Three Steps Forward and, If Possible, Not a Single Step Back¹—Luxembourg Perspectives on Societal Discourses Concerning Sexuality*

Christel Baltes-Löhr
University of Luxembourg, Esch-sur-Alzette, Luxembourg

This article will retrace the developmental lines of societal discourses concerning sexuality as well as the changing significance, acceptance, de-dramatization, and normalization of non-heteronormative, non-binary configurations of gender. In a first step, the figure of the continuum will be outlined as a theoretical framework and analytic tool for gender diversity. Subsequently, the article will illustrate certain key data points concerning the situation of women and men in Luxembourg and establish a comparison with the European and international situation. Selected research findings will be discussed, although it must be noted that, in the early 2010s, this research was still concerned exclusively with binary configurations of gender. Following a first synopsis, the paper will divert its attention to trans, intersex, non-binary, queer, and agender persons in Luxembourg and will introduce current national and international research findings concerning Luxembourg, as well as national ministerial measures and positionings. Following an excursion towards sexology in medicine as well as teaching and research environments at universities, the article will cast a glance towards the year 2050 and finally illuminate the relation, the four-way connection between physicality, psyche, social behavior, and desire to thus illustrate perspectives towards possible future developments.

Keywords: Sexuality, Plurality, Continuum, Non-binarity, Diversity

Theoretical Framework—Gender as a Continuum

If the existence of more than the two genders “female” and “male” has become an unquestionable social normality, then the question arises how to manage the relation between the different genders so that all of them can be viewed as equal, and so that trans and intersex genders, for example, do not have to be thought of as solely tolerated intermediate forms or even as the third or fourth genders between the two perceived main or dominant genders “female” and “male”. Here the figure of the continuum (proposed by Baltes-Löhr in 2014),

¹ Modified motto of the Dancing Procession of Echternach, a tradition widely known even outside Luxembourg, which has been held every Whit Tuesday since the late 15th century. Participants hold hands with the help of a small cloth and jump three steps forward and two steps back.

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Christel Baltes-Löhr, Dr., Professor, Department of Education and Social Work, University of Luxembourg, Esch-sur-Alzette, Luxembourg.
which situates all genders on an equal parallel, can be employed. The continuum suggests a new definition of gender as an infinite, continuous interplay between the four dimensions of gender: the physical dimension (body), the psychological dimension (feelings), the social dimension (behavior), and the sexual dimension (desire) (Baltes-Löhr, 2014; 2018). The focus on the interwovenness of the four dimensions is thus able to expand the still operative bipolar order of a bi-gendered society. Employed in the pedagogical, medical, judicial, and political fields, this figure paves the way for living and developmental stages free of discrimination and fear for all genders.

The concept of “gender as a continuum” combines the four dimensions of the physical, the psychological, the social, and the sexual without assuming a causal relationship between these dimensions. This means that, for example, the physical, bodily gender does not inform the social gender or the mode and manifestation of sexual desire or the experienced gender. None of these dimensions is “superior” to the others, and none of them is assumed to necessarily have an effect on one of the others. They are, however, intertwined, not clearly distinguishable, and do intercommunicate; this is described by the term interdimensional variability between body, psyche, behavior, and desire.² In other words, characteristics of the physical dimension, such as breasts can be accompanied by different characteristics of, for example, the social dimension, which describes gender-relevant behavior, such as motherhood.

Intradimensional variability, as opposed to interdimensional variability, means that the dimensions themselves cannot be limited, and that each dimension contains various modes and manifestations as well as the potential for as of yet undiscovered modes and manifestations. In addition, some dimensions of gender may become more or less dominant or play a more or less important role for a female, male, intersex, trans, non-binary, queer, or agender person depending on the situational context. Shifts within and between the individual dimensions may also vary for all genders and biographical stages depending on time, space, and cultural contexts. Not all so-called women have a vagina, a wide pelvis, narrow shoulders and ovaries, just as not all so-called men possess a penis, a flat chest, and a narrow pelvis. This might seem like a banal observation, but it describes realities that extend beyond still potent binary structures, as well as those of, for example, trans men with a uterus, trans women with a penis, cis women with a uterine transplant and intersex persons with physical characteristics that cannot be categorized within a binary system of gender. The experienced gender can be extremely variable as well, in that persons might not always or equally feel female, male, trans, intersex, non-binary, queer, and/or agender. Not all persons who identify with a certain gender group exhibit the same, homogenous social behavior as other persons within the same gender group. At this point, it almost seems redundant to mention that sexual desire, sexual orientations, and sexual practices go beyond hetero-sexuality between women and men. There are mono-sexual, asexual, bi-sexual, homo-sexual, and pansexual structures and practices of desire that are not derivable from biological characteristics of gender.

In summary, it is important to emphasize once again that the four dimensions of the continuum are not situated in an unambiguous relation to one another. The self-determined positionings of a person in the four dimensions might shift: A person might, for example, at one point in their life show a gender-related behavior that corresponds with notions—within a still prevalent stereotypical gender logic—of a “real” girl, possess biologically male gender characteristics, but feel like a girl and want to make first erotic contacts with a boy

² In earlier works of Baltes-Löhr (2018), the term intercategorial variability was used in place of interdimensional variability. An explanation of the difference between “dimension” and “category” can be found in the publication “Gender as a continuum: On the plurality of lived realities” (Baltes-Löhr, 2020).
who is bio-morphologically and chromosomally male, has internal testes and feels erotically attracted to other boys. This is only an example of the complexity of possibilities of gendered attributions and gender relations. Thus, the figure of the continuum is able to capture existing diversities of gender forms as well as changes and shifts between the genders with a complexity that mirrors that of actually lived realities, and to offer the necessary conceptionsal openness for “new” genders that are possibly being lived but have not yet been described.

Data From Luxembourg: Only Men and Women?

