



## **Submission to the UN Working Group on discrimination against women and girls**

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### **Report submitted by:**

International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA World)  
and  
EQUAL GROUND

### **With the support of:**

Asian Region of the Int'l Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA-Asia)

### **Executive summary**

This submission has been prepared by the International Lesbian, Gay, Bisexual, Trans, and Intersex Association (ILGA World) and EQUAL GROUND as a response to the [call](#) published by UN Working Group on discrimination against women and girls for its upcoming report “Human Security of Women and Girls in the Context of Poverty and Inequality”.

The present submission overviews the situation of lesbian, bisexual, trans, and queer (LBTQ) women in regard to economic inequalities in multiple countries, with a focus on examples in Sri Lanka. It also explores the circumstances of access to employment and social benefits, housing, and healthcare for LBTQ women, and underpins the issues of labor market discrimination for LBTQ women, trans women’s exclusion from employment, poverty risks, and structural barriers for women due to their sexual orientation, gender identity/expression, and sex characteristics [SOGIESC]. In addition, this submission addresses the factors that perpetuate these phenomena, such as the criminalization of same-sex relations. Lastly, it provides a list of recommendations to document, eradicate and prevent the economic and social marginalization faced by LBTQ women.

## Poverty:

LBTQ women are heavily impacted by economic inequality and face heightened levels of poverty. In United States, the burden of poverty falls in particular on bisexual and trans women. Research indicates that while the difference in poverty rates between lesbians (17.9%) and straight women (17.8%) is not statistically significant, bisexual women face poverty rates of 29.4%, considerably higher than women or men of any other sexual orientation<sup>1</sup>. Significant disparities also exist between families. 15% of female same-sex couple raising children live in poverty in the US, compared to 9% of married opposite-sex couples with children. Furthermore, trans women face 3.8 times higher poverty rates than the general population<sup>2</sup>. This heightened exposure to poverty, in combination with widespread social stigmatization and discrimination, creates significant barriers for LBTQ women in accessing employment, social benefits, secure housing and adequate healthcare.

## Employment and social benefits:

The experience of social and economic inequity for LBTQ women is often shaped by labor market discrimination. LBTQ women are discriminated against in seeking employment, in wages and in career progression<sup>3</sup>. In the United States, women perceived as queer were 29% less likely to receive a call back from a résumé than women perceived as straight<sup>4</sup>. Furthermore, the wage gap in the US is more severe for LBTQ women, who earn 79c for every dollar earned by a man, compared to 83c on the dollar for women overall<sup>5</sup>. The effect of discrimination in the labor market is particularly acute for bisexual women. In Canada, single bisexual women earned 16% less than single heterosexual men. In comparison, single heterosexual women earned 9% less than heterosexual men. Bisexual women were also significantly less likely to be employed or work full time than either heterosexual or lesbian women<sup>6</sup>.

Unlike bisexual women, lesbian women tend to have a wage premium above heterosexual women, which is often explained by the more equitable division of labour in same sex relationships<sup>7</sup>. However, lesbians nonetheless earn less than heterosexual men and lesbian

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<sup>1</sup> LGBT poverty in the United States (2019) The Williams institute.

<https://williamsinstitute.law.ucla.edu/publications/lgbt-poverty-us/>

<sup>2</sup> Movement Advancement Project and Center for American Progress. March 2015. Paying an Unfair Price: The Financial Penalty for LGBT Women in America. <https://www.lgbtmap.org/unfair-price-lgbt-women>

<sup>3</sup> Movement Advancement Project and Center for American Progress. March 2015. Paying an Unfair Price: The Financial Penalty for LGBT Women in America. <https://www.lgbtmap.org/unfair-price-lgbt-women>

<sup>4</sup> Mishel, "Discrimination against Queer Women in the U.S. Workforce: A Résumé Audit Study" *American Sociological Association Journal*, 2016.

<sup>5</sup> Human Rights Campaign, "The LGBTQ+ Women's Wage Gap in the United States" *HRC Foundation*, 2022. <https://www.hrc.org/resources/lgbtq-womens-wage-gap>

<sup>6</sup> Waite "Lesbian, gay and bisexual earnings in the Canadian labor market: New evidence from the Canadian Community Health Survey" *Research in Social Stratification and Mobility*, 2020.

<sup>7</sup> Waite "Lesbian, gay and bisexual earnings in the Canadian labor market: New evidence from the Canadian Community Health Survey" *Research in Social Stratification and Mobility*, 2020.

households are therefore very significantly impacted by the gender pay gap. In the United States, women in same-sex couples are more likely to be “working poor” than men in same-sex couples or men or women in opposite-sex married couples. This disadvantage is compounded for Black and Latina women in same sex couples who are three and two times more likely, respectively, to experience poverty than White women in same sex couples<sup>8</sup>.

Employment discrimination also places a particularly heavy burden on trans women. The ILO has highlighted that due to discrimination, trans women are sometimes excluded entirely from formal employment and pushed into survival sex work, including in dangerous conditions.<sup>9</sup> This issue can be seen across countries. Research from Cambodia found that 31% of trans women reported experiencing problems getting a job, while 24% reported having lost a job believing the reason was their trans identity<sup>10</sup>. A study from Rio de Janeiro found that stigmatization decreased job opportunities for trans women and pushed this group out of the formal economy. 80% of the women in this study had engaged in sex work, and many relied on sex work as their sole source of income<sup>11</sup>. Similarly, in the Dominican Republic, sex work among trans women was associated with a lack of support in employment and education, as well as being denied or fired from a job<sup>12</sup>. Trans women who engage in survival sex work often face additional levels of stigma and exposure to violence and health risks. According to Transgender Europe, 96% of the trans people who were murdered worldwide in 2021 were trans women or transfeminine people and 58% of murdered trans people whose occupation was known were sex workers.<sup>13</sup>

In addition to increased rates of poverty and labour market disadvantage, LGBTQ women often have reduced access to social and employment benefits. In the workplace, lesbian couples can be denied access to health insurance for their partner and leaves of absence to provide care. In the event that one partner dies, a lack of legal recognition for lesbian couples can mean exclusions from benefits for the surviving partner, such as access to the deceased’s pension and death benefit<sup>14</sup>. LGBTQ women, and especially trans women, who are forced into survival sex work may be excluded from employment-related social protections due to the criminalization of this work. In addition, trans women may avoid seeking social benefits due to fear of discrimination.

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<sup>8</sup> 1 Movement Advancement Project and Center for American Progress. March 2015. Paying an Unfair Price: The Financial Penalty for LGBT Women in America. <https://www.lgbtmap.org/unfair-price-lgbt-women>

<sup>9</sup> International Labour Organisation, *Discrimination at work on the basis of sexual orientation and gender identity*, 2015. [https://www.ilo.org/gender/Informationresources/Publications/WCMS\\_368962/lang--en/index.htm](https://www.ilo.org/gender/Informationresources/Publications/WCMS_368962/lang--en/index.htm)

<sup>10</sup> Yi S. et al, “Social marginalization, gender-based violence, and binge drinking among transgender women in Cambodia”. *Drug Alcohol Depend.* 2020

<sup>11</sup> Rafael R et al, “Prevalence and factors associated with suicidal behavior among trans women in Rio de Janeiro, Brazil”. *PLoS One.* 2021.

<sup>12</sup> Milner et al, “Sex work, social support, and stigma: Experiences of transgender women in the Dominican Republic” *International Journal of Transgenderism* (2019).

<sup>13</sup> TvT, 2021. *Trans Murder Monitoring Update TDoR 2021 - TvT.* <https://transrespect.org/en/tmm-update-tdor-2021/>

<sup>14</sup> Jenkins et al, “Older Lesbians and Bereavement: Experiencing the Loss of a Partner” *Journal of Gerontological Social Work*, 2013.

Research from the United States found that 1 in 20 trans women avoided public assistance offices due to fear of being discriminated against, an issue exacerbated for trans women of colour with the rate of 1 in 12<sup>15</sup>. Overall, unequal access to both employment and social protections contributes to poverty and social inequity for LGBTQ women.

## **Housing:**

Access to safe and stable housing for all persons is an essential component of human security<sup>16</sup>. Due to intersecting forms of marginalization, LGBTQ women face additional barriers to securing housing and shelter. There is significant evidence to suggest that sexual and gender-diverse persons in general are at greater risk of experiencing homelessness in many countries. In the United States, studies have found that LGBTQ persons make up between 20% and 45% of youth homelessness, despite representing approximately 10% of the general population. At the same time, LGBTQ young adults are over twice as likely to experience homelessness than their non-LGBTQ peers<sup>17</sup>. In the EU, it is estimated that 1 in 5 LGBTI people have experienced homelessness, and in the UK, 25% of homeless people identify as LGBTI.<sup>18</sup>

This heightened risk of homelessness for LGBTQ persons is driven by a number of factors, including higher poverty rates, rejection from family and community, and direct discrimination in accessing housing.<sup>19</sup> These issues often disproportionately affect LGBTQ women and may be compounded by gendered risk factors. For instance, intimate partner violence is a significant cause of women's homelessness, and LB women face a higher risk of intimate partner violence than heterosexual women or gay and bisexual men<sup>20</sup>. LGBTQ women's experiences of housing discrimination may also be aggravated by gender-based violence. For instance, in 2020, the Special Rapporteur for housing highlighted a case in Nigeria wherein a landlord recruited a group of men to repeatedly rape his tenants, a lesbian couple. Furthermore, the intersection of misogyny and transphobia creates specific risks for trans women in relation to housing.<sup>21</sup> Research from the United States found that while trans people as a whole were twice as likely to experience homelessness than cisgender people, trans women were more likely than trans men

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<sup>15</sup> Butz and Gaynor, "Intersectionality and Social Welfare: Avoidance and Unequal Treatment among Transgender Women of Colour" The American Society for Public Administration, 2022.

<sup>16</sup> Brambilla et al, "Housing: An Unspoken Challenge to Human Security" International Team for the Study of Security, 2021.

<sup>17</sup> Romero, A.P., Goldberg, S.K., & Vasquez, "LGBT People and Housing Affordability, Discrimination, and Homelessness." The Williams Institute, 2020.

<sup>18</sup> Nugent et al, "Not Just a 'Youth Problem': LGBT+ Experiences of Homelessness Across the Life Course in Fife, Scotland" European Journal of Homelessness Volume 16 (2022)

<sup>19</sup> Romero, A.P., Goldberg, S.K., & Vasquez, "LGBT People and Housing Affordability, Discrimination, and Homelessness." The Williams Institute, 2020.

<sup>20</sup> Rollé et al "When Intimate Partner Violence Meets Same Sex Couples: A Review of Same Sex Intimate Partner Violence" *Frontiers in Psychology*, 2018.

<sup>21</sup> Begun and Kattari "Conforming for survival: Associations between transgender visual conformity/passing and homelessness experiences" *Journal of Gay and Lesbian Social Services*, 2016.

<https://www.tandfonline.com/doi/full/10.1080/10538720.2016.1125821>

to experience homelessness and more likely to need temporary access to new sleeping arrangements.<sup>22</sup>

LBTQ women who experience homelessness face compounded stigma and additional barriers to accessing appropriate housing support. Homeless women with diverse sexual orientation and gender identity face unique mental health challenges and higher rates of health problems, yet often receive poorer quality healthcare.<sup>23</sup> Research from Vancouver, Canada, found that queer women living in supported addiction treatment housing were unable to maintain same-sex partnerships due to rules against sexual relationships while in treatment, and felt their relationships were unfairly targeted due to their sexual orientation.<sup>24</sup> For trans women, the segregation of homeless shelters on the basis of sex may present an accessibility issue<sup>25</sup>. There is also evidence that homeless shelters are not physically safe environments for trans people, do not respect trans persons' privacy, and do not convey respect for trans persons' gender identity.<sup>26</sup> These issues may explain why trans homeless people are more likely to be unsheltered than cisgender homeless people<sup>27</sup>. Overall, housing support insufficiently addresses the needs of LBTQ homeless women, further threatening their security.

## **Healthcare:**

The increased risk of poverty and homelessness discussed above has an adverse effect on the health status of LBTQ women, as well as the accessibility of healthcare for this group. There is evidence that LBTQ women are more likely to experience both physical and mental ill-health. Lesbian women have a higher risk of breast cancer and are more likely to report experiencing depression. Older lesbian women are also 1.3 times more likely to have a physical disability than older straight women.<sup>28</sup> There is also evidence that bisexual women experience worse general health than lesbian women and the general population, being at risk for disparities in terms of asthma, diabetes, and hypertension.<sup>29</sup>

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<sup>22</sup> Begun and Kattari "Conforming for survival: Associations between transgender visual conformity/passing and homelessness experiences" *Journal of Gay and Lesbian Social Services*, 2016.

<sup>23</sup> Distinct Health Disparities of LGBTQ Women Experiencing Homelessness (2019) National Health Care for the Homeless Council <https://nhchc.org/wp-content/uploads/2019/08/nhchc-health-disparities-lgbtq-women-homelessness.pdf>

<sup>24</sup> Lyons et al "The Impacts of Intersecting Stigmas on Health and Housing Experiences of Queer Women Sex Workers in Vancouver, Canada" *Journal of Homosexuality*, 2021.

<sup>25</sup> Begun and Kattari "Conforming for survival: Associations between transgender visual conformity/passing and homelessness experiences" *Journal of Gay and Lesbian Social Services*, 2016

<sup>26</sup> Begun and Kattari "Conforming for survival: Associations between transgender visual conformity/passing and homelessness experiences" *Journal of Gay and Lesbian Social Services*, 2016.

<sup>27</sup> Trans and Gender Non-Conforming Homelessness (2020) National Alliance to End Homelessness <https://endhomelessness.org/wp-content/uploads/2020/07/Trans-Homelessness-Brief-July-2020.pdf>

<sup>28</sup> Rullo et al, "Addressing the lifetime healthcare needs of lesbian patients" *NEJM Journal Watch* (2017)

<sup>29</sup> Simoni et al "Disparities in Physical Health Conditions Among Lesbian and Bisexual Women: A Systematic Review of Population-Based Studies" *Journal of Homosexuality*, 2016.

Trans women experience significant levels of health inequality. A systemic review of research published between 2000 and 2019, from 34 different countries, found that the prevalence of HIV among trans women was 19.9%, making this group 66 times more likely to have HIV than the general public.<sup>30</sup> In Jamaica, the rate of HIV prevalence among trans women is estimated at 25.2%, compared to 1.7% of the general population. Social and health inequalities, including homelessness, were associated with HIV infection among trans women.<sup>31</sup> Poor mental health status among trans women is also a major concern. A study of 345 trans women in Rio de Janeiro found that 58% were experiencing depression, 47% had contemplated suicide, and 27% had attempted suicide. Lack of access to education, employment, and housing was closely related to mental health problems.<sup>32</sup> Furthermore, research from the Jiangsu Province, China, found that trans women reported depressive and anxious thoughts in relation to their lack of access to gender-affirming healthcare.<sup>33</sup>

Access to healthcare for LGBTQ women is impeded by discrimination, stigmatization, and a lack of awareness from healthcare providers. Lesbian and bisexual women are less likely to undergo cervical screening due to the assumption that they will not have had sex with men, though this is not always the case. Lesbian women are also less likely to be assessed for intimate partner violence, due to the false assumption that this is not experienced by LGBTQ people.<sup>34</sup> Research from California also found that healthcare practitioners had poor interpersonal skills and gaps in knowledge in relation to sexual orientation and gender identity. Non-inclusive healthcare environments and a lack of lesbian and bisexual-friendly providers were also highlighted.<sup>35</sup> LGBTQ women in Vancouver, Canada, reported experiencing stigma and discrimination in hospitals, including denial of same-sex partner visits. Trans women also face significant barriers to accessing healthcare due to discrimination.<sup>36</sup> Research from Kingston, Jamaica highlighted that trans women feared violent victimization when accessing healthcare and experienced discrimination and scrutiny when trying to access sexual health necessities such as condoms and lube.<sup>37</sup>

Discrimination against LGBTQ women by healthcare providers has knock on effects for this community. Lesbian women are more likely to delay seeking healthcare and often identify fear

