“We Do Not Want to Punish, We Just Want to Educate”: A Scoping Review of Attitudes Towards LGBTQ Among Malaysians

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Abstract: Against the backdrop of the growing awareness of the detrimental effects of cisgendersexism on LGBTQ people’s health and well-being, this scoping review collates existing Malaysian research on the prevalence of cisgendersexist attitudes and associated contributing factors. Through electronic searches in three databases between 2011 and 2021, as well as additional hand searches, 18 studies with findings on attitudes towards LGBTQ people in Malaysia were located. This review found perpetrators of cisgendersexism from multiple fronts (including political and religious leaders, health professionals, and media) and stem from various sources (including LGBTQ-specific criminalizing law, and conservative family and religious values). To enhance societal acceptance of LGBTQ people in Malaysia, transformative solutions are needed across institutions; these comprise opportunities to understand cisgendersexism as a form of injustice impacting LGBTQ people, consideration of culturally-safe interactions with LGBTQ service users, and dissemination of accurate LGBTQ information that aligns with international LGBTQ-affirmative guidelines.

Keywords: LGBT, LGBTQ, transgender, attitudes, heterosexism, Malaysia

The Malaysian population primarily comprises three major ethnic groups: Bumiputra (including Malays and other indigenous groups; 69.6%), Chinese (22.6%), and Indians (6.9%; Department of Statistics, 2020). To date, there is no population-based demographic information on lesbian, gay, bisexual, transgender, and queer (LGBTQ) people in Malaysia. The Malaysian LGBTQ population encompasses people whose sexual orientations and gender identities or expressions differ from the conventional social norms of being heterosexual (people who are sexually attracted to the opposite sex) or cingender (people whose genders align with their sex assigned at birth), including those who adopt Western (e.g., gay and transgender) and other culture-specific (e.g., Malay mak nyah and Chinese tongzhi) identities (Tan, 2022). A culturally-appropriate lens should be used when comprehending non-Western LGBTQ identities, as these have relations with historical, political, and social contexts (Tan, 2022).

Historically, the social constructs of “sexuality” and “gender” are offered intelligibility through
Western cultural norms (i.e., cisnormativity and heteronormativity) that idealize cisgender and heterosexual identities and expressions (Ellis et al., 2019; Riggs & Treharne, 2017). These norms police the performativity or the “doing of identity” around normative sexuality and gender behaviors (e.g., a man should act in a masculine manner and commit to a relationship with a woman) and roles (e.g., a man ought to be the breadwinner of the house) that are embedded in daily life (Riggs & Treharne, 2017). Although these norms are increasingly challenged in many countries through progressive movements such as the decriminalization of LGBTQ identities, banning of sexual orientation and gender identity change efforts, and delisting of LGBTQ identities as a mental disorder (Ellis et al., 2019), Malaysia has inherited (and is still enforcing) the ramification of prejudices from these norms (i.e., cisheterosexism) as a former British colony (Singaravelu & Cheah, 2020).

In Malaysia, the federal and Islamic Sharia laws co-exist in a dual justice system to govern secular and religious legal codes, respectively (Luhur et al., 2020). A recent review of 44 Malaysian studies demonstrates ubiquitous cisheterosexism affecting the living experience of LGBTQ people. These include aspects of criminalization (e.g., the Section 377A of the Penal Code (Act 574) that penalizes anal sex in same-sex relationships and Sharia law that persecutes transgender people), pathologization (e.g., the perspective that LGBTQ people are mentally disordered), and marginalization (e.g., discrimination that leads to barriers for LGBTQ people to access healthcare services) (K. Tan et al., 2021). The relationship between cisheterosexism and the mental health of LGBTQ people has been well-documented in the international literature (e.g., Liu & Mustanski, 2012; R. Tan et al., 2021). For example, a Singapore study found GBTQ men who had experienced stigma and discrimination based on their sexual orientation were more likely to develop severe depression and think about attempting suicide (R. Tan et al., 2021).

