Not OK: The mental health needs, challenges, and gaps faced by LGBTI communities in Malaysia

A snapshot in numbers prepared by Ken Khoo

2022 EU-Taiwan LGBTI Human Rights Conference 28 October 2022





- Founded in 2016
- An organisation dedicated to supporting LGBTQ people through community-building, empowerment and services.

Programmes:

- 1. BlueBird project: LGBTQ-affirming mental health services
- 2. Rumah Angkat: LGBTQ transitional shelter
- 3. HIV counselling
- 4. Online community spaces



Trigger warning Suicide, self harm



In Malaysia, LGBTI communities face criminalisation and stigmatisation.



Evidence of State-sponsored Violence and Discrimination Against LGBT Persons In Malaysia

Malaysia sentences 5 men to jail, caning and fines over gay sex

Sources: Human Rights Watch, Queer Lapis, Straits Times



State-sponsored discrimination and violence refers to any form of mistreatment, violations, and aggressions resulting from the state's action. The state's actions could include the enactment of discriminatory laws, policies or directives; allocation of funds for discriminatory activities; and actions or speeches that are hateful, degrading, exclusionary, or incite violence against a group. Violence also refers to the collective harm—psychological, emotional and physical—that the LGBT population in Malaysia have experienced and are experiencing due to state's actions.

In Malaysia, LGBT people are criminalised through many federal and state laws. There are also multiple government-initiated anti-LGBT programmes, overseen by the Prime Minister's Department and JAKIM since 2011, most of which focus on rehabilitation and conversion of LGBT persons.

On 23 July 2018, Mujahid Rawa, the Minister at the Prime Minister Department for Religious Affairs, listed the government-sponsored LGBT programmes in Parliament:

- JAKIM's voluntary treatment and rehabilitation programme, 'Ilaj Wa Syifa';
- The Mukhayyam program a 3-day camp introduced in 2011, it was designed as a strategy to
 reduce HIV transmission among key affected populations, namely Muslim trans women. The
 programme, listed in the National Strategic Plan to End AIDS 2016-2030, has a few goals: create
 awareness about HIV, Islam and being a good Muslim; offer job placement and financial
 assistance for startups; and encourage participants to abandon immoral behaviour, including
 one's sexual orientation and gender identity. The government on multiple occasions has

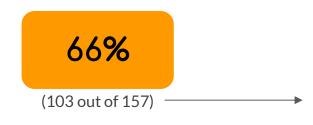
In Malaysia, LGBTI communities face criminalisation and stigmatisation.

"Evidence of State-sponsored Violence and Discrimination Against LGBT Persons In Malaysia", published on <u>queerlapis.com</u>

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There is significant pressure on LGBTI people to change their identities.

From an October 2022 survey on conversion practices:



of respondents stated they have faced pressure to change their SOGIE in their lifetime.

46 respondents are currently still facing pressure, including

- 13 (28%) trans women
- 11 (24%) cis queer men
- 11 (24%) trans men

Source: "Survey on Conversion Practices" by Justice for Sisters, Life under Umbrella, PLUHO, PLUsos, Oct 2022



There is significant pressure on LGBTI people to change their identities.

Most prevalent types of pressure:

negative comments or expressions of disappointment, shame, sadness, or projection of guilt

83%

pressure to marry a cisgender heterosexual or 'straight' person or start a family

45%

pressure to meet mental health or health providers, religious persons or others to heal, cure or correct

24%

threats of violence, emotional or financial withdrawal, or being reported to state agencies

17%

Source: "Survey on Conversion Practices" by Justice for Sisters, Life under Umbrella, PLUHO, PLUsos, Oct 2022



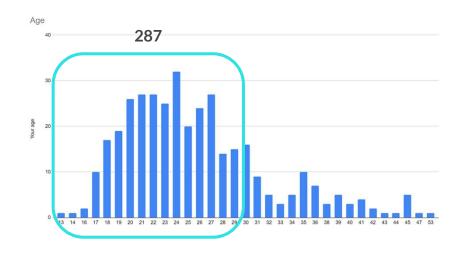




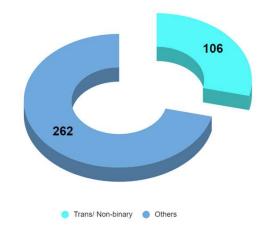
- 368 referral requests received
- 35 mental health service partners trained
- 20 volunteer case workers trained & recruited



Who does the BlueBird project serve? (n=368)



78% of respondents are under 30.



