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June 6, 2017

Y.B. Datuk Seri Dr. Subramaniam Sathasivam

Minister of Health

Complex E

Federal Government Administrative Centre

62590 Putrajaya, Malaysia

Email: s.subra@moh.gov.my; kkm@moh.gov.my

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Re: Video Competition on “Gender Dysphoria” Promotes Stigma and Discrimination

Dear Dr. Subramaniam Sathasivam,

We write on behalf of Human Rights Watch to express grave concerns regarding the recently announced National Creative Video Competition on Adolescent Sexual and Reproductive Health that targets adolescents and young adults, and the Ministry of Health’s apparent endorsement of the erroneous and harmful theory that a person’s sexual orientation or gender identity can be changed at will, and that it is desirable to do so.

The competition proposes that young people submit original videos on three topics, including “gender dysphoria,” and that video submissions should address how to “prevent, control and seek help” for people who are “lesbian, gay, transgender (mak nyah), transvestite, tomboy/pengkid, [and] others.”

Sexual orientation and gender identity are not “lifestyle choices.” By endorsing that false theory, the ministry’s competition will promote stigma and prejudice, sow disinformation, and undermine the fundamental rights of lesbian, gay, bisexual, and transgender (LGBT) people. These include the right to the highest attainable standard of health and the right to equality and nondiscrimination, which the Malaysian government is bound to protect under international law.

The competition is based on the false assumption that same-sex attraction and transgender identities are pathologies or illnesses that can

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be prevented, treated, or cured. In fact, it has been 27 years since the World Health Organization (WHO) removed homosexuality from its international classification of diseases (ICD) in 1990. A WHO working group has called for gender dysphoria to be removed from the list of mental disorders in the next iteration of the ICD, due to be published in 2018. The WHO points out that while homosexuality is not a mental illness, stigma and homophobia do lead to high rates of physical and mental health issues as well as reduced access to medical and social services among LGBT people.¹

The World Psychiatric Association has found: “There is no sound scientific evidence that innate sexual orientation can be changed. Furthermore, so-called treatments of homosexuality can create a setting in which prejudice and discrimination flourish, and they can be potentially harmful. *The provision of any intervention purporting to “treat something that is not a disorder is wholly unethical”* [emphasis added].² An American Psychological Association study found that efforts to change peoples’ sexual orientation led the subjects to have “feelings of distress, anxiety, depression, suicidal ideation, self-blame, guilt, and loss of hope.”³

A 2015 joint statement issued by 12 United Nations agencies, including the World Health Organization (WHO), called on states to protect LGBT people from violence, torture, and ill-treatment, including by ending “unethical and harmful so-called ‘therapies’ to change sexual orientation.”⁴ According to the UN High Commissioner for Human Rights, “conversion therapy” that attempts to change someone’s sexual orientation or gender identity can, when forced or otherwise involuntary, constitute a form of torture or ill-treatment.⁵

The Malaysia Ministry of Health has responded to criticism of the stigmatizing nature of this competition by claiming that the ministry does not support discrimination against any group, and that the competition is intended to promote education on healthy lifestyles. This response fails to address the core issue at stake here, which is that regardless of

¹ World Health Organization, “FAQ on Health and Sexual Diversity: An Introduction to Key Concepts,” 2016, <http://www.who.int/gender-equity-rights/news/20170329-health-and-sexual-diversity-faq.pdf>.

² World Psychiatric Association, “WPA Position Statement on Gender Identity and Same-Sex Orientation, Attraction, and Behaviours,” March 2016, http://www.wpanet.org/detail.php?section_id=7&content_id=1807.

³ American Psychological Association, *Report of the American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation*, August 2009, <http://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>, p. 85.

⁴ United Nations Joint Statement, “United Nations entities call on States to act urgently to end violence and discrimination against lesbian, gay, bisexual, transgender and intersex (LGBTI) adults, adolescents and children,” September 2015, http://www.ohchr.org/Documents/Issues/Discrimination/Joint_LGBTI_Statement_ENG.PDF.

⁵ Office of the United Nations High Commissioner for Human Rights, “Discrimination and violence against individuals based on their sexual orientation and gender identity,” A/HRC/29/23, May 4, 2015, http://www.ohchr.org/EN/HRBodies/HRC/RegularSessions/Session29/Documents/A_HRC_29_23_en.doc, paras. 38 and 52.

whether the contest is intended to promote discrimination, its real effect is to reinforce the notion that lesbian, gay, bisexual, transgender, and gender non-conforming people in Malaysia are second-class citizens whose very existence is viewed as a problem to be solved, rather than an aspect of human diversity to be respected and nurtured.

