Making the Invisible Visible in Southeast Asia

How COVID-19 escalates violence and discrimination against LBQ communities
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We would like to extend our deepest gratitude to the interviewees and organisations that spoke with us about their experiences. Thank you for taking the time to share such deeply personal stories of hardships and triumphs. This project would not have been possible without your contributions. We sincerely hope this report will do justice to your stories, and advance the rights of lesbian, bisexual, and queer (LBQ) persons.

To our supporters, especially Renate from COC Netherlands, thank you for working with us and supporting this invaluable opportunity to give a voice to LBQ communities in Southeast Asia. To Yen Nguyen of ASEAN SOGIE Caucus, thank you for envisioning and supporting this effort.

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This report was written by Mandy Chng, supervised and co-edited by Jean Chong at Sayoni, on behalf of the ASEAN Feminist LBQ Network.
Resilience — the ability to spring back or shape up from a situation of difficulty — has recently become a buzzword. In many civil society spaces and government forums, building resilience has become a norm. Interventions to address the impact of the COVID-19 have been framed as measures to cultivate resilience, whether at the individual level or at the organisational level. There are “resilience strategies”, “resilience funds”, “tools for resilience”, among many others.

Since the pandemic hit our region, queer communities across ASEAN have been nothing short of resilient. Devoid of adequate and sustainable funding, groups have amazingly managed to provide material support, relief packages, food support and even cash aid. Against the odds, many groups worked to keep their safe shelters and hotlines open for folks facing gender-based violence. Capacity-building initiatives were redesigned to adapt to the growing mental health and well-being needs of communities. Advocacy and organising work continued into the online space, requiring us to adjust our methods to address the digital divide. Our activism was pushed beyond boundaries, often crossing into the realm of humanitarian work. The virus did not deter activists from coping, staying afloat and engaging in multiple fronts of struggle. Dedication, empathy, and the spirit of solidarity fueled the work to keep our communities alive.

Our resilience, however, does not minimise the enormous challenges lesbian, bisexual and queer (LBQ) communities have had to grapple with during the pandemic. As minorities, LBQ persons are simultaneously battling patriarchy, heterosexism, cisgender privilege, and the rigid gender binary.

This research exposes how the pandemic has amplified pre-existing structural and systemic inequalities faced by LBQ persons. LBQ persons deprived of adequate education and training have been hit by the declining number of employment opportunities. Workers in the informal economy, including sex workers, have been further marginalised and are in dire need of economic relief. Health emergency policies that overlook gender dynamics have forced LBQ persons to remain in hostile environments, amplifying mental health challenges, and increasing threats to their physical security. Overwhelmed by the pandemic, some health systems have forcibly deprioritised sexual and reproductive health services, including gender-affirming healthcare. Movement restrictions, while justified on public health grounds, have also been insidiously utilised to encroach
upon fundamental human rights, silence critics, and advance authoritarian political agendas. Amid the suffering and neglect, powerful public figures have gone as far as to vilify LBQ persons, pointing to our identities as the reason for the pandemic.

We cannot depend solely on activists’ resilience to solve these complex issues. Governments must not be allowed to neglect their human rights obligations during the crisis, or to expect marginalised communities to find their own means to stay alive. The situation requires collective and sustained calls for accountability. We must acknowledge that ASEAN, governments, public health institutions and humanitarian actors have failed to apply a SOGIESC-inclusive lens in their management of the pandemic. We have to remind donors and stakeholders in the international community to review their funding priorities in the region and reallocate resources to groups and thematic issues that have been long neglected.

I wish to congratulate the ASEAN Feminist LBQ Network for producing this research, which amplifies the narratives and voices of those left behind. May this research serve as a powerful instrument to demand accountability.

Ryan Silverio,
Regional Coordinator,
ASEAN SOGIE Caucus
How do we advocate for an unseen and hidden community? For many of us, invisibility is a lonely and deeply traumatising experience. From this place of pain and suffering, LBQ persons in Southeast Asia organise against injustice.

This report is a groundbreaking effort to map Southeast Asia’s LBQ communities and their unique challenges. Together with activists from across the region, Sayoni worked tirelessly to gather data on an incredibly diverse and politically complex region. We wanted to make visible the intersectional struggles of LBQ communities.

The information we have gathered highlights the unique issues LBQ persons face, and how COVID-19 has exacerbated them. These heartbreaking stories represent a mere fraction of our communities’ experiences. In this report, we documented the lack of access to humanitarian aid; threats to livelihoods and food security; intensified risks of discriminatory attacks and domestic violence; inequalities in healthcare access; social isolation and mental health challenges; stigmatisation; discrimination and hate speech; and the infringement of civil and political rights. To solve these problems, we must change how we think about gender-based violence and reclaim feminist politics from those who have forsaken us.

While the report reveals our communities’ hardships, it also demonstrates our resilience and innovative activism. By documenting the challenges we face, we hope to mobilise resources and inspire people to take action. Although the problems are varied, our solution is clear: invest in our capacity to advocate for our own communities. We have already done so much with so little in the face of adversity. With adequate funding, resources, and capacity, I know that we can turn our audacious dream of an inclusive feminist future into a reality.
## Glossary of Terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASEAN</strong></td>
<td>Association of Southeast Asian Nations</td>
</tr>
<tr>
<td><strong>Cisgender</strong></td>
<td>A term used to describe someone whose gender identity corresponds with the sex they were assigned at birth</td>
</tr>
<tr>
<td><strong>Coming out</strong></td>
<td>Self-disclosure of one's sexual orientation, gender identity or expression, or sex characteristics</td>
</tr>
<tr>
<td><strong>Gender non-conforming</strong></td>
<td>A term used to describe someone whose gender identity or expression differs from the gender norms associated with the sex they were assigned at birth</td>
</tr>
<tr>
<td><strong>HRT</strong></td>
<td>Hormone replacement therapy</td>
</tr>
<tr>
<td><strong>LBQ</strong></td>
<td>Lesbian, bisexual and queer</td>
</tr>
<tr>
<td><strong>LGBTQI</strong></td>
<td>Lesbian, gay, bisexual, transgender, queer, and intersex</td>
</tr>
<tr>
<td><strong>NGO</strong></td>
<td>Non-governmental organisation</td>
</tr>
<tr>
<td><strong>Non-binary</strong></td>
<td>A term used to describe someone who experiences their gender identity and/or expression as falling outside the categories of man and woman</td>
</tr>
<tr>
<td><strong>Queer</strong></td>
<td>An umbrella term for people who are lesbian, gay, bisexual, transgender, intersex, or other sexual and gender minorities who do not identify as heterosexual or cisgender</td>
</tr>
<tr>
<td><strong>SOGIESC</strong></td>
<td>Sexual orientation, gender identity and expression, and sex characteristics</td>
</tr>
<tr>
<td><strong>Tom</strong></td>
<td>A term from the English word &quot;tomboy&quot; used to describe someone who was assigned female at birth, but whose gender identity and/or expression relate to masculinity</td>
</tr>
<tr>
<td><strong>Transfeminine</strong></td>
<td>A term used to describe someone who was assigned male at birth, but aligns more closely with femininity, while not necessarily fully identifying as a woman</td>
</tr>
<tr>
<td><strong>Transmasculine</strong></td>
<td>A term used to describe someone who was assigned female at birth, but aligns more closely with masculinity, while not necessarily fully identifying as a man</td>
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<tr>
<td><strong>UN</strong></td>
<td>United Nations</td>
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Executive Summary

Introduction

At the time of writing, the world is facing a health and humanitarian crisis unparalleled in modern history. The novel coronavirus (COVID-19) has infected over 56 million people, and claimed more than 1.3 million lives. But the pandemic has not only produced unprecedented challenges for public health. It has, along with the ensuing economic downturn, created unprecedented human rights challenges and exposed systemic failures in all Southeast Asian nations.

COVID-19 has revealed an ongoing pandemic of inequality, exacerbating pre-existing vulnerabilities of marginalised groups, particularly lesbian, bisexual, and queer (LBQ) communities. LBQ persons face multiple layers of violence and discrimination. They are disadvantaged in multiple and intersecting ways due to their sexual orientation, gender identity and expression, compounded with other marginalised identity categories such as those associated with race, class, age, and disability. Yet, LBQ persons and the human rights violations they face remain mostly invisible, even within larger lesbian, gay, bisexual, transgender, queer and intersex (LGBTQI) movements.

Unequal power dynamics, patriarchy and repressive social norms expose LBQ persons to distinct forms of human rights violations, including gender-based violence and discrimination in education, employment, healthcare and housing. This report aims to shed light on the challenges and changes needed to improve the lives of LBQ persons in Southeast Asia.

LBQ persons face multiple layers of violence and discrimination. They are disadvantaged in multiple and intersecting ways due to their sexual orientation, gender identity and expression, compounded with other marginalised identity categories.
Key Findings

1. Increased Threats to Livelihoods and Food Security:

LBQ persons are over-represented in informal sectors that typically lack job security; they are therefore amongst the hardest hit by economic fluctuations. Due to the nature of their jobs, they are also less able to work from home. Some have to choose between the risk of infection or that of living without basic necessities and shelter. LBQ persons, particularly those who are transgender or gender non-conforming, or have lower educational levels, are especially vulnerable to employment discrimination and financial instability. Furthermore, some LBQ persons are unable to access government support and relief aid, due to pre-existing discriminatory laws and systemic disadvantages.

2. Intensified Risk of Conflicts and Domestic Violence:

Before COVID-19, LBQ persons were already at high risk of gender-based violence, especially from family members who attempt to “punish” or “correct” their perceived non-conformity towards gender roles and social norms. Lockdowns have forced cohabitation in hostile environments; almost half of LBQ persons interviewed report increased conflicts or violence with family members or intimate partners. Rates of reporting and help-seeking are low among LBQ persons because they face specific barriers, such as fear of discrimination, stigmatisation or criminalisation; lack of sensitivity from first-responders; culture of victim-blaming and shame; and lack of awareness of what constitutes abuse and resources available.

3. Inequalities in Healthcare Access, Quality, and Affordability:

Poor or unemployed LBQ persons are at increased risk of exposure to infection due to their informal work in high-risk sectors, such as accommodation and food services. Wages are usually low, putting basic medical necessities and care out of reach. Even when they do seek care, LBQ persons are more likely to experience discrimination, receive substandard care or be refused medical attention altogether. For transgender and gender non-conforming persons who face difficulties in accessing hormone replacement therapy (HRT) through registered healthcare providers, the pandemic has increased barriers to HRT, due to disruptions to non-COVID-19 healthcare, and delays in import and delivery services.

4. Deepening Social Isolation and Mental Health Concerns:

Lockdowns are especially challenging for LBQ persons living in hostile home environments, such as those who face domestic violence or are unable to be out. This may result in increased anxiety, depression, feelings of hopelessness, suicidal ideation, and self-destructive behaviour. However, many do not seek mental healthcare because of stigma attached to mental illnesses, lack of LGBTQI-friendly providers, fear of discrimination or involuntary outing. These disproportionate barriers result in further isolation and a greater risk of mental health concerns going unresolved, to the detriment of their short-term and long-term well-being.

5. Stigmatisation, Discrimination, and Hate Speech:

Since the COVID-19 outbreak, there has been a rise in homophobic and transphobic scapegoating and hate speech by political and religious leaders. These false claims and misinformation serve to legitimise violence and discrimination against LBQ persons. The stigma and discrimination LBQ persons face stems from criminalisation, patriarchy, and gender stereotypes, amplifying vulnerabilities in private and public spaces. In addition, COVID-19 containment measures and more frequent identity verifications pose unique challenges to transgender and gender
non-conforming persons. LBQ persons are at high risk of state-sanctioned harassment, discrimination, or violence if their appearance does not match photographs or gender markers in identification documents.

6. Infringements of Civil and Political Rights:

LBQ persons and activists in the region live and organise in hostile conditions. Prior to the pandemic, Southeast Asia was already seeing a rise in authoritarianism, nationalism and populism, as well as the erosion of civil and political liberties. Militarised approaches and digital surveillance used to manage the pandemic have resulted in heightened censorship and surveillance, and the abuse of state and police powers, threatening the human rights of LBQ persons.

