

# Violence and Discrimination Experienced by Lesbian, Bisexual, and Queer (LBQ) Women in the Islamic Republic of Iran

Submission to the Independent Expert on  
Protection Against Violence and Discrimination  
Based on Sexual Orientation and Gender Identity  
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**6Rang (Iranian LGBT+ Network)**, was founded in 2010 following the first Iranian lesbian and transgender gathering. Its network and contacts span across Iran, and is a member of the International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA). The organisation's mission is to promote awareness of LGBT+ human rights and combat homophobia, transphobia, and violence, with a particular focus on lesbian and transgender individuals. To achieve this mission, 6Rang employs key strategies, including strengthening member capacity to challenge discrimination, offering online counselling for LGBT+ individuals, especially lesbian and transgender Iranians, and conducting international advocacy and media work centered around research and documentation to raise awareness about sexual orientation, gender identity, and diversity within Iran.

Website: <http://6rang.org/english>

Contact: [info@6rang.org](mailto:info@6rang.org)



## I. Introduction and Scope

This submission is presented by 6Rang (Iranian LGBT+ Network) and documents patterns of violence and discrimination experienced by lesbian, bisexual, and queer (LBQ) women in the Islamic Republic of Iran. It is based on 6Rang's community-led documentation, LBQ women's testimonies, and research previously submitted to United Nations human rights mechanisms, including the Universal Periodic Review and treaty bodies.

In response to [the Independent Expert's call](#) for intersectional analysis, the submission focuses on four areas through which harm against LBQ women is most consistently produced in Iran: criminalization, forced and coerced heterosexual marriage, medicalization, and economic marginalization.

Violence against LBQ women in Iran is structural. Law, family authority, and social norms function together to control women's sexuality and gender expression, while enforcing concealment as a condition of safety.

## II. Criminalization as a Systemic and Gendered Form of Violence

The lesbian, gay, bisexual, transgender, and queer (LGBTQ) community is among the most marginalized and persecuted groups in the IRI. The Islamic Penal Code, revised in 2013, continues to criminalize consensual same-sex relations and non-conforming gender expressions, with penalties ranging from corporal punishment to the death penalty. While these provisions are often perceived as more explicitly severe in relation to men, their application to lesbian, bisexual, and queer (LBQ) women is characterized by vagueness, discretion, and cumulative punishment. As confirmed by the [UN Human Rights Committee](#) in its November 2023 concluding observations on the Islamic Republic of Iran, these punishments are actively enforced by State authorities.

Criminalization in Iran operates across multiple domains of life. LGBTQ individuals, including LBQ women, are routinely subjected to physical and psychological violence within families, educational institutions, workplaces, healthcare settings, and through interactions with law enforcement and the judiciary. Criminal law provides the overarching framework through which such violence is normalized, legitimized, and carried out with near-total impunity.

Under the [Iranian Penal Code](#), consensual same-sex intercourse between men (*livat*) is punishable by death. Article 234 differentiates between the "active" and "passive" participants, reinforcing gendered and religious hierarchies within the law. Other consensual same-sex acts between men that do not amount to intercourse are criminalized under Articles 236 and 237 and punishable by up to 100 lashes. While public and legal discourse frequently foregrounds these provisions, the legal framework governing same-sex relations between women (*musahaqa*) is equally punitive and carries distinct, gender-specific consequences for LBQ women. Article 239 of the Penal Code mandates 100 lashes for each woman convicted of *musahaqa*. Although this penalty is often characterized as less severe than capital punishment, the structure of the law reveals a cumulative pathway to execution: pursuant to Article 163, a woman who is convicted and flogged for *musahaqa* on three occasions becomes eligible for the death penalty upon a fourth conviction.



Notably, the law provides no clear definition of *musahaqa*. This legal ambiguity grants authorities wide discretion in determining what constitutes prohibited conduct between women. In practice, non-normative intimacy—including emotional closeness, physical affection, or perceived same-sex attraction—may be interpreted as criminal behavior. As a result, LBQ women face punishment not only for sexual conduct, but for deviating from prescribed norms of femininity and heterosexuality. Additionally, prosecutions for *musahaqa* rarely occur in isolation. Charges are frequently compounded through the application of other penal provisions, including Article 638 (public immorality), Article 639 (facilitating or promoting immorality), and, in more severe cases, Article 279 (*efsad-e fel-arz*, “corruption on earth”).