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<sup>30</sup> Stutterheim et al, "The worldwide burden of HIV in transgender individuals: An updated systematic review and meta-analysis". PLoS ONE, 2016. <file:///C:/Users/User/Downloads/journal.pone.0260063.pdf>

<sup>31</sup> Logie, "Navigating stigma, survival, and sex in contexts of social inequity among young transgender women and sexually diverse men in Kingston, Jamaica" Reproductive Health Matters, 2018

<sup>32</sup> Rafael R et al, "Prevalence and factors associated with suicidal behavior among trans women in Rio de Janeiro, Brazil". PLoS One. 2021

<sup>33</sup> Yan et al, "Identity, stigma, and HIV risk among transgender women: a qualitative study in Jiangsu Province, China" Infectious Diseases of Poverty, 2019.

<sup>34</sup> Rullo et al, "Addressing the lifetime healthcare needs of lesbian patients" NEJM Journal Watch (2017)

<sup>35</sup> LaVaccare et al, "Healthcare Experiences of Underrepresented Lesbian and Bisexual Women: A Focus Group Qualitative Study." Health Equity. 2018

<sup>36</sup> Kcomt et al "Healthcare avoidance due to anticipated discrimination among transgender people: A call to create trans-affirmative environments" SSM –Population Health, 2020.

<sup>37</sup> Logie, "Navigating stigma, survival, and sex in contexts of social inequity among young transgender women and sexually diverse men in Kingston, Jamaica" Reproductive Health Matters, 2018

of discrimination as a primary concern in relation to ageing.<sup>38</sup> Research from the United States found that 22.8% of trans women had avoided seeking healthcare due to fear of discrimination. Poverty and a lack of health insurance increased the likelihood of healthcare avoidance, suggesting that socioeconomic status may compound stigmatization for trans women.<sup>39</sup> Overall, healthcare avoidance, discrimination from healthcare practitioners and higher levels of risk for mental and physical ill-health, all contribute to the significant inequity faced by LGBTQ women in relation to healthcare. This is compounded by other areas of social inequity, including higher rates of poverty, and amounts to a threat to the human security of this group.

### **Other push factors: increasing the risk of poverty and inequality**

Women, especially LGBTQ women and those who do not conform to the distinct categories of gender expression according to social and cultural constructs, face discrimination and harassment and are further vulnerable to abuse. Human rights violations and violence against women and girls due to their sexual orientation and gender identity spans from honour killing, corrective rape, physical abuse, forced marriage, arbitrary arrests, and forced physical examinations to conversion therapy and psychological trauma.

In addition, same-sex sexual relations between consenting adults are criminalized by law in 64 UN member States, and de facto in 2, including at least 38 countries<sup>40</sup> that criminalize such relations between women; penalties include the death penalty and imprisonment<sup>41</sup>. Many countries also criminalize sex work and certain forms of gender expression that disproportionately affect trans women and impoverished sex workers. ILGA World notes that the limited data available shows that in 2021 at least 29 UN Member States actively enforced criminalising provisions, but the actual figure could be much higher. In a report conducted by ILGA World in 72 jurisdictions in 2021, at least 44 were documented to have actively targeted persons on the basis of SOGIE status the last three years<sup>42</sup>. This criminalization and its consequences often expose women to society's margins, which means insecure neighborhoods, proximity to organized crime and illicit economies, risk of poverty, lack of services and law enforcement, etc.

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<sup>38</sup> Rullo et al, "Addressing the lifetime healthcare needs of lesbian patients" NEJM Journal Watch (2017)

<sup>39</sup> Kcomt et al "Healthcare avoidance due to anticipated discrimination among transgender people: A call to create trans-affirmative environments" SSM –Population Health, 2020.

<sup>40</sup> Laws Criminalizing Same-Sex Relations between Women. See [http://internap.hrw.org/features/features/lgbt\\_laws/](http://internap.hrw.org/features/features/lgbt_laws/)

<sup>41</sup> ILGA World: Zhan Chiam, Sandra Duffy, Matilda González Gil, Lara Goodwin, and Nigel Timothy Mpemba Patel, Trans Legal Mapping Report 2019: Recognition before the law (Geneva: ILGA World, 2020).