7. Further Constraints on LBQ Organising and Community Support:

LBQ communities in Southeast Asia are largely overlooked. LBQ organisations face disproportionate barriers to movement-building, including inadequate funding; lack of LBQ-specific prioritisation in LGBTQI and women’s rights movements; absence of research; understaffing and insufficient technical capacity of activists. The pandemic has exacerbated these difficulties and generated new challenges in providing direct services, psychosocial support, and advocating for their communities. LBQ persons also expressed grave concerns over threats to organisational survival, as well as activists’ well-being.

8. Coping Strategies and Needs Expressed:

Despite tremendous challenges, LBQ persons and groups exercise resilience and creativity to fulfill needs unmet by the state. They harness limited resources to distribute emergency food and basic necessities; provide psychosocial support; organise advocacy campaigns for LGBTQI inclusion in politics; and strengthen solidarity and unity within their communities, and with feminist and pro-democracy movements.

Substantially and sustainably improving the lives of LBQ persons necessitates further research on LBQ-specific issues relevant to their context; more funding and resources for direct health and social services provided by community groups; capacity development programs; legislative and institutional change to address pre-existing discrimination and violence; and awareness-raising and the use of intersectional frameworks within advocacy and movement-building.

EXECUTIVE SUMMARY
**Objectives and Methodology**

**Objectives**

*This research aims to:*
- Highlight how the COVID-19 pandemic has amplified the challenges LBQ persons faced, and their needs;
- Identify the strategies LBQ persons and organisations are using to mitigate these impacts;
- Develop strategies and resources for the ASEAN Feminist LBQ Network in supporting LBQ communities; and
- Determine recommendations for governments, donors, non-governmental organisations (NGOs), multilateral agencies, and other stakeholders.

**Definition of LBQ Persons**

This publication adheres to the definition of “LBQ women” set out in the first ever Global Feminist LBQ Women’s Conference held in Cape Town, South Africa in 2019. In this study, the term “LBQ persons” refers to people who identify as lesbian, bisexual, and queer, based on self-determination. It centres people who identify as women, including intersex, transgender, cisgender, and all people who identify as women with marginalised sexualities, but also includes gender non-conforming and non-binary people who relate to an LBQ identity.

It is important to note that Western identity frameworks may not be neatly applied to some Southeast Asian contexts, where boundaries between masculine females and transgender men are blurred and indiscernible. Many versions of masculinity in Southeast Asia transgress normative categories of “woman” and “man”, such as tombois in West Sumatra, Indonesia or toms in Thailand. To toms, being a “man” does not necessarily imply that they think of themselves literally as men or embodying exactly the same masculinity cisgender men are understood to have. These culturally specific identities may possess characteristics associated with men, but inhabit multiple and seemingly contradictory positions which challenge binary gender ideologies. For instance, some participants

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in this study identified themselves as a transgender man in a lesbian relationship with a self-identified lesbian. This exemplifies how gender exists on a continuum, and how some Southeast Asian cultures do not align with fixed Western identity categories like transgender man and masculine or butch lesbian.

Language and the translation of Western identity frameworks are limited, and for some, labels may be unnecessary or inadequate. Although this research centres women, as defined above, we also aim to consider local cultural frameworks within which people live and make sense of themselves and their identities. Hence, this research will also consider culturally specific understandings, by including self-identifying transgender men, toms, and transmasculine persons with non-conforming gender identities and expressions, and will refer to them with the terminology they use.

Methodology

Convened and coordinated by Sayoni, on behalf of the ASEAN Feminist LBQ Network, this qualitative study was conducted through in-depth interviews with 50 LBQ persons from 10 countries in Southeast Asia from September to October 2020. Consultants also reached out to LBQ organisations in their respective countries, and gathered information on 32 organisations in the region.

These countries are member states of the Association of Southeast Asian Nations (ASEAN): Brunei, Cambodia, Indonesia, Malaysia, Myanmar, the Philippines, Singapore, Thailand, Vietnam; and observer state Timor-Leste. We attempted to reach out to LBQ community members in Laos through the ASEAN SOGIE Caucus (ASC) and UN Women Asia-Pacific. However, we were unable to engage with any Laotian individuals or organisations.

In-country consultants each conducted three to six interviews, either online or in-person. Some respondents were involved in LBQ or LGBTQI activism, which enabled us to identify the personal impacts of COVID-19, as well as its effects on wider communities and movement-building. Consultants used an interview template with questions focusing on issues such as how the pandemic is affecting the interviewee as an LBQ person; how they have been coping with new challenges; how LBQ communities are affected differently; how the advancement of human rights for LBQ persons has been impacted; whether and how LBQ persons have been supported by the government and NGOs; and the resources and support lacking in their countries.

Pseudonyms have been used to preserve the anonymity of some interviewees.
The figures above reflect the multiple identities of 50 interviewees, as self-identified by them.
Figure 3. No. of registered and unregistered LBQ organisations in Southeast Asia

The figures above reflect the 32 LBQ organisations identified by consultants.

Figure 4. Organising strategies used by LBQ organisations in Southeast Asia

The figures above reflect the various organising strategies of 32 LBQ organisations, as self-identified by them.
Limitations

As the pandemic is ongoing, the impacts of COVID-19 may vary due to its unpredictability and volatility. Government policies and movement restrictions may either be tightened or relaxed, depending on the severity of the crisis. Thus, it is important to highlight that issues discussed in this research reflect the circumstances at the time of interview; expressed challenges and needs may have changed since then.

This research utilised in-country consultants’ community networks to identify interviewees. Non-probability sampling was used, which includes convenience, purposive, and snowballing approaches. These approaches are necessary for community-based studies, especially for groups that are marginalised and hard to reach like LBQ persons. However, it should be noted that the sample has limited outreach to some LBQ persons who are multiply marginalised and hardest to reach, including those who live in more rural regions, areas of conflict, repressive sociopolitical climates, and those who are migrants or refugees. Further, as participants’ ages range from 18 to 43, this study may be unable to fully account for the unique challenges faced by older LBQ persons.

The list of LBQ organisations provided to us by consultants may be inaccurate or incomplete. As LBQ organisations often have to operate covertly due to stigma or risk of prosecution, they may be difficult to identify. There is also no official data available.
COVID-19 Situation in Southeast Asia

Even though COVID-19 originated in Asia, Southeast Asia enjoyed early success in containing the virus. The region recorded lower transmission and fatality rates per capita, in comparison to other parts of the world. By 30 September 2020, it had registered about 2% of total cases and 1% of fatalities globally, despite having around 9% of the world’s population. This was partly due to the rapid implementation of stringent measures, such as lockdowns and restrictions on cross-border travel.

Measures to control the transmission of COVID-19, however, have been applied unevenly within countries and across the region. By early October, infection rates began escalating in several nations, especially the region’s most populous countries: Indonesia and the Philippines. On 4 October, the Philippines recorded its biggest daily increase, reaching a total of 322,497 reported infections, the highest tally in the region. Indonesia reported its highest daily spike on 8 Oct, taking the country’s total to 320,564 and reaching the region’s highest total death toll of 11,580. Malaysia and Myanmar also saw record numbers of new COVID-19 cases in the first week of October.

Meanwhile, as of 9 Oct, Brunei, Cambodia, Laos, and Timor Leste reported relatively low numbers of COVID-19 infections, and Singapore and Vietnam managed to re-establish control after flare-ups earlier in the year. However, low testing rates, data reporting and selection cast doubt on the accuracy of virus statistics in some countries, such as Cambodia and Laos.

**Economic Distress**

While the full magnitude of the COVID-induced economic downturn remains to be seen, the World Bank’s report on East Asia and Pacific states that poverty in the region could increase for the first time in 20 years. The pandemic and efforts to contain its spread, such as movement restrictions and global disruptions to production, trade, and tourism, have given rise to business closures, mass unemployment, and significant drops in household income.

While governments have boosted economic assistance and social welfare for the poor and vulnerable, institutionalised discrimination and prejudicial distribution methods against LGBTQI persons engenders unequal access to support and relief aid.

These economic shocks have intensified effects on vulnerable groups and those who work in the informal economy. This includes LBQ persons who are disproportionately represented in the informal sector; many are living on the margins and pushed into jobs with little to no job security as a result of discrimination in education and employment.

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Global\textsuperscript{16} and regional\textsuperscript{17} research on the impact of COVID-19 on LGBTQI people have found that the pandemic has amplified pre-existing vulnerabilities, as marginalised groups are disproportionately affected compared to the wider population. For instance, while governments have boosted economic assistance and social welfare for the poor and vulnerable, institutionalised discrimination and prejudicial distribution methods against LGBTQI persons engenders unequal access to support and relief aid. A rapid assessment conducted in Jakarta by Sanggar Swara, a civil society organisation of transgender women, found that more than 640 transgender persons in greater Jakarta lost their jobs amid the pandemic. Many were unable to support themselves and access food benefits, due to their gender identity or lack of identity cards. Seeing this crucial need for support, a coalition of civil society organisations raised funds for distribution of food and hygiene packages to transgender women in need.\textsuperscript{18}

Gender-based Impacts

Gender-based violence has increased exponentially as women are forced to lockdown at home with abusers, while social services that support victims are disrupted or inaccessible.\textsuperscript{19} In Singapore, AWARE’s Women’s Helpline saw a 33% increase of family violence-related calls in February compared to the same month in the previous year.\textsuperscript{20} Similarly, when the Movement Control Order (MCO) was implemented in Malaysia, hotlines for victims of domestic violence received 57% more calls.\textsuperscript{21}

Organisations like UN Women have stressed the critical need for gender-responsive recovery plans.\textsuperscript{22} Nonetheless, gender-based studies and plans cannot neglect the distinct needs and challenges of LBQ persons, who face significant barriers to support and recovery. LBQ persons experience multiple and intersecting forms of institutionalised discrimination and systemic oppression, due to factors such as their gender, sexual orientation, socioeconomic status and ethnicity, among others. For instance, OutRight Action International’s report on violence against LBT people in Asia has found that greater visibility of non-conforming sexual orientation,

\begin{itemize}
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gender identity and expression resulted in greater frequency of facing violence. Moreover, violence against LBT people is systemic and severely under-reported due to the risk of being criminalised, stigmatised by society, or discriminated against by first responders or family members.  

In June 2020, an online survey conducted by Sayoni found that one in five LGBTQI respondents in Singapore were living in family environments that were hostile toward their sexual orientation, gender identity or expression. During the COVID-19 lockdown, the NGO Equality Myanmar reported an increase in intimate partner violence. Yet, when cases of violence against LGBTQI people are reported to the police, they are often ignored. Strict gender roles, the criminalisation of homosexuality, compounded by the lack of gender-neutral legal definitions of rape, contribute to inaction and increases discrimination, particularly in rural areas. This disproportionately affects LBQ persons, who are at particular risk of facing violence and discrimination because of gender inequalities and power relations within families and wider society. Therefore, it is not only crucial to account for gender-based impacts of the pandemic, but to widen this framework by understanding the intersectional forms of oppression that affect LBQ persons.

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Lack of Resources for LBQ Communities

The 2017–2018 Global Resources Report: Government and Philanthropic Support for Lesbian, Gay, Bisexual, Transgender, and Intersex Communities (GRR) analysed data from 800 foundations and corporations, and 15 donor governments and multilateral agencies. The data highlighted the scarcity of LBQ-specific funding worldwide. Within LGBTQI funding — which itself represents less than 1% of all government and foundation funding — only 5% of the total $560 million funding was specifically directed to LBQ issues and communities.25

LBQ groups have abysmally small budgets and little access to external funding. Astraea and Mama Cash’s 2020 report found that fewer than one in four groups receive adequate funding; 40% of LBQ groups have an annual budget of less than USD$5,000. There are significant disparities across regions, with Asia and the Pacific being the second least funded after Central Asia. LBQ groups in Asia-Pacific had the second lowest median external funding at USD$1,170, in sharp contrast to USD$244,202 received by LBQ groups in North America.26 Moreover, only a third (32%) of donors in their sample funded service provision, and less than half (43%) funded research and knowledge production. The lack of financial resources impedes efforts by LBQ organisations to provide support and help their communities recover from crises.


The lack of financial resources impedes efforts by LBQ organisations to provide support and help their communities recover from crises.
Our Findings

1. Increased Threats to Livelihoods and Food Security

LGBTQI persons are over-represented among low income populations. They are more likely to work in the informal sector, which lacks job security and legal protection afforded by labour laws. This makes them especially vulnerable to economic downturns. Due to the nature of informal jobs, they are also seldom able to work from home.