Transgender and gender-nonconforming expressions, including cross-dressing, are punishable under Article 638 of the penal code, which imposes up to 74 lashes for violations of public morality. Articles 639 and 640 further criminalize expressions of homosexuality or perceived immorality in public spaces with penalties including imprisonment, flogging, and fines. The vagueness of these provisions enable authorities to criminalize a wide range of conduct, including advocacy, online expression, and gender nonconformity.

There is limited availability of official data on prosecutions for *musahaqa*, though this should not be interpreted as evidence of leniency. For LBQ women, the law functions not only as a mechanism of punishment, but as a permanent structure of fear. Community testimonies consistently emphasize the existence of the death penalty itself as a form of violence. The legal possibility of execution shapes behavior long before any arrest occurs. It reinforces silence, legitimizes family control, and constrains women’s choices regarding relationships, movement, and self-expression.

In the context of the Islamic Republic of Iran, lesbian identity is not experienced solely as a private sexual orientation but is frequently constructed as a form of social and political dissent. Because heterosexual marriage and gender conformity are embedded within the legal and ideological foundations of the State, refusal to comply with these norms may be interpreted as defiance of patriarchal authority. For some LBQ women, visibility, community organizing, or public advocacy transforms sexual identity into a political identity. As a result, lesbian existence itself may be framed by authorities and families as a challenge to social order, exposing women not only to gender-based violence but to political repression.

Criminalization in Iran extends beyond sexual conduct to encompass gender expression and visibility. In more severe cases, such expressions may be prosecuted under Article 279 of the IPC as *efsad-e fel-arz* (“corruption on earth”), a charge carrying the death penalty or other extreme punishments such as amputation or banishment under Article 282. For LBQ women, these provisions have a distinctly gendered impact. Gender expression, including masculinity in women, refusal of feminization, or non-normative dress, frequently becomes the basis for suspicion and intervention. Visibility, whether intentional or incidental, is transformed into a legal risk. As a result, for Iranian LBQ women concealment and extensive self-censorship becomes a tool for survival rather than a matter of personal choice.

Criminalization also extends to those who advocate for the rights of LGBT+ persons. Human rights defenders working on issues related to sexual orientation and gender identity are routinely targeted, prosecuted, and subjected to ill-treatment. This pattern intensified following the nationwide [protests of 2022–2023](#), during which gender-based violence against LGBTI protesters and activists markedly increased.



The cases of Zahra (Sareh) Sedighi-Hamadani and Elham Chubdar illustrate how criminal law is weaponized against LBQ women who are visible or engaged in advocacy. Arrested in 2021 on charges including “promoting homosexuality” and *efsad-e fel-arz*, both women were [subjected to prolonged detention](#), torture, and coercion to extract confessions. In August 2023, they were sentenced to death by a Revolutionary Court, a decision later overturned following international pressure. Nevertheless, judicial harassment continued, including re-sentencing and imprisonment. One of the women was ultimately [forced into exile](#), while the other was re-incarcerated. These cases demonstrate how criminalization, media defamation, and gendered stigma operate together to punish LBQ women who resist enforced invisibility. These cases are not isolated; rather, they exemplify how criminalization operates beyond prosecutions and into everyday life structure. Since same-sex relations, gender expression, and advocacy are criminalized in the Islamic Republic of Iran, LBQ women cannot safely report violence occurring within families, schools, workplaces, healthcare settings, or detention facilities. Fear of arrest, exposure, or retaliation by authorities silences survivors and shields perpetrators from accountability.

Criminal law, in the IRI (Islamic Republic of Iran), thus functions as a systemic enabler of violence against LBQ women, rather than a mechanism of protection. By criminalizing sexuality, gender expression, and visibility, the legal framework produces fear, silence, and dependency, while closing access to justice and protection. This legal architecture intersects directly with patriarchal family structures and gender hierarchies, enabling families and communities to act as extensions of state control. It legitimizes family-based coercion, including forced marriage, reinforces medical abuse under the guise of treatment, and deters societal intervention.