<sup>42</sup> ILGA World: Kellyn Botha, Our identities under arrest: A global overview on the enforcement of laws criminalising consensual same-sex sexual acts between adults and diverse gender expressions (Geneva: ILGA, December 2021).

## **The landscape in Sri Lanka for LGBTQ women: Criminalization of same-sex relations<sup>43</sup>**

Same-sex relations are prohibited by the Penal Code of Sri Lanka 1833. While Section 365 criminalizes “*carnal intercourse against the order of nature,*” Section 365A criminalizes acts of “*gross indecency*” between persons, and both offenses impose imprisonment and/or fines on the offender if found guilty. Section 365A originally criminalized “*any act of gross indecency*” between males. However, in 1995, the provision was amended to replace the term “*male person*” to “*person,*” thereby making the section gender-neutral by criminalizing women who engage in consensual same-sex sexual conduct by expanding the scope of application of this law.<sup>44</sup>

The law does not only criminalize same-sex sexual conduct, but it also invites discrimination and gender-based violence against lesbian and bisexual women. This also means that the harassment and targeting of lesbian, bisexual and trans women are acceptable, as the law still treats them as criminals.

### **Discrimination and Violence faced by lesbian and bisexual women**

Coming out as a lesbian or bisexual woman to one's family in Sri Lanka may cause a backlash among the family members and sometimes result in extreme harassment. Often young girls are forced into conversion therapy and psychiatric evaluations against their will.

Example 1: A case was filed against a lesbian woman by her parents seeking a court declaration that their daughter was mentally ill due to her sexual orientation. It was also reported that the 22-year-old girl had been illegally confined at her home by her parents, where she was subjected to abuse and harassment. The court later dismissed the application.<sup>45</sup>

Example 2: Two women in a relationship were arrested in Akkaraipattu in June 2022 following a complaint lodged by one woman's father who had opposed their relationship. <sup>46</sup>

There are no laws in Sri Lanka that protect LB women from being forced into heterosexual marriages where, in many instances, they suffer from physical and mental abuse. These cases remain in the dark as the victims fear further reprisal from the police, law, and family. Women forced into heterosexual marriages are also susceptible to marital rape, which still is not treated as a criminal offense under the Penal Code of Sri Lanka.

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<sup>43</sup> Information provided by Equal Ground

<sup>44</sup> For more information about the context of criminalization towards LGBTQ women see decision by CEDAW: [CEDAW/C/81/D/134/2018](https://www.ohchr.org/en/press-releases/2022/03/sri-lanka-criminalisation-same-sex-sexual-activity-breached-rights-lgbti) and <https://www.ohchr.org/en/press-releases/2022/03/sri-lanka-criminalisation-same-sex-sexual-activity-breached-rights-lgbti>

<sup>45</sup> [Wattala court dismisses case filed against a lesbian.](#)

<sup>46</sup> [Indo-Lanka lesbian love: Couple held](#)



Moreover, women in same-sex relationships have no legal protection against domestic abuse and intimate partner violence. Lesbian women whose appearances and expressions do not conform to gender norms experience discrimination when accessing housing and safe accommodation. Most women are either rejected from housing or are charged higher rents.

Example: During an interview with Human Rights Watch in 2015, Lakshini, a lesbian woman in Colombo, stated that in 2014 she inquired about a house in Pepiliyana that was advertised. ‘When I went to visit and check the place, the owner “saw me from top to bottom” and “looked as if he didn’t know if I was a girl or a boy,” she said. Lakshini felt that he looked as if he was looking at “some strange creature.” The owner said nothing derogatory to Lakshini but quoted an amount of rent that was double the market rate, which she could not afford.’<sup>47</sup>

### **Access to employment and healthcare for LBT women in Sri Lanka.**

Lesbian, bisexual and trans women in Sri Lanka are often subject to significant discrimination and stigma in their place of employment. This includes verbal and sexual harassment, being given the worst shifts and tasks, being forced to conform to heteronormative and cis-normative social standards, disparities in salary and promotions, and termination of employment due to their gender identity and sexual orientation.

The Sri Lankan healthcare system primarily views the healthcare needs of individuals through a heteronormative lens. This results in societal stigma, discrimination, and denial of human rights for LGBTQ women accessing healthcare and ultimately leads to health disparities. Trans women in particular face many challenges when interacting with the healthcare sector.

