finally felt comfortable to talk about this issue with my family. I asked both my parents to listen to me and explained how long I had been struggling with this issue. I talked about my problems at school, and that I was seeing a psychologist for a while. I asked them to join me for my next session. Until then I had never even seen a real trans person—I had only read about them in a magazine.161

158 Skype Interview on January 27, 2015.
160 To access the entire interview in Persian, see http://www.irna.ir/fa/News/81448693/ [accessed January 8, 2016].
161 Interview in Turkey on November 6, 2014.
Health Care Professionals as Gatekeepers to Medical Transition

Trans individuals who are diagnosed with GID are required to go through a series of steps in order to receive authorization to undergo GCS. As mentioned earlier, the Iranian legal system only allows trans individuals to obtain new identity cards after they successfully undergo pre-approved medical transition processes. On its website, Mahtaa has a list of 11 doctors who provide medical services to the trans community in Tehran as of January 2016.\(^{162}\) Mahtaa also has a directory of medical, legal, and social services available to trans individuals in Iran, which includes resources in four cities: Tehran, Mashhad, Qom, and Ardabil.\(^{163}\)

Dr. Bahram Mirjalali, the recognized pioneer of GCS in Iran, explains the process:

The patient brings a letter from the psychologist they were seeing that confirms the existence of a problem. We send the patient to the court and after, following some legal procedures, the applicant will [visit] the LMO for further examinations. The medical committee there conducts tests, medical examinations and psychological counseling, and based on the results issues their final decision. Getting the SRS permission from the LMO can take at least six months. Unfortunately, many patients are unhappy with such a long process. This dissatisfaction shows itself during the post-surgery process, when patients prefer to no longer see the doctors.\(^{164}\)

Valiollah Nasr, the head of the Social Vulnerability Office at the SWO, says the rationale for the long pre-surgery waiting period is to “prevent any post-surgery remorse.” He continues:

Individuals who have been diagnosed with having gender identity disorder have to appear publicly, with their new gender identity, for six months. After that, their psychological state will be evaluated and then their SRS will be approved. To undergo the SRS they have to jump through a lot of hoops.\(^{165}\)

Some GCS specialists require their patients to go through additional steps. Dr. Cohanzad, for example, requires additional screening for his GCS candidates:

It is impossible for me to operate on a trans patient less than six months before meeting him or her. Many of my patients complain about this, but I need to be absolutely sure that the patient is transsexual and not homosexual. I also need to ensure that the patient has followed the proper legal procedures because this is critical to their social acceptance after their SRS.\(^{166}\)

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162 The full list is available in Persian at http://www.mahtaa.com/ [accessed January 7, 2016].
163 The directory can be accessed on Mahtaa’s website at http://www.mahtaa.com/ [accessed January 9, 2016].
166 You can read the February 2013 interview in Persian at http://www.iran.pezeshk.us/archives/31420 [accessed January 7, 2016].
Given the social and cultural stigmas surrounding transsexuality and GCS, surgeons sometimes face threats of violence by relatives of trans clients. As Dr. Bahram Mirjalali told Jam-e Jam newspaper:

Sometimes I have received death threats from the patient’s relatives. A father brought his trans daughter, who wore boys’ clothing but had very feminine behavior. The father told me, “If you touch my son and operate on him, I will kill you.” I had another patient who came to my office over twenty times and even gave me a down payment for the surgery. But the parents were not open to accepting the child’s SRS. I ended up providing 18 sessions of counseling to the parents to make them understand how much their child is suffering and they finally agreed to the SRS.

Dr. Mirjalali emphasizes the importance of gaining the approval of family members before the surgery:

Legally, the consent of the parents is only required for individuals under the age of 18. For patients over the age of 18, only the consent of the patient and a permit from the Legal Medicine Organization is needed. But I am not a big fan of surgery without parental consent. Perhaps many of my colleagues feel the same way. The blessing of the family is critical in the post-SRS period. The father and the mother of the patient need to understand the situation of their trans child, since the biggest challenge in a patient’s life is the ignorance of the parents about the transsexuality of their child. Unfortunately, sometimes we see doctors and psychologists who avoid contacting the patient’s family members.¹⁶⁷

Dr. Mirjalali warned, however, that he is adamantly against encouraging his patients to undergo GCS: “Under no circumstances should a surgeon encourage a trans person to undergo surgery. The request should come from the trans person and the doctor should not push them in this direction.”¹⁶⁸

Many GCS specialists in Iran believe a lengthy process prior to obtaining the GCS permit is necessary to diminish the possibility of post-surgery regrets. As Dr. Kamyar Tavakoli, a GCS surgeon, told a group of trans community members, out of 400 cases he operated on, he has only had one case of post-GCS regret:

The reason for such a low rate of regret might be because, before the surgery, I try to fully explain the problems and the process to the patients. Sometimes I even exaggerate the problems to make sure the SRS candidate is determined and has a healthy set of expectations regarding the surgery.¹⁶⁹

Dr. Bahram Mirjalali’s agrees:

In all the years that we have conducted SRS, we did not have even one case of

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¹⁶⁷ You can access the full length of the interview at http://jamejamonline.ir/sara/1687581470866243757 [accessed January 9, 2016].
¹⁶⁹ You can read the full report from the meeting, January 11, 2015, at http://www.mahtaa.com/1393/10/گزارشی-از-همایش-سالنامه-باد-دکتر-نوکلی [accessed January 9, 2016].
post-surgery regret. If the person is diagnosed properly as trans, they will never regret the surgery. In rare cases, some individuals who have extreme homosexual tendencies are misdiagnosed as trans and operated on. This has resulted in post-SRS regret, and at that stage nothing can be done to reverse the surgery. But this is rare, since it is very unlikely for a homosexual person to be willing to undergo SRS. In all the surgeries I have performed, one person who was authorized to go through SRS expressed regrets after the surgery. After I reviewed his complaint, I realized he actually had an advanced level of homosexuality and unfortunately the doctors misdiagnosed him.\textsuperscript{170}

Nonetheless, some of the trans individuals OutRight interviewed expressed frustration with the difficulties they faced securing their GCS permit. Their challenges included refusal of family consent, arbitrary criteria from doctors to undergo CGS, and others.

\textbf{Ashkan}, a 26-year-old trans man from Kerman, was already the divorced parent of a child when he started his gender confirmation process. Doctors refused his request for GCS, citing concern for his child’s future. Ashkan told OutRight:

\begin{quote}
The doctor who could authorize my SRS told me that he knew I was a transsexual, but he [would not allow me to undergo surgery because] he felt sorry for my son’s future. He was worried about my son having a trans parent. I told him my son was being raised by my grandmother and not me, but he refused the explanation.\textsuperscript{171}
\end{quote}

The challenges faced by the trans community in securing the GCS permit are well documented and widely publicized in Iran. For instance, in 2009, an Iranian newspaper reported that “based on LMO’s Statistics over the past 6 years, 422 individuals with gender identity disorder have submitted requests for SRS to the organization’s Psychological Committee,” and that “only 188 individuals have followed up and only 124 people received authorization to undergo SRS.”\textsuperscript{172} In 2004, Dr. Kahani, an expert with LMO, declared “between 1987 and 2004, 470 individuals have applied to the LMO for SRS.” Adding that only “214 applicants succeeded in securing their surgery permit.”\textsuperscript{173}

It should also be noted that several sources have, over the years, claimed that Iranian gay or lesbian individuals were being forced by government authorities to undergo SRS.\textsuperscript{174} Although we have been aware of such allegations, OutRight’s research could not verify any such cases.

\begin{footnotes}
\item[170] You can read the full text of Mr. Mirjalali’s interview with the Islamic Republic News Agency, January 3, 2015, at http://www.irna.ir/fa/News/81448695/ [accessed January 8, 2016].
\item[171] Interview in Turkey, September 2012.
\item[173] According to Dr. Kahani, He said that out of these numbers, 270 people had applied for SRS before 2001, and that 200 were trans women and 70 trans men. The original source of this report is currently unavailable, but the interview is availabled at the Fighh and Law Society of Ferwodsi University in Mashahd, at http://www.aef.blogfa.com/84122.aspx [accessed January 7, 2016].
\item[174] For example, see an introduction to Shadi Amin’s 2015 book, Jensiat-X (X Gender), at http://6rang.org/3092 [accessed January 9, 2016].
\end{footnotes}
Gender Confirmation Surgery and the Post-GCS Monitoring Period

According to Dr. Saberi, the LMO expert, “A person with gender identity disorder needs to go through an approximately 12-month process of psychological evaluation to make sure there is no other treatment but SRS.” After that, the candidate can secure a permit. The procedure itself unfolds over the course of several stages. Dr. Mirjalali told Jam-e Jam newspaper that gender confirmation surgery for trans women can be done in two sessions:

First we remove the male genitalia and then [during the second operation] we implant the female genitalia. In contrast, the SRS for trans men is difficult and time-consuming. First, we need to remove female organs, such as breasts, uterus, ovary, etc. This requires a five-hour operation. Then we have to implant the prostheses of the opposite sex, which is another operation that takes at least four hours. Finally, we need to fine-tune their genitalia, which requires [a] few extra hours of surgery.  