### III. Forced Marriage

Patriarchal structures are central to understanding violence against lesbian, bisexual, and queer (LBQ) women in the Islamic Republic of Iran. Gender norms that privilege male authority and enforce women’s subordination are embedded in law, social practice, and family life, creating a continuum of control that extends from the state into the private sphere. Within this framework, families frequently function as primary sites of enforcement for state-sanctioned gender ideology, regulating women’s sexuality, mobility, and life choices in ways that mirror and reinforce legal repression.

LBQ women frequently report violence within the family, including confinement, surveillance, threats, physical assault, emotional abuse, and coercion. These practices are often framed as protective, corrective, or necessary for preserving family reputation, which reinforces their social legitimacy and limits external intervention. Forced and coerced heterosexual marriage emerges within this context as a recurring and distinctly gendered form of violence. Families commonly present marriage as a solution to perceived sexual “deviance,” a means of restoring family honor, or a way to ensure women’s conformity to expected social roles.

In 2024, a [questionnaire](#) conducted by 6Rang among its online community found that 26 per cent of respondents had experienced, or were currently experiencing, pressure toward forced marriage. LBQ women described entering unwanted marriages to avoid expulsion, violence, or exposure. In economically marginalized households, early or forced marriage, including of minors, is used as a mechanism of control. For many LBQ women, the [threat of marriage](#)



functions as both punishment and containment. Faced with the risk of exposure, expulsion from the family, or escalating violence, some women enter unwanted heterosexual relationships or marriages as a strategy to protect themselves or reduce scrutiny. Others are compelled into marriage at a young age, particularly in economically marginalized households where early or forced marriage—including of minors—is used to consolidate control and limit perceived risk. In these cases, marriage serves to remove women from public life, curtail autonomy, and reinforce dependency on male partners.

The impact of [forced marriage](#) is compounded by broader conditions of misinformation and isolation. Due to the absence of accessible, accurate, and affirming sources of information, many lesbian women are steered by families toward so-called “corrective” measures, including heterosexual marriage, under the assumption that conformity will resolve or suppress same-sex desire. Even when women internally recognize their sexual orientation, the lack of social and familial support makes refusal of marriage exceedingly difficult. As a result, some continue same-sex relationships in secrecy while married, exposing them to heightened risks of blackmail, psychological harm, and violence.

This form of violence disproportionately affects LBQ women because it is rooted in gendered expectations surrounding marriage, reproduction, and obedience. Refusal of marriage is frequently interpreted as defiance of male authority and family hierarchy, triggering punitive responses that are socially sanctioned and rarely challenged. Forced marriage thus operates not as a punitive mechanism through which patriarchy, family control, and state repression converge to discipline LBQ women’s lives.

#### **IV. Medicalization and the Pathologization of LBQ Women**

In the Islamic Republic of Iran, criminalization of same-sex relations is closely intertwined with a system of medicalization that frames homosexuality and gender nonconformity as conditions requiring diagnosis, treatment, or correction. For LBQ women, this medical framework operates as a gendered extension of legal and familial control, reinforcing the perception that deviation from heterosexual norms constitutes pathology rather than identity.

[Research conducted by 6Rang](#) demonstrates that state repression of sexual orientation and gender expression is routinely accompanied by coercive medical practices, including so-called “reparative” or “conversion” therapies, psychiatric interventions, and behavioral treatments aimed at enforcing heteronormativity. These practices are frequently initiated by families, facilitated by medical professionals, and legitimized by official and quasi-official discourse that presents homosexuality as a disorder requiring intervention.

While being transgender is not criminalized in Iran, it is [formally recognized as a medical condition](#) and historically referred to as Gender Identity Disorder, remediable through medical transition. Within this framework, individuals who do not conform to the heterosexual cultural models of femininity and masculinity, including LBQ women with gender-nonconforming expression, are often forced into an untenable choice: risk criminal prosecution, harassment, detention, or submit to medicalization in order to appear socially acceptable. For LBQ women, gender nonconformity is frequently conflated with sexual deviance, making them particularly vulnerable to psychiatric labeling and intervention.

