

Public data gathering on LGBTI+ people in Nordic countries



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Introduction

The aim of this project was to support and develop public data gathering on LGBTI+ people in Nordic countries by organizing a research conference, advancing networking between researchers and experts on this field and preparing and publishing a report that sums up the background information collected for the conference as well as the main topics and results of the event.

It is difficult to advance equality and anti-discrimination measures in the areas of gender and sexuality diversity and develop LGBTI+ people's human right situation and living conditions if there is not enough knowledge and research to do that. There is more public and publicly funded research and data gathering on LGBTI+ people in Nordic countries than before, but often this data is not analysed fully. There is also a need to develop this kind of data gathering and analysis, and Nordic co-operation would be vital to learn the best ways to do this. Nordic data gathering and research organizations are facing similar problems in trying to find best methods to collect data on LGBTI+ people.

To advance the Nordic co-operation in data gathering on LGBTI+ people, the Finnish Institute for Health and Welfare (THL) organized a two-day seminar in Helsinki on October 21st–22nd 2025. The seminar was funded by the Nordic Council of Minister, and the organizing team consisted of research professor Jaana Suvisaari and planning officer Tina Stenberg from THL and adjunct professor Jukka Lehtonen from the University of Helsinki. This seminar included presentations, panel and group discussions and information sharing on the topics related to data gathering on LGBTI+ people, including ethical, methodological and financial issues. The participants represented national statistical and research organizations relevant in the field of LGBTI+ data gathering, universities and individual researchers, ministries and Nordic civil society organizations. This publication reports the presentations and discussions of the seminar and provides information on Nordic general population surveys that have LGBTI+ relevant questions in their questionnaires.

1. Plenary session: Opportunities and challenges in public data gathering on LGBTI+ people in the Nordic countries

In recent years, more data than before has been collected on LGBTI+ people in the Nordic region. This creates new opportunities, such as developing survey and register data that better reflects diversity and strengthening collaboration between research institutions, non-governmental organizations and public authorities.

At the same time, there are challenges to address, including resistance from anti-gender movements, binary and heteronormative assumptions in questionnaires, and methodological and ethical questions.

Four keynote presentations from the seminar were streamed and were freely available for viewing by participants outside the seminar. The keynote session was chaired by Hanna Onwen-Huma Ministerial Adviser, Ministry for Social Affairs and Health, Finland.

1.1. Troubling histories and current pressures of public data gathering on LGBTI+ people

Jukka Lehtonen, Professor Adjunct (Title of docent) in Sociology of Education, University of Helsinki

Jukka Lehtonen spoke about the history of LGBTIQ+ related data gathering and its current pressures. He summarized the troubles in and possibilities of public data gathering as follows:

Troubles

- Lack of acknowledgement of sexuality and gender diversity
- Gender binary thinking (woman-man, female-male)
- Cis- and gender-normativity:
sex=gender, biological
sex=legal gender=gender
identity=gender expression
- Lack of focus on intersexuality or variations of sex characteristics
- Heteronormative assumptions (partner in relationship, agent of sexual harassment)
- Lack of acknowledgement of intersections of differences
- Problematic question formulations and terminology
- Lack of relevant questions and themes for LGBTIQ+ people
- Lack of analysis and reporting from LGBTIQ+/sexuality and gender diversity and intersectional perspectives
- Heteronormative and problematic interpretations in reporting

Possibilities

- Public funding, on-going data gathering, systematic analysis and reporting: possibilities to develop the expertise and methodologies
- Possibilities to gather large data (sometimes allows analysis on intersections and various groups)
- Possibilities to generalize (large data, based on statistical register, possibilities to check response-rate)
- Possibilities to compare (cis vs. trans, non-heterosexual vs heterosexual)
- Possibilities to analyse change (same questions from year to year)
- Scientific and political acceptance, seen as more neutral information than the one produced by NGOs or individual academic researchers
- Possibilities to work together with NGOs, academics and neighbour organizations (inter)nationally

Jukka Lehtonen concluded his presentation with recommendations:

1. It is vital to gather data on LGBTIQ+ people to be able to get knowledge and information on their social situation, wellbeing and experiences of discrimination. This is needed to change their situation and advance equality in society. This kind of data gathering is the responsibility of the state, and state should demand this from all population surveys and also give resources

for the analysis and reporting of the data from the viewpoints of gender and sexuality diversity.

2. It is a question of research quality and ethics that all respondents can take part to the population surveys without needing to lie about their gender and sexuality or to be misinterpreted in the analysis due to heteronormative survey questions or analysis. In the formulation of the questions on sexualities or gender identities of respondents and when abolishing heteronormative aspects from the questionnaires, it might be helpful to organize target group discussions, also with LGBTIQ+ people, and feedback opportunities to test and design the best possible questions and methods.
3. It is not enough to gather data. Often the biggest problem with the valuable data gathered through general population surveys and other public data gathering on gender and sexuality diversity is that it is not analysed and reported. Or that the analysis and interpretation of results are not carefully done and that the results are reported only marginally or in problematic ways. It will be vital to study both local and international research and also study qualitative research on the topics of the analysis to get a deeper idea on the context and explanation for the results. It would be relevant to discuss the results and the analysis related to sexuality and gender diversity with LGBTIQ+ people and activists as well as other key actors in society. This could raise the quality of the analysis and reporting, which would make the benefits for society and its citizens more likely.

1.2. Anti-gender politics and influencing: A threat to evidence based, interdisciplinary research on LGBTIQ+ people

Julian Honkasalo, Ph.D., professor adjunct, Research Council of Finland senior research scholar at the University of Helsinki

Julian Honkasalo spoke about anti-gender politics and influencing and the threat it creates to the interdisciplinary research on LGBTIQ+ people.

The framing of gender mainstreaming as "gender-ideology"

"Anti-gender" mobilization is widely identified global phenomenon. "Anti-gender" means different kinds of oppositional movements that target equality and diversity. Anti-gender mobilizing targets evidence-based scientific research and confuses gender self-determination as a human right with personal choice. A

related pseudo-concept is "Gender ideology", which is framed as propaganda and indoctrination, is paralleled with extremism, and is used to create moral panic.

The targets of anti-gender mobilization in the public sector include academic programs and research funding of gender studies, migration studies, and intersectionality. Also, DEI (diversity, equality, inclusion) consulting in the private sector is under attack.

Using discourses of democratic grassroots mobilization and participation, "anti-gender" actors often depict and present themselves as defenders of freedom and democracy. "Gender" is a "symbolic glue" that ties together organizations and agents with contradicting interests, which has also been called "Gender populism".

How does anti-gender influencing operate

Examples include

- False arguments, misrepresentation of gender equality, reproductive justice, The Istanbul Convention, feminism in general.
- Mimicking and mirroring.
- Defaming, smear campaigns, making academic gender studies scholars seem as not credible (ad hominem), as pseudo-science.
- Threats and intimidation, harassment, lawsuits.
- Accusations of "gender ideology", indoctrination, etc.
- Targeting also research funding agencies.
- Doxxing (distribution of personal information online without permission and with the intent to harm).

AI produces new challenges by using deep fake technology in addition to bot factories and trolling. In anti-gender influencing, gender equality, diversity and human rights is mirrored back as:

- Gender-ideology, genderism, wokeism.
- Unscientific dogma, indoctrination.
- Elitism and moral corruption.
- Extremism, "gone too far", corrupting and endangering children (compare to older, historical forms of gay panic) or the history of "hereticism".
- Gender ideology → trans ideology, violent extremism, terrorism (Russia, USA).

Anti-trans-medicine medical and litigation groups are also (mis)using Nordic research in their claims.

Key takeaways

1. We need much more focus on tracing techniques of legal, but very harmful forms of foreign influence on Nordic values and the scientific facts, rather than simply focusing on the concept of "hate speech", which is a legal grey area problem and puts us directly into a "free speech vs. hate speech" debate.
2. More research on effective data collection for ways of preventing and countering anti-trans medical expertise and litigation as well as their connection to much broader anti-gender politics and push-back.
3. Broader definition of "violence" as an analytical and theoretical tool. Compare to research on domestic violence/gender-based violence.
4. Strong Nordic collaboration: Sharing of knowledge, best practices, protection of equality and diversity policy and implementation.

1.3. Nordic challenge: Youth and elderly participation in public data gathering on LGBTI+ people

Janne Bromseth, Ph.D., senior researcher from the Eastern Norway Research Institute at the University of Inland Norway

Janne Bromseth spoke about youth and elderly participation in public data gathering on LGBTI+ people.

Age and generation are intertwined in relation to gender and sexuality. People have grown up under different societal conditions, which has affected their basic human rights and exposure to negative attitudes, discrimination and violence. Regardless of the generation, they may have come out in different times and ages. Despite its importance, there is far less research on older LGBTI-people's health and life conditions than there are on young people.

The presentation focused on studies on elderly LGBTI+ people based on a recent literature review of studies conducted in Nordic countries. Of the 38 identified publications, the majority were from Sweden. Norway and Denmark were also well represented, while there were only two publications from Finland, one from Åland, and none from Iceland, The Faroe Islands or Greenland.

The themes of the studies included:

- Experiences of discrimination during their lifetime
- Health
 - Mental and physical well-being: general patterns
 - Sexual health
 - Ageing with HIV
- Encounters with healthcare and social care
 - Previous experiences of healthcare: (hetero)normativity and ignorance
 - Apprehensions about and experiences of eldercare
- Relationships, networks and LGBTI contexts
 - LGBTI relationships: general patterns
 - Chosen (and not chosen) families
 - LGBTI contexts and community

Older LGBTIQ+ adults have often been hard to reach and obtain sufficient sample size using probability sampling. This has sometimes been dealt with by a problematic solution of combining diverse groups of sexual orientation and gender identity as one group. As an alternative, it is possible to combine several survey rounds to achieve sufficient sample size.

Based on the review, the following recommendations were made:

- Include questions on sexuality and – in particular – gender identity in public health surveys
- Must be supplemented with targeted studies where LGBTIQ+-older adults are recruited specifically
- More knowledge on subgroups and differences among older LGBTIQ+ people is needed (e.g., intersex, POC and those with migration experiences, people living with HIV), and how for example geographical situatedness, class, health and community participation matters for experiences of ageing
- Research is needed on experiences in care services for older people among LGBTIQ+ people
- More research from Finland, Iceland, the Faroe Islands, Greenland and Åland is needed
- Creative methodological efforts: Learn from each other and from LGBTIQ+ people on how to target

1.4. Transgender lives at the population level – evidence from Danish administrative data

Jane Greve, Professor and deputy head, The Danish Center for Social Science Research (VIVE)

Jane Greve presented a study on trans individuals' socioeconomic situation that compared three methods of identifying the population. The 'self-identified' trans population (N=197) was based on questions on gender identity in the 2020 wave of the Survey of Health, Impairment and Living Conditions (SHILD). The 'medical' trans population (N=1,594) was based on all health care visits with gender identity-related diagnostic codes. The 'legal' trans population (N=1,995) was based on legal gender recognition.

Of the 'medical' trans population, 54.5% belonged to the 'legal' trans population, while 41.0% of people in the 'legal' trans population also belonged to the 'medical' trans population. Of the 'self-identified' trans population, 3.9% had medical visits with gender identity-related diagnostic codes and 5.7% belonged to the 'legal' trans population.