The Grand Duchy of Luxembourg measures 82 kilometers from North to South and 57 kilometers from East to West and borders on Belgium, France, and Germany. Of the 613,900 inhabitants living on the country’s 2,586 square kilometer area, 49.7% are women, according to Le STATEC (Institut National de la Statistique et des Études économiques du Grand-Duché de Luxembourg; National Institute for Statistics and Economic Research of the Grand Duchy of Luxembourg) on January 1st 2019. The national census, which has been segregated by gender since 1871, shows a largely unchanged numerical relation between women and men. The percentage of the non-Luxembourgian population has changed from 3% in 1871 to 47.5% in 2019. Trans, intersex, non-binary, and agender persons are not mentioned in the census even today.

The official Internet portal of the Grand Duchy of Luxembourg (2015) exhibits, as of yet, a binary conception of gender, and shows only the keywords “men” and “women” in relation to gender. The keyword “women” leads to information about life expectancy, age of marriage, birth rates, and the age of the mother at the time of the birth of her first child. On average, women live longer than men, get married sooner, have 1.63 children (in 2010), and have their first child at the age of 31.2 (Grand Duchy of Luxembourg, 2015).

Women’s labor force participation rate was at 76.5% in 2012 (Grand Duchy of Luxembourg, 2015). Luxembourg’s difference between the labor participation rates of women and men, whose rate lies at 91.6% between the ages of 25 and 49 years, is one of the highest in Europe (Grand Duchy of Luxembourg, 2015). There are still few women in leadership positions and, on a whole, the fields of activity are still strongly gender-segregated in Luxembourg. An analysis of the level of education from 2014 shows that, of all those employed, 38% of women and 31% of men have a university degree. Part-time work remains labor mainly for women and mothers; likewise, parenthood still mainly implies motherhood. In 2010, 33.7% of women with children worked part-time, compared to only 13.3% of women without children. The percentage of men working in part-time positions was 4.3% in 2012. This leads the Luxembourgian government to publish on their Internet portal the seemingly positive conclusion that “thanks to the development of part-time work, women in Luxembourg are able to reconcile their work and family lives more and more” (Grand Duchy of Luxembourg, 2015); however, this is questionable in regards to the corresponding assumption that education, care-giving and housework remain in the female domain, which does not correspond to the preferences of the Luxembourgian population, as will be shown later using the results of three studies from Luxembourg and its greater regions from 2010, 2013, and 2014.

Considering the summarized situation in Luxembourg, it is hardly surprising that the “National Plan for Equality of Women and Men” of the Luxembourgian government for 2015-2018 maps out the following areas

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3 In the health and social sectors, 75% of employees are women, for teachers the number is 62%, in the areas of art, theater and recreation 58%, and 51% in the hotel and hospitality industries (Le STATEC, 2014, p. 9).
4 This number puts Luxembourg in fourth-to-last place in Europe, before Bulgaria (2.0%), the Czech Republic (2.1%), Slovakia (2.8%), and Poland (4.1%) (Numbers, 2013, p. 1).
under the title “Doing Equality” 5: Equality in leadership positions, equality in the job sphere, education, information, and sensibilization, combating domestic violence and prostitution as well as a constant evaluation of these sectors (Ministry for Equal Opportunities, 2015). 6 The National Plan for Equality of Women and Men also only mentions women and men.

**Equality of Genders in Luxembourg in Comparison With International and European Standards**

**Global Gender Gap Report—World Economic Forum**

The *Global Gender Gap Report*, published yearly by the World Economic Forum (WEF) since 2016 measures equality between women and men based on women’s access to the job market, education, healthcare, and politics. In this metric, “0” stands for none and “1” for maximum equality between genders. 7 The *Global Gender Gap Report 2018* (WEF, 2019) ranks Luxembourg 61st out of 144 countries; in 2006, it achieved 56th place out of 116 countries. The “equality value” achieved increased from 0.667 in 2016 to 0.712 in 2018. Table 1 shows the equality values for the different areas:

| Year | Job market | Education | Healthcare | Politics | Total | Rank |
|------|------------|-----------|------------|----------|-------|------|
| 2016 | 0.560      | 1.000     | 0.973      | 0.135    | 0.667 | 56/116 |
| 2018 | 0.693      | 1.000     | 0.972      | 0.184    | 0.712 | 61/144 |

*Note. Source: WEF (2006, p. 91; 2019, p. 165).*

It is quite obvious that the Luxembourgian society is farthest from the achievement of equality between women and men in the area of political participation. In the area of access to education, equality has been achieved, and the category of access to healthcare is also nearing that point. In regards to the job market, the value has increased by 0.133; however, Luxembourg occupies the 118th place in comparison to other countries in regards to women in leadership positions. The Internet portal states that on average, no more than 20% of administrative positions are filled by women […] and only a quarter of women employed in civil service hold leading positions, even though they make up half of all civil servants in higher service positions in 2014. (Grand Duchy of Luxembourg, 2015)

As well as on a national level, trans, intersex, non-binary, queer, and agender persons are not considered in the *Global Gender Gap Report* as of yet. However, the publications of the European Institute for Gender Equality show a different picture.

**Gender Equality Index—EIGE (European Institute for Gender Equality)**

The EIGE (European Institute for Gender Equality), founded in 2006, publishes the so-called *Gender Equality Index* at irregular intervals. It measures the relative distance between genders for the domains of work (participation and sector-specific segregation), money (income and economic situation), knowledge (access to

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5 Original: Faire de l’égalité.

6 The former “Ministry for Equal Opportunities” has been renamed “Ministry of Equality between Women and Men” in 2019.

7 Criticism on this method of measurement: The metric does not show if, for example, women have considerably higher educational qualifications. It only depicts the gaps that capture the negative distance of women in comparison to men.
education and degrees as well as segregation according to areas of education), time (time investment in household and care-giving as well as in social activities), power (representation in politics, economy, and unions), and health (health status, health-promoting behavior, and access to medical care) and positions it in relation to the best-ranking country for this indicator (Urmersbach, 2019). The current Index was published in October 2019, and “[f]or the first time, the Index highlights the situation of LGBTQI* people and Roma and Muslim women in areas where statistics are available” (EIGE, 2019a, p. 17). Specific statements regarding Luxembourg will be examined at a later point in this article. Table 2 shows the situation for women and men in Luxembourg and all 28 EU states (EIGE, 2019a; 2019b).

Table 2

| Gender Equality Index for Luxembourg and EU-28 |
|-----------------------------------------------|
| Luxembour                 | EU-28       |
| Total                     | 69.2        | 67.4   |
| Work                      | 74.1        | 72.0   |
| Money                     | 91.8        | 80.4   |
| Knowledge                 | 69.5        | 63.5   |
| Time                      | 69.1        | 65.7   |
| Power                     | 44.8        | 51.9   |
| Health                    | 89.6        | 88.1   |

Luxembourg is situated slightly above the average of the 28 EU member states, scores high in regards to the economic situation, and lies slightly above the European average in access to education and health—in stark contrast to the values for political participation and presence in leadership positions.

Selected National Research Results for Luxembourg—Based on Gender Binarities

In three representative and full surveys in 2010, 2013, and 2014, 5,382 people were asked about their preferred gender model (IPSE [Identités: Politiques Sociétés Espaces, Identities: Politics Societies Spaces], 2010; Wille, Reckinger, Kmec, & Hesse, 2014). They had the choice between the following models:

- Traditional housewife model: The man works full-time; the woman does not work and takes care of the household and family.
- Double burden on the woman: The man works full-time; the woman works part-time and takes care of the household and family.
- Egalitarian gender model: Both partners share work, household, and family equally.
- Double burden on the man: The woman works full-time; the man works part-time and takes care of the household and family.
- Househusband model: The woman works full-time; the man does not work and takes care of the household and family.

Table 3 depicts the results.

The “egalitarian gender model” is favored in all surveys. While in 2010, 12% of participants living in Luxembourg preferred the “traditional gender model”, in 2014, this number is down to 8% and as such comparable to the values of the other surveys. The model “double burden on the woman” was selected as a preference by 15 to 42% of participants. What is notable here is the relatively high preference (42%) for this model among educators and parents of children aged 1-4 who are enrolled in daycare centers overseen by the
state. Preference for the models “double burden on the man” and “househusband” is overall low between 0 and 2%.

Table 3

| Gender Models                      | Luxembourg 2010 (%) | Parents 2013 (%) | Educators 2013 (%) | Luxembourg 2014 (%) | Greater region 2014 (%) |
|------------------------------------|---------------------|------------------|--------------------|----------------------|-------------------------|
| n = 1,500                          | 1.090               | 492              | 1.021              | 1.279                |
| Traditional housewife model (A)    | 12                  | 7                | 8                  | 8                    |
| Double burden on the woman (B)     | 17                  | 33               | 42                 | 15                   | 16                      |
| Egalitarian gender model (C)       | 70                  | 56               | 47                 | 66                   | 63                      |
| Double burden on the man (D)       | 0.5                 | 2                | 2                  | 0                    | 1                       |
| Househusband model (E)             | 0.5                 | 2                | 2                  | 1                    | 1                       |

Note. The last two columns do not add up to 100% as 10%/11% of participants did not specify an answer.

The survey does not show a significant difference between the answers of women and men. Thus, preferences for different models are not (re)produced through a belonging to a gender group. Childlessness seems to increase approval of the egalitarian model both for those who are in relationships and those who are single, in other words, as soon as children enter the picture, approval of egalitarian models of partnership and employment decreases (Le STATEC, 2014). This also explains why the preferences of parents and educators in regards to the “egalitarian gender model” are, with 56% and 47% respectively, higher than for the other four models, but noticeably lower in comparison to the representative surveys of the Luxembourgian population from 2010 and 2014 as well as those of the greater region’s population.

These results suggest that while people do wish for more equality and equity, the actual implementation fails when they become parents.

A study on gender stereotypes published in January 2019 by the University of Luxembourg and commissioned by the Luxembourgian Ministry for Equal Opportunities, with a total of 396 participants between 14 and 30 years of age living in Luxembourg, had similar results: Teenagers and young adults exhibit a largely egalitarian view of gender roles. However, girls and women exhibit these egalitarian positions earlier in their lives than the male participants. Examples of traditional gender stereotypes detected in this study include men who do not believe some jobs are appropriate for women, and women who rate men as being more oriented towards sex (Portail de L’égalité Entre Femmes et Hômes [Portal for Equality Between Women and Men], 2019).

First Summary

Statistics and current surveys in Luxembourg are based on a binary, meaning a two-gender system. Thus, far, trans, intersex, non-binary, queer, and agender (not belonging to any gender) persons are not mentioned, but subsumed in the categories “female” and “male”. At this point, survey participants are usually not afforded the option to decline the question of gender, to indicate a genderless identity or to add their own definition.

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8 Original: “Konventionierte Kindertagesstätten”; privately-run daycare centers under a contract (“Konvention”) with the responsible ministry detailing funding, staffing ratios and minimum requirements concerning, for example, rooms and pedagogical concepts.

9 For 2014, Le STATEC determined that on average, mothers spend two hours a day more with their children than fathers (Bodson, 2017).
However, there have been two exceptions to this: In the earlier mentioned representative survey of persons living in the greater region of Luxembourg from 2014, the category “other” was offered next to the options of “female” and “male” in the personal data collection section. A total of six persons elected to make use of this category, which amounts to 2.6% of the 2,300 participants.

The naming of the “new” category as “other gender”, however, is to be questioned, as it seems to understand the two genders “female” and “male” as the “actual”, the “normal” genders, and thus the “other” gender or the “other” genders are connoted, marked, and excluded as inauthentic, “foreign” and outside the norm.

A second example is a satisfaction survey contracted by the directorate of the University of Luxembourg and conducted by an external research institute among the staff of the university in 2019. The survey afforded the category “prefer not to say” alongside the gender options of “female” and “male”.

Is this a light at the end of the tunnel? Does the gender world, even in Luxembourg, turn towards recognition of more than two genders, of actually existing gender variety, and thus towards a more distinct gender equality and a changing normalcy?