6Rang’s documentation shows that medical professionals routinely misdiagnose LBQ women on the basis of same-sex desire or non-normative gender expression alone. Homosexuality is



commonly framed as a psychiatric illness, including as a mood disorder or obsessive-compulsive disorder, and treated with psychoactive medication, behavioral therapy, or other invasive and unscientific interventions. In many cases, LBQ women are encouraged or coerced into heterosexual relationships or marriage as part of a purported therapeutic process, further entrenching forced marriage as both a medicalized response and a form of social containment.

A [study](#) conducted by 6Rang involving respondents across multiple provinces found that a significant proportion of lesbian participants had been offered or pressured into conversion practices, often during adolescence. While fewer women ultimately underwent such interventions compared to men, this disparity reflects not reduced exposure, but heightened barriers to disclosure, mobility, and refusal among women. Many LBQ women reported lacking access to accurate information about sexuality and gender diversity, rendering them particularly susceptible to the authority of medical professionals and family members.

The methods documented by 6Rang constitute serious medical abuse. They include the prescription of unnecessary psychiatric medication, electroconvulsive therapy, hypnosis, coercive behavioral practices, and faith-based interventions aimed at suppressing same-sex desire. These practices are widely discredited under international medical and human rights standards and have been recognized by UN mechanisms as potentially amounting to cruel, inhuman, or degrading treatment. For LBQ women, the harm is compounded by gendered power imbalances that severely limit their ability to refuse treatment or seek redress.

A recurring and significant impact of these practices is the profound psychological toll produced by enforced invisibility. LBQ women consistently report chronic anxiety, depression, insomnia, panic attacks, and reliance on self-medication as a result of sustained concealment. The requirement to suppress or deny one's identity within families, educational institutions, workplaces, healthcare settings, and online spaces generates prolonged stress and deep social isolation, often beginning in adolescence and persisting into adulthood. Many women describe living double lives in order to avoid suspicion, intervention, or punishment, including entering unwanted heterosexual relationships or marriages as a protective strategy. The absence of affirming public narratives, safe community spaces, and accessible mental health support further reinforces feelings of shame, alienation, and self-blame. These psychological harms are cumulative. Survivors report that the effects of medical coercion and enforced invisibility persist long after specific interventions end, including after migration or displacement. Rather than alleviating distress, medicalized responses in this manner exacerbate trauma, undermine trust in healthcare systems, and isolate LBQ women further.

## **V. Economic Marginalization and Dependency**

Economic marginalization is a key factor shaping LBQ women's vulnerability to violence in the IRI. [Gender inequality, criminalization, and widespread economic instability](#) restrict access to safe and sustainable employment. Many LBQ women face workplace discrimination, family-imposed limits on education or employment, and fear of exposure in environments that lack effective protections against harassment or dismissal.

Economic dependency significantly limits LBQ women's ability to leave abusive households or coerced marriages. Without independent income, housing, or social support, exiting violent situations is often not feasible. 6Rang's research indicates that even when women recognize their circumstances as harmful, survival frequently requires endurance rather than



escape. Additionally, in economically marginalized families, early or forced marriage—including of minors—is commonly used as a strategy to reduce financial strain and enforce conformity, a practice reinforced by patriarchal norms and nonexistent legal protections.

These vulnerabilities intersect with criminalization and medical abuse. Fear of being outed discourages LBQ women from seeking employment, reporting workplace violations, or accessing legal remedies. Gender nonconformity further reduces employability, while the psychological and physical consequences of medical coercion limit long-term economic participation.

Testimonies indicate that LBQ women from ethnic or religious minority backgrounds face compounded discrimination, further restricting access to education, employment, and social mobility. These dynamics are further intensified by criminalization, patriarchal norms, and intersecting forms of discrimination, ensuring that economic vulnerability remains both a cause and a consequence of LBQ women's exclusion.