Example: Jeewani, a trans woman “face so many troubles in the healthcare sector”. “They just want to know about what happened to me, why I’m growing my hair, why I dress like a woman. They don’t care about my sickness, just these other things,” she stated at an interview.<sup>48</sup>

Lastly, human rights violations pertaining to mental health include the practice of conversion therapy, which has been discredited by the World’s Health Organisation (WHO). Conversion therapy practices include the administration of medication, shock therapy, and masturbatory reconditioning.

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<sup>47</sup> HRW interview with Lakshini (pseudonym), Colombo, November 12, 2015

["All five fingers are not the same;" Discrimination on the grounds of Gender Identity and Sexual Orientation in Sri Lanka](#) P. 50

<sup>48</sup> HRW interview with Jeewani (pseudonym), Ambalangoda, November 11, 2015

["All five fingers are not the same;" Discrimination on the grounds of Gender Identity and Sexual Orientation in Sri Lanka](#) P. 39

## **Recommendations:**

### **Data Collection:**

- Ensure there is robust data collection on the experiences of poverty, economic precarity, income inequality, and employment discrimination among LGBTQ women in particular.
- Ensure that data on housing and homelessness, healthcare and health outcomes, social welfare and employment is disaggregated in relation to sexual orientation and gender identity and that LGBTQ women in particular are visible.

### **Poverty:**

- Anti-poverty measures should specifically target LGBTQ women, particularly bisexual and trans women. The unique push factors and challenges faced by this group in relation to poverty should be assessed, and tailored support and interventions should be implemented.
- The double stigmatization experienced by women who are both poor and LGBTQ should be combated in all levels of society, particularly among welfare service providers.

### **Employment and Social Benefits:**

- Legislation outlawing employment discrimination on the basis of sexual orientation and gender identity, including in hiring, working conditions and promotion, should be introduced and enforced.
- Measures should be taken to ensure the full and equal participation of LGBTQ women in the labour market, including access to equal educational opportunities and the right to a safe and welcoming work environment.
- Workplace discrimination against transgender women in particular should be addressed. Steps should be taken to ensure that trans women are able to access safe, formal employment and are not forced to engage in sex work for survival.
- Sex work should be decriminalized and all those who engage in sex work should have access to employment protections and social security benefits on an equal basis with other workers. The double stigmatization experienced by women who are both LGBTQ and sex workers should be addressed. Targeted strategies should be introduced to combat violence against LGBTQ women sex workers, particularly trans women sex workers.
- Same sex partnerships between women should be recognized on an equal basis to opposite-sex partnerships. Steps should be taken to ensure that women in same-sex partnerships have access to all privileges and benefits granted to those in opposite-sex partnerships, including social welfare benefits, insurance benefits, decision-making rights, hospital visits etc.

### **Housing:**

- Housing and anti-homelessness programmes should specifically target LBTQ women, taking into account the unique challenges and needs of this group in relation to housing.
- Legislation outlawing discrimination against LBTQ women in relation to renting and buying property should be introduced and enforced.
- Measures should be taken to ensure that homeless shelters, domestic violence shelters and all other housing support services are cognizant of the specific needs of LBTQ women and do not discriminate against this group.

#### **Healthcare:**

- Measures should be taken to address disparities in physical and mental health outcomes for LBTQ women, including the introduction of tailored healthcare supports.
- Steps should be taken to ensure that healthcare providers are cognizant of the needs of LBTQ women and do not perpetuate stigma or discrimination towards this group.
- Targeted strategies should be introduced to address the HIV epidemic among trans women, including ensuring access to information on HIV and other STIs, equal access to condoms and other sexual health necessities and equal access to treatment.

#### **Push Factors:**

- Any and all legislation which criminalizes LGBTI identities should be repealed, including so-called “impersonation” laws which criminalize diverse gender expression.
- Measures should be taken to combat and eradicate violence against LBTQ women, including practices of forced marriages, corrective rape and conversion therapy.
- The use of sections 365 and 365 A of the Penal Code of Sri Lanka to criminalize same-sex relations should be avoided, and the provisions that target LGBTQ persons in practice should be repealed.