

Research on the needs of transgender and non-binary people in the Republic of Serbia

A research report

Introduction

Transgender and non-binary people are among the most vulnerable groups and are exposed to various forms of violence and discrimination, a fact clearly corroborated by numerous research undertaken abroad (FRA, 2020). When it comes to Serbia and its context, only few research provide us with an improved insight into the position of transgender and non-binary or gender non-conforming people. After the research conducted in 2012, which dealt with problems in the domains of state administration, education system, health care system and work and employment (Zulević, 2012), two more research directed at people from this community were published, however they contained very specific research questions: monitoring of discrimination and hate crime against trans people (Vidić, 2015) and another was a research on the perception, experience and needs related to the health care (Smiley et al., 2017). On the other hand, in research of public opinion, transgender and non-binary people usually remain invisible within the LGBT umbrella term, in which, despite its inclusivity, the principal role belongs to same-sex oriented people (lesbians and gays).¹

All three research conducted up until now, concentrating on different aspects of the position of transgender and non-binary people in Serbia were conducted by the Geten, Centre for LGBTIQ people's rights, independently or in cooperation with other organisations. From the very foundation of the organisation, Geten has been working on and dealt with the issues of gender and gender identity from the perspective of intersectionality, and through its almost two decades long activism and practice of providing different services², the organisation directly communicates with the community, and on this basis it further advocates for the advance of their position.

Methodology

Taking into account the lack of research on the one hand, and significant changes that were introduced and came into effect in 2012, and that affect the everyday life of transgender and non-binary people on the other, Geten organisation team decided to conduct a research on the needs and the difficulties transgender and non-binary people in Serbia come up against. The objective of the research was an improved understanding of the current position of transgender and non-binary people in Serbia and their needs, first and foremost in the field of education, work and employment, health care and legal gender recognition, as well as the exposure to the situations of discrimination and violence in different periods and domains of life. The target group of the research are transgender and non-binary people, older than 15, with residence in the Republic of Serbia.

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- 1 For example, research of public opinion on the relationship of citizens towards discrimination in Serbia, conducted by the institution of the Commissioner for the protection of equality:
<http://ravnopravnost.gov.rs/izv%20%25st%20%20d1%2598-%20%2be-istr%20%20ziv%20%20nju-%20d1%2598%20%20vn%20%20beg-mnj%20%20b5nj%20%20%20-%20%20bedn%20%20bes-gr%20%20d%20%20n%20%20%20-i-gr%20%20d%20%20b0nki-pr%20%20b5m%20%20-diskrimin%20%20ci-cir/>
 - 2 Trans self-support group and an LGBTIQ SOS Helpline have been operating in continuity since their foundation in 2006, as well as the service of providing legal advice. In addition to this, the organisation team provides the services of individual psychological consultations, counselling and psychotherapy, as well as email and Facebook page messaging consultations.

The research was conducted in the period from August 15th until October 30th 2018, in the form of online questionnaire. The link to the questionnaire was distributed by means of social network of Geten and organisations Geten cooperates with, as well as via trans-affirmative mailing lists and groups.

Instrument

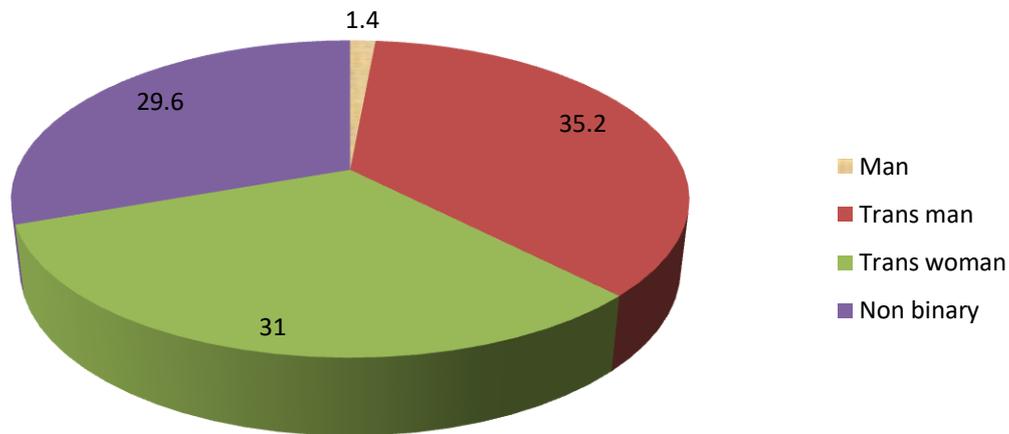
For this research, the organisation's team created a questionnaire with a combination of questions of open-ended and closed-ended type. After informing the respondents about the objectives and conditions of the research, they were asked to give consent for the participation in the research. The questionnaire itself consists of several units: the first seven questions refer to the general information about the respondent (gender identity, age, place of residence, minority group status, disability status, citizenship, migrant status or displaced persons' status), financial situation (three questions related to this issue), followed by information on education status (the highest level of education completed, current education status, freedom in expressing gender identity during the process of education, the experience of discrimination and violence in the system of education, dropping out of education – six questions in total) and employment (employment status, the experience with discrimination and violence, free expression of gender identity in the workplace – eight questions), experience regarding the change of personal documents/legal gender recognition (two questions), the need for legal, psychological and peer support (four questions), the feeling of safety at home and in public spaces (two questions). A separate question refers to the discrimination regarding the practice of parental rights, something about which there are no data here, followed by two questions referring to being familiar with support trans and non-binary people can obtain from independent institutions and civil society organisations (two questions). A separate part refers to trans-specific health care – the experience and level of content with various services, the experience of discrimination and violence within the health care system and the priority, when it comes to advance of trans-specific health care in the Republic of Serbia (eight questions). At the end of the questionnaire, the respondents were offered a box where they could put down their experience, thoughts and comments about matters which were not covered by the questionnaire.