LBQ persons who are unemployed or survive on daily wages face increasing food and housing insecurity. An online survey conducted in April 2020 by Sore Sobat, an LBTQ collective in Indonesia, found that 61.9% of LBTQ persons are in severe financial distress as a result of the pandemic; they are running out of food supplies, cannot pay their rent and utilities, and unable to afford hormone replacement therapy.

Households that live from hand to mouth have been pushed further into poverty due to COVID-induced rising food costs. Most interviewees — particularly those who were surviving on precarious work and housing arrangements before the pandemic — expressed concern over access to basic necessities, food and shelter for themselves or others in their communities. Some LBQ persons were forced to take out high-interest loans or made homeless, while others moved in with friends or back into non-affirming family homes.

Vulnerabilities of informal work

According to the International Labour Organization (ILO), women are more exposed to informal work in low- and lower-middle income countries. This means that they are over-represented in high-risk sectors that have been severely impacted by COVID-19, such as manufacturing, accommodation and food services, arts and entertainment sectors.

Of 50 interviewees, 35 LBQ persons reported being unemployed or incurring income loss, as a result of the pandemic. More than half of those who face income loss are daily wage labourers, self-employed or freelancers in high-risk sectors.


Jose, a trans man working as a street food vendor in Timor Leste, said, "Due to restrictions, I was unable to open my street food stall. It was hard without daily earnings, even if it was small. I started selling household and personal items.

I sold my mobile, my partner’s hair dryer, and few others, like a cooking oven, so I could have some money to buy food for my family. I felt very vulnerable because I am the main breadwinner for my family. I faced tremendous pressure to make sure my family had food on the table, and my daughter’s milk, diapers and all other basic needs. This also created tension between me and my partner. We fought a lot [during the pandemic]. I felt stuck and hopeless for not being able to do anything. It was worrisome for me. My extended family started doubting my capacities to feed my family. I felt doubled stress as compared with my brothers, because of my gender identity. Being a trans man, I have this pressure to prove myself every single day."
Of 50 interviewees, 35 LBQ persons reported being unemployed or incurring income loss, as a result of the pandemic. More than half of those who face income loss are daily wage labourers, self-employed or freelancers in high-risk sectors. Excluded from income security, social protections and health benefits — and with little to no savings — these individuals are vulnerable to economic shocks and often one illness away from impoverishment.

For example, garment factories have been significantly impacted by the pandemic, with some shutting down or suspending employees because of decreased labour demands. During a lockdown in Cambodia, Chantrea, a daily wage worker at a garment factory, was suspended and could not afford rent. She had to take out a loan to support herself and her family. Although Chantrea has returned to work, she still suffers income loss due to lack of demand and reduced work hours. Further, she is unable to take time off, as workers who take more than three days of medical leave are terminated.

Despite the Movement Control Order, Furzann has been working non-stop everyday. "I still have a job which I’m grateful for. I need to get paid. I actually have to go out and risk my health. I’m on survival mode all the time, I just have to deal with it," she added.

Since working from home is not an option, LBQ persons in informal work are forced to choose between the risk of COVID-19 infection and that of living without basic necessities and shelter. Furzann, who works in a coffee shop in Malaysia, had to be financially secure in order to move away from hostile family members. Despite the Movement Control Order, Furzann “has been working non-stop everyday”. “I still have a job which I’m grateful for. I need to get paid. I actually have to go out and risk my health. I’m on survival mode all the time, I just have to deal with it,” she added.
Khit Lin Young, an activist from Myanmar, who is currently a Project Manager in Transman Myanmar Association.

Photo courtesy of Khit Lin Young.

Similarly, Ko Thu, a daily wage tailor in Myanmar, stated, “I faced a lot of inconveniences when the government suddenly announced movement restrictions without any warnings. Still, those restrictions did not stop us from going to work since we cannot afford to lose our jobs.”

Beyond the increased risk of infection, working in informal jobs pose additional threats to their safety. Khit Lin Young, a trans man in Myanmar, is surviving on savings and has considered taking on delivery jobs, but fears being attacked for his gender identity. “With movement restrictions, people are using food delivery services. But even if [LBQ persons] wanted to work as food delivery riders, it would be extremely dangerous for them. Currently, there have been crimes happening like muggings and robbing, and since riders are required to work late at night, it is not safe for trans people to work,” he explained.

**Intersectional identities and employment discrimination**

LBQ persons experience varying vulnerabilities, depending on multiple intersecting factors, such as gender identity or expression, ethnicity, age, socioeconomic status, migrant status, and disability. Interviewees from all 10 countries gave accounts of employment discrimination based on sexual orientation, gender identity or expression. Transgender persons and LBQ persons who present as gender non-conforming, in terms of appearance or behaviour, were particularly vulnerable due to their visibility.

Of the 11 nations in Southeast Asia, Indonesia and Singapore are the only countries with gender recognition laws that enable transgender persons to change their legal gender markers. Of the 11 nations in Southeast Asia, Indonesia and Singapore are the only countries with gender recognition laws that enable transgender persons to change their legal gender markers. However, they can only do so after undergoing sex reassignment surgery (SRS). This creates complications for those who do not wish to undergo or cannot afford surgery, as it discloses their trans status, further exposing them to discrimination and violence during identity verification processes.
With rising unemployment rates due to COVID-19, trans and gender non-conforming persons are further disadvantaged. A study by Asia-Pacific Transgender Network (APTN) on workplace discrimination in Southeast Asia found that compared to transgender applicants, cisgender applicants are 1.5 times more likely to receive positive responses to job applications and calls to interviews.29

Arra, a lesbian trans woman from Malaysia, stated, “The reason why I’m having such a difficult time getting a job is because I have to vet. All the people that I send my resumes to, I need to make sure that they are okay with me, it makes me mostly just really tired. I just tell them I’m a trans woman outright in the cover letter itself. I don’t want to go to the interview and have them find out, and then reject me because of that. People are having a difficult time finding a job, but in terms of trans women who are in the LBQ spectrum, it’s even way harder for someone who is trans to find a job during this time.”

Kha Mon Htaw, a trans man in Myanmar, echoed these sentiments: “I am currently unemployed and am looking for a job. With COVID-19, it is significantly harder to get one. Even if I managed to get an interview for my job, they let me go due to my appearance as a trans man. Being an LBQ [person], we get less opportunities than other cisgender people.”

Interviewees also gave accounts of unequal wages and unfair dismissal. Chioo, a transmasculine person from Indonesia, reported that masculine-presenting LBQ persons working as rice sack lifters were perceived to be stronger, and therefore treated as men. However, they faced wage exploitation: despite performing the same role as their cisgender male colleagues, they were told that they were inferior to cisgender men and paid in women’s wages. Ina from Indonesia shared that some of her friends “got fired because they identified as butch, they are expected to look feminine at the workplace. The company [used] the pandemic as the reason for dismissal or lowering their wages, and a chance to disgrace others. [But] she got fired because she is a lesbian and doesn’t belong in the [wider] community.”

Several LBQ persons left their jobs amidst the pandemic despite being financially unstable, due to attempts by employers or colleagues to control their bodies. This included forcing them to change their physical appearance to conform to gender stereotypes, and harassment — sexual or otherwise.

The fear of discrimination looms over LBQ persons, forcing them to self-censor their behaviours or appearances, even beyond the workplace. Stella, a cisgender lesbian from Singapore, stated: “I recently

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Farah, a cisgender lesbian in Malaysia, had to quit her job during the pandemic, which increases her economic precarity, because she could no longer tolerate the workplace harassment. As the only out queer person in her company, her colleagues often made homophobic or transphobic jibes and insults.

"I feel like my boundaries were not being respected and this had been going on for almost a year," she added.
only started this new job in March [in civil service]. I'm living on my own, and I have to pay rent and everything. If I lose my job, I would be hanging on to whatever little savings that I have. I definitely cannot be out at this job. I cannot be found out or seen in public holding my girlfriend's hand. Even if we do go out to spaces right now, we don't hold hands a lot. There's always that paranoia and fear because Singapore is so small.”

Educational level is another key factor that limits employment opportunities: many LBQ persons are excluded from education due to patriarchy, stigma and discrimination, leaving them with little choice but to take on physically laborious jobs. Almost half of LBQ persons interviewed listed their highest educational level as high school or below. Participants from Timor Leste — one of the least developed countries in Southeast Asia — were the most disadvantaged; two interviewees never received formal education, while three who dropped out in middle school.

Adam, a trans man from Timor Leste, said, “I don't have a permanent job. Sometimes, I get a job as a sand digger in one of the rivers in Dili. But during COVID-19, everything was shut down and it affected my work. I don't know what else to do. I am a very low skilled person because I never went to school. My parents refused to educate me due to my gender identity and sexual orientation. They thought I was not worth spending money on. I am illiterate, can't read or write, all I can do is physical work, which is nowadays hard to find.”

LBQ persons in Southeast Asia are sometimes forced to leave home at a young age, and have to find employment without proper educational qualifications. To sustain themselves, some LBQ persons seek employment in the sex industry. Ina, a cisgender lesbian who only received a primary school education (elementary school), is a sex worker in Indonesia. Due to COVID-19, she was unable to work and could not find alternative sources of income: “I cannot do my sex work anymore. Clients are scared, and our area is closed down by [government officials]. There are raids every day. I only get income from a few clients, sometimes, and the amount is reduced as well... I’m afraid I’ll get sick too. Because there’s a decrease in my income, I’m worried that I won’t be able to pay for my daughter’s school, I won’t be able to live under a roof because I cannot pay rent. Some of my friends were being kicked out by the landlord due to inability to pay rent.”

Unequal access to government support and relief aid

Several LBQ persons reported being unable to access government relief aid, due to pre-existing discriminatory laws and systemic disadvantages. For example, some participants stated that applying for public assistance was exceptionally difficult due to the lack of knowledge or capacity to navigate tedious or complicated bureaucratic processes. Kusuma from Thailand stated that her friend, a tom, was unable to receive government support as they were digitally
Mel, a masculine-presenting Singaporean lesbian, described her struggles in seeking employment.

In addition to discrimination against her non-conforming gender expression, Mel's highest educational level is GCE ‘O’ levels (secondary school), which is equivalent to middle school. She was previously employed in manual labour-intensive jobs, and now faces difficulty finding an office or administrative job. Furthermore, as she is on the autism spectrum, she faces yet another challenge. It is difficult for Mel to work in service sectors or other jobs that require sustained social interaction and long hours of sensory stimulation because of her disability. Such jobs may cause sensory overload for persons with autism, resulting in severe anxiety, distress or extreme irritability. These various factors intersect to constrain Mel's already limited employment opportunities during the pandemic.
illiterate and unable to apply for support online. “There are people who offer support to [apply for relief aid] from the government, but they charge 40% of the support money,” she added. This demonstrates how the pandemic amplifies the pre-existing vulnerabilities of socioeconomically disadvantaged communities, including LBQ persons.

Migrants and trans persons who lack legal gender recognition on identity documents live in a legal limbo in their day-to-day lives. As a migrant in Indonesia who is not registered with the local administrative division (Rukun Tetangga), Zhenzhen did not receive adequate information and could not fulfil the requirements for COVID-19-related support. “It has been very confusing since the beginning, there has been no clear information from the government, let alone their efforts. There was information that they gave away some support but I don’t know to whom that support was delivered. There was also information that we can access those supports, but turned out that not so many people could access it, especially transgender persons and migrants,” she explained. During crises, the lack of legal documentation increases barriers to crucial social services.

Due to the absence of legal recognition of same-sex partnerships and gender marker changes, LBQ persons do not have equal access to the same crisis-related support available to heterosexual individuals and families. Several interviewees say they fell through the gaps of COVID-19-related policies and relief programs as a result of institutionalised discrimination. Danny from the Philippines stated: “Because the government does not recognise same-sex partnerships, and heterosexual trans individuals are, in their eyes, in same-sex partnerships, many in the LBQ community] are not eligible to receive help from the government since they do not count as [legally registered] ‘families’. Also, for those who have to go to work, they were unable to ride on the same motorbike because only married couples were allowed to do so, which is an additional challenge.”

In particular, trans and gender non-conforming persons face significant obstacles when accessing food and shelter support because of stigmatising attitudes and prejudicial policies. Trinh from Vietnam recounted that when a trans man visited a rice dispensing machine in Ho Chi Minh city for the poor or unemployed, “the staff stared at him and denied to [give him rice] publicly”. Furthermore, as Farah points out, government COVID-19 policies in Malaysia “completely disregards the basic rights for [LBQ persons], as shelters for the homeless are not appropriate spaces for trans folk. Regardless of your gender identity, you’ll be assigned to whatever your sex at birth was.” Such systemic barriers prevent LBQ persons from receiving aid in times of crisis.