Research About Trans, Intersex, Non-binary, Queer, and Agender Persons in Luxembourg

The aforementioned study from 2010 about identity constuctions in Luxembourg investigated the participants’ opinions about trans- and homo- sexuality. Sixty-five percent of all participants see homo- and hetero- sexuality as equal, whereby agreement with this statement was higher among women (74%) than among men (57%). Eighty interviews were conducted as part of this study, in which several participants expressed that they had never thought about this topic before. Over the course of these interviews, homo-sexuality was also described as not normal and a threat to the continued existence of the human species. However, the majority of those interviewed stated that the approach to homo-sexuality and homo-sexuals in Luxembourg had shifted towards greater tolerance; on the other hand, they also suggested that an increasing acceptance in official channels does not necessarily indicate that individuals hold the same opinions and stances. Many mentioned that personal contact with homo-sexual persons was helpful in dismantling existing stereotypes.

Seventy-five percent of participants could understand that there are people who do not feel comfortable in their gender role, and 52% have sympathy for those who wish to change their gender. Only three participants indicated that they knew a transgender individual. A few mentioned acquaintances that knew a transgender person, others had heard vaguely about the topic, and a few indicated that they had seen a related program on TV. One participant recalled a classmate who, according to her, had looked like a boy and might have become a boy later in life. She recounted uncertainty as to how to approach this girl turning into a boy at her school in the late 1990s. Generally, participants correlated transgender persons with homo-sexuality and/or associated them with procedures, such as breast augmentations. Many recounted that transgender persons had been subjects of ridicule and mockery due to an uncertainty as to how to approach their situation. Repeatedly, participants emphasized the importance of consulting psychologists and doctors at the first signs of possible transgender behavior. Apart from this tendency towards pathologizing transgender individuals, participants saw the need for tolerance while simultaneously reiterating that practicing it was easier in theory than in practice. Participants were also asked how they would approach a child who does not feel comfortable in their gendered body. The responses indicate inexperience, helplessness, and uncertainty. A few participants expressed the hope that such a case would turn out to be a phase: “It will hopefully just sort itself out”. Concerning adults, however, other
participants were of the opinion that it was imperative for those who want to change their gender to take action to that effect, since the discontent that could otherwise emerge might pose a threat to their health.

Transgender persons, just as homo-sexual persons, are still viewed as connected to fear and to misfortunate circumstances. The perceived threat of the topic seems to increase proportionally to the proximity to one’s own private life. Participants constructed a demarcation line between the genders when they reiterated in interviews that men had greater difficulty with this topic than women. However, it was also mentioned that mothers might have a harder time with a girl wanting to be a boy than with a case that was the other way around. Their own daughter wanting to leave the female body and role might be harder for a mother to comprehend since she herself might be content with her female role. This shows the relevance of an identification with one’s own gender—if it is questioned, irritations might arise. One participant claimed that a father might have greater difficulty than a mother if his homo-sexual son were to come out to him, as he is expected to fill a masculine role (IPSE, 2010).

Reports of Trans, Intersex, Non-binary, Queer, and Agender Persons Living in Luxembourg

Gender Equality Index 2019

As mentioned earlier, this Equality Index Report of the EIGE includes, for the first time, information on LGBTQI*, defined as lesbian, gay, bisexual, trans, queer, intersex and other non-dominant sexual orientations and social gender identities (EIGE, 2019a). A footnote in the report states: “In this report, we opted for using the acronym LGBTQI* as it represents the most inclusive umbrella term for people whose sexual orientation differs from hetero-normativity and whose gender identity falls outside binary categories”. The Equality Index Report’s chapter on “Health” includes specific information about the situation of LGBTQI* individuals: They still experience inequality in the healthcare system, minority stress, victimization, and discrimination, have more severe physical and psychological health issues and are more likely to be at risk of suicide (EIGE, 2019a). The European Union Agency for Fundamental Rights (FRA, 2014) reported increasing violence towards trans persons. Thirty-four percent of 6,579 participants stated that they had experienced physical or sexual violence—some repeatedly—within the last 12 months before the survey, conducted in 2012 (EIGE, 2019a).

Detailed data about the situation of trans women, trans men, female and male crossdressers, transgender, gender-variant, queer, and other persons can be found for the first time in the aforementioned report by the FRA (EIGE, 2019a) titled “Being Trans in the European Union: Comparative analysis of EU LGBT survey data”. Six thousand five hundred and seventy-nine individuals participated in the online study, 36 of them from Luxembourg (EIGE, 2019a). Some selected results: 33% of participants reported their gender expression being treated openly in the private sphere, 25% in the job environment, and 50% in the health sector (EIGE, 2019a). The question whether participants abstained from expressing their self-determined gender or avoided certain locations due to fear of insults, threats, or violence resulted in the following answers from participants aged 25-54: 20% of participants avoided expression of their self-determined gender, and 40% avoided certain spaces due to fear of discrimination (EIGE, 2019a). The question whether participants abstained from expressing their self-determined gender or avoided certain locations due to fear of insults, threats, or violence resulted in the following answers from participants aged 25-54: 20% of participants avoided expression of their self-determined gender, and 40% avoided certain spaces due to fear of discrimination (EIGE, 2019a). Seventeen percent of participants from Luxembourg stated that they had experienced infringements on their person within the last twelve months (EIGE, 2019a). When asked in what spaces they experienced discrimination, participants answered as follows: at home—8%, in their living environment—3%, at school or university—5%, in the workplace—3%, in cafés, restaurants, pubs, or
clubs—10%, in the car—1%, on public transport—9%, in sports clubs—0%, in other indoor spaces—2%, on the street, in parking lots or in other public spaces—46%, in a park or forest—3%, in LGBT clubs or at LGBT events—2% and in other spaces—2% (FRA, 2014). Participants from Luxembourg did not report any violence motivated by hatred. In schools, 29% of participants living in Luxembourg describe a positive atmosphere regarding LGBT topics, 43% cite an ambivalent atmosphere, and 29% a negative one (FRA, 2014). Fifty percent reported having experienced discrimination by school or university staff (FRA, 2014). Responses to the question whether they had personally experienced discrimination in the workplace were as follows for the participants from Luxembourg: never—33%, rarely—33%, and often—33%. No participant reported experiencing constant discrimination in the workplace (FRA, 2014).