Participants

The questionnaire was filled out by 90 people. After the analysis of individual answers, the following respondents were excluded from the sample: respondents who did not give their consent, those who identified as cisgender people, and those who provided flippant or silly responses, so that the final sample is made out of 72 people.

Out of the overall number of respondents, 31 per cent is made out of trans women, 35,2 per cent trans men, 29,6 per cent non-binary or gender non-conforming people, while 4,2 per cent goes to people who identify in some other way.

Number – 1. What is your gender identity?



A large majority of respondents consists of people under the age of 35 – as many as 82 per cent – out of which 36,6 per cent of respondents are of the age between 18 and 24, while 31 per cent goes on those between the ages of 25 and 34. As it was expected, the majority of respondents live in the cities with more than 100 000 inhabitants (60,6 per cent), however it is essential to point out to the fact that the research also covered the people from towns with less than 20 000 inhabitants (15,5 per cent of the respondents are from smaller towns and 5,6 per cent live in the countryside). Almost one fifth of the respondents (18,3 per cent) say that they belong to a certain ethnic/racial/religious minority (among the responses there were agnostics, atheist, Roma people, etc.). Only one respondent is not the citizen of the Republic of Serbia, 9,9 per cent has or had the status of displaced person or a refugee, while 4,2 per cent say that they have some form of disability.

Results overview

Economic position

Taking into account the fact that experience of rejection and violence may have a negative effect on the education of trans people, and that inadequate legal gender recognition significantly aggravates finding employment for them, there are three questions in our research dedicated to the economic position of the participants. More than a third of the respondents over the age of 18, has no regular monthly income, and about a dozen of them in total has income that are above the republic average.

Table 1

Average monthly income of the respondents	Frequency	Per cent
I am under the age of 18 and have no personal income	8	11,6
I am over the age of 18 and have no personal income	25	36,2
Less than 20 000 RSD monthly	9	13,0
From 20 000 to 30 000 RSD monthly	6	8,7
From 30 000 to 40 000 RSD monthly	6	8,7
From 40 000 to 50 000 RSD monthly	7	10,1
Over 50 000 RSD monthly	8	11,6

Question no. 14. What is the amount of your regular monthly income?

The question of how easy it is for a household where they live to make ends meet was answered in the following manner: two thirds of the respondents answered that it is difficult to achieve (30,0 per cent responded with some difficulties, 20,0 per cent difficult, while 17,1 per cent responded with great difficulties). When it comes to the issue of financial problems, half of the respondents said that they experienced financial problems in the last twelve months (32,9 mild, while 20 per cent said that they had serious financial problems).

Education

The largest number of respondents finished secondary school (50,7 per cent), or faculty (31 per cent, while 4,2 per cent out of the general sample completed master's degree or doctoral degree). Half of the participants of the research were in the process of education at the moment when they were completing the questionnaire (15,5 per cent were going to secondary school, 26,8 per cent were doing basic academic studies and 5,6 per cent postgraduate studies).

Almost half of the participants of the research (45,1 per cent) never felt safe to express their gender identity during the whole course of their education, while only a fourth of the respondents (23,9 per cent) said that they were never discriminated against or exposed to violence by their peers, professors and teachers, and other staff during the course of education. Among the examples of violence to which trans people were exposed are demands for normative gender expression ("School principal made me

cut my hair short and openly and publicly attacked me on more than one occasion about how I dressed or looked”), being made fun of by peers, getting insults, suffering physical and sexual violence, and receiving death threats, first and foremost from their peers. This is why it is not surprising that the third of the respondents (33,8 per cent) thought about dropping out of school at some point due to their gender identity, and that in the end 12,7 per cent actually did just that. As the reason for quitting education, fear of violence is usually quoted, while their decision to persevere during the education is accounted for by internal motivation (“There is nothing that can stop me from doing what I love”), as well as fear for their existence (“What would I do without my graduation diploma/certificate?”).