29% of respondents identify in the trans/ non-binary (NB) spectrum.



Trends among trans & NB respondents vs overall average

Mentions of gender dysphoria & discomfort





Trans & NB

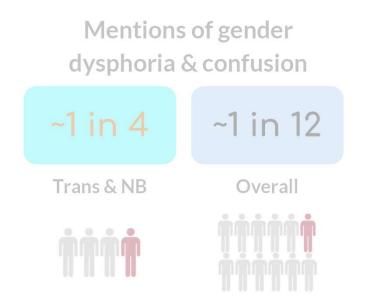


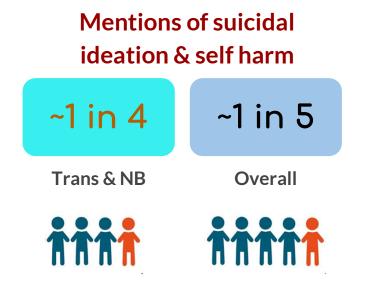






Trends among trans & NB respondents vs overall average







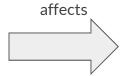
Trends among trans & NB respondents vs overall average

Average age of respondents

23.1

Trans & NB





- Financial security
- Bodily autonomy
- Legal rights



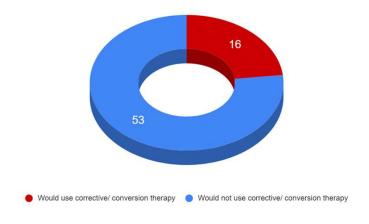
In all common presenting issues, trans & NB respondents chart higher vs the overall average.

Common presenting issues (by keyword analysis):		
Mentions of	% of all respondents	% of trans & NB respondents
Anxiety	41%	43%
Depression	35%	38%
Suicidal ideation	21%	25%
ADHD	11%	17%
Gender dysphoria / discomfort	8%	24%
Trauma	10%	11%
Stress	8%	12%
Loneliness	8%	10%



Issue: Mental health services are <u>unsafe and inaccessible</u> to LGBTIQ persons.

From a survey launched in 2019:



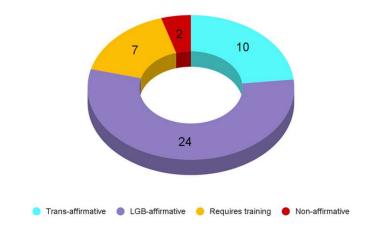
Out of 69 MHPs who identified as "For/Pro/Affirming" of LGBTQ+ persons, 16 (23%) said they would use corrective/conversion therapy if a client wishes to turn 'straight'.

Source: "Mental Health Provision for LGBTQ+ Clients in Malaysia" Google Form, accessed Oct 2022



Trans-affirmative MHPs are limited and centralised in urban areas.

From interviews BlueBird conducted with MHPs recommended to us:



Out of 43 MHPs we interviewed,

- 10 (23%) are LGB & trans-affirmative
- 24 (56%) are LGB-affirmative
- 7 (16%) require further training
- 2 (5%) are non-affirmative

Source: Data from PLUHO/ BlueBird project, accessed Oct 2022



In summary,

- 1. Pressure to change one's SOGIE is very common and seems to be **inordinately experienced by trans persons**.
- 2. Trans and non-binary persons report **higher prevalence of severe mental health issues**, including thoughts of suicide and self harm.
- 3. Trans and non-binary persons who report of mental health issues are **skewed younger** than the overall average.
- 4. A significant number of mental health professionals who self-identify as LGBTI-affirmative also agree that they would conduct conversion therapy.
- 5. Access to LGBTQ-affirmative and especially trans-affirmative mental health professionals is very limited.