Dr. Saberi believes that counseling and monitoring post-surgery are absolutely critical to the patient’s well-being: “The patients should be under doctor’s supervision to control the infection and side effects of the surgery,” he says. He also notes the importance of psychological counseling. “Some of them feel remorseful or dissatisfied with the surgery, and if they do not have psychosocial counseling they are at risk of committing suicide.”

OutRight has documented cases, however, of trans individuals not being able to receive the post-surgery care they require. According to Mr. Arastoo, part of this is financial, and the other part is related to the cultural stigma that accompanies seeing a psychologist. “Many people think only crazy folks need to see a shrink,” he said.

Failures in Provision and Inadequate Access to Healthcare

In light of the numerous examples of botched SRS, I believe the [proper] treatment of transgender individuals in Iran is not possible. Iranian doctors are unbelievably behind international standards. Urinary tract infections, gastrointestinal tract infections and bleedings are among the most common side effects of SRS in Iran.

This 2007 statement by late Ms. Molkara describes the sentiments of many trans individuals interviewed by OutRight. Some prominent Iranian gender confirmation surgeons agree. In Dr. Mirjalali’s words:


175 You can access the full length of the interview, on October 28, 2014, at http://jamejamonline.ir/sara/1687581470866243757 [accessed January 9, 2016].
Unfortunately, I have seen many of these cases. Given the difficult nature of this operation, some of the side effects may be unavoidable. But I also need to warn the patients. You need to do your due diligence when choosing a surgeon. Sometimes the doctors who perform the surgeries are not skilled enough and this costs the patient dearly, forcing them to undergo several operations to clean up the botched work. But the original surgeon is often not willing to accept responsibility for their poor performance. We have a number of patients who had unsuccessful surgeries and are now seeing another surgeon hoping to correct the problem. Needless to say, repeated surgeries raise the risk factor.\(^{179}\)

Dr. Mirjalali is one of the doctors who has been accused by trans individuals of performing sub-standard surgeries. According to the Iranian newspaper \textit{Shargh}, some of Dr. Mirjalali’s patients want to sue him because they are unhappy with the results of their surgeries and feel that Dr. Mirjalali is at fault: “The surgery has taken away their ability to have sex and they have suffered from horrible side effects, such as the closure of their urinary tract, collapse of the breast prosthesis, and stiffness of the vaginal canal (vaginismus).” Dr. Mirjalali dismisses these complaints:

These people forget that the SRS, even with the best prosthesis, will not make the patients a real man or a real woman. This operation is a reconstruction effort to make their bodies look like the body of a man or a woman. We don’t have any trans persons who have done SRS and are \([100\%]\) happy with their situation. I warn my patients before the surgery that SRS is very intense, high risk, and full of side effects. I also tell them that the surgery is irreversible and they will become sterile as long as they live.\(^{180}\)

\textbf{Amirali}, a 30-year-old trans man, is one of the unlucky patients who had a series of botched surgeries. He said that because of the inexperience of the surgeon, he had to undergo seven surgeries:

After the surgery, the bleeding didn’t stop. They had to perform another surgery to find out where the bleeding was coming from, but that didn’t help either. I felt they were cutting my liver into pieces. My body was producing blood clots the size of baseballs. It was numb. I thought I was going to die. The surgeon finally told me the reason for the nonstop bleeding was my drug addiction. I said, “Really?! How come after two weeks of being in the hospital and numerous blood tests no one saw any traces of drugs in my blood?!?”

As a result of the surgical failures, Amir lost his appendix and suffered abdominal adhesions and other serious side effects.\(^{181}\)

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\(^{179}\) You can access the full length of the interview with \textit{Jamejam} newspaper, on October 28, 2014, at http://jamejamonline.ir/sara/1687581470866243757 [accessed January 9, 2016].

\(^{180}\) The original article, published on May 20, 2007, is no longer available from the newspaper’s website, but a copy of the article is available at https://groups.yahoo.com/neo/groups/iran-iran/conversations/messages/3814 [accessed January 8, 2015].

Parsa, a 42-year-old trans man from the northwestern town of Abhar, shared the painful experiences of his GCS with us:

My only problem was my financial condition which forced me to do the surgery in a public hospital that was fully subsidized by the state. I was operated and hospitalized in the obstetrics and gynecology ward... After the surgery, I had a sharp pain in my shoulder and they kept giving me ibuprofen, which caused a stomach hemorrhage. Then they performed the genital operation. I used to push down on my stomach to bear the pain. Finally, the doctor came in and gave me some medicine, but I still had horrible pain for several months after that. And my mastectomy was really botched. I think it was the doctor’s first surgery. I am not satisfied with it and will never get over it.182

Gholipoor, a specialist in trans issues and concerns at the SWO, believes there is a lack of supervision and quality control on a national level. “So far, there has been no supervision over these surgeries by the Ministry of Health,” he notes. “There is no trained team of surgeons who can perform these surgeries...If the Ministry of Health trains a team of experts to supervise these SRSs, many of [the] patients’ problems will be resolved.”183

Another challenge for GCS candidates is the limited number of medical facilities and doctors inside Iran who are willing to provide transition-related care. As Mr. Mazaheri, deputy director of the SWO in charge of social affairs puts it: “the number of doctors who perform the surgery in Iran is less than a dozen because many surgeons are not interested in a procedure that entails multiple stages of surgery.”184 Ms. Aram, a trans activist, agrees:

We still don’t have a sexologist who specializes in transgender issues. There are no courses being taught on transsexuality in Iranian academic centers. Over the past two decades, all surgeries were conducted by four general surgeons who have gained experience by trial and error. Over the past few years, given the high number of trans individuals, [we have seen an increase in] plastic surgeons and some young and inexperienced surgeons in provincial capitals performing SRSs.185

The limited availability of medical centers working on GCS forces many trans individuals, especially those from smaller towns, to abandon efforts to pursue GCS altogether. According to Ms. Bahareh Rahmani, the deputy director of the SWO in Qazvin province:

One of the major problems of trans individuals is the lack of hospitals that perform SRS in the province. Many trans individuals have to go to hospitals

182 Interview in Turkey on November 6, 2014.
184 To read the full interview, on May 26, 2015, see http://isna.ir/fa/print/94030502996/بررسی-لایه-جنسی-از-ت-آ-س-ر-ه-دار-مجلس [accessed January 9, 2016].
in Tehran, which is a tedious process, and most of them end up abandoning their cases. In the past two years, we had 12 transgender cases contact the SWO in Qazvin, but only three managed to follow-up on their treatment and get surgery.\(^{187}\)

**GCS Costs**

The financial situation of many trans individuals does not allow them to pay for the full costs of GCS, leaving many unable to complete the transition process and acquire new identification documents. According to Mr. Gholipoor, most trans individuals who cannot afford to pay for the entire operation only undergo the first phase of the operation.\(^{188}\)

The financial hardships associated with covering the full costs of GCS do not only affect low-income individuals. Mr. Arastoo described how he managed to pay for his surgery:

The cost of the first two surgeries was around 9 million Toomans. Mahtab Karamati [an Iranian actress] intervened and negotiated down the cost down to 400,000 Toomans. [She provided me with] great support and I will never forget it. For the second surgery, my biggest challenge was the cost of the operation. It was about 20 million Toomans. [In the end] 30 of my colleagues chipped in and we managed to pay for the operation.\(^{189}\)

Dr. Mirjalali notes that the high cost of the GCS, along with the financial situation of many GCS candidates, has a direct impact on their post-GCS follow-up and the psychological support they require:

The treatment of a transgender [person] is not just the surgery. They need simultaneous surgical, hormonal, and social treatments. Both because of recovery time and the prevalence of social stigmas against trans individuals, these people normally do not have access to employment after the surgery. They also stop seeing their psychologists.\(^{190}\)

In many cases, the lack of financial resources leads to incomplete GCS and the government’s refusal to recognize the preferred gender of the GCS candidate. Arash, a 30-year-old trans man, explained how despite his financial needs, his requests for financial assistance were turned down, forcing him to complete only a part of his medical transition process:

I got the court’s order and the LMO’s letter and went to the SWO to seek financial help. They said there was no money available. It’s a lie. I feel the costs of these [surgeries] should be covered by health insurance...I could only afford my first operation which was done in a public hospital. The mastectomy was expensive and cost me around 8 million Toomans.