Employment and workplace experience

Half of the sample (51,39 per cent) is made out of unemployed people. When it comes to employed people, 31 per cent goes on people with a fixed-term or indefinite-term employment contracts, 11,3 per cent has their own business (self-employed) while the remaining figure is engaged in some other way. Out of the respondents who are employed, one third (34,1 per cent) experienced some form of violence or discrimination while trying to obtain employment, and the violence and discrimination were related to their gender identity. Here it is important to put the emphasis on the fact that 62 per cent of respondents think that they do not have equal opportunity when looking for employment, compared to the opportunities of the majority population with the same level of education.

When it comes to being open about their trans(gender) identity in the workplace, somewhat less than a half of respondents are open about the issue of their gender identity, in the relationship with all of their co-workers and colleagues (20,4 per cent) or with the majority of their colleagues (22,7 per cent). Nevertheless, the majority of respondents does not share this information about their gender identity with anyone (36,6 per cent) or only few people whom they trust are familiar with this information (20,4 per cent).

Some form of discrimination or violence in the workplace was experienced by 38,4 per cent of the respondents who were once employed, while even as many as one fifth of them (21,7 per cent) decided to leave their job due to this. Thus one respondent stated that she quit her job because she did not want to be treated as a man, and another respondent stated that during the employment process he was told to come back again and reapply for the position “when he becomes a man”. Discrimination comes in various forms, thus it happened that one person, who stayed in the same job position during the whole process of gender reassignment, stated that no one ever said anything publicly and openly, but that the work procedures were arranged in such a way so that his old (dead) name was used.

Safety

Numerous research have shown that trans people are exposed to harassment and assaults, both in public spaces (in the streets, public institutions, in public transportation) and in private space where they spend time with their room-mates, partner, or family. When it comes to their experience or impression about the safety in public spaces, a little more than the half of respondents (50,8 per cent) state that they feel safe in public space, while more than a fourth of respondents think that they are not safe in their own home – out of which 5,6 per cent never or rarely, while 15,5 per cent goes on those who feel this way occasionally.

Legal gender recognition

A very important question for transgender people is the question of legal gender recognition, that is, adjusting the data in personal documents (personal name, gender marker and personal identification number) with the person's gender identity. When it comes to analysis of the data from this research, one must bear in mind that it was conducted in the first year of the implementation of the "the Ordinance on the manner of issuing and the health care institution confirmation form regarding the person's change of sex" (Official Gazette of the Republic of Serbia, no. 103/2018), according to which it is possible to change one's personal name and gender marker based on the doctor's confirmation on psychiatric monitoring and completed endocrine treatment for the period of at least twelve months, or medical doctor's confirmation on completed surgical interventions regarding gender reassignment. For the first time we have a document, the Ordinance, which regulates the process of legal gender recognition in the Republic of Serbia, but in such a way that it actually medicalize the whole procedure by conditioning trans people to first obtain psychiatric diagnosis and undergo medical interventions directed at body modification.

Four out of ten respondents (39,4 per cent) said that they experienced difficulties in their everyday life since they did not have adequate/accurate documents, that is their personal documents did not match their gender identity, and a quarter of them (25,4 per cent) stated that due to this situation they suffered some form of discrimination and/or violence. The unpleasant situations they referred to, the respondents categorised as minor (for example, that institutions' officials do not believe that the person they are talking to is the person in the document's picture). However the additional problem is that inadequate personal documents, precisely owing to the trans people's anticipation of negative reactions, lead to avoidance of situations in which they have to show the documents to officials. Owing to this, several respondents recounted their experience of avoiding going to the doctor's precisely due to the assumed lack of knowledge and prejudice towards trans people, as well as the problem of calling out patient's name.

Parental rights

One question in the questionnaire referred to experience of discrimination in practising parental rights owing to the person being transgender. This question referred only to those respondents who are parents, and in the sample there were only 10 per cent of trans parents. Three persons felt that they were exposed to discrimination in practising their parental rights, while three people gave a negative answer to this question. Unfortunately, no one from the sample of these respondents described their experience, although this option was available.

The need for legal, psychological and peer support

Most of the respondents think that in the last twelve months they had the need for legal support and counselling due to the questions regarding gender identity (57,7 per cent), and even a bigger percentage stated that they have the need for psychological support (63,4 per cent). Nine out of ten respondents (90,1 per cent) stated that it is essential for them to be able to hear the experience of other trans people, that is, to be able to confide in and talk to other trans person (85,9 per cent).

