

Study on the Attitudes of Staff of Key Social Services

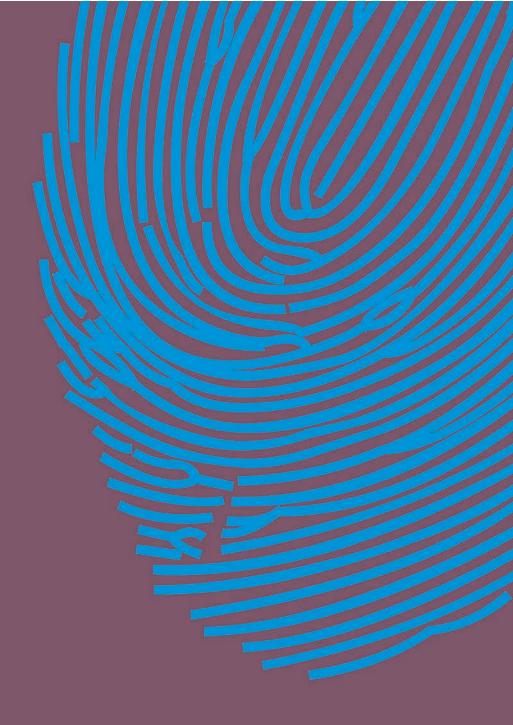
Study on the attitudes of medical and social workers and police towards LGBT people in Armenia, Belarus, Georgia, Kyrgyzstan, and North Macedonia conducted as Part of Regional Program "Right to Health"

Study on the Attitudes of Staff of Key Social Services in Five Countries of Central and Eastern Europe and Central Asia towards LGBT People, Conducted as Part of ECOM's Regional Program "Right to Health"

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Introduction

In 2017, a study was published on the attitudes of medical and social workers and police towards LGBT people in Armenia, Belarus, Georgia, Kyrgyzstan, and North Macedonia¹. The study was carried out as part of ECOM's regional program "Right to Health" and demonstrated a generally positive situation regarding the perception, social acceptance, and attitudes of staff of social services towards LGBT people. The goal of this current study is to conduct a follow-up assessment using the same tools to track the dynamics of this issue.

Over the last few years, the national LGBTOI movements of the countries of Central and Eastern Europe and Central Asia (CEECA) have begun to gain greater meaning and visibility, despite having previously lagged behind, due to political and historical reasons, in the international struggle for the recognition of the rights and the very existence of representatives of these communities. In 2019, for the first time in history, a Pride Festival took place in Tbilisi² (Georgia) and Skopje³ (North Macedonia). Meanwhile, the Kiev Equality March (Ukraine), which gathered about 8,000 participants in 2019 was recognized as the largest and most peaceful LGBT demonstration in the entire post-Soviet region (with the exception of the Baltic countries)4. Nevertheless, many similar initiatives still face substantial resistance, and often open aggression from so-called traditional and right-wing radical forces, which often operate under the auspices of religious and nationalist organizations. In particular, due to safety concerns and threats, organizers had to cancel and reschedule the LGBT Pride March in Tbilisi⁵. Meanwhile, the marches in Skopje and Kiev were accompanied by counter-protests by those with conservative views^{4,6}. The participants of the September 2019 LGBT parade in Sarajevo (Bosnia and Herzegovina) received threats of physical violence⁷, while the first pride march in the history of the city of Bialystok (Poland) was marred by extremely strong resistance and ended with dozens of physical attacks. According to witnesses, the opponents of the march, consisting of members of religious, ultra-right and neo-Nazi organizations, hunted down participants⁸.

Despite the significant progress of the last decade, one cannot ignore the significant setbacks that have occurred in a number of countries, including in the CEECA region. Recent events that have stirred public opinion include the persecution, torture, and murder of homosexual people in Chechnya (Russia)⁹, the detention of Polish activist, Elzbieta Podlesna, for distributing images of the Virgin Mary with a halo in the colors of the LGBT rainbow flag¹⁰, the murder of Russia activist, Elena Grigorieva, about whom information was published shortly before the incident on a website disclosing personal information about LGBT people and encouraging them to be attacked¹¹. Unfortunately, this is far from a complete list of the crimes and persecution to which representatives of the LGBT community are constantly subjected. Even coupled with lesser known cases that are nevertheless recorded by the monitoring systems of various human rights and LGBT organizations, this is unlikely to accurately depict the real oppression, which continues to be a reality for many people.

In recent years, LGBT issues have arose in the media more and more frequently, and have penetrated deeper into public discourse and political rhetoric. It is difficult to say whether this is a consequence of increased attention to this issue at the international level or the result of national LGBT movements. It is also difficult to answer the question of whether such an increase in interest has had a "trigger effect" on hate crimes, or whether they simply began to attract greater attention due to the increased visibility of LGBT people. One way or another, the actualization of this issue contributes to the fact that more and more studies related to the topic of LGBT people have been carried out. However, their results are often disappointing. In particular, the CEECA region still has a rather low level of acceptance of LGBT people, which can lead to discriminatory legislation, the refusal to investigate crimes based on SOGI, and high levels of stigma and discrimination.

According to a representative, all-Russian survey carried out by the "Levada Center" in 2019, only 3% of Russians have a positive view of LGBT people, while 56% have a more negative view. At the same time, 31% of respondents indicated that they would completely stop communicating with a person if they knew he or she was homosexual¹². On the other hand, a 2017 survey by the American analytical

organization, "Pew Research Center" aimed at studying the connections between religious and national identities, showed that 85% of Russians consider homosexuality to be immoral; among Armenians this was 98%; among Moldovans – 81%, Georgians – 90%, Belarusians – 85%; Ukrainians – 83%, and Poles – 48%. Among people aged 18 to 34, in Georgia only 3% accepted the idea of same-sex marriage, in Armenia – 4%, Moldova – 8%, Russia – 9%, Ukraine – 11%, and in Belarus – 22% ¹³. A survey by "Subversive Front" showed that, in North Macedonia, young LGBTI people are more than twice as likely to face discrimination as their heterosexual peers ¹⁴. Meanwhile, according to the results of a survey by "Kyrgyz Indigo", 84% of gay men surveyed in Kyrgyzstan had experienced physical attacks, while 35% had experienced sexual violence ¹⁵. According to a UNDP brochure, 92% of Albanians would not interact with LGBT people, 48% believe that homosexuality is a disease, and half think that it is imposed by the West. More than half of the representatives of the LGBT community in Albania, Serbia, and Bosnia and Herzegovina have suffered psychological or verbal abuse. 90% of LGBT people in Serbia claim that medical institutions do not adequately meet their needs ¹⁶. It is therefore not surprising that the risk of suicide among young LGBT people is three times higher than the risk of suicide among their heterosexual peers ¹⁷.

At the same time, positive trends regarding LGBT policies in some CEECA countries must be highlighted. Over the last few years, three countries of the region, Moldova, Georgia, and Ukraine, have managed to approve legal mechanisms to protect against SOGI-based discrimination. Although, these mechanisms have not yet been applied in practice, this is still a positive precedent indicating a shift towards the observance of human rights in these states. The Istanbul Convention was ratified by North Macedonia in 2018, and a new law was passed in 2019 according to which SOGI-based discrimination may be a ground for seeking political asylum. For the first time, transgender people were recognized as a separate target group in two Serbian public health strategies adopted in 2018¹⁸. These and other developments indicate the slow but steady progress occurring in some CEECA countries towards the recognition of LGBT people as equal members of society, whose rights must be respected on an equal basis as the rights of heterosexual and cisgender people.

In such a varied context, which, on the one hand, demonstrates the deep-rooted rejection of LGBT people in many CEECA countries, and, on the other hand, shows changes in society in the wake of the increasing openness of the community, both personal as well as professional attitudes towards LGBT people are extremely important. The professional groups of medical workers, social workers, and police are characterized by the fact that their services often become necessary in critical situations when a person needs help more than ever. People's well-being or even life may depend on such professionals. Denial of services or the provision of services of an inadequate quality can have significant consequences. It is therefore extremely important that medical workers, social workers and the police act in accordance with professional standards, rather than based on personal prejudices. Therefore, this study aims to determine the attitudes towards LGBT people of these professional groups in five CEECA countries, what affects these attitudes, and what changes have occurred in the two years since the first assessment.

Glossary

CEECA – Central and Eastern Europe and Central Asia

Degree (level) of social alienation – degree of socio-psychological acceptance/non-acceptance of one another

Degree of social distance – a concept that characterizes, firstly, the degree of social alienation of some people in relation to others, and, secondly, individuals' assessment of their position in society in comparison with others

Dependent variable – a variable that changes when another variable (or variables) changes

Discrimination – deliberate restriction of the rights of a part of the population, or of certain social groups on a specific basis (race, age, sex, nationality, religious beliefs, sexual orientation, health status, type of employment, etc.)

ECOM – Eurasian Coalition on Male Health

HIV – Human immunodeficiency virus

Homosexuality – one type of human sexual orientation, defined as an emotional, romantic, erotic or sexual attraction only and exclusively to persons of the same sex. Homosexuality occurs in both men and women

Independent variable (factor) – a variable whose presence and change affect the presence or change of other dependent variables

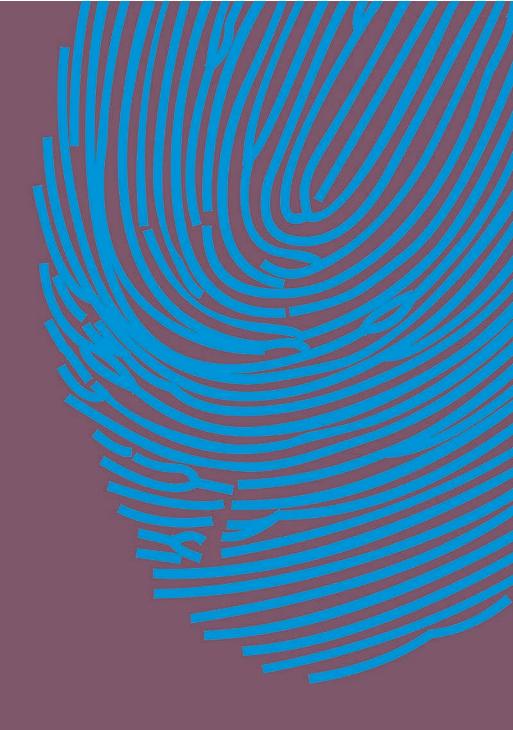
LGBT – lesbian, gay, bisexual, and trans people

Sexual orientation – one of the natural qualities of a human being, consisting of the orientation of the psychoemotional sphere of a person and his or her sexual needs towards representatives of exclusively the opposite biological sex (heterosexuality), exclusively the same biological sex (homosexuality), or towards both sexes (bisexuality)

Social distance – the measure of proximity with which a person is willing to interact with representatives of other social groups or categories.

SOGI – sexual orientation and gender identity

STI – sexually transmitted infection



Conclusions

The purpose of this study was to assess the attitudes of social and medical workers and police officers towards LGBT people in five CEECA countries: Armenia, Belarus, Georgia, Kyrgyzstan, and North Macedonia. As the survey showed, personal attitudes of respondents towards LGBT people are rather positive: the majority is of the opinion that homosexuality should be accepted in society, and assess their own attitudes towards LGBT people as positive or neutral. Social distance in relation to LGBT people is average, but greater for transgender people and less for homosexual men. Respondents show an average level of social alienation in relation to LGBT people and tend to rate their status as being the same as LGBT people. The majority believe that LGBT people should have the same rights in society as other citizens. However, significantly fewer respondents believe that homosexual couples should have the right to marry or to adopt and raise children. The sub-sample from Kyrgyzstan, as well as the professional groups of the police, and to a lesser extent, medical workers, demonstrate a slightly more negative personal attitude towards LGBT people in comparison to other countries or to social workers. Significant changes in comparison to the last assessment were not observed.

The second part of the study dealt with the question of how respondents assess the attitudes of their professional group towards LGBT people. In general, respondents are inclined to believe that their colleagues have a neutral attitude towards LGBT people, although the attitude of police is assessed as somewhat more negative in comparison to the other two professional groups. Most reported that they have never witnessed the alienation, discrimination, or condemnation of LGBT people on the part of their colleagues, however, this may be due to a reluctance to portray their professional group in a negative light.

The next section of the study was dedicated to the issue of the provision of services to LGBT people. In comparison to 2017, the proportion of social workers providing HIV and STI counseling services to LGBT people fell to 53% of respondents. More than half of the social and medical workers and around one-quarter of police reported that LGBT people turn to them personally for professional services.

Police officers receive practically no professional training on working with LGBT people, while one in five medical workers receives such training, and two-thirds of social workers. At the same time, around half of the respondents stated that they need and wish to receive additional training on working with LGBT people: social workers expressed the greatest willingness to receive additional training, while police expressed the least willingness. It is worth nothing that the more positive the attitude towards LGBT people of a particular professional group or country sub-sample, the more likely they are to state that they need or wish to have additional training.

Finally, the last section of this study dealt with factors affecting the attitudes of respondents towards LGBT people, including the degree of social distance in relation to LGBT people, the willingness of respondents to accept the idea of the equality between LGBT people and other citizens, and respondents' assessment of the attitudes of representatives of their own professional groups towards LGBT people. Factors common to all assessed countries affecting the degree of social distance include:

- age: the older the respondent the greater the degree of social distance in relation to LGBT people;
- affiliation with medical workers or the police rather than with social workers is linked to a higher degree of social distance in relation to LGBT people;
- type of locality: the smaller the locality, the greater the degree of social distance of the respondent in relation to LGBT people;
- the presence of a representative of the LGBT community in a person's close social circle is linked with a lower degree of social distance in relation to LGBT people.

In terms of the willingness of respondents to accept the idea of equality between LGBT people and other citizens, factors of influence common to all five CEECA countries include:

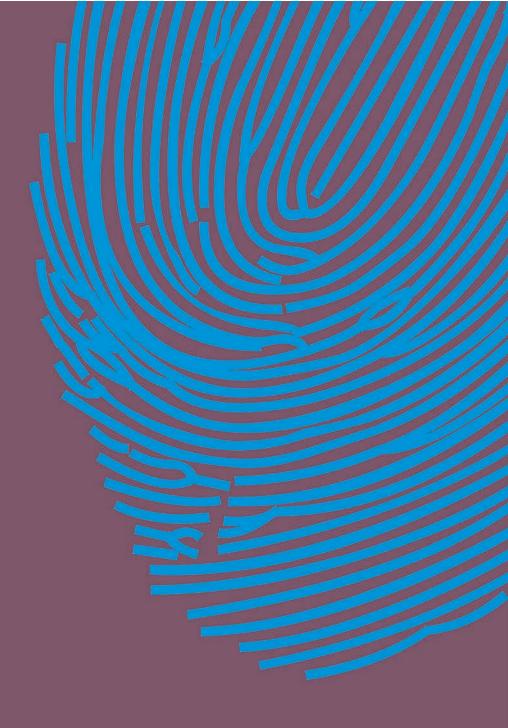
- religious affiliation: Muslims are less willing to accept the idea of the equality between LGBT people and other citizens;
- affiliation with medical workers and the police is linked with a lower willingness to accept the idea of equality between LGBT people and other citizens;
- type of locality: the larger the locality, the greater the chances of the acceptance of the idea of the equality between LGBT people and other citizens;
- the presence of a representative of the LGBT community in a person's close social circle is linked with greater acceptance of the idea of equality between LGBT people and other citizens.

In turn, the following factors affect respondents' assessments of the attitudes of representatives of their own professional groups towards representatives of the LGBT community:

- gender: women assess the attitudes of representatives of their professional group towards LGBT people more negatively;
- наличие higher education: respondents who completed higher education assess the attitudes of representatives of their professional group towards LGBT people more negatively;
- принадлежность affiliation with medical workers and the police is linked with a more negative assessment of the attitudes of representatives of one's professional group towards LGBT people;
- type of locality: the larger the locality, the less positive a respondent's assessment of the attitudes of representatives of their professional group towards LGBT people;
- the presence of a representative of the LGBT community in a person's close social circle is linked with a more positive assessment of the attitudes of representatives of one's professional group towards LGBT people.

Recommendation

- 1. Conduct sensitization trainings on SOGI and on working with LGBT people for social and medical workers, and, in particular, for police officers. Firstly, this would meet the professional needs and desires of many respondents. Secondly, this could have a positive effect on perceptions of and attitudes towards LGBT people.
- 2. Include sections on SOGI in compulsory training curricula for police and medical workers. Include sections on hate crimes in the compulsory training curricula for police.
- 3. Conduct a follow-up study in the five CEECA countries that includes the police in all country samples in order to obtain a more complete picture of the attitudes of these respondents towards LGBT people, since they demonstrated the most negative attitudes towards LGBT people, meaning they should be of key interest in the context of this study.



Methodological Section

The **goal** of the study is to examine the characteristics of the attitudes of the staff of three key services towards LGBT people in five CEECA countries (Armenia, Belarus, Georgia, Kyrgyzstan, and North Macedonia) and to determine factors influencing these attitudes.

Target groups of the study: representatives of key social services (medical and social workers and police) in Armenia, Belarus, Georgia, Kyrgyzstan, and North Macedonia.

Criteria for the inclusion of respondents in the study:

The participants of the study were representatives of groups, which:

- Directly provide services to LGBT people (medical and social workers);
- Are the first to meet with clients to resolve their issues/provide counseling/clarify circumstances of the situation (for police: patrol officers, investigators);
- Have no experience providing services to LGBT people (medical and social workers) 30%.

The **main criteria** for inclusion in the study included the following:

- Work experience in the health and social fields or in law enforcement agencies, no less than 2 years (100%);
- Work experience with the target group (LGBT people) (for social and medical workers) (70%);
- Lack of work experience with the target group (LGBT people) (for social and medical workers) (30%):
- Work in low- and mid-level positions (heads of institution were not included in the study as participants).

Recruiting of respondents was carried out through NGOs participating in the implementation of ECOM projects.

The **selection of respondents** from each group was carried out using the "snowball" method. For the first respondents, personal acquaintances or the recommendations of specialists who could suggest experts in the field being study were also used. A **limit** of no more than 10 respondents from the same institution was also established.

Research hypotheses:

- 1. The attitude towards homosexuality as a phenomenon among respondents of the five CEECA countries is primarily negative.
 - a. The majority of respondents do not agree that homosexuality is a sexual orientation that has the same right to exist as heterosexuality;
 - b. The majority of respondents believe that homosexuality should not be accepted in society.
- 2. Social workers have more positive attitudes towards homosexuality than law enforcement officers and medical workers.
- 3. The degree of social distance in relation to LGBT communities is equally high for all the CEECA countries studied.
 - a. Respondents are characterized by a high degree of social alienation in relation to representatives of the LGBT community;
 - b. Respondents tend to assess their own position in society as significantly higher than the position of representatives of the LGBT community.
- 4. The degree of social distance in relation to LGBT people in all five CEECA countries depends on the following factors:
 - a. Sex:
 - b. Age;
 - c. Higher education

- d. Religious affiliation;
- e. Affiliation with a professional group;
- f. Work experience;
- g. Type of locality;
- h. Presence of representatives of the LGBT community in one's close social circle.
- 5. The majority of respondents in all five CEECA countries are not willing to accept the idea of equality between that representatives of the LGBT community and other citizens.
 - a. The majority of respondents tend to believe that gays and lesbians should not enjoy the same rights as other citizens;
 - b. The majority of respondents tend to believe that homosexual couples should not have the right get married;
 - c. The majority of respondents tend to believe that homosexual couples should not have the right to adopt/raise children.
- 6. The willingness to accept the idea of equality between representatives of the LGBT and other citizens depends on the following factors:
 - a. Sex;
 - b. Age;
 - c. Higher education
 - d. Religious affiliation;
 - e. Affiliation with a professional group;
 - f. Work experience;
 - g. Type of locality;
 - h. Presence of representatives of the LGBT community in one's close social circle.
- 7. Respondents from all studied countries negatively assess the attitudes of their professional group towards LGBT people.
- 8. Respondents' assessments of the attitudes of their professional group towards LGBT people depends on the following factors in all five countries:
 - a. Sex;
 - b. Age;
 - c. Higher education
 - d. Religious affiliation;
 - e. Affiliation with a professional group;
 - f. Work experience;
 - g. Type of locality;
 - h. Presence of representatives of the LGBT community in one's close social circle.

Variables

	Dependent Variables	Type of Scale
Attitude towards	Understanding of homosexuality	Nominal
homosexuality	Opinion on the acceptability of homosexuality in society	Nominal
Attitude towards	Degree of social alienation in relation to: 1) gays; 2) lesbians; 3) bisexual men; 4) bisexual women; 5) trans people	Ordinal (Bogardus scale)
LGBT people	Assessment of one's own position in society	Ordinal
	Assessment of the position of representatives of the LGBT community in society	Ordinal
Willingness to accept the idea of	Degree of agreement with the idea of equality between representatives of the LGBT community and other citizens	Nominal
equality between representatives of the LGBT community and	Opinion about the right of homosexual couples to get married	Nominal
other citizens	Opinion about the right of homosexual couples to adopt/raise children	Nominal
Assessment of the attit group towards LGBT pe	Nominal	

Independent Variables	Type of Scale
Country	Nominal
Sex	Nominal (binary)
Age	Metric
Higher education	Nominal (binary)
Religious affiliation	Nominal
Affiliation with a professional group (police, medical workers, social workers)	Nominal
Work experience	Metric
Type of locality	Ordinal
Provision of HIV and STI counseling services to LGBT people (only for social and medical workers)	Nominal (binary)

Geography of the study: 5 countries of Central and Eastern Europe and Central Asia:

- Armenia;
- Belarus;
- Georgia;
- Kyrgyzstan;
- North Macedonia.

Study method: individual interviews using the "face-to-face" method.

Planned and implemented research sample

Nº	Country	Social workers	Medical workers	Police	Total
1	Armenia	60	110	0	170
2	Belarus	0	100	0	100
3	Georgia	70	80	0	150
4	Kyrgyzstan	80	120	100	300
5	North Macedonia	50	50	30	130
	Total	260	460	130	850

The survey was conducted using a specially designed electronic form. All interviewers involved in the study were provided with instructions tailored to the specifics of each country and the specifics of the target group. A separate toolkit was developed for each target group of the study. In total, three questionnaires were provided for surveying medical workers, social workers, and police officers.

The toolkit was developed in five languages: English, Russian, Armenian, Georgian, and Macedonian. A screening questionnaire was developed for each target group of the study to select respondents.

Ethical norms of the study. The project implementers and persons involved in processing the information were obliged with guaranteeing the confidentiality of the information received.

Before beginning work on the questionnaire, respondents had to verbally confirm their consent to participate in the study, which was then confirmed by the signature of the interviewer.

Participants were provided with explanations to any questions arising during the study. Potential respondents were also informed that their participation in the study was voluntary and that they could terminate their participation at any time.

It was also explained to participants that any information which they provide during the study would remain confidential (for example, data which could be used to identify a respondent would not be used, and only summary information would be used in the analytical report).

The working group of the study was comprised of representatives of ECOM and the Center for Social Expertise of the Institute of Sociology of the National Academy of Sciences of Ukraine. The working group:

- 1. agreed upon the protocol, sampling, and research tools;
- 2. approved the criteria for selecting respondents, the Skype training program for representatives of different countries, and the research tool.

Meetings of the Working Group were open to the participation of other stakeholders in accordance with the principle of transparency and to ensure democratic procedures. If necessary, it was envisaged to recruit consultants on specific issues.

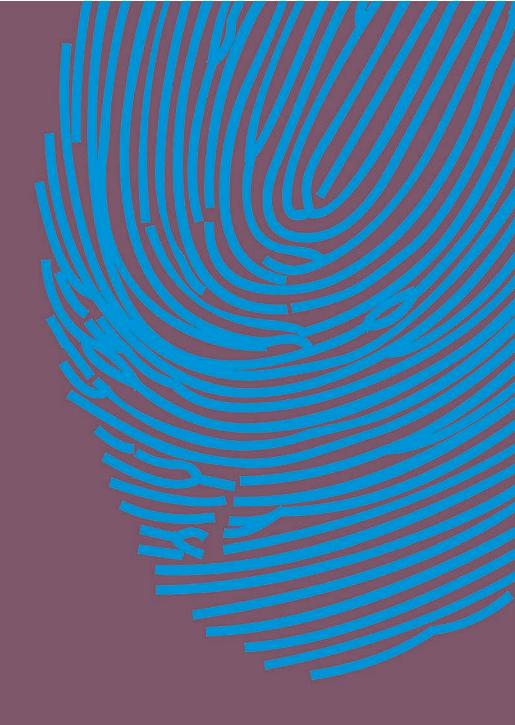
Staff training. A Skype training on data collection was developed in order to train researchers in the five countries and to ensure the accuracy and reliability of the information collected. Staff members of the Center for Social Expertise were involved in developing and conducting the trainings.

The Skype training covered issues such as: the research methodology, the planned sample, possible problems/difficulties that could influence the study, reporting on the results of the study, etc.

Monitoring data quality. The regional supervisor in the survey country reported weekly to the field stage manager (about conducting interviews, the number of those surveyed, and successes or difficulties). As a result of the implementation of the field stage, each interviewer and regional manager prepared a technical report on the form provided by the field stage manager, where they could record difficulties encountered during the survey and how such difficulties were resolved.

In order to avoid errors at the data entry stage, formal-logical conditions, corresponding to the questionnaire were provided by the programmer at the development stage of the data input layouts. Data verification was carried out during the processing of the data array: the elimination of duplicate questionnaires, the addition of data from questionnaires missed during data entry, and linear and cross-tabulation distribution of answers.

Data processing. The basis for interpreting the results was a statistical analysis of the array of data collected using the R program. A description of the data obtained was reworked into one-dimensional, two-dimensional, and multi-dimensional distributions of respondents' answers to the questionnaire questions according to the hypotheses put forward.



Section 1.
Socio-demographical characteristics of respondents in five CEECA countries

Before proceeding to a direct examination and analysis of the results of the study, it is worth establishing a socio-demographical portrait of the respondents, and describing how it differs from the portrait of respondents from 2017.