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186 The distance between Tehran to Qazvin is about 90 miles.
187 To read Ms. Bahareh Rahmani’s interview with IRNA, September 6, 2015, see http://www.irna.ir/fa/News/81749161/ [accessed January 7, 2016].
189 You can see the full interview in Persian at http://rouzegar.com/biography/saman-arasto-change [accessed January 7, 2016].
190 You can read the full text of Mr. Mirjalali’s interview with IRNA, January 3, 2015, at http://www.irna.ir/fa/News/81448695/ [accessed January 8, 2015].
But they did not change my identification card because the LMO did not give me the permit. They required me to get a testicle implant before they could give [me] the permit.\footnote{Interview in Turkey on November 8, 2014.}

Due to his financial situation and inability to complete his GCS, Arash felt his life was in limbo. He had a masculine appearance, the national ID card of a woman, and no official recognition of his preferred gender identity. As a result, he was unable to get married, have a family, or even maintain relationships without the fear of being harassed or prosecuted. He felt there was no hope of employment or the possibility of going back to school. “Nowhere and no one was there to help me,” he told OutRight.\footnote{Ibid.} Under the circumstances, Arash felt he had no choice but to leave the country and register as a refugee with the UNHCR in Turkey.

Amir, a 26-year-old trans man from Shiraz, also abandoned the final stages of his GCS process because he was unable to pay the costs:

In 2005 getting SRS authorization was not very easy, but I got it anyway. I could not afford the surgeries, so I had the mastectomy and ovariectomy done together. I paid six million Toomans, which was a lot of money in those days. These procedures are usually done in three sessions, but I did them all at once. I needed five or six more operations to completely get rid [of] any traces of SRS scars on my breast, but I had no money left. To pay for my expenses, I used to go to the Tehran bazaar and work as a porter. No one knew about my life. I suffered from pain, bleedings and infections the whole time.\footnote{Skype Interview on October 16, 2014.}

Some trans individuals who cannot afford to pay for their medical expenses resort to desperate and dangerous measures, including self-medications. Sharareh, a 28-year-old trans woman from Gilan province, told OutRight:

I learned about hormone therapy when I was 16. I had no money to go see the doctor, so I did not do my hormone therapy under any medical supervision. My liver suffered because I monitored my hormone intake myself...But if I had not taken hormones, I would have died of mental illness at a mental hospital.

### Access to Hormones

Many trans individuals, those considering GCS as well as those not able or not seeking GCS, require access to hormone replacement therapy as part of their gender transition.\footnote{For more information, see “SRS in Iran,” available at http://fa.edu.joopea.com/tags/تغییر_جنسیت [accessed May 19, 2016]. Some Iranian experts claim 50 percent of the trans population in Iran are satisfied with their body after hormonal therapy, and don’t feel the need to undergo SRS. Please see IRNA’s article: “Struggle, Isolation, and Fight for Gender Reassignment,” June 15, 2014, available at http://www.irna.ir/fa/News/81275341 [بهداشت_اندیش-ژنخ-پرای_تغییر_جنسیت [accessed May 19, 2016].} Hormone replacement therapy can have serious physical and psychological side effects,\footnote{To learn more about hormones used for trans patients and some of their effects and side-effects, see Dr. Safari Nejad’s article at http://drsfararinejad.net/hormone-therapy-trans-male-to-female/ [accessed May 19, 2016].} and requires conscientious medical oversight. Though essential, the cost of hormone replacement therapy and regular medical visitation...
remains a serious challenge for many trans individuals in Iran.\textsuperscript{196}

For many trans individuals, hormone replacement therapy (HRT) is a lifetime necessity\textsuperscript{197}. At least one estimate puts the average monthly cost of HRT at about $20 to $40 a month,\textsuperscript{198} an amount that is unaffordable for most low and even middle income trans community members in Iran,\textsuperscript{199} many of whom struggle with social rejection (including disownment by the family), homelessness, and lack of access to resources more broadly.\textsuperscript{200} Even for those covered by medical insurance, accessing prescribed hormones through legal channels is a tall order, since many of these prescriptions are rarely available at pharmacies, forcing patients to resort to the black market to obtain them at a much higher price.\textsuperscript{201} The cost of medical treatment, including hormonal therapy, is so prohibitive that some trans individuals have even publicly discussed selling their kidneys to pay for these essential expenses.\textsuperscript{202} Apart from the cost of the hormonal therapy itself, those undergoing the treatment sometimes have to deal with psychological side-effects of taking hormones, including, in some instances, depression, which requires them to seek support from mental health professionals—another costly medical expense that is not easily affordable for many trans people.\textsuperscript{203}

Given the costs associated with taking hormones under medical supervision, some Iranian trans people, including those interviewed by OutRight,\textsuperscript{204} have resorted to self-medication of hormones that they managed to obtain through unauthorized channels. The lack of access to medical care for receiving hormones has also prompted some to resort to online forums to discuss the issue of hormone therapy, the effects of the hormones, and how to administer hormones.\textsuperscript{205}

There are other issues associated with the use of hormones among trans people; some have reported that, given the widespread social stigma against trans individuals, they choose not to seek professional help for injecting legally obtained hormones and instead self-administer their medication.\textsuperscript{206} Some also indicate that the Iranian medical community does not have a clear understanding of their needs, and, instead of a thorough diagnosis of their situation, there is an inclination among

\begin{itemize}
\item \textsuperscript{197} ISNA’s interview with trans expert at the SWO, May 21, 2012, available at http://isna.ir/fa/print/91030100083/‌[accessed May 19, 2016].
\item \textsuperscript{198} The approximate costs of SRS in Iran are available at http://mahditomina.blogfa.com/post/24 [accessed May 19, 2016]. This article was written in the fall of 2008 and the costs have been adjusted based on the currency exchange at the time.
\item \textsuperscript{199} “Interview with a trans person,” http://psychology-yp-trans.blogfa.com/8907.aspx [accessed May 19, 2016].
\item \textsuperscript{201} See August 12, 2015, interview with Reza, a trans man, available at http://www.yjc.ir/fa/print/5289210 [accessed May 19, 2016].
\item \textsuperscript{202} Comments by Ali for Dr. Shamshiri on his online medical forum, available at http://drshamshiri.com/?page_id=1116‌[accessed May 19, 2016].
\item \textsuperscript{203} “10 things that you need to know before SRS,” http://www.mahtaa.com/1392/04/10-‌نکته_بیش‌از_تغییر_جنسیت [accessed May 19, 2016].
\item \textsuperscript{204} Sharareh, Skype interview, December 5, 2014.
\item \textsuperscript{205} For example, see the FAQ section of the Persian Blog “Help FTM,“ at http://www.surgeryts.blogfa.com/8807.aspx and http://offstar.blogfa.com/post-8.aspx [accessed May 19, 2016].
\end{itemize}
some doctors to persuade their clients to only use hormone therapy as their ultimate remedy.207 Dr. Mohammad Reza Safari Zadeh, an Iranian andrologist, admits that Iranian medical training centers, even in their specialized courses, do not offer any training on treating trans patients, and therefore many physicians are not familiar with this issue.208