Trans people belonging to the 'medical' and 'legal' groups were considerably younger than the self-identified population and the general population. Their level of education was also lower.

Trans people belonging to the 'medical' and 'legal' groups were less often employed than the self-identified population and the general population, and their mean annual income was lower. The self-identified survey population showed no major socioeconomic differences with the other general population participants.

Therefore, relying only on survey measures of trans identity may underestimate disadvantages experienced by trans people who have made legal transition and/or attended medical services.

2. LGBTI-related reporting in official statistics

This session presented the state of the art and future directions of LGBTI-related reporting in official statistics. The session was chaired by Marjut Pietiläinen, Senior Researcher, Statistics Finland.

2.1. Eurostat equality and non-discrimination statistics task force:

A focus on SOGIESC and measures of discrimination

Eugenia de Rosa, Seconded National Expert in Equality and Non-Discrimination Statistics at Eurostat, European Commission

The session was started by a presentation on the work of Eurostat equality and non-discrimination statistics task force (TF EQUAL) by Eugenia de Rosa, Seconded National Expert in Equality and Non-Discrimination Statistics at Eurostat, European Commission. The presentation focused on the work of Eurostat's Equality and Non-Discrimination Statistics Task Force (TF EQUAL). Initially, an overview of EU policy and legal frameworks in this area was provided. This was followed by a discussion on the primary tasks of the task force, which was established in December 2023 with the main aim to enhance equality and discrimination statistics across the European Union.

TF EQUAL focuses on groups at risk of discrimination and experience of discrimination – considering the six protected characteristics (sex, age, disability, ethnic or racial origin, religion or belief, sexual orientation, extended to encompass all SOGIESC dimensions) and their intersectional dimension - within various areas of life or domains (such as employment, education, housing, healthcare, access to public services, social security, and safety, as highlighted in key EU anti-discrimination legislation and policies).

Eurostat provided an overview of the current status of SOGIESC data at the EU level. In terms of gender identity, expression, variations of sex characteristics, and sexual orientation, there is a lack of harmonized operational definitions and standards, both within the European Statistical System or internationally. However, some initiatives, like those by UNECE, the Subgroup on Equality Data, and Statistics Ireland, are underway. A similar situation exists for discrimination data, although the UN Praia Group's core questionnaire is available. Further data sources

include FRA, which conducts targeted surveys of groups at risk of discrimination, along with EIGE, Eurofound, Eurobarometer, and the European Social Survey, providing additional statistics on discrimination, prejudices, stereotypes, and attitudes.

Eurostat currently lacks data on the size of the LGBTIQ+ population and the overall prevalence of discrimination categorized by groups, reasons for discrimination, and life domains. Nonetheless, there are efforts to collect data on self-reported experiences of discrimination in specific domains. Various modules have already been incorporated into EU surveys, such as discrimination at work in the EU-LFS (2021), encountering hostile or degrading online messages in the EU-ICT survey (2023), discrimination in access to services in the EU-SILC (2024). In addition, the next edition of EU-GBV will feature optional questions on gender-based hate speech.

At national level, some National Statistical Institutes (NSIs) conduct population discrimination surveys including reasons of discrimination related to sexual orientation and gender identity and/or self-identification questions on sexual orientation and gender identity. There are a few cases of LGBTIQ+ dedicated surveys which provide an in-depth analysis linking outcome indicators with self-reported experiences, violence, prejudices, stereotypes, and social attitudes.

To gain deeper insights into NSIs practices across the EU, TF EQUAL mapped and analysed current measurement practices covering sex, gender identity, and related concepts during 2024–2025. Findings^[1] indicate that gender identity has been included in national surveys in 9 out of 20 member states, sexual orientation in 9 out of 20, and experiences of discrimination in 12 out of 20. Different measures and indicators have been used.

To gain deeper insights into the practices of National Statistical Institutes (NSIs) across the EU, Task Force EQUAL conducted a mapping and analysis of current measurement practices related to sex, gender identity, and discrimination during the period of 2024–2025. The findings reveal that gender identity has been incorporated into national surveys in 9 out of 20 member states, while sexual orientation is included in 9 out of 20, and experiences of discrimination are reported in 12 out of 20. These studies utilize a variety of measures and indicators. Two main measurement approaches for measuring experience of discrimination have been mainly used: By an umbrella question (e.g., 'have you ever been discriminated against?') or via situation or incident-based approach (more factual), often used for harassment, violence, bullying, and hate speech.

Although not exhaustive, these findings offer critical insights into the current landscape and serve as a foundation for future harmonization efforts. Ongoing consultations between the TF EQUAL and NSIs and civil society organizations focus

1. Based on the stocktaking organised in the frame of TF EQUAL

on recommendations for creating more harmonised and inclusive measurement methods and reference questions addressing currently underserved or partially covered aspects in social statistics, such as gender identity, sexual orientation, and discrimination experiences.

These recommendations will also address methodological aspects, including sampling and estimation techniques, strategies to maximize response rates and minimize measurement errors, active engagement with civil society organizations, community involvement, and addressing main user needs in alignment with the EU-LGBTIQ+ strategy. Bridging data gaps necessitates collaboration with other statistical producers, further methodological work, pilot studies, and voluntary data collection initiatives.

2.2. LGBTI-related reporting in Finland

Marjut Pietiläinen, Senior Researcher, Statistics Finland

In Finland, the information on sex is obtained from the Population Information System maintained by the Digital and Population Data Services Agency. Only male or female can be entered as gender in the Population Information System. The gender entry can be changed upon application (Act on Legal Recognition of Gender 295/2023). In 2024, almost a thousand (987) applications for gender confirmation were submitted to the Digital and Population Data Services Agency, and more than 700 positive decisions were made.

Registered partnership became possible in 2002. After the Equal Marriage Act entered into force on 1 March 2017, new registered couples could no longer be formed. In 2024, there were 9,356 persons living in a registered partnership or a marriage of a same-sex couple (living in a same dwelling).

The common children of rainbow families became visible in statistics when adoption within the family became possible in a registered partnership in September 2009. Between 2009 and 2023, a total of 1,262 children were adopted into families with same-sex parents within the family. The Maternity Act, which entered into force in 2019, made it possible to confirm maternity without adoption within the family. As a result, inter-family adoptions in families of same-sex married couples and registered couples have decreased.

Legislation has had a major impact on the availability of data and the visibility of the LGBTI+ population in statistics. However, a lot remains hidden.

Population statistics that include information on LGBTI+ population are population structure, marital status, changes in marital status, families, and adoptions. However, information is mainly limited to those who have formalized their relationship, and their families. No information is available on gender identity, sexual orientation, or gender expression.

LGBTI+ related reporting in Finnish survey data

Surveys usually use gender information in the register, but some surveys include self-identified questions on gender, for example the Gender Equality Barometer, Healthy Finland Survey and School Health Promotion Study.

The School Health Promotion Study includes questions on belonging to gender and sexual minorities and information on wellbeing of these minorities (The Finnish Institute for Health and Welfare). Belonging to a sexual minority is included e.g., in the Gender Equality Barometer, the Quality of Work Life Survey, and the EU Gender-based Violence Survey (GBV). In addition, several surveys provide information on discrimination observations, experiences, perceptions or attitudes based on sexual orientation (e.g., EU SILC, Quality of Work Life Survey, Gender Equality Barometer, Eurobarometer, EU LGBTI survey, The Fundamental Rights Barometer). In The Fundamental Rights Barometer 2021, respondents' attitudes towards working life were investigated by asking how acceptable it is: Not to hire a transgender person or a trans person.

In surveys, there are more possibilities for the visibility of LGBTI+ people than in register-based statistics, although there are also limitations, like sample sizes, accessibility, trust, intersectional dimensions etc.

While the visibility of LGBTI+ people in register-based statistics and surveys has improved in recent years, many aspects remain largely hidden, including intersectionality. Cooperation is needed at national and international level to improve the visibility of LGBTI+ people in statistics.

2.3. LGBTI-related reporting in Norway

Hanna Stangebye Arnesen, Coordinator for equality related statistics, Statistics Norway, SSB

Statistics Norway reports statistics on quality of life based on the national Quality of life survey. The indicators reported by sexual orientation in Statbank Norway include satisfaction with various areas of life, experience of meaning and mastery, and presence of positive and negative emotions. While the indicators in Statbank Norway can be examined according to three sexual orientation categories (heterosexual, non-heterosexual, don't know or don't want to answer), the survey itself contains more answering options (heterosexual, homosexual, lesbian, bisexual, pansexual, queer, asexual, fluid, other sexual orientation, don't know, prefer not to answer). This revision was done based on a project which included focus group interviews; the results of this project were published as a guide for questions on sexual orientation, gender identity, gender expression, and sex characteristics in quantitative surveys.

According to the Quality of life survey, non-heterosexual people experience poorer living conditions than heterosexual people. Fewer are employed, financial difficulties are more common, and more report poor housing conditions and poor health. However, the share experiencing living condition problems varies between different groups of non-heterosexual people.

Those most exposed to negative life events are individuals with low levels of education, recipients of social assistance, certain groups within the LGBTQ+ population, and people with disabilities.

Non-heterosexual individuals report lower life satisfaction than heterosexuals. They also experience more negative emotions and report a lower sense of meaning and engagement. Differences in life quality can partly be explained by variations in age, education, employment status, income, and relationship status.

Currently, a revision of the survey questionnaire is ongoing to identify trans persons.

2.4. LGBTQI-related reporting in Sweden

Malte Sundberg, LGBTQI Coordinator, The National Board of Health and Welfare

In 2014, the Swedish government presented a strategy for equal rights and opportunities regardless of sexual orientation, gender identity or gender expression. The strategy aims at long-term and results-oriented work, partly to increase knowledge about the situation of LGBTQ people in Sweden, and partly to create the conditions for equal treatment of the group. One of the focus areas identified in the strategy is health, health care and social services. The Public Health Agency and the National Board of Health and Welfare have been assigned by the government to be strategic authorities for this focus area.

The presentation illustrated reporting in Sweden using two examples. The first example was mental health among people in same-sex marriages. This was a study based on linkage of several national registers. The results showed that there was an increased incidence of morbidity, mental disorders and risky use of substances or addiction among people in same-sex marriages compared to people in opposite-sex marriages. The limitation in the work is that it is not representative of all same-sex couples or all LGBTQ people.

The second example was gender affirming health care in Sweden. Since 2024, most of gender affirming health care in Sweden is Highly Specialized Care, and the clinics providing it report annually to the National Board of Health and Welfare. Measures, availability and performance is followed with established indicators, including for example average number of days from referral to first appointment, number of patients, proportion of patients who received an individual care plan, and proportion of operations with complications within 30 days.

Research on transgender population has been based on either ICD-10 F64* diagnosis or legal sex change. Concerning the legal change, it has previously required receiving a diagnosis and gender affirming care; the legislation changed in July 2025. Therefore, previous research using either the diagnostic code or legal sex change information has largely identified overlapping groups. Research has showed e.g., the socioeconomic vulnerability of transgender people in Sweden.

For future reporting, the presentation listed three challenges:

- Can and will data be used to improve quality and access to health care?
- How do we support a use of data that improves LGBTQ+ rights and lives?
- How do we build trust?