It is crucial to examine public attitudes towards LGBTQ people as these are indicators of acceptance by the general society related to the ability to access social determinants of health or conditions necessary for thriving (e.g., health care, education, and social services), prevailing opinion about laws and policies promoting equity for LGBTQ people, as well as exposure to stigma, discrimination, and violence against this population (Flores, 2019). Out of 174 countries, the Global Acceptance Index (GAI) on public beliefs regarding LGBTQ people and policies ranked Malaysia in 89th place during the period between 2014 and 2017 (Flores, 2019). When compared to other Southeast Asia countries, Malaysia was ranked second (after Indonesia) for having the most negative societal attitudes towards LGBTQ people (Flores, 2019). This ranking is not necessarily painting a grim picture for Malaysian LGBTQ people, as the GAI also showed an increased level of LGBTQ acceptance from an earlier ranking (133rd) in 2013.

However, the GAI does not provide information on the sociodemographic factors underlying the acceptance level towards Malaysian LGBTQ people. This study seeks to uncover these nuances by undertaking a scoping review of all existing literature on this topic in Malaysia. A scoping review is useful to summarize findings from a body of knowledge that is heterogenous in methods, as well as to identify literature gaps to inform the planning of future research (Munn et al., 2018). The increasing number of Malaysian studies on attitudes towards LGBTQ people in recent years also points to the timeliness of this review, with the findings serving as a barometer of the milestone achieved—or need to progress on—in reducing the pervasiveness and permissiveness of cisheterosexism across different sectors in Malaysia.

**Method**

The reporting of methods and findings of the scoping review was guided by the PRISMA Extension for Scoping Reviews (PRISMA-ScR) checklist (Tricco et al., 2018).

**Eligibility Criteria**

The inclusion criteria for the review were (a) studies reported findings specific to Malaysian samples; (b) academic sources (including dissertations, theses, reports, and journal articles) that were published in years between 2011 and 2021; and (c) written in English. Exclusion criteria included (a) studies that were out of scope or irrelevant to attitudes towards LGBTQ people; (b) studies without findings on the degree of cisheterosexist attitudes towards any specific groups within the Malaysian LGBTQ populations.
Informed by previous literature (Grey et al., 2013; K. Tan et al., 2021), search terms for this review comprised LGBTQ identities (LGB* OR gay OR homosexual* OR bisexual* OR lesbian* OR pansexual* OR asexual* OR trans* OR “men who have sex with men” OR MSM), attitude (attitud* OR belief* OR bias* OR discriminat* OR “men who have sex with men” OR MSM), and location (Malaysia*). To maximize the number of relevant articles found, I included a truncation symbol (i.e., asterisk) following each term (where appropriate) as “keywords” to include various word endings. A decision was made to expand the search to “all fields” in the MCI database, as the initial screen via “keywords” only returned three results. Please refer to Appendix 1 for the detailed search strings used in each database.

Selection of Source Evidence

Identified studies were exported into Endnote version 20.1 where duplicate studies were removed. Figure 1 outlines the screening process.

Data Charting and Items

Key details of studies such as studies’ objective, sample details, location, instrument for assessing attitudes towards LGBTQ, and findings are presented in a charting table (see Table 1).

Synthesis of Results

I began with a descriptive overview of the selected studies before proceeding to summarize the key findings by highlighting common themes. This was followed by critical assessments of existing research gaps and the provision of recommendations in applied settings.

Figure 1. PRISMA Flow Diagram of the Literature Screening Process
Table 1
Characteristics of the Included Studies

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Samples</td>
<td>Adults ((n = 5)); Healthcare workers including medical students ((n = 4)); General university students ((n = 3)); Young people ((n = 2)); Newspaper article ((n = 2)); Stakeholders in HIV prevention ((n = 1)); LGBTQ people ((n = 1))</td>
</tr>
<tr>
<td>Attitude groups</td>
<td>Homosexuality including lesbian and gay ((n = 8)); LGBTQ people ((n = 6)); Transgender ((n = 3)); Men who have sex with men ((n = 1))</td>
</tr>
<tr>
<td>Study methods</td>
<td>Quantitative measures ((n = 10)); Qualitative ((n = 5)); Newspaper analysis ((n = 2)); Mixed-method ((n = 1))</td>
</tr>
<tr>
<td>Study location</td>
<td>Throughout Malaysia ((n = 11)); Kuala Lumpur ((n = 5)); Peninsular Malaysia ((n = 1)); Sarawak ((n = 1))</td>
</tr>
<tr>
<td>Type of publication</td>
<td>Journal articles ((n = 15)); Dissertation ((n = 2)); Report ((n = 1))</td>
</tr>
<tr>
<td>Year of publication</td>
<td>(&lt;2010 ((n = 1)); 2011-2015 ((n = 3)); 2016-2021 ((n = 14)) }</td>
</tr>
</tbody>
</table>