The competition also seems to embrace the flawed and deeply stigmatizing premise that LGBT people are responsible for the spread of HIV, and that “preventing” or “controlling” same-sex attraction or transgender identities would reduce the incidence of HIV infection. On the contrary, international medical authorities including UNAIDS have found that stigma, discrimination, and criminalization of gay, bisexual, and transgender people force these communities underground and keep them away from HIV prevention and treatment services, thereby increasing prevalence.⁶ Guidance from global health agencies makes clear that homophobia and transphobia impair effective HIV responses, and that governments have an obligation to adopt rights-based, evidence-informed HIV prevention strategies.⁷ The solution is not to launch competitions that reinforce stigma; rather, health ministries should be calling for understanding and acceptance, ensuring that sexual and gender minorities are involved in health programming that affects them, and playing a leading role in dismantling legal and political obstacles to accessing health services.

By targeting young people in the proposed video competition, the Ministry of Health risks fostering self-hate and self-stigma among vulnerable LGBT youth. It also risks reinforcing biases that may be held by heterosexual and cisgender youth, potentially leading to increased homophobic and transphobic bullying and exclusion—in turn, resulting in poor school performance and higher drop-out rates among LGBT schoolchildren and students.

The Pan American Health Organization, one of the regional offices of the WHO, correctly places the onus on health professionals to “do no harm”:

While every expression of homophobia is regrettable, harms caused by health professionals as a result of ignorance, prejudice, or intolerance are absolutely unacceptable and must be avoided by all means. Not only is it fundamentally important that every person who uses health services be treated with dignity and respect; it is also critical to prevent the application of theories and models that

⁶ UNAIDS, “HIV Prevention Among Key Populations,” November 22, 2016, http://www.unaids.org/en/resources/presscentre/featurestories/2016/november/20161121_keypops; Global Commission on HIV and the Law, *HIV and the Law: Risks, Rights & Health*, July 2012, <http://www.hivlawcommission.org/resources/report/FinalReport-Risks,Rights&Health-EN.pdf>.

⁷ United Nations Population Fund et. al., *Implementing comprehensive HIV and STI programmes with men who have sex with men: practical guidance for collaborative interventions*, 2015, <http://msgf.org/wp-content/uploads/2015/11/MSMIT-for-Web.pdf>; *Implementing Comprehensive HIV and STI Programmes with Transgender People: practical guidance for collaborative interventions*, 2016, https://www.unfpa.org/sites/default/files/pub-pdf/TRANSIT_report_UNFPA.pdf.

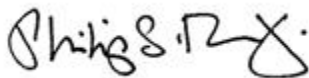
view homosexuality as a “deviation” or a choice that can be modified through “will power” or supposed “therapeutic support.”⁸

The debate around the National Creative Video Competition on Adolescent Sexual and Reproductive Health has already done harm to the LGBT community, harnessing homophobic and transphobic sentiment among the Malaysian public and appearing to lend official backing to such sentiment. For example, the Facebook page of the ministry’s director-general of health is flooded with hundreds of comments in support of the competition that read: “Support KKM [the Ministry of Health].... Say No to LGBT.”⁹

We urge the Ministry of Health to immediately issue a statement rescinding the “gender dysphoria” category from this video competition. The Ministry should also clarify to the Malaysian public that sexual and gender diversity cannot be “prevented” or “controlled,” and apologize to lesbian, gay, bisexual, transgender, and gender non-conforming people in Malaysia for the harm already done by circulating the call for submissions in its current form.

We also urge you to engage Malaysian LGBT communities in any further initiatives that involve them, and to consult international guidance from the WHO, UNAIDS, and other expert bodies on how to ensure that health initiatives relating to LGBT people are rights-based and evidence-informed.

Sincerely,



Phil Robertson
Deputy Director, Asia Division



Neela Ghoshal
Senior Researcher, LGBT Rights

CC:

Datuk Dr. Noor Hisham bin Abdullah, Director-General of Health

⁸ Pan American Health Organization, “Cures” for an Illness That Does not Exist: Purported therapies aimed at changing sexual orientation lack medical justification and are ethically unacceptable,

http://www.paho.org/hq/?option=com_docman&task=doc_view&gid=17703&Itemid=270.

⁹ Facebook page of Noor Hisham bin Abdullah, Director-General of Health, Ministry of Health, <https://www.facebook.com/DGHisham/posts/1580293668661182>.