Suggested ways forward included communication and transparency, patient involvement, and dialogue with organizations.

3. LGBTI-related data gathering in national surveys related to health and wellbeing

This session presented national surveys in different Nordic studies which have included LGBTI-related data gathering, as well as the European Social Survey. The common features of these surveys are that sampling design aims to ensure representativeness by e.g., age and region, and the sample sizes are large. These surveys often cover a broad range of topics, but only a few questions per topic. All Nordic countries have included LGBTI-related questions in their national surveys in the 2020s but with variable questions. This session presented several surveys from Nordic countries related to health and wellbeing, but the set is not a comprehensive list of all available general population surveys from Nordic countries. The session was chaired by Jaana Suvisaari, research professor, Finnish Institute for Health and Welfare.

3.1. Youth in Iceland

Pórhildur Halldórsdóttir, Associate professor, Reykjavik University

The Youth in Iceland survey ([see also Appendix](#)) was launched in 1992 for adolescents aged 14–15 years, and it was expanded in 2001 to cover children aged 10–12 years and in 2004 to cover adolescents aged 16–18 years. Gender identity has been included in the survey since 2018 for the age group 16–18 years, since 2020 for the age group 13–15 years, and in 2021 for the age group 10–12 years. The results have been reported using three categories (female, male, other), and have shown poorer mental health among those belonging to the 'other' group.

Sexual attraction to the opposite sex and to the same sex was asked using a response scale from 1 (not at all attracted) to 5 (very attracted) in earlier years of the survey (the latest year when included was 2018). Results showed a tendency of bisexual youth to have poorer mental health than those who were hetero- or homosexual.

3.2. European Social Survey

Heikki Ervasti, Professor, University of Turku

The European Social Survey measures the attitudes, beliefs and behaviour patterns of diverse populations in more than thirty nations. It is a research infrastructure providing high quality data measuring change (and stability) over time within and between European countries in their living conditions, social structure, public opinion and attitudes. The survey development started in 1995, and the first survey round was conducted in 2002. In September 2025, the twelfth round of ESS was launched.

The survey consists of core module and rotating modules, which are selected following an open Call for Proposals. The ESS is a general survey on the total populations of each country, and minorities are represented in proportion to their share of the population. It is possible to investigate the attitudes, perceptions and behaviour of the total populations. As LGBTI+ relevant items, all rounds have included statements on attitudes toward gay men and lesbians, and a question on discrimination based on sexuality. Gender identity-related questions have not thus far been included.

3.3. Ungdata (Norway)

Jacob Evje, Doctoral Research Fellow, University of Oslo

Ungdata survey ([see Appendix](#)) was started in 2010, and its target group is lower and upper secondary school students (ages 13–19). It is usually collected every 3 years per municipality. Since 2010, over one million young people in grades 8–13 from almost all Norwegian municipalities have participated in the Ungdata surveys, and since 2017, over 150,000 children in grades 5–7 have participated in the Ungdata junior.

Different versions of LGBTI questions have been included in additional modules since 2010, but the current version was included in the national survey for high school students since 2023. Regarding gender identity, the question is "Are you a girl or a boy", with answering options girl/boy/other gender identity. Regarding the sexual orientation, the question is "There is a diversity of sexual orientations. Which of the following fits you best?". The answering options are heterosexual/gay/lesbian/bisexual/other (for example pansexual, queer, asexual, fluid)/unsure/still figuring it out/don't want to answer.

3.4. Quality of Life Survey and other Norwegian adult population surveys

Hanna Stangebye Arnesen, Coordinator for equality related statistics, Statistics Norway

The Quality of Life Survey is an annual, representative sample web survey, with a sample of 40,000 and about 17,000 respondents in 2024. Revised questions on sexual orientation have been included since 2022. Revision was done as focus group interviews showed that questions about sexual orientation, gender identity, and gender expression were not perceived as sensitive.

The question on sexual orientation is "Do you consider yourself to be..." and the answering options are heterosexual/homosexual/lesbian/bisexual/pansexual/queer/asexual/fluid/other sexual orientation/don't know/prefer not to answer. The most common answers were 88.7% heterosexual, 6.1% either don't know or prefer not to answer, 2.2% bisexual, 1% homosexual, 0.5% pansexual, and 0.4% lesbian.

Transgender respondents are identified using indirect questions based on gender identity that does not match the sex they were assigned at birth. The initial questions are What sex were you assigned at birth? and What gender do you identify as?, with answering options man/woman/non-binary/other gender identity/do not want to answer/do not know. Using these two questions, 0.4% of the respondents were trans men, 0.3% trans women, 0.3% non-binary and 1.0% did not know or did not want to answer.

3.5. The National Public Health Survey (Sweden)

Sara Ström, Research officer, coordinator, Public Health Agency of Sweden

The National Public Health Survey ([see Appendix](#)) is conducted every second year. It is based on a simple random sample of the Swedish population aged 16–84 and includes questions on living conditions, lifestyles and health. The latest survey was conducted in 2024, with a sample of 45,000 individuals and a response rate 39.4% or 17,624 individuals.

The survey has included questions on gender identity since 2015. Two questions have been included. The first question is "Are you, or have you been, a transperson? A transperson has a gender identity and/or a gender expression that does not correspond to the legal sex assigned at birth. For example, someone who is born and raised as a woman but feels more like a man", with the answering options yes, no, not sure. In addition, gender identity is asked with answering options female, male, non-binary, wish not to categorize myself, not sure.

Sexual identity is asked with the question "How would you define your sexual identity? Select only one option. If several options apply, mark the one that best applies." The answering options include heterosexual, homosexual, bisexual, pansexual, asexual, other, and not sure.

For the period 2018–2021, approximately 2.1% identified as bisexual and 0.9% as homosexual, and 0.5% reported transgender experience.

The Public Health Agency has also conducted other surveys with LGBTI+ related questions. UngKAB, Sexuality and health among young people for ages 16–29, has been collected three times (2009, 2015, 2023). SRHR survey for ages 16–84 focuses on sexual and reproductive health and has been conducted twice (2017, 2024).

3.6. Danish data on LGBT+, health and wellbeing

Jane Greve, professor, The Danish Center for Social Science Research

LGBTI+-related questions have been included in three recent representative surveys: Survey of Health, Impairment and Living Conditions (SHILD-2020 and SHILD-2025), SHILD-TRALE – 2020 and Young in 2023 – Is There Space for Everyone ([see Appendix](#)).

SHILD is a survey with focus on living conditions and disability as well as physical and mental health, widely used to study health and living conditions across different population groups. It has included questions on gender identity and sexual orientation since 2020. The survey is sent to a random sample (N=38,000) of individuals aged 18–64, and the response rate was 47% in 2020. SHILD-2025 is currently running (October/November 2025).

The question on sexual orientation is "How would you describe your sexual orientation?", with answering options homosexual/bisexual/heterosexual/asexual/None of the above. Please specify: /prefer not to answer.

Gender identity is asked in the SHILD-2025 with two questions: "What sex were you assigned at birth? For example, the sex listed on your birth certificate" with the answer options female/male/prefer not to answer, and "Which of the following best describes your gender identity? The gender you identify with today" with answering options female/male/non-binary/other. Please specify: /prefer not to answer.

Survey of Health, Impairment and Living Conditions among the transgender population (SHILD-TRALE) was conducted in 2020 and was sent to all legal transgender people in Denmark in 2021 aged 18–64 years, with 46.3% response rate. It included most of the survey questions from SHILD as well as a list of questions specific on living conditions among transgender people.

Young in 2023 – Is There Space for Everyone? survey was sent to 20% of all young people aged 15–25 in 2023 via Digital Post. It was a survey on well-being, mental health and inclusion, and included the same questions on gender identity and sexual orientation as SHILD 2020. The response rate was 19.6%, and sample size 27,493.

In the SHILD-2020, 2.0% identified as homosexual, 2.6% as bisexual, and 1.3% as transgender. In the Young in 2023, 2.0% identified as homosexual, 8.1% as bisexual, and 1.9% as transgender.

3.7. School Health Promotion Study and Healthy Finland Study

Marja Holm, Senior researcher, THL

The School Health Promotion Study ([see Appendix](#)) provides data on children's and adolescents' self-rated health, well-being, lifestyle habits, schoolwork and studying. It is a nationwide census study that is conducted every two years by an anonymous and voluntary classroom-administered questionnaire.

In 2025, 269,868 participated in the study, with 85% response rate in the primary school (4th and 5th grade, 10–12 years), 73% in the lower secondary school (8th and 9th grade, 14–16 years), 70% in the general upper secondary school (1st and 2nd grade, 16 to 19 years), and 37% in vocational school (1st and 2nd year, usually 16 to 19 years).

Gender identity has been asked since 2017 in the lower and upper secondary and vocational schools and since 2023 in the primary school level. Two questions are used: "What is your official gender?" with response options boy/girl and "What gender do you identify as?" with response options boy/girls/both/neither/it varies. Note that the Act on legal recognition of gender entered into force in April 2023 and allows for people aged 18 years and over a legal gender recognition based on the person's own account of their experience of gender. This means that the set of questions used in the School Health Promotion study cannot be used to identify transgender people who 18 years are over, since their official gender may not be the sex assigned at birth. In 2025, the identified gender was the same as the official gender for 96.3% of the respondents, 1.0% identified other gender (boy/girl) than official (girl/boy), 0.5% identified as both, 0.8% as neither, and 1.5% responded that it varies.

Sexual orientation is asked by "Which of the following best describes your sexual orientation at this moment?" with response options straight/bisexual or pansexual/gay/none of these options describe me/not sure. The question has been asked since 2017 in the lower and upper secondary and vocational schools. In 2025, 84% identified as heterosexual, 6.6% as bisexual or pansexual, 2.5% as gay, 2.1% responded that none of the options described them, and 4.9% were not sure.

The Healthy Finland-Survey ([see Appendix](#)) provides population-based data on the health, welfare and service experiences of Finnish adults aged 20 or over. Information is available on the entire adult population, different population groups and by wellbeing service counties. In 2024, 26,682 adults participated in the study (response rate 44%, based on a random sample, n= 61,600). Since 2022, it has included the question "Do you belong to a gender minority or sexual minority?", with answering options no/a gender minority (such as trans people or intersex people)/a sexual minority (such as gay men, lesbians, bisexuals, pansexuals or asexuals). In addition, the survey included on experienced gender (man/woman/other), while the official gender was obtained from register information. Of the participants, 5.4% (N=498) reported belonging to a sexual minority and 0.3% (N=28) to a gender minority.

In both surveys, LGBTI+ people had poorer self-reported health than other respondents.

4. What are the possibilities and limitations of public data gathering from the perspective of LGBTI+ people and organizations?

The first day of the seminar presented official statistics and public data gathering available in Nordic countries. In the second day, other approaches to data gathering were presented, and the possibilities and limitations of public data gathering were discussed. The first session consisted of two presentations, followed by a panel discussion. The session was chaired by Tuula Juvonen, University lecturer, Tampere University.

4.1. Applying A Human Rights Based Approach to Targeted Surveys – The case of Trans, Labour Market, Wallet

Christina Ahlzén, Consultant - measuring and analysing equality, Medida

Trans, Labour Market, Wallet was a targeted survey for trans people in Sweden and Finland with 1,025 participants over 18 years of age. The survey was designed and carried out in collaboration with the countries' major organizations for trans issues: RFSL (Sweden), SETA (Finland), Transammans (Sweden), Transfeminina (Finland), Regnbågsallians (Finland), and Regnbågsfyren (Åland).

The presentation focused on how the United Nations' Human rights-based approach to data gathering was applied in the survey. The set of principles of the human rights-based approach to data are participation, data disaggregation, self-identification, transparency, privacy, and accountability.

The principles of disaggregation and self-identification were followed closely. The aim was to build the groups into which statistics are divided based on how individuals identify themselves, not on perceptions and preconceived categorizations. Respondents were asked about gender identity, gender expression, and how they were perceived by others. Many possible predefined categories were provided, multiple responses were allowed, and respondents could add their own alternatives

if the ones that were provided were not sufficient. Based on the responses, a cluster analysis was performed to identify groups that were used in the analysis.

Participation and transparency were followed by having methodological openness and regular discussions with the reference group consisting of participants from the civil society organizations when the survey questionnaire was being designed and when the reporting was planned. Before the survey was launched, it was tested by six people, and reactions to questions were observed. Some problems were unexpected; for example, for the test people, perceived gender was not a problematic question, whereas legal gender was for some. Privacy was taken into account by following the GDPR as well as ensuring that indirect identification is not possible from anything that was reported.

Regarding accountability, the problem has been a lack of sufficient resources for dissemination. Despite this, dissemination of the results has continued even after the project funding ended.

4.2 Reflections on promoting epistemic justice in the design of research and data collection concerning gender minorities

Maarit Huuska, Senior Specialist, Gender Diversity & Intersex Centre of Expertise

Research may lead to epistemic injustice. Situations where this may occur include:

1. Transgender and gender diverse children, trans-, non-binary and intersexed persons might lack the words and concepts to express inner knowledge and embodied knowledge, or the studies might ignore or not value this information
2. The language used in the study may feel foreign to minorities own's experience or misrepresent it
3. Questions might not be essential from the minority's perspective.
4. Members of minorities might not be seen as a legitimate speaker compared to specialists
5. Minority stress and the need to protect self and others might create obstacles to speak openly about some topics.
6. The interpretation of the results may overlook essential perspectives because of cis-normativity, or the interpretation is too negative and overlooks positive sides
7. The focus is on vulnerabilities and problems while strengths, resilience or knowledge that would be valuable in everyday life or when taking care of yourself are overlooked
8. Some studies or interpretations might inflict moral injuries and be a threat to minorities' wellbeing

An approach that centres epistemic rights involves inclusive and dialogical practices where the client's knowledge authority is acknowledged and respected. In practice, this means planning study with the target groups, including target group's own interpretation of results (through advisory board/panel) and prioritize those, and preferring qualitative research or empowerment action research or prioritizing expertise by experience knowledge.

When studying transgender and gender diverse children, these considerations are particularly important. Language and questions should be relevant and understandable for a child. Some examples could be "Do you feel strange being seen as a girl, or do you feel strange being seen as a boy?", "Would you like if everyone could just be children or people? (and no one said anyone was a girl or a boy)" or "Have you ever felt upset because you wish your body was of a different gender than it is now?". Qualitative and action research could also be good approaches with children, for example story telling together with the children or a drama created by them as a group. Child groups can be found through the peer support groups for children organized by LGBTIQA+ associations and the parent association Trans Children and Youth Families.

For trans- and non-binaries and intersexed seniors, therapeutic qualitative research, that is, telling one's life story, where the unspoken becomes structured and one's own story becomes visible even to oneself is suggested as a research method. It requires the interviewer to show empathy, compassion, validation of experiences, and to use a dialogical and resource-focused conversational approach.

More research is needed on resilience and strengths, and on post-transition growth. Instead of vulnerability, the focus could also be on special talents, and the position of LHBTIQA+ in some cultures where there is positive instead of negative prejudice.

4.3. Panel discussion

The panel discussion was chaired by Tuula Juvonen, senior lecturer in gender studies from the Tampere University. The panellists were Miriam Aurora Hammeren Pedersen, advisor from FRI - The Norwegian Organisation for Sexual and Gender Diversity, Thorhildur Elinard Magnusdottir, LGBTQ+ specialist from Reykjavik City, Jaakko Toivonen, administration and finance personnel from Transfeminiinit ry, and Paloma Halén Román, project manager from Transammans, Sweden.

The panellists first discussed about the relevance of public data gathering and reporting to LGBTI+ people and to the society at large, and about information that is currently missing from society. The panellists regarded all numerical data useful: There should be as much data and results available as there are from cis people. However, qualitative research is also very important, particularly for studying groups that tend to be too small for separate reporting, like elderly LGBTI people, and for studying intersectionality. Qualitative research gives more nuanced view of e.g., experiences of discrimination or possibilities to be open about one's identity.

Currently, there is very little research or data on for example LGBTI people with disabilities, or LGBTI people from different immigrant groups. One panellist summarized that there is a need for more research on every kind! One specific theme that is often overlooked are the positive effects of transition.

Civil society needs and would use the data in competency training, in sensitivity training, and in advocacy. Data would also be needed to improve the quality of care.

Accessibility of the results is important. Many public health surveys have open portals that allow users to examine results according to e.g., age, education or gender; it would be important that these also include possibility to examine results according to gender identity or sexual orientation.

Panellists had in general positive experiences regarding collaboration with public data gatherers, although one panellist mentioned that a lot of lobbying had been needed to include LGBTI+ questions in the survey. Accessibility to the data should be improved, and publication of the results tends to be slow. It would also be important to increase dialogue and participation in the reporting of the results. Reporting from the trans clinics, e.g., waiting times, should also be improved.

Enhancing Nordic collaboration both in how LGBTI+ questions are formulated and in reporting of results would be valuable.

5. Legal and ethical aspects and concerns related to data gathering and reporting

The session focused on legal and ethical aspects and concerns related to data gathering and reporting. It was chaired by Mia Luhtasaari, Senior Specialist, Ministry of Justice, Finland.

5.1. Legal and ethical aspects on collecting data on LGBTIQ people

Marjut Salokannel, Research Director, University of Helsinki

Equality data can be defined as any piece of information that is useful for the purposes of describing, analysing, reasoning about, and making decisions on the state of equality.

It can be quantitative or qualitative, and it can include aggregate data that reflect inequalities and their causes or effects in societies. EU LGBTIQ+ equality strategy for 2026–2030 includes improving the data collection and analysis to better understand the real-life experiences of LGBTIQ+ people.

Specific characteristics of LGBTIQ data include:

1. Self-identification as underlying principle
2. Sexual orientation, gender identity, gender expression, and sex characteristics: there are multiple identifications within LGBTIQ categories
3. The data are extremely sensitive and not to be found in population based administrative registers. There are also limited data in patient records or in combination of registries.
4. Data must be obtained by anonymous surveys, while data in administrative registers are limited and non-accurate
5. Within different LGBTIQ categories, the groups are often small and hard-to-reach.

There is a paradox relating to the collection of equality data. In order to reveal discriminating structures in the society, we need to have solid data to be able to analyse, inform policies and correct discriminating practices in the society; make

discrimination visible in everyday life. However, collection of personal data based on protected characteristics in terms of anti-discrimination legislation can also expose the persons or groups to discrimination by revealing their identities or singling out them in public. This phenomenon is augmented by the use of new technologies, such as AI which, while maybe not directly using protected characteristics as the basis for their algorithms, can still lead to discriminating practices in profiling people, automating discrimination.

Collection of equality data in the EU legal framework is based on and regulated by:

- Human rights-based framework
- Charter of fundamental rights, in particular right to data protection, right to privacy as well as non-discrimination, equality before the law, and respect and protection of human dignity
- Lisbon Treaties
- EU general data protection framework and complementary national laws
- EU and national statistics laws
- EU non-discrimination law

Protected characteristics related to non-discrimination in the EU charter (art. 21) are

sex, "race", colour, ethnic or social origin, genetic features, language, religion or belief, political or any other opinion, membership of a national minority, property, birth, disability, age or sexual orientation. In Finland also health and other personal characteristics are mentioned in the Non-discrimination act. Intersectional discrimination is not explicitly mentioned.

GDPR and collection of data related to protected characteristics

Personal data encompasses both directly and indirectly identifiable data; also inferred data.

Personal data which are, by their nature, particularly sensitive in relation to fundamental rights and freedoms merit specific protection as the context of their processing could create significant risks to the fundamental rights and freedoms.

Special categories of personal data according to GDPR includes personal data revealing

- racial or ethnic origin
- political opinions
- religious or philosophical beliefs
- trade union membership
- genetic data

- processing of biometric data for the purpose of uniquely identifying a natural person
- data concerning health
- data concerning a natural person's sex life or sexual orientation

Collecting and processing these special categories of personal data is prohibited unless falling under the exemption in Art. 9.2 GDPR, e.g., substantial public interest or scientific research or statistical purposes (Art. 9.2.g or 9.2.j GDPR). Such processing must be provided in national or EU level law which respects the essence of the right to data protection and provide for suitable and specific measures to safeguard the fundamental rights and the interests of the data subject.

The underlying principle of the United Nation's Human rights-based data collection is Do not harm. The six principles of Human rights-based data collection are:

- Inclusive data collection
- Self-identification
- Anonymization and disaggregation of collected data
- Transparency of data collection
- Privacy
- Accountability of data collection and use

Human rights and fundamental rights based prior informed consent is required when data are collected directly from data subjects; consent to take part in the survey. In practice, consent is often implied by agreeing to take part in the survey. Data processing may be based either on GDPR based consent or law. In both cases, data subjects must explicitly be informed according to the GDPR of the legal basis and of all uses of their personal data and of the ways how they can exercise their rights in terms of their personal data before answering to the survey. Before GDPR, data was collected through consent and now data processing is usually based on law (GDPR 6.1.c or e).

Special features of collecting data from LGBTIQ-persons

Taking part in the survey should always be voluntary, and answering should be anonymous. Web-based anonymous surveys are the best data collection method. The principle of self-identification should be followed. Questions should clearly specify which components are being measured (e.g., sex, gender, gender identity, sex characteristics, and sexual orientation or other intersecting component), and there should be different answering options, including an option to leave an empty answer. There should be space for further elaboration in writing.

Challenges in data collection include how to reach hard to reach communities, and how to collect representative samples. Taking into account intersectional discrimination in everyday life is also challenging.

The use of survey data must be communicated to the data subjects before the collection of data. The participants must be informed whether the data will be linked with other data, whether the data will be destroyed after the survey, and how the results are published. Furthermore, the participants must be informed whether the data are being collected in identifiable form, and whether the data will be stored in identifiable form or anonymized, and if so for how long. According to the statistics law, non-anonymous data may be further used in a closed technological environment for scientific research when direct identifiers are removed.

The challenge relating to aggregation of personal data collected from small groups in a small country is that the data are hard to anonymize and even harder to disaggregate. Identification may constitute a real risk to the persons or groups of persons. Therefore, Nordic or EU-wide data sets and (dis)aggregation are recommendable.

5.2. Ethical aspects of public authorities' possibilities for mutual sharing of information about citizens

Pia Nykänen, Researcher, Department of Philosophy, Linguistics and Theory of Science, University of Gothenburg

Recent proposals suggest giving Swedish authorities greater opportunities to share citizen data between them. These proposals stem from societal problems that one wants to curb, reduce and prevent and from the assumption that increased data sharing is a good instrument for this mitigation and prevention. In addition, technical prerequisites for data sharing are in place.

The focus in the presentation was on public authorities (and actors who are equated with public authorities in law). 'Information sharing' means information exchange about citizens between authorities. 'Ethical aspects' include normative and value-related questions, and ethical aspects are closely related to moral aspects.

According to a recent report, 161 actors asked for increased opportunities to access information about health, care providers, care visits, diagnoses, referrals, medication, etc., i.e., data that typically occurs in health and medical care. About one-sixth of these also request the opportunity to access information concerning genetic or biometric data about a natural person, and slightly fewer also request information about sexual orientation, sex life, gender identity, sexual partners, etc. These requests came from some of the major government agencies, some law enforcement agencies and several actors at municipal and regional level. (SOU 2024:63, p. 323)

Arguments for increased opportunities for data sharing that were presented included

- Methodological reasons
- Administrative reasons
- Economic reasons
- Statistical reasons
- Democratic reasons
- Epistemological reasons
- "We already share X, so..."
- "Others do it"
- Legal reasons
- Ethical reasons

Ethical reasons

The four principles of biomedical ethics by Beauchamp and Childress, first mentioned in 1979, are

- The principle of autonomy, respecting for the decision-making capacities of autonomous persons.
- The principle of beneficence, maximizing possible benefits and minimizing possible harms.
- The principle of non-maleficence, not causing harm to others
- The principle of justice, treating people according to what is fair, due, or owed

Ethical reasons may also be analysed through three moral frameworks

- Consequentialist ethics: What is morally right depends on the consequences. Example: Utilitarianism.
- Duty ethics: Some actions (such as violating privacy) are always morally wrong.
- Rights ethics: Moral rights must not be violated.

These examples demonstrate that there is not just one ethical perspective, but several.

From the perspective of justice and equality, increased and/or expanded data sharing may benefit disadvantaged groups. However, the *distribution* of the burden that risks to personal integrity constitute should be considered. An 'additional vulnerability' can be conceived of or perceived as an injustice.

Privacy, proportionality, and legitimate purposes

All legislative proposals that include the processing of personal data should (in Sweden) be analysed from a privacy perspective. Privacy analysis is an assessment of whether the consequences of the personal data processing are *necessary* and *proportionate*. Examples of questions from an ethical and political-philosophical point of view include: What are "purposes that are acceptable in a democratic society?", What are "goals of general interest"?,

How do different proposals for increased and/or expanded data sharing fare regarding such objectives?, Are there tensions between short-term good and long-term good?

Arguments against increased and/or expanded opportunities for data sharing include counterproductive behaviour from citizens, decreased trust in authorities, and "The three M's": Misuse, mistakes, misjudgements. Moreover, additive and cumulative effects could compromise proportionality.

Different ethical and political-philosophical aspects need to be included when proposals for increased and/or expanded data sharing are analysed. Further research is needed on the effects on trust of increased and/or expanded data sharing, and on how proportionality assessments have been and should be done (in relation to which values and why).

5.3. Ethical issues in using diverse data when studying LGBTIQ+ experiences

Riikka Taavetti, University Lecturer, University of Turku and Outi Lepola, Postdoctoral Researcher, University of Turku

When LGBTIQ+ issues are addressed with surveys intended for the wider population, there tends to be relatively few LGBTIQ+ respondents. As a result, especially if multiple options are given for defining one's gender and sexuality, the groups become too small to be addressed in the analysis.

A common solution to having few respondents is to combine diverse groups in the analysis, for example grouping gender and sexual minorities together. However, the issues these groups face are rather different, and the grouping may, in fact, be misleading. Utilizing broader terms or acronyms as LGBTIQ+ may also create the problem of false inclusivity. As an example, does the study actually involve anything on, e.g., intergender people? Another issue is who are addressed with their own letters in the acronym and who are included in the '+'?

One option to utilize survey data of even very few LGBTIQ+ respondents is to analyse it with a more qualitative approach on quantitative material. For example, this can mean analysis of single survey answers, including seemingly impossible

combinations or rare answers. These methods can offer perspectives to what the survey was not able to cover and can also highlight the implicit assumptions in the survey.

What is considered as sensitive

In ethical evaluation of research, harm is often perceived from a majority (cisgendered and heterosexual) perspective. Those in minoritized positions often face the issues addressed in research, such as discrimination or exclusion, in their daily lives, even if these would be exceptional for the majority. Therefore, addressing them in research might not cause harm but rather give an opportunity to address and analyse these experiences. In ethical evaluation, sexuality is seen as a sensitive personal feature, but often only in relation to minorities – and sometimes unnecessarily.

Ethical questions on (not) being a (partial) insider

One ethical question related to LGBTIQ+ related research is whether the researcher should be an LGBTIQ+ person. There is a historical change in how the insider status is perceived, ranging from whether it has been considered as a problem to seeing it as a requirement, and there are differences between disciplines. Researcher's positionality may create trust even in surveys: It is not as much a question of researcher's identity but of familiarity with the themes studied and how this positionality is communicated to the respondents. However, insider position is always partial – there are intersecting differences within the LGBTIQ+ minorities. Insider positionality may reduce unnecessary discretion, but there may also be a danger of imagining understanding the interviewee too easily. These are important ethical considerations to keep in mind particularly when doing qualitative interviews.

5.4. Non-binary data gathering & reporting in Iceland

Aró Berg, treasurer, Trans Island

The act on gender autonomy was passed in Iceland in 2019. Based on it, any person from the age of 15 years has the right to change the gender registration in the national registry without needing medical interventions or diagnoses. The Act also formalizes two specialized transgender health teams (based on age) within the healthcare system. People can choose their first names regardless of their gender. The Act also bans most unnecessary medical interventions on intersex infants when they can't give consent.

Based on the law, all forms and databases across public and private sectors allow for neutral gender registration. The option to register one's gender as neutral was

adopted at the beginning of 2021. From 2022, the number of non-binary people has tripled. The total population of Iceland is around 400,000 people, and currently 217 individuals are registered non-binary. However, not everyone who are non-binary change their gender registration, for example if they do not want the X gender marker in their passport.

Data gathering and reporting must also adhere to the GDPR, one aspect being protection from direct or indirect identification. Because of this, results or indicators are rarely reported separately for non-binary people. Instead, non-binary data are generally randomly distributed between men and women before the data is reported. When the sample size is large enough and the data is not sensitive, the non-binary category is sometimes included. It could be argued, however, that statistical authorities are sometimes too cautious in this regard. Sometimes they choose not to include non-binary data in small samples, even when the data is not sensitive at all. As statistics are crucial for providing a foundation for all kinds of societal information and for the detection of inequalities, this lack of reporting is a problem.

Currently, researchers at the University of Iceland are conducting research about how non-binary people prefer to be asked about their gender in surveys and how they want to be represented in data when it's reported. This is the first research of this kind in Iceland. So even though Iceland has the option to register gender neutrally, there is still work to do in data gathering and reporting.

6. How can the methodology, reporting and resources of public data gathering be improved?

This session was a panel discussion that was chaired by Jukka Lehtonen from the University of Helsinki. The panellists were Anukatoriina Saloheimo, equity educator from Finland, Janne Bromseth, senior researcher from the University of Inland Norway, Antti Kivijärvi, senior researcher from the Finnish Youth Research Society, and Henrik Källberg, research officer from the Public Health Agency of Sweden.

The first methodological theme in the panel discussion was the formulation of questions on gender identity and sexual orientation. The panellists noted that asking about gender identity can be empowering or triggering. Many often used answering options make some participants feel othered – and especially the common use of "other" category which can be perceived as offensive. Anukatoriina Saloheimo gave an example of her study where she had used a list of 30 labels, allowed choosing more than one, and included an open question on identity which resulted in 90 different descriptions. One option that was mentioned was to use Likert scales instead of binary answering options.

The second theme was how to improve study designs and reporting. One advice was to match the study planning with the aim. A typical problem in general population surveys is that groups have to be merged in the reporting phase because of small numbers in individual groups. One solution is to use data from several survey rounds to increase the number of responses from specific groups. Another solution is to use cohort study design; examples of such studies are the Norwegian Life Course, Ageing and Generation Study (NorLAG) and the Project SEXUS in Denmark. It would also be valuable to have longitudinal studies of LGBTI+ people.

When developing methodology and reporting, it is important to be aware of the limitations of the study design. Adding open-ended questions is a recommended way to mitigate the limitations of survey question formulations.

The problems related to question formulations is not limited to questions about identity. When surveys want to study attitudes and values, the risk is that question formulations reinforce exclusion or stereotypes.

Regarding reporting, the panel identified several important themes. One is strategic and responsible reporting. Which aspects are chosen for reporting – are they empowering or oppressive? What kinds of narratives are created with the reports? Another important question is the dissemination of the results. What is being done to disseminate the results to various stakeholders? Civil society organizations, policymakers and professionals working in different fields were mentioned as important target audiences, but dissemination could be more active. It would be important to ensure that results are published rapidly, and to monitor how the results have been used.

Regarding resources, the panellists agreed that research funding is highly competitive and getting funding is difficult. The organizational funding for public data gathering typically covers the costs related to data gathering but not research. The result is that many public data sources are underutilized.

7. Enhancing Nordic collaboration: What are the next steps?

The last session discussed about the next steps in enhancing Nordic collaboration. It was chaired by Hanna Onwen-Huma, Ministerial Adviser, Ministry for Social Affairs and Health, Finland.

7.1. Experiences on Nordic collaboration

Ylva Odenbring, Professor of Education, University of Gothenburg, Sweden

Nordic collaboration is enhanced by Nordic research networks. The Nordic Educational Research Association's (NERA) is one of these research networks. NERA's annual conference take place in one of the Nordic countries in March every year. NERA has several networks and one of the networks, the Gender and Education network, specifically focuses on issues on gender, sexuality and education. During the conference the latest research in the research field is presented and the network members also meet and discuss different matters at the annual network meeting. The network has also a digital meeting between conferences. The current network convenor is Professor Ylva Odenbring, University of Gothenburg, Sweden.

Another example of Nordic collaboration is the Nordic Network for LGBTQ+ Research on Health and Living Conditions. The network coordinator is Catrine Andersson, Associate professor in Social Work at Malmö University, with support from the Centre for Sexology and Sexuality Studies (CSS), Sweden.

These networks are open to researchers and Ph.D. students in the Nordic countries. Both networks are excellent examples of Nordic collaboration.

As an example of Nordic collaboration, Ylva Odenbring mentioned the ongoing research project Mental health issues and victimisation among LGBTQI-youth: A comparative study in Swedish and Danish schools (2022–2026), funded by the Swedish Research Council. By conducting individual interviews with LGBTQ+ students aged 15–19 years in Sweden and Denmark, the project investigates schooling experiences, student victimisation, mental health issues, discrimination processes, and how professionals may find ways to prevent these issues in Swedish and Danish secondary schools. Preliminary results show that in both countries, lower secondary school is experienced as the most difficult time for most LGBTQ+ students.

7.2. Advancing Equality Together: Nordic Co-operation on Gender Equality and LGBTI Rights

Petter Dotterud Anthun, Senior Adviser, Nordic Council of Ministers

Nordic co-operation is one of the oldest and comprehensive regional partnerships in the world. Based on insight after the world wars, it was concluded that small countries need to work together. This led to the establishment of the Nordic Council, the forum for co-operation between Nordic parliamentarians, in 1952, the Nordic Council of Ministers, the formal forum for co-operation between the Nordic governments, in 1971, and the Nordic Culture Fund in 1967.

The Helsinki Treaty, a treaty of co-operation between Denmark, Finland, Iceland, Norway and Sweden, was signed on 23 March 1962 and entered into force on 1 July 1962. According to the treaty, the countries must maintain and develop further co-operation in the fields of law, culture, economy, transport and communications, and environmental protection. They should also consult with each other on matters of common interest within European and other international organisations and at conferences.

Nordic Council of Ministers for Gender Equality and LGBTI is one of twelve ministerial councils in the Nordic co-operation. It is co-operation based on shared values of human equality, freedom from discrimination and equal rights for all. This cooperation between the governments of the Nordic countries in the area of gender equality and equality for LGBTI people is led by the Nordic Ministers for Gender Equality and LGBTI (MR-JÄM). The Committee of Senior Officials for Gender Equality (EK-JÄM), which consists of representatives from all Nordic countries and autonomous regions, coordinates the practical work and prepares the meetings of MR-JÄM. Nordic Information on Gender (NIKK) is a co-operation body under the Nordic Council of Ministers for Gender Equality and LGBTI.

The tasks of the Nordic Council of Ministers for Gender Equality and LGBTI consist of policy development and coordination, funding and support for projects, knowledge sharing and research, and regional and international co-operation. It has launched a strategic programme (2025–2030) for a strategic direction for gender equality and LGBTI rights, focusing on inclusion, combating discrimination, and strengthening regional collaboration. The focus areas are gender equality in the labour market, anti-discrimination and distribution of power and influence, freeing the Nordic region from gender-based and sexual violence, sexual victimisation and harassment and hate, guaranteeing opportunity to shape one's own life without restriction of stereotypical norms and expectations, and counteracting and preventing inequality in health, well-being and quality of life.

Pushing for progress is a joint Nordic declaration and program (2025–2027) launched by the Nordic Council of Ministers for Gender Equality and LGBTI, which commits the Nordic governments to defend hard-won gains in gender equality and equal rights for LGBTI persons, while actively advancing further progress both within the Nordic region and internationally. The declaration states: "We vow to defend the advancements already made on gender equality and equal rights for LGBTI persons, to never go backwards, and to keep pushing forward for progress."

Support schemes for Nordic benefit includes funding provided by NordForsk, which funds and facilitates Nordic research co-operation. NordForsk funds research networks, infrastructure cooperation and joint Nordic programmes in priority areas. Funded projects must involve at least three Nordic countries.

The Nordic Committee for Children and Young People (NORDBUK) is the Nordic Council of Ministers' advisory and co-ordinating body for matters relating to children and young people.

It funds aimed at projects that promote the rights, participation, and well-being of children and young people. The projects must involve at least three Nordic countries. Gender equality, LGBTI and inclusion is a focus area.

7.3. Nordic support for collaboration

Deepati Forsberg, project coordinator, Nordic Information on Gender (NIKK)

Nordic Information on Gender (NIKK) is co-operation body under the Nordic Council of Ministers located at the Swedish Secretariat for Gender Research in the University of Gothenburg. It is a small team co-operating with experts in the Nordic region. NIKK's main tasks are knowledge production covering research, policy and practice, strategic dissemination of knowledge through digital channels, meetings and collaborations, as well as sharing knowledge, networks and expertise. In addition, NIKK administers two funds on behalf of the Nordic Council of Ministers, the Nordic Gender Equality Fund and the Nordic LGBTI Fund.

The funding is intended for projects targeting challenges identified in the Nordic cooperation programme on gender equality and LGBTI. The projects should aim at contributing new knowledge, sharing of experiences or building Nordic networks. There should be a minimum of three organizations from at least three Nordic/Baltic countries. The funding is 50,000 – 500,000 DKK per project, with 20% own contribution, and the project time is maximum two years.

The funding is suitable for capacity building: Establishing research collaborations, preparing larger applications/projects through the funded projects, for publications in the Nordic Council of Ministers' publication series TemaNord, and for strengthening synergies to other Nordic cooperation activities.

Examples of what can be funded include Nordic gatherings, knowledge production, network-building, method development, and the participation of volunteer organisations in Nordic or international conferences/courses/meetings

Examples of granted projects:

- A Nordic digital curriculum for LGBTQIA+ competencies in higher education programs for human service professions, with the aim of developing open-access digital curriculum for students, professionals, and educators.
- Antigypsyist homophobia and LGBTIQ Roma rights in the Nordics, with the aim of producing tools, good practices and knowledge for organisations and stakeholders as well as a publication, and advancing further research and collaboration.
- The Nordic Network for LGBTI research on Health and Living Conditions to create a network for sharing research results, strengthening collaboration across disciplines, and supporting the development of new projects.
- Challenges identified in Nordic LGBTI research and collaboration include the need of more data, research, and documented knowledge. Furthermore, more inclusion of the autonomous regions (Faroe Islands, Greenland, Åland) is needed, and more inclusion of non-normative LGBTI-persons voices. In addition, more safe platforms for dialogue and collaboration are required.

The call for proposals in 2026 for The Nordic Gender Equality Fund is between 3 March and 3 April 2026, and for the Nordic LGBTI Fund between 1 September and 1 October 2026.

During the discussion of the last session, a commentary speech regarding the situation and need of data on LGBTI people in Greenland was given by Jaaku Lyberth from Sipineq+.

8. Conclusions

Nordic countries face similar challenges in public data gathering of LGBTI+ people. While questions on gender identity and sexual orientation are nowadays often included in surveys, the actual set of questions differ, and countries would benefit from collaboration in developing and harmonizing the questions further. Testing and piloting with participation of LGBTI+ people when finalizing the questions is important, and several examples of this were given in the seminar.

When data are collected, timely and comprehensive reporting should be ensured. Currently, reporting and disseminating the results of public surveys from LGBTI+ perspective is inadequately resourced in most Nordic countries. Ethical considerations and participation of LGBTI+ people are important also when interpreting and reporting the results.

It is also important to acknowledge that quantitative research on general population surveys or register data is not sufficient. Due to the limited sample size, diverse groups of sexual orientation and gender identity are often grouped together, and differences in these groups are lost. Moreover, the content of general population survey questionnaires may not include topics relevant for LGBTI+ people. Targeted surveys are therefore also needed. Qualitative research is also very important, particularly for studying groups that tend to be too small for separate reporting, like elderly LGBTI people, and for studying intersectionality. Nordic collaboration should be advanced in all types of studies. Examples of Nordic collaborative research were given in the seminar.

Nordic support for collaboration is available, and the Nordic Ministers for Gender Equality & LGBTI have vowed "to defend the advancements already made on gender equality and equal rights for LGBTI persons, to never go backwards, and to keep pushing forward for progress." This is the time to keep pushing forward for progress in joint efforts to enhance public data gathering and reporting of LGBTI+ people in Nordic countries.

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Appendix

YOUTH IN ICELAND (CROSS-SECTIONAL) AND LIFECOURSE (LONGITUDINAL)	
COUNTRY	Iceland
TARGET GROUP	Children and adolescents (separate surveys for three age groups: 10–12; 13–15; 16–18-year-olds)
FIRST DATA COLLECTION	1992 (14–15 years), 2001 (10–12), 2004 (16–18). NB: Initially started as a survey instrument to monitor substance use, many early surveys focus on this.
DATA COLLECTION FREQUENCY	<i>Broadly</i> every other year. Grades 5–7 odd years, older groups on even years. LIFECOURSE longitudinal subset of adolescents born in 2004, surveyed annually in 2017–2020.
CONTACT INFORMATION	thorhildurh@ru.is
LGBTI+ -RELATED QUESTIONS IN THE SURVEY	
SEXUALITY	AGES 10–12 – NO QUESTIONS AGES 13–15 (2016, 2018); TWO QUESTIONS 1. Where would you place yourself on a scale measuring sexual attraction to the opposite sex? 2. Where would you place yourself on a scale measuring sexual attraction to the same sex? • Response options: 1–5 1=Not at all attracted, 5=Very attracted AGES 16–18 (2004, 2013, 2016, 2018) • Same or similar questions as above for ages 13–15. • Additional questions sexual activity and relationships with opposite/same sex in 2004 and 2013.

GENDER	For most years the question was a binary option: Q: "Are you a boy or a girl" A: Boy or girl (two options) Three level response introduced 2018 and later: Q: What is your gender? A: Boy, girl, Other/Non-binary (three options) • AGES 10–12: 2021 • AGES 13–15: 2020, 2020.5 COVID, 2021 • AGES 16–18: 2018 and 2020 Five level response from 2021 onwards (only ages 13+) Q: What is your gender? A: Male, Female, Non-binary, Other, Don't know • AGES 13–15: 2022 and 2023 • AGES 16–18: 2021 LIFECOURSE (longitudinal): Used binary (boy or girl) options for 2017–2018 and three level option 2019–2020. As longitudinal we can monitor changes in response option within participant and compare against sex assigned at birth.
QUESTIONNAIRE AVAILABILITY	Upon request
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Icelandic, English and Polish (latter in more recent years)
LGBTI+ -RELATED REPORTING	Sigurvinsdottir, R., Gisladdottir, B., Asgeirsdottir, B. B., & Sigfusdottir, I. D. (2024). Sexual attraction and non-suicidal self-harm: the role of stressors and psychological mediators. <i>Archives of sexual behavior</i> , 53(4), 1293–1306.
HOMEPAGE	Rannsoknir.is
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UNGDATA	
COUNTRY	Norway
TARGET GROUP	Lower and upper secondary school students (ages 13–19)
FIRST DATA COLLECTION	2010
DATA COLLECTION FREQUENCY	Usually every 3 years per municipality (e.g., the survey completed data collected in all of Norway through 2023, 2024 and 2025)
CONTACT INFORMATION	anders.bakken@oslomet.no
LGBTI+-RELATED QUESTIONS IN THE SURVEY	Since 2023: "There is a diversity of sexual orientations. Which of the following fits you best?" Responses included • Heterosexual • Gay/lesbian • Bisexual • Other (for example pansexual, queer, asexual, fluid) • Unsure/still figuring it out • Don't want to answer
QUESTIONNAIRE AVAILABILITY	Available to researchers in Norway through Sikt: https://doi.org/10.18712/NSD-NSD3157-V1
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Norwegian, English
LGBTI+-RELATED REPORTING	Not published yet
HOMEPAGE	https://www.ungdata.no/english/
REFERENCES	Enstad, F., Helseth, S., Løyland, B., Haraldstad, K., & Skarstein, S. O. (2025). Use of over-the-counter analgesics in Norwegian children – a national cross-sectional study. <i>Scandinavian Journal of Public Health</i>. https://doi.org/10.1177/14034948251328492 Grasaas, E., Ostojic, S., & Sandbakk, Ø. (2024). Associations between levels of physical activity and satisfaction with life among Norwegian adolescents: a cross-sectional study. <i>Frontiers in Sports and Active Living</i>, 6. https://doi.org/10.3389/fspor.2024.1437747 Lien, L., Bonsaksen, T., Stea, T. H., Kleppang, A. L., Steigen, A. M., & Leonhardt, M. (2023). Time trends in self-reported depressive symptoms, prescription of antidepressants, sedatives and hypnotics and the emergence of social media among Norwegian adolescents. <i>PLoS ONE</i>, 18(12), e0295384. https://doi.org/10.1371/journal.pone.0295384 Myhr, A., Vesterbekkmo, R. K., Samarawickrema, I., & Sund, E. R. (2024). Trends in Norwegian adolescents' substance use between 2014 and 2022: socioeconomic and gender differences. <i>BMC Public Health</i>, 24(1). https://doi.org/10.1186/s12889-024-19983-9 Yu, B., Von Soest, T., & Nes, R. B. (2023). Do municipal contexts matter for adolescent mental health? A Within-Municipality analysis of nationwide Norwegian survey data across six years. <i>Research on Child and Adolescent Psychopathology</i>, 52(2), 169–182. https://doi.org/10.1007/s10802-023-01123-3

THE NATIONAL PUBLIC HEALTH SURVEY	
COUNTRY	Sweden
TARGET GROUP	16 and older
FIRST DATA COLLECTION	2004
DATA COLLECTION FREQUENCY	Every second year (with some exceptions)
CONTACT INFORMATION	folkhalsoenkaten@folkhalsomyndigheten.se
LGBTI+-RELATED QUESTIONS IN THE SURVEY	GENDER IDENTITY (female, male, non-binary, wish not to categorise myself, not sure) 2018 Are you, or have you been, a transperson? <i>A transperson has a gender identity and/or a gender expression that does not correspond to the legal sex assigned at birth. For example, someone who is born and raised as a woman but feels more like a man.</i> (yes, no, not sure) 2015 How would you define your sexual identity? <i>Select only one option. If several options apply, mark the one that best applies.</i> (heterosexual, homosexual, bisexual, pansexual, asexual, other, not sure) (2005) 2008
QUESTIONNAIRE AVAILABILITY	Available at www.folkhalsomyndigheten.se
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Swedish, English
LGBTI+-RELATED REPORTING	https://www.folkhalsomyndigheten.se/publikationer-och-material/publikationsarkiv/l/livsvillkor-levnadsvanor-och-halsa-hos-aldre-homosexuella-bisexuella-och-transpersoner/ https://www.folkhalsomyndigheten.se/publikationer-och-material/publikationsarkiv/u/utvecklingen-av-halsan-och-halsans-bestamningsfaktorer-bland-homo--och-bisexuella-personer-resultat-fran-nationella-folkhalsoenkaten-halsa-pa-lika-villkor/

SHILD (SURVEY OF HEALTH, IMPAIRMENT AND LIVING CONDITIONS) SURVEY

COUNTRY	Denmark
TARGET GROUP	Individuals aged 16–64
FIRST DATA COLLECTION	SHILD (Survey of Health, Impairment and Living Conditions in Denmark) is a panel survey with particular focus on living conditions and disability in Denmark as well as physical and mental health and has been widely used to study health and living conditions across different population groups. The survey is based on online questionnaires with follow-up by phone. Each wave covers approximately 35,000 individuals aged 16–64, with a response rate of around 50% across all three waves. The first questionnaire was distributed in 2012, but questions on sexual orientation and gender identity were not included until 2020. The 2020 data collection took place between 9 September and 22 November 2020 and covered individuals aged 16–64 as of 1 September 2020. Participants were invited to the survey via the predominant digital postbox solution in Denmark (e-Boks), or by letter if they were exempt from digital communication, with follow-up conducted by phone. Data collection was therefore a combination of web-based responses and telephone interviews. In total, 17,935 complete responses were collected. Out of the 38,000 individuals sampled, this corresponds to a response rate of 47.2%. Same procedure is used in the upcoming roll-out of the survey this fall (2025).
DATA COLLECTION FREQUENCY	Every four years (as far as possible)
CONTACT INFORMATION	jagr@vive.dk
LGBTI+-RELATED QUESTIONS IN THE SURVEY	In 2020 and in 2025: "How would you describe your sexual orientation?" 1. Homosexual 2. Bisexual 3. Heterosexual 4. Asexual 5. None of the above. Please specify: _____ 6. Prefer not to answer In 2020: "In Denmark, everyone is assigned a sex at birth: either male or female. Not everyone identifies with the sex they were assigned. Do you identify with the sex you were assigned at birth?" 1. No, I identify with a different gender than the sex I was assigned at birth 2. Yes, I identify with the sex I was assigned at birth 3. Other. Please specify: _____ 4. Prefer not to answer In 2025: "What sex were you assigned at birth? For example, the sex listed on your birth certificate" 1. Female 2. Male 3. Prefer not to answer In 2025: "Which of the following best describes your gender identity? The gender you identify with today" 1. Female 2. Male 3. Non-binary 4. Other. Please specify: _____ 5. Prefer not to answer

QUESTIONNAIRE AVAILABILITY	The distributed questionnaires are available upon request.
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Danish
LGBTI+-RELATED REPORTING	Danish and English for SHILD 2020. Not published yet for SHILD 2025.
HOMEPAGE	SHILD (Survey of Health, Impairment and Living Conditions in Denmark) - vive.dk
REFERENCES	Greve, Jane, Østergaard, Stine V., Andersen, Matvei, Thomsen, Morten K. (2022). Kortlægning af homo- og biseksuelles samt transpersoners levevilkår og samfundsdeltagelse. København: VIVE – Det Nationale Forsknings- og Analysecenter for Velfærd. En kortlægning af homo- og biseksuelles samt transpersoners levevilkår og samfundsdeltagelse Thomsen, Morten K., Andersen, Matvei, Greve, Jane (2024). Transgender lives at the population level: Evidence from Danish administrative data. <i>Social Science & Medicine</i>, 358(2024):117182. doi:10.1016/j.socscimed.2024.117182 Greve, Jane, Frøslev-Thomsen, Josefine, Andersen, Matvei (2023). LGBT+familier med tre eller fire forældre – Karakteristik af LGBT+familier og en beskrivelse af de udfordringer, som LGBT+familier med tre eller fire forældre oplever. København: VIVE – Det Nationale Forsknings- og Analysecenter for Velfærd. LGBT+familier med tre eller fire forældre

SHILD-TRALE (SURVEY OF HEALTH, IMPAIRMENT AND LIVING CONDITIONS – TRANSGENDER LIVES AND EXPERIENCE) SURVEY

COUNTRY	Denmark
TARGET GROUP	Individuals that changed their legal gender between 2000 and 2021
FIRST DATA COLLECTION	SHILD-TRALE is a spin-off survey to SHILD collected by VIVE in 2021/2022, referring to Transgender Lives and Experience Survey. The questionnaire uses selected questions from the SHILD survey, supplemented with questions specifically about having a gender identity or gender expression different from the sex they were assigned at birth. The Danish Health Data Authority carried out a CPR selection for VIVE covering all individuals in Denmark who had changed their legal gender (registered as a change in the last digit of their CPR number) between 2000 and 2021. Every individual residing in Denmark is assigned a unique 10-digit Central Personal Register (CPR) number. The first six digits denote the birth date (day, month, year without the century), while the last four form a sequence number, with the final digit indicating the sex of the individual – even number for females, odd for males. According to The Danish Health Data Authority, 2,131 individuals had undergone a legal gender change between 2000 and 2021, of these, 1,833 individuals were between the ages 18–64 as of September 2020, set as the age restriction for the further analyses. Respondents were invited to participate via e-Boks, where they also received up to two reminders about the survey. Data collection was carried out as an online survey and the questionnaire was conducted between 22 December 2021 and 9 February 2022. 849 respondents fully completed the questionnaire, corresponding to a response rate of 46.3%.
DATA COLLECTION FREQUENCY	Once in 2021/2022
CONTACT INFORMATION	JaGr@vive.dk
LGBTI+ -RELATED QUESTIONS IN THE SURVEY	The purpose of the survey is to shed light on the living conditions and social participation of transgender people in Denmark. In this context, the term 'transgender' is used as an umbrella term for people who, to varying degrees, do not identify with the sex they were assigned at birth. All respondents are considered transgender, as they have undergone a legal gender change. Consequently, all questions are LGBTI+ related and relevant.
QUESTIONNAIRE AVAILABILITY	The distributed questionnaire is available upon request.
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Danish
LGBTI+-RELATED REPORTING	Danish
HOMEPAGE	https://www.vive.dk/da/udgivelser/kortlaegning-af-homo-og-biseksuelles-samt-transpersoners-levevilkkaar-og-samfundsdeltagelse-0xgel1vk/
REFERENCES	Greve, Jane, Østergaard, Stine V., Andersen, Matvei, Thomsen, Morten K. (2022). Kortlægning af homo- og biseksuelles samt transpersoners levevilkår og samfundsdeltagelse. København: VIVE – Det Nationale Forsknings- og Analysecenter for Velfærd. En kortlægning af homo- og biseksuelles samt transpersoners levevilkår og samfundsdeltagelse Steffensen, Tinne, Kroustrup, Johannes (2023). LGBT+ barometer. København: Institut for Menneskerettigheder. LGBT+ barometer Institut for Menneskerettigheder

COUNTRY	Denmark
TARGET GROUP	Individuals aged 15–25
FIRST DATA COLLECTION	The survey data was collected between 25 April and 26 June 2023. The questionnaire was distributed to a random sample of 15–25-year-olds living in Denmark, with a 20% selection from each birth year within this age group as of 1 January 2023. The sample was random within each cohort and therefore not dependent on sex, ethnicity, education, or other characteristics. Respondents were invited to participate via Digital Mail, and the questionnaire could only be accessed through this platform. For participants under the age of 18, their parents were informed about the study in an informational letter sent to their own Digital Mail. At the same time as the survey was distributed, the study was also announced on Facebook and LinkedIn. To further increase the response rate, ten gift cards of 1,000 Danish kroner were awarded by lottery. In total, 31,420 individuals responded, of whom 27,493 completed the questionnaire in full, corresponding to a response rate of 19.6%.
DATA COLLECTION FREQUENCY	Once in 2023
CONTACT INFORMATION	JaGr@vive.dk
LGBTI+-RELATED QUESTIONS IN THE SURVEY	"Not everyone identifies with the sex assigned to them at birth. Do you identify with the sex you were assigned at birth?" 1. Yes, I identify with the sex I was assigned at birth 2. No, I do not identify with the sex I was assigned at birth 3. I am not undecided 4. Prefer not to answer "How would you describe your gender identity?" 1. Non-binary 2. Male 3. Female 4. I am undecided 5. Prefer not to answer 6. A different gender identity. Please specify: _____ "How old were you, when you first became aware of having a gender identity different from the sex you were assigned at birth? If you do not remember exactly, please provide your best estimate" (List of ages) "How old were you, when you first began talking to someone about having a gender identity different from the sex you were assigned at birth? If you do not remember exactly, please provide your best estimate" (List of ages) "Are you open about your gender identity at your school?" 1. I am open about it with everyone at my school 2. I am open about it with most 3. I am open about it with a few 4. No, I am not open about it at my school 5. Don't know/prefer not to answer

"Who at your school are you open about it with? (you can mark more than one option)"

1. My classmates
2. The staff at school
3. Other students at school
4. Others
5. Don't know/prefer not to answer

"Why are you not open about it at your school? (you can mark more than one option)"

1. I know that they would not understand it
2. I think that they would not accept me
3. I think that it will make my life more difficult
4. I feel that the school is an unsafe place to be open
5. I think that my teacher(s) will bully me
6. I think that the other students will bully me
7. I am undecided/in doubt about my gender identity
8. I am ashamed about my gender identity
9. I do not feel the need to be open about my gender identity
10. I am worried that someone will tell it to my parent(s)
11. Other
12. Don't know/prefer not to answer

"What is your sexual orientation? (Your sexual orientation is about your sexual attraction to other people)"

1. Heterosexual
2. Homosexual
3. Bi- or pansexual
4. Asexual
5. I am undecided
6. Prefer not to answer
7. Other sexual orientation. Please specify: _____

"How old were you, when you first became aware of your sexual orientation? If you do not remember exactly, please provide your best estimate"
(List of ages)

"How old were you, when you first began talking to someone about your sexual orientation? If you do not remember exactly, please provide your best estimate"
(List of ages)

"Are you open about your sexual orientation at your school?"