State Subsidies for Transition-Related Medical Care

In 2003, for the first time, the SWO received 20 million Toomans (equivalent of $25,000 at the time) of government funding to financially support individuals with GID. Since then, the amount and nature of SWO’s financial support to trans individuals has been the subject of much debate and controversy both inside Iran and on the international stage. The Iranian media at the time quoted an official with the Management and Planning Organization (a state agency tasked with planning the state budget) as saying that “two million Toomans” would be made available “to each applicant after the completion of the SRS.” Yet interviews and research suggest that only a few trans people managed to receive as much as one million Toomans in assistance.209

According to SWO’s current guidelines, each trans individual—following judicial and medical approval—can receive an allowance of up to 4 million Toomans for surgery, up to 2 million Toomans for follow-up procedures, and up to 500,000 Toomans for non-surgical treatments. A panel of medical experts from the SWO determines the amount of financial assistance for each patient, and their decision is subject to approval by a committee from the Social Vulnerability Affairs unit of the same agency.210

In October 2007, Mahdi Seyed Mohammadi, the deputy director of the SWO in charge of social affairs, told Etemad newspaper that there had been a new budget allocation for individuals with GID and a “total of 700 million Toomans has been allocated to the SWO to help with the treatment cost [of transgender individuals].” The announcement of a 35-fold increase in subsidies for transition-related health care created much hope and anticipation within the trans community and was welcomed by the international media.211 Although, in his interview, Mr. Mohammadi claimed that “the SWO is required to allocate 5 million Toomans to each trans individuals for their SRS,” it appears that the average amount of aid for those seeking gender confirmation surgery would be closer to 2,500,000 Toomans in light of the number of applications [300] he referred to.212


Minister of Welfare and Social Security,\textsuperscript{213} again declared “the allocation of 5 to 6 million Toomans of financial assistance to pay for SRS of individuals with gender identity disorder.”\textsuperscript{214} In July 2008, Seyed Hassan Mousavi Chalk, the head of the Social Vulnerability Office at the SWO clarified that the 5 million Toomans of financial assistance for SRS was “not a grant” and would only be “deposited to the hospitals or treatment centers [bank] account upon the submission of required documents.”\textsuperscript{215}

Over the past few years, SWO officials have repeatedly referred to a 5 million Toomans subsidy for those seeking transition-related medical care, yet these figures are inconsistent with the number of individuals reported to be seeking care. For example, in November 2012, Mohammad Nafariye, the SWO’s deputy director of social affairs, told the Islamic Students’ News Agency (ISNA) that “350 million Toomans [in] financial assistance...has been distributed...to support 100 transgender individuals during this fiscal year.”\textsuperscript{216} Based on these numbers, the average financial assistance for each medical care recipient would be around 3,500,000, and not 5 million Toomans. In May 2015, SWO officials again told Iranian media that trans individuals seeking medical care can receive “around 4–5 million Toomans” from the agency for costs associated with medical transition.\textsuperscript{217}

In addition to a lack of clarity and transparency surrounding the exact amount of government subsidies for transition-related medical care, there are questions regarding the willingness or capacity of the SWO to provide support to the trans community. In his July 15, 2015, interview with the official Islamic Republic News Agency, the head of the SWO, Mr. Anushiravan Mohsen Bandpei, said, “attending to issues related to transgender individuals such as treatment, care, and support is not clearly listed in the State Welfare Organization’s job description.” He added, “solving the trans community’s problems requires spending a lot of money,” and that because the agency’s budget in 2015 was “specifically operational [it had] no resources to allocate to these issues.”\textsuperscript{218}

Several people interviewed by OutRight said that in certain parts of the country, financial aid for transition-related healthcare had been completely suspended since 2012, and that the agency reportedly blames this shortcoming on a lack of dedicated government funds. Interviewees told us that the SWO only reimbursed them for a portion of the surgery costs, as well as a small fraction of the expenses associated with hormone treatment. Amir, a 26-year-old trans man from Shiraz, told OutRight:

> There is no financial aid by the state and I received nothing. They just gave 500 thousand Toomans for hormone therapy. Not even a letter so that I can go to the hospital. Under those circumstances and right after the surgery I had to drive a cab

\textsuperscript{213} Ministry of Welfare and Social Security was consolidated with the Ministry of Labor in June 2011.

\textsuperscript{214} The full text of the speech is available in Persian at: http://alef.ir/vdci3uar.t1a552bcct.html?2wml [accessed January 8, 2016].

\textsuperscript{215} See the Hamshahri article: “Unsatisfied Individuals with Gender identity Disorder, In Search of their Lost Half,” available at http://hamshahrionline.ir/details/57157 [accessed January 9, 2016].

\textsuperscript{216} The full interview is available at http://www.hamshahrionline.ir/details/192032/Society/socialnews [accessed January 8, 2016].


\textsuperscript{218} The full interview of the head of Iran’s State Welfare Organization with IRNA is available at http://www.irna.ir/fa/News/81684269/ [accessed January 8, 2016].
with my brother’s driving license to pay my surgery costs.\textsuperscript{219}

Reza, a trans man who was interviewed by an Iranian news agency in August 2015, echoed Amir’s sentiments: “They say the SWO gives 5 million Toomans to trans individuals. This is not true. I had a hard time registering with them and after 18 months they only gave me 900,000 Toomans.”\textsuperscript{220}

The actual costs of transition-related medical care are higher than government’s maximum allowable subsidies. Since these forms of healthcare are still widely considered to be cosmetic, they are generally not covered by health insurance companies;\textsuperscript{221} and applicants are forced to cover expenses themselves. The official publication of the SWO estimates medical transition costs for trans individuals to be between 15 and 20 million Toomans for trans men, and between 20 and 25 million Toomans for trans women.\textsuperscript{222}

In August 2015, Taraneh Aram, a trans activist who elected to pursue medical transition eleven years before, told an Iranian news agency that “based on the Trans Society and Mirdamad Clinic’s figures, each patient needs at least 20 million Toomans.”\textsuperscript{223} Others put the estimated costs of medical transition much higher. In 2012, Gholipoor, a specialist on transgender community issues at the SWO, told ISNA that the cost of the gender confirmation surgery could be as high as 40 million Toomans, adding that the first phase of surgery alone can cost around 8 million Toomans.\textsuperscript{224} Dr. Bahram Mirjalali, a France-trained private surgeon who, on his own initiative, pioneered GCS in Iran, told an Iranian state-run newspaper that the cost of the operation is often negotiable:

\begin{quote}
[I]t all depends on the surgeon. Sometimes the doctors may give a discount to a patient who can’t afford the cost.... Most of our clients are financially disadvantaged... Many of them are disowned by their families and they are willing to take any risks to get the money for the SRS, which sometimes puts them in harm’s way. Obviously, they do anything to get a discount from us for the SRS. We collect part of the surgery costs from the patient and part of it from the State Welfare Organization. There is [also] a charitable foundation that pays for part of the costs related to the surgeries of these patients.\textsuperscript{225}
\end{quote}

It should also be noted that between October

\begin{itemize}
\item \textsuperscript{219} Skype Interview on October 16, 2014.
\item \textsuperscript{221} Habibullah Mazaheri, Deputy Director of SWO in Charge of Social Affairs with ISNA, May 26, 2015, available at http://isna.ir/fa/print/94030502996/ [accessed January 9, 2016].
\item \textsuperscript{222} Behroozi, the digital publication of SWO’s Yazd Branch, March 2015, page 8, available at http://www.yazdbehroozi.ir/content/newspaper/Version1/O/Page8/Block1050/newspaperb_1050.jpg [accessed March 25, 2015].
\item \textsuperscript{224} “Individuals with Gender Identity Disorder will be Covered by Health Insurance,” ISNA, May 21, 2012, available at http://isna.ir/fa/news/91030100083/ [accessed January 7, 2016].
\item \textsuperscript{225} Please see Dr. Mirjalali’s interview with Jame-jam newspaper, October 28, 2014, available at http://jamejamonline.ir/sara/1687581470866243757 [accessed January 9, 2016].
\end{itemize}
2009 (when the SWO first announced the news of a 5 million Toomans subsidy) and May 2015, Iran’s currency lost about seventy percent of its value, significantly reducing the purchasing power of the government subsidies regardless of their actual amount.226