2. Intensified Risk of Conflicts and Domestic Violence

Violation against LBQ persons is a persistent yet largely invisible phenomenon as it is frequently perpetuated in the “private” sphere by the people closest to them — family members and intimate partners.30 LBQ persons are particularly vulnerable
due to patriarchy, gender inequalities and power relations within families and wider society. Some family members believe that LBQ persons are morally reprehensible or ill, and attempt to “punish” or “correct” their perceived non-conformity towards social norms and gender stereotypes. The more non-normative their presentation, the greater likelihood of violence, especially for those who are young and financially dependent on their families.\(^{31}\)

During humanitarian crises, the rate of sexual and gender-based violence increases,\(^{32}\) and LBQ persons are at increased risk because of their intersecting identities. Several interviewees experienced violence and discrimination at home before the pandemic, and being locked down at home intensified conflict. Movement restrictions force LBQ persons to be stuck in homes with unaccepting families, isolated from the people and resources that can support them, thus escalating the risk of domestic violence and entrapment.

**Forced cohabitation with hostile family members**

Almost half of LBQ persons interviewed reported living in hostile situations: they were experiencing increased conflicts or violence with family members or intimate partners as a result of COVID-19 containment measures. Documented acts of violence include beatings, forced confinement, deprivation and isolation, sexual violence, and psychological violence such as verbal abuse, harassment, and threats of harm or being disowned.

“The worst part is being stuck at home with my family, there’s a lack of privacy. It’s a bit distressing as I’m constantly in conflict with my mother about sexuality and gender everyday. Especially when she says that lesbians are ‘abnormal’. She called me and my feelings ‘abnormal’, and said that only autistics would have same-sex relationships because they are ‘abnormal’,’” Mel from Singapore stated.

Trans and gender non-conforming persons are often forced to come out to their families while transitioning, and have to grapple with abuse, on top of existing struggles with their identity. Danny, a 21-year-old trans man from the Philippines, described his “rocky relationship” with his family who is unaccepting of his gender identity: “I’ve had to come out to my parents because I began taking testosterone after the pandemic started, and it was becoming increasingly difficult to hide its effects on me. Before I did, there was a lot of tension. Now it’s eased up a bit more, and I can breathe, but because I

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"The pandemic simply added more to what we had been facing in daily life; discrimination and violence is normal for many of us. Some families, like mine, don’t say much whenever my brother laid his hands on me, they think that he has the responsibility to fix me."

Agy, a 27-year-old bisexual cis woman from Timor Leste, felt helpless and entrapped by her abusive family: “I’m used to people’s taunts, at home, in the community. Everywhere I go, people have something to say about how I walk, my hairstyle, my tattoos or my clothes. During this crisis, my family had insisted that I change my lifestyle. It was difficult to argue with them when you depend on them, so I just tolerated it. It really made me stressed and lonely. I had to constantly face my brothers and they made [me feel] small and useless. I try not to annoy them. Since staying at home, I tried my best to help and take care of household chores so they don’t pick [fights] with me or hit me. The pandemic simply added more to what we had been facing in daily life; discrimination and violence is normal for many of us. Some families, like mine, don’t say much whenever my brother laid his hands on me, they think that he has the responsibility to fix me.”

Increase in conflicts or risk of violence between intimate partners

Nine LBQ persons disclosed heightened conflicts and more arguments with their intimate partners. “Coupled lesbians are often facing difficulties such as breakups, fights, some even hit each other, because of economic stress and staying at home too much,” Ina from Indonesia explained.

Gender roles and stereotypes can cause conflict in LBQ relationships, potentially devolving into intimate partner violence. Vu Thi Hanh Mo explained: “I see the oppression of heteronormativity on LBQ people. The concept of husband-wife is imposed on them.” Heteronormative dynamics in LBQ relationships create gendered expectations: one partner, sometimes the more masculine partner, is expected to financially provide for the other; and the other, sometimes more feminine, partner is expected to perform more emotional and sexual labour.33 As Tharvy, a cisgender lesbian from Cambodia, stated,

33 Sayoni. (2018)
One evening in March 2020, her father was furious at Stella for bringing her girlfriend home, although movement restrictions had not yet been implemented. Although he claimed to be angry because of the possibility of virus transmission, he was unconcerned when her brother’s girlfriend visited. His girlfriend was welcomed as she was seen as "part of the family", while Stella’s girlfriend was not. He "went into a fit" and was so angry that he pounded and kicked at Stella’s bedroom door as he shouted, "you come out now. I want to box (beat) you".

"At some point, the door fell off the hinges, and I was squeezed between the wall and the door, fighting for dear life. I had to push it back onto him," Stella recounted. The commotion eventually woke her brother up, and he managed to restrain their father. "After that happened, I was in so much shock. In my childhood, I have a history of family violence. This time, all the existing tensions that my dad had with me just sort of amplified and went into overdrive."
"Coupled lesbians are often facing difficulties such as breakups, fights, some even hit each other, because of economic stress and staying at home too much."

Familial pressure and societal stigma may cause pressure, excessive strife, and anxiety within LBQ relationships, leading to hostility and conflicts between partners. For example, Anju, a non-binary queer person, was in a long-distance relationship with their ex-girlfriend who was living the United States. Although Anju wanted her to move back to Malaysia, their ex decided to remain in the States because “she’s not very straight-passing, and she felt more at home there”. Living in Malaysia was not an option for their ex-girlfriend as she could not tolerate the stigma and discrimination, so “she chose a place that was safe for her queerness”. Tensions escalated and the pair eventually broke up during the pandemic.

Several other LBQ persons living apart from their partners also experienced added stress and conflicts caused by movement restrictions. Sirakorn, a tom from Thailand, shared that the 14-day quarantine rule prevented them from travelling across provinces to visit their girlfriend: “[I] cannot be on leave for 14 days, so at that time, we did not meet each other for more than 3 months. Because we were away from each other for a long time, we clashed and had problems with jealousy and trust. We argued and stopped dating for 2 weeks during that time.”

Rosa, a bisexual cisgender woman from Timor Leste, also recounted similar struggles: “During the state emergency period, I didn’t meet my partner who..."
lives with her parents. We used to talk a lot on the phone, but sometimes I didn't have money to buy phone credit and sometimes wasn't able to call [for days]. This created a lot of tension between us, and we broke up many times. She also started doubting me [and thought] that I am dating someone else. Presently, we are not on talking terms. I feel tired of explaining and not being trusted.”

Disputes over jealousy and insecurity between same-sex partners can escalate into abuse, as identified in OutRight Action International’s 2014 report. Lesbian participants in their research mainly attributed intimate partner violence to the perpetrator’s jealousy and possessiveness, which was magnified by social isolation and lack of support from family, friends, and other support networks. Reported acts of intimate partner violence include physical and sexual violence, as well as emotional violence (e.g. isolation, verbal abuse, threats of harm, or publicly outing their sexual orientation and gender identity), which was the most prevalent. 35 Thus, as social isolation intensified significantly during COVID-19 lockdowns, LBQ persons in abusive relationships became especially vulnerable.

Intersectional identities, such as being part of a minority racial group, having a disability, or having uncertain immigration status, increases the risk of intimate partner violence. One interviewee recounted a case of intimate partner violence in her country: a lesbian refugee broke up with her ex-partner after she became violent and their fights worsened during the pandemic. In retaliation, her ex outed her to the authorities and informed them that she possessed drugs at home, which resulted in job loss. She now risks being deported to her home country, where she faces persecution.

**Barriers to reporting and help-seeking**

Reporting rates for violence against LBQ persons are often low because of their specific needs and challenges. Stigma associated with being LBQ and the fear of being outed; societal culture of victim-blaming and shame; lack of awareness of what constitutes abuse and resources available; fear of re-traumatisation through the reporting process; lack of confidence that state institutions will protect them; or lack of sensitivity training of social services pose as significant barriers to seeking help. Survivors often believe that reporting will not help improve their situations. 36

LBQ persons may feel even more isolated and alone in their struggles if they have fractured relationships with friends or family due to their sexual orientation, gender identity and/or expression. Such isolation leads to victims tolerating violence and discrimination for longer periods. Heteronormative gender roles or internalised social stigma condition LBQ persons to accept abuse; this is especially true for transmasculine or masculine-presenting persons, as they are often perceived to be stronger and expected to endure the abuse.

“I see an almost self-abuse, lowering their standards in terms of how their family will treat them, the

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36 Sayoni. (2018)
community will treat them, their partners will treat them, most especially when they are dating a femme. I’ve been seeing a lot of stories of emotional abuse, from parents, partners, and even the community. The common trend is that they just accept it and they seem to always avoid conversations about that. When I ask them, they will say, “Well, I have to settle for this kind of relationship or set-up because there is something wrong with me – because I'm ‘just this’. I’m a lesbian, I’m a trans man, I can’t give what guys can give, or I can’t give what my brother or sister can give to my parents.” “That’s just from my perspective with my conversations with my butch friends,” Rochelle, a bisexual cisgender woman from the Philippines, explained.

Zhenzhen from Indonesia and Farah from Malaysia stated that many lesbians still view their own sexual orientation negatively. “There are still a lot of lesbians who consider that being a lesbian is a sin, and they deserve to be dumped by [their families], even though they still do what they do but they have this dilemma in their hearts,” Zhenzhen explained. Such internalised homophobia conditions LBQ persons to normalise discrimination, withstand abuse, and to not see violence as a crime, despite the long-term physical and psychological impacts.

Many fear reporting violence to law enforcement because it may invite more mistreatment – they risk being humiliated, discriminated, rejected, or even criminalised for being LBQ. Adam from Timor Leste shared that his transmasculine friend was sexually assaulted and got pregnant during the pandemic. However, he was reluctant to report or seek help. “He knew that others would not believe him and may think he sold his body in order to survive, as many LGBTQI people here survive through sex work”, he described.

Given the general lack of understanding of LBQ persons, first responders like social workers or the police may not be adequately trained to address reports of violence. Irish, a masculine-presenting lesbian from the Philippines, expressed a critical need for training in barangays37 on how to respond and protect LBQ persons from gender-based violence. “Right now, if you go to the barangay and tell them you were violated by your same-sex partner, they will look at you with derision, you will be discriminated, and you will be described in a derogatory manner,” she explained.

37 A Tagalog term for a village, district or ward, used to refer to an administrative division in the Philippines.
Farah from Malaysia highlighted the significant barriers LBQ persons face when reporting violence and seeking help.

"There’s a lack of not just reporting to authorities, I mean even telling friends or people close to you. From my experience with all the cases I’ve encountered through [women’s rights organisations] hotlines, it’s always been domestic violence between straight couples. If I’m a lesbian facing intimate partner violence and if I’m not in activism, for example, I wouldn’t know if I could call a women’s helpline. Because sometimes the way we present the organisation can be seen like it only caters to domestic violence between family members, between straight couples. I definitely don’t think I could go to the authorities because then, they would know who I am. It would get even worse because they could charge me for being a lesbian, and my family would know. And there’s no way I could tell my friends if they’re straight and not accepting of me. It’s a very complex and delicate situation," she said.
Stella from Singapore called the police when her father violently banged on her door, threatening her safety. However, they did not provide adequate support or handle the situation sensitively. The police took her statement, and told her that if she wanted to file a Personal Protection Order (PPO) against her father, it would take a longer time due to COVID-19 measures. They also engaged in victim-blaming by framing the situation as Stella’s fault, and advised her to stop hosting her girlfriend in order to appease her father. Stella feared for her safety, and decided to seek refuge at a friend’s house for the night. She asked the officers to stay with her while she packed her belongings, but they said they had other things to attend to, asking her to call them if anything happened again.

“The police are supposed to protect us,” Stella stated, but she felt dismissed, vulnerable and traumatised by their actions. “I didn’t feel acknowledged or validated. The thing is – they asked me if I had any wounds. But I couldn’t show that I had any wounds that were inflicted onto me by my dad. Only if I had those wounds and stuff, I would have been taken more seriously. But he destroyed the whole door, doesn’t it count as intimidation? He actually said he wanted to hit me.” The follow-up process was another challenge: Stella wanted a copy of the police statement in case she decided to file for a PPO. However, the process was tedious and complicated. She was made to recount the incident again — at risk of retraumatisation — to receive a copy.