ILGA Report 2019

In May 2019, ILGA-Europe (2019a) published the eighth annual report about the situation of lesbian, gay, bisexual, trans, and intersex persons in Europe. This report examines the period from January to December 2018. Each country is positioned on a scale from zero to 100%, wherein 0% stands for massive violations of human rights and discrimination, and 100% stands for adherence to human rights standards and complete equality. After Malta (90.4%) and Belgium (73.1%), Luxembourg achieved third place, scoring 70.4% (ILGA-Europ, 2019b). Indicators for this score include: Equality, private life, verbal discrimination, legal recognition, freedom of opinion and speech as well as right of asylum. Positive aspects that were emphasized in the report about Luxembourg were the guarantee for the right of freedom from bodily harm striven for by, for example, the campaign for education about intersex persons and the discrimination they experience, initiated on October 25th, 2018 by the Luxembourgian Ministry for Family and Integration. The campaign includes information and materials aimed at parents of intersex children, legal advice and references for counseling and information centers. The section on “Equality and Non-Discrimination” includes the first National Action Plan by the Ministry for Family and Integration, which will be discussed in more detail later. The chapter “Legal Recognition” makes mention of a law passed on August 10th, 2018, which permits individuals to change their first name and gender marker without proof of medical procedures, such as hormone therapy, operations, or psychiatric diagnoses (ILGA-Europe, 2019a).

Institutional Developments in Luxembourg—A Success Story?

June 1996 saw the foundation of the Rosa Lëtzebuerg Association (2019), which advocates for the rights of homo- and bi- sexual persons and now also explicitly includes trans, intersex, and queer persons in their activism. In 2002, the CIGALE (Centre d’Information Gay and Lesbien, Gay and Lesbian Information Cente, 2008) was founded as an initiative of the Rosa Lëtzebuerg Association aimed primarily at homo- and bi- sexual, but also at hetero-sexual persons who require help due to their sexual identity or orientation. CIGALE has also expanded its offering to people who deal with questions of gender. On November 28th, 2008, the CET (Centre pour l’égalité de traitement, Center for Equal Treatment) was founded by law, which is tasked with the prevention of all forms of discrimination, among others discrimination due to belonging to a certain ethnic group, gender, sexual orientation, or due to physical and/or psychological disabilities of a person or groups of persons (CET, 2020). In 2009, Transgender Luxembourg (ITGL, 2020), the first advocacy group specifically directed towards trans and intersex persons, was founded under the umbrella of Rosa Lëtzebuerg and CIGALE. Same-sex marriage has been legal in Luxembourg since 2015.
Interministerial Task Force LGBTI\footnote{The acronym LGBTI addresses lesbian, gay, bisexual, trans and intersex persons.} Under the Direction of the Luxembourgian Ministry for Family, Integration and the Greater Region

In July 2015, an interministerial task force for LGBTI topics was founded under the coordination of the Family Ministry, which has been managing national policies in the area of LGBTI since 2016. The task force consists of representatives from 10 ministries, NGOs, and other national commissions. The reason for the task force’s location within the Family Ministry was explained by a proximity of discriminatory experiences: “Even if the lived realities of lesbian, gay, bisexual, transgender and intersex persons differ from each other, these individuals often have to face a similar experience: discrimination” (Ministry for Family, Integration and the Greater Region, n.y.). In October 2017, a conference organized by the Ministry for Education, Children and Youth in cooperation with the Ministry for Family, Integration and the Greater Region with the topic “Development of strategies benefitting lesbian, gay, bisexual, trans and intersex persons through inclusive pedagogical methods in education” brought together 120 persons from the social and pedagogical sectors.

The current minister for Education, Children and Youth concluded that reflections and measures are necessary in order to reach a status in which differences and diversity are seen as normal, and to thus achieve a comprehensive societal integration of all persons and groups of persons.

On July 18th, 2018, the first “National Action Plan for the Promotion of Rights of Lesbian, Gay, Bisexual, Transgender and Intersex Persons” was passed (Ministry for Family, Integration and the Greater Region, 2018a). In eight chapters, the plan details the following points:

- the necessity of an inclusive and fair education for all learners;
- the guarantee for equality in the work environment;
- the guarantee for the best possible health care for every person;
- the protection of diverse forms of family;
- the admission and integration of refugees;
- the fight against discrimination, hate and violence in deeds and words;
- the guarantee for equal rights for transgender persons;
- the guarantee for equal rights for intersex persons.

In 2018, the interministerial task force was also granted the status of committee.

Also, in 2018, the Ministry for Family, Integration and the Greater Region launched the campaign “Female? Male? Intersex? Let’s be open” with the aim to inform about intersexuality and to prevent possible discrimination against intersex persons. This campaign is a concrete implementation of the guarantee for equal rights for intersex persons stipulated in chapter eight of the “National Action Plan for the Promotion of Rights of Lesbian, Gay, Bisexual, Transgender and Intersex Persons”. The ministerial campaign includes posters, flyers, informational materials, some of them specifically targeted at parents of intersex children, contact information for counseling centers, documentaries as well as useful links (Ministry for Family, Integration and the Greater Region, 2018b).

National Plan for the Promotion of Emotional and Sexual Health Under the Direction of the Ministry of Health

In 2013, the first National Action Plan was passed under the Direction of the Ministry of Health and supported by the Ministries of Education, Equal Opportunities and Family and Integration.