There is a continuing debate in Iran about whether the government is doing enough to provide adequate transition-related health care support, especially financial support, to members of the trans community. Some, like Dr. Soudabeh Masahi Oskooie, a GCS surgeon, believe the government, and especially the SWO, is doing its best to meet the healthcare needs of the trans community.227 But many trans community advocates believe government agencies can do a lot more. Elahe Farsad Khalili, a researcher on trans issues, explains:

Unfortunately, the state agencies don’t offer any support and are only content with Imam Khomeini’s fatwa. If we admit that society is uneducated about this issue, why don’t we try to educate the public? The parents who live in a small village, how should they know their child is trans? Do our officials understand transsexuality?228

Saman Arastoo, a trans man and celebrated Iranian movie actor who elected to pursue medical transition in 2008 at the age of 41, agrees:

To get the whole amount [of the SWO’s subsidy] you have to spend a lot of time and energy going from one office to another and get a bunch of letters. This really wears you down...Also the SWO refers us to doctors whom we don’t know. The same people won’t allow those doctors to even operate on their cats, but trans people, with all social, family, and psychological problems they have, end up going to a doctor they know nothing about. There is no dedicated clinic, medical advisory group, nothing for the Iranian trans community.”229

226 Based on Iran’s Central Bank’s official exchange rate, one US dollar was valued at 932 Toomans in October 2007. In May 2015, one US dollar was exchanged for 2,830 Toomans. See http://www.cbi.ir/ExRates/rates_fa.aspx [accessed January 14, 2016].

227 To read the full report from the March 2014 panel discussion on “The Lived Experience of Trans Individuals in Iran,” which was held at Tehran University, see http://mehrkhane.com/fa/news/10770/ [accessed January 8, 2016].

228 You can read the detailed report from October 13, 2015, “Interdisciplinary Perspectives on Transsexuality in Iran,” Panel Discussion at Social Science Faculty of Tehran University, available at http://mehrkhane.com/fa/news/21734/ [accessed January 8, 2016].

Many trans Iranians report that in addition to the legal, medical, and financial challenges they face, they endure social pressures, ranging from exclusion in the workplace and at school, to domestic violence and public harassment.

The social discrimination, domestic violence, and legal harassment experienced by trans individuals often starts at a young age and continues throughout their lives, regardless of whether they choose to pursue medical transition or legal gender recognition. Dr. Saberi, an official with the LMO, summarized his experience working with the families of trans individuals:

"[Some] parents even encourage the unusual behavior of their kids because they find it cute. For example, for a family that has several sons and longs for a daughter, having a son who uses nail polish and pretends to be a girl may even be charming for his mother and father. But as the kid grows older, his behavior starts to worry the parents who realize that he does not act like other boys his age. The child will then experience humiliation and disdain. He may be called all sorts of names. The parents may gradually notice this as their child [gets older]. In many cases, the families become verbally abus[ive] with their transgender child, engage in back and forth bickering with them, and sometimes even disown them. I have not seen many families with a trans child who actually want to go to a psychologist for counseling."
They are normally very resistant to accepting the transsexuality of their child. [They] feel the angst and guilt and parents often blame each other for the transsexuality of their children.\textsuperscript{220}

As previously mentioned, part of the problem lies with traditional and religious notions, such as prohibitions on \textit{haraam} acts. For example, Ghazal Sadat Asadiyan, a trans woman who was preparing for GCS, told the official publication of the SWO about how she was thrown out of a religious service during the high Shia holiday of \textit{Ashura} because of her effeminate look, even though she was dressed as a man. Ghazal said, “I was heartbroken. I went back home and told my family the story. I blamed them for the incident and asked them not to pressure me to dress [as a man] anymore.”\textsuperscript{231}

Another part of the problem stems from the fact that despite GCS being legal in Iran, trans individuals who have completed surgery are not legally protected against discrimination at their workplace and within public spaces, nor are they immune from acts of social intolerance and family rejection because of their gender identity. According to Dr. Cohanzad, “The biggest challenge is the social acceptance of trans individuals after their surgery. All the technical knowledge required to perform the surgery correctly pales in comparison to the opinions [and reactions] of a father, mother, neighbors, and community members.”\textsuperscript{232}

Dr. Mahdi Saberi agrees: “Fifty percent of the families of children with GID oppose their child’s SRS. Twenty to twenty-five percent of them are only willing to accept their child’s condition with certain stipulations.”\textsuperscript{223} Dr. Bahram puts it another way:

The SRS for trans people is like opening the doors of the cage and letting them fly. But fly where? Into a society where the person is better or worse off? After the surgery, it is critical that [trans individuals] get the help of their family, friends, and society so they could live a better life.\textsuperscript{234}

Dr. Rostami believes that the hostile environment and lack of societal support many trans individuals experience pushes them to either contemplate, or attempt, suicide. “The rate of suicidal thoughts among trans individuals is one hundred percent, meaning that every one of them has thought of committing suicide at least once [in their lives],” he says. “The actual suicide attempt rate among them is seventy percent, meaning that out of ten trans people, seven of them attempt suicide.”\textsuperscript{235}

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\textsuperscript{221} Behroozi, the digital publication of SWO’s Yazd Branch, March 2015, page 10, available at http://www.yazdbehroozi.ir/content/newspaper/Version1/0/Page10/newspaper-pdf_1_10.pdf [accessed January 14, 2016].

\textsuperscript{222} You can read the interview in Persian at http://www.iran.pezeshk.us/archives/31420 [accessed January 7, 2016].


\textsuperscript{224} You can read the full text of Mr. Mirjalali’s interview with IRNA, on January 3, 2015, at http://www.irna.ir/fa/News/8148695/ [accessed January 8, 2016].

Domestic Violence

Beyond the legal discrimination that all women and girls experience from both the civil and penal code, there are no protections under Iranian law for victims of domestic violence.236 Ghazal Zaferani, an Iranian lawyer who has represented dozens of trans clients, summarizes the abuse and violence many trans individuals experience at home:

Unfortunately, because of prevailing cultural misconceptions among Iranians, many consider transgender individuals to be perverts and either ostracize them or treat them with hostility...Many family members of trans individuals disown them and cause them heartbreak. In some cases, I have seen trans individuals who are killed by family members who see them as sexual perverts.237

Arash, a 30-year-old trans man from Tehran, told OutRight about the abuse he suffered at the hands of his mother and other family members:

My mother was getting suspicious when she realized that I was starting to look more and more masculine. She kept asking why I don't shave my legs and have my periods. One day I finally told her that I'd become a man. She said, “How can you be a man? I have changed your diapers [and I know you have female genitalia]!” Then she and my brothers began beating me savagely. My brother said if he sees me in male clothing again he would have no mercy on me...He was a big and powerful guy. He used to regularly beat me up.238

In addition to enduring domestic violence, Arash had to cope with persistent verbal abuse from his neighbors. He said that because his family treated him like an unwanted child, it was easy for others to mistreat him. “The woman living next to us used to insult me a lot...I will never forget her,” he told OutRight. “Once she called me a dirty whore. My girlfriend was with me. Other neighbors were yelling at us from their windows. They wanted me out of that neighborhood.”239

Arash’s mother ultimately reported him to the police for dressing as a man:

My mother went to Vozara Detention Facility240 to file a complaint against me. She complained that I was a girl who had turned her back on religion and goes out in public unveiled. The court issued a subpoena. I put on my manteaux (the long loose dress Iranian women are required to wear in public) and headscarf and went to see my psychiatrist who gave me a letter explaining that I was possibly a transsexual. I then went directly to the court, sat there and explained my situation. They were nasty and could have hurt me much more, but the judge dropped charges against me.”241

237 To read the full text of her interview with Ghanoon newspaper, July 21, 2015, in Persian, see http://www.ghanoonndaily.ir/News/55044/قانوني-براي-حمايت-از-تراجسيها-ندايم [accessed January 6, 2016].
238 Interview in Turkey on November 8, 2014.
239 Ibid.
240 Vozara complex in Tehran is the headquarter of the Anti-Social Vice Unit of the Tehran Police, where individuals charged with “morality crimes” such as cross-dressing are being processed.
241 Interview in Turkey on November 8, 2014.
Arash recalled a conversation with his mother after he was acquitted: “I cried and said, 'Mom, they will kill me. If they think that I am a lesbian, they will kill me.' She did not understand how serious the charges against me were.”