Results

Selection of Sources of Evidence
A total of 210 potential sources of evidence were discovered in the search process. Duplicates \((n = 5)\) were removed, leaving 205 studies for analysis. The title for each study was scanned for relevance to the objectives of the present study, and 149 studies were excluded. The abstract and full texts of the studies were then analyzed for quantitative and qualitative information pertaining to attitudes toward LGBTQ people in Malaysia. The full-text screening process removed 37 papers. I identified 11 additional studies through forward and backward reference list checking in Google Scholar, leaving 18 studies to be analyzed for the scope review.

Synthesis of Results
Table 1 presents the characteristics of the included studies. All studies had a cross-sectional research design, and only one study utilized probability sampling (Manalastas et al., 2017). More than one-fifth surveyed general Malaysian adults \((27.8\%)\) or healthcare workers \((including medical students; 22.2\%)\). More than two-fifths were centered on Malaysian people's attitudes toward homosexuality \((44.4\%)\), and about one-third examined attitudes toward the broad LGBT population. More than half employed quantitative measures such as single-item questions and validated scales \((e.g.,\text{ Homosexual Attitude Scale; 55.6\%})\), and two studies analyzed the portrayal of LGBTQ people in Malaysian newspapers. More than three-fifths had recruited participants from various parts of Malaysia \((61.1\%)\). A majority of included studies were peer-reviewed journal articles \((83.3\%)\) or published between the years 2016 to 2021 \((77.8\%)\).

Prevalence of Cisheterosexist Attitudes
This section reports findings based on Table 2 on the extent of cisheterosexist attitudes or negative attitudes that constitute the marginalization of LGBTQ people among Malaysians. A secondary analysis of the nationally representative World Values Survey found Indonesia and Malaysia to have the most negative attitudes towards gay and lesbian people, compared to other relatively less rejecting Southeast Asia nations like Thailand, Singapore, Vietnam, and the Philippines (Manalastas et al., 2017). The study found that more than three-fifths of Malaysians did not want homosexual neighbors \((58.7\%)\) or deemed homosexuals as not morally justifiable \((60.5\%)\). Other large-scale studies included the Global Attitudes toward Transgender People Survey (Luhur et al., 2020), which reported that about two-fifths thought transgender people had mental illnesses \((39.0\%)\) or did not think the government played a role in protecting transgender people from discrimination \((38.5\%)\), and a report by the Pew Research Center (2013) that revealed more than four-fifths \((86.0\%)\) perceived society should reject homosexuality. Although these two studies were not nationally representative as their sampling did not adequately capture harder-to-reach populations \((e.g.,\)
those living in rural regions), they had a large sample size (≥500 participants).

Drawing findings from the Attitudes Toward Homosexuality (ATH) scale, two studies (≤80 participants) reported that 10.0% (Malayalam, 2020) to 33.8% (Tan, 2012) of Malaysian young adults had negative attitudes towards gay and lesbian people. A study on Sikh young people in Malaysia found that more than one-tenths possessed negative attitudes towards homosexuality and bisexuality, including perceiving that non-heterosexuality was morally wrong (11.9%) and was a disease (13.1%) (Kaur & Kaur, 2022). An analysis of newspapers published between the period of 1998 and 2006 found more than two-thirds (74.4%) had portrayed homosexuality negatively (e.g., signaling gays and lesbians as deviant and not accepted by religion; Alagappar & Kaur, 2009).

**Correlates of Cisheterosexist Attitudes**

In this section, findings on various factors associated with cisheterosexist attitudes are displayed.