The acronym LGBTI addresses lesbian, gay, bisexual, trans and intersex persons.
definitions by the WHO from 2006, sexuality, sexual health, sexual rights, and sexual education (based on Sielert, 2008), which are included in the universal right to education, are connoted within the context of human rights and are defined as a “state of physical, emotional, spiritual and social wellbeing regarding sexuality” (Ministry of Health, 2013, p. 5). Thus, sexual health is more than the absence of illness, dysfunction and weakness (Ministry of Health, 2013). The National Action Plan understands sexuality as a central aspect of the human condition which includes “biological sex, gender identity, gender roles, sexual orientation, lust, eroticism, intimacy and reproduction” (Ministry of Health, 2013, p. 5). In reference to the WHO, the plan emphasizes that “not all of these dimensions [are] experienced or expressed at all times. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, ethical, legal, religious and spiritual factors” (Ministry of Health, 2013, p. 5), which can be understood as an intersectional approach (Knapp, 2005; Crenshaw, 1991). Another indication of intersectionality can be found in the connection made between sexual education and nutrition, exercise, conduitesaddictives (different forms of addictive behavior), the fight against violence and the prevention of mal-être (social impairments), individual and social skills, self-confidence, psychological and ecological questions, as well as with communication and mastery of a common language, which does not mean the linguistic aspect but the semantic one.11

The following are the underlying principles of the Action Plan:

- interdisciplinary and cross-departmental cooperation between parents, educators, teaching staff, health professionals and social workers;
- joining and continuing the diverse initiatives that first emerged in the 1980s;
- guaranteeing accessibility for everyone;
- initiating a dynamic process focused on further development.

The plan designates five action fields: (1) acting responsibly (bonne gouvernance) to reach these goals. To this end, a platform for better communication and a cooperative network should be established, which includes representatives from the sectors of sexuality, sexual health, sexual rights and sexual education as well as parents and teenagers. Another action field mentioned is (2) competence and continued acquisition of knowledge, as well as (3) measures for the promotion of self-determination and mutual respect; (4) advanced training and networking opportunities for professionals, training of multiplicators, guarantee of access to preferably sustainable measures for those affected; and (5) evaluation and reporting based on indicators.

CESAS

The first National Action Plan for the promotion of emotional and sexual health culminated in the foundation of a national center to this effect (CESAS, Centre national de référence pour la promotion de la santé affective et sexuelle [National Reference Center for the Promotion of Emotional and Sexual Health]) and a second multi-year plan which has been in effect since 2019. The task of the new institution CESAS is, together with all involved parties congregated in an Interministerial Committee, to work towards the realization of the goals and measures detailed in the current action plan and to make targeted use of new social media to this end. It will be attempted to integrate the topic into the education of future teaching staff, educators, social workers, medical professionals and those working in the healthcare field. Another goal is to determine possible existing, specific needs pertaining to vulnerable persons or groups of persons. The implementation process of

11 Assessment by the director of the Division de la médecinescolaire et de la santé des enfants et adolescents (Department for School Medicine and Health of Children and Young People), Ministry of Health Luxembourg, Dr. Bechara Georges Ziade.
the Action Plan, which is set to take several years, will be constantly systematically analyzed, and the results of this analysis will be used to determine future steps and measures.

The approach of the new Action Plan for the promotion of emotional and sexual health aims at the accessibility of measures and offerings for everyone—without specifically mentioning different genders—since the focus of the first National Action Plan was on children and teenagers. Nevertheless, the guide “Health, Love and Sexuality” (Ministry of Health, 2009), which informs the reader about homo- and bi-sexuality as well as hetero-sexuality, could be expanded to depict the actually existing gender variety by mentioning trans, intersex, non-binary, and agender persons. Counseling centers aimed at these individuals could be listed under “useful contact information”, and the “dictionary” could explain the words “trans”, “intersex”, “non-binary”, and “agender”. A revised edition of this guide with the title “Let’s talk about sex” is planned.

In 2012, a first interministerial committee was held under the direction of the Ministry of Health and in cooperation with the Ministries of Family, Education and Equal Opportunities as well as the Red Cross, Planning familial and CIGALE. The result of this committee was the first National Action Plan for the Promotion of Emotional and Sexual Health. An important aspect in bringing about this development was the accessibility of systematically collected data about Luxembourg both on the European (EU) and the international (OECD) level. While the first National Action Plan’s aim was mainly to raise the numbers of multiplicators in the field and to de-taboo the topic of sexuality, the second plan added the aspect of emotional health to that of sexual health. In addition, the plan strives for a holistic perspective in regards to emotional and sexual health.

In order to break taboos, systematic work with parents is a necessity. This is not an easy task especially in Luxembourg, where the private sphere and particularly sexual topics are seen as intensely personal and not suited for public discourse. A staff member of CESAS comments: “Talking about gender is scary. Talking about sexuality is even scarier”.

In 2018, a survey was sent to various partner institutions and organizations. Forty positive responses signaled a willingness to work together in a network as well as the necessity of systematic training that address early childhood in particular. CESAS was founded in the same year with the goal of sensitize the public for the topic of emotional and sexual health as well as to orient informational and practical offerings towards all those affected and to also address individuals with disabilities, persons who are migrating, people who are threatened or affected by violence as well as all gender groups. Apart from those working in the socio-educational sector there are many medical professionals cooperating with CESAS and the network, particularly family physicians and gynecologists, who are mainly seeking communication and answers to questions about intersex and trans topics. The situation of non-binary genders is being addressed. The network, which is documented in a brochure, has its own website noting 12 NGOs active in the area of LGBTI* topics. This allows the conclusion that the goals and activities for the promotion of emotional and sexual health take into consideration persons of all genders. The aim is a systematic data acquisition in the area of emotional and sexual health, but also about the healthcare system in Luxembourg in general; this could be accomplished by a future observatory (observatoire).

12 Emilie Kaiser, staff member of CESAS, in conversation with the author on October 24th, 2019.
Second Summary

Since the 1970s, Luxembourg has seen an increase in the establishment of organizations which advocate for women’s equality in the workplace, access to education, political participation as well as in involvement in societal governance and developmental processes. Thus, traditional roles and responsibilities of women were questioned, rejected, and replaced by self-determined alternatives that promote development. Hetero-normativity began to crumble, homoerotic, and homo-social relationship models were no longer regarded as deviant or even sick, and the variety of non-binary genders has been gaining visibility and losing its taboo status in Luxembourg since the beginning of the 21st century. This development can be traced in the 27th report of the Luxembourgian Ethics Committee which questions the automatic, binary assignment of gender to newborns, recommends the expungement of gender markers in laws, regulations and official documents and suggests specific measures for a transition period which would guarantee protection from discrimination and unrestricted development of personality for trans, intersex and all non-binary persons (CNE, 2017).