Stella believes that the criminalisation of homosexuality in Singapore contributes to the lack of sensitivity: “I think in Singapore, with Section 377A, I don’t have faith that the police will know what to do or be affirming. Even if they do see violence against queer individuals, I don’t know if they will know how to handle it. It is still taboo to them. I don’t feel that they would educate the police force to know how to deal with these things since homosexuality is illegal in the eyes of the law.”

LBQ persons have always struggled with fewer avenues for recourse and grappled with hostile behaviour from first responders. This pandemic has left even more victims without assistance, as intervention and support providers (i.e. counselling centres, helplines, and shelters) are forced to shut or limit their services. “There are a lot of reports of domestic violence, sexual harassment, and dating violence submitted to us, but we cannot follow-up [with these cases] because the online reporting system is hard [to navigate],” Ina from Indonesia added.

3. Inequalities in Healthcare Access, Quality, and Affordability

COVID-19 has overwhelmed healthcare systems across Southeast Asia, especially in poor and developing areas that lack adequate health infrastructure. Systemic barriers to healthcare experienced by LBQ persons, including a lack of financial assistance and discrimination by service providers, have been magnified by the pandemic.
a. Unable to access basic necessities and services

As previously discussed, poor or unemployed LBQ persons are at higher risk of virus exposure due to their informal work. They are also less able to afford basic medical necessities and care due to low wages.

Several LBQ persons, especially in rural or developing areas, expressed grave concerns over healthcare costs. For instance, Sokea from Cambodia — unemployed due to a pre-existing illness — said that protective gear like face masks and hand sanitisers were becoming too expensive; she resorts to washing and reusing disposable masks, which puts her health at further risk.

“Being poor makes us more fearful of this infection. We cannot afford to be sick, not with COVID-19, not with anything else. We have no savings to spend on our health. We don’t use masks anymore. We know we need it for prevention, but we don’t have much money to keep buying soap and masks,” Jose from Timor Leste stated.

Furzann from Malaysia wanted to take a COVID-19 swab test after finding out that she lived in the same building as someone who tested positive. She did not qualify for one through the public health system and could not afford a private test, eventually deciding to forgo testing completely. “The cheapest test at the time was $350 ($85 USD), which is a ridiculous amount. I was on a pay cut, so a private test was out of the question,” she added.

b. Poor treatment and discrimination in services

In addition to financial barriers, the fear of unequal or poor treatment by healthcare providers delays or deters LBQ persons from seeking care. Leaphy works in Rainbow Community Kampuchea (RoCK), an LGBTQI organisation in Cambodia providing emergency food assistance to an elderly lesbian couple. She said the pair fell ill but chose to remain at home, as they lacked money for medical assistance. Apart from financial concerns, the couple believed that they would not be properly taken care of.

Sirakorn, a tom from Thailand, works in a gas station and comes into frequent contact with others. They fell ill with a sore throat and fever, and were worried about contracting COVID-19. They went to a public hospital for a swab test, which was paid for by themselves ($100 USD) as tests were not covered by their social security or workplace insurance. Sirakorn says they were treated poorly and unequally: “The service is different from [cisgender heterosexual] men and women. The hospital staff spoke to me

"Being poor makes us more fearful of this infection. We cannot afford to be sick, not with COVID-19, not with anything else. We have no savings to spend on our health. We don’t use masks anymore. We know we need it for prevention, but we don’t have much money to keep buying soap and masks."
Nuy, a bisexual genderfluid student in Indonesia, suspects they were infected with COVID-19. But the fear of discrimination deterred them from receiving vital medical attention. Nuy had met their partner in person, before he and his family tested positive for the virus.

A few days later, Nuy started exhibiting COVID-19 symptoms such as cough, sore throat, and breathing difficulties. Nuy suspects they went on to infect their family members. "But I didn’t tell my family that I might have gotten the virus from my partner, I could die if I tell them. I took care of them, but I didn’t tell them the probability of being infected by the virus," they stated. They feared that disclosing their sexual orientation and how they contracted the virus (i.e. meeting their partner) would expose them to abuse.
[differently]. They served me slower than others. I could feel their eyes when they looked at me. They let people overtake me in the queue.”

Naddy, a trans man from Singapore, also spoke of discrimination towards himself and others. “During COVID period, I went to the hospital for a check-up and to get hormone shots. The nurses looked at me differently and weirdly. Recently, a friend who is a trans man went to hospital to get a GID (gender identity disorder) diagnosis, but the doctor still addressed him as a woman in his records.”

Due to a lack of anti-discrimination legislation explicitly prohibiting discrimination based on sexual orientation, gender identity and expression — and the absence of administrative policies in healthcare institutions that prescribe the equal treatment of LBQ persons — healthcare providers are left to their biases. LBQ are often subject to differential and discriminatory treatment, which can seriously jeopardise their health and lives, without room for legal recourse.

In some cases, LBQ persons are even refused medical attention. Irish from the Philippines knew of a lesbian who suffered a stroke and died, as a result of discrimination and refusal of service. “They had difficulty looking for a hospital and she died. She was cremated and they didn’t even get to see her again. She died because no hospital would receive her. It was at the height of the lockdowns – I’m not sure if it’s because she’s a lesbian or what, and it seems like it was just general government disregard for non-refusal policies, but I think it also factored in that she was a lesbian. People think that nobody cares if you die a lesbian and you’re single. They think that you’re leaving nobody [behind], that your life has no value at all, you don’t have a family. That’s what I think some healthcare providers think,” she explained.

c. Lack of access to hormone replacement therapy (HRT) and other gender affirmation treatment

The pandemic considerably amplifies pre-existing challenges faced by transgender individuals in accessing life-saving healthcare. Treatment of gender dysphoria through social and/or medical transition is medically necessary for some transgender persons. The lack of access to HRT and other gender-affirming treatments causes significant distress, increasing the risks of suicide, depression and other mental health concerns.

Transgender individuals in Southeast Asia do not have any access to state or non-state (e.g. private or workplace health insurance) subsidies for HRT and sex reassignment surgery (SRS). Transitioning is a costly process with serious health risks for those who turn to uncertified sources for medication or medical advice. The supervision of healthcare professionals is vital: undergoing HRT independently carries health risks, such as increased rates of osteopenia among transgender women who are on anti-androgen therapy alone, without the concurrent use of estrogen.38 In countries where gender marker change is not legalised, or where healthcare systems do not provide adequate treatment, transgender

An elderly lesbian couple, Man and Phal, who were recipients of RoCK’s relief aid program in Pursat Province, Cambodia. Photo courtesy of RoCK.

"During the state emergency period, I met with a bike accident to save an old lady on the road. With severe pain at my shoulder, I went to the hospital. I got an x-ray, but I was asked to come back after two days to begin my treatment. They didn’t care that I was in unbearable pain. I believe they had discriminated against me due to being who I am [a trans man]. It was only after Arcoiris Timor Leste’s [an LBT organisation] director went to personally talk to doctors that they attended to me. The healthcare in Timor Leste is free, but treatment is not equal and fair to all," Filipe recounted.
persons often have no choice but to undergo HRT independently.

Kho Thu from Myanmar stated, “As a trans man who requires regular hormone medications, I’ve been buying them from my friend who is a supplier. I don’t know where he got them but lately it is getting harder to get access to them, since they are illegal. My hormone medications need to be done with a syringe, so my friend does it most of the time. I’m aware that it might be dangerous since it is not done professionally but I have no other choice. Even though some clinics may do the shots for LBQ persons, most of the doctors tend to be hostile towards us.”

“It was already difficult before the pandemic to access trans healthcare. There aren’t many doctors here that will prescribe hormones for trans people, because they just “don’t believe in transgenderism,”” Danny from the Philippines stated.

Many interviewees highlighted concerns over the increased difficulties in accessing HRT for themselves or others in their communities. Due to disruptions to non-COVID-19 healthcare, delays in import and delivery services, as well as financial difficulties, many transgender individuals have had to reach out to friends for medication or stop HRT entirely, causing serious distress.

“In hormone resources in Vietnam are mostly imported from overseas. But during the pandemic, imports were restricted, [and] hormones became rare and expensive. Many transgender people can’t pay for that or can’t find the drug [so] they had to stop the therapy,” Trinh noted. Further, Thanh Tran added that hormone supplies are less readily available in rural areas or smaller cities like Can Tho, where she lives, as compared to major cities.

### 4. Deepening Social Isolation and Mental Health Concerns

Research has established that stigma and discrimination experienced by LBQ persons are associated with higher levels of psychological distress, suicidal ideation, and other mental health concerns including anxiety disorders, chronic depression, and alcohol or drug dependency issues. Their self-esteem and psychological well-being can be negatively impacted when violence and discrimination are experienced in tandem with limited coping resources, social isolation, or multiple minority identities.

LBQ persons often experience psychological distress after coming out or being outed to their families, who shame or deny their identities. Some face difficulties with self-acceptance, struggle with self-blame and anger, and emotionally or physically withdraw from friends and family in order to cope. This furthers social isolation, weakening relationships and support systems.

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41 Sayoni. (2018)
Arra from Malaysia stated, "as a trans person, I was lucky enough because I managed to buy a year’s worth before the Movement Control Order happened.

But I see a lot of friends who didn’t. They were panicking, and I can imagine if I was in that situation, and suddenly not being able to find medication – it is very, very terrifying. That was really scary. In terms of access to health as a trans woman before the pandemic, it was already very difficult. Healthcare for trans people has to be improved outside the pandemic, before we even talk about a situation where it’s an emergency like this pandemic."
Most interviewees said their mental health was adversely affected by the pandemic; they experienced one or more of the following conditions: anxiety, depression, feelings of uncertainty and isolation, fatigue, insomnia, unhealthy coping-mechanisms (e.g. increased stress-eating, smoking, and drinking), difficulties concentrating, recurring negative thought patterns, and suicidal ideation.

“Most LBQ people are already pretty isolated before the pandemic, and feel disconnected from their communities and identity here,” Charlie, a cisgender lesbian from Brunei stated. Chosen families and social networks, including friends, partners, and volunteers from LGBTQI organisations, are often an immediate source of comfort and assistance for LBQ persons who have fractured relationships with their families and wider communities. Under movement restrictions, however, they are no longer able to physically connect with these support networks. Further, they cannot seek refuge in physical safe spaces, such as queer-friendly cafes, art spaces, community centres, bars and clubs.

Lockdowns were especially challenging for interviewees living with hostile families, who are unable to be out, resulting in increased risk of violence, anxiety, depression, feelings of hopelessness, suicidal ideation and self-destructive behaviour.

Several LBQ persons found it incredibly alienating and stressful to conceal their identities, such as Farah from Malaysia who had to be “as straight as possible at home”. She is not out to her family as she fears being disowned. “My brothers can absolutely be themselves, but when it comes to me, there’s so many things that I can’t do and can’t say just because of who I am and my sexual orientation,” Farah explained. She is unable to talk to her partner in front of her parents or “express [her] queerness or be with queer friends”, which takes a huge toll on her mental health.

Economic stress also exacerbated mental health concerns. “Many [LBQ] people even thought about ending their lives because they didn’t know what else to do during the pandemic to make ends meet,” Chioo from Indonesia stated. Kha Mon Htaw from Myanmar felt “desperate” and depressed from being unemployed, and was unable to return to his family without money. He said: “I think that I cannot survive this COVID-19 crisis, and have been suicidal for a long time. I’ve been [social distancing] and living in solitude for three weeks and it is really lonely. I often contact my friends and family through the internet, and search for free online classes to distract myself from self-destructive thoughts.”
Lack of affirming mental healthcare

Despite increasing challenges, many interviewees did not seek mental healthcare because of stigma against mental illnesses, the lack of state and non-state LGBTQI-friendly providers, fear of discrimination or involuntary outing. Due to the lack of sensitivity training for healthcare professionals, LBQ persons often face prejudiced and discriminatory behaviour, which adds to existing psychological distress and trauma.

“Many therapists don’t have awareness about the LGBT community. Many LBQ people shared with me that their therapists said being gay can be “cured”, and this is a disease,” Vu Thi Hanh Mo from Vietnam shared. The possibility of being misunderstood or discriminated against by mental healthcare providers deter many LBQ persons from seeking necessary treatment.

Interviewees were also concerned that healthcare professionals would not be able to address issues relating to their LBQ identity or relationship due to a lack of understanding. Anju said that many friends sought treatment without disclosing their identities. Thus, they did not receive adequate mental healthcare, as their sexual orientation or gender identity was related to the issues they were seeking support for.

“They would hide information, so [the doctors] wouldn’t know everything, and yet, they would still be given certain medications. But it’s not the actual problem. I feel like they’re fixing the wrong thing. They should talk about queerness, and how maybe that person is struggling with emotional availability in a queer relationship. They don’t talk about their queerness, [even though] that’s part of it. They end up taking a lot of meds and the problem doesn’t get better,” Anju explained.

LBQ persons face systemic barriers to psychological health, preventing them from receiving adequate support even when they seek it. They often choose not to disclose their sexuality or gender identity due to the environment constructed by healthcare professionals and/or their own perception of stigmas associated with their minority identities.

LBQ persons also face financial barriers to life-saving mental healthcare. State and non-state providers are
Anju’s depression worsened after they lost their job and was living far away from family. As they identify as non-binary, they were reluctant to seek mental healthcare in Malaysia; they were afraid that healthcare providers would see their queerness as the cause of their mental health issues.

"I have this fear that they would prescribe medication for being queer, or tell me that that’s the problem. I think it’s due to my own fear, because we grew up in this heterosexual world. I always think of the worst possibilities so that is an extra layer of anxiety whenever I go to a doctor," they explained.
seldom trained to address LBQ-specific issues, and those who are affirming or specialise in LGBTQI issues are often private healthcare providers that cost significantly more. Nina, a non-binary bisexual person from the Philippines, was seeing a LGBTQI-affirming counsellor at the beginning of quarantine. However, they had to stop because they lost their job. Similarly, Stella wanted counselling after experiencing domestic violence by her father; however she cannot afford it as she now channels a significant portion of her income to renting a room.

As illustrated, LBQ persons experience disproportionate barriers to affirming and adequate mental healthcare. This results in further isolation and a greater risk of mental health concerns going unresolved, to the detriment of their short-term and long-term well-being.

5. Stigmatisation, Discrimination, and Hate Speech

Scapegoating and stigma

LGBTQI people have historically been cast as vectors of diseases and blamed for disasters, both manmade and natural. For instance, in 2018, Malaysian religious leaders and lawmakers said that the earthquake and tsunami, which occurred in Palu, Central Sulawesi, Indonesia and killed thousands, was “punishment” from God for the activities of LGBTQI people. Such scapegoating and hate speech — explicitly or implicitly — incites and justifies violence against LGBTQI people, including LBQ persons.

Since the COVID-19 outbreak, there has been an increase in homophobic and transphobic scapegoating by prominent political or religious leaders. These false claims and misinformation legitimise violence and discrimination against LBQ persons, compounding existing threats to their rights and safety. “Some people believe that COVID-19 was caused and spread by LGBTQI individuals. I feel very unsafe where I am,” said Danny from the Philippines. Likewise, Orphelia from Brunei said that hate speech on social media blaming LGBTQI people “[for] the virus [coming] down to Earth” made her extremely fearful, triggering her depression and anxiety.

Stigmatisation and discriminatory attitudes, which were already rampant among the general public, further heightens the social and economic exclusion of LBQ persons during crises. Bilkaf, a gender non-conforming lesbian in Indonesia, and Nang Nay Chi Htet Htet Htun, a bisexual cis woman in Myanmar, both said that LBQ persons in — often conservative — rural areas face greater stigma, and lack access to LBQ-affirming support services.

Criminalisation and gender stereotypes

Five out of 11 countries in Southeast Asia (Brunei, Indonesia, Malaysia, Myanmar, and Singapore) continue to retain laws that criminalise LGBTQI persons. Section 377 of the penal codes in Brunei, Malaysia, Myanmar and Singapore are archaic laws inherited from British colonial rule that criminalise same-sex sexual activity. Syariah (Islamic) laws in Brunei, Malaysia, and parts of Indonesia (e.g. Aceh and South Sumatra) criminalises Muslims for homosexuality, and trans or gender non-conforming people for “impersonating” the opposite sex (e.g. cross-dressing). Several interviewees, such as Ami,
cisgender lesbian from Brunei, attributed the stigma and discrimination they experience to these laws.

Stella, who experienced family violence during the pandemic, stated that due to Section 377A in Singapore, she did not trust that the police and mainstream social services would know how to support LBQ victims of violence without discrimination. Without sensitivity and adequate support from first responders, LBQ persons are often left to resolve matters on their own, leading to further isolation and negatively impacting their willingness to seek further assistance. Perpetrators may also be emboldened, and continue abusing them.

Whether or not these laws are actively enforced, criminalisation institutionalises a legislative and administrative framework of discrimination, fostering a climate of state-sanctioned homophobia that legitimises violence and discrimination (by both state and non-state actors). The retention of such laws violates the human rights of LBQ persons, and enables further rights violations through a culture of impunity.44

“All these laws in place strips my identity away just like that, especially the religious laws that we have – it directly affects LBQ people. All these policies put in place by the religious authorities really affects me because whenever I go out into public spaces, there’s always this worry at the back of my head. I have to self-censor. If I outwardly express myself or be affectionate to my partner, it could make me vulnerable to prosecution,” Farah from Malaysia said.

In addition, patriarchal attitudes and gender stereotypes play a significant role in the discrimination of LBQ persons. As was the case for Stella from Singapore, the people closest to them — family members — are the most frequent enforcers of gendered social norms. She said her father singles her out and treats her differently from her brothers. She is also expected to conform to behaviours and expressions based on gender roles, such as doing household chores, and maintaining a stereotypical feminine appearance. LBQ persons who transgress gender norms are shamed and punished, often in the form of physical or psychological violence.

Gender bias and patriarchal beliefs are deeply entrenched in many Southeast Asian cultures, and serve to reinforce power imbalances at home and in society. These patriarchal beliefs dictate adherence to gender roles, in which women are expected to be submissive and subordinate to male counterparts. LBQ persons enjoy less autonomy and experience greater scrutiny, making it difficult for them to form independent relationships free of their male family members’ control. This has intensified during the pandemic because of forced cohabitation and movement restrictions.

**Harassment and discrimination in public spaces**

Beyond the family home, gender stereotypes also contribute to the stigma and discrimination faced by LBQ persons in public spaces, especially if they

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Public spaces are psychologically and physically unsafe for LBQ persons in Southeast Asia, due to fears of staring, harassment, name-calling, or physical violence.

Transgress social norms in terms of appearance of behaviour. Sam, a queer cis woman, said she feels unsafe in male-dominated public spaces in Malaysia. “Anywhere that has a lot of men, I just avoid in general, especially if I’m not dressed “modestly”, which is most of the time. I avoid certain spaces, as a queer woman, just generally as a woman in Malaysia,” she explained.

Social stigma and discrimination place significant constraints on the everyday lives of LBQ persons. Public spaces are psychologically and physically unsafe for LBQ persons in Southeast Asia, due to fears of staring, harassment, name-calling, or physical violence. For instance, Farah from Malaysia stated that she fears being shamed and harassed in public spaces: “I get really restless. [I have] this fear of how people would perceive me for how I dress, for example, and how people would perceive me as a very bad Muslim.”

Discrimination and threats to safety in public spaces vary based on where LBQ persons are, and the extent to which their non-normative identities are visible. For trans and gender non-conforming people, these vulnerabilities have been heightened, due to COVID-19 containment measures that necessitate increased identity verifications. Photographs or gender markers in identification documents that do not match how LBQ persons present puts them at high risk of harassment, discrimination, or violence.

Danny, a trans man from the Philippines, recounted, “Now that there are border checkpoints everywhere, I need to show my ID. I’ve been harassed at checkpoints, both on the street and in other places such as malls, because my ID picture and gender markers do not match my gender expression. On a few occasions, I’ve been refused entry into certain places on that basis.”

6. Infringements of Civil and Political Rights

The scale and severity of the pandemic has prompted governments in Southeast Asia to take urgent and unprecedented measures to contain the virus. While restrictions on certain rights — such as limiting freedom of movement by imposing quarantine orders or lockdowns — are important and justified for the sake of public health and safety, other measures have led to human rights violations, further curtailing civil and political rights in Southeast Asia.

LBQ persons and activists in the region live and organise in hostile environments, fraught with threats to their rights and safety. Prior to the pandemic, Southeast Asia was witnessing a rise in authoritarianism, nationalism, and populism in politics, as well as the erosion of civil and political liberties. When the pandemic struck, many countries employed militarised approaches to managing the crisis; they adopted repressive state of emergency legislations, contract tracing through aggressive surveillance, and excessive deployment of armed forces to enforce movement restrictions. These draconian measures pose significant threats.

to fundamental human rights, including freedom of expression, assembly, and association, and freedom from arbitrary arrest and detention, with disproportionate risks for marginalised communities, including LBQ persons.

**Heightened censorship and surveillance**

Several states in Southeast Asia, such as Cambodia, Laos, Thailand, and the Philippines, declared states of emergency, giving governments sweeping powers to pass new laws and restrict human rights. While Indonesia, Malaysia, and Singapore did not invoke state emergency laws, they utilised existing legislation and/or introduced specific, non-emergency legislation.46


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Even before the global health crisis, Southeast Asian governments often used strict censorship laws to stifle political dissent, and harass journalists and human rights activists. Under the pretext of safeguarding public health, most countries have increased control over the press and social media to prevent the spread of supposed ‘fake news’, as well as intensified surveillance and monitoring of citizens. To silence critical voices, the governments of Cambodia, Indonesia, Laos, Myanmar, Thailand, Singapore, Vietnam and the Philippines, have arrested journalists, political opponents and members of civil society. These individuals are accused of spreading online falsehoods and ‘fake news’.47, 48, 49, 50 Censorship laws allow politicians to be the arbiters of truth by dictating public opinion and censoring free speech, which creates a climate of fear; they also put human rights defenders, including LBQ activists, at greater risk of arbitrary arrest.

“The government [in the Philippines] has started cracking down on activists. They’ve committed many injustices against fellow activists – some are even killed. It’s terrifying. The political climate right now is a lot more hostile towards any type of dissent. Activists have largely been silenced, and with the passing of the anti-terrorism bill, more have been scared into silence,” Danny shared.

LGBTQI and women’s rights activists have been central to the pro-democracy movement in Thailand,51 which has drawn tens of thousands to peaceful protests since February 2020. These activists have been at the frontline of protests calling for democracy, gender and marriage equality, and the decriminalisation of abortion and sex work.52

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Following mass protests, the Thai government declared a “severe” state of emergency between 15 and 22 October 2020, banning gatherings of more than four people, and online posts deemed as threats to national security. This resulted in mass arrests and gave authorities the right to seize “electronic communications equipment, data, and weapons


48 FORUM-ASIA. (2020).


Pride protest led by LGBTQI and women’s rights organisations in Bangkok, Thailand on 7 November 2020 calling for democracy, marriage and gender equality.

Photo courtesy of iLaw.
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"The government has made it mandatory for all individuals to check in and out of public places using the TraceTogether application, raising fears and suspicion of governmental surveillance beyond the pandemic.

**Abuse of state and police powers**

Southeast Asian governments have responded to the public health crisis with militarisation, including the consolidation of political power and the excessive use of armed forces. The implementation of movement restrictions has been left to military and police forces, which employ heavy-handed approaches including mass arrests, beatings, and even shootings.

Human rights and civil liberties, which were already severely restricted, have further deteriorated during the pandemic. The COVID-19 emergency decree in Thailand was repeatedly extended, giving Thai law enforcement broad powers to arrest and detain protestors and journalists without charge in informal detention sites (i.e. military camps). Officials who suspected to cause the emergency situation". In addition, internet providers were ordered to block messaging app Telegram, which was then used by protestors to coordinate their efforts.

Authoritarian surveillance and digital technologies developed to track COVID-19 carriers have also led to fears of state exploitation, increasing privacy risks for LBQ persons. Governments in Indonesia, Malaysia, Singapore, Thailand, Vietnam and the Philippines have adopted contact-tracing applications to surveil people’s movements. Some of these applications have access to data storage and media files, such as contacts and SMS texts. This raises concerns around personal privacy and disproportionate surveillance, especially for LBQ persons and activists, some of whom are at risk of state prosecution.

Furthermore, some contact-tracing apps do not have specific privacy notice or statements; personal data may be misused without adequate oversight or in the event of a data breach. For instance, Thailand’s MorChana application has access to the camera, and device and applications’ history, with limited information for users on what type of data is collected.