1. I am open about it with everyone at my school
2. I am open about it with most
3. I am open about it with a few
4. No, I am not open about it at my school
5. Don't know/prefer not to answer

"Who at your school are you open about it with? (you can mark more than one option)"

1. My classmates
2. The staff at school
3. Other students at school
4. Others
5. Don't know/prefer not to answer

"Why are you not open about it at your school? (you can mark more than one option)"

1. I know that they would not understand it
2. I think that they would not accept me
3. I think that it will make my life more difficult
4. I feel that the school is an unsafe place to be open
5. I think that my teacher(s) will bully me
6. I think that the other students will bully me
7. I am undecided/in doubt about my sexual orientation
8. I am ashamed about my sexual orientation
9. I do not feel the need to be open about my sexual orientation
10. I am worried that someone will tell it to my parent(s)
11. Other
12. Don't know/prefer not to answer

"Which of the following statements best match your own perception of your sexual orientation? (you can mark more than one option)"

1. I feel good about my sexual orientation
2. I am proud of my sexual orientation
3. I am sad about my sexual orientation
4. I am ashamed of my sexual orientation
5. Other
6. Don't know/prefer not to answer

"Which of the following statements best match your own perception of your gender identity? (you can mark more than one option)"

1. I feel good about my gender identity
2. I am proud of my gender identity
3. I am sad about my gender identity
4. I am ashamed of my gender identity
5. Other
6. Don't know/prefer not to answer

"How much do you agree or disagree with the following statement about your work experience placement/internship:

- *"I experience that I can be honest about my gender identity at my placement"*
 1. Totally agree
 2. Agree
 3. Neither agree nor disagree
 4. Disagree
 5. Totally disagree
 6. Don't know/prefer not to answer
- *"I experience that I can be honest about my sexuality at my placement"*
 1. Totally agree
 2. Agree
 3. Neither agree nor disagree
 4. Disagree
 5. Totally disagree
 6. Don't know/prefer not to answer

Battery/survey-experiment about perceptions of diversity and inclusion at school. Questions related to scenarios with different gender identities or sexual orientations in school settings.

"Does your school have clear rules on appropriate behavior concerning the use of offensive language and bullying based on gender identity and/or sexual orientation?"

1. Yes, and the rules are respected
2. Yes, but the rules are not respected
3. No
4. Don't know/prefer not to answer

"Have you experienced that words like 'faggot', 'gay', 'lesbian', 'homo' or similar are being used as slurs at your school?"

1. Every day
2. Once or twice a week
3. Once or twice a month
4. Once or twice
5. Not at all
6. Don't know/prefer not to answer

To what degree do you feel comfortable telling your teachers if you experience challenges related to your sexual orientation?"

1. To a very high degree
2. To a high degree
3. To some degree
4. To a lower degree
5. Not at all
6. Don't know/prefer not to answer

To what degree do you feel comfortable telling your teachers if you experience challenges related to your gender identity?"

1. To a very high degree
2. To a high degree
3. To some degree
4. To a lower degree
5. Not at all
6. Don't know/prefer not to answer

"Have you experienced any unpleasant incidents, bullying, harassment, or violence based on your gender identity and/or gender expression at school or in your education? (you can mark more than one option)"

1. Yes, unwanted or over-the-top attention to my gender identity and/or gender expression
2. Yes, my appearance and/or gender has been commented on in a way I found uncomfortable or offensive
3. Yes, a lack of recognition of my gender identity and/or gender expression
4. Yes, faced with assumptions that people with my gender identity and/or gender expression does not exist
5. Other forms of bullying/harassment or violence
6. No, I have not experienced any uncomfortable experiences, bullying, violence or harassment because of my gender identity and/or gender expression
7. Don't know/prefer not to answer

"Have you experienced any unpleasant incidents, bullying, harassment, or violence based on your sexual orientation at school or in your education? (you can mark more than one option)"

1. Yes, unwanted or over-the-top attention to my sexual orientation
2. Yes, my sexuality has been commented on in a way I found uncomfortable or offensive
3. Yes, a lack of recognition of my sexual orientation
4. Yes, faced with assumptions that people with my sexual orientation does not exist
5. Other forms of bullying/harassment or violence
6. No, I have not experienced any uncomfortable experiences, bullying, violence or harassment because of my sexual orientation
7. Don't know/prefer not to answer

QUESTIONNAIRE AVAILABILITY	The distributed questionnaire is available upon request.
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Danish
LGBTI+ -RELATED REPORTING	Summary reports in Danish
HOMEPAGE	LGBT+-elevers trivsel og mentale sundhed samt oplevelser af mobning, vold, chikane og diskrimination - vive.dk
REFERENCES	Greve, Jane, Andersen, Didde B., Nicholajsen, Julie S., Kolodziejczyk, Christophe (2024). LGBT+-elevers trivsel og mentale sundhed samt oplevelser af mobning, vold, chikane og diskrimination – En kortlægning for grundskolen, ungdomsuddannelserne og FGU-institutionerne. København: VIVE – Det Nationale Forsknings- og Analysecenter for Velfærd. LGBT+-elevers trivsel og mentale sundhed samt oplevelser af mobning, vold, chikane og diskrimination Andersen, Didde B., Kolodziejczyk, Christophe, Greve, Jane (2024). Trivsel og mental sundhed blandt LGBT+-unge – En kortlægning for udvalgte områder i Danmark. København: VIVE – Det Nationale Forsknings- og Analysecenter for Velfærd. Trivsel og mental sundhed blandt LGBT+-unge – En kortlægning af trivsel og mental sundhed samt oplevelse af accept, tryghed og regler for god opførsel for udvalgte områder i Danmark Langt større mistrivsel blandt LGBT+-unge" [In English: Markedly Higher Mental Health Challenges Among LGBT+ Youth] (with Didde B. Andersen and Christophe Kolodziejczyk). <i>Unge Pædagoger</i> (4) 2024.

SCHOOL HEALTH PROMOTION STUDY	
COUNTRY	Finland
TARGET GROUP	Children and adolescents
FIRST DATA COLLECTION	Data have been collected from 8th and 9th graders in comprehensive schools since 1996, in upper secondary schools since 1999 and in vocational institutions since 2008. Children attending the 4th and 5th grades in comprehensive schools were included in 2017.
DATA COLLECTION FREQUENCY	Biennially; most recent 2025
CONTACT INFORMATION	kouluterveyskysely@thl.fi
LGBTI+-RELATED QUESTIONS IN THE SURVEY	Sexual orientation since 2017, Gender identity since 2019 What is your official gender? ◦ Boy ◦ Girl What gender do you identify as? ◦ Boy ◦ Girl ◦ Both ◦ Neither ◦ It varies Which of the following best describes your sexual orientation at this moment? ◦ Straight ◦ Bisexual or pansexual ◦ Gay ◦ None of these options describe me ◦ Not sure
QUESTIONNAIRE AVAILABILITY	Available at the survey's webpages
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Finnish, Swedish, English, Russian, Northern Sámi
LGBTI+-RELATED REPORTING	Summary reports in Finnish
HOMEPAGE	Finnish: https://thl.fi/kouluterveyskysely Swedish: https://thl.fi/sv/forskning-och-utveckling/undersokningar-och-projekt/enkaten-halsa-i-skolan English: https://thl.fi/en/research-and-development/research-and-projects/school-health-promotion-study

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Quality description <https://thl.fi/en/statistics-and-data/data-and-services/quality-and-statistical-principles/quality-descriptions/well-being-of-children-and-young-people-school-health-promotion-study>

Lehtonen J, Majlander S, Sares-Jäske L, Jehkoi A, Luopa P. Sukupuoli- ja seksuaalivähemmistöihin kuuluvien 8.-ja 9.-luokkalaisten hyvinvointi – Kouluterveyskysely 2019–2023. Tutkimuksesta tiiviisti 13/2024. Terveiden ja hyvinvoinnin laitos, Helsinki
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HEALTHY FINLAND SURVEY	
COUNTRY	Finland
TARGET GROUP	people aged 20 years and over
FIRST DATA COLLECTION	2022
DATA COLLECTION FREQUENCY	The Healthy Finland survey consists of different surveys which vary from year to year. In even-numbered years, a large-scale questionnaire survey is carried out to assess health, well-being and use of services, among other things. Every six years, the Healthy Finland Survey collects data for the European Health Interview Survey (EHIS). Every six years, the survey is accompanied by a comprehensive health check.
CONTACT INFORMATION	tervesuomi@thl.fi
LGBTI+-RELATED QUESTIONS IN THE SURVEY	Since 2022: "Do you belong to a gender minority or sexual minority?" • no • a gender minority (such as trans people or intersex people) • a sexual minority (such as gay men, lesbians, bisexuals, pansexuals or asexuals)
QUESTIONNAIRE AVAILABILITY	Available at the survey's webpages
LANGUAGE VERSIONS OF THE QUESTIONNAIRE	Finnish, Swedish, English, Russian
LGBTI+-RELATED REPORTING	Not published yet
HOMEPAGE	https://thl.fi/tutkimus-ja-kehittaminen/tutkimukset-ja-hankkeet/terve-suomi-tutkimus https://thl.fi/sv/forskning-och-utveckling/undersokningar-och-projekt/undersokningen-halsosamma-finland https://thl.fi/en/research-and-development/research-and-projects/healthy-finland-survey
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Jaana Suvisaari, research professor, Finnish Institute for Health and Welfare
Jukka Lehtonen, adjunct professor, University of Helsinki

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Nordic Council of Ministers/Publication Unit

Ved Stranden 18

DK-1061 Copenhagen

Denmark

pub@norden.org

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Nordens Hus

Ved Stranden 18

DK-1061 Copenhagen

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