Sexual Sciences in Luxembourg in Medicine, University Research and Teaching

Medicine

At the end of 2019, there were ten sexologists practicing in Luxembourg. The Centre Hospitalier Luxembourg (CHL, 2020) has a dedicated informational section on its website. The site offers counseling for promoting sexual health, treating sexual dysfunctions and professional support and information in questions of satisfactory sexuality. It addresses women and men, individually or as couples. So far, trans, intersex, non-binary, or queer persons are not explicitly addressed.

University Research and Teaching

Up to this time, students do not have the option of studying sexual sciences at the university, which was founded in 2003. Additionally, despite several efforts, a gender studies course does not yet exist. The Institute for Gender Studies, Diversity and Migration was dissolved in January 2015, and the subsequently founded Gender Expert Group—situated within the office of the dean of the Faculty of Humanities, Education and Social Sciences—has been dissolved as of January 2020. There are occasional lectures and seminars that make an explicit connection to sexuality and/or gender; courses in clinical and health psychology examine gender differences in body perception and body image in children, teenagers and adults, and there are sponsored Ph.D. theses on the topic of “Internet-based Emotional Regulation Training and its Effects on Sexual Health”. A seminar on practical areas of psychology offers a module on “sexual psychology”.

In cooperation with CESAS, the Department for Social Work conducted a research and documentation project between 2018 and 2019 examining professional practices in the area of emotional and sexual health. The project analyzed and documented concrete practices from a socio-pedagogical perspective in order to develop appropriate measures for working on the topic of emotional and sexual health with children and teenagers. To this end, interviews with practitioners were conducted, which show that professionals report a great range of experiences in the area of emotional and sexual health. Reports mentioned different forms of bullying and the so-called “trying out” (“doctor games”) in different spaces such as recreation rooms and bathrooms. The connected reactions in professional practice were described with terms, such as “prevent”,

13 Original: “Projet de recherche/documenta tion-action-formation sur les pratiques professionnelles en lien avec la santé sexuelle et affective”
“forbid”, “punish”, “control”, and “address”. It also became apparent that the professionals’ own relationship with their sexuality played an important role in respect to their assessment of and reaction to certain situations, which oftentimes operate with terms stemming from an adult understanding of the situation, for example, when stating that a six-year-old child is “masturbating”. The results of the project were presented at the end of 2019 as part of a colloquium and have influenced the brochure “La santé affective et sexuelle des enfants et des adolescents en milieu institutionnel. Études de cas et suggestions de pratiques professionnelles” published by CESAS (2019).

As part of the project TRASE (sexual education for persons with disabilities), which is co-financed by the European Union through the Erasmus+ program, experts from Belgium, Luxembourg, Great Britain, German, Austria, Portugal, and Lithuania have developed, among others, a training course, e-learning modules, and other offers. They can be found on the project’s website, which supports five languages. The University of Luxembourg is responsible for the TRASE Word Bank, which “[can] be used as supplementation for sexual education as well as for independent education” (TRASE, 2017, p. 5). The TRASE Word Bank is aimed at caretakers, parents, educators and individuals with learning difficulties or intellectual disabilities. It is best suited for those who can read or are able to read with assistance and possess little sexually relevant knowledge. Nine chapters address the topics of “sexualized body parts and basic functions”; “gendered bodies and gender identities”; “sexual orientations”; “strangers, acquaintances, friendships and relationships”; “sexual conventions and lifestyles”; “sex and masturbation”; “pregnancy, parenthood and contraception”; “safer sex”, and “consent and abuse” in easily understandable language supported by graphical depictions.

In regards to non-binary genders, the research project “Gender Assignment in Question [GAIQ]”, financed by the university, has been established, in which trans and intersex persons have the opportunity to speak on their experiences in relation to their gender. The study is aimed towards not only adults, but also teenagers and children as well as their parents. The results are expected to be published in October 2020. Between 2010 and 2015, there existed an extensive cooperation between the University and the Advocacy Group Intersex Transgender Luxembourg (ITGL). Numerous conferences were organized in cooperation with, for example, CID-femmes (Centre d’Information et de Documentation des femmes “ThersBodé”) and the equality delegate of the city of Esch. In October 2012, a week-long interdisciplinary and international congress with 200 participants was held under the patronage of the Minister of Health at the time. The congress resulted in the publication *Normed Children. Effects of Gender and Sex Related Normativity on Childhood and Adolescence*, published by Erik Schneider and Christel Baltes-Löhr in 2014, which has been available in its third and unchanged edition since 2018 and was also translated into English the same year (Schneider & Baltes-Löhr, 2018). Since 2019, the University of Luxembourg has been establishing a new line of research that addresses the question of the life experiences trans, intersex, queer, non-binary, and agender persons have in the context of asylum and migration, and which policies affect these experiences in what ways. A cooperation with the EU project SOGICA (2020)—*Sexual Orientation and Gender Identity Claims of Asylum: A European human rights challenge*—will be developed in the coming years. Since the winter semester of 2017/18 the University has been offering an undergraduate seminar on the topic of “gender variability”, which has resonated well with the student body and draws around 50 attendees each semester. It addresses an interdisciplinary theoretical study of sociocultural influences on gender identity and expression.
framework of gender and offers a historical and intercultural perspective on the variety of genders existing worldwide. In the summer semester of 2020, a second interdisciplinary undergraduate seminar will be offered, which will examine gender variability from literary, historical, and sociological perspectives.

In October 2019, a student initiative for LGBTQI issues was founded at the University of Luxembourg, and it is planned to establish a group of researchers, students, and staff members in cooperation with the University’s equality delegate in order to define procedures which protect persons who want to change their gender from discrimination and exclusion at the University. The group will also establish rules around language and expression which will help address individuals of all genders and go beyond the existing practice of binarity, for example, when applying as a student. In addition, the University is a member of the Gender Studies Association founded in 2010 and is an active part of the commission on Trans* Inter* Studies (Fachgesellschaft Geschlechterstudien, 2018).