However, it is alarming that only a third of respondents (30,1 per cent) estimated that they are to a large extent or completely familiar with mechanisms, services and solutions they can obtain from state institutions in cases when they experience discrimination and/or violence, and the same goes for the situations when it comes to estimating one's own familiarity with services and/or solutions civil

society organisations offer in such situations.

General and trans-specific health care

A very important question for one group of trans people is the issue of availability and quality of general and trans-specific health care (psychiatric, endocrine and surgical services intended exclusively for transgender and non-binary people).

Transgender people experience different uncomfortable situations when they try to access services from the domain of general health care, both due to the difference between data in their personal documents and their gender identity and gender expression of the person and in situations when they need to communicate that they are transgender. Almost half of the respondents (47,9 per cent) said that they experienced unpleasant situations due to their gender identity, out of which one fifth (21,1 per cent) think that it was the issue of discrimination and/or violence, while 31,0 per cent said that the health care providers showed disrespect towards their privacy and dignity (for example, commenting out loud about the person in question's gender identity, commenting on the appearance or form of the person's body in front of other patients/ medical doctors, etc.).

When it comes to trans-specific health care services, 45,1 per cent of our respondents have already used some of the services from this domain, 31,0 per cent have not, but are planning to do so, while 23,9 per cent have not used these services, and neither do they want to. When it comes to those who used trans-specific health care services, 48 per cent are not satisfied with them (22,6 per cent are very dissatisfied and 25,4 per cent are dissatisfied), while 14,1 per cent are satisfied or very satisfied with trans-specific health care services.

In the table below you can find the level of dis/satisfaction with certain segments of trans-specific health care on a Likert-type scale (five point scale).

Table

The level of satisfaction with trans-specific health care

	1	2	3	4	5
Referral from the primary health care provider to the Gender identity team	36,6%	11,3%	22,5%	5,6%	23,9%
Psychiatric and psychological services	32,4%	18,3%	18,3%	15,5%	15,5%

Services provided by the specialist of endocrinology	43,7%	15,5%	19,7%	7,0%	14,1%
Services provided by the surgeon	52,1%	8,5%	19,7%	7,0%	12,7%

Question no.3: Please estimate, on a scale from 1 to 5, the level of satisfaction with certain segments of trans-specific health care in Serbia: 1 – does not refer to me, 2 – very unsatisfied, 3 – unsatisfied, 4 – satisfied, 5 – very satisfied

Bearing in mind the fact that the Belgrade medical team for gender identity does it practice only in Belgrade, it is not surprising that 65,8 per cent of respondents meet with difficulties when they attempted to access trans-specific medical services. Those difficulties included a long wait for the free term in the schedule and unaffordable service costs.

We asked the respondents to evaluate which aspects of health care it is necessary to advance in order for them to be better adjusted to the needs of transgender and non-binary people. In the first place according to importance is the issue of solving the problem of hormone shortages (60,6 per cent), followed by education and trainings for medical doctors in primary health care (54,9 per cent), and decentralisation of services (53,5 per cent), so that trans-specific care is available and more accessible to people who live outside of Belgrade. These are then followed by shortening the waiting periods for the provision of trans-specific health care, the availability of services to non-binary people, the availability of partial surgical interventions, as well as complete coverage of surgical interventions by the Fund for health insurance.

Conclusion and Recommendations

Data collected in this research point to a myriad of problems and challenges transgender and non-binary people in Serbia are faced with, including also the adverse economic position, the feeling of rejection and the feeling of safety at risk during education, followed by unemployment, experience of violence and discrimination when trying to access employment and in the workplace, as well as difficulties when trying to practice and achieve rights from the domain of general and trans-specific health care.

Besides the fact that it is essential to work on decreasing anti-trans prejudice in the society which contribute to the experience and instances of discrimination and violence, it is also important to bear in mind that the existing legal solution in Serbia does not manage to adequately address the issue of legal gender recognition. The overall situation points out to a huge need for activities which will be directed both to general public with the aim to inform and sensitise to the existence and needs of transgender and non-binary people and to advocacy for the adoption of systematic solutions which will enable the practice and achievement of certain rights (for example, the adoption of the Model law on gender identity and the rights of intersex people), and the monitoring of its application and

implementation. It is especially important to conduct educational activities in the educational system, in particular in the light of data which show that one third of respondents have thought of ending education and dropping out of school due to their gender identity.

In the domain of health care, what we need is the following: trainings for medical workers and associates of those specialties transgender and non-binary people come in contact with the most (general practitioners, paediatricians, gynaecologists, but also psychiatrists, psychologists, and endocrinologists). In the following period it is essential to provide a continuous availability of the needed hormones, and then, also work on the decentralisation of trans-specific services and their full coverage by the compulsory health insurance. Taking into account a very highly expressed need for psychological support and legal counselling, it is essential to provide the sustainability of these services, first and foremost in the civil sector, and the work on education of state health care and social protection institutions' employees.

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