
No one is free until everyone is free

MARTINE ROSTADMO

martine.rostadmo@tidsskriftet.no

Martine Rostadmo, doctor and editor of the Journal of the Norwegian Medical Association

This year marks the 50th anniversary of the decriminalisation of homosexuality in Norway. Can we learn from the past and address our own prejudices and culture?



Photo: Sturlason

'Everyone took it well!' My brother had just come out of the closet. He was clearly relieved and happy. I shared his joy at first, but then I felt dispirited. As a heterosexual cisgender woman, I have never had to do something like this, where friends, family and strangers would comment on my sexual orientation. I follow the norm and consequently escape all of this. I fail to notice that the boxes of sexuality exist, that they are narrowly defined.

It is 50 years since homosexuality was decriminalised in Norway. It is obviously taking longer than 50 years to remove all of the shame, because among all groups of homosexuals in Norway, a large proportion (37–60 %) actively hide their sexual orientation or gender identity on at least a monthly basis [\(1\)](#).

In the old section 213 of the Penal Code, which was removed in 1972, sexual intercourse between men was considered to be on a par with bestiality [\(2\)](#). Its precursor in 1687 did not mince its words: 'Carnal acts that are contrary to nature are punishable by furnace of fire.'

In 1847, Simonette Vold (ca. 1780–1873) was accused of committing unnatural acts with two of her maids, Olava Nielsdatter and Birgitte Marie Burin, and the case went all the way to the Supreme Court [\(3\)](#). It was assumed that women who desired other women had an abnormally large clitoris that could be used for penetration, so Vold was ordered to take a medical examination. The doctor found her anatomy to be completely normal; she could not have penetrated anyone with her genitals. All three women involved confessed that they had, in their own words, 'banged cunts', which entailed Vold lying on top of the two other women 'like a man on his wife'. But was this 'intercourse'?

The district medical officer had to decide. He concluded that 'banging cunts' could only arouse sexual urges, not satisfy them, and could not therefore be considered intercourse. But: there were rumours of a velvet dildo, 'an object like male genitalia, which was supposedly covered in velvet'. Both Vold and the maids denied the existence of a dildo, and even after the questioning of several witnesses, no evidence of it was ever found. They could not therefore be convicted. However, they had created such a scandal in the local community that they could not go unpunished either, so for 'outrageous, immoral conduct', Vold was sent to a house of correction for a year, while the maids received 15 days in prison on bread and water.

«The debate about gender and sexual diversity still revolves around what constitutes biology, and thus what is against nature»

The past is a prologue. In those days, as now, the majority had the defining power. Lesbian love was defined from the male perspective; there had to be some kind of 'male genitalia' involved. The district medical officer had more power than expertise in human sexuality – something that the health service is still lacking [\(4\)](#).

Homosexuality was criminalised based on the fear that young boys could be targeted and consequently develop homosexuality. Nowadays, some worry that gender dysphoria is contagious. The debate about gender and sexual diversity still revolves around what constitutes biology, and thus what is against nature. But how 'nature' is defined depends on the historical context [\(5\)](#).

The health service does not have a history of treating transgender people particularly well (4). Until 2016, they had to be castrated in order to change their legal gender (6), i.e. have completely healthy body parts removed along with their capability to have children, in order to fit into someone else's definition of 'man' or 'woman'. This was probably a violation of human rights (7, 8), and certainly not good medical practice. One in three transgender people in the last living conditions survey had tried to take their own life (1). No one knows how many we have lost. When someone defines themselves outside the boxes of 'man' and 'woman', it is still so uncomfortable that we think the safest option is to not offer help. You can have your breasts removed if you want to define yourself as a man, but not if you define yourself as non-binary (9).

«The boxes in my head are the other person's cramped cage»

So, what can we do in this 50th anniversary year? We can start by listening more to those concerned. We can take responsibility for GP practices and hospital wards being inclusive places for everyone (10). Maybe we can recognise our own prejudices. Because perhaps I am conveying a subconscious expectation that there is a mother at home when a child comes to the child health centre with its father? That the man with dementia is calling for his wife? What assumptions have I made about the young girl wearing a hijab?

Coming out of the closet is not something you do just the once, it has to be repeated in every new relationship, at job interviews, parent meetings, the doctor's office and nursing homes. But what exactly is 'the closet'? It can be described as the sum of society's expectations. The boxes in my head are the other person's cramped cage.

My brother has consented to being referred to in the text.

REFERENCES

1. Anderssen N, Eggebø H, Stubberud E et al. Seksuell orientering, kjønns mangfold og levekår. Resultater fra spørreundersøkelsen 2020. Bergen: Universitetet i Bergen, 2020. https://www.bufo.no/globalassets/global/nbbf/kjonn_identitet/seksuell_orientering_kjonnsmangfold_og_levekar_resultater_fra_sporreundersokelse_n_2020.pdf Accessed 17.2.2022.
2. Tveter L. Rett og seksuell orientering – et tilbakeblikk. https://lovdata.no/artikkel/rett_og_seksuell_orientering__et_tilbakeblikk/2408 Accessed 17.2.2022.
3. Skjoldhammer TL. Omgjengelse mot naturen, eller kaade og vellystige friksjoner? Historien om Simonette Vold og tjenestepikene hennes. Historieblogg 20.12.2018. <https://www.historieblogg.no/?p=4279> Accessed 17.2.2022.
4. Benestad EEP, Thesen J, Aars H et al. Helsevesenet svikter transpersoner. Tidsskr Nor Legeforen 2017; 137. doi: 10.4045/tidsskr.17.0422. [PubMed]

[CrossRef]

5. Slagstad K. The Political Nature of Sex - Transgender in the History of Medicine. *N Engl J Med* 2021; 384: 1070–4. [PubMed][CrossRef]
6. Brean A. Hun, han, hen og alle andre. *Tidsskr Nor Legeforen* 2015; 135: 1919. [PubMed][CrossRef]
7. Amnesty International. Tvinges til sterilisering. Publisert 25.5.2012. <https://amnesty.no/tvinges-til-sterilisering> Accessed 17.2.2022.
8. Sørli A. Tvungen identitet – en vurdering av norsk forvaltningspraksis' krav om irreversibel sterilisering ved endring av juridisk kjønn. *Tidsskrift for familierett, arverett og barnevernrettslige spørsmål* 2014; 12: 272–95. <https://www.duo.uio.no/handle/10852/50530> Accessed 17.2.2022.
9. Svendsen M. Mina får ikke støtte til å fjerne brystene. *NRK* 18.1.2022. <https://www.nrk.no/trondelag/mina-far-ikke-kjonnsmarkering-behandling-pa-oslo-universitetssykehus-1.15807893> Accessed 17.2.2022.
10. Foreningen for kjønns- og seksualitetsmangfold. Rosa kompetanse – Helse og sosial. <https://www.foreningenfri.no/rosa-kompetanse/rk-helse-og-sosial/> Accessed 17.2.2022.

Publisert: 25 February 2022. *Tidsskr Nor Legeforen*. DOI: 10.4045/tidsskr.22.0138
© Tidsskrift for Den norske legeforening 2026. Downloaded from tidsskriftet.no 7 June 2026.