Firstly, the total number of respondents increased by 164 people. The samples of all countries increased with the exception of Belarus, where slightly fewer people were surveyed in 2019 than in the previous survey, mainly due to a lack of respondents in the social workers category. The number of respondents in the sub-samples of each of the professional groups increased, with the exception of medical workers in Belarus. As in 2017, assessments among law enforcement officers were only carried out in Kyrgyzstan and North Macedonia¹. More detailed information on the distribution of respondents is presented in Table 1.

Table 1. Distribution of respondents by professional group and country by year

	_		Professional group							
Country	Total		Medical workers		Social workers		Police			
	2017	2019	2017	2019	2017	2019	2017	2019		
Armenia	130	170	73	110	57	60	-	-		
Belarus	115	100	101	100	14	-	-	-		
Georgia	129	150	70	80	59	70	-	-		
Kyrgyzstan	249	326	100	120	69	100	80	106		
North Macedonia	89	130	49	50	28	50	12	30		
Total	712	876	393	460	227	280	92	136		

As follows from Figure 1, in the 2019 sample, there was a statistically significant prevalence of women among respondents (62%). A similar trend can also be observed among two professional groups. As we see, the number of women among medical workers and social workers is significantly higher than the number of men (72% and 72% women respectively); the opposite situation is observed among police officers, where only 6% are women.

The gender distribution of the 2019 sample is generally consistent with the 2017 sample. A significant difference is observed only with respect to medical workers: the gap between women and men in this profession in 2019 was statistically higher than in 2017.

¹ It should be emphasized that in a number of country sub-samples, the total number of respondents does not exceed one hundred people. In order to prevent data manipulation when converting figures to percentages, we tried to also indicate the absolute number from which the percentage was obtained. This should be taken into account when reading figures provided as percentages.

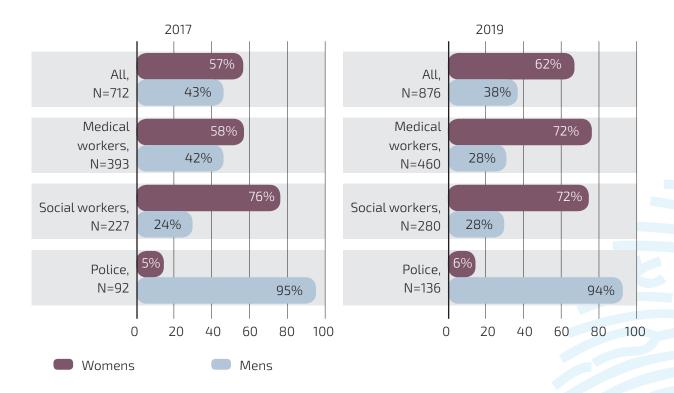


Figure 1. Distribution of respondents by professional group and gender by year

If we consider the gender structure by country (Table 2), we see that the number of women is statistically significantly higher than the number of men in the general samples of Armenia, Georgia, North Macedonia, and Belarus. However, in the latter case, this difference may be random, due to the intersection of confidence intervals. The opposite situation is observed in Kyrgyzstan, where the smaller percentage of women can be explained by the purely male representation in the police subsample. There is a robust tendency for women to dominate among medical workers (79% in Armenia, 64% in Georgia, 81% in Kyrgyzstan, 80% in North Macedonia) and among social workers (95% in Armenia, 81% in Georgia, 80% in North Macedonia). In addition to Kyrgyzstan, whose law enforcement agencies are completely represented by male respondents, police officers were only surveyed in North Macedonia, where the proportion of women was 27%.

If we compare the general structure by country with the values from 2017, we see that they are statistically proportional. When examining professional groups by country, significant differences are observed among medical workers in Kyrgyzstan, where more women were surveyed in 2019, and among social workers in Georgia, where the opposite occurred.

As for law enforcement agencies, as mentioned above, the Kyrgyz sample from 2019 consisted solely of men, which was 6% higher than the previous assessment. On the other hand, the Macedonian sample from 2019 is more diverse in comparison to 2017, when it consisted solely of male respondents: the proportion of women in the 2019 sample was 28%. However, the extremely limited number of the subsample of police officers from North Macedonia should be taken into account when using the data.

Table 2. Distribution of respondents by professional group, gender, and country by year (95% confidence intervals are indicated in parentheses)

			N=712		2019,	N=876
Country	Prof. group	Ger	nder	Prof. group	Gei	nder
		Women	Men		Women	Men
	Total, N=130	77% (70; 84)	23% (16; 30)	Total, N=170	85% (79; 90)	15% (10; 21)
Armenia	Medical workers, N=73	74% (64; 84)	26% (16; 36)	Medical workers, N=110	79% (71; 87)	21% (13,3; 28,5)
	Social workers, N=57	81% (71; 91)	19% (9; 29)	Social workers, N=60	95% (89; 100)	5% (0; 11)
	Police, N=0	-	-	Police, N=0	_	-
	Total, N=115	40% (31; 49)	60% (51; 69)	Total, N=100	58% (48; 68)	42% (32; 52)
Belarus	Medical workers, N=101	39% (29; 49)	61% (51; 71)	Medical workers, N=100	58% (48; 68)	42% (32; 52)
	Social workers, N=14	50% (24; 76)	50% (24; 76)	Social workers, N=0	_	-
	Police, N=0	-	-	Police, N=0	-	-
	Total, N=129	73% (65; 81)	27% (19; 35)	Total, N=150	72% (65; 79)	28% (21; 35)
Georgia	Medical workers, N=70	53% (41; 65)	47% (35; 59)	Medical workers, N=80	64% (53; 74)	36% (26; 47)
_	Social workers, N=59	97% (93; 100)	3% (0; 7)	Social workers, N=70	81% (72; 91)	19% (9; 28)
	Police, N=0	-	-	Police, N=0	_	-
	Total, N=249	42% (33; 51)	58% (49; 67)	Total, N=326	45% (39; 50)	55% (50; 61)
V. was racks to	Medical workers, N=100	63% (54; 72)	37% (28; 46)	Medical workers, N=120	81% (74; 88)	19% (12; 26)
Kyrgyzstan	Social workers, N=69	52% (40; 64)	48% (36; 60)	Social workers, N=100	48% (38; 58)	52% (42; 62)
	Police, N=80	6% (1; 11)	94% (89; 99)	Police, N=106	0%	100%
	Total, N=89	67% (57; 77)	33% (23; 43)	Total, N=130	68% (60; 76)	32% (24; 40)
North	Medical workers, N=49	69% (56; 82)	31% (18; 44)	Medical workers, N=50	80% (69; 91)	20% (9; 31)
Macedonia	Social workers, N=28	93% (84; 100)	7% (0; 16)	Social workers, N=50	80% (69; 91)	20% (9; 31)
	Police, N=12	0%	100%	Police, N=30	27% (11; 43)	73% (57; 89)

When examining the age of respondents, we see that the median value for the entire sample is 37 years, which is one year less than in the 2017 sample. The median age of medical workers, which is the highest among the three professional groups, is 42 years, for social workers it is 35 years, and for law enforcement officers it is 29 years. Compared with the previous assessment, a significant difference is only observed in the case of social workers whose median age in 2017 was 32 years.

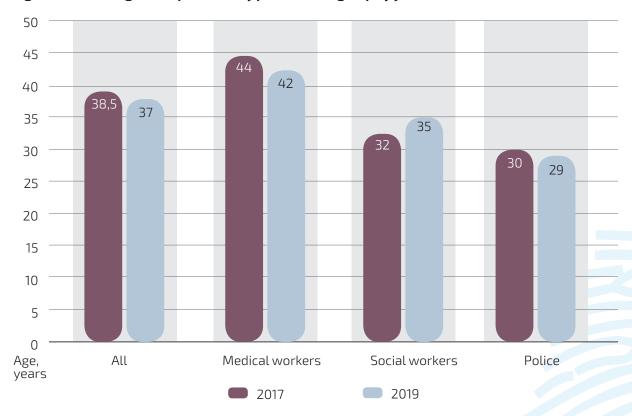


Figure 2. Median age of respondents by professional group by year

As in the general sample, medical workers had the highest value for age among professional groups in all countries, with the exception of North Macedonia, where this sub-sample has the lowest age. Social workers are in the middle in terms of age. As for law enforcement officers, this sub-sample in Kyrgyzstan had the lowest age out of all of the groups, while in North Macedonia, this group corresponds to the median age for the country.

We see that the median age of social workers in Kyrgyzstan is significantly higher than in 2017, and the median age of medical workers in North Macedonia is significantly lower than in 2017. In other cases, the differences are not significant. More detailed information is presented by country in Table 3.

Table 3. Distribution of respondents by age and professional group by year: information by country (95% confidence intervals are indicated in parentheses)

Country.	2017		2019			
Country	Prof. group	oup Median age Prof. gro		Median age		
	Total, N=130	39,5	Total, N=170	42 (40; 44)		
Armenia	Medical workers, N=73	46 (42,5; 49,5)	Medical workers, N=110	48 (46; 50)		
Aimema	Social workers, N=57	30 (28; 33)	Social workers, N=60	33,5 (31,5; 35,5)		
	Police, N=0	_	Police, N=0	-		
	Total, N=115	41,5	Total, N=100	39 (37; 41)		
Belarus	Medical workers, N=101	41,5 (39,5; 43)	Medical workers, N=100	39 (37; 41)		
Detaius	Social workers, N=14	42,5 (35,5; 46)	Social workers, N=0	-		
	Police, N=0	-	Police, N=0	-		
	Total, N=128	39,5	Total, N=150	39 (37; 41)		
Georgia	Medical workers, N=69	47 (44; 50,5)	Medical workers, N=80	44,5 (42; 47)		
ueorgia	Social workers, N=59	31,5 (28,5; 33,5)	Social workers, N=70	32 (29,5; 34,5)		
	Police, N=0	-	Police, N=0	-		
	Total, N=249	36	Total, N=326	33,5 (32,5; 34,5)		
Kyrgyzstan	Medical workers, N=100	44,5 (43; 46)	Medical workers, N=120	40 (38,5; 41,6)		
Kyrgyzstan	Social workers, N=69	30 (27,5; 33)	Social workers, N=100	35,5 (33,5; 37,5)		
	Police, N=80	29,5 (28,5; 30,5)	Police, N=106	28 (27; 29)		
_	Total, N=89	39	Total, N=130	37 (35,5; 38,5)		
North	Medical workers, N=49	43 (40; 46)	Medical workers, N=50	33 (30; 36)		
Macedonia	Social workers, N=28	35,5 (33; 39)	Social workers, N=50	38 (36; 40)		
	Police, N=12	34,5 (31; 40)	Police, N=30	37 (34; 40)		

Taking the gender structure of the professional groups into account, we see that the sample generally includes older women and younger men.

As follows from the scale diagram (Figure 3), despite the fact that the youngest, both among women and among men, were twenty-one year-olds, the age range of women, even taking into account the outlier, is four years higher than the age range for men. In addition, the median values (39 years for women and 33 years for men) and the values of the first and third quartiles of the two groups differ significantly; in other words, while 50% of all "middle-aged" women in the age sample are in the age group 32—48 years old, among men, this value lies in the interval 28—42 years old.

Figure 3. Age range of women and men in the sample

In terms of the higher education of respondents, we see that in general this value is quite high, reaching 89% (Figure 4). The most "educated" professional group is medical workers (among them 95% of respondents completed higher education), followed by social workers (84%), and the police (78%). The high rate of higher education among medical workers is probably explained by the specifics of their profession, access to which often requires special training.

Mens

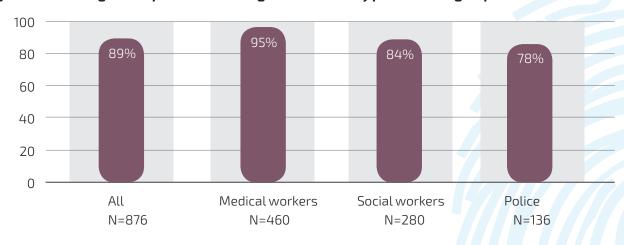


Figure 4. Percentage of respondents with higher education by professional group

Womens

Table 4 provides more detailed information on the level of higher education by professional group and country. It is noteworthy that, on average in the sample, the percentage of higher education is "underestimated" by the indicators of Kyrgyzstan and North Macedonia, where 77% and 85% of respondents completed higher education respectively. In the other three countries, all or almost all respondents completed higher education (100% in Armenia and Georgia, and 99% in Belarus).

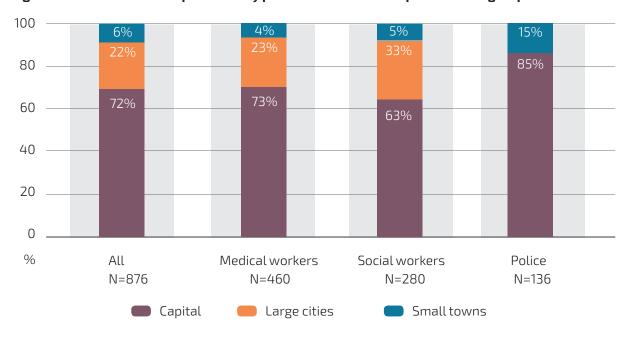
In Kyrgyzstan, social workers have the lowest education level (55%), in North Macedonia, it is the police (78%). Here, however, we should once again point out the extremely small number of police respondents from North Macedonia and the related width of the confidence interval. In general, the education level of the professional groups of these two countries ranges from 55% to 88%.

Table 4. Percentage of respondents with higher education by professional group and country (95% confidence intervals are indicated in parentheses)

Country	Professional group	With higher education		
	Total, N=170	100%		
Armenia	Medical workers, N=110	100%		
Armema	Social workers, N=60	100%		
	Police, N=0	-		
	Total, N=100	99% (97; 100)		
Belarus	Medical workers, N=100	99% (97; 100)		
belarus	Social workers, N=0	-		
	Police, N=0	-		
	Total, N=150	100%		
Coorgin	Medical workers, N=80	100%		
Georgia	Social workers, N=70	100%		
	Police, N=0	-		
	Total, N=326	77% (72; 82)		
Vyggggetan	Medical workers, N=120	88% (83; 94)		
Kyrgyzstan	Social workers, N=100	55% (45; 65)		
	Police, N=106	85% (78; 92)		
	Total, N=130	85% (78; 91)		
North Macedonia	Medical workers, N=50	88% (79; 97)		
ויטו נוו ויומנפטטווומ	Social workers, N=50	84% (74; 94)		
	Police, N=30	78% (63; 93)		

Next, we consider the type of locality in which the respondents live. A large part of the respondents of the sample live in capital cities (72%), one-fifth in large cities (22%), and only 6% in small towns. The largest proportion of those living in large cities is exhibited by social workers (33%), while among police this category is 0%. At the same time, police officers exhibit the highest proportion of those living in small towns compared to the other professional groups (15%).

Figure 5. Distribution of respondents by place of residence and professional group

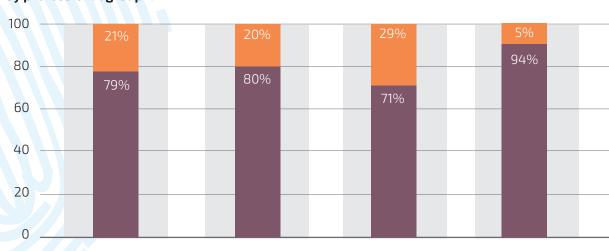


If we look at the proportion of respondents' place of origin by country and occupation group, there is no clear trend. However, it can be noted that most groups, with the exception of Belarus and social workers in North Macedonia, are concentrated in the capital cities of countries. The proportion of those living in small towns ranges from 0% (social workers in Georgia and North Macedonia, as well as Macedonian police and medical workers) to 20% (police in Kyrgyzstan). Most often, medical workers, with the exception of Belarus as mentioned above (80% in Armenia, 82.5% in Georgia, 93.3% – in Kyrgyzstan, 100% in North Macedonia) and police (80% in Kyrgyzstan and 100% in North Macedonia) reside in the capital city, while social workers do so less often (70% in Armenia, 67% in Georgia, 73% in Kyrgyzstan, 26% in North Macedonia). However, it should be noted that such a characteristic depends to a larger extent on the methodological implementation of the study than on the randomness of the sample.

Table 5. Distribution of respondents by place of residence and professional group by country (95% confidence intervals are indicated in parentheses)

Country	Prof. group	Capital city	Large city	Small town
	Total, N=170	77% (70; 83)	19% (13; 25)	4% (1; 7)
Armenia	Medical workers, N=110	80% (73; 87)	18% (11; 25)	2% (0; 4)
	Social workers, N=60	70% (58; 82)	22% (11; 32)	8% (1; 15)
	Police, N=0	-	-	-
	Total, N=100	22% (14; 30)	73% (64; 82)	5% (1; 9)
Belarus	Medical workers, N=100	22% (14; 30)	73% (64; 82)	5% (1; 9)
	Social workers, N=0	-	-	_
	Police, N=0	-	-	-
	Total, N=150	75% (68; 82)	23% (16; 29)	2% (0; 4)
Georgia	Medical workers, N=80	83% (74; 91)	14% (6; 21)	4% (0; 8)
_	Social workers, N=70	67% (56; 78)	33% (22; 44)	0%
	Police, N=0	-	-	///-
	Total, N=326	83% (79; 90)	5% (3; 8)	12% (8; 15)
V. wew restan	Medical workers, N=120	93% (89; 98)	0%	7% (2; 11)
Kyrgyzstan	Social workers, N=100	73% (64; 82)	18% (11; 25)	9% (3; 15)
	Police, N=106	80% (73; 88)	0%	20% (12; 27)
	Total, N=130	71% (64; 79)	22% (15; 29)	6% (2; 10)
North	Medical workers, N=50	100%	0%	0%
Macedonia	Social workers, N=50	26% (19; 33)	74% (67; 81)	0%
	Police, N=30	100%	0%	0%

Religiousness and the religious affiliation of respondents is important in the context of the issue being studied. 79% of respondents indicated that they are religious. Social workers are the least religious (71%), followed by medical workers (80%), followed by the police (94%).



Social workers

N=280

Police

N=136

Figure 6. Distribution of respondents' answers to the question "Are you religious"? by professional group

Medical workers

N=460

Yes

All

N=876

%

If we consider the religious affiliation of respondents (Table 6), we can distinguish four main groups: Orthodox (31% of the general sample), Muslims (26%), non-religious (21%) and those affiliated with the Apostolic church (13%). In addition, the sample includes a small number of people identifying as Catholics (6%), Protestants (1%), as well as those who consider themselves to be religious but who are not affiliated with a particular religion (7%). It should be noted that, in comparison with the 2017 sample, the number of Orthodox and Catholics among the respondents decreased significantly (40% and 6% in 2017 respectively). The distribution of representatives of the remaining groups is statistically consistent with the distribution from 2017. It is not possible to measure the dynamics of those affiliated with the Apostolic church, since they were not considered as a separate category during the previous assessment.

No

If we look at the values within professional groups, we see that the distribution among medical workers and social workers as a whole repeats the general trend, with a prevalence of Orthodox (33% for medical workers and 36% for social workers), non-religious (20% and 29% respectively), Muslims (18% and 16%) and representatives of the Apostolic church (18% and 10%). However, such a distribution is not repeated in the sub-group of law enforcement officers, in which the overwhelming majority are Muslims (76%), and only a tenth are Orthodox. It should be emphasized that this particularity stems from the fact that police officers were only surveyed in two countries (Kyrgyzstan and North Macedonia), where Islam is one of the most widespread religions (Table 7).

As for the differences between professional sub-samples from 2017 and 2019, the proportion of Catholics among social workers and non-religious people among medical workers decreased, while the percentage of Muslims among medical workers increased. The rest of the sample corresponds to the trends from the previous assessment.

Table 6. Religious affiliation of respondents by professional group and year (95% confidence intervals are indicated in parentheses) $\frac{1}{2} \left(\frac{1}{2} + \frac{1}{2} +$

Bulliotic .	То	tal	Medical	Medical workers		workers	Police		
Religious affiliation	2017, N= 711	2019, N=874	2017, N=393	2019, N=460	2017, N=227	2019, N=278	2017, N=92	2019, N=136	
Orthodox	40% (36; 44)	31% (28; 34)	42% (37; 47)	33% (29; 37)	47% (41; 53)	36% (30; 42)	10% (4; 16)	12% (7; 17)	
Catholic	6% (4; 8)	2% (1; 3)	4% (2; 6)	3% (1; 5)	11% (7; 15)	1% (0; 2)	1% (0; 3)	1% (0; 3)	
One of the Protestant churches	1% (0; 2)	0%	4% (1; 7)						
Islam	21% (18; 24)	26% (23; 29)	10% (7; 13)	18% (15; 21)	16% (11; 21)	16% (12; 20)	82% (74; 90)	76% (69; 83)	
Apostolic church	-	13% (11; 15)	-	18% (15; 21)	-	10% (7; 13)	-	0%	
Other	2% (1; 3)	0%	4% (2; 6)	0%	0%	0%	0%	0%	
Religious but does not affiliated with a specific religion	7% (5; 9)	6% (4; 8)	10% (7; 13)	7% (5; 9)	4% (1; 7)	7% (4; 10)	3% (0; 7)	1% (0; 3)	
Not religious	23% (20; 26)	21% (18; 24)	29% (25; 33)	20% (16; 24)	21% (16; 26)	29% (24; 34)	3% (0; 7)	5% (1; 9)	
Difficulty answering	0%	0%	0%	0%	0%	0%	1% (0; 3)	0%	

Table 7. Religious affiliation of respondents by country and professional group by year (95% confidence intervals are indicated in parentheses)

	2017									
					Religious a	affiliation				
Country	Professional group	Orthodox	Catholic	One of the Protestant churches	Islam	Other	Religious but not affiliated with a particular religion	Not religious	Difficulty answering	
	Total, N=130	5% (1; 9)	16% (10; 22)	0%	0%	11% (6; 16)	20% (13; 27)	48% (39; 57)	0%	
Armenia	Medical workers, N=73	0%	0%	0%	0%	19% (10; 28)	26% (16; 36)	55% (44; 66)	0%	
Ari	Social workers, N=57	11% (3; 19)	37% (25; 49)	0%	0%	0%	12% (4; 20)	40% (27; 53)	0%	
	Police , N=0	-	-	-	-	-	-	-	-	
	Total , N=115	46% (37; 55)	17% (10; 24)	0%	0%	0%	1% (0; 3)	37% (28; 46)	0%	
Belarus	Medical workers , N=101	47% (37; 57)	15% (8; 22)	0%	0%	0%	0%	39% (29; 49)	0%	
Bel	Social workers, N=14	43% (17; 69)	29% (5,2; 52,8)	0%	0%	0%	7% (0; 20,4)	21% (0; 42)	0%	
	Police , N=0	-	-	-	-	-	-	-	-	
	Total , N=129	89% (84; 94)	0%	1% (0; 3)	0%	0%	0%	10% (5; 15)	0%	
Georgia	Medical workers, N=70	91% (84; 98)	0%	1% (0; 3)	0%	0%	0%	7% (1; 13)	0%	
8	Social workers, N=59	86% (77; 95)	0%	0%	0%	0%	0%	14% (5; 23)	0%	
	Police , N=0	-	-	-	-	-	-	-	-	
	Total , N=248	12% (8; 16)	0%	1% (0; 2)	58% (52; 64)	0%	9% (5; 13)	19% (14; 24)	0%	
Kyrgyzstan	Medical workers, N=99	14% (7; 21)	0%	0%	35% (26; 44)	1% (0; 3)	20% (12; 28)	29% (20; 38)	0%	
Kyrgy	Social workers, N=69	25% (15; 35)	0%	3% (0; 7)	52% (40; 64)	0%	0%	20% (11; 29)	0%	
	Police , N=80	0%	0%	0%	91% (85; 97)	0%	4% (0; 8)	4% (0; 8)	1% (0; 3)	
<u>a</u> .	Total , N=89	89% (83; 95)	2% (0; 5)	1% (0; 3)	8% (2; 14)	0%	0%	0%	0%	
cedon	Medical workers, N=49	90% (81; 98)	2% (0; 6)	0%	8% (0; 16)	0%	0%	0%	0%	
North Macedonia	Social workers, N=28	93% (83; 100)	0%	0%	0%	0%	0%	0%	0%	
2	Police, N=12	75% (51; 99)	8% (0; 23)	0%	17% (0; 38)	0%	0%	0%	0%	

	2019									
				Re	ligious affili	ation				
Country	Professional group	Orthodox	Catholic	One of the Protestant churches	Islam	Apostolic church	Religious but not affiliated with a particular religion	Not religious		
	Total , N=170	2% (0; 4)	0%	0%	0%	65% (58; 72)	4% (1; 7)	29% (22; 36)		
Armenia	Medical workers , N=110	3% (0; 6)	0%	0%	0%	76% (68; 84)	5% (1; 9)	15% (8; 22)		
Arı	Social workers, N=60	0%	0%	0%	0%	45% (32; 58)	0%	55% (42; 68)		
	Police , N=0	-	-	-	-	-	-	-		
	Total , N=100	31% (22; 40)	15% (8; 22)	2% (0; 5)	1% (0; 3)	0%	9% (3; 15)	42% (32; 52)		
Belarus	Medical workers , N=100	31% (22; 40)	15% (8; 22)	2% (0; 5)	1% (0; 3)	0%	9% (3; 15)	42% (32; 52)		
Bela	Social workers, N=0	-	-	-	-	-	-	-		
	Police , N=0	-	-	-	-	-	-	-		
	Total , N=150	83% (77; 89)	0%	0%	1% (0; 3)	0%	6% (2; 10)	10% (5; 15)		
Georgia	Medical workers, N=80	84% (76; 92)	0%	0%	1% (0; 3)	0%	5% (0; 10)	10% (3; 17)		
25	Social workers, N=70	81% (72; 90)	0%	0%	1% (0; 3)	0%	7% (1; 13)	10% (3; 17)		
	Police , N=0	-	-	-	-	-	//-(//			
	Total , N=326	11% (8; 14)	0%	1% (0; 2)	67% (62; 72)	0%	6% (3; 9)	14% (10; 18)		
Kyrgyzstan	Medical workers, N=120	13% (7; 19)	0%	0%	63% (54; 72)	0%	8% (3; 13)	16% (10; 23)		
Kyrgy	Social workers, N=100	20% (12; 28)	0%	3% (0; 6)	41% (31; 51)	0%	10% (4; 16)	26% (17; 35)		
	Police , N=106	0%	0%	0%	97% (94; 100)	0%	2% (0; 5)	1% (0; 3)		
onia	Total , N=130	58% (49; 67)	3% (0; 6)	6% (2; 10)	5% (1; 9)	0%	5% (1; 9)	24% (17; 31)		
Jaced	Medical workers, N=50	72% (59; 84)	0%	2% (0; 6)	6% (0; 13)	0%	4% (0; 9)	16% (6; 26)		
North Macedonia	Social workers, N=50	46% (32; 60)	4% (0; 9)	2% (0; 6)	6% (0; 13)	0%	8% (1; 15)	34% (21; 47)		
Z	Police , N=30	53% (35; 71)	7% (0; 16)	20% (6; 34)	0%	0%	0%	20% (6; 34)		

When considering the characteristics of religious affiliation by country, the obvious tendency for certain religions to dominate in countries where they are widespread should be noted. Among respondents in Armenia, the absolute majority are affiliated with the Armenian Apostolic Church (65% of all respondents), in Georgia and North Macedonia – with Orthodoxy (83% and 58% respectively), in Kyrgyzstan, most are Muslims (67%), and in Belarus, the majority consider themselves to be non-religious (42%) and Orthodox (31%). The percentage of non-religious people in the remaining countries varies: it is 10% in Georgia, 14% in Kyrgyzstan, 24% in North Macedonia, and 29% in Armenia.

The percentage of non-religious people in all countries is the highest among social workers (55% in Armenia, 26% in Kyrgyzstan, and 34% in North Macedonia). Georgia is an exception. The percentage of non-religious people among social workers corresponds to the percentage of non-religious people in the country as a whole and among medical workers (10%).

When considering the differences between the samples of different years, the following trends must be pointed out: the significant decrease in the percentage of non-religious people and those who consider themselves to be religious but who are not affiliated with a particular religion in Armenia among the entire sample, as well as among medical workers; the increase in the percentage of religious people who are not affiliated with a particular religion in Belarus; an increase in Muslim medical workers in Kyrgyzstan; a decrease in the percentage of Orthodox among the entire sample of North Macedonia, as well as among the sub-sample of social workers, probably due to a sharp jump in the level of non-religious among the general Macedonian sample, as well as among all sub-samples. In addition, in 2019, the number of representatives of Protestant denominations of Christianity increased among the police of North Macedonia, while there were no respondents affiliated with Islam.

We now turn to the last variable of the socio-demographical section, work experience. The median work experience among all respondents is 10 years, which is one and a half years less than observed during the previous assessment. As was the case in 2017, medical workers are the most "experienced" (16 years median work experience in comparison to 17 years in 2017), followed by the police (8 and 7.5 years respectively) and social workers (5.5 and 6 years). There are no significant differences in values by year.

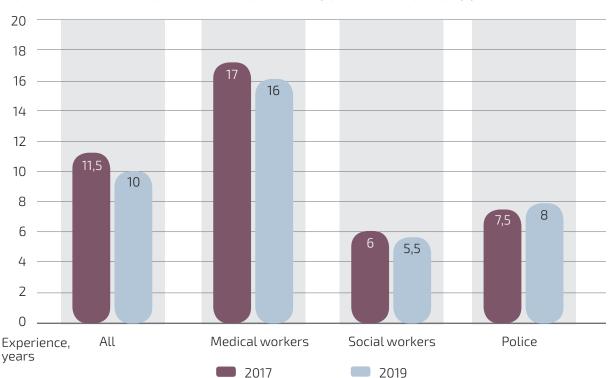


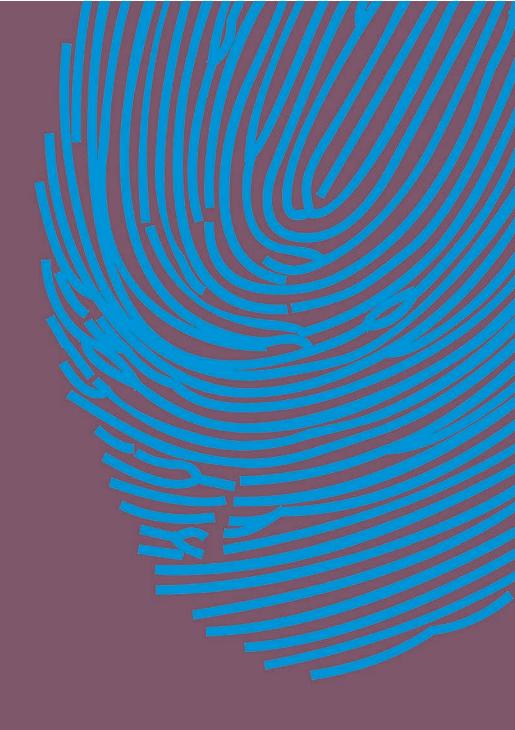
Figure 7. Median work experience of respondents by professional group by year

In a detailed examination of the median work experience by country, we see a repetition of the situation described above: medical workers have the greatest amount of work experience, ranging from 11.5 years in North Macedonia to 25.5 years in Armenia, followed by the police (the median work experience of law enforcement officers in Kyrgyzstan is 7.5 years, and in North Macedonia, 9.5 years) and social workers (median work experience from 5 years in Armenia, Georgia, and Kyrgyzstan to 9 years in North Macedonia). As during the previous assessment, the median work experience of medical workers is extremely high in comparison with the other professional groups, which can be explained by the higher age of this sub-group in the sample. There is no statistically significant difference between the measurement values from the two assessments.

Table 8. Distribution of respondents by median work experience, professional group, and country by year (95% confidence intervals are indicated in parentheses)

Country	2017		2019		
	Professional group	Work experience, years	Professional group	Work experience, years	
Armenia	Total, N=130	13,5	Total, N=170	14,5 (12,5; 16,5)	
	Medical workers, N=73	21,5 (17,5; 25)	Medical workers, N=110	25,5 (23,5; 27,5)	
	Social workers, N=57	7 (6; 8,5)	Social workers, N=60	5 (4; 6)	
	Police, N=0	-	Police, N=0	-	
Belarus	Total, N=115	17	Total, N=100	15 (13; 17)	
	Medical workers, N=101	17,5 (16,0; 19,5)	Medical workers, N=100	15 (13; 17)	
	Social workers, N=14	11 (7,5; 14,5)	Social workers, N=0	-	
	Police, N=0	_	Police, N=0	-	
Georgia	Total, N=129	9	Total, N=150	10 (8,5; 11,5)	
	Medical workers, N=70	14 (11,5; 16,5)	Medical workers, N=80	17 (15; 19)	
	Social workers, N=59	5 (4; 5,5)	Social workers, N=70	5 (4; 6)	
	Police, N=0	_	Police, N=0	-	
	Total, N=249	10	Total, N=326	8 (7; 9)	
Kyrgyzstan	Medical workers, N=100	17 (15,5; 19)	Medical workers, N=120	15 (13,5; 16,5)	
	Social workers, N=69	4 (3,5; 5)	Social workers, N=100	5 (4; 6)	
	Police, N=80	8 (7; 9)	Police, N=106	7,5 (6,5; 8,5)	
North Macedonia	Total, N=89	10	Total, N=130	10,5 (9; 11)	
	Medical workers, N=49	14 (11; 17,5)	Medical workers, N=50	11,5 (8,5; 14,5)	
	Social workers, N=28	7,5 (6; 9,5)	Social workers, N=50	9 (7; 11)	
	Police, N=12	5 (3,5; 9)	Police, N=30	9,5 (8; 11)	

In summation, it can be noted that, in 2019, slightly more respondents were surveyed than during the 2017 assessment. Three-fifths of the sample are women, who are proportionally larger in the sub-samples of medical and social workers. However, the police are almost entirely composed of male respondents. The oldest professional group is medical workers, followed by social workers, and the police. Thus, the sample consists of older women and younger men. The respondents are characterized by a rather high level of education. The most "educated" are medical workers, followed by social workers, and police. Education indicators are "underestimated" by the values of Kyrgyzstan and North Macedonia, as they reach 99-100% in the other three countries. Most of the respondents live in capital cities, a fifth in large cities, and only 6% in small towns. Nearly 80% of respondents consider themselves to be religious. The most common religious affiliations include Orthodoxy, Islam, non-religious people, and the Apostolic church. In different countries, the characteristics of religious affiliation depend on the dominant religions of the countries in question. In Armenia, the overwhelming majority of respondents belong to the Armenian Apostolic Church. In Georgia and North Macedonia, respondents most often identify themselves as Orthodox, in Kyrgyzstan, as Muslims, and in Belarus, the majority consider themselves to be non-religious or Orthodox. Medical workers have the greatest amount of work experience, followed by police officers and social workers.

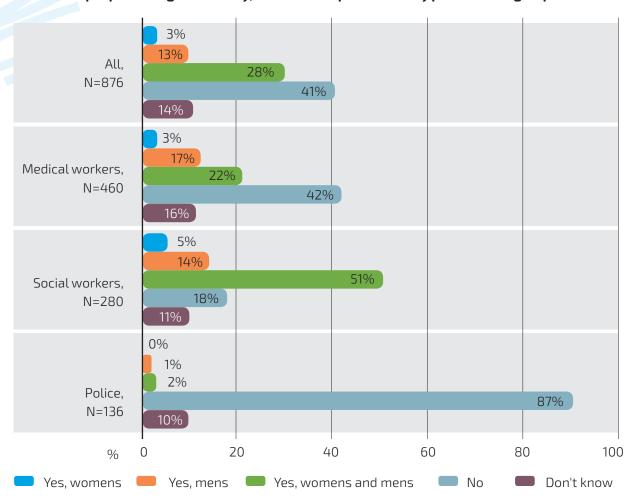


Section 2.
Assessment of respondents' personal attitudes towards LGBT people in five CEECA countries

The second section is devoted to the issue of respondents' personal attitudes towards LGBT people. Since the answer to this question is not so straightforward and simple as to be assessed according to only one variable, we will analyze various aspects related to this issue.

To begin, we will determine whether there are LGBT people among the close social circles of respondents. Recall that, according to the research methodology, having experience providing services to LGBT people was a condition for inclusion of 70% of the social and medical workers surveyed. There was no such condition for the police category, which is immediately evident when examining the diagram below (Figure 8). In general, 45% of respondents have LGBT people within their social circle; among social workers, this figure is 70%, among medical workers it is 42%, and among law enforcement officials it is 3%. It should be noted that respondents more often only know homo- or bisexual men rather than homo- or bisexual women, which may be linked to the specificities of services provided to the LGBT community, as they often entail HIV services aimed at men who have sex with men.

Figure 8. Distribution of respondents' answers to the question of whether there are any homoor bisexual people among their family, friends or acquaintances by professional group



When examining the issue in a country context, we see the same low indicators in relation to the rate of acquaintance exclusively with lesbian and bisexual women. For example, in the Macedonian sample there were no respondents who indicated that they know homo- or bisexual women. The highest percentage in this category was observed among social workers in Kyrgyzstan (8%). The range of percentages of knowing only homo- or bisexual men is quite wide: from 0% for police in Kyrgyzstan to 28.6% for social workers in Georgia. In general, social workers are the most likely to have LGBT

acquaintances, while police are the least likely. However, the difference between the two sub-samples of law enforcement officers is quite significant: while 98% of respondents in Kyrgyzstan indicated that they have no LGBT acquaintances, in North Macedonia this figure was only 47%; 40% of the police in North Macedonia responded instead that they do not know how to answer this question, which was the largest percentage of those selecting this answer among all professional samples.

At the country level, the largest proportion of respondents with LGBT people among their acquaintances was in Belarus (64%), and the smallest in Kyrgyzstan (35.9%). However, this is due to the specificities of the samples from these countries: one consists entirely of medical workers, while the other includes the police.

Table 9. Distribution of respondents' answers to the question of whether there are any homoor bisexual people among their family, friends or acquaintances by professional group and country (95% confidence intervals are indicated in parentheses)

Country	Prof. group	Yes, women	Yes, men	Yes, women and men	No	l do not know
	Total, N=170	2% (0; 5)	5% (1; 8)	35% (28; 43)	37% (29; 44)	21% (15; 27)
Armenia	Medical workers, N=110	3% (0; 6)	5% (1; 10)	9% (4; 15)	55% (46; 65)	27% (19; 36)
	Social workers, N=60	2% (0; 5)	3% (0; 8)	83% (74; 93)	2% (0; 5)	10% (2; 18)
	Police, N=0	-	-	-	-	_
	Total, N=100	3% (0; 6)	26% (17; 35)	35% (27; 44)	19% (11; 27)	17% (10; 24)
Belarus	Medical workers, N=100	Total, N=100	26% (17; 35)	35% (27; 44)	19% (11; 27)	17% (10; 24)
	Social workers, N=0	-	-	-	-	-
	Police, N=0	-	-	_	-	-
	Total, N=150	4% (1; 7)	27% (20; 34)	28% (21; 35)	35% (27; 42)	7% (3; 11)
Georgia	Medical workers, N=80	Total, N=150	25% (15; 35)	26% (17; 36)	39% (28; 49)	9% (3; 15)
	Social workers, N=70	7% (1; 13)	29% (18; 39)	30% (19; 41)	30% (19; 41)	4% (0; 9)
	Police, N=0	-	-	-	-	-
	Total, N=326	5% (2; 7)	9% (6; 12)	22% (18; 27)	58% (52; 63)	6% (4; 9,1)
Managara da sa	Medical workers, N=120	6% (2; 10)	15% (9; 21)	15% (9; 21)	57% (48; 66)	7% (3; 12)
Kyrgyzstan	Social workers, N=100	Total, N=326	12% (6; 18)	54% (44; 64)	16% (9; 23)	10% (4; 16)
	Police, N=106	0%	0%	0%	98% (95; 100)	2% (0; 5)
	Total, N=130	0%	10% (5; 15)	31% (23; 39)	32% (24; 40)	27% (19; 35)
North	Medical workers, N=50	0%	14% (4; 24)	36% (23; 49)	30% (17% 43)	20% (9; 31)
Macedonia	Social workers, N=50	Total, N=130	10% (2; 18)	38% (25; 51)	26% (14; 38)	26% (14; 38)
	Police, N=30	0%	3% (0; 10)	10% (0; 21)	47% (29; 65)	40% (23; 57)

We next turn to the question regarding the proportion of respondents who believe that homosexuality should be accepted in society. Overall, this position is held by 59% of respondents, while slightly more than a quarter (27%) believe that homosexuality should not be accepted in society; at the same time, 15% took a neutral position, indicating that neither the first nor second statement corresponds to their own opinion. A similar distribution was observed in the results of the previous assessment, indicating the stability of respondents' opinions on this issue.

Upon closer examination of the distribution of answers by professional group, we see that, as in 2017, social workers have the most positive attitude towards homosexuality (88%). The percentage of medical workers who believe that homosexuality should be accepted in society was 52% in 2019. It should also be noted that among this sub-sample, the percentage of respondents with a negative attitude towards homosexuality increased statistically significantly (27% in 2019 compared to 17% in 2017). Despite the decrease in the percentage of those with negative opinions of homosexuality and the increase in the percentage of those who believe homosexuality should be accepted in society among this sub-sample, these changes are not statistically significant (Fig. 9).

When considering this issue according to country distributions, we see that North Macedonia and Georgia are the most "accepting" (81% in both), followed by Belarus (66%), Armenia (45%), and Kyrgyzstan (44%). This data is a repeat of the results of the 2017 assessment.

Social workers in all countries have the highest level of acceptance ranging from 81% in Kyrgyzstan to 98% in North Macedonia, which indicated that this professional group has a very positive attitude towards homosexuality. In addition, there was an increase in the acceptance of homosexuality among social workers in Armenia: in 2017, the percentage of those who agreed that homosexuality should be accepted in society was 67%, in 2019 this was 90%.

At the same time, the situation with respect to medical workers is less clear. While in some CEECA countries, the majority of this professional group believes that homosexuality should be accepted in society (66% in Belarus, 75% in Georgia, and 62% in North Macedonia), in others, this position is not shared by the majority (20% in Armenia and 50% in Kyrgyzstan). The sharp drop in the acceptance of homosexuality among medical workers in Armenia should be noted, where this percentage more than halved in comparison with 2017.

Professional sub-groups of law enforcement officers were surveyed in only two of the five countries. Nevertheless, the differences between the two are very striking. The percentage of acceptance of homosexuality in Kyrgyzstan is 3%, in Macedonia it is 87%, which indicates that the cross-country heterogeneity of these countries is more significant than any professional homogeneity that we were able to observe in the other two professional groups (Table 10).



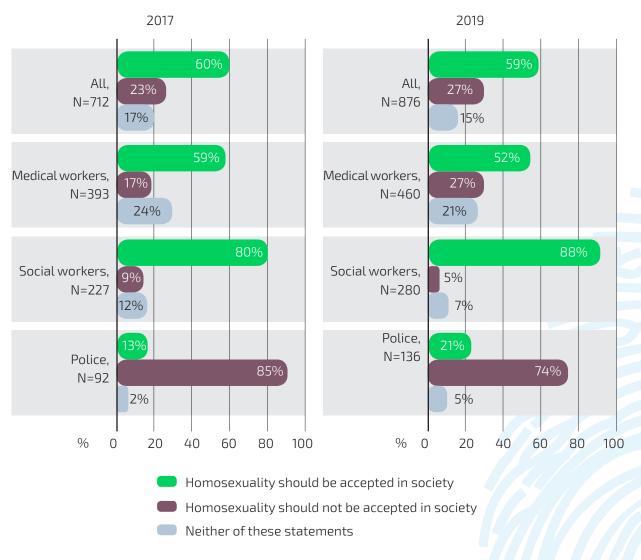


Table 10. Distribution of respondents' opinions regarding the acceptability of homosexuality in society by professional group and country by year (95% confidence intervals are indicated in parentheses)

		Please ind	icate which o	f these staten	nents is closes	t to your perso	nal opinion
Country	Prof. group	Homosexua be accepted		not be ac	ality should cepted in iety	Neither o	
		2017	2019	2017	2019	2017	2019
	Total	56% (47; 65)	45% (37; 52)	16% (10; 22)	43% (36; 51)	28% (20; 36)	12% (7; 17)
Armenia	Medical workers	48% (36; 60)	20% (13; 27)	22% (12; 31)	62% (53; 71)	30% (19; 41)	18% (11; 25)
Arı	Social workers	67% (53; 78)	90% (82; 98)	9% (2; 16)	10% (2; 18)	25% (14; 36)	0%
	Police	-	-	-	-	-	-
	Total	63% (54; 72)	66% (57; 75)	13% (7; 19)	11% (5; 17)	24% (16; 32)	23% (15; 31)
Belarus	Medical workers	59% (49; 70)	66% (57; 75)	15% (8; 22)	11% (5; 17)	26% (17; 35)	23% (15; 31)
Be	Social workers	86% (56; 97)	-	0%	-	14% (0; 32)	-
	Police	-	-	-	-	-	-
	Total	76% (69; 83)	81% (75; 87)	20% (13; 27)	10% (5; 15)	4% (1; 7)	9% (4; 13)
Georgia	Medical workers	67% (55; 78)	75% (65; 85)	26% (16; 36)	15% (7; 23)	7% (1; 13)	10% (3; 17)
3	Social workers	86% (74; 94)	89% (81; 96)	14% (5; 23)	4% (0; 9)	0%	7% (1; 13)
	Police	-	-	-	-	_	-
	Total	45% (39; 51)	44% (39; 50)	38% (32; 44)	39% (34; 45)	17% (12; 22)	17% (13; 21)
Kyrgyzstan	Medical workers	55% (45; 65)	50% (41; 59)	13% (6; 20)	20% (13; 27)	32% (23; 41)	30% (22; 38)
Kyrgy	Social workers	77% (65; 86)	81% (73; 89)	10% (3; 17)	4% (0; 8)	13% (5; 21)	15% (8; 22)
	Police	5% (2; 13)	3% (0; 6)	94% (89; 99)	94% (90; 99)	1% (0; 3,2)	3% (0; 6)
	Total	79% (70; 88)	81% (75; 88)	9% (3; 15)	5% (1; 9)	12% (5; 19)	13% (7; 19)
Macedonia	Medical workers	71% (57; 83)	62% (49; 75)	10% (2; 18)	14% (4; 24)	18% (7; 29)	24% (12; 36)
Mace	Social workers	96% (80; 100)	98% (94; 100)	0%	0%	4% (0; 11)	2% (0; 6)
	Police	67% (35; 89)	87% (75; 99)	25% (0; 49)	0%	8% (0; 23)	13% (1; 25)

Another important factor related to attitudes towards homosexuality is the perception and understanding of homosexuality. 42% of respondents believe that homosexuality is a sexual orientation with an equal right to exist as heterosexuality, and 27% are of the opinion that it is a fact of life that can neither be punished nor glorified. The proportion of the latter was statistically significantly lower in 2019 than during the 2017 assessment. The percentage of respondents who believe that homosexuality is immoral, a bad habit, a disease or the result of psychological trauma is 26%.

Social workers still exhibit the most positive attitudes towards homosexuality: 59% believe that it is a sexual orientation with an equal right to exist as heterosexuality, in comparison to the 37% of medical workers who hold this opinion, and the 21% of law enforcement officers. It should be noted that the "popularity" of this opinion is growing among police officers: compared to 2017, the percentage of those holding this opinion increased by more than 15%.

34% of social workers, 27% of medical workers, and 14% of law enforcement officers believe that homosexuality is a fact of life that can neither be punished nor glorified. Among the former, there is a decrease in the proportion of those who hold this opinion.

60% of law enforcement officers, 29% of medical workers, and 4% of social workers believe that homosexuality is immoral, a bad habit, a disease, or the result of psychological trauma. Compared to 2017, this value decreased among police (83% in 2017), but increased significantly among medical workers (13% in 2017).

Table 11. Respondents' understanding of homosexuality by professional group by year (95% confidence intervals are indicated in parentheses)

People have	To	tal	Medical	workers	Social v	vorkers	Po	lice
very different opinions about homosexuality, what do you personally think homosexuality is?	2017, N=709	2019, N=876	2017, N=391	2019, N=460	2017, N=227	2019, N=280	2017, N=91	2019, N=136
A sexual orientation with an equal right to exist as heterosexuality	37% (33; 41)	42% (39; 45)	35% (30; 40)	37% (33; 42)	54% (48; 60)	59% (53; 65)	4% (0; 8)	21% (14; 27)
A fact of life that you can neither punish nor glorify	38% (34; 42)	27% (24; 30)	45% (40; 50)	27% (23; 31)	38% (32; 44)	34% (28; 39)	5% (1; 9)	14% (8; 20)
Immoral and a bad habit	4% (3; 5)	5% (3; 6)	6% (4; 8)	5% (3; 7)	2% (0; 4)	0%	5% (1; 9)	14% (8; 20)
A disease or the result of psychological trauma	16% (13; 19)	21% (18; 24)	7% (4; 9)	24% (20; 28)	6% (3; 9)	4% (1; 6)	78% (69; 87)	46% (37; 54)
A sign of a special gift or talent	1% (0; 2)	0%	1% (0; 2)	0%	0%	1% (0; 2)	1% (0; 3)	0%
Other	4% (3; 5)	0%	6% (4; 8)	4% (2; 6)	0%	1% (0; 2)	5% (1; 9)	0%
Difficulty answering	0%	5% (4; 6)	0%	7% (4; 9)	0%	2% (0; 3)	0%	6% (2; 10)

At the country level, in general, homosexuality is perceived more positively than negatively. For example, in Armenia the percentage of respondents who believe that homosexuality is a sexual orientation with an equal right to exist as heterosexuality or a fact of life that can neither be punished nor glorified totaled 56%, in Kyrgyzstan, this was 56%, in Belarus 79%, in Georgia 87%, and in North Macedonia 89%. At the same time, there was a significant decrease in this percentage in Armenia (76% in 2017) against a simultaneous increase in the percentage of people who consider homosexuality to be a disease or the result of psychological trauma. This value was 10% in 2017 and rose to 33% in 2019. This trend is all the more alarming because of the growing popularity of such a belief among medical workers (10% in 2017 compared to 52% in 2019).

In terms of professional groups by country, the most positive perceptions of homosexuality are still observed among social workers. The percentage of those in this professional group who believe that homosexuality is a sexual orientation with an equal right to exist as heterosexuality ranged from 38% in Armenia to 82% in North Macedonia. For comparison, among medical workers, this figure ranged from 8% in Armenia to 56% in Georgia. With regard to police, we see the same trends as in relation to

the acceptance of homosexuality in society. In Kyrgyzstan, 9% of law enforcement officials hold the opinion that homosexuality and heterosexuality are equal, while in North Macedonia this percentage is 60%. Compared to 2017, this value increased among medical workers in Belarus and Georgia, as well as among the Kyrgyz police.

The percentage of respondents who perceive homosexuality as a fact of life remains quite high. This value is lowest in Kyrgyzstan (18%) and highest in Armenia (37%). In two countries, the percentage of people holding this opinion decreased in comparison to 2017: in Belarus from 63% to 37%, and in Georgia from 47% to 29%. This can probably be explained by the "flow" of respondents from this category to the first, affirming the equality of homosexuality and heterosexuality. The percentage of those who chose this answer is highest among social workers (from 14% in North Macedonia to 62% in Armenia), with the exception of only North Macedonia where they are exceed by medical workers. Among the sub-sample of medical workers, the range in the percentage of those holding this opinion ranges from 16% in Kyrgyzstan to 40% in North Macedonia. Among the police in these countries, it ranges from 11% to 23%. The quite active "migration" of respondents in relation to this opinion was observed: the percentage of supporters fell among medical workers in Armenia, Belarus, and Georgia, and increased among police in Kyrgyzstan.

We see significant discrepancies both in countries and among professional groups regarding the percentage of those who consider homosexuality to be a disease or the result of psychological trauma. At the country level, this percentage ranges from 0% in Macedonia to 33% in Armenia. It is noteworthy that this opinion is least popular among Macedonians of all categories (0%), and paradoxically among social workers in Armenia, where, in comparison to the previous assessment, there was a significant increase in the proportion of those holding this opinion, which, as noted above, can be explained by the increase in the percentage of medical workers holding this opinion. We see a similar trend among medical workers in Kyrgyzstan (25% in 2019 versus 2% in 2017). However, we see the opposite situation in relation to the sub-sample of police in Kyrgyzstan (59% in 2019 versus 86% in 2017).

We next consider how respondents assess their personal attitudes towards LGBT people. As we see, more than half of the respondents have a neutral attitude towards LGBT people, a quarter have a positive attitude, and only 16% expressed a negative attitude. The largest proportion of respondents with a positive attitude towards LGBT people was among social workers. Medical workers most often have neutral attitudes, while the police, by equal measure, more often report a neutral or negative attitude towards LGBT people.



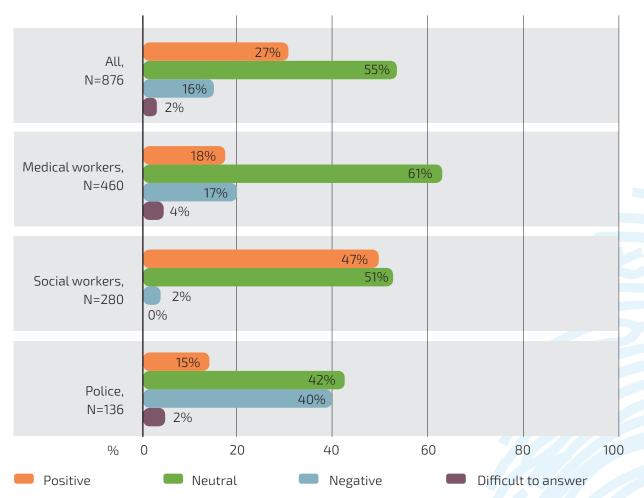


Table 12. Respondents' understanding of homosexuality by country and professional group by year (95% confidence intervals are indicated in parentheses)

		2019	7% (3; 10)	10% (4; 16)	%0	1	5% (1; 9)	5% (1; 9)	1	1	%0	%0	%0	1
	Difficulty answering	2017	%0	%0	%0	ı	%0	%0	%0	1	%0	%0	%0	ı
uality is?		2019	%0	%0	%0	1	%0	%0	1	1	2% (0; 4)	3% (0; 6)	1% (0; 4)	1
homosex	Other	2017	8% (3; 13)	14% (6; 22)	%0	1	(0; 5)	2% (0; 5)	%0	ı	%0	%0	%0	ı
nally think	finalist or flig	2019	%0	%0	%0	ı	%0	%0	1	ı	%0	%0	%0	ı
u persor	Jaisags a Yo ngiz A	2017	%0	%0	%0	ı	%0	%0	%0	ı	%0	%0	%0	ı
what do yo	lesigolodyced fo emuert	2019	33% (26; 41)	52% (42; 61)	%0	1	13% (6; 20)	13% (6; 20)	1	1	10% (5; 15)	14% (6; 21)	6% (0; 11)	ı
exuality, 1	ezeasib A Ausease	2017	10% (5; 15)	10% (3; 17)	11% (3; 19)	ı	7% (2; 12)	8% (3; 13)	%0	ı	10% (5; 15)	13% 5; 21)	7% (0; 14)	ı
out homos	tided bed a bna	2019	4% (1; 7)	6% (2; 11)	%0	ı	3%	3%	1	1	1% (0; 2)	1% (0; 4)	%0	ı
inions abo	lmmoral	2017	6% (2; 10)	7% (1; 13)	5% (0; 11)	1	6% (2;10)	7% (2; 12)	%0	ı	%0	%0	%0	ı
different of	punish nor glorify	2019	37% (30; 44)	24% (16; 31)	62% (49; 74)	ı	37% (27; 47)	37% (32; 52)	1	1	29% (21; 36)	26% (17; 36)	31% (21; 42)	ı
People have very different opinions about homosexuality, what do you personally think homosexuality is?	A fact of life that you can neither	2017	47% (38; 56)	49% (38; 60)	44% (31; 57)	1	63% (54,2; 71,8)	64% (55; 73)	50% (24; 76)	1	47% (38; 56)	54% (42; 66)	39% (27; 51)	ı
Peo	right to exist yilbeuxesoreted se	2019	19% (13; 25)	8% (3; 13)	38% (26; 51)	ı	42% (32; 52)	42% (32; 52)	1	ı	59% (51; 67)	56% (45; 67)	61% (50; 73)	ı
	noitetnoiro leuxoz A Leupo ne dtiw	2017	29 (21; 37)	21% (12; 30)	40% (27; 53)	ı	23% (15; 31)	19% (11; 27)	50% (24; 76)	ı	43% (34; 52)	33% (22; 44)	54% (41; 67)	ı
	Prof. group		Total	Medical workers	Social workers	Police	Total	Medical workers	Social workers	Police	Total	Medical workers	Social workers	Police
Georgia Belarus Armenia Country						əŋ								

	Difficulty answering	2019	4% (2; 7)	5% (1; 9)	5% (1; 9)	3%	10% (5; 15)	16% (6; 26)	%0	17% (3; 30)
۷.	Dice on the construction	2017	%0	%0	%0	%0	1% (0; 3)	%0	4% (0; 11)	%0
ruality is	13110	2019	%0	%0	%0	%0	1% (0; 2)	%0	2% (0; 6)	%0
homosex	Офрек	2017	5% (2; 8)	9% (3; 15)	%0	5% (0;10)	6% (1; 11)	8% (0; 16)	%0	8% (0; 23)
nally think	finals to this	2019	0,3%	%0	1% (0; 3)	%0	1% (0; 2)	%0	2% (0; 6)	%0
u persoi	Asisads a fongis A	2017	2% (0; 4)	3% (0; 6)	%0	1% (0; 3)	%0	%0	%0	%0
what do yo	lesigolodyced fo emustt	2019	30% (25; 35)	25% (17; 33)	6% (1;11)	59% (50; 69)	%0	%0	%0	%0
exuality, v	essesib A Sinse A	2017	30% (24; 36)	2% (0; 5)	6% (0; 12)	86% (78;94)	4% (0; 8)	2% (0; 6)	%0	25% (0; 57)
out homos	tided bed 6 bns	2019	9% (6; 12)	9% (4; 14)	%0	18% (11; 25)	%0	%0	%0	%0
inions ab	lmmoral	2017	4% (2; 6)	5% (1; 9)	%0	6% (1; 11)	7% (2; 12)	10% (2;18)	4% (0; 11)	%0
different opinions about homosexuality, what do you personally think homosexuality is?	yinor glorify	2019	18% (14; 23)	16% (9; 22)	29% (20; 38)	11% (5; 17)	26% (19; 34)	40% (26; 54)	14% (4; 24)	23% (8; 38)
People have very d	A fact of life that you can neither	2017	18% (13; 23)	22% (14; 30)	33% (22; 44)	%0	33% (23; 43)	33% (20; 46)	29% (12; 46)	42% (14; 70)
Peo	right to exist sa heterosexuality	2019	38% (32; 43)	45% (36; 54)	59% (49; 69)	9% (4; 15)	62% (54; 71)	44% (30; 58)	82% (71; 93)	60% (43; 77)
	noitetneiro leuxez A Reupe ne riiw	2017	41% (35; 47)	58% (48; 68)	61% (49; 73)	1% (0; 3)	49% (39; 59)	47% (33; 61)	64% (46; 82)	25% (0; 57)
	Prof. group	Total	Medical workers	Social workers	Police	Total	Medical workers	Social workers	Police	
	Country			uets	Kyrgyz			einob	926M	

From Table 13, we see that the largest proportion of those with positive attitudes towards LGBT people is among the Macedonian sample (55%), while the smallest is among the Armenian sample (9%). In these countries, the lowest (1%) and highest (32%) percentages of negative attitudes are also observed.

Social workers traditionally have the most positive attitudes towards LGBT people (from 20% of social workers in Armenia to 74% in North Macedonia selected this answer), followed by medical workers (from 4% in Armenia to 30% in North Macedonia). Again, the results among police vary significantly: in Kyrgyzstan, only 1% of respondents indicated they have a positive attitude towards LGBT people, while this was 67% in North Macedonia.

Table 13. Distribution of respondents' assessments of their personal attitudes towards LGBT people by country and professional group (95% confidence intervals are indicated in parentheses)

Country	Prof. group	Positive	Neutral	Negative	Difficulty answering
	Total, N=170	9% (5; 14)	57% (49; 64)	32% (25; 39)	2% (0; 5)
Armenia	Medical workers, N=110	4% (0; 7)	45% (35; 54)	48% (39; 57)	4% (0; 7)
	Social workers, N=60	20% (10; 30)	78% (68; 89)	2% (0; 5)	0%
	Police, N=0	-	_	_	-
	Total, N=100	32% (23; 41)	61% (51; 71)	3% (0; 6)	4% (0; 8)
Belarus	Medical workers, N=100	32% (23; 41)	61% (51; 71)	3% (0; 6)	4% (0; 8)
	Social workers, N=0	-	-	-	-
	Police, N=0	-	_	-	-
	Total, N=150	21% (14; 27)	74% (67; 81)	5% (2; 9)	0%
Georgia	Medical workers, N=80	15% (7; 23)	77% (68; 87)	7% (2; 13)	0%
_	Social workers, N=70	27% (17; 37)	70% (59; 81)	3% (0; 7)	0%
	Police, N=0	-	-	-	-
	Total, N=326	26% (21; 31)	50% (45; 56)	22% (18; 27)	1% (0; 3)
V	Medical workers, N=120	17% (10; 23)	69% (61; 77)	13% (7; 18)	2% (0; 4)
Kyrgyzstan	Social workers, N=100	64% (55; 73)	34% (25; 43)	2% (0; 5)	0%
	Police, N=106	1% (0; 3)	44% (35; 54)	52% (42; 61)	3% (0; 6)
	Total, N=130	55% (47; 64)	39% (30; 47)	1% (0; 2)	5% (1; 9)
North	Medical workers, N=50	30% (17; 43)	54% (40; 68)	2% (0; 6)	14% (4; 24)
Macedonia	Social workers, N=50	74% (62; 86)	26% (14; 38)	0%	0%
	Police, N=30	67% (50; 84)	33% (16; 50)	0%	0%

We now move to the next part of the analysis, which deals with social distance in relation to LGBT people. Social distance is measured using the seven-point Bogardus scale. Respondents were asked to place five categories of people (gay men, lesbians, bisexual men, bisexual women, and transgender people) on a scale, where each point indicates a greater or lesser social distance, in other words how closely they are willing to accept these people in their social circle: as family members, close friends, neighbors, colleagues, residents of the country, visitors to the country (tourists), or whether they would allow them to enter the country at all. Thus, the closer the value is to 1, the smaller the social distance, and vice versa.

As we see from Table 14, the respondents as a whole exhibit the smallest social distance in relation to gay men: respondents are willing to accept them as colleagues. Social distance with respect to lesbians is a bit greater, followed by bisexual people of both sexes, followed by transgender people. This sequence is true for all professional groups, except the police, which exhibit the smallest social distance in relation to lesbians, and an equal social distance in relation to gay men and bisexual people. Since the confidence intervals of many nearby values intersect, it is not possible to discuss the significance of differences in all cases. However, such a hierarchy was very revealing. Among professional groups, the smallest social distance in relation to LGBT people was observed among social workers, and the greatest among police.

Table 14. Social distance in relation to LGBT people by professional group (95% confidence intervals are indicated in parentheses)

	Category of people								
Prof. group	Gays	Lesbians	Bisexual men	Bisexual women	Transgender people				
Total, N=876	3,8	3,9	4	4	4,2				
	(3,7; 3,9)	(3,8; 4)	(3,9; 4,1)	(3,9; 4,1)	(4,1; 4,3)				
Medical	3,9	4	4,1	4,1	4,4				
workers, N=460	(3,7; 4,1)	(3,8; 4,2)	(3,9; 4,3)	(3,9; 4,3)	(4,2; 4,6)				
Social workers,	2,7	2,8	2,9	2,9	3				
N=280	(2,5; 2,9)	(2,6; 3)	(2,7; 3,1)	(2,7; 3,1)	(2,8; 3,2)				
Police, N=136	5,8	5,7	5,8	5,8	6				
	(5,6; 6)	(5,6; 5,8)	(5,6; 5,9)	(5,6; 5,9)	(5,8; 6,2)				

If we consider this issue in the country context, we see that, in general, Belarus demonstrates the lowest social distance (from 2.9 in relation to gay men to 3.6 in relation to transgender people), and Kyrgyzstan demonstrates the highest (from 4.3 to 4.5 respectively). As before, social workers demonstrate the lowest social distance in relation to LGBT people, with the exception of the subsample of North Macedonia, who are "overtaken" by medical workers. Police officers traditionally demonstrate the highest social distance in relation to LGBT people. Among LGBT people, gay men experience the least social distance, and transgender people the most. Interestingly, homosexual and bisexual women in most cases experience greater social distance than homosexual and bisexual men.

Table 15. Social distance in relation to LGBT people by country and professional group (95% confidence intervals are indicated in parentheses)

			Са	tegory of peo	pple	
Country	Prof. group	Gays	Lesbians	Bisexual men	Bisexual women	Transgender people
	Total, N=170	4,2 (3,9; 4,5)	4,3 (4; 4,6)	4,2 (3,9; 4,5)	4,3 (4; 4,6)	4,6 (4,3; 4,9)
Armenia	Medical workers, N=110	5,4 (5,1; 5,7)	5,6 (5,4; 5,8)	5,5 (5,3; 5,7)	5,6 (5,4; 5,8)	5,8 (5,6; 6)
Aimema	Social workers, N=60	1,9 (1,6; 2,2)	2 (1,7; 2,3)	2 (1,7; 2,3)	2 (1,7; 2,3)	2,3 (1,9; 2,6)
	Police, N=0	-	-	-	-	-
	Total, N=100	2,9 (2,6; 3,2)	3,1 (2.8; 3,4)	3 (2,7; 3,3)	3,2 (2,9; 3,5)	3,6 (3,3; 3,9)
Delawie	Medical workers, N=100	2,9 (2,6; 3,2)	3,1 (2.8; 3,4)	3 (2,7; 3,3)	3,2 (2,9; 3,5)	3,6 (3,3; 3,9)
Belarus	Social workers, N=0	-	-	-	-	-
	Police, N=0	_	_	-	-	-
	Total, N=150	3,1 (2,9; 3,4)	3,1 (2,9; 3,4)	3,2 (2,9; 3,5)	3,2 (2,9; 3,5)	3,6 (3,3; 3,9)
Canada	Medical workers, N=80	3,3 (2,9; 3,7)	3,3 (2,9; 3,7)	3,3 (2,9; 3,7)	3,3 (2,9; 3,7)	3,8 (3,4; 4,2)
Georgia	Social workers, N=70	2,9 (2,5; 3,3)	3 (2,6; 3,4)	2,9 (2,5; 3,3)	3 (2,5; 3,5)	3,4 (2,9; 3,9)
	Police, N=0	-	-	-	-	-
	Total, N=326	4,3 (4,1; 4,5)	4,3 (4,1; 4,5)	4,5 (4,3; 4,7)	4,4 (4,2; 4,6)	4,5 (4,3; 4,7)
M	Medical workers, N=120	4,2 (3,7; 4,3)	4,3 (3,7; 4,3)	4,5 (3,7; 4,3)	4,4 (3,7; 4,3)	4,6 (3,7; 4,3)
Kyrgyzstan	Social workers, N=100	2,5 (2,2; 2,8)	2,6 (2,3; 2,9)	2,8 (2,4; 3,1)	2,8 (2,5; 3,1)	2,8 (2,5; 3,1)
	Police, N=106	6 (5,8; 6,1)	5,9 (5,7; 6)	6,1 (5,9; 6,2)	6 (5,8; 6,1)	6,3 (6.1; 6,4)
	Total, N=130	3,5 (3,2; 3,8)	3,7 (3,4; 4)	3,9 (3,6; 4,2)	3,9 (3,6; 4,2)	3,9 (3,6; 4,2)
North	Medical workers, N=50	2,8 (2,3; 3,3)	2,9 (2,4; 3,4)	3,1 (2,6; 3,6)	3,1 (2,6; 3,6)	3,3 (2,7; 3,8)
Macedonia	Social workers, N=50	3,5 (3,1; 3,9)	3,8 (3,4; 4,2)	4,1 (3,7; 4,5)	4,1 (3,7; 4,5)	4 (3,6; 4,4)
	Police, N=30	4,8 (4,5; 5,1)	4,9 (4,7; 5,1)	4,9 (4,7; 5,1)	4,9 (4,7; 5,1)	4,9 (4,6; 5,2)

On the basis of the five variables of social distance described above, another important value in the context of the analysis is the degree of social alienation in relation to LGBT people. To obtain this indicator, a seven-point scale was converted into a value from -1 (maximum degree of social alienation in relation to LGBT people) to 1 (minimum degree of social alienation in relation to LGBT people). Following this, the converted scores of the five variables were added up and multiplied by two. Thus, we obtain a score from -10 to 10, which should be interpreted as follows:

- [-10; -6) high degree of social alienation in relation to LGBT people;
- [-6; -2) higher than average degree of social alienation in relation to LGBT people;
- [-2; 2) average degree of social alienation in relation to LGBT people;
- [2; 6) lower than average degree of social alienation in relation to LGBT people;
- [6; 10] low degree of social alienation in relation to LGBT people.

Having clarified the methodological issues, we now turn to an examination of the results.

As can be seen from Table 14, the degree of social alienation in relation to LGBT people is generally average, but slightly decreased in comparison to 2017, which may indicate an increase in social distance. The lowest degree of social alienation in relation to LGBT people, below the average, is observed among social workers. Medical workers demonstrate an average degree of social alienation, and the police an above average degree of social alienation. A decrease in social alienation in comparison to the 2017 assessment was recorded among police. The remaining groups show the same results.

Table 16. Degree of social alienation of respondents in relation to LGBT people by professional group by year

Total		Medical workers		Social workers		Police	
2017, N=712	2019, N=876	2017, N=393	2019, N=460	2017, N=227	2019, N=280	2017, N=92	2019, N=136
0,7	0,1	0,3	-0,3	4,3	3,8	-6,6	-6

We obtain the following results in terms of social alienation by country: Belarus and Georgia have a lower than average degree of social alienation, while the other three countries exhibit an average degree of social alienation. In Armenia and Kyrgyzstan, this value corresponds to the one obtained during the previous assessment. In comparison with 2017, this indicator fell in Georgia, and grew in Belarus and North Macedonia. The negative dynamics of North Macedonia is the most significant change in this regard.

The degree of social alienation of medical workers in Belarus and North Macedonia is below average. In Georgia and Kyrgyzstan, it is average, and in Armenia it is above average. Among social workers, this value is average in the case of North Macedonia, below average in Georgia and Kyrgyzstan, and quite low in Armenia. The sub-sample of police exhibit the highest degree of social alienation: in North Macedonia, the level is above average, and in Kyrgyzstan, it is high.

There is an alarming trend towards an increase in the degree of social distance in relation to LGBT people among medical workers in all countries, except Georgia (where the opposite trend occurred). An increase in the degree of social alienation was also observed among social workers in Georgia and North Macedonia, especially with regard to the latter. Law enforcement officials in Kyrgyzstan exhibited a decrease in the degree of social alienation in relation to LGBT people, but still fall into the "high" category. The police in North Macedonia demonstrated an increase in social distance in comparison to 2017, moving from the category "below average" to "above average".

Table 17. Degree of social alienation of respondents in relation to LGBT people by country and professional group by year

	2017		2019	
Country	Prof. group	Degree of social alienation in relation to LGBT people	Prof. group	Degree of social alienation in relation to LGBT people
	Total, N=130	-0,6	Total, N=170	-1,1
Armenia	Medical workers, N=73	-2,9	Medical workers, N=110	-5,3
Armenia	Social workers, N=57	2,4	Social workers, N=60	6,5
	Police, N=0	-	Police, N=0	_
	Total, N=115	3,5	Total, N=100	2,7
Belarus	Medical workers, N=101	2,8	Medical workers, N=100	2,7
	Social workers, N=14	8,6	Social workers, N=0	-
	Police, N=0	-	Police, N=0	-
	Total, N=129	0,4	Total, N=150	2,5
Coordia	Medical workers, =70	-2,6	Medical workers, N=80	2
Georgia	Social workers, N=59	4,0	Social workers, N=70	3,1
	Police, N=0	-	Police, N=0	-
	Total, N=249	-1,2	Total, N=326	-1,4
Kyrgyzstan	Medical workers, =100	0,6	Medical workers, N=120	-1,4
	Social workers, N=69	4,2	Social workers, N=100	4,3
	Police, N=80	-8,0	Police, N=106	-6,9
	Total, N=89	4,4	Total, N=130	0,6
North	Medical workers, N=49	3,4	Medical workers, N=50	3,1
Macedonia	Social workers, N=28	7,0	Social workers, N=50	0,3
	Police, N=12	2,8	Police, N=30	-3

We now consider how respondents see their social status in comparison to the social status of LGBT people. In order to measure this, respondents were asked to place themselves, and then LGBT people, on a seven-step social ladder, where 1 indicates the lowest status and 7 the highest. After this, the difference between the two values was calculated resulting in a scale from -6 to 6. In order to compare these values to the ones laid out above, the scale was translated into a scale from -10 to 10. It should be interpreted in a similar manner:

- [-10; -6) the respondent assesses his status significantly higher than the status of a representative of the LGBT community;
- [-6; -2) the respondent assesses his status higher than the status of a representative of the LGBT community;
- [-2; 2) the respondent assesses his status as equal to the status of a representative of the LGBT community;
- [2; 6) the respondent assesses his status lower than the status of a representative of the LGBT community;
- [6;10] the respondent assesses his status significantly lower than the status of a representative of the LGBT community.

The logic to understanding these values is as follows: the higher the person assesses his status in comparison to the status of LGBT people, the worse his opinion of them; and the closer his assessment of LGBT people is to his self-assessment, the more willing he is to accept LGBT people.

As we see in the table below, respondents, as a whole, as well as the sub-groups of medical and social workers, assess their status as equal to that of LGBT people. Only the police are of the opinion that their social status is higher. There are no changes in comparison to the results obtained during the previous assessment.

Table 18. Respondents' assessments of their own position in society in comparison to LGBT people by professional group by year

Total		Medical workers		Social workers		Police	
2017, N=712	2019, N=876	2017, N=393	2019, N=460	2017, N=227	2019, N=280	2017, N=92	2019, N=136
0,3	-1,5	0,4	-1,5	1,6	-0,6	-3,5	-3,6

Respondents from all countries generally assess their status as equal to that of LGBT people. Only respondents in Armenia tend to assess their status as higher than that of LGBT people. When examining professional sub-categories by country, we see that they all assess their social status as equal to LGBT people. The only exceptions are medical workers in Armenia and law enforcement officers in Kyrgyzstan, who assess their status higher than the status of LGBT people.

The overall picture mimics the situation from 2017. The only exceptions are demonstrated by medical workers in Armenia who previously assessed themselves as equal to LGBT people, and by social workers in Kyrgyzstan, who previously assessed their status as lower than that of LGBT people.

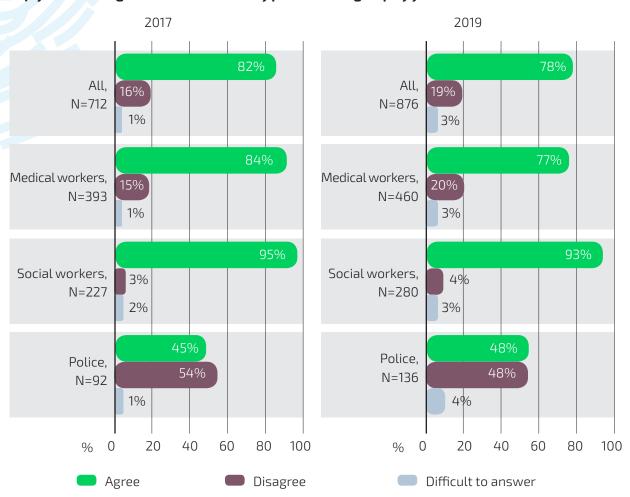
Table 19. Respondents' assessments of their own position in society in comparison to LGBT people by country and professional group by year

	2017		2019	
Country	Prof. group	Assessment of one's own position in society compared to LGBT people	Prof. group	Assessment of one's own position in society compared to LGBT people
	Total, N=130	0,9	Total, N=170	-2,5
Armenia	Medical workers, N=73	0	Medical workers, N=110	-3,4
Aimema	Social workers, N=57	1,9	Social workers, N=60	-1
	Police, N=0	_	Police, N=0	///-/
	Total, N=115	1,8	Total, N=100	-1,3
Belarus	Medical workers, N=101	1,7	Medical workers, N=100	-1,3
Delarus	Social workers, N=14	3,2	Social workers, N=0	<u> </u>
	Police, N=0	-	Police, N=0	-
	Total, N=126	0,7	Total, N=150	-1,2
Georgia	Medical workers, N=70	1,1	Medical workers, N=80	-1,3
ueoi gia	Social workers, N=56	0,1	Social workers, N=70	-1
	Police, N=0	_	Police, N=0	-
	Total, N=249	-1	Total, N=326	-1,5
Vivorinetan	Medical workers, N=100	-1	Medical workers, N=120	-0,4
Kyrgyzstan	Social workers, N=69	2,6	Social workers, N=100	0,1
	Police, N=80	-4,2	Police, N=106	-4,3
	Total, N=89	0,6	Total, N=130	-1
North	Medical workers, N=49	0,4	Medical workers, N=50	-0,7
Macedonia	Social workers, N=28	0,7	Social workers, N=50	-1,2
	Police, N=12	1,1	Police, N=30	-1

We now consider another important aspect related to personal attitudes towards LGBT people: the willingness to accept the idea of equality between representatives of the LGBT community and other citizens. In the research questionnaire, such a willingness was measured by three questions that relate to the extent to which respondents agree with the idea that gays and lesbians should enjoy the same rights as other citizens in their country, as well to the opinion of respondents about the right of same-sex couples to marry and adopt/raise children.

We began by assessing whether respondents believe that gays and lesbians should enjoy the same rights as other citizens in their country. 77.6% of respondents agreed with this statement, while a fifth of respondents disagreed with it. Social workers demonstrated the highest level of agreement (93%), followed by medical workers (77%). Meanwhile, it is interesting that the police were split equally on this question, with 48% of respondents agreeing and 48% of respondents disagreeing with the statement. The results are a repeat of the results of the previous assessment, which indicates the stability of opinions on this issue.

Figure 11. Distribution of respondents' opinions about whether gays and lesbians should enjoy the same rights as other citizens by professional group by year



Taking a more detailed look at the situation, we see that the idea of equality between LGBT people and other citizens is supported by the vast majority of respondents in all countries (from 72% in Kyrgyzstan to 91% in Georgia) and among all professional groups except the police in Kyrgyzstan, among whom only 44% supported this statement. The highest level of support for equality is observed among social workers (from 88% in Armenia to 96% in North Macedonia). The percentage of those sharing this position among medical workers ranges from 65% in Armenia to 89% in Georgia, while it is 60% among Macedonian police.

In terms of changes since 2017, we observe a decrease in the level of support for this statement among social workers in Belarus. In all other cases, the values are consistent with the results of the previous assessment.

Table 20. Distribution of respondents' opinions about whether gays and lesbians should enjoy the same rights as other citizens by country and professional group by year (95% confidence intervals are indicated in parentheses)

			ee with the st				
Country	Prof. group	Ag	ree	Dis	agree	Difficulty	answering
		2017	2019	2017	2019	2017	2019
	Total	82% (75; 89)	73% (67; 80)	15% (9; 21)	25% (19; 32)	3% (0; 6)	1% (0; 3)
Armenia	Medical workers	74% (64; 84)	65% (57; 74)	23% (13; 33)	33% (24; 41)	3% (0; 7)	2% (0; 4)
	Social workers	93% (86; 99)	88% (80; 96)	4% (0; 9)	12% (4; 20)	4% (0; 9)	0%
	Police	-	-	-	_	-	-
	Total	90% (85; 95)	75% (67; 83)	10% (5; 15)	17% (10; 24)	0%	8% (3; 13)
Belarus	Medical workers	89% (83; 95)	75% (67; 83)	11% (5; 17)	17% (10; 24)	0%	8% (3; 13)
	Social workers	100% (73; 100)	-	0%	-	0%	-
	Police	-	-	-	-	-	-
	Total	96% (93; 99)	91% (87; 96)	4% (1; 7)	6% (2; 10)	0%	3% (0; 5)
Georgia	Medical workers	93% (87; 99)	89% (82; 96)	7% (1; 13)	7% (2; 13)	0%	4% (0; 8)
	Social workers	100% (92; 100)	94% (89; 100)	0%	4% (0; 9)	0%	1% (0; 4)
	Police	-	-	-	-	-	-
	Total	71% (65; 77)	72% (67; 77)	28% (22; 34)	25% (20; 29)	1% (0; 2)	3% (1; 5)
V	Medical workers	81% (73; 89)	77% (70; 85)	19% (11; 27)	22% (14; 29)	0%	1% (0; 2)
Kyrgyzstan	Social workers	91% (84; 98)	94% (89; 99)	6% (0; 12)	2% (0; 5)	4% (0; 9)	4% (0; 8)
	Police	41% (30; 52)	44% (35; 54)	59% (48; 70)	50% (41; 59)	0%	6% (1; 10)
	Total	83% (75; 91)	84% (77; 90)	12% (5; 19)	13% (7; 19)	4% (0; 8)	3% (0; 6)
North	Medical workers	82% (61; 93)	86% (76; 96)	14% (4; 24)	10% (2; 18)	4% (0; 9)	4% (0; 9)
Macedonia	Social workers	93% (84; 100)	96% (91; 100)	4% (0; 11)	0%	4% (0; 11)	4% (0; 9)
	Police	67% (40; 94)	60% (43; 77)	25% (0; 49)	40% (23; 57)	8% (0; 23)	0%

We now move to the next variable: the opinion of respondents about the right of same-sex couples (male and female) to marry on an equal basis with heterosexual couples. As we see in Table 21, in this case, support among respondents is significantly lower in comparison to the previous variable: only

one-third of respondents believe that same-sex couples should have the right to marry, while another 21% believe that such a right should be granted in exceptional cases.

Among professional groups, the greatest support for the right of same-sex couples to marry is observed among social workers (58%). For medical workers, this value is 27%, while law enforcement officials are the most likely to believe that such a right should not be granted (77%). No statistically significant changes occurred in comparison to 2017.

Table 21. Respondents' opinions about the right to marriage of same-sex couples by professional group by year (95% confidence intervals are indicated in parentheses)

Level of support	То	tal	Medical	workers	Social v	vorkers	Pol	ice
for the idea of same-sex marriage	2017, N=708	2019, N=876	2017, N=392	2019, N=460	2017, N=224	2019, N=280	2017, N=92	2019, N=136
Yes, they should have this right	32% (29; 35)	33% (30; 36)	23% (19; 27)	27% (23; 31)	59% (53; 65)	58% (52; 64)	5% (1; 9)	4% (1; 7)
No, in no case should this right be granted to them	36% (32; 40)	38% (35; 41)	36% (31; 41)	42% (37; 46)	14% (9; 19)	14% (10; 18)	87% (80; 94)	77% (70; 84)
There should be exceptions (individual consideration)	19% (16; 22)	21% (18; 24)	23% (19; 27)	24% (20; 28)	17% (12; 22)	22% (17; 27)	5% (1; 9)	8% (3; 13)
Other	11% (9; 13)	1% (0; 1)	17% (13; 21)	1% (0; 2)	5% (2; 8)	1% (0; 2)	2% (0; 5)	0%
Difficulty answering	2% (1; 3)	7% (5; 8)	0%	6% (4; 9)	4% (1; 7)	5% (3; 8)	0%	11% (6; 16)

Belarus is the country with the largest proportion of respondents supporting the right of same-sex couples to marry (51% in all cases, and 32% in individual cases). Armenia demonstrates the lowest level of support (19% and 15% respectively). As always, the percentage of support among social workers is highest, ranging from 52% in Armenia to 68% in North Macedonia. The distribution among medical workers is significant due to the sharp decrease in support among Armenian medical workers (2% versus 14% in 2017) for the right of same-sex couples to marry in comparison with the previous assessment. Meanwhile, this figure reaches 58% among the Macedonian sub-sample. The police of Kyrgyzstan explicitly reject the idea of same-sex marriage (91%). A third of Macedonian police respondents hold the opinion that same-sex marriage could be permitted in exceptional cases, while another third said this question was difficult to answer. This was the highest percentage of those choosing this answer among all professional sub-samples by country.

In terms of changes in responses compared to the previous assessment, there was an increase in support for the right of same-sex couples to marry among the general sample of Belarus, and, conversely, an increase in opposition to such a right among the sample of Armenia. The decrease in the percentage of support for same-sex marriage among medical workers in Armenia and Kyrgyzstan, and the opposite trend among medical workers in Belarus, should also be noted.

Table 22. Respondents' opinions about the right to marriage of same-sex couples by country and professional group by year (95% confidence intervals are indicated in parentheses)

			Do you be	lieve that sam	e-sex couple	s should have	Do you believe that same-sex couples should have the same right to marry as opposite-sex couples?	to marry as op	posite-sex co	onples?	
Country	Prof. group	Yes, they have th	Yes, they should have this right	No, in no case should this right be granted to them	ise should ie granted iem	There be exc (individual c	There should be exceptions (individual consideration)	Other	ā	Difficulty answering	nswering
		2017	2019	2017	2019	2017	2019	2017	2019	2017	2019
	Total	33% (25; 41)	19% (13; 25)	21% (14; 28)	61% (54; 69)	15% (9; 21)	15% (10; 21)	23% (16; 30)	%0	8% (3; 13)	4% (1; 7)
einən	Medical workers	14% (6; 22)	2% (0; 4)	25% (15; 35)	85% (79; 92)	22% (12; 31)	7% (2; 12)	40% (29; 51)	%0	%0	5% (1; 10)
плА	Social workers	58% (45; 71)	52% (39; 64)	16% (6; 26)	17% (7; 26)	7% (0;14)	30% (18; 42)	2% (0; 6)	%0	18% (8; 28)	2% (0; 5)
-	Police	1	ı	ı	1	ı	ı	1	1	ı	ı
	Total	16% (9; 23)	51% (41; 61)	27% (19; 35)	5% (1; 9)	37% (28; 46)	32% (23; 41)	20% (13; 27)	%0	%0	12% (6; 18)
guns	Medical workers	11% (5; 17)	51% (41; 61)	30% (21; 39)	5% (1; 9)	38% (29; 47)	32% (23; 41)	22% (14; 30)	%0	%0	12% (6; 18)
Be	Social workers	50% (24; 76)	1	7% (0; 20)	ı	36% (11; 61)	I	7% (0; 20)	1	%0	ı
	Police	I	ı	1	-	I	I	I	I	ı	I
	Total	40% (32; 48)	42% (34; 50)	39% (31; 47)	39% (31; 47)	19% (12; 26)	16% (10; 22)	2% (0; 4)	2% (0; 4)	1% (0;3)	1% (0; 3)
eigro	Medical workers	26% (16; 36)	29% (19; 39)	59% (47;71)	47% (37; 58)	14% (6; 22)	20% (11; 29)	%0	4%	1% (0; 3)	%0
əŋ	Social workers	56% (43; 69)	57% (45; 69)	15% (6; 24)	29% (18; 39)	24% (13; 35)	11% (4; 19)	5% (0; 11)	%0	%0	3% (0; 7)
	Police	-	1	1	1	-	1	1	1	1	1

			Do you be	lieve that sam	e-sex couple	s should have	Do you believe that same-sex couples should have the same right to marry as opposite-sex couples?	to marry as of	posite-sex c	onples?	
Country	Prof. group	Yes, they should have this right	/should is right	No, in no case should this right be granted to them	ise should e granted em	There be exc (individual c	There should be exceptions (individual consideration)	Other	i e	Difficulty answering	inswering
		2017	2019	2017	2019	2017	2019	2017	2019	2017	2019
	Total	28% (22; 34)	24% (19; 29)	53% (47; 59)	(67 :6E)	14% (10; 18)	23% (19; 28)	6% (3; 9)	%0	%0	9% (6; 12)
netzz	Medical workers	31% (22; 40)	15% (9; 21)	42% (32; 52)	34% (26; 43)	20% (12; 28)	42% (33; 51)	7% (2; 12)	%0	%0	9% (4; 14)
Kyrgy	Social workers	57% (45; 69)	58% (48; 68)	16% (7; 25)	5% (1; 9)	19% (10; 28)	25% (17; 33)	7% (1; 13)	%0	%0	12% (6; 18)
	Police	%0	1,9%	96% (92; 100)	91% (86; 97)	1% (0; 3)	1% (0; 3)	2% (0; 5)	%0	%0	6% (1; 10)
ein	Total	55% (45; 66)	50,8% (42; 59)	18% (10; 26)	19% (12; 26)	16% (8; 24)	19% (12; 26)	10% (4; 16)	4% (1; 7)	%0	7% (3; 11)
орәэ	Medical workers	46% (32; 60)	58% (44; 72)	23% (11; 35)	28% (15; 40)	17% (6; 28)	8% (1; 15)	15% (5; 25)	6% (0; 13)	%0	%0
M Hi	Social workers	78% (64; 94)	68% (55; 81)	7% (0;17)	6% (0; 13)	7% (0; 17)	22% (11; 33)	7% (0;17)	4% (0;9)	%0	%0
οИ	Police	42% (14; 70)	10% (0; 21)	25% (0; 49)	27% (11; 43)	33% (6; 60)	33% (16; 50)	%0	%0	0%	30% (14; 46)

Finally, the last variable examined in this section relates to respondents' opinions on whether homosexual citizens should have the right to raise or have custody of children. As we see, this question received even fewer positive responses than the last: only a fifth of respondents support this right. As in previous cases, social workers are the most likely to support the right of homosexual people to raise or adopt children, while police are the least likely to support this right. However, it should be noted that, in comparison with the previous assessment, law enforcement officers were significantly less unanimous in their opinion on this issue, with nearly a quarter responding that they have difficulty answering this question.

Table 23. Respondents' opinions about the right of same-sex couples to adopt and/or raise children by professional group by year (95% confidence intervals are indicated in parentheses)

Respondents' level	То	tal	Medical	workers	Social v	vorkers	Pol	lice
of support of the right of same-sex couples to adopt and/or raise children	2017, N=709	2019, N=876	2017, N=393	2019, N=460	2017, N=225	2019, N=280	2017, N=91	2019, N=136
Yes, they should have this right	19% (16; 22)	23% (20; 25)	10% (7; 13)	16% (13; 19)	43% (37; 49)	43% (37; 48)	0%	3% (0; 6)
No, in no case should this right be granted to them	40% (36; 44)	41% (38; 44)	41% (36; 46)	47% (42; 52)	18% (13; 23)	17% (12; 21)	93% (88; 98)	71% (64; 79)
There should be exceptions (individual consideration)	27% (24; 30)	24% (21; 27)	34% (29; 39)	30% (25; 34)	26% (20; 32)	26% (21; 31)	2% (0; 5)	1% (0; 3)
Other	11% (9; 13)	1% (1; 2)	15% (11; 19)	2,6% (1; 4)	8% (4; 12)	0%	0%	0%
Difficulty answering	2% (1; 3)	11% (9; 13)	0%	4,8% (3; 7)	4% (1; 7)	15% (11; 19)	4% (0; 8)	24% (17; 31)

Turning to an overview of the results by country (Table 24), we see that support for the right of same-sex couples to raise and adopt children is relatively low: from 17.6% in Armenia to 28.7% in Georgia. The percentage of those who consider this unacceptable ranges from 23% in Belarus to 60.6% in Armenia, while a rather large percentage of respondents believe that an individual approach to this issue is necessary (from 10% in North Macedonia to 46% in Belarus).

Social workers consistently top the list of those supporting the right of same-sex couples to raise children: from a quarter to more than half of respondents from this group support this right. Medical workers are much less positive: among this group, from 0% (Armenia) to 30% (North Macedonia) of respondents supported this right. The results of the police sample are interesting: while the level of support for the right of same-sex couples to raise children does not exceed 5% in either country, the majority of law enforcement officers in Kyrgyzstan (91%) consider this unacceptable, while the majority of Macedonian officers (93%) responded that they have difficulty answering this question.

The Belarusian sample and, accordingly, the sub-sample of Belarusian medical workers, demonstrated changes related to increasing support for the right of same-sex couples to adopt and raise children. At the same time, these samples exhibited a statistically significant decrease in the percentage of those opposing this right. An increase in the percentage of those opposed to this right was observed among Armenian medical workers, and a decrease among the general Kyrgyz sample and the police in Macedonia.

To summarize this section, the personal attitudes of respondents towards LGBT people can be described as rather positive. The majority of respondents believe that homosexuality should be accepted in society, and believe that its equality to heterosexuality is a given. Three-fourths of respondents assess their personal attitudes towards LGBT people as positive or neutral. Social distance in relation

to LGBT people is generally average, however, respondents exhibit greater social distance in relation to transgender people than to other LGBT people. The lowest social distance is exhibited in relation to homosexual men. Respondents demonstrate an average degree of social alienation in relation to LGBT people, and tend to assess their status to be equal to that of LGBT people. Respondents believe that LGBT people should enjoy the same rights as other citizens in society, but are much less open to the recognition of the right of same-sex couples to marry and to adopt and raise children.

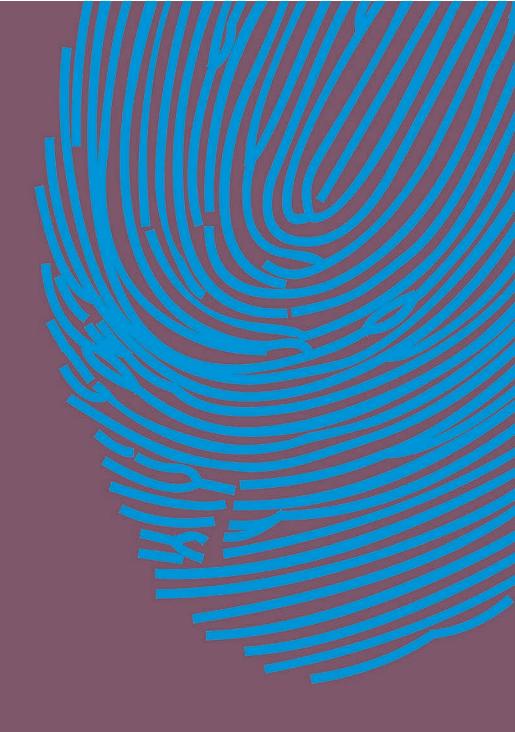
Social workers almost always exhibit much higher levels of acceptance and positive attitudes towards LGBT people than the other two professional groups. Meanwhile, police consistently demonstrate the most negative attitude.

In general, the trends described are consistent with the results of the previous assessment.

Table 24. Respondents' opinion about the right of homosexual couples to adopt and/or raise children by country and professional group by year (95% confidence intervals are indicated in parentheses)

			O	Do you believe t	hat homosexu	al citizens hav	believe that homosexual citizens have the right to adopt and/or raise children?	dopt and/or r	aise childre	17	
Country	Prof. group	Yes, they should have this right	nould have	No, in no c this right to t	No, in no case should this right be granted to them	There be exc (individual co	There should be exceptions (individual consideration)	Other	<u>.</u>	Difficulty	Difficulty answering
		2017	2019	2017	2019	2017	2019	2017	2019	2017	2019
	Total	21% (14; 28)	18% (12; 23)	26% (18; 34)	61% (53; 68)	22% (15; 29)	16% (10; 21)	23% (16; 30)	3% (0; 5)	8% (3; 13)	2,9% (0,4; 5,4)
einən	Medical workers	7% (1;13)	%0	27% (17; 37)	84% (77; 91)	27% (17; 37)	10% (4; 16)	38% (27; 49)	5% (1; 8)	%0	1,8% (0; 4,3)
ηΑ	Social workers	39% (26; 52)	50% (37; 63)	25% (14; 36)	18% (9; 28)	16% (6; 26)	27% (15; 38)	4% (0;9)	%0	18% (8; 28)	5% (0; 10,5)
	Police	I	I	ı	I	I	I	I	ı	ı	I
	Total	4% (0; 8)	20% (12; 28)	41% (32; 50)	23% (15; 31)	40% (31; 49)	46% (36; 56)	15% (8; 22)	%0	%0	11% (4,9; 17,1)
gule	Medical workers	2% (0; 5)	20% (12; 28)	46% (36; 56)	23% (15; 31)	36% (27; 45)	46% (36; 56)	17% (10; 24)	%0	%0	11% (4,9; 17,1)
Вe	Social workers	21% (0; 42)	ı	7% (0; 20)	I	71% (47; 95)	I	%0	I	0%	1
	Police	-	1	1	I	I	I	1	1	_	I
	Total	27% (19; 35)	29% (21; 36)	34% (26; 42)	45% (37; 53)	34% (26; 42)	19% (13; 26)	5% (1; 9)	3% (0; 6)	1% (0; 3)	4% (1,7 ;9,0)
eigro	Medical workers	19% (10; 28)	26% (17; 36)	47% (35; 59)	55% (44; 66)	33% (22; 44)	11% (4; 18)	%0	6% (1; 12)	1% (0; 3)	1,3% (0; 3,8)
əŋ	Social workers	38% (26; 50)	31% (21; 42)	17% (7; 27)	33% (22; 44)	34% (22; 46)	29% (18; 39)	10% (2;18)	%0	%0	7,1% (1,1; 13,1)
	Police	1	-	1	-	I	ı	ı	ı	ı	ı

			Do	you believe t	hat homosexu	al citizens hav	Do you believe that homosexual citizens have the right to adopt and/or raise children?	dopt and/or r	aise childre	٦?	
Country	Prof. group	Yes, they should have this right	nould have	No, in no c this right	No, in no case should this right be granted to them	There be exce (individual co	There should be exceptions (individual consideration)	Other	70	Difficulty	Difficulty answering
		2017	2019	2017	2019	2017	2019	2017	2019	2017	2019
	Total	19% (14; 24)	23% (19; 28)	53% (47; 59)	41% (36; 47)	23% (18; 28)	29% (24; 34)	5%% (2; 8)	%0	%0	6% (3; 9)
ueţsz	Medical workers	11% (5; 17)	15% (9; 21)	42% (32; 52)	28% (20; 36)	42% (32; 52)	53% (44; 61)	5% (1; 9)	%0	%0	4% (1; 8)
_K λι <mark>ፎ</mark> λ	Social workers	54% (42; 66)	55% (45; 65)	15% (7; 23)	5% (1; 9)	21% (11; 31)	30% (21; 39)	10% (3; 17)	%0	%0	10% (4; 16)
	Police	%0	(9	100%	91% (85; 96)	%0	2% (0; 5)	%0	%0	%0	5% (1; 9)
sin	Total	25% (16; 34)	21% (14; 29)	34% (24; 44)	25% (17; 32)	22% (13; 31)	10% (5; 15)	15% (8; 22)	1% (0; 4)	5% (0;10)	42% (34; 51)
оразе	Medical workers	18% (7; 29)	30% (17; 43)	39% (25; 53)	46% (32; 60)	22% (10; 34)	14% (4; 24)	20% (9; 31)	4% (0;9)	%0	6% (0; 13)
Kth Ma	Social workers	46% (28; 64)	24% (12; 36)	21% (6; 36)	16% (6; 26)	21% (6; 36)	12% (3; 21)	11% (0; 23)	%0	%0	48% (34; 62)
oN	Police	%0	3% (0;10)	45% (16; 74)	3% (0;10)	18% (0; 41)	%0	%0	%0	36% (8; 64)	93% (84; 100)



Section 3.
Analysis of the attitudes of professional groups towards LGBT people in five CEECA countries

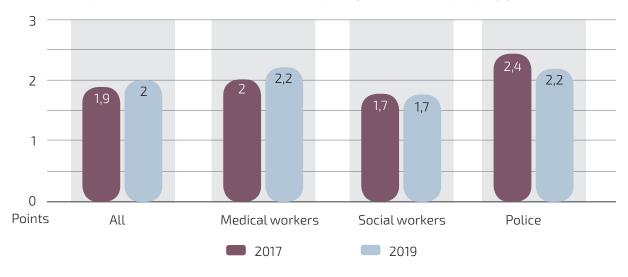
Having examined the personal attitudes of respondents towards LGBT people, we now turn to an examination of how they assess the attitudes of their professional groups towards LGBT people. Due to the fact that a large proportion of social and medical workers personally acquainted with LGBT people were included in the sample for methodological reasons, this variable is a more valid way to paint a picture of the attitudes of these professional groups towards LGBT people than the assessment of respondents' personal opinions.

In order to compare the results with those of the 2017 assessment, the answers to the question regarding the attitudes of the respondent's professional group towards LGBT people, "Neutral" and "Difficulty answering", were combined into one since they are close in meaning. Thus, a three-point, pseudometric scale was obtained with the following values:

- [1; 1,7] positive attitude towards LGBT people;
- (1,7; 2,3) neutral/undefined attitude towards LGBT people;
- [2,3; 3] negative attitude towards LGBT people.

As we see in Figure 12 below, in general, respondents assess the attitudes of their professional group towards LGBT people as neutral or undefined. Such is the opinion of medical workers and the police. Social workers, on the other hand, believe that their colleagues have a positive attitude towards LGBT people. This situation is a reflection of the results of the previous assessment, with the exception of the police, who, in 2017, were more inclined to believe that law enforcement agencies had negative attitudes towards LGBT people.

Figure 12. Respondents' assessments of the attitudes of representatives of their own professional group towards LGBT people by professional group by year



On average, across countries, respondents assess the attitudes of their professional groups towards LGBT people as neutral. Only respondents in Armenia assess this as negative. Medical workers in Armenia and Kyrgyzstan, and the police in Kyrgyzstan assessed the attitudes of their colleagues towards LGBT people as negative. Social workers in Kyrgyzstan and the police in North Macedonia assessed this as positive. The remaining sub-samples assessed the attitudes of their colleagues as neutral.

Negative changes were observed among the general sample of Armenia and among Kyrgyz and Armenian medical workers, while positive changes were observed among the sub-sample of Macedonian police. In the remaining cases, the values are stable and correspond to the results obtained in the previous assessment.

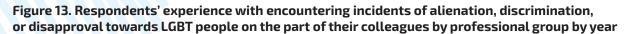
Table 25. Respondents' assessment of the attitudes of representatives of their own professional group towards LGBT people by country and professional group by year

	2017		2019	
Country	Prof. group	Respondents' assessment of the attitudes of representatives of their own professional group towards LGBT people	Prof. group	Respondents' assessment of the attitudes of representatives of their own professional group towards LGBT people
	Total, N=130	2,1	Total, N=170	2,3
Armenia	Medical workers, N=73	2,1	Medical workers, N=110	2,4
Aimema	Social workers, N=57	2	Social workers, N=60	2,1
	Police, N=0	-	Police, N=0	-
	Total, N=115	2	Total, N=100	2
Belarus	Medical workers, N=101	2	Medical workers, N=100	2
Detaius	Social workers, N=14	1,6	Social workers, N=0	-
	Police, N=0	-	Police, N=0	-
	Total, N=128	2	Total, N=150	1,9
Georgia	Medical workers, N=70	2,2	Medical workers, N=80	2,1
deorgia	Social workers, N=58	1,8	Social workers, N=70	1,8
	Police, N=0	-	Police, N=0	-
	Total, N=249	1,9	Total, N=326	2
Kyrgyzstan	Medical workers, N=100	1,7	Medical workers, N=120	2,4
	Social workers, N=69	1,5	Social workers, N=100	1,3
	Police, N=80	2,4	Police, N=106	2,3
	Total, N=89	1,9	Total, N=130	1,8
North	Medical workers, N=49	2	Medical workers, N=50	1,9
Macedonia	Social workers, N=28	1,8	Social workers, N=50	1,8
	Police, N=12	2	Police, N=30	1,7

We now take a closer look at what respondents reported about their experiences encountering incidents of alienation, discrimination, or disapproval towards LGBT people on the part of representatives of their professional groups, and how this corresponds to the results of the previous assessment.

In the general sample, only a fifth of respondents reported that they encounter such attitudes towards LGBT people on the part of their colleagues. At the same time, one half indicated that they encounter this infrequently. An interesting trend is observed when examining individual professional categories: the more positively respondents assessed the attitudes of their colleagues towards LGBT people, the more often they reported experiences encountering incidents of alienation, discrimination or disapproval, and vice versa. Thus, 29% of social workers reported such experiences, 18% of medical workers, and only 3% of law enforcement officers. This can probably be explained by more attentive and sensitive attitudes and the ability to recognize such incidents, which are connected to a more positive attitude towards LGBT people, or by the sensitivity of the issue, causing respondents to portray their colleagues in a more positive light.

Compared to the values of 2017, changes were observed only in relation to the police sub-sample: the percentage of respondents who reported that they had never encountered manifestations of negative attitudes towards LGBT people on the part of their colleagues increased in comparison with the results of the last assessment.





Among the five countries (Table 26), respondents from Belarus (33%) most often report that they have experience encountering incidents of alienation, discrimination, or disapproval towards LGBT people on the part of their colleagues, while respondents from Armenia and Kyrgyzstan (15%) report this the least often. Social workers are most likely to report intolerance among representatives of their professional group (with the exception of social workers in Macedonia, where medical workers are more likely to report this). The police are the least likely to report such intolerance. For the most part, respondents indicate that this happens rarely or from time to time.

Regarding changes in comparison to the previous assessment, the sub-samples of Georgia and North Macedonia and the police in Kyrgyzstan and North Macedonia demonstrated a decrease in the percentage of those who reported that they have experience encountering incidents of alienation, discrimination, or disapproval towards LGBT people on the part of their colleagues. The opposite trend was observed among social workers in Kyrgyzstan. It is difficult to say whether this is due to a real reduction in incidents of alienation, discrimination, or disapproval towards LGBT people, or whether respondents simply notice or report such incidents less frequently.

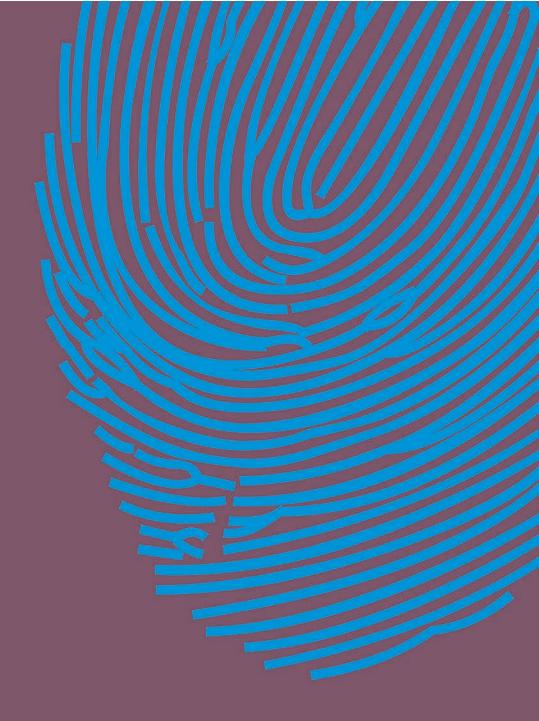
Examples of incidents of alienation, discrimination, or disapproval towards LGBT people cited by respondents include: negative comments, jokes, ridicule, laughter, bullying, misunderstanding, disrespectful tone of communication, refusal to provide medical services or to work with clients, avoidance, transfer to other employees, expression of disgust, squeamishness, use of stigmatizing and humiliating vocabulary, talking behind the client's back, treating non-heterosexual orientations or transgenderness as a disease or sin, disclosure of confidential information (outing), promoting violence against LGBT people, refusal to grant temporary asylum, separating LGBT people from others, transphobic and homophobic remarks, stereotyping, and physical violence.

Thus, respondents assess the attitudes of their professional groups towards LGBT people as neutral. The majority report that they have never encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of their colleagues. However, the values for these variables are contradictory.

Table 26. Respondents' experience with encountering incidents of alienation, discrimination, or disapproval towards LGBT people on the part of their colleagues by country and professional group by year (95% confidence intervals are indicated in parentheses)

	l incidents proval towards rorkers/social	No, I have never encountered this	84,7% (79,3; 90,1)	93,6% (89; 98,2)	68,3% (56,5; 80,1)	1	67% (57,8; 76,2)	67% (57,8; 76,2)	1	1
	Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of medical workers/social workers/social	Yes, I rarely encounter this	3,5% (0,7; 6,3)	1,8% (0; 4,3)	6,7% (0,4;13)	ı	29% (20,1; 37,9)	29% (20,1; 37,9)	ı	ı
2019	e you person: ation, discrimi eople on the p	Yes, I encounter this from time to time	8,2% (4,1; 12,3)	3,6% (0,1; 7,1)	16,7% (7,3; 26,1)	I	4% (0,2; 7,8)	4% (0,2; 7,8)	ı	I
	Hav of aliena LGBT po	Yes, I constantly encounter this	3% (1; 6)	1% (0; 3)	8% (1; 15)	I	%0	%0	I	I
		Prof. group	Total, N=170	Medical workers, N=110	Social workers, N=60	Police, N=0	Total, N=100	Medical workers, N=100	Social workers, N=0	Police, N=0
	ntered incidents n, or disapproval part of medical rs/police?	No, I have never encountered this	76% (69; 83)	90% (83; 97)	58% (45; 71)	1	79% (72; 86)	81% (73; 89)	64% (39; 89)	ı
	encountere ination, or o on the par workers/p	Yes, I rarely encounter this	12% (6; 18)	4%	21% (10; 32)	I	19% (12; 26)	17% (10; 24)	36% (11; 61)	I
	you personally encountered incienation, or disappenation, discrimination, or disappenation de LGBT people on the part of morkers/social workers/police?	Yes, I encounter this from time to time	12% (6; 18)	5% (0; 10)	21% (10; 32)	I	2% (0; 5)	2% (0; 5)	%0	I
2017	Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of medical workers/social workers/police?	Yes, I constantly encounter this	%0	%0	%0	I	%0	%0	%0	I
		Prof. group	Total, N=130	Medical workers, N=73	Social workers, N=57	Police, N=0	Total, N=115	Medical workers, N=101	Social workers, N=14	Police, N=0
				mıA			รทมย			

		2017						2019		
		Have you of alienati towards L worl	Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of medical workers/social workers/police?	encountere ination, or c on the pari workers/po	d incidents disapproval of medical		Hav of aliena LGBT pe	e you persona tion, discrimi tople on the p	Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of medical workers/social workers/social	d incidents proval towards rorkers/social
Сопид	Prof. group	Yes, I constantly encounter this	Yes, I encounter this from time to time	Yes, I rarely encounter this	No, I have never encountered this	Prof. group	Yes, I constantly encounter this	Yes, I encounter this from time to time	Yes, I rarely encounter this	No, I have never encountered this
	Total, N=128	2% (0; 4)	9% (4; 14)	23% (16; 30)	66% (58; 74)	Total, N=150	1% (0; 3)	6,7% (2,7;10,7)	10,7% (5,7;15,6)	81,3% (75,1; 87,5)
eigro	Medical workers, N=70	3% (0; 7)	(6 ;0)	19% (10; 28)	74% (64; 84)	Medical workers, N=80	3% (0; 6)	6% (1;12)	<i>7</i> % (2; 13)	84% (76; 92)
aŋ	Social workers, N=58	%0	16% (7; 25)	28% (16; 40)	57% (44; 70)	Social workers, N=70%	%0	7% (1; 13)	14% (6; 23)	79% (69; 88)
	Police, N=0	I	ı	1	1	Police, N=0	I	1	1	1
	Total, N=249	2% (0; 4)	3% (1; 5)	5% (2; 8)	90% (86; 94)	Total, N=326	2% (0; 3)	4% (2; 6)	10% (7;13)	85% (81; 89)
netzs	Medical workers, N=100	%0	%0	3% (0; 6)	97% (94; 100)	Medical workers, N=120	%0	4% (1; 8)	6% (2; 10)	90% (85; 95)
Kyrgy	Social workers, N=69	1% (0; 3)	4% (0;9)	9% (2; 16)	86% (78; 94)	Social workers, N=100	4% (0; 8)	7% (2;12)	24% (16; 32)	65% (56; 74)
	Police, N=80	5% (0;10)	6% (0;11)	5% (0;10)	84% (76; 92)	Police, N=106	2% (0; 5)	%0	1% (0; 3)	97% (94; 100)
ein	Total, N=89	1% (0; 3)	26% (17; 35)	15% (8; 22)	58% (48; 68)	Total, N=130	3% (0; 6)	11% (6;17)	9% (4; 13)	77% (70; 84)
оразе	Medical workers, N=49	%0	22% (10; 34)	14% (4; 24)	63% (49; 77)	Medical workers, N=50	8% (1; 15)	14% (4; 24)	14% (4; 24)	64% (51; 77)
rth Ma	Social workers, N=28	4% (0; 11)	29% (12; 46)	11% (0; 23)	57% (39; 75)	Social workers, N=50	%0	14% (4; 24)	8% (1; 15)	78% (67; 89)
οИ	Police, N=12	%0	33% (6; 60)	25% (0; 49)	42% (14; 70)	Police, N=30	%0	3% (0;10)	%0	97% (90;100)



Section 4.

Experience providing services and assistance to LGBT people in five CEECA countries

The next section is devoted to the issue of the provision of services and assistance by respondents to LGBT people. To begin with, we determine whether the professional responsibilities of respondents include the provision of counseling services to LGBT people. During the previous assessment, this question was put to medical and social workers, however, in 2019, it was only put to social workers. Methodologically, it consists of two variables: the provision of counseling services related to the prevention of the human immunodeficiency virus (HIV), and the provision of counseling services related to the prevention of sexually transmitted infections (STIs). Both variables are dichotomous, meaning there are two possible answers "yes" or "no". After recoding, the logic of the values obtained is the following: it is believed that the respondent provides counseling services to LGBT people if he answered at least one question positively. If we indicate that the respondent does not provide such services, this means that he does not provide counseling to LGBT people in relation to STIs or to HIV.

Thus, half of the respondents provide counseling services to LGBT people. This is slightly lower than during the previous assessment.

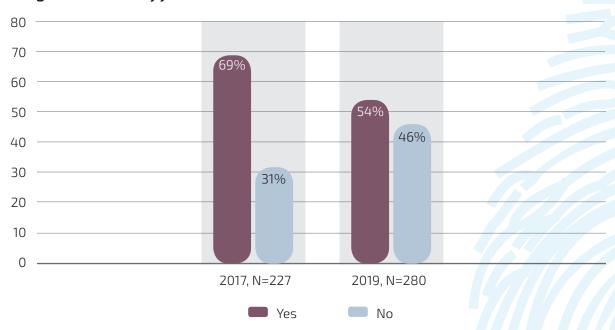


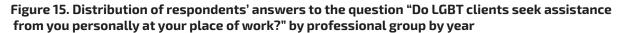
Figure 14. Provision of HIV and STI counseling services to LGBT people among social workers by year

Kyrgyzstan has the largest percentage of social workers that provide counseling services (79%), however, this value slightly decreased in comparison to 2017. Meanwhile, North Macedonia has the smallest percentage (28%).

Table 27. Provision of HIV and STI counseling services to LGBT people by country by year (95% confidence intervals are indicated in parentheses)

1			2017			2019	
	Country	Prof. group	Provisio and/or STI services to l		Prof. group	and/or ST	on of HIV I counseling LGBT people
			Yes	No		Yes	No
	Armenia	Social workers, N=57	26% (16; 40)	74% (60; 84)	Social workers, N=60	32% (20; 43)	68% (57; 80)
	Belarus	Social workers, N=14	workers, 86% 14% Social workers (56; 97) (3; 44) N=0		Social workers, N=0	-	-
	Georgia	Social workers, N=59	75% (61; 85)	25% (15; 39)	Social workers, N=70	54% (43; 66)	46% (34; 57)
	Kyrgyzstan	Social workers, N=69	100%	0%	Social workers, N=100	79% (71; 87)	21% (13; 29)
	Macedonia	Social workers, N=28	57% (37; 75)	43% (25; 63)	Social workers, N=50	28% (15; 40)	72% (59; 84)

The next issue examined is whether LGBT people personally seek assistance from respondents in connection with their work. Half of the respondents of the entire sample answered "yes" to this question, 38% answered "no", and a bit more than 10% had difficulty answering. Broken down by professional group, LGBT people most often seek assistance from social workers, and least often from police. Since this question was only put to two professional groups in 2017, it is not possible to track changes related to this question among law enforcement officers. Nevertheless, the positive trend in relation to medical and social workers should be noted: in 2017, respectively, 45% and 51% of respondents responded affirmatively to this question, while in 2019, these figures reached 51% and 53% respectively. The increased percentage of medical workers who had difficulty answering this question should also be noted. This may be linked to the fact that they began to more critically assess the experience of providing services and their patients, having become more sensitive to the issue of sexual orientation and gender identity.





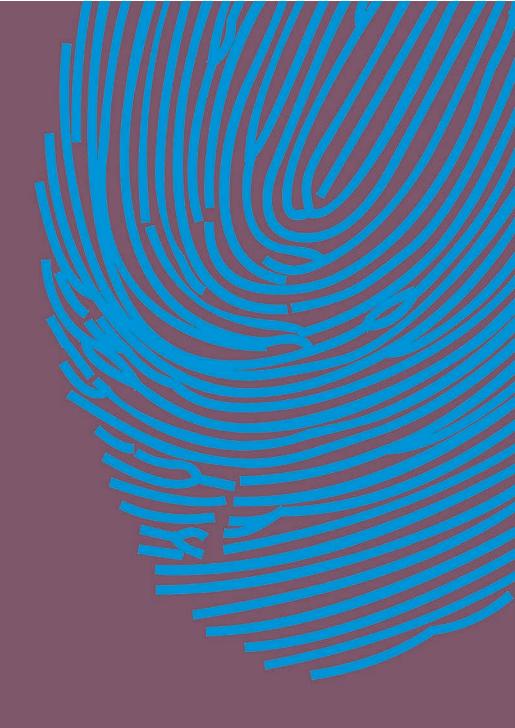
When considering the specifics of whether LGBT people seek assistance from specialists by country, it is difficult to establish clear patterns. The percentage of medical workers who reported that LGBT people seek professional services from them personally ranges from 32% in North Macedonia to 75% in Georgia. For social workers, this figure ranges from 44% in North Macedonia to 73% in Kyrgyzstan. Among police officers, the situation is even less clear: 31% of law enforcement officers in Kyrgyzstan answered this question affirmatively, while 0% of law enforcement officers in North Macedonia did so.

In comparison with 2017, we see changes among medical and social workers in Kyrgyzstan. These groups began to report more often that LGBT people seek assistance from them. We also see changes among medical and social workers in Armenia. In this case, there was a statistically significant decrease in respondents who indicate that LGBT people do not seek assistance personally from them in connection with their work. The number of respondents providing a negative answer to this question also decreased among medical workers in North Macedonia. A significant part of such respondents switched to the "Difficulty answering" category.

Table 28. Distribution of respondents' answers to the question "Do LGBT clients seek assistance from you personally at your place of work?" by country and professional group by year (95% confidence intervals are indicated in parentheses)

_		D	o LGBT client		stance from y ice of work?	ou person	ally
Country	Prof. group	Y	es	ı	No	Difficulty	y answering
		2017	2019	2017	2019	2017	2019
	Total	-	45% (38; 53)	-	30% (23,1; 36,9)	-	24,7% (18,2; 31,2)
Armenia	Medical workers	23% (13; 33)	41% (32; 50)	63% (52; 74)	28% (20; 37)	14% (6; 22)	31% (22; 39)
	Social workers	32% (20; 44)	53% (41; 66)	61% (48; 74)	33% (21; 45)	7% (0; 14)	13% (5; 22)
	Police	-	-	-	-	-	-
	Total	-	64% (55; 73)	-	18% (11; 25)	-	18% (11; 25)
Belarus	Medical workers	70% (61; 79)	64% (55; 73)	14% (7; 21)	18% (11; 25)	16% (9; 23)	18% (11; 25)
	Social workers	93% (80; 100)	-	0%	-	7% (0; 20)	-
	Police	-	-	-	-	-	-
	Total	-	65% (57; 72)	-	29% (22; 37)	-	6% (2; 10)
Georgia	Medical workers	70% (59; 81)	75% (65; 85)	23% (13; 33)	14% (6; 21)	7% (1; 13)	11% (4; 18)
	Social workers	41% (28; 54)	53% (41; 65)	39% (27; 51)	47% (35; 59)	20% (10; 30)	0%
	Police	-	-	-	-	-	-
	Total	-	51% (46; 57)	_	46% (41; 51)	_	3% (1; 5)
Kurguzetan	Medical workers	28% (19; 37)	51% (42; 60)	68% (59; 77)	47% (38; 56)	4% (0; 8)	3% (0; 5)
Kyrgyzstan	Social workers	35% (24; 46)	73% (64; 82)	58% (46; 70)	23% (15; 31)	7% (1; 13)	4% (0; 8)
	Police	-	31% (22; 40)	-	67% (58; 76)	-	2% (0; 5)
	Total	-	29% (21; 37)	_	51% (43; 60)	_	19% (12; 26)
Macedonia	Medical workers	27% (15; 39)	32% (19; 45)	61% (47; 75)	20% (9; 31)	12% (3; 21)	48% (34; 62)
Macedonia	Social workers	50% (31; 69)	44% (30; 58)	32% (15; 49)	56% (42; 70)	18% (4; 32)	0%
	Police	-	0%	-	97% (90; 100)	-	3% (0; 10)

To summarize, only slightly more than half of the social workers surveyed provide counseling services to LGBT people. In terms of the direct work of respondents, LGBT people only seek assistance from half of the respondents, to a greater extent from social workers, and to a much lesser extent from the police.

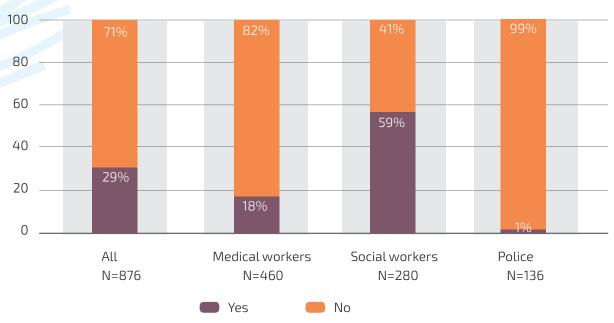


Section 5.
Respondents' development and training on working with LGBT people in five CEECA countries

In the context of the issue being studied, whether or not respondents have undergone any training on working with LGBT people is an important factor, since this can potentially affect their attitudes towards LGBT people.

As we see in Figure 16, less than a third of respondents of the general sample have undergone training on developing tolerant attitudes towards LGBT people. This value is two times higher among social workers. Among medical workers it almost reaches 20%, and among police it is close to 0%. It should be emphasized that this is exactly the "hierarchy" of attitudes towards LGBT people among the three professional groups: social workers have the most positive attitudes, followed by medical workers, followed by the police, who have the most negative attitudes.

Figure 16. Distribution of respondents' answers to the question about whether they have undergone special training on developing tolerant attitudes towards LGBT people by professional group



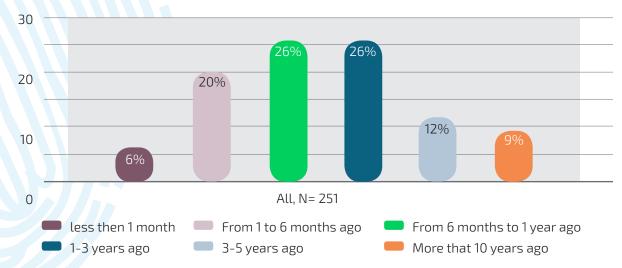
The percentage of those who have undergone training on developing tolerant attitudes towards LGBT people by country ranges from 10% (Belarus) to 37% (Kyrgyzstan). As expected, this value is higher among social workers than among the other two groups (44-75% in comparison to 9-36% among medical workers). Judging by the results obtained, police officers do not receive any systematic training on this issue.

Table 29. Distribution of respondents' answers to the question about whether they have undergone special training on developing tolerant attitudes towards LGBT people by country and professional group (95% confidence intervals are indicated in parentheses)

Country	Professional group	Have you undergone special training on developing tolerant attitudes towards LGBT people?			
_		Yes	No		
	Total, N=170	24% (18; 31)	76% (69; 82)		
Armenia	Medical workers, N=110	9% (4; 15)	91% (85; 96)		
	Social workers, N=60	52% (39; 64)	48% (36; 61)		
	Police, N=0	-	-		
	Total, N=100	10% (4; 16)	90% (84; 96)		
Belarus	Medical workers, N=100	10% (4; 16)	90% (84; 96)		
	Social workers, N=0	-	-		
	Police, N=0	-	-		
	Total, N=150	35% (28; 43)	65% (57; 72)		
Georgia	Medical workers, N=80	19% (10; 27)	81% (73; 90)		
	Social workers, N=70	54% (43; 66)	46% (34; 57)		
	Police, N=0	-	-		
	Total, N=326	37% (32; 42)	63% (58; 68)		
V. was makes	Medical workers, N=120	36% (27; 44)	64% (56; 73)		
Kyrgyzstan	Social workers, N=100	75% (67; 83)	25% (17; 33)		
	Police, N=106	2% (0; 5)	98% (95; 100)		
	Total, N=130	21% (14; 28)	79% (72; 86)		
North Macedonia	Medical workers, N=50	10% (2; 18)	90% (82; 98)		
MaceuUIIIa	Social workers, N=50	44% (30; 58)	56% (42; 70)		
	Police, N=30	0%	100%		

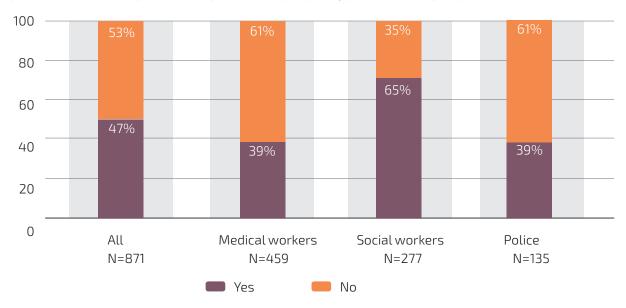
As we see in Figure 17, more than half of respondents who reported having undergone such training did so during the past year, which indicates that such training continues to be provided.

Figure 17. Distribution of the time since undergoing special training on developing tolerant attitudes towards LGBT people



We now consider whether respondents require additional professional training to work with LGBT people. As can be seen in Figure 18, more than half of respondents answered this question in the affirmative. Social workers demonstrate the highest rates for this variable, but it is also worth noting that medical workers and police officers expressed the need for such training at similar rates. For both groups, this value is nearly 40%. This indicates that the negative attitudes of law enforcement officers towards LGBT people may be a consequence of a lack of knowledge and training.

Figure 18. Distribution of respondents' answers regarding their need to undergo additional professional training on working with LGBT people by professional group



We now examine the situation in the country context. The smallest percentage of those expressing the need for additional training was observed in Armenia (18%), and the largest in North Macedonia (71%). An interesting pattern is observed, according to which respondents express a greater need for training in countries where the attitude towards LGBT people is more positive, and vice versa. Such a trend may be a direct result of the stigma towards LGBT people, which is present in countries with a more negative attitude towards representatives of this community, since respondents may not want to deal with the issue of SOGI or be associated with it in any way.

The differences between the answers of respondents from different professional groups are consistent with the trends described: social workers were the most likely to express the need for additional professional training (from 31% in Armenia to 86% in North Macedonia), followed by medical

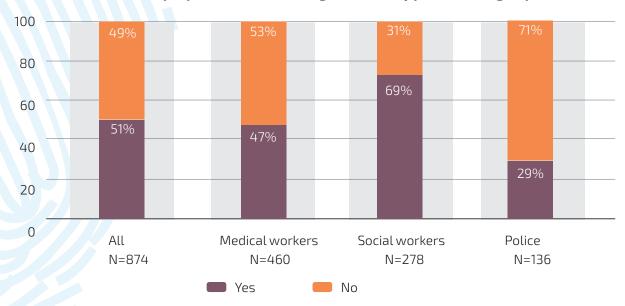
workers (from 12% in Armenia to 53% in Georgia). A quarter of the police in Kyrgyzstan responded to this question in the affirmative, while the absolute majority of law enforcement officers in North Macedonia did so (83%).

Table 30. Distribution of respondents' answers regarding their need to undergo additional professional training on working with LGBT people by country and professional group (95% confidence intervals are indicated in parentheses)

Country	Professional group		dergo additional professional working with LGBT people?
,	- Transcarion and Green	Yes	No
	Total, N=169	18% (13; 24)	82% (76; 87)
Armenia	Medical workers, N=110	12% (6; 18)	88% (82; 94)
	Social workers, N=59	31% (19; 42)	69% (58; 81)
	Police, N=0	-	-
	Total, N=100	50% (40; 60)	50% (40; 60)
Belarus	Medical workers, N=100	50% (40; 60)	50% (40; 60)
	Social workers, N=0	-	-
	Police, N=0	-	-
	Total, N=147	53% (45; 61)	47% (39; 55)
Georgia	Medical workers, N=79	32% (21; 42)	68% (58; 79)
	Social workers, N=68	78% (68; 88)	22% (12; 32)
	Police, N=0	-	-
	Total, N=325	49% (43; 54)	51% (46; 57)
	Medical workers, N=120	53% (44; 62)	47% (38; 56)
Kyrgyzstan	Social workers, N=100	67% (58; 76)	33% (24; 42)
	Police, N=105	27% (18; 35)	73% (65; 82)
	Total, N=130	71% (64; 79)	29% (21; 36)
North	Medical workers, N=50	50% (36; 64)	50% (36; 64)
Macedonia	Social workers, N=50	86% (76; 96)	14% (4; 24)
	Police, N=30	83% (70; 97)	17% (3; 30)

At the same time, half of the respondents expressed a desire to receive additional information about LGBT people and about how to work with this category of clients. Differences in answers among the professional groups for this variable are similar to previous ones: social workers expressed the greatest desire, followed by medical workers, and the police.

Figure 19. Distribution of respondents' answers regarding their desire to receive additional information about LGBT people and about working with them by professional group

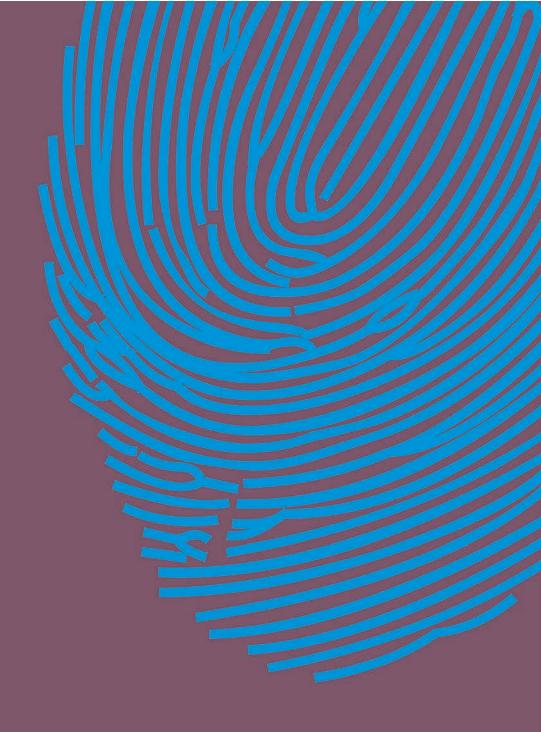


Respondents in Armenia expressed the least desire to receive additional information about LGBT people, with the opposite being true among respondents in North Macedonia. As always, social workers demonstrate the highest rates for this variable among the professional groups: they have the highest percentage of those wishing to receive additional knowledge. Among medical workers, these values are slightly lower. 80% of the police surveyed in North Macedonia expressed such a desire, while this figure was 15% among police in Kyrgyzstan. Only medical workers in Armenia had a lower value.

Table 31. Distribution of respondents' answers regarding their desire to receive additional information about LGBT people and about working with them by country and professional group (95% confidence intervals are indicated in parentheses)

Country	Professional group	Would you like to receive additional information about LGBT people and about working with them?			
- Country	1 Toressionar Broad	Yes	No		
	Total, N=169	19% (13; 25)	81% (75; 87)		
Armenia	Medical workers, N=110	14% (7; 20)	86% (80; 93)		
	Social workers, N=59	31% (19; 42)	69% (58; 81)		
	Police, N=0	-	-		
	Total, N=100	65% (56; 74)	65% (56; 74)		
Belarus	Medical workers, N=100	65% (56; 74)	65% (56; 74)		
	Social workers, N=0	-	-		
	Police, N=0	-	-		
	Total, N=149	57% (49; 65)	43% (35; 51)		
Georgia	Medical workers, N=80	40% (29; 51)	60% (49; 71)		
	Social workers, N=69	77% (67; 87)	23% (13; 33)		
	Police, N=0	-	-		
	Total, N=326	51% (45; 56)	49% (44; 55)		
	Medical workers, N=120	64% (56; 73)	36% (27; 44)		
Kyrgyzstan	Social workers, N=100	72% (63; 81)	28% (19; 37)		
	Police, N=106	15% (8; 22)	85% (78; 92)		
	Total, N=130	76% (69; 83)	24% (17; 31)		
North	Medical workers, N=50	52% (38; 66)	48% (34; 62)		
Macedonia	Social workers, N=50	98% (94; 100)	2% (0; 6)		
	Police, N=30	80% (66; 94)	20% (6; 34)		

To summarize, less than a third of respondents have undergone training on developing tolerant attitudes towards LGBT people. The largest percentage of those who received such training is observed among social workers, and the lowest percentage among the police. Half of the respondents who reported that they had undergone such training did so in the past year. Half of the respondents expressed the need and desire for professional training and information on working with LGBT people.



Section 6. Multivariate analysis We now move to the last section, which is devoted to multivariate analysis involving the study of factors affecting certain variables. The values that will be examined in this section include the degree of social distance in relation to LGBT people, the willingness of respondents to accept the idea of equality between LGBT people and other citizens, as well as respondents' assessments of the attitudes of representatives of their own professional group towards LGBT people.

We begin with the degree of social distance in relation to LGBT people. This value methodologically consists of two variables: the level of social alienation in relation to LGBT people and assessments of one's own position in society in comparison with LGBT people. Both are considered in detail in Section 2. The degree of social alienation indicates the degree of socio-psychological acceptance by respondents of LGBT people. An assessment of one's own position in society in comparison with LGBT people indicates what the respondent's opinion is about LGBT people: the higher the person assesses their own status in comparison with the status of LGBT people, the worse their opinion is about them, while the closer their assessment of the status of LGBT people is to their self-assessment, the more willing they are to accept LGBT people. Both variables are expressed using scales from -10 to 10.

In order to determine the degree of social distance, the k-means cluster analysis method was used in the computer software SPSS, the k-means method of which is based on Lloyd's algorithm.

As a result, three value clusters of the variable were identified: high, average, and low degree of social distance in relation to LGBT people. A high degree of social distance suggests a high degree of social alienation in relation to LGBT people and the assessment that one's own position in society is higher than that of LGBT people. An average degree indicates a higher than average degree of social alienation and an assessment that one's position in society is equal to that of LGBT people. A low degree indicates a low degree of social alienation and an assessment that one's position in society is equal to that of LGBT people (Table 32).

Table 32. Final cluster centers and their names

	Level of social alienation in relation to LGBT people	Assessment of one's own position in society in comparison to LGBT people
High degree of social distance in relation to LGBT people, N=184	-8	-5,4
Average degree of social distance in relation to LGBT people, N=360	-2,3	-0,8
Low degree of social distance in relation to LGBT people, N=332	7,1	-0,2

We now apply the multiple linear regression method to find out which factors influence social distance in relation to LGBT people. The degree of social distance was taken as a dependent variable with the following independent variables:

- 1. gender²;
- 2. age;
- 3. higher education³;

² Reference category "Men"

³ Reference category "No"

- 4. religious affiliation⁴;
- professional group⁵;
- 6. work experience;
- 7. type of locality⁶;
- presence of representatives of the LGBT community among one's close social circle⁷.

The results of the multiple linear analysis are presented in Table 33. Factors influencing the degree of social distance include:

- age: the older the respondent, the greater the degree of social distance in relation to LGBT people;
- 2. affiliation with a professional group: medical workers and police as opposed to social workers have a greater degree of social distance in relation to LGBT people;
- 3. type of locality: the smaller the type of locality, the greater the degree of social distance of the respondent in relation to LGBT people;
- 4. presence of representatives of the LGBT community among one's close social circle is linked with a lower degree of social distance in relation to LGBT people.

Compared with the linear regression results in the 2017 sample, the effect of being Muslim or one's work experience is not significant. However, the type of locality in which the respondent lives became significant.

Table 33. Regression coefficients: factors affecting the degree of social distance in relation to LGBT people by year

	Regression	coefficients
	2017 ⁸	2019°
Constant	3,67**	3,62**
Gender	0,00	-0,08
Age	-0,01**	-0,01*
Higher education	-0,19	-0,09
Religious affiliation (Islam)	-0,36*	-0,17
Religious affiliation (not religious)	0,05	-0,02
Religious affiliation (Christianity)	-0,11	-0,07
Affiliation with a professional group (medical workers)	-0,46**	-0,12*
Affiliation with a professional group (police)	-0,71**	-0,72**
Work experience	0,01**	0,00
Type of locality	0,05	-0,08*
Presence of representatives of the LGBT community among one's close social circle	-0,39**	-0,3**

^{* –} statistically significant at the level 0.05.

We now consider the results of linear regression by country. A common factor for both countries whose sample included law enforcement officers was being affiliated with this professional group: the higher the likelihood that the respondent is affiliated with this group, and not with social workers, the higher his degree of social distance in relation to LGBT people. Another factor common to all countries

^{** –} statistically significant at the level 0.01.

⁴ In order to apply linear regression, the "Religious affiliation" variable was transcoded into four categories: "Christianity" (Orthodox, Catholic, Protestant, Apostolic Church), "Islam", "Not religious", and "Other" ("Not religious" means the respondent is not affiliated with any religion, "Other" means the respondent, in the original variable, had difficulty answering). After this, these values were transcoded into dummy variables with the reference category "Other"

⁵ Reference category "Social workers"

⁶ Pseudometric variable where 1 – "Capital city", 2 – "Large city", 3 – "Small town"

⁷ Pseudometric variable, where 1 – "Yes", 2 – "I don't know", 3 – "No"

⁸ The adjusted R-squared is equal to 0.45, p < 0.01

⁹ The adjusted R-squared is equal to 0.41, p <0.01

except North Macedonia is the presence of representatives of the LGBT community among one's close social circle: the higher the probability that the respondent has representatives of the LGBT community among his close social circle, the lower his degree of social distance in relation to LGBT people.

Factors by country include:

Armenia:

■ affiliation with the professional group of medical workers as opposed to social workers is linked with a greater degree of social distance in relation to LGBT people.

Georgia:

■ type of locality: the smaller the locality, the greater the degree of social distance of the respondent in relation to LGBT people.

Kyrgyzstan:

- age: the older the respondent, the greater his degree of social distance in relation to LGBT people;
- religious affiliation: being Muslim is linked to a greater degree of social distance in relation to LGBT people;
- affiliation with the professional groups of medical workers and the police as opposed to social workers is linked with a greater degree of social distance in relation to LGBT people;
- work experience: the greater the work experience of the respondent, the lower his degree of social distance in relation to LGBT people.

North Macedonia:

- affiliation with the professional group of police as opposed to social workers is linked with a greater degree of social distance in relation to LGBT people;
- type of locality: the smaller the locality, the greater the degree of social distance of the respondent in relation to LGBT people.

We see that in comparison to 2017, being affiliated with the professional group of medical workers in Armenia and Georgia and with Christianity in Armenia lost its significance. In addition, work experience and the presence of representatives of the LGBT community among one's close social circle lost their significance in North Macedonia. However, work experience in Kyrgyzstan, and affiliation with the professional group of police and the type of locality in North Macedonia gained significance.

Table 34. Regression coefficients: factors affecting the degree of social distance in relation to LGBT people by country by year

	Armenia	enia	Belarus	ırus	Geo	Georgia	Kyrgy	Kyrgyzstan	North Ma	North Macedonia
	201710	201911	201712	201913	201714	201915	201716	201917	201718	201919
Constant	3,03**	3,38**	2,50**	3,74**	2,32**	3,6**	4,16**	3,7**	3,76**	4,14**
Gender	0,18	-0,12	90'0	90'0-	0,15	0,03	-0,10	1,0-	0,11	-0,12
Age	-0,01	-0,01	0,01	-0,04	-0,01	-0,01	-0,01*	-0,02**	-0,01	-0,01
Higher education	0,24	I	-0,01	0,85	0,27	ı	-0,07	-0,03	-0,37	90'0-
Religious affiliation (Islam)	ı	I	ı	0,13	ı	0,82	-0,30*	-0,24*	ı	-0,36
Religious affiliation (not religious)	-0,43**	0,07	0,45	-0,23	ı	0,44	-0,20	-0,2	ı	0,01
Religious affiliation (Christianity)	-0,70**	-0,12	0,04	-0,19	-0,20	0,39	-0,16	-0,15	0,38	-0,12
Affiliation with a professional group (medical workers)	**58'0-	**86'0-	*89'0-	I	-0,64**	-0,11	-0,37**	-0,25**	-0,35	-0,27
Affiliation with a professional group (police)	ı	ı	1	ı	ı	1	-0,89**	**66'0-	-0,26	**8'0-
Work experience	00'0	00'0	00'0	0,03	00'0	0,01	00'0	0,02**	0,03*	0,01
Type of locality	ı	-0,02	-0,02	00'0	0,34**	-0,11**	-0,14	0,00	-0,03	-0,63**
Presence of representatives of the LGBT community among one's close social circle	-0,19**	-0,19**	-0,15*	-0,31**	-0,28**	-0,28**	-0,43**	-0,28**	-0,65**	90'0-

^{* –} statistically significant at the level 0.05.

 $^{^{**}}$ – statistically significant at the level 0.01.

¹⁰ The adjusted R-squared is equal 0,38, p <0,01 11 The adjusted R-squared is equal 0,6, p <0,01 12 The adjusted R-squared is equal 0,20, p <0,01 13 The adjusted R-squared is equal 0,24, p <0,01 14 The adjusted R-squared is equal 0,32, p <0,01 15 The adjusted R-squared is equal 0,35, p <0,01 16 The adjusted R-squared is equal 0,64, p <0,01 17 The adjusted R-squared is equal 0,59, p <0,01 18 The adjusted R-squared is equal 0,39, p <0,01 19 The adjusted R-squared is equal 0,39, p <0,01 19 The adjusted R-squared is equal 0,24, p <0,01

We next look at what factors influence the willingness of respondents to accept the idea of equality between LGBT people and other citizens. Methodologically, this value consists of three separate variables: the degree of acceptance of respondents of the idea of equality between representatives of the LGBT community and other citizens, the opinion of respondents about same-sex marriage, as well as about the right of same-sex couples to adopt and/or raise children. These three variables were transcoded into dichotomous variables with the answer choices of "yes" and "no", where "yes" indicates a willingness to accept LGBT people, and "no" indicates an unwillingness to do so. The following logic was applied:

•	"Do you agree with the statement that gays and lesbians should enjoy the same rights as other citizens in your country?": — "yes": "fully agree", "rather agree"; — "no": "rather disagree", "absolutely disagree", "disagree", "difficulty answering".
•	"Do you believe that same-sex couples (male and female) should have the same right to marry as heterosexual couples?": "yes": "yes, they should have this right"; "no": "no, in no case should this right be granted to them", "there should be exceptions (individual consideration)", "other", "difficulty answering".
•	"Do you believe that homosexual citizens should have the right to adopt and/or raise children?": "yes": "yes, they should have this right"; "no": "no, in no case should this right be granted to them", "there should be exceptions (individual consideration)", "other", "difficulty answering".

Following this, a dichotomous variable of the willingness to accept the idea of equality between LGBT people and other citizens was established on the basis of these three new values. The value "yes" referred to the answer "yes" in relation to the first value (level of acceptance of respondents of the idea of equality between representatives of the LGBT community and other citizens), and at least one "yes" in relation to the other two variables (opinions of respondents about same-sex marriage and about the right to adopt and/or raise children).

Following this, binary logistic regression was applied, in which the dependent variable was the value obtained in relation to the willingness to accept the idea of equality between LGBT people and other citizens, and the independent variables were the same ones used in the previous analysis. The following factors linked to the willingness of respondents to accept the idea of equality between LGBT people and other citizens were thereby identified:

- Religious affiliation: Muslims are less willing to accept the idea of equality between LGBT people and other citizens;
- Affiliation with the professional groups of medical workers and police is linked to a lower willingness to accept the idea of equality between LGBT people and other citizens;
- Type of locality: the larger the locality, the greater the chances are that the respondent accepts the idea of equality between LGBT people and other citizens;
- Presence of representatives of the LGBT community among one's close social circle is linked with greater acceptance of the idea of equality between LGBT people and other citizens.

No changes were observed in comparison with the 2017 model.

Table 35. Regression coefficients: factors linked to the willingness of respondents to accept the idea of equality between LGBT people and other citizens by year

	Regression o	coefficients
	201720	201921
Constant	2,76**	3,66**
Gender	-0,08	0,00
Age	-0,01	-0,3
Higher education	-0,29	-0,19
Religious affiliation (Islam)	-1,15*	-0,78*
Religious affiliation (not religious)	-0,42	0,39
Religious affiliation (Christianity)	-0,30	-0,63
Affiliation with a professional group (medical workers)	-1,52**	-1,2**
Affiliation with a professional group (police)	-2,73**	-2,86**
Work experience	-0,01	0,02
Type of locality	-0,35*	-0,39*
Presence of representatives of the LGBT community among one's close social circle	-0,40**	-0,88**

^{* –} statistically significant at the level 0.05.

We now consider the regression results in the country context. Factors common to all countries except North Macedonia affecting the willingness of respondents to accept the idea of equality between LGBT people and other citizens include affiliation with the professional group of medical workers (linked to a lower willingness to accept the idea of equality between LGBT people and other citizens) and the presence of representatives of the LGBT community among one's close social circle (linked with a greater willingness to accept the idea of equality between LGBT people and other citizens). For both countries whose samples included law enforcement officers (Kyrgyzstan and North Macedonia), there was also a connection with the factor of being affiliated to the professional group of police (affiliation with this group is linked with a lower willingness to accept the idea of equality between LGBT people and other citizens).

Factors specific to individual countries include: being non-religious in Belarus (linked to a greater willingness to accept the idea of equality between LGBT people and other citizens), and type of locality in Kyrgyzstan (the larger the locality, the greater the chances the respondent is willing to accept the idea of equality between LGBT people and other citizens).

In comparison to the 2017 model, factors such as work experience in Armenia and North Macedonia, age in Georgia, as well as affiliation with the professional group of medical workers and the presence of representatives of the LGBT community among one's close social circle in North Macedonia are no longer significant. Factors which were not statistically significantly linked to the willingness to accept the idea of equality between LGBT people and other citizens in 2017, but which demonstrated such a link in 2019, included being non-religious in Belarus and being affiliated with the police in Kyrgyzstan and North Macedonia.

^{** –} statistically significant at the level 0.01.

²¹ χ 2 = 313,4; df = 11; p = 0,00

Table 35. Regression coefficients: factors linked to the willingness of respondents to accept the idea of equality between LGBT people and other citizens by country by year

	Arm	Armenia	Bela	Belarus	Geo	Georgia	Kyrgy	Kyrgyzstan	North Macedonia	acedonia
	2017 ²²	2019 ²³	2017 ²⁴	2019 ²⁵	201726	201927	201728	2019 ²⁹	201730	2019³¹
Constant	3,75*	-5,13	-20,64	27,08	1,59	3,76**	4,444**	3,35**	5,07*	1,27
Gender	-0,22	-0,04	-0,40	-0,48	-0,58	0,84	-0,05	0,21	-0,13	1,13
Age	80'0-	90'0-	0,15	-0,15	-0,05*	-0,02	-0,02	-0,02	-0,07	0,12
Higher education	69'0	1	1,78	-21,51	0,39	ı	0,40	-0,2	-1,50	0,51
Religious affiliation (Islam)	ı	ı	ı	21,88	1	-21,6	-1,00	-0,26	ı	-22,29
Religious affiliation (not religious)	-0,35	17,95	17,11	2,02*	1	0,11	-0,49	0,04	ı	1,59
Religious affiliation (Christianity)	-0,59	17,02	15,56	0,48	0,19	-1,17	-0,77	-0,34	2,20	-1,77
Affiliation with a professional group (medical workers)	-2,75**	-2,43*	-2,47*	I	-1,04*	-1,18*	-1,43*	-2,66**	-1,90*	-0,88
Affiliation with a professional group (police)	I	I	I	ı	I	I	19,1	-3,34**	-1,79	-4,83**
Work experience	*60'0	0,01	-0,14	0,19	90'0	0,02	00'0	80'0	0,14*	-0,16
Type of locality	I	-0,73	6,49	-0,73	-0,17	-0,81	-1,13*	*E9'0-	-0,70	-1,62
Presence of representatives of the LGBT community among one's close social circle	-0,83**	-9,12**	-1,08	-1,49**	0,20	-0,73**	-0,88**	-0,96**	-1,48**	-0,33

^{* –} statistically significant at the level 0.05.

 $^{^{**}}$ – statistically significant at the level 0.01.

Finally, we examine factors linked with respondents' assessments of the attitudes of representatives of their own professional group towards LGBT people. Multiple linear regression was used for this.

As we see in Table 36, the following factors have an effect:

- gender: women assess the attitudes of representatives of their professional group towards
 LGBT people more negatively;
- higher education: respondents who completed higher education assess the attitudes of representatives of their professional group towards LGBT people more negatively;
- affiliation with the professional groups of medical workers and the police is linked with a more negative assessment of the attitudes of representatives of one's own professional group towards LGBT people;
- type of locality: the larger the locality, the less positive the assessment of the attitudes of representatives of one's professional group towards LGBT people;
- the presence of representatives of the LGBT community among one's close social circle is linked to a more positive assessment of the attitudes of representatives of one's professional group towards LGBT people.

The factors of gender and type of locality did not affect respondents' assessment of the attitudes of representatives of their professional groups towards LGBT people according to the analysis of the 2017 sample. The factor of being affiliated with Christianity lost its significance.

Table 36. Regression coefficients: factors linked to respondents' assessments of the attitudes of representatives of their own profession group towards LGBT people by year

	Regression co	efficients
	201732	2019³³
Constant	1,07**	1,22**
Gender	-0,05	0,18**
Age	-0,01	-0,00
Higher education	0,24**	0,39**
Religious affiliation (Islam)	0,19	0,08
Religious affiliation (not religious)	0,23	0,14
Religious affiliation (Christianity)	0,41**	0,00
Affiliation with a professional group (medical workers)	0,27** 0,41**	
Affiliation with a professional group (police)	0,68**	0,51**
Work experience	0,00	0,00
Type of locality	0,07	-0,07*
Presence of representatives of the LGBT community among one's close social circle	0,09**	0,08**

^{* –} statistically significant at the level 0.05.

^{** –} statistically significant at the level 0.01.

³² The adjusted R-squared is equal to 0,19, p < 0,01

³³ The adjusted R-squared is equal to 0,23, p < 0,01

As we see in Table 37, the models of only three countries turned out to be statistically significant. Factors linked to respondents' assessments of the attitudes of representatives of their own professional groups towards LGBT people include the following:

Armenia:

- gender: women assess the attitudes of representatives of their professional group towards LGBT people more negatively;
- religious affiliation: non-religious people assess the attitudes of representatives of their own professional group towards LGBT people more negatively;
- the presence of representatives of the LGBT community among one's close social circle is linked with a more positive assessment by respondents of the attitudes of representatives of their professional group towards LGBT people.

Belarus:

■ religious affiliation: Muslims assess the attitudes of representatives of their own professional group towards LGBT people more positively.

Kyrgyzstan:

- higher education: respondents who completed higher education assess the attitudes of representatives of their own professional group towards LGBT people more negatively;
- affiliation with the professional groups of medical workers and the police is linked with a more negative assessment by respondents of the attitudes of representatives of their professional groups towards LGBT people;
- type of locality: the larger the locality, the less positive respondents' assessments of the attitudes of representatives of their professional group towards LGBT people.

n terms of changes compared to the 2017 model, age and work experience in Armenia and Belarus, and higher education in Belarus are no longer linked to respondents' assessments of the attitudes of representatives of their professional group towards LGBT people. Factors that gained significance in the 2019 model include sex and the presence of representatives of the LGBT community among one's close social circle in Armenia, the practice of Islam in Belarus, and higher education and being affiliated with the professional group of medical workers in Kyrgyzstan.

Table 37. Regression coefficients: factors linked to respondents' assessments of the attitudes of representatives of their own profession group towards LGBT people by country by year

	Arm	enia	Bela	arus	Kyrgy	zstan
	201734	201935	201736	2019 ³⁷	201738	2019 ³⁹
Constant	2,03**	1,42**	2,35**	2,24**	0,77**	1,18**
Gender	-0,07	0,24*	-0,04	-0,06	0,04	0,12
Age	-0,01*	0,00	-0,04**	0,00	0,01	0,00
Higher education	0,28	-	0,60*	-0,13	-0,02	0,26**
Religious affiliation (Islam)	-	-	-	-0,93**	0,08	-0,21
Religious affiliation (not religious)	0,21*	0,48*	-0,22	0,16	0,12	0,02
Religious affiliation (Christianity)	-0,09	0,36	0,05	0,16	-0,03	-0,2
Affiliation with a professional group (medical workers)	-0,08	0,08	-0,04	-	0,06	0,95**
Affiliation with a professional group (police)	_	_	-	1	0,81**	1,06**
Work experience	0,02**	0,01	0,04**	0,00	0,00	-0,01
Type of locality	-	-0,02	0,07	0,00	0,17*	-0,16**
Presence of representatives of the LGBT community among one's close social circle	0,01	0,15**	0,03	-0,02	0,12	0,06

^{* –} statistically significant at the level 0.05.

Thus, factors such as age, affiliation with the professional groups of medical workers and police, and type of locality are linked to the degree of social distance in relation to LGBT people. Being Muslim, a medical worker or a police officer, the type of locality, as well as the presence of representatives of the LGBT community among one's close social circle are all linked with the willingness of respondents to accept the idea of equality between LGBT people and other citizens. Finally, factors linked to respondents' assessments of the attitudes of their own professional group towards LGBT people include gender, higher education, affiliation with the professional groups of medical workers and the police, type of locality, and the presence of representatives of the LGBT community among one's close social circle.

^{** –} statistically significant at the level 0.01.