1. **Religion and religiosity**

   In Malaysia, ethnicity and religious beliefs are closely interconnected, with Islam providing a tenable mechanism of control for the Malay/Muslim population (Jerome et al., 2021). Other ethnicities in Malaysia are not bound to practice specific religions, although a majority of Chinese are Buddhists or Christians, and the Indians are mostly Hindus, with some being Christians, Buddhists, or Muslims (Jerome et al., 2021). A few studies documented more negative attitudes towards LGBTQ people among Muslims than non-Muslim (Earnshaw et al., 2016; Foong et al., 2020; Ng et al., 2015; Tan, 2012), and two studies reported relatively high levels of cisheterosexist attitudes among Christians (Jerome et al., 2021; Yeo et al., 2021). There was no association found between religion and discrimination intent toward transgender people in a sample of medical doctors (Vijay et al., 2018). Some studies provided complementary findings on religious affiliation by examining the degree of religiosity. These studies found that participants with higher levels of religiosity were more likely to exhibit cisheterosexist attitudes (Manalastas et al., 2017; Ng et al., 2015; Ting et al., 2022).

2. **Age**

   There were considerable variations in age findings for explaining cisheterosexist attitudes among Malaysians. Luhur et al. (2020) found older participants were more likely to support the legislative protection of transgender people, whereas Manalastas et al. (2017) produced findings on higher levels of rejection towards gay and lesbian neighbors among older participants. Another two studies involving health professionals did not observe significant age differences in attitudes toward LGBTQ people (Ng et al., 2015; Vijay et al., 2018).

3. **Gender and gender role**

   Gender appeared unrelated to cisheterosexist attitudes (Foong et al., 2020; Ng et al., 2015; Tan, 2012), with two studies showing conflicting results of lower acceptance of gay people among women (Manalastas et al., 2017) and men (Teh et al., 2016). Teh et al. (2016) further added that participants with strong traditional gender role beliefs or fixed ideas of masculinity and femininity were more likely to perceive gay and lesbian people as violating the heterosexual norm.

4. **Amount of contact**

   The relationship between the amount of prior contact and attitudes towards LGBTQ people was relatively straightforward. Participants who had previous contact with LGBTQ people had lower ratings of stereotypes, fear, prejudice, and discrimination intent than those without previous contact (Earnshaw et al., 2016), and demonstrated empathy and understanding of how cisheterosexism affects LGBTQ people (Ahmad et al., 2021; Malayalam, 2020).

5. **Stigma**

   In a sample of medical doctors, participants with internalized shame in connecting with transgender people, fear of transgender people, and a belief that transgender people do not deserve good care, had elevated intention to discriminate against transgender people (Vijay et al., 2018); these associations persisted even after adjusting for religion, gender, age, and medical specialty. Conversely, Ahmad et al. (2021) reported that interviewed Malaysian adults found that participants endorsing human rights perspectives had positive views about LGBTQ people.
<table>
<thead>
<tr>
<th>Author (year)</th>
<th>Objective</th>
<th>Sample descriptor</th>
<th>Location</th>
<th>Instrument</th>
<th>Finding</th>
</tr>
</thead>
</table>
| Abdulla & Amat (2019) | To identify public university students’ understanding of LGBT issues    | University students \( n = 15; \) age range = 20-23 | Malaysia       | Interview  | **Religion:** Participants perceived LGBT as religious misconduct and contrary to human nature.  
**Western Culture:** Participants perceived LGBT as part of the liberal Western culture and contrary to Eastern culture. |
| Ahmad et al. (2021)   | To investigate the perception of LGBT identities in Malaysia by examining social interaction as the source of social knowledge | Adults \( n = 12, \) age range = 18-60 | Sarawak        | Interview  | **Morality:** Participants implicitly acknowledged LGBT as a form of deviance wherein they linked the taboo surrounding LGBT to religious beliefs and family values.  
**Stereotype:** Stereotype arises as LGBT is “beyond the natural way of reproduction” and due to participants’ religious beliefs. Participants endorsing human rights perspectives had positive views on LGBT and argued that discrimination against LGBT is contrary to the essence of religion.  
**Contact:** Participants who had the previous contact with LGBT demonstrated empathy and understanding for the marginalization of LGBT people. However, not all encounters resulted in an improved perception towards LGBT due to personal beliefs. |
| Alagