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9. Seta: Finnish Gay and Lesbian Movement's Fight for Sexual and Human Rights

Background

Finland traditionally has shared enlightened and egalitarian views in matters concerning sexuality with its Scandinavian sister democracies. However, due to its geographically, culturally and linguistically isolated position, Finland has been a backwoods society in the Nordic context, with harsh attitudes and laws toward homosexuality. Homosexuality was punishable by imprisonment until 1971. For most of the 20th century, public attitudes about homosexuality in Finland were influenced by psychoanalytic theories accepted in psychiatry and psychotherapy. According to these theories (West 1968/1955, Bergler 1958, Bieber et al. 1962, Socarides 1978), gays and lesbians were sick, disturbed, perverts, injustice collectors, unreliable and a threat to children. This traditional psychiatric view contributed to mental health problems and suicides of homosexuals.

Homosexuality was decriminalised in 1971, but nevertheless, the state church demanded a censorship law criminalising “public encouragement of homosexuality“. This law which severely limited freedom of speech about homosexual issues remained in force until 1999. Because of sanctions and invisibility it was difficult for homosexuals to find a partner. Every fourth gay man growing up before decriminalisation had been beaten up by youth gangs who hunted gay men in their meeting places. Society was not able to protect the sexual or physical health of lesbians and gays and transgendered people.

After the mid-20th century, events in the United States and Europe began to impact the situation of homosexuals in Finland. In the 1950's fresh scientific literature from America reached Finland, including the Kinsey male report and female report (1948, 1953), the latter of which was immediately translated. The comparative studies of Evelyn Hooker (1957) and the cross-cultural studies of Ford and Beach (1951) entered university textbooks. The general relaxation of sexual morality was launched in the 1960's by contraceptives, antibiotics and baby-boomers entering universities and demanding social change. A new radical youth culture protested against old structures and the double standards of society. Radical students in the United States and all over Europe occupied their universities in 1968. Various anti-authoritarian protest groups around the world

sprang up (black civil rights movement, new feminist movements, anti-Vietnam war protest groups) providing a model for Finnish movements, such as the radical feminist Group 9, the movement to defend mental patients, homeless alcoholics and sexual minorities (the November movement), as well as SEXPO, the general sexual policy and education organisation. The first homophile organisation was founded in the heydays of the 1960's with a radical charter but it soon relapsed to an underground secret mode of work. Time was not yet ripe.

New ideas were brought to Finland by women who had been in touch with French feminism (de Beauvoir) and Swedish left-wing feminism and by men who had participated in the radical events of Stonewall (New York), Copenhagen or Amsterdam in the late 1960's. Another important event was the radicalisation of the homophile movements, which finally lead to the deletion of the sickness label by the American Psychiatric Association in 1974.

Organisation for Sexual Equality: SETA

Founding and charter

In 1974 a new gay and lesbian liberation organisation SETA (SETA is an abbreviation for the Finnish words meaning sexual equality) was founded. From the beginning it was an open societal pressure group and became involved in political lobbying, demonstrations, and disseminating information.

The main philosophical principles of SETA are equality, inclusiveness, integration and confrontation. Thus, SETA is open to anyone who supports the principle of equality between the genders and between people of various sexual preferences. In practice this has meant, for instance, gender parity. The number of chairpersons in SETA's history has been equal in terms of gender (6-6). Inclusiveness means that individuals with various sexual orientations and gender identities are welcome. Transgendered people have been part of SETA from the very beginning. Integration is the principle originating from the experiences during the second world war of the Dutch gay and lesbian movement. Gays, lesbians and transgendered people would be too isolated without having as friends and supporters a large number of those, who value the equality of all humans. Confrontation means that sexual minorities must proudly come out of the closet and publicly demand their rights, through demonstrations, if necessary.

The question of inclusiveness has led to frequent discussions of the categories of "sexual minorities". Several members of the Finnish religious right have protested against the idea of sexual equality by warning that homosexuals always exaggerate their numbers and that if homosexuality is accepted, it may lead to other deviations like paedophilia, even necrophilia. These fears are irrational and unfounded. A thorough literature review

was done by the American Supreme Court before its Colorado Amendment 2 decision in 1996 to grant complete legal equality to gays and lesbians. The Court concluded that there is no connection between being gay or lesbian and paedophilia (see Stålström 1997).

The principle of integration led to the establishment of several contacts and allies such as the Finnish Mental Health Association, the sexual political organisation SEXPO, and leading scientists in the field of sociology, public health and social policy. Practical co-operation with the Department of Sociology started on a very intensive level in the first few years. SETA also recruited both ordinary and famous parents of its members. All political parties were contacted bringing several supporters. Several straight human rights lawyers were recruited to SETA's work. For example, human rights lawyer Tarja Halonen, has given unrelenting support to the cause of sexual equality. When SETA was founded in 1974 she participated in the first ever public panel discussion on sexual equality, and in 1980-81 she served as chairwoman for SETA. As the Foreign Secretary of Finland she has publicly criticised countries that still formally oppress sexual minorities. Tarja Halonen was elected as the president of Finland in the spring of 2000.

SETA's main demand was total legal and social equality for lesbians, gays and transgendered people. It was understood that many of the social, mental and sexual health problems of sexual minorities were mainly caused by societal oppression and the necessity to hide. This shame and fear of discovery led to a double life and contributed to the so-called stigma signs characteristic of other oppressed minority groups. SETA articulated this oppression in its charter based on the United Nations Declaration of Human Rights, according to which all human beings are equal and share the same fundamental human rights.

Fight for the freedom of speech and anti-discrimination reform

When homosexuality was decriminalised in 1971, a law setting a higher age of consent for homosexual relations compared to heterosexual relations and a censorship law were introduced in the Sexual Offences Code because of requirements of the religious right. The bishops of the State Church of Finland warned in their formal statement that homosexuality is a disease and a sin and can quickly spread by seduction unless a censorship law is enacted against it. The Church and its psychiatric expert demanded a paragraph criminalising "public encouragement of sexual relations between members of the same sex". Complaints were made against the Finnish Broadcasting Company from the early 1970's about allegedly violating this paragraph. Although nobody was ever convicted of "encouraging homosexuality", the public threats from the religious right led to censorship on homosexuality in the electronic media in the 1970's and 1980's. Many excellent programs were shelved.

SETA took the censorship issue of Finland to the United Nations Human Rights Committee in 1978, who discussed the matter for three years. The decision of the Human Rights Committee was a landmark case, because it revealed a weakness in the United Nations' rules. If nobody has been punished in a court because of a censorship law, there is nothing the UN Human Rights Committee can do. The UN mandate is to protect individuals from violation of human rights but it cannot oppose a law such as the censorship law of Finland as long as nobody has been convicted on the basis of the law. For several years SETA members tried to get themselves arrested by holding street demonstrations in Helsinki and publicly encouraging love between members of the same sex. The police always collected the placards as evidence but no one was ever convicted. The state knew that the UN Human Rights Committee would be able to act as soon as the first Finn had been convicted of 'encouragement'.

SETA's representative was invited to a large symposium on homosexuality at the Madrid World Psychiatric Association annual conference in 1996. There Finland's case was discussed and received further visibility. Several leading figures in psychiatry criticised the undemocratic practices in Finland. The Director of Foreign Affairs of the American Psychiatric Association sent letters to the Finnish Ministry of Justice and the Chairperson of the Finnish Psychiatric Association.

The fight for freedom of speech and anti-discrimination reform took a quarter of a century because of the opposition and lack of support from politicians. Very few politicians wanted to be regarded as working for gays and lesbians. Reform measures were incorporated in a major revision of the Sexual Offences Code. Because of the large number of topics considered in this code, homosexuality issues received less attention. The large General Revision of the Sexual Offences Code finally equalised the age limits for sexual relations for homosexuals and heterosexuals and deleted the censorship paragraph, when it became a law on January 1, 1999.

In its charter SETA also demanded that all anti-discrimination laws be extended to also cover homosexuality in the same way that characteristics such as sex, age, race, language and religion were grounds for non-discrimination. A large (N=1051) sociological lifestyle study conducted at the University of Helsinki in 1982 (Sievers et al. 1984) revealed widespread discrimination against gays and lesbians. Although it has been very common to hide one's sexual preference, 21% of men and 12% of women had been targets of name-calling because of actual or suspected homosexuality. Three-fourths of respondents had heard the word "homo" used as a common slur. A minority of men and women also reported discrimination against them in hiring for jobs, by employers and work colleagues, and from officials and courts. It was also rather common for doormen to refuse entrance to those they thought looked like they were homosexuals. Homosexuals were also prevented from congregating in certain restaurants. The lack of safe meeting places exposed gay men to harsh violence.

SETA lobbied hard together with human rights lawyers, Ministers of Justice, Parliamentarians and trade unions to bring all indirect and direct job discrimination to an end. This was achieved in the over-all reform of all existing anti-discrimination laws in 1995 by adding the words “sexual orientation” to the list of other protected qualities such as age, gender, religion, language and ethnicity. These anti-discrimination laws (i) prohibit libel, insult or agitation against a group of people, (ii) prohibit discrimination in the exercising of a trade or profession, serving the general public, exercising official authority or other public function, or arranging public events or meetings, and (iii) prohibit discrimination against a job-seeker or an employee.

SETA’s main legal demand was fulfilled when the Finnish Constitution was amended in 1995 in such a way that the text accompanying the Government bill explicitly mentions “sexual orientation” as an example of “other reason related to the person”. This puts Finland among the first nations in history to grant constitutional equality to gays and lesbians.

These legal changes, together with increased media visibility and support have removed a large number of social problems. Discrimination in restaurants, which used to be a problem, has practically ceased and is not tolerated by law. For example, a restaurant doorman who violently removed two men for kissing each other in 1998, was ordered to pay a fine because of discrimination.

SETA’s charter of 1976 demanded that same gender partnerships be granted equal status with heterosexual partnerships in the law. Lesbians, gay men and bisexuals need formal recognition of their partnership status and legal protection similar to that of heterosexual couples. SETA has lobbied for legal recognition of their relationships for this would improve their societal position and confirm the importance and significance of these love relationships for gays and lesbians. SETA has also requested that partners of gay and lesbian parents be recognised as legal parents. In the 1990’s SETA has increasingly focused on various forms of partnership and parenting. An organisation called “The Rainbow Families” was founded in the 1990s to support lesbian, gay, bisexual and transgendered families. It also provides new information and discussion on various family forms and the needs and rights of children of these couples. In addition it acts as a support network for these new “alternative families” or “families of choice”.

The “family committee” of the Finnish Ministry of Justice acknowledged in its report of 1992 that same-gender couples ought to be included in the legal system of marriage. The Centre for Family Affairs of the Lutheran State Church voiced a dissenting opinion. The matter was presented to the Parliament in a Private Member’s Bill introduced by Member of Parliament, Outi Ojala, MEP, in 1993. This created a lively discussion in the Parliament and the media. The Legal Committee of the Parliament did not introduce the draft Bill to the Parliament, because the general assumption at that time was that it

would not be passed, especially if it included the right to adoption. At the same time a public opinion poll was carried out indicating that 45% of the Finns were for the legal recognition of same-gender couples and 35% were against it, with the rest undecided (Hiltunen 1996). The Ministry of Justice set up a committee with SETA representation in 1997 to prepare a legislative initiative for the formal recognition of gay and lesbian relationships. The committee submitted its report in 1999. The committee's legislative initiative did not include the right to internal adoption. At the present the law reform is being blocked by the resistance of the state church of Finland.

Artificial fertilisation has been possible in Finland for individual women or lesbian couples. However, a parliamentary committee submitted its report on legislating artificial fertilisation in 1998 in which lesbian couples and single women were excluded from fertilisation treatments. This created a public debate and the final reading in the Parliament was postponed.

Media in Finland

SETA's charter holds the media responsible for information on and attitudes towards sexual minorities. From its inception SETA has provided information and news to the media, monitored it closely, and corrected misrepresentations.

During the 1950's and early 1960's homosexuality was under a blanket of silence. The silence was only broken by the rare scandal or a crime involving a victim who was homosexual. An important example occurred in the mid-1960's when one of the sensation-seeking tabloid newspapers infiltrated an ordinary gay man's home in order to make a provocative lead story of homosexual life in Helsinki. After the story's release, the man was immediately recognised and endured unnecessary suffering and harassment. The police, for instance, refused to give him a driver's licence. This piece of sensationalist journalism raised a lot of protests in the general public and nearly one hundred journalists, artists and culture personalities, including the next archbishop, signed a written protest against gay hunting in the tabloid press.

In the 1960's and 1970's the laws on pornography were relaxed. This created a large market for pornographic, sensation-seeking journals which started to use homosexuality as a bait to get readers interested in "abnormality". This made the media image of a homosexual even worse, from total silence to exaggeration and sensationalism.

SETA demanded that the media stop publishing false, libellous or misleading statements about sexual minorities and that the National Press Opinion Board criticise media members who publish unethical texts about sexual minorities. SETA reminded the state-controlled Finnish Broadcasting Company that, according to its own charter, it has the responsibility to promote tolerance toward minorities, and thus it should also promote tolerance toward sexual minorities. Board members of SETA made several visits to the

lawyer and Director General of The Finnish Broadcasting company, after a program on homosexuality had been censored.

During the first years SETA was frequently attacked by the conservative and the Christian press. The National Press Opinion Board handled three formal complaints by SETA against this sector of the press. In the first case a conservative newspaper accused gay liberation of harming children. A Christian newspaper compared homosexuals to criminals and terrorists. Another Christian newspaper accused homosexuals of child abuse. All these complaints were thoroughly examined by the Board, which found them to violate the ethical norms of journalism in Finland. Each paper had to publish the decision of the Board on its own pages.

SETA was gradually able to recruit a number of leading journalists to its ranks and started to make an impact on the media. SETA also collected, translated and disseminated scientific information to journalists and experts. Members of SETA have written dozens of articles for the general and scientific press, entries for medical encyclopaedias as well as other educational material and appeared in radio and television interviews. SETA cooperated in the beginning of the 1980's with a sociological research group to carry out a large lifestyle study, which made it possible to publish a textbook of homosexuality for the general public (Sievers et al 1984).

One of the demands of SETA's 1976 charter was that public and scientific libraries should acquire new and relevant literature. Several university libraries co-operated and the Helsinki University Social Sciences Library ordered almost 200 volumes on homosexuality in the 1990's. Members of lesbian and gay research groups have collected a 78-page bibliography of gay and lesbian literature in Finland, available in the internet (Stålström 2000), which is continually updated. General and scientific information about homosexuality is now generally and widely available in libraries, bookstores and organisations. The way the nonsensational media handles homosexuality has been almost normalised in Finland. Gays and lesbians are generally portrayed as ordinary people. Nevertheless, some fringe organisations, influenced by the American religious right, occasionally cause problems with their unrelenting war against homosexuality.

School education

SETA's charter notes that school education in Finland about sexuality has traditionally been one-sided, even faulty. All school books in the 1970's, if they mentioned anything at all about same gender attraction, considered homosexuality a psychological deviation. SETA demanded that human relations and sexuality must be integrated in all subjects and considered from a societal perspective. Sex education must not only be the inculcation of existing norms but the school must give information about different normative systems and the possibility of changing norms. Homosexuality must not be taught as a deviant form of behaviour but as a form of sexuality and love equal in value to heterosexuality.

The principle of integration of sexual minorities into general education on human relations and sexuality was accepted by the National Board of Education in the 1970's. There have been great difficulties, however, in updating the schoolbooks. In the beginning of the 1990's most high-school books still either totally omitted homosexuality or presented it as some kind of psychological or medical problem (Heikkinen 1991). SETA has constantly been in touch with writers of school books and in many cases they have stopped the pathologisation of homosexuality. SETA has also sent members of its information group to schools to give educational talks and to tell what it is like to live as a lesbian or gay person. Finnish sexology has been developing, but old attitudes defining same-sex love as an inferior substitute for heterosexual relationships or as deviant behaviour still need to be critically examined. A recently published textbook written by lesbian and gay scientists (Lehtonen, Nissinen, Socada 1997) is now available for educational, health, and social work professionals.

Scientific research

SETA's charter of 1976 notes that research on homosexuality has traditionally been directed towards finding the cause of homosexuality and developing prevention mechanisms or cure for homosexuality. It claims that all research at that time was unreliable and methodologically flawed in making generalisations from a small number of mental patients to the whole gay and lesbian population. In addition, research had neglected to consider the effect of societal attitudes, laws and other norms on the mental health of homosexuals.

SETA demanded that the state and organisations responsible for the funding of scientific research concentrate on funding studies which look at the causes of prejudice and discrimination against racial, religious and sexual minorities. Research must chart the social problems caused by discrimination and plan ways of overcoming them. Several research projects have been carried out by universities, some of them with the support of SETA.

The largest lifestyle study was published in 1984 (Sievers et al. 1984) in which 1051 lesbians and gay men from all around Finland responded to questions taken from the large Kinsey-institute study (Bell & Weinberg 1978). According to the results the majority of men and women had realised their sexual orientation before the age of 15 and more than a third said they had realised it as long as they could remember. The majority of men hid their homosexuality from their workmates and family members, including mother and father. Women were more open. The majority of lesbians lived in a couple relationship and about one half of men replied they also have a steady couple relationship. Twelve percent of men and 16% of women responded that they had very rare or no sexual contacts.

In 1997 the European Union and the Finnish Ministry of Social Affairs and Health started to fund a research project looking at men who have sex with men. The findings from this quantitative and qualitative study were published Huotari and Lehtonen (1999). The results of the survey, carried out at the HIV Foundation with the practical help of SETA, comprising 750 replies indicate that the sex life of Finnish gay and bisexual men is relatively reserved and safer sex practices very common. The majority of the responding men had a regular partner, although the modal pattern was having one regular partner and casual sex on the side. The favourite sexual techniques cited by most respondents were kissing and caressing, full body contact, mutual masturbation, fellating and being fellated. About two thirds of respondents included anal sex as a favourite sexual activity and the majority reported condom use with casual partners.

The non-use of condoms was mainly attributed to alcohol and its effect on lowering judgement but also to the intensity of the situation and infatuation. Condom availability is low in gay bars and sex saunas. There are technical problems with their use as well as condom slippage and breakage. Respondents reported a high level of knowledge about HIV/AIDS. Yet, risk of infection from a steady partner was not fully acknowledged. Similar findings of high STD transmission rates from regular partners were also reported in a recent Finnish study involving heterosexuals. Regular partners often have unprotected sex even though one or both may have had unprotected sex with others. In addition to adherence to condom use in casual sex, clearly a new ethic of openness about sex is necessary in all sexual relationships, including those with a regular partner. Nearly two thirds of the gay men in this sample reported never having had an STD (including HIV).

Psychiatry and mental health services

SETA's charter of 1976 notes that homosexuality was still classified as a "disorder of sexual behaviour" in the Finnish classification of diseases. The prevailing psychiatric views of that time came from American psychoanalysts, mainly Irving Bieber. The leading psychiatric textbook (Achté et al. 1976) classified homosexuality as a deviance and disorder. Homosexuals were described as incapable of human relationships and victims of pathological parenting, prone to various psychiatric illnesses. In his earlier psychoanalytic texts Achté recommended electric shocks as "punishment" for homosexuality. Based on rat observations he concluded that homosexuality is a "substitute".

SETA demanded that homosexuality be deleted from the national classification of diseases and that psychiatric textbooks be updated to include information other than that obtained from psychoanalytic patient samples (Bieber et al. 1962, Socarides 1978). SETA noted that although sexual minority behaviour is not a disorder, discrimination and societal pressure can lead to mental problems and suicidal thoughts unless proper help is available.

SETA urged a total revision of texts about homosexuality in psychiatric and medical textbooks and in the field of mental health education and suicide prevention.

The confrontation between SETA and the old-school psychiatrists led to a deadlock lasting for a quarter of a century. The main protagonist of the sickness label, professor Achté, publicly stated that the books he values most are the Bible and Kaplan-Sadock's Textbook of Psychiatry. That text follows the "adaptational" psychoanalytic views of Sandor Rado (1940), who revised Freudian theory of homosexuality. Rado held that Freud was mistaken in assuming a basic bisexual potential in all human beings. Rado and his followers also tried to refute Freud's claim that homosexuals can be quite healthy mentally. A change of international significance is that the Gadpaille text on homosexuality has been accurately updated by professor Terry Stein whereas most earlier editions of the (Kaplan-)Sadock textbook spread the psychoanalytic sickness classification for decades. The newest edition refrains from psychoanalytic stereotypes and now defines homosexuality as a normal variation of sexuality (Stein 2000).

SETA strongly lobbied the National Board of Health, which finally declassified homosexuality from the national classification of diseases in 1981. The old school psychoanalysts never changed their attitudes and the sickness perspective of homosexuality spread to medicine and curricula for high-schools. Fortunately, a new generation of psychiatrists has recently published a new version (Lönnqvist et al. 1999) of the psychiatric textbook (*Psykiatria*). This edition closely follows the new American DSM-IV classification in which homosexuality has been totally deleted but where transvestism still is classified as a disorder. The new Finnish psychiatric textbook emphasises that homosexuality has been erroneously classified as a disorder for decades. This textbook makes it clear that homosexuality is not a clinical entity and corrects some of the most widespread psychoanalytic prejudices. Practically all university and high-school textbooks published in Finland in the year 2000 consider homosexuality a normal expression of sexuality. The demise of the pathologising perspective on homosexuality is described in a doctoral thesis in sociology called "The end of the sickness label of homosexuality" (Stålström 1997), which received widespread publicity.

The state church

According to SETA's charter the Lutheran state church carries a heavy responsibility for the continuous discrimination of homosexuality by having traditionally labelled it as a sin, mental disorder and contagious vice. SETA demanded that the state church refrain from discrimination on the basis of sexual orientation and consider new scientific research.

There has been a lively discussion about homosexuality within the church and it has practically stopped labelling homosexuality a contagious mental disorder. According to the latest official statement of the bishops, dated 1984, acting on one's homosexuality is

still a sin. Since then two archbishops and several highly-placed theologians and ethicists have actually been in the forefront defending the human rights of homosexuals and people with AIDS. However, a person openly living as gay or lesbian will not be ordained a priest in the Finnish state church.

International co-operation

SETA's charter of 1976 states that homosexuals are being discriminated against in societies with a variety of political systems. SETA sees its work in Finland as part of the universal fight for equality and human rights, for ethnic, religious and sexual minorities. SETA demands that the Finnish government together with other Nordic countries works to ensure the equality of sexual minorities in the United Nations and other international bodies. Two members of SETA serve as part of a human rights group in the Finnish Ministry of Foreign Affairs. The group proposes recommendations for Finnish foreign policy on issues related to human rights of lesbians and gays.

SETA has been active internationally lobbying the Nordic countries through the Nordic Council for Homosexuals and the European Union through the International Lesbian and Gay Association. SETA was among the founding members of the International Council of AIDS Service Organisation founded in co-operation with the World Health Organisation. SETA has assisted its Baltic and Russian sister organisations even during the time when organising for sexual equality was illegal in those countries. SETA has received continuous support from the American Psychiatric Association, American Psychological Association and the American Psychoanalytical Association. Members of SETA have participated in various international conferences.

Social and Welfare Services of SETA

Counselling and social work

SETA's counselling services focus on the prevention of mental health problems. Sexuality and gender are such important dimensions of personality that the degree of self-acceptance and adjustment in these issues influences general well-being and mental health. Lesbian, gay, bisexual and transgendered people need a place where they are welcomed and where they can express their feelings and get positive feedback. SETA provides this environment and works particularly on self-esteem and self acceptance. SETA's work complements the formal counselling services. Professionals in official social work and health care do not always know how to interact with sexual minorities in an accepting and relaxed way. These professionals often lack expertise about problems of minority identity formation processes, coming-out, openness and self-discrimination.

SETA's counselling services include social work, telephone counselling and small group

activities. SETA has 19 member organisations, of which 12 are regional groups and the rest theme-oriented or professional groups, such as the alternative family group “Rainbow Families” and the Association of Lesbian and Gay Professionals within Social Work and Health Care. The national organisation of SETA has employed one social worker, one instructor and one secretary for education working in the Transgender Support Centre. Three of the regional organisations have part-time social workers and instructors.

SETA’s counselling services are greatly dependent on volunteer work. There are 50 small groups all around Finland in the regional organisations serving the needs of individuals of different ages. There are special groups for adolescents, women living in same gender relationships, Christian gays, lesbians and bisexuals, people who mainly identify as bisexual, gay and bisexual men who are or have been living in a heterosexual marriage, the parents of gay and bisexual youth, and mature women planning retirement. One group offers action-oriented and camping activities for families with children, and another acts as a support group for people who have problems with substance use. Some of the groups offer unstructured discussion and activities and some involve discussions guided by a social work professional. These groups are especially valuable for participants when they are forming their own identity or are in the coming-out process. The Christian group is also important because the State Church does not yet encourage sexual minorities to accept themselves as people who have the right to engage in sexual relations with someone of their gender.

SETA currently also offers peer-group telephone counselling in eight Finnish cities. Telephone counsellors are volunteers, who receive special training for this job as well as updated training and supervision. This helps to ensure the quality and ethical level of counselling work. Phone calls deal with questions about homosexuality, bisexuality, transsexuality, transvestism, relationships, and problems of everyday life. Social work professionals guide the voluntary and training work of the organisations. They work to offer gay, lesbian, bisexual and transgendered people a peer group and means of participation in their communities, and to assure that the counselling work is based on up-to-date research and information.

Training and information

SETA and its member organisations arrange a rich variety of training and teaching services for the general population. SETA provides between 200 and 300 training or educational lectures every year. Lectures for high-school classes are often requested and are one of SETA’s most popular forms of information provision. They are given by lesbians, gay or transgendered people themselves and include lots of interaction and dialogue with the audience. SETA’s peer educators discuss questions of sexuality and gender, as well as everyday problems and gay/lesbian/transgender subcultures. The goals are to provide information to students that promotes their ability to deal positively

and responsibly with their own sexuality and gender and to help them relate to people in various minorities. SETA also sends its peer educators to give talks and presentations for school theme days, lecture series and seminars. Most of the peer educators are volunteer workers who have received instructions in training techniques and counselling from SETA. SETA co-operates closely with the Association of Lesbian and Gay Professionals within Social Work and Health Care (STEAM), the Finnish Foundation for Sex Education and Therapy (SEXPO) and various educational institutes in order to provide training about sexuality, gender and minority problems for professionals and students in the fields of social work and health care. An important part of SETA's clientele consists of social workers and counselling professionals who need advice and supervision to help them in their jobs.

Finnish AIDS council (HIV Council)

SETA started its comprehensive preventive work in 1982, even before the first AIDS diagnosis in Finland. The organisation was concerned that, in addition to the spread of the disease itself, discrimination against gays would increase and attempts might be made to register the names of infected people and to forcibly quarantine them. SETA founded a health group in 1983 after the first Finnish AIDS diagnoses. The group was responsible for the production and dissemination of preventative information, personal counselling and providing referrals for those worried about a possible infection. The health group also trained the personnel in SETA's counselling services and co-operated with the medical personnel and the authorities of the National Board of Health. In practice, this meant psychological and medical counselling in SETA's office, and SETA's members became involved in producing and distributing leaflets, arranging training sessions and information campaigns in gay discos, giving information to the press and liaising with the medical team investigating AIDS.

In the beginning the National Board of Health did not consider AIDS a serious epidemiological problem. The public health care system was reluctant to provide anonymous medical services. SETA demanded free and anonymous HIV antibody testing with pre- and post-test counselling available in the whole country. This was deemed extremely important because of the great social risks associated with the infection becoming known to outsiders. SETA made several visits to the Minister of Health and the Director of the National Board of Health to demand appropriate and confidential testing and medical care.

The medical authorities took the situation seriously only after it became evident in 1984 that HIV could spread to the "general population". In 1985 the National Board of Health appointed an AIDS commission which took into account the demands of SETA and which was in accordance with the WHO General Program on AIDS. The commission took a thoughtful stand emphasising voluntary measures and information

provision. Its objective was to facilitate testing and to ensure that accurate information was provided to the general public. The commission rejected the demands by some medical researchers for large-scale testing and declaring HIV infection as a “dangerous communicable disease” instead of a “notifiable disease”¹. It was felt that compulsory reporting of names would impede the general willingness to be tested and thus contribute to the further spreading of HIV. In 1985 the National Board of Health began training health care personnel together with SETA’s health group to promote their abilities to deal with HIV/AIDS situations. SETA and the National Board of Health edited a booklet for medical personnel about homo- and bisexuality (Nissinen 1985).

SETA took great care to maintain a positive attitude towards sex and reduce panic reactions. Information campaigns were specially tailored for each target group and considerations were made for the wide variation of human sexual behaviour. However, others chose a scare tactic. There were large signs attached to trains and buses warning that “AIDS IS A DEADLY SOUVENIR”. In literature distributed to high school students and teachers homosexuality was falsely identified with risky practices. The booklets simply warned against “promiscuous” and “homosexual” relations. At this time, in the mid-1980’s, SETA’s simple brochure “Safer Sex” was the only source of information in which different forms of sexuality and sexual practices were discussed explicitly and honestly. This brochure also included practical and explicit advice on prevention. Tens of thousands of copies of this booklet were distributed by SETA to medical centres for distribution to their clients.