As Naddy said, “LBQ people who are not out may be scared of TraceTogether because they fear the government tracking them.” The Singapore government has made it mandatory for all individuals to check in and out of public places using the TraceTogether application, raising fears and suspicion of governmental surveillance beyond the pandemic.

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56 FORUM-ASIA. (2020)
carry out duties under the decree are granted legal immunity. On 8 November, Thai police fired water cannons and used excessive force to violently disperse peaceful protests demanding monarchy reform.

In the Philippines, President Rodrigo Duterte threatened violators of lockdown measures with police shootings. There have been reports of local law enforcement abusing their unfettered power to carry out homophobic attacks on LGBTQI persons, under the guise of punishing those who break lockdown curfews. In one instance, three LGBTQI individuals were singled out and detained by a barangay captain and village volunteers; they were forced to perform lewd and humiliating acts as punishment. Such consolidation of unchecked power threatens the human rights of vulnerable communities, including LBQ persons.

Four out of six interviewees from the Philippines raised concerns over the rise in police brutality and extrajudicial killings. “Our President had recently just pardoned the [murderer] of a trans woman. Our politicians constantly call us animals, and many of us are being thrown in jail and getting hurt,” Nina stated. In June 2020, police violently dispersed and arrested at least 20 people at a Pride rally in Manila, where demonstrators were peacefully protesting the Anti-Terrorism Act. As Danny pointed out, “the rights and lives of activists are in jeopardy.”

In July 2020, Malaysia’s Religious Affairs Minister Dr. Zulkifi Mohamad al-Bakri issued a statement...
giving “full licence” to the Federal Territories Islamic Religious Department (JAWI) to arrest and provide religious education to the transgender community so that they “return to the right path”.62

Even though Arra is not Muslim, she highlighted that all transgender persons, and by extension all LGBTQI persons in Malaysia — regardless of religion — are impacted by the minister’s statement, as it legitimises violence against them. Arra believes transgender persons are being used as “smoke and mirrors” or “a distraction” from the fact that the economy is “going backwards and suffering”

“That was very disheartening to hear. [The statement] came at the time when we just came out of strict movement control orders, the economy was just about to recover, and straightaway they thought of dedicating their very limited resources to attack an already marginalised community… They put a negative spotlight on the trans community and LGBT community as a whole [with that statement]. It affects us all, whether we’re Muslim or not, by saying that its illegal and we need to be [transformed]. It means that all of us are in the wrong, and society perceives us negatively and it is justified,” Arra added.

7. Further Constraints on LBQ Organising and Community Support

LBQ communities in Southeast Asia have been largely invisible and overlooked. During the ASEAN Feminist LBQ Conference held in Bangkok on October 2019, activists identified barriers to


"As an LBQ woman, unless there’s an organisation that really voices out our issues and will really focus on what our needs are, we just get relegated to the background, we become invisible to national and local agencies."
Only seven organisations are legally registered, and more than half of the groups surveyed rely exclusively on volunteers. The average budget of these volunteer-run groups is at an estimated USD$1,393.47 per annum.

devastating blows to LBQ groups which provide direct services, psychosocial support, and advocacy for their communities.

“As an LBQ women, unless there’s an organisation that really voices out our issues and will really focus on what our needs are, we just get relegated to the background, we become invisible to national and local agencies,” Irish from Philippines stated, highlighting the need for LBQ-specific organisations and support.

LBQ groups in the region have survived and supported their communities with severely limited resources. Among the 10 countries in this study, our consultants identified a total of 32 groups that work specifically on LBQ issues or with LBQ communities. Consultants were unable to identify any LBQ groups in Brunei, Laos and Cambodia. Only seven organisations are legally registered, and more than half of the groups surveyed rely exclusively on volunteers. The average budget of these volunteer-run groups is at an estimated USD$1,393.47 per annum. The lack of legal registration status impedes their ability to effectively raise funds and apply for grants. These factors significantly reduce their capacity to provide relief aid and support the recovery of LBQ communities through the global health crisis.

Lack of LBQ-specific prioritisation in women’s rights and LGBTQI activism

LBQ persons often find their needs and identities invisibilised within feminist and LGBTQI movements. Women’s rights organisations sometimes consider the promotion of LBQ rights too divisive or controversial. LBQ persons often face sexism and a lack of prioritisation in LGBTQI groups, as they are mostly dominated by more privileged members such as cisgender gay men. Many interviewees described multiple layers of discrimination and exclusion from LGBTQI and women’s communities.

“Even prior to the pandemic, the LBQ community had been excluded from various institutions that focus on minority [groups]. The priority has always been for gay men and transwomen, while lesbians, bisexuals, trans men are left [aside]… There are a lot of [organisations] that are focusing on gay and trans people, but not lesbians. Lesbians are less empowered,” as Zhenzhen observed in Indonesia.

Similarly, Jel Li, the co-founder of Rainbow Six, a volunteer-run organisation led by trans men in Myanmar, pointed out that “the voices of trans men and LBQ persons are not heard, even within the LGBT community. The participation of trans men and LBQ persons in political movements and activism are little compared to gay men and trans women.”

Anju also described how the needs of LBQ people are overlooked by women’s organisations in Malaysia. “It’s full of older women and they are just around that generation that prioritise cisgender women… The energy there isn’t very nice and inviting. It’s so difficult to even just talk about helping the queer community in [those spaces],” they explained.

63 Mama Cash and the Astraea Lesbian Foundation for Justice. (2020)
The lack of LBQ-specific prioritisation has further obscured the needs and vulnerabilities of LBQ persons during the pandemic. For instance, as LBQ persons often live on the margins and are harder to reach, they may not have access to or awareness of the support offered by LGBTI and women's NGOs. As Chioo explained, an LGBTQI organisation in North Sumatra provided community relief aid to 300 LGBTQI individuals. Of those, only an estimated 20 to 30 recipients identified as LBQ, exemplifying how LBQ persons are disproportionately disadvantaged and less likely to access vital community support during the pandemic.

**Concerns about organisational survival and activist well-being**

“It takes time to explain to donors the importance of focusing on the LBT community, because the layers of discrimination are so different. SRHR (sexual and reproductive health and rights) are mostly focused specifically on gay men and trans women. Usually, the funds for LBT issues are spare funds. Also, because the issue is sensitive [in Indonesia], we cannot make a large program. It is difficult to find funds that are truly intended for the LBQ community,” an activist from an Indonesian LBT group stated.

Given how LBQ organisations were already working with limited resources and scarce funding, many interviewees expressed anxieties over the further de-prioritisation of LBQ movement-building and threats to organisational survival. In Indonesia, Hankun pointed out that some LBQ activists working in NGOs have been laid off or had their wages cut, while Chioo shared that an LBQ group which had plans to expand to rural areas is now unable to, due to lack of funds. In Malaysia, Arra and Farah were in the process of establishing new organisations; progress has halted due to increased obstacles in funding their operational costs.

Interviewees expressed their disappointments and concerns over the future. With donor focus shifting to COVID-19 response and immediate relief, they fear it will be at the expense of LBQ advocacy and movement-building which focuses on organisational development, capacity building, research and knowledge production, and other efforts towards long-term systemic change.

Trinh shared her worries over the long-term effects of redirecting funding priorities. She said, “I am concerned about how to empower LBQ activists and engage them more in this movement, when...
Yuri, who leads an LBQ group, expressed concerns about activist burnout amongst her team, on top of individual financial instability:

"My team has lost their passion for work. They were so stressed [from] being unemployed. They all came from outside of Saigon and rented a room to stay. While social distancing, they stayed at home so all their expenses increased. They couldn’t find a job, couldn’t pay for living expenses, so they were really nervous. I need more support and participation from the community. My team has just four members, but there are so many projects we handle and want to build. The problem is we don’t have enough financial support and human resources to run all our projects."
everything has become harder and they have to maintain a living; how to make their voices bigger and [increase] visibility in social movements; and how to build capacity, such as organisation building and lobbying processes. In three years, we will develop “safehouses” into centres… [and] train local activists in centres, and also develop facilities to support [victims of] domestic violence or people with mental [health concerns]. But in the coming years, funds for LBQ communities are going to be scarcer. There won’t be grants anymore from [an international NGO] after 2020. Also, we won’t meet the requirements for funding [from another international organisation] because Vietnam will no longer be in their target group. The priority focus will be economic recovery from the pandemic.”

As more than half of the LBQ groups surveyed rely solely on volunteer support, the economic downturn may push LBQ persons away from activism, because they have to prioritise their own basic needs.

“Maybe the pandemic would cool the fire in the activism, which was already weak before,” Vu Thi Hanh Mo said. She and Thanh Tran shared similar concerns over the livelihood and psychosocial well-being of activists, and sustainability of LBQ movements. “We couldn’t work with each other face to face, so they were losing their fire in activism. Before the pandemic, they had free time to run activist work but now most of their time, they struggle with maintaining their livelihoods. I’m scared that when they come back to work, they won’t be passionate about it anymore,” Thanh Tran explained.

Increased difficulties and new challenges in organising

Several interviewees expressed anguish and frustration over the cancellation or rescheduling of planned activities. “It has changed so much, I was supposed to have a very busy year jumping from one project to the other. We were supposed to go to Cebu in April to jumpstart the Visayas LBQ Network… I haven’t seen my planner in a long time because it just reminds me of how much my life has changed… We had to learn new methods of work to be able to survive this and consolidate the organisation,” Irish from Philippines shared.

In order to adapt, LBQ groups have engaged in alternative modes of organising which are sometimes less effective. LBQ persons identified numerous challenges when working online — Anju from Malaysia lamented the loss of physical connection, citing its importance to community engagement and support. Physical spaces and in-person events have served as safe havens for LBQ people, away from the hostility of their families and wider society. These safe spaces allow LBQ persons to “be themselves” and “feel safer from the world outside”, which is vital to their well-being. Further, participating in LBQ events online requires a safe and private space at home, which is not available to many who live in hostile family environments.

Zhenzhen also had concerns about information overload on social media. She said, “The public awareness efforts by civil society have moved online, which is less effective. There is a lot of information online, and people tend to ignore heavy information, since their days are already heavy enough.” Similarly, Trinh noted that awareness raising and education on LBQ issues have received less attention as a result of the deluge of COVID-19 content.

**COVID-19 has accelerated the adoption of technology in many areas, but it has also widened the digital divide. Rapid digitalisation leaves vulnerable groups behind by replicating existing inequalities and generating new forms of stratification.**
The most pivotal challenge faced by LBQ persons is the unequal access to digital infrastructure and technology, as well as skills and digital literacy. COVID-19 has accelerated the adoption of technology in many areas, but it has also widened the digital divide. Rapid digitalisation leaves vulnerable groups behind by replicating existing inequalities and generating new forms of stratification. For instance, research has shown that women and girls are 25% less likely to know how to leverage digital technology for basic purposes. This gender gap in digital skills is more severe for women who are older, less educated, poor, or living in rural areas and developing countries.

Many interviewees concurred that organising online resulted in difficulties planning and executing programs, which had limited outreach. Kei, an LBQ activist in the Philippines, said, “The main problem is that we cannot do our usual community engagement, especially in urban poor or rural poor areas, with no access to the internet. Online surveys and engagement are limited by poor internet speed or absence of mobile network signals.”

“Unless you have a smartphone, good wi-fi, or you’ve attended community events before, you will know how to [seek] for support. If you live in rural areas, there is no way to contact or reach out,” Trinh from Vietnam stated.

Even when women do have access to the internet and devices, they are less equipped to harness the full potential of digital technologies. A World Wide Web Foundation study of nine cities in developing countries found that 97% of women used social media, but only 48% of them used it to expand their networks; only 21% searched online for critical information related to health, transport, or legal rights.

The digital divide is compounded by issues of poverty and educational access. In Myanmar, Kha Mon Htaw said he was unable to participate in online campaigns and training by LBQ organisations as he was not familiar with technical devices. Ko Thu similarly shared that he was not adept at using online applications. “Since Covid-19, all the activities and movement-building have been halted and changed into online campaigns. I feel like this pandemic has slowed down every progress they have been making, [because] most LBQ people in the community cannot use or access the internet well. It is a big challenge for me and other LBQ people,” he said.

8. Coping Strategies and Needs Expressed

“We need community support as we are already marginalised... That’s why we need to support each other more than ever. That’s the whole point of a village – a village is formed when the government has little to no support,” Mel from Singapore asserted.