Luxembourg in the Year 2050

A staff member of the Ministry for Family, Integration and the Greater Region, who has been an essential part of the coordination of the Interministerial Committees for LGBTI, said the following about her expectations for Luxembourg in the next 30 years:

I am hoping that we won’t need a National Action Plan for LGBTI Persons in 2050, or even sooner. I’d actually like it best if we had already achieved equality for all persons in 2030, regardless of their sexual orientation, their gender identity or their biological gender markers.16

The director of the Department for School Medicine and Health of Children and Young People of the Luxembourgian Ministry of Health emphasized for the area of emotional and sexual health: “We have to keep turning back to those organizations that have not yet participated in the networks and keep developing measures that address all genders, all the while knowing that there is ‘No one measure [that] fits all’”.17 She continues: “Respect and appreciation have to remain the basis for our actions, because only people who are appreciated are able to fully develop their emotional and sexual health”.18 A CESAS staff member’s hope for 2050 is “that no one is afraid to talk about gender and sexuality, that there is empirical data, that the ‘Observatoire Santé’ has commenced its work and that the existing network has been stabilized and further developed”.19

In summary, it can be surmised that in 2050, sexual education in its function as education on variability and on respect for variability should be just as taken-for-granted as learning to multiply in school—and sexual and gender studies should also be an established part of university research and teaching. In 2050, gender variance will be seen as the “most normal thing in the world” in Luxembourg and will thus be de-dramatized. Sexualized violence against humans will be a thing of the past, and violations of human dignity or physical, psychological, social and sexual integrity will not be regarded as minor offenses, but will be persecuted by all means available to a constitutional democracy, and in the best case, will be avoided through successful prevention.

In 2050, historically interested people will be scratching their heads at how the path towards “Normality of Recognition of Gender Variability” took turns and bends, and sometimes even a few steps back, before reaching a self-evident state of acceptance of variability in 2050, since in 2020 we can still find both: increasing

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16 Romaine Boever, in conversation with the author on October 15th, 2019.
17 Chantal Brochmann and Dr. Bechara Georges Ziade in conversation with the author on October 23rd, 2019.
18 Ibid.
19 Emilie Kaiser in conversation with the author on October 24th, 2019.
social acceptance and ongoing discrimination, physical and psychological violence and violation of those seen as “other”.

Thus, another important perspective for 2050 is to ensure, not only in Luxembourg, but also elsewhere, that it will not come to another polarization within the variability of genders. It should be prevented that femininity and masculinity on one side are contraposed with all so-called other genders on the other side. New polarities between single trans, intersex, non-binary, and agender persons and/or groups of persons are hardly helpful when it comes to mutual acceptance and recognition. Here, the figure of the continuum might offer enough space and a path towards this goal, since it connects sexuality and psyche with all conceivable, known and as of yet unknown and unnamed expressions and interconnections of gender. The figure of the continuum also conceives of connotations between psyche, sexuality, and the variability of physicalities in all their dynamics and different variations in such a way that it is able to surmount still existing binary stereotypes, and thus does not see femininity and masculinity as cornerstones of a gender order between which variety exists. Instead, in 2050, the figure of the continuum will be able to frame diverse facets of so-called women and men as self-evident as well.

**Conclusion**

Referring back to the title of this article, *Three Steps Forward and, If Possible, Not a Single Step Back*, the situation in Luxembourg has seen a dynamic development in regards to societal discourses on sexuality since the 1970s. An increasing number of women protested their sexual oppression by men and demanded the right to self-determination in regards to sexuality. Women began exposing the power structure of “man is in charge of woman” inherent in the heteronormative setting of “man desires woman”, advocated against violence even within a marriage, fought for self-determination in pregnancy and birth and kept discovering their sexual desires. In tandem with this development, Luxembourg increasingly did away with the taboo around homosocial and homoerotic structures of desire: Just as in the women’s movement, NGOs were founded, counseling offered, law initiatives started and – at least partially – succeeded. Together with the women’s movement, the gay and lesbian movement contributed to the pluralization of the sexual discourse in Luxembourg, which nonetheless remained situated within the binary setting of “female-male”. Since the late 2000s this heteronormative and heterosexual binarity has been challenged, since trans, intersex, non-binary, queer and agender persons have been progressively regarded as equal to female and male persons not only in the realm of NGOs. The variety of lived realities became apparent not only through hetero- and homosexuality, but also through bisexuality and asexuality. In addition, it has been emphasized more and more that there are no causal relations between a person’s body and their actually lived sexuality, that there are no causal automatisms between sexuality and experienced gender, and neither between sexuality and social gender. Construction processes based on such automatisms, including those of sexuality, restrict self-determination and free development and have to be understood as an expression of power and domination as long as not every person can determine their gender and live their sexuality as they want – always under the condition of freedom from violence and from mechanisms of oppression.

The figure of the Continuum is helpful in determining actually lived diversity and might constitute a step forward in that it makes clear that sexuality, as well as the other three dimensions of gender – physical, emotional and social – is situated within a Continuum, and that all four dimension interact with one another, influence one another, and thus are malleable and alterable.
How exactly these interactions between the dimensions happen, which sexual diversity and lived gender diversity can be identified in the lived realities over the course of a human life, but also in comparison to other cultures and time periods, has yet to be systematically studied. However, there are still steps to be taken in politics and public discourse in order to achieve complete normalization of diverse genders and thus also diverse forms of sexuality. To reduce sexuality (back) to heterosexuality is expressed predominantly in conservative policies, when they for example view sexual education beyond heteronormative settings as a danger to the development of children. Such reductionism of sexuality and gender represent more than one step backwards for the social discourse, politics, research and for every day life. Thus, it is only appropriate to appreciate every movement, initiative, measure, big and small step, that guarantees self-determination for individuals and groups, and that afford spaces for diversity to develop and be recognized. This includes ensuring that, for example, prohibitions against same-sex love stay in the past, just as so-called gender-establishing surgeries still being practiced on infants and children, who are being “operated into” binarity with these procedures which are not medically necessary. The acceptance of more than two genders is accompanied by the acceptance of more than one form of sexuality – and surely constitutes three big steps forward in the direction of democracy, equality and self-determination.

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