In 1986 the National Public Health Institute started co-operation with SETA to organise anonymous antibody-testing. This led to the founding of the Finnish AIDS Council. The steering group of the Finnish AIDS Council was enlarged to include not only members of the National Public Health Institute but also members of the Finnish Association for Mental Health. The AIDS Council network was extended to include six cities in Finland and was formally operated by SETA until the end of 1997 when it was restructured as an independent foundation, the HIV Foundation, to which SETA still elects board members.

Currently the activities of the Finnish HIV Foundation are directed toward the worried well and infected people and their significant others, irrespective of their sexual orientation

1. The classification “dangerous communicable disease” involves diseases which are easily communicable and may, under some circumstances justify involuntary detention of the infected person having diseases such as diphtheria, cholera and syphilis. SETA fought very hard against this alternative, as some conservative representatives of the medical profession initially suggested the internment of HIV positives to the deserted Seili Island, which is an old leper colony (Halonen, 1985). However, at the moment HIV infection is only classified as a “notifiable disease”. This means that all HIV infections must be reported to medical authorities with or without personal identification. Diseases belonging to this category do not justify quarantine or involuntary detention per se. However, strict legal action is taken if an infected person threatens or is perceived to threaten other people with the infection. A legal precedent in Finland has classified “intentional spread of HIV” as equivalent to “manslaughter”. (see Law on Communicable Diseases TTL 786/1986).

or mode of transmission. The organisation offers telephone counselling, free and anonymous antibody-testing, and referrals to support persons or support groups. It also provides re-adjustment courses for infected persons and the services of a medical doctor, psychologist and social worker. This foundation distributes information about HIV, prevention and services. The foundation continues to support the guiding principles of The Finnish AIDS Council, a positive attitude towards sexuality, prevention of discrimination and defence of social safety and human rights. The HIV Foundation has grown into a recognised national institution (see Halinen 2000).

The number of registered HIV infections in Finland remained the lowest in Western Europe until 1999, partly due to the early information campaigns started by SETA already in 1982 and the traditional lack of large-scale sex saunas, backrooms and incoming sex tourism. The proportion of newly diagnosed infections obtained in male-to-male sex has steadily decreased in the last five years and they represented one third of all newly diagnosed sexually transmitted HIV infections in 2000. The proportion of new infections transmitted by needle-sharing intravenous drug use increased sharply during of 1999. (*The Department of Epidemiology, National Public Health Institute, epidemiologist Pekka Holmström , August 2000*).

Transgender Support Centre

From the beginning SETA has co-operated with transsexuals, whose physical appearance and biological sex does not correspond with their gender identity, and transvestites, men who occasionally express their feminine side in various ways, for example, by cross-dressing. Even within SETA these transgendered people have been a minority. Therefore the transsexuals formed their own organisation (Trasek) in 1984 and the organisation of transvestites (“Dreamware Club”) was registered in 1996. Both organisations act as interest groups, arrange peer-group activities and work closely with SETA.

Transsexuals need sustained medical care and strong social support structures to enable them to live according to their gender identity. Their risks of marginalisation, depression and suicide would be considerable without care and support. Currently it is still difficult to obtain systematic supportive treatment for transsexuals in Finland. In the 1980’s some transsexuals went abroad for operative treatment. Others received hormonal treatment in Finland without any other support. Many lost hope of a tolerable future and attempted or completed suicide.

Transsexuals who are genetically male still need a formal castration permit before sex correction surgery. Obtaining this permit is a long and arduous process and some requests are denied. As part of this process, a transsexual has to take a difficult examination, that many regard as invalid and unreliable. Transsexuals have problems finding social workers, therapists, psychologists, psychiatrists and medical doctors with sufficient expertise in transgender issues to provide them with services they need.

Since the 1980's SETA and Trasek have tried to get social and welfare authorities to improve the health care system so that competent professionals are available to transsexuals. Finally, the National Research and Development Centre for Welfare and Health (STAKES) established a committee, to consider this matter and as a result a report was published in 1994 on the development of care and support services for transsexuals. This enabled SETA to establish the Transgender Support Centre as part of a three year project. This project, as well as many health-related projects in Finland has been funded by the Finnish Slot Machine Association. This association channels money from slot machine operations and lotteries to public health projects. The Finnish Ministry of Social Affairs and Health controls and directs these funds and also funds from the state budget to public health organisations (such as SETA, Trasek, the Finnish HIV Foundation and SEXPO).

The Transgender Support Centre has provided support services for transsexuals and transvestites and their significant others as well as consultant services for health care professionals and administrators. It has collected research findings and material about the needs of several client groups and produced information for health providers. Workers for the Centre defined and described the terminology and important concepts connected with issues that concern transgendered people. The Transgender Support Centre has identified and analysed problem areas and organised seminars, which have functioned as a forum for dialogue among transgendered people, health care authorities and professional helpers. In 1998 The Finnish Ministry of Social Affairs and Health organised a working group, with one transgendered individual, to clarify the societal position of transsexuals.