LBQ persons and groups have demonstrated resilience and creativity in the face of substantial setbacks brought on by the pandemic. LBQ communities have historically been resourceful and innovative in filling in the gaps left by states, despite the scarce resources and duress they operate under. Interviewees shared with us the programs and strategies they have employed, including emergency food and relief aid, psychosocial and legal support for victims of domestic violence, and mental health support.

64 EQUALS and UNESCO. (2019). I’d blush if I could: Closing Gender Divides in Digital Skills through Education. EQUALS and UNESCO. Retrieved from https://unesdoc.unesco.org/ark:/48223/pf0000367416.pdf

Community resilience and resourcefulness

Despite the challenges of digitalisation, some LBQ activists have found success in online engagement. Leaphy, the Program Team Manager of Rainbow Community Kampuchea (RoCK) in Cambodia, says her organisation has adapted by using technology. Her organisation continues to provide psychosocial support and capacity-building amid the pandemic. She said, “Usually, we conduct workshops with active members to strengthen their capacity. Now we’ve shifted from workshops to phone calls to inform them about our strategy and other works. We [strengthened our] online organising. For example, we created online groups based on their regions to communicate… We provide emotional support through phone calls [and] encouraged members to call each other.”

LBQ organisations have also taken advantage of the internet in other inventive and strategic ways. For example, elections were held in Myanmar and Singapore during the pandemic. Rainbow Six and Sayoni took the opportunity to advocate for LGBTQI inclusion in politics through social media campaigns. Rainbow Six’s campaign included Facebook Live panel discussions and civic engagement training to encourage LGBTQI persons to vote, while Sayoni launched Singapore’s first scorecard on social media documenting politicians’ and parties’ positions on LGBTQI issues in the past decade.

Sayoni also engaged in advocacy efforts which sought to improve protections for LGBTQI persons facing domestic violence during COVID-19. As a result, it was invited to a national consultation on combating family violence. To meet the immediate needs of its community, the organisation also launched a relief fund through online crowdfunding. The fund provided small cash grants, supermarket vouchers, HRT support, free counselling hours, and online peer support group sessions. “Thanks to Sayoni, I’m in a support group. The facilitator has been accommodating and nice, and the other members are supportive too. It’s thanks to them that I learnt I was not alone,” Mel shared.

"We need community support as we are already marginalised... That’s why we need to support each other more than ever. That’s the whole point of a village – a village is formed when the government has little to no support,"

Ko Thu from Myanmar, a member of Rainbow Six. Photo courtesy of Ko Thu.
Danny, the Program Assistant of TEAM Cebu, also highlighted the importance of support groups during the pandemic: “TEAM Cebu had a relief goods distribution program. We have an active support group, especially for our members who are stuck with transphobic families. We are working on a program to provide chest binders for trans [masculine] people who are unable to get a binder of their own, as a small way for us to help alleviate feelings of gender dysphoria.”

In Thailand, Kusuma of Backyard Politics worked with her organisation to provide food, homemade masks and washable sanitary napkins to activists with financial difficulties. Backyard Politics also organised activities promoting self-care and psychosocial support for women after the lockdown was lifted. Momo shared that these activities strengthen unity and empower LBQ persons, enabling them to meet with friends and care for their own and each other’s well-being.

Momo added that they also found social support networks in women’s rights and pro-democracy groups in Thailand. Although LBQ persons sometimes face difficulties in engaging with LGBTQI or women’s rights groups, others manage to establish solidarity, even organising protests or collaborating to provide relief aid to LBQ persons.

Jose from Arcoiris Timor Leste shared that the group received emergency relief funds from international LGBTQI and women’s NGOs; distribute food and hygiene products, and access to food and clean water. Additionally, Arcoiris provided ad hoc jobs to some LBQ persons, helping them earn a small salary to

Kusuma, a member of Backyard Politics, made reusable sanitary napkins for distribution to grassroots activists in need during the pandemic. Photo courtesy of Kusuma.
Although Leaphy expressed concerns about organisational survival, she said the rapid response and flexibility of donors helped to mitigate some financial challenges. She said, "Our donors are flexible. They asked us in the early stage about the expenses, emergency funds and any problems."

Her organisation, Rainbow Community Kampuchea (RoCK), provided emergency food support and basic necessities to those in need, including an elderly lesbian couple who were especially vulnerable, due to their age and unemployment status. Other COVID-19 response programs include addressing loneliness through community visits to members, helping individuals seek medical treatment, and coordinating mutual aid activities among members.
tide themselves through the pandemic. “I am also meeting LBT members and spreading awareness about COVID-19 prevention. With small projects activities, we are organising LBT-focused programs, such as human rights awareness raising, economic empowerment activities, education on LGBTQI issues to parents and communities,” Jose added.

Needs expressed

Research is crucial to strengthening and supporting LBQ advocacy and movement-building, especially given the invisibilisation of LBQ issues. Several interviewees emphasised the need for further research on LBQ-specific issues; Jose from Timor Leste and Sreynoch from Cambodia spoke about reaching out to more LBQ persons in rural areas, especially those with little to no access to support from NGOs.

Research and knowledge production is one of the most under-funded strategies in LBQ organising, as discussed in Astraea and Mama Cash’s study. Their study also found service provision to be another severely under-resourced and overlooked strategy. Many interviewees said that LBQ community groups sorely lacked funding and resources to provide direct health and social services. This includes mental healthcare, sexual healthcare, domestic violence helplines, shelters, and sensitivity training programs for first responders.

LBQ persons also stressed the need for legislative and institutional change, in order to address pre-existing vulnerabilities, such as implementing anti-discrimination laws, marriage equality, and protections for LBQ persons under domestic violence.
TEAM Cebu organising emergency relief goods distribution in the Philippines. Photo courtesy of Danny.

Pride protest led by LGBTQI and women's rights organisations in Bangkok, Thailand on 7 November 2020 calling for democracy, marriage and gender equality. Photo courtesy of iLaw.
"For LBQ people to recover from the pandemic, what we need is equal opportunities in employment, non-discrimination, and safe workplaces. Even though there are laws that forbid discrimination, it is still happening to us."

violence laws. “For LBQ people to recover from the pandemic, what we need is equal opportunities in employment, non-discrimination, and safe workplaces. Even though there are laws that forbid discrimination, it is still happening to us,” Kha Mon Hlaw stated. Out of 11 countries in Southeast Asia, only Thailand has anti-discrimination laws explicitly including sexual orientation and gender identity. Even so, the law specifies situations where equality is not mandated: education, religion, and public interest.67

Several interviewees called for capacity development, such as vocational training and financial literacy education, to sustainably improve the lives of LBQ persons. Ina from Indonesia said: “Instead of only giving money away, we also need empowerment to survive so we won’t be running out of money, and we don’t have to always wait for the government which gives only small amounts once a month.” “We need to be financially [independent] to stand on our feet... The biggest struggle of our community is that [we depend on] families to survive. We need more chances to improve employable skills. Many LBQ people are struggling to live with no prior savings,” Jose from Timor Leste stated.

Finally, interviewees expressed the need for more awareness of LBQ-specific issues, and the use of intersectional frameworks in human rights advocacy and movement-building to shed light on the multiple layers of disadvantages faced by LBQ persons. As Rochelle from Philippines asserted, “Generally, we need a voice. When people talk about LGBT, a lot of representation comes from the gay community, hence we started to create the Visayas LBQ Network. We need to have discussions about specific problems related to us.”

Conclusion

This report has exposed a multitude of pre-existing inequalities faced by LBQ persons in Southeast Asia. While almost all lives have been impacted by the COVID-19 pandemic, it has had disproportionate consequences for LBQ persons who live on the margins of a patriarchal society that rejects non-heteronormative sexual orientations, gender identities and expression. The pandemic has increased the frequency and intensity of stigma, discrimination, violence and criminalisation.

Under such challenging circumstances, LBQ persons have harnessed their resilience and resourcefulness to survive and thrive just as they have done throughout history. While LBQ communities in Southeast Asia have few resources at their disposal, they continue to foster solidarity and unity, and provide life-saving health and social services – all while tirelessly advocating for their visibility, empowerment, and human rights.

Change is long overdue. LBQ communities need more support and resources, in conjunction with reform to deep-seated structures of oppression, exploitation and injustice that reinforce violence and discrimination.
Recommendations

Drawing from our findings, the following section outlines specific issues that must be addressed by governments, donors, NGOs, multilateral agencies, and other stakeholders:

For governments:

• **Governments have a duty of care in giving visibility to LBQ persons’ lives in public policies.** States must recognise the rights of LBQ persons under their jurisdictions and take measures to meaningfully address violence and discrimination, in order to protect and uphold their human rights.

• **Address food insecurity, discriminatory laws, policies and attitudes that prevent LBQ persons from accessing humanitarian and relief aid.** This includes the lack of legal recognition of diverse families and persons, which prevents LBQ families and individuals from receiving government support.

• **Ensure equal access to justice and support for all LBQ persons.** LBQ persons face disproportionate barriers to reporting and help-seeking. States must ensure that access to justice and support, including shelters, helplines, and other social services, are equally available to everyone, regardless of sexual orientation, gender identity and expression.

• **Ensure that state and non-state agencies such as law enforcement agencies, social services, and healthcare providers are sensitively-trained, in order to provide adequate, inclusive, and affirming support to LBQ persons.**

• **Condemn scapegoating and hate speech against LBQ persons,** including gender-based hate speech and homophobic/transphobic harmful rhetoric that claims LGBTQI persons are the cause of the pandemic, inciting violence and discrimination.

• **Eradicate stigma and harmful gender stereotypes** perpetuated by state and non-state media platforms, policies and guidelines through education and awareness-raising.
• **Enact laws and policies that specifically protect LBQ persons from violence and discrimination.** The lack of clear and specific mention of LGBTQI persons in laws and policies have created confusion regarding the protection of LBQ persons from violence and discrimination.

• **Eliminate barriers to legal gender marker change,** which systemically disadvantage transgender and gender non-conforming persons in accessing healthcare, shelter, and other basic necessities in their everyday lives, especially during crises.

• **Decriminalise and repeal existing discriminatory laws,** which reinforces and legitimises social stigma, and justifies human rights violations against LBQ persons.

**For donors:**

• **Provide flexible aid funding for organisations and community groups that work specifically on LBQ issues,** in order to provide emergency relief and support crisis recovery.

• **Increase funding for LBQ groups in Southeast Asia, especially for operational and administrative costs, capacity building, research and knowledge production, and direct support services.** The pandemic threatens organisational survival, LBQ activists’ well-being, and their already limited resources. This underscores the urgent need to develop and expand long-term LBQ-specific portfolios.

• **Work with grassroots LBQ communities in developing accessible and flexible funding** that allows them to identify and support their own agendas. Unregistered and/or volunteer-run groups are often understaffed and may have insufficient technical capacity. Simplify applications and partner with intermediaries that have the capacity and expertise to support these groups.

• **For donors without LBQ prioritisation or when funding organisations without LBQ-specific programs,** mandate the prioritisation of LBQ leadership, LBQ-specific programs, LBQ demographical outreach, and feminist frameworks in policies and programs. Hold organisations accountable and ensure that LBQ persons are not denied support because of their marginalised identities.
For NGOs, multilateral agencies, and other stakeholders:

- **Ensure that humanitarian aid and support services are affirming, sensitive, and non-discriminatory**, which requires not only gender-responsive policies and programming, but also intersectional frameworks that account for multiple and intersecting layers of discrimination. This means ensuring that LBQ persons and other invisible at-risk groups are at the centre of COVID-19 or emergency response plans.

- **Engage with LBQ communities to develop and implement LBQ-specific programs** that distribute immediate relief aid, provide long-term assistance in crisis recovery, and meaningfully address the pre-existing systemic disadvantages faced by LBQ persons.

- **Understand the unique needs and challenges of LBQ persons, and establish and develop cross-movement partnerships.** Organisations serving marginalised communities (e.g. gender-based violence, domestic violence, sex workers’ rights, migrants’ rights, child rights, sexual and reproductive health and rights, and disability rights) must create opportunities for inclusion and consider how LBQ persons fit into their target groups.

- **Conduct reviews on implemented programmes, monitor and evaluate how LBQ persons have been excluded from support and relief, and reassess programming and strategies used**, in order to improve their lives in the future and ensure that LBQ persons are not left behind.