³⁴ The adjusted R-squared is equal to 0,15, p < 0,01

³⁵ The adjusted R-squared is equal to 0.18, p < 0.01

³⁶ The adjusted R-squared is equal to 0,19, p < 0.01

³⁷ The adjusted R-squared is equal to 0.1, p < 0.05

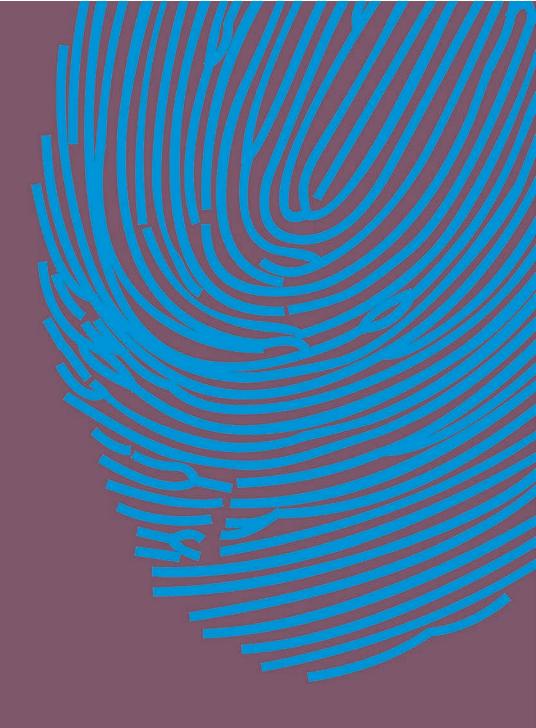
³⁸ The adjusted R-squared is equal to 0,38, p < 0,01

³⁹ The adjusted R-squared is equal to 0,51, p < 0,01

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Annexes

Questionnaire for Health Workers

The Y. Saenka Center for Social Expertise is conducting a survey as part of a study on the attitudes towards LGBT people (lesbian, gay, bisexual, and trans people) among the staff of key social services in five countries of Central and Eastern Europe and Central Asia. This survey is part of the Eurasian Coalition on Male Health's (ECOM) regional program "Right to Health".

Your name will not be used in this questionnaire, which means that any information provided by you will remain anonymous. You have the right to not answer any question, and to stop this interview at any time, if you wish. Your candid and detailed answers will help us to evaluate the attitudes of staff of key social services towards LGBT people (lesbian, gay, bisexual, and trans people), which will be used to plan social services for LGBT people (lesbian, gay, bisexual, and trans people). The interview will last around 30 minutes.

Do you agree to participate in the survey?
1. Yes continue survey
2. No end survey
Country Name of Interviewer
Type of locality:
1. Capital (indicate name)
2. Large city (indicate name)
3. Small city (indicate name)
BLOC I. SOCIO-DEMOGRAPHICAL CHARACTERISTICS OF THE RESPONDENT
1. Sex:
 Male Female
2. Your age? (in years)
3. Have you completed higher education?
1. Yes 2. No
4. Are you religious?
1. Yes
2. No skip to question № 7
5. Do you have a particular religious affiliation?
1. Yes
 No skip to question № 7 Difficulty answering (do not read aloud) skip to question №7
6. Which religion are you affiliated with? (Do not read aloud the alternatives. Use the respondent's
own words)
1. Orthodoxy
2. Catholicism
One of the Protestant churches Islam
5. Other (what exactly?)
7. How many years have you worked in medical institutions? years
Interviewer! The expert should only indicate the number of years that fall

into his or her "medical experience".

BLOC II. PERSONAL ATTITUDE TOWARDS LGBT PEOPLE (LESBIAN, GAY, BISEXUAL AND TRANS PEOPLE)

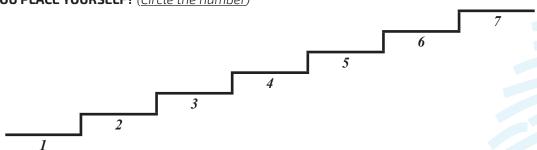
- 8. Are there any people with homo- or bisexual orientation (gays, lesbians) among your relatives, friends, or acquaintances (only one answer is possible)?
 - Yes, women
 - 2. Yes, men
 - 3. Yes, women and men
 - 4. No
 - 5. I don't know (do not read aloud)
- 9. Please indicate which of these statements is closest to your personal opinion (only one answer is possible):
 - 1. Homosexuality should be accepted in society
 - Homosexuality should not be accepted in society
 - 3. Neither of these statements (do not read aloud)
- 10. People have very different opinions about homosexuality. In your opinion what is homosexuality (only one answer is possible)?
 - It is a sexual orientation with an equal right to exist as heterosexuality
 - 2. It is a reality of life that you can neither punish nor glorify
 - It is immoral and a bad habit
 - It is a disease or the result of psychological trauma
 - 5. It is a sign of a special gift or talent
 - Other (что именно?) _
 - 7. Difficulty answering (do not read aloud)
- 11. How do you assess your personal opinion towards LGBT people? Interviewer! Only one answer is possible!
 - 1. Positive
 - 2. Neutral
 - 3. Negative
 - 4. Difficulty answering (do not read aloud)
- 12. Do you agree with the statement that gays and lesbians should have the same rights as other citizens in your country?
 - 1. Completely agree

 - Rather agree
 Rather disagree
 - 4. Completely disagree
 - 5. Difficulty answering (do not read aloud)
- 13. Do you believe that same-sex couples (men and women) should have the same right to marry as opposite-sex couples?
 - 1. Yes, they should have this right
 - 2. No, in no case should this right be granted to them
 - 3. There should be exceptions (individual consideration)
 - 4. Other (что именно?)_
 - 5. Difficulty answering (do not read aloud)
- 14. Do you believe that same-sex couples should have the right to raise and/or adopt children?
 - 1. Yes, they should have this right
 - 2. No, in no case should this right be granted to them
 - 3. There should be exceptions (individual consideration)
 - 4. Other (что именно?)
 - 5. Difficulty answering (do not read aloud)

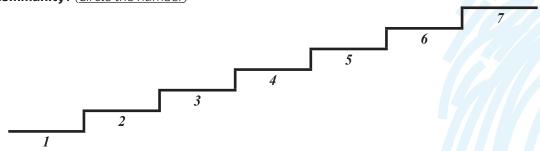
Select ONE of these statements, WHICH IS CLOSEST TO YOUR PERSONAL OPINION: (give one answer for each row).

	I am willing to accept representatives of the LGBT community (lesbian, gay, bisexual, and trans people) as						
	A member of my family	A close friend	A neighbor	A work colleague	A resident of the country	A visitor to the country, tourist	Would not admit to the country
15. Gays	1	2	3	4	5	6	7
16. Lesbians	1	2	3	4	5	6	7
17. Bisexual men	1	2	3	4	5	6	7
18. Bisexual women	1	2	3	4	5	6	7
19. Trans people	1	2	3	4	5	6	7

20. Imagine that people in society are on steps of a ladder: the people on the lowest step are those with the lowest status in society in your eyes, and those on the highest step have the highest status in society in your eyes. ON WHICH STEP OF THE LADDER (from 1 to 7) WOULD YOU PLACE YOURSELF? (Circle the number)



21. On which step of the ladder (from 1 to 7) would you place representatives of the LGBT community? (Circle the number)



BLOC III. ATTITUDE OF MEDICAL WORKERS TOWARDS LGBT PEOPLE AND SERVICE PROVISION EXPERIENCE

- **22.** How do you characterize the general attitude of medical workers towards LGBT people? Interviewer! Only one answer is possible!
 - 1. Positive
 - 2. Neutral
 - 3. Negative
 - 4. Difficulty answering (do not read aloud)

- **23.** Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of medical workers? Interviewer! Only one answer is possible! Remember that, here, we are referring to certain specific actions, expressions, or disapproving views on the part of health workers!
 - 1. Yes, I constantly encounter this
 - 2. Yes, I encounter this from time to time
 - 3. Yes, I rarely encounter this
 - 4. No, I have never encountered this

skip to question № 25

24. Please provide one example of such a situation that you remember best (Interviewer! Ask the expert to provide 1 example):

- 25. Do LGBT patients seek assistance from you personally at your place of work?
 - 1. Yes
 - 2. No
 - 3. Difficulty answering (do not read aloud)
- 26. Have you undergone special training on developing tolerant attitudes towards LGBT people?
 - Yes
 - 2. No **skip to question № 30**
- 27. How long ago was this?

	211 10118 1182 11181	1
1.	Less than 1 month ago	
2.	1-6 months ago	skip to question №28
3.	6-12 months ago	
4.	1-3 years ago	
5.	3-5 years ago	skip to question №29
6.	More than 5 years ago	
7.	Difficulty answering (do not read aloud)	

- 28. How would you assess the quality of this training/professional development?
 - A. on preventing the spread of STIs (sexually transmitted infections)
 - 1. High
 - 2. Average
 - 3. Low
 - 4. Difficulty answering (do not read aloud)
 - B. on support for vulnerable populations (including LGBT—lesbian, gay, bisexual, and trans people)
 - 1. High
 - 2. Average
 - 3. Low
 - 4. Difficulty answering (do not read aloud)
- 29. Do you have the need to undergo additional professional development/training on working with LGBT people?
 - 1. Yes
 - 2. No
 - 3. Difficulty answering (do not read aloud)
- 30. Would you like to receive additional information about LGBT people (lesbian, gay, bisexual, and trans people) and about working with them?
 - 1. Yes
 - No
 - 3. Difficulty answering (do not read aloud)

After com	pleting the interview, write down the full name of the organization and the structural unit
in which	the expert works:
	the first line, enter the full official name of the medical institution, on the second line enter the full name he structural unit (do not use acronyms or abbreviations!).
a)	
b)	
ŕ	
Indicate t	the position and specialization of the expert:
On rele	the first line, write down the position of the expert in the same way that it is officially indicated in evant registration or government documents, on the second line, enter the official name of his/her cialization (do not use acronyms or abbreviations!).
a)	
h)	

Questionnaire for Social Workers

The Y. Saenka Center for Social Expertise is conducting a survey as part of a study on the attitudes towards LGBT people (lesbian, gay, bisexual, and trans people) among the staff of key social services in five countries of Central and Eastern Europe and Central Asia. This survey is part of the Eurasian Coalition on Male Health's (ECOM) regional program "Right to Health".

Your name will not be used in this questionnaire, which means that any information provided by you will remain anonymous. You have the right to not answer any question, and to stop this interview at any time, if you wish. Your candid and detailed answers will help us to evaluate the attitudes of staff of key social services towards LGBT people (lesbian, gay, bisexual, and trans people), which will be used to plan social services for LGBT people (lesbian, gay, bisexual, and trans people). The interview will last around 30 minutes

Do you agree to participate in the survey?
1. Yes continue survey
2. No end survey
Country Name of Interviewer
Type of locality:
1. Capital (indicate name)
2. Large city (indicate name)
3. Small city (indicate name)
BLOC I. SOCIO-DEMOGRAPHICAL CHARACTERISTICS OF THE RESPONDENT
1. Sex:1. Male2. Female
2. Your age? (in years)
3. Have you completed higher education?1. Yes2. No
4. Are you religious?
 Yes No skip to question № 7
5. Do you have a particular religious affiliation?
 Yes No skip to question № 7 Difficulty answering (do not read aloud) skip to question №7
 6. Which religion are you affiliated with? (Do not read aloud the alternatives. Use the respondent's own words) 1. Orthodoxy 2. Catholicism
3. One of the Protestant churches4. Islam5. Other (what exactly?)
7. How many years have you worked in non-governmental organizations? years Interviewer! The expert should only indicate the number of years that fall into his or her

experience as a social worker.

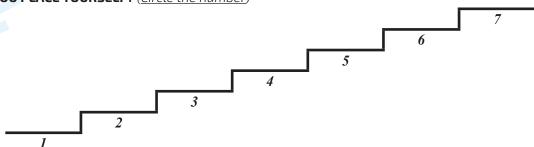
BLOC II. PERSONAL ATTITUDE TOWARDS LGBT PEOPLE

- 8. Are there any people with homo- or bisexual orientation (gays, lesbians) among your relatives, friends, or acquaintances (only one answer is possible)?
 - 1. Yes, women
 - 2. Yes, men
 - 3. Yes, women and men
 - 4. Nc
 - 5. I don't know (do not read aloud)
- **9.** Please indicate which of these statements is closest to your personal opinion (<u>only one answer</u> is possible):
 - 1. Homosexuality should be accepted in society
 - 2. Homosexuality should not be accepted in society
 - 3. Neither of these statements (do not read aloud)
- 10. People have very different opinions about homosexuality. In your opinion what is homosexuality (only one answer is possible)?
 - 1. It is a sexual orientation with an equal right to exist as heterosexuality
 - 2. It is a reality of life that you can neither punish nor glorify
 - 3. It is immoral and a bad habit
 - 4. It is a disease or the result of psychological trauma
 - 5. It is a sign of a special gift or talent
 - 6. Other (что именно?)_
 - 7. Difficulty answering **(do not read aloud)**
- 11. How do you assess your personal opinion towards LGBT people? <u>Interviewer! Only one answer is possible!</u>
 - 1. Positive
 - 2. Neutral
 - 3. Negative
 - 4. Difficulty answering (do not read aloud)
- 12. Do you agree with the statement that gays and lesbians should have the same rights as other citizens in your country?
 - 1. Completely agree
 - 2. Rather agree
 - 3. Rather disagree
 - 4. Completely disagree
 - 5. Difficulty answering (do not read aloud)
- 13. Do you believe that same-sex couples (men and women) should have the same right to marry as opposite-sex couples?
 - 1. Yes, they should have this right
 - 2. No, in no case should this right be granted to them
 - 3. There should be exceptions (individual consideration)
 - 4. Other (что именно?)_
 - 5. Difficulty answering (do not read aloud)
- 14. Do you believe that same-sex couples should have the right to raise and/or adopt children?
 - 1. Yes, they should have this right
 - 2. No, in no case should this right be granted to them
 - 3. There should be exceptions (individual consideration)
 - 4. Other (что именно?) _____
 - 5. Difficulty answering (do not read aloud)

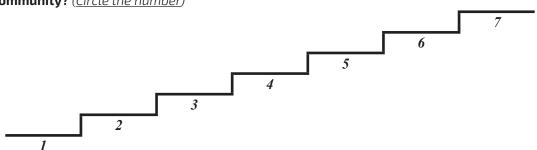
Select ONE of these statements, WHICH IS CLOSEST TO YOUR PERSONAL OPINION: (give one answer for each row).

		I am willing to accept representatives of the LGBT community (lesbian, gay, bisexual, and trans people) as						
	A member of my family	A close friend	A neighbor	A work colleague	A resident of the country	A visitor to the country, tourist	Would not admit to the country	
15. Gays	1	2	3	4	5	6	7	
16. Lesbians	1	2	3	4	5	6	7	
17. Bisexual men	1	2	3	4	5	6	7	
18. Bisexual women	1	2	3	4	5	6	7	
19. Trans people	1	2	3	4	5	6	7	

20. Imagine that people in society are on steps of a ladder: the people on the lowest step are those with the lowest status in society in your eyes, and those on the highest step have the highest status in society in your eyes. ON WHICH STEP OF THE LADDER (from 1 to 7) WOULD YOU PLACE YOURSELF? (Circle the number)



21. On which step of the ladder (from 1 to 7) would you place representatives of the LGBT community? (Circle the number)



BLOC III. ATTITUDE OF SOCIAL WORKERS TOWARDS LGBT PEOPLE AND SERVICE PROVISION EXPERIENCE

- **22.** How do you characterize the general attitude of social workers towards LGBT people? Interviewer! Only one answer is possible!
 - 1. Positive
 - 2. Neutral
 - 3. Negative
 - 4. Difficulty answering (do not read aloud)

- **23.** Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of social workers? Interviewer! Only one answer is possible! Remember that, here, we are referring to certain specific actions, expressions, or disapproving views on the part of health workers!
 - 1. Yes, I constantly encounter this
 - 2. Yes, I encounter this from time to time
 - 3. Yes, I rarely encounter this
 - 4. No, I have never encountered this

skip to question № 25

24. Please provide one example of such a situation that you remember best (Interviewer! Ask the expert to provide 1 example):

25. Is providing counseling services for LGBT people part of your professional responsibilities:

- A. in relation to HIV prevention
 - 1. Yes
 - 2. No
- B. in relation to STI (sexually transmitted infections) prevention
 - 1. Yes
 - 2. No
- 26. Do LGBT patients seek assistance from you personally at your place of work?
 - 1. Yes
 - No
 - 3. Difficulty answering (do not read aloud)
- 27. Have you undergone special training on developing tolerant attitudes towards LGBT people?
 - 1. Yes
 - 2. No **skip to question № 30**
- 28. How long ago was this?

1. Less than 1 month ago

2. 1-6 months ago

3. 6-12 months ago

4. 1-3 years ago

5. 3-5 years ago

6. More than 5 years ago

7. Difficulty answering (do not read aloud)

skip to question №29

skip to question №30

- 29. How would you assess the quality of this training/professional development?
 - A. on preventing the spread of STIs (sexually transmitted infections)
 - 1. High
 - 2. Average
 - 3. Low
 - 4. Difficulty answering (do not read aloud)
 - B. on support for vulnerable populations (including LGBT—lesbian, gay, bisexual, and trans people)
 - 1. High
 - 2. Average
 - 3. Low
 - 4. Difficulty answering (do not read aloud)
- 30. Do you have the need to undergo additional professional development/training on working with LGBT people?
 - 1. Yes
 - 2. No
 - 3. Difficulty answering (do not read aloud)

	ould you like to receive additional information about LGBT people (lesbian, gay, bisexual d trans people) and about working with them?
1. 2. 3.	Yes No Difficulty answering <i>(do not read aloud)</i>
which	completing the interview, write down the full name of the non-governmental organization in the expert works: Indicate the full name of the NGO (do not use acronyms or abbreviations!).
	ndicate the position and specialization of the expert: On the first line, write down the position of the expert in the same way that it is officially indicated ir relevant registration or government documents, on the second line, enter the official name of his/heispecialization (do not use acronyms or abbreviations!).

Questionnaire for Police

The Y. Saenka Center for Social Expertise is conducting a survey as part of a study on the attitudes towards LGBT people (lesbian, gay, bisexual, and trans people) among the staff of key social services in five countries of Central and Eastern Europe and Central Asia. This survey is part of the Eurasian Coalition on Male Health's (ECOM) regional program "Right to Health".

Your name will not be used in this questionnaire, which means that any information provided by you will remain anonymous. You have the right to not answer any question, and to stop this interview at any time, if you wish. Your candid and detailed answers will help us to evaluate the attitudes of staff of key social services towards LGBT people (lesbian, gay, bisexual, and trans people), which will be used to plan social services for LGBT people (lesbian, gay, bisexual, and trans people). The interview will last around 30 minutes.

Do you agree to participate in the survey?
1. Yes continue survey
2. No end survey
Country Name of Interviewer
Type of locality:
1. Capital (indicate name)
2. Large city (indicate name)
3. Small city (indicate name)
BLOC I. SOCIO-DEMOGRAPHICAL CHARACTERISTICS OF THE RESPONDENT
1. Sex:
1. Male
2. Female
2. Your age? (in years)
3. Have you completed higher education?
1. Yes
2. No
4. Are you religious? 1. Yes
2. No skip to question № 7
5. Do you have a particular religious affiliation?
 Yes No skip to question № 7
3. Difficulty answering (do not read aloud) skip to question №7
6. Which religion are you affiliated with? (Do not read aloud the alternatives. Use the respondent's
own words)
1. Orthodoxy 2. Catholicism
3. One of the Protestant churches
4. Islam
5. Other (what exactly?)
7. How many years have you worked in non-governmental organizations? years Interviewer! The expert should only indicate the number of years that fall into his or her
experience as a social worker.

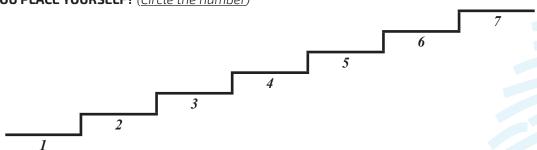
BLOC II. PERSONAL ATTITUDE TOWARDS LGBT PEOPLE (LESBIAN, GAY, BISEXUAL AND TRANS PEOPLE)

- 8. Are there any people with homo- or bisexual orientation (gays, lesbians) among your relatives, friends, or acquaintances (<u>only one answer</u> is possible)?
 - 1. Yes, women
 - 2. Yes, men
 - 3. Yes, women and men
 - 4. No
 - 5. I don't know (do not read aloud)
- **9.** Please indicate which of these statements is closest to your personal opinion (<u>only one answer</u> is possible):
 - 1. Homosexuality should be accepted in society
 - 2. Homosexuality should not be accepted in society
 - 3. Neither of these statements (do not read aloud)
- 10. People have very different opinions about homosexuality. In your opinion what is homosexuality (only one answer is possible)?
 - 1. It is a sexual orientation with an equal right to exist as heterosexuality
 - 2. It is a reality of life that you can neither punish nor glorify
 - 3. It is immoral and a bad habit
 - 4. It is a disease or the result of psychological trauma
 - 5. It is a sign of a special gift or talent
 - 6. Other (что именно?)_
 - 7. Difficulty answering (do not read aloud)
- **11.** How do you assess your personal opinion towards LGBT people? <u>Interviewer! Only one answer is possible!</u>
 - 1. Positive
 - 2. Neutral
 - 3. Negative
 - 4. Difficulty answering (do not read aloud)
- 12. Do you agree with the statement that gays and lesbians should have the same rights as other citizens in your country?
 - 1. Completely agree
 - 2. Rather agree
 - 3. Rather disagree
 - 4. Completely disagree
 - 5. Difficulty answering (do not read aloud)
- 13. Do you believe that same-sex couples (men and women) should have the same right to marry as opposite-sex couples?
 - 1. Yes, they should have this right
 - 2. No, in no case should this right be granted to them
 - 3. There should be exceptions (individual consideration)
 - 4. Other (что именно?)_
 - 5. Difficulty answering (do not read aloud)
- 14. Do you believe that same-sex couples should have the right to raise and/or adopt children?
 - 1. Yes, they should have this right
 - 2. No, in no case should this right be granted to them
 - 3. There should be exceptions (individual consideration)
 - 4. Other (что именно?) _____
 - 5. Difficulty answering (do not read aloud)

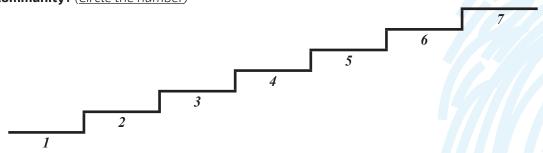
Select ONE of these statements, WHICH IS CLOSEST TO YOUR PERSONAL OPINION: (give one answer for each row).

	I am willing to accept representatives of the LGBT community (lesbian, gay, bisexual, and trans people) as						
	A member of my family	A close friend	A neighbor	A work colleague	A resident of the country	A visitor to the country, tourist	Would not admit to the country
15. Gays	1	2	3	4	5	6	7
16. Lesbians	1	2	3	4	5	6	7
17. Bisexual men	1	2	3	4	5	6	7
18. Bisexual women	1	2	3	4	5	6	7
19. Trans people	1	2	3	4	5	6	7

20. Imagine that people in society are on steps of a ladder: the people on the lowest step are those with the lowest status in society in your eyes, and those on the highest step have the highest status in society in your eyes. ON WHICH STEP OF THE LADDER (from 1 to 7) WOULD YOU PLACE YOURSELF? (Circle the number)



21. On which step of the ladder (from 1 to 7) would you place representatives of the LGBT community? (Circle the number)



BLOC III. ATTITUDE OF MEDICAL WORKERS TOWARDS LGBT PEOPLE AND SERVICE PROVISION EXPERIENCE

- **22.** How do you characterize the general attitude of police towards LGBT people? Interviewer! Only one answer is possible!
 - 1. Positive
 - 2. Neutral
 - 3. Negative
 - 4. Difficulty answering (do not read aloud)

- **23.** Have you personally encountered incidents of alienation, discrimination, or disapproval towards LGBT people on the part of police? Interviewer! Only one answer is possible! Remember that, here, we are referring to certain specific actions, expressions, or disapproving views on the part of health workers!
 - 1. Yes, I constantly encounter this
 - 2. Yes, I encounter this from time to time
 - 3. Yes, I rarely encounter this
 - 4. No, I have never encountered this

skip to question № 25

24. Please provide one example of such a situation that you remember best (Interviewer! Ask the expert to provide 1 example):

- 25. Do LGBT patients seek assistance from you personally at your place of work?
 - 1. Yes
 - 2. No
 - 3. Difficulty answering (do not read aloud)
- 26. Have you undergone special training on developing tolerant attitudes towards LGBT people?
 - 1. Yes
 - 2. No **skip to question № 30**
- 27. How long ago was this?

	. Less than 1 month ago	
skip to question №28	2. 1-6 months ago	
	3. 6-12 months ago	
	ı. 1-3 years ago	
skip to question №29	5. 3-5 years ago	
	5. More than 5 years ago	
	7. Difficulty answering (do not read aloud)	

- 28. How would you assess the quality of this training/professional development?
 - A. on preventing the spread of STIs (sexually transmitted infections)
 - 1. High
 - 2. Average
 - 3. Low
 - 4. Difficulty answering (do not read aloud)
 - B. on support for vulnerable populations (including LGBT—lesbian, gay, bisexual, and trans people)
 - 1. High
 - 2. Average
 - 3. Low
 - 4. Difficulty answering (do not read aloud)
- 29. Do you have the need to undergo additional professional development/training on working with LGBT people?
 - 1. Yes
 - 2. No
 - 3. Difficulty answering (do not read aloud)
- 30. Would you like to receive additional information about LGBT people (lesbian, gay, bisexual, and trans people) and about working with them?
 - 1. Yes
 - No
 - 3. Difficulty answering (do not read aloud)

After completing the interview, write down the full name of the organization and the structural unit
n which the expert works:
On the first line, enter the full official name of the institution, on the second line enter the full name of the structural unit (do not use acronyms or abbreviations!).
· · · · · · · · · · · · · · · · · · ·
ndicate the position and specialization of the expert:
On the first line, write down the position of the expert in the same way that it is officially indicated in relevant registration or government documents, on the second line, enter the official name of his/her specialization (do not use acronyms or abbreviations!).