A social worker has been employed by the Transgender Support Centre to provide personal counselling and psycho-social support for the clients, to co-ordinate information, training and support work and to arrange training and consultations for professionals in the health care field. In addition, the Centre has organised peer support in the forms of telephone counselling, support persons, and small groups. So far all training has been free of charge with the exception of some courses.

In self-help groups of the Centre, the participants have been able to get to know and learn from others in a similar life situation in an emotionally safe environment and to get support for learning about and feeling compatible with their gender identity. There have been small groups for female-to-male transsexuals, transvestites, transsexuals under treatment, post-operative transsexuals, the significant others of transsexuals and transsexuals living in couple relationships. The Centre has prepared re-adjustment courses for those who have undergone surgery. Nevertheless the Centre cannot compensate for the great need for more transsexuals to receive proper care within the health care system.

The Transgender Support Centre has primarily served transsexuals and their significant others but the services can also be used by transvestites and other people going through a gender definition process. It is sometimes impossible to distinguish between transvestism

and transsexualism. Some people living the life of a transvestite may have a gender identity close to that of a transsexual, but can manage without sex correction surgery. The degree of difficulty in adjustment and self-acceptance varies greatly among transgendered people. The Centre has provided care and support to many transgender people, so that they can better live with and handle the contradiction between their physical body and perceived gender identity without medical help.

Transvestites also need support to develop a positive identity and work through self-discrimination. They often need encouragement and unconditional acceptance of their transvestism to help them accept themselves and develop a life of openness and acceptance. They frequently need help with problems involving their partner and parental role, especially if their spouse is unaccepting of their transvestism.

The Finnish organisation for transvestites started a project in 1999 to gather and disseminate information about the life situation of transvestites for professionals in the field of social work and health care. The steering group of this project, that is funded by the Finnish Department of Health, consists of members of the Transgender Support Centre, the Finnish Association for Mental Health and the SEXPO Foundation. Such co-operation among sexuality and health organisations in Finland has been an effective commonly used strategy in working for shared goals.

The development of meeting institutions and subcultures

From the beginning SETA has tried to arrange safe meeting places for gays, lesbians, bisexuals and transgendered people. The most popular of these have been dance evenings and discos organised from the early 1970's a couple times a month in the largest cities. These social activities have had an important impact on liberation, development, identity and friendship formation for participants. Such social events have also been a source of funds for the social work and magazine of SETA and its associates. In 1984 SETA opened the first gay/lesbian disco in Helsinki. Discos and other meeting institutions operated by SETA are also based on the principle of integration, i.e., mixing gay, bi, transgender and straight populations and encouraging people to get acquainted with each other. The present disco operated by SETA foundation, called "Don't Tell Mama", is among the most popular discos of any kind in Helsinki. Today there are also several purely commercially operated bars and discos in the largest cities - Helsinki, Tampere and Turku - for gay/lesbian/straight/bi/trans populations. Once a year SETA arranges with its local membership organisations a "pride week" to join international organisations in commemorating the Stonewall-uprising in 1969, the symbolic birth of the modern gay liberation movements.

Lesbian and gay mental health professionals organise

Until recently lesbian and gay professionals in the fields of social work and welfare have hidden their sexual orientation for fear of being stigmatised in professional contexts. To remedy the situation, a group of lesbians and gay people formed a professional network in the early 1990's. The goal of the network is to offer mutual professional support and training. This new organisation, founded in 1996 and called the Finnish Association of Lesbian and Gay Professionals within Social Work and Health Care (STEAM), has organised conferences and seminars on issues such as identity, openness, same-gender relationships, and alternative forms of parenting. STEAM has also founded a network of therapists, to whom SETA can refer clients needing supportive therapy. STEAM closely monitors issues concerning gay and lesbian professionals in Europe and the United States and co-operates with the European Association of Lesbian and Gay Psychologists, the American Association of Gay and Lesbian Psychiatrists and the American Psychiatric Association.

The gay, lesbian and transgender movements within SETA have worked hard and productively to end formal inequalities. SETA celebrated its 25th anniversary on May 29, 1999. Most of the basic demands of the 1976 charter have been met and a new charter has to be written for the new millennium, when Finland may be finally achieving an international leadership position, not only in gender equality, but also in the protection of equal rights and sexual health of sexual and gender minorities. As early as 1980 an American social anthropologist in his study of the Finnish gay and lesbian movement summarised the moral effect of the movement:

“When a self-help organisation takes on primarily a political role, it in effect becomes the ombudsman for the minority in question... The gay self-help groups have made positive and tangible contributions to gay people, as well as, I believe to the societies in which they occur. Not only in terms of personal growth and change (providing more social alternatives, community and identity) but also as a vehicle of change. Ultimately such grass-roots activity is what participatory democracy is all about - people in action on their own behalf” (Fitzgerald 1980, 199).

A whole post-Stonewall generation has matured from street activists and demonstrators into experts in their own fields, where many of the activists continue their work for sexual equality and health. They have realised in their own lives the famous motto of Mahatma Gandhi: “You must be the change you want to see in the world”.

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