Sharareh, a 26-year-old trans woman from Gilan province, described to us the abuse she endured after her parents discovered she was trans: “Once I read about intersexuality in a magazine. I got so excited about it and showed the story to my father. He slapped me in the face. This was the first time in my life [I remember] being physically punished.” Sharareh explained that the abuse soon turned into pervasive domestic violence because of her being trans:

We went to see a general physician who said I was physically healthy and prescribed an ultrasound of my internal organs. I hoped they would find something in my body. My father brought a sickle with him to the ultrasound and told me on our way there that if I was intersex he’d kill me with that sickle. [At that moment] I felt I was the loneliest person on the planet. The ultrasound showed I was not intersex. When we went to see the psychiatrist, I told him everything [about my sense of my gender]. The doctor told me there was nothing wrong with me. He encouraged me to continue my education. But my mother started to intimidate me. She said since I told the psychiatrist I had feelings for members of my biological sex, the doctor would report me to the authorities and I would be executed.

Sharareh continues:

My parents would take me to see a kind of shaman [doanevis in Persian] who would say prayers for me. They would all say prayers together and make me drink “holy water” and do lots of other things. [When none of those things worked], my family started beating me up with belts or water hoses, punching and kicking me, and physically hurting me to force me to change. One day we found out my cousin was pregnant and I said, “Poor thing!” My father started beating me and then tried to kill me by putting a pillow over my face. I could not breathe. I thought I was going to die.

Sharareh also remembers more recent, painful memories:

My father once burnt me with scolding hot water because of my feminine appearance and behavior. He kept saying people like me should die... and then he poured the boiling water on my leg! He later applied ointment on the wounds. Another time, he threw a computer tower at me. [It hit me in the mouth] and I started bleeding.

Unfortunately, Sharareh’s mother was equally abusive, though her ill-treatment was mainly emotional in nature:

My mother put a lot of psychological pressure on me,” Sharareh told us. “She used to cry and ask why “this misfortune” was plaguing her child. Both my parents would pray every night, asking God, and the saints, to heal me.”

243 Skype interview, December 5, 2014.
**Pedram**, a 23-year-old trans man, told us about the abusive family environment he grew up in:

Neither society nor our families understand us. They think we are brainwashed to think we are boys. I fight with my father every day. He thinks I am either delusional or a pervert. Even in college, and at work, they give us a hard time. Last month, I tried to end my life four times. If it were not for my brother I would be dead by now.  

**Niusha**, a 22-year-old trans woman from the town of Islamshahr, near Tehran, shared her experiences with us:

When I talked to my father [about my transsexuality], he said he'd kill me. He went insane. He used to constantly beat me and my mother up. He used to beat me because of my choice of outfit. When my mother protested and said nowadays everybody is wearing these types of clothes he responded with: “Everyone in the neighborhood is asking me if my child is intersex.”

Despite the harsh realities experienced by many trans individuals at the hands of their families, not all of them experience hostility or rejection. **Nahid**, a 28-year-old trans woman from northern Iran, recently completed GCS. She was very thankful to her mother, an illiterate housewife who has been her biggest supporter during her transition: “Five years ago my mother allowed me to dress in public like a woman and stopped my brothers from bothering me. I want to become a hairdresser and have made a promise to God that I will perform the hajj with my mother.”

Some experts believe that over the past few decades, Iranian families have generally become more aware of issues related to trans experience. According to Dr. Mirjalali:

In the past ten to fifteen years there has been better awareness about this issue in our society and, as a result, transsexual individuals have a much better situation now compared to the past. They often come to the doctor with their parents, whereas fifteen years ago these people used to show up lonely and without any support. That being said, transsexual individuals still have a very hard time being accepted in society and finding a job that can provide them with a livelihood.

**Sexual Violence**

Many trans individuals who spoke to OutRight told us that they suffered sexual harassment and assault but felt that they could not report their experiences to authorities, or discuss them with their lovers ones, for fear of being blamed or punished.

**Honey**, a 28-year-old trans woman from Bukan,
is a rape survivor. After the rape incident, her rapist continued to live freely in the same city as she did. She explained her story to us:

That evening, I took a cab to go to my aunt’s home. I realized the driver was the same guy who used to stalk and harass me on the street. He used to threaten me and say that if I didn’t have sex with him he would tell my family [about my being trans]. I acted as if I did not recognize him. He locked the doors and turned the car around. I asked him where he was going. He drove us to a remote area that looked like a wheat field. We got out of the car, I wanted to run away but he grabbed me from behind and threatened me with a sharp knife. I cried and begged him not to touch me. He said, “take off your clothes or I will stab your back.” I cut both my hands trying to take the knife away from him. He raped me there. No one could hear me shouting. I was only nineteen. I saw him around the city after that incident several times. But what could I do? I can’t even tell my family. They would not help me. I could not tell the police either since they knew my family and would blame it on my appearance.

Mary, a trans woman from Fuladshahr, told us that she wanted to run away as a teenager because of the abuse she endured at home, and the sexual abuse she suffered at the hands of her uncle. But she felt trapped, with nowhere to go:

During high school, I ran away from home and went to Tehran. A taxi driver started following me from the moment I got to the bus terminal. He kept asking me to go home with him. I ran away from him to a park. Later I went into a company’s office and asked for directions. When I went to use the bathroom a big guy approached me and asked me to go home with him. So I took refuge in Daneshjoo Park. There I ran into students who were offering themselves for sex. I was so disgusted that [I] took a bus and went home after only one day. No one realized that I was missing for 24 hours, and what happened to me.

Niusha, a 22-year-old trans woman from Islamshahr, survived a gang rape. She said she was raped by seven or eight people in an abandoned area. The rapists were never punished for what they did. Traumatized by this assault, she was too scared to discuss the event with anyone or to seek help. She told OutRight:

That day I went shopping with a younger boy in our neighborhood. All of a sudden about seven to eight people showed up in two cars. My friend ran away; he was just a child. I tried to escape to the ruins. They chased me and threatened me at knifepoint...They all raped me. I felt disgusted with myself. I still have nightmares when I think of those ruins. My friend told me to report it but I was afraid of my reputation and honor. I did not tell anyone.

Arash, a 26-year-old trans man from the southern city of Kerman, worked as a construction worker to save for the costs of medical gender

248 Interview in Turkey on November 4, 2014.
249 Daneshjoo Park in Tehran is a popular hangout spot and gay and trans hookup place.
250 Interview in Turkey on November 6, 2014.
251 Interview in Turkey on November 12, 2014.
transition. He said he slowly came to trust his employer who found out about his being trans. Arash asked the employer to keep his money for him till his savings were sufficient to cover his surgery. In 2011, when it was time for his employer to hand over Arash’s savings, he told Arash he wouldn’t release the funds unless he had sex with him. When he refused, the employer raped him. “I could not go to court or the police because they would have found out I was dressing up as a man and working among men,” he said. “They could have arrested me for that.”

Arash became severely depressed after being raped. He quit his job and confined himself to his home for months.\(^{252}\)

**Forced Marriage**

Families who do not accept the trans identity of their child, especially their trans sons, sometimes resort to forcing them into marriage in order to “hide the problem” or “straighten out” their loved ones. Akbar, a 23-year-old trans man from Sanandaj in Iran’s Kurdistan province, said he was subject to constant physical and mental abuse by his family. When his family tried to pressure him into getting married, Akbar fled the country. He was nineteen at the time. He says his family was constantly embarrassed because of his masculine appearance and believed he brought shame and dishonor to them. His father physically and emotionally abused him because of this. One day Akbar’s mother took him to a doctor who told them that Akbar may require GCS. When his father found out about the doctor’s visit, he beat Akbar, called the doctor’s diagnosis “nonsense,” and threatened to kill Akbar if he ever brought up the doctor’s suggestion again.

Akbar said the pressure at home became unbearable and he twice attempted suicide; once by cutting his veins and another time by taking pills. Akbar’s father refused to take him to the emergency room after his first attempt, but his mother saved his life. Later, when Akbar got accepted to university, his father banned him from continuing his studies unless he married a man. His father forced Akbar to get engaged with his first cousin, but he eventually managed to run away to Turkey without going through with the forced marriage.\(^{253}\)

Ashkan, a 32-year-old trans man from Kerman, had a similar experience. His family forced him into a marriage that led to years of sexual violence and psychological abuse. He told OutRight that when he was only 17-years old, his parents forced him to choose between one of two men who came asking for his hand in marriage. Ashkan said one of them was a 52-year-old man, and the other a 26 year old. Under family pressure, he chose the 26 year old who was actually his girlfriend’s brother. He thought by marrying his girlfriend’s brother he could remain close to her and convince the brother to leave them alone.

But from the first day of their marriage, the husband sexually and physically assaulted Ashkan. Ashkan told OutRight that his husband used to force him to drink alcohol, after which he handcuffed and raped him. His husband forced Ashkan to grow long hair, use makeup and wear feminine outfits. No one came to his defense. When Ashkan became pregnant, his husband, who was a drug addict, forced...

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\(^{252}\) Interview in Turkey on September 8, 2012.

\(^{253}\) Interview in Turkey on September 8, 2012.
him to sign a document forfeiting his right to dowry and child custody. Ashkan finally ran away from home without his child and went to Tehran: “I just wanted to be somewhere where no one knew me. Somewhere far away from my family and that life.”

**Workplace Discrimination**

Although being trans is not, in and of itself, considered a crime in Iran, social stigma often discourages many employers from hiring trans individuals. Dr. Masahi Oskooi notes:

> Trans individuals have a difficult time finding a job...Many employers fire them as soon as they find out they are trans. As a result, they end up doing things that lead to drug addiction, STDs, and even HIV. How does the society react to them: by feeling pity, making fun of them, or giving them handouts? But trans individuals need to be treated as human being.  

Ms. Khalili, a researcher, explains the nature of workplace harassment that trans individuals often experience:

> Because of their [physical and behavioral] traits, trans individuals are quickly labeled and ostracized by members of society...They constantly feel confused, guilty, and disgusted with their bodies. They are harassed on the street and they are usually unable to find a good job. If their employers find out about their situation they either fire or sexually harass them. These people have difficulty meeting their most basic needs such as food and a place to sleep.

Mr. Arastoo, the Iranian trans actor, told Iranian media about discrimination he faced as an actor:

> A few years ago I started acting for a theater performance. But the show went on stage without me. When I asked why, the director told me that the officials at the Tehran City Theatre told him: “You need to replace him before we can allow your show to go on.” I followed up on the case to figure out what was really going on. Interestingly, the Central Theater House in Tehran denied the story and said it was the director who made the decision. [I also remember when] Saman Taraki used me in the movie Bubble which aired on state-run television too. They questioned him for using me as a cast member, but he had enough integrity to defend me in public.

Elnaz, a trans woman, also shared her experiences at the workplace with OutRight:

> I got a job as a car service driver. Clients used to call the agency and ask them

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254 Interview in Turkey on September 10, 2012.

255 “Lived Experience of Iranian transsexuals,” Panel Discussion at the Social Science Faculty of Tehran University, April 17, 2014, full report available at http://mehrkhane.com/fa/news/10770/

256 “Interdisciplinary Perspectives on Transsexuality in Iran,” Panel Discussion at Social Science Faculty of Tehran University, October 13, 2015, a detailed report is available at: http://mehrkhane.com/fa/news/21734/

not to send me out to pick them up. The company felt I was damaging their reputation. They thought I was intersex. They were very nasty to me [and finally fired me] ...[Later] I decided to take a course in tourism, offered by the Ministry of Culture, Art and Islamic Guidance. They could not accept my transsexuality and let me go...I was penniless. No one was willing to offer me a job in Tehran. They would only accept me as a sex worker. I finally ran into another trans woman who worked as a cut machine technician. Her employer felt sorry for her and did not fire her. She helped me out.258

Niusha, a 22-year-old trans woman from Islamshahr, told us,

I was working as a salesperson at an MDF [medium-density fiberboard] factory. I used to cover my face with a mask, but people still used to pick on me for my appearance. They would roll their eyes and say out loud, and in an insulting tone, [that I was intersex]. I was the subject of everyone’s curiosity,...They would come to my desk and harass me when they had nothing else to do.259

Sharareh, a 26-year-old trans woman from Gilan province, told OutRight that without an ID card that reflected her gender identity, she was unable to find a job and could not continue her education at university. She was therefore unable to pay for the costs of her transition-related medical care. She was forced to financially rely on her parents, who subjected her to abuse and mistreatment for years. “My financial situation is really awful because I am completely dependent on my parents to support me,” she told OutRight. “Without them I wouldn’t be here.” Sharareh said that the cost of her GCS was about 13 million Toomans, and the SWO could only cover three to four million of it.260

Though there are many challenges, some trans individuals are able to work and make a living. Parsa, a 42-year-old trans man from Abhar, was able to return to his previous job after completing surgery. He told OutRight:

[At first] I used to go to work dressed as a woman. After some back and forth I decided to dress as a man. But before that I needed to talk to my colleagues. My female colleagues already knew about my transsexuality...Other colleagues were shocked when they found out. Some even thought I might lose my job. I finally decided to go talk [to] the manager. I told him I wanted [to] undergo SRS and I needed to take some time off...I told him that I had this issue since my childhood and now I could finally become a man. The process of getting back to work was really difficult. At first they were reluctant to take me back. It took five months to get my new ID. During this period I was jobless. [After I received my new ID I went back to work, but] entering the old work environment was not easy. My boss took me to each and every one of my colleagues and introduced me with my new name and gender one by one. It took them a year to treat me like I was a normal [human being].261

258 Interview in Turkey on November 12, 2014.
259 Interview in Turkey on November 12, 2014.
260 Skype Interview on January 5, 2014.
261 Interview in Turkey on November 7, 2014.
Bullying and Abuse in Schools

Since the 1979 Revolution in Iran, gender segregation has been strictly enforced in all primary and secondary schools, but not in universities. The aim of this segregation is to ostensibly remove the so-called “moral corruption” that surrounds the mixing of sexes, as well as enabling students to focus solely on their studies. In recent years, the hardliners in Iran have tried to expand the gender segregation in schools, announcing a new initiative to publish gender-specific textbooks for school children. The Ministry of Science, which is responsible for all higher education in universities, has also adopted policies to Islamicize universities and segregate certain classrooms and public spaces. Such policies have resulted in women being denied equal access to higher education.

Segregation is not just limited to schools. Despite the fact that there is no legislation requiring gender segregation in all public places, various organs of the state have adopted regulations that segregate individuals by gender in sports centers and on public transport.

Gender segregation in schools is based on the gender marker on an individual’s national ID card. This means that trans girls are generally required to attend all-male primary and secondary schools. The same holds true for trans boys. Under these circumstances, it is quite common for young trans boys and girls to be bullied, or physically and sexually harassed at school.

“...one of the children took a chair and hit me on my back. It hurt so badly I could not breathe. When I reported this to the principal, he kicked me!...I went to the vice principal to complain about students harassing me, he mocked me and started singing a ridiculous song... They called my father to the school and told him I was trying to seduce other children.”

- Sharareh from Gilan

Sonia, a 28-year-old trans woman from Tehran, shared her experiences as a trans girl. As far back as Sonia can recall, her school days were filled with bullying and harassment:

Everyone in school used to mock me, even the principal and the vice principal.

262 For a full history of gender segregation in Iran, see Women and Politics in the Islamic Republic of Iran: Action and Reaction, Vakil, S., available at https://books.google.com/books?id=WB3m-cBrQ4&pg=PA109&dq=gender+segregation+in+school+in+Iran&hl=en&sa=X&ved=0CCwQ6AEwJwVChMTY____fWyAIVzHQ-Ch3v7gW6F#v=onepage&f=false [accessed October 22, 2015].

263 “Iran To Extend Gender Segregation To School Textbooks,” http://www.rferl.org/content/iran_gender_segregation_school_textbooks/24453032.html [accessed October 22, 2015].


They used to call me “sissy boy.” I had nowhere to turn to. They told me I was “acting like a faggot.” My father thought I was playing with his reputation and bringing shame onto him. I used to cry a lot and felt guilty. I was in my third year of middle school when my classmates started sexually harassing me, fingering me or forcing themselves on me from behind. Children would insult me, using vivid sexual language. Once, one of the classmates pulled his pants down and asked other children to call me over.  

Sonia continued:

I was in my second year of middle school. One of the children who always harassed me opened the bathroom door and came in. He wanted to pull down my pants and underwear. One of the children saw us and reported us to the Vice Principal. The school called my parents. My father beat the crap out of me.

The situation at the boys’ high school was not much better for Sonia:

When I was in my second year of high school four students pinned my arms and legs to [undress me and] see my genitalia. My father used to say he wished I were dead so that I didn’t embarrass him. I thought there has to be something wrong with me to make me suffer so much during my childhood.

She said teachers, principals, and school staff would sometimes “join in the fun” and mock her. Sharareh, a 26-year-old trans person from Gilan province, had similar experiences:

When I was at school I was constantly afraid of being raped. The [teachers used to] seat me by myself, alone, in the middle of the class, since students behind or next to me used to touch me all the time. During the break, children used to throw my stuff on the floor. Once, when I was collecting my things from the ground, one of the children took a chair and hit me on my back. It hurt so badly I could not breathe. When I reported this to the principal, he kicked me! I just could not understand why. Another time when I went to the vice principal to complain about students harassing me, he mocked me and started singing a ridiculous song...They called my father to the school and told him I was trying to seduce other children. That was enough for my father to come after me [and threaten me]. In secondary school, I had to change my school several times, but children continued to bully me. During the break, I was not allowed to go out of the class so children would not harass me. Getting to school and going back home was a big challenge.  

Martha, a 27-year-old trans woman from Arak, told us,

At school, students constantly bothered me, calling me “the cute one.” Later, in secondary school, it got worse. Everyone wanted either to harass me or have sex with me. Teachers closed their eyes

267 Interview in Turkey on November 4, 2014.
268 Ibid.
269 Skype Interview on December 5, 2014.
to what was happening... At that age I thought I was an embarrassment and I had to suck it up and be a man. My classmates used to touch me inappropriately all the time. ... On the way to the school other children used to poke and finger me but I could not say anything to my family since I hated them too.\textsuperscript{270}

**Honey**, a 28-year-old trans woman from Bukan, had a similarly negative experience. She told OutRight that she was forced to quit university after becoming the subject of persistent harassment by fellow students, both men and women. She shared her experiences with us:

When I was in third grade in high school, my school's vice principal used to make suggestive gestures and tried to get sexually intimate with me [a few times]. I felt very uncomfortable. Later I was admitted to Urmia University to study accounting. My appearance and outfit made me stick out among the other students. Their harassment started from the moment I went to register for school. Everyone was constantly checking me out, to the point that I stopped going to university that semester. Their stares were worse than their verbal insults. Boys used to make comments and kept asking: "Is she a boy, or a girl?" In the classrooms, boys sat on one side and girls on the other. When I would sit down someone would always say I was on the wrong side.\textsuperscript{271}

**Susan**, a 27-year-old trans woman from Tehran, realized she was a woman when she was in middle school. She was expelled from university after two semesters. Despite having a letter from the LMO confirming her being trans, university administrators refused to allow her to show up to school with a male ID card dressed as a woman.\textsuperscript{272} The trans advocacy website, Mahtaa, reported a similar incident on their website in which a trans student was reportedly dismissed from university because she had undergone GCS.\textsuperscript{273}

**Arash**, a 30-year-old trans man from Khansar, was forced to quit university because of the challenges of dealing with the mandatory dress code. He told OutRight:

When I started my transition I could no longer go to the university. I had a different gender identity. I was a girl on my ID card... There was no place to go, no one would help me, not the government or my family. [When I decided to get my passport and leave the country], they told me that I had to go back to wearing the hijab so that they could issue my passport. I went there veiled. I felt humiliated... I just put a blanket in my bag and I said to myself: "Arash, there is no way you can come back to this country. You may [end up] sleeping on the streets, but you can't come back."\textsuperscript{274}

\textsuperscript{270} Interview in Turkey on November 9, 2014.
\textsuperscript{271} Interview in Turkey on November 4, 2014.
\textsuperscript{273} To read the full length of this article, see http://www.forum.mahtaa.com/Thread-اختلال-در-هویت-جنسی-من-نه-نم [accessed January 8, 2016].
\textsuperscript{274} Skype interview on November 19, 2014.
Recommendations

Based on the findings of our research, we have identified a number of systematic problems faced by the trans community in Iran.

While certain aspects of trans rights, including access to gender affirming surgery, are legally recognized, the Iranian government continues to promote a medicalized understanding of gender and gender identity, which severely limits the set of rights available to trans people in Iran. Furthermore, the report documents widespread discrimination, abuse, and other human rights violations against trans individuals, regardless of their legal recognition by the state.

In order to address these issues, we recommend the following changes to be implemented to improve trans lives in Iran.

**Recommendations for the Executive Branch**

- Recognize the rights of all trans individuals, regardless of their decision to pursue medical gender transition, and guarantee the right of all individuals to choose their own gender identity, regardless of the sex assigned to them at birth.
- Ensure that law enforcement receives culturally competent training in cases of domestic violence and child abuse.

**Recommendations for the Legislative Branch**

- Eliminate all legal barriers to full equality before the law for women.
- Decriminalize consensual same-sex conduct.
• Extend full legal recognition to all trans people regardless of bodily modification or sex assigned at birth.

• Enact laws that fully protect trans individuals from domestic violence, sexual harassment, discrimination, bullying, blackmail, and physical assaults.

**Recommendations for the Judiciary**

• Implement existing laws to ensure that cases of domestic violence, child abuse, and sexual exploitation are fully investigated and prosecuted regardless of gender identity.

**Recommendations for the Ministry of Cooperatives, Labor and Social Welfare**

• Abolish any medical requirement, including surgeries and psychiatric assessment, as a pre-requisite for full legal status for transgender people under the law.

• Allow individuals to legally change their legal name and gender in accordance with the individual's sense of gender identity.

• Utilize its authority to draft and help pass legislation that explicitly bans all forms of discrimination and unfair treatment of individuals based on gender identity or expression, and protect the rights of trans individuals to education, work, and life.

• Sponsor public educational campaigns about gender identity and domestic violence in order to facilitate and encourage social acceptance of trans individuals.

**Recommendations for the State Welfare Organization**

• Provide full financial, medical, and psychological support to trans individuals who desire transition-related healthcare, including hormone replacement therapy and gender confirmation surgery.

• Protect and shelter trans individuals who are disowned by their families or have become victims of domestic violence.

• Create a dedicated hotline—modeled off the National Crisis Hotline—to offer professional and confidential advice to trans individuals in crisis.

**Recommendations for the Ministry of Health**

• Establish an official authority to set standards for the unbiased, patient-centered treatment of trans patients and to investigate allegations of abuse or misdiagnosis by doctors, psychologists, and psychiatrists treating trans clients.
Recommendations for Military Draft Board

• Make all requests for medical transcription exemption, including by trans individuals, confidential and respectful.

• Amend laws and regulations on conscription exemption so that trans individuals are no longer classified as mentally sick, sexually deviant, or any other humiliating and disrespectful categorization.

Recommendations for Medical and Psychological Institutions

• Educate medical and psychological professionals on the difference between transsexuality and being transgender based on contemporary psycho-medical standards as well as human rights standards.

• Develop accurate and easy-to-understand educational resources on gender identity and expression, and make them available to the public, especially the patients and their families who visit medical facilities.

Recommendations for Educational Institutions, Ministry of Education, and Ministry of Higher Education

• Provide all school-age students with unbiased educational materials on gender identity as part of the school curriculum.

• Train principals and school faculties on how to deal with bullying, discrimination and physical violence, especially against trans students.

• Create grievance units at every school so that students can file confidential complaints about discrimination and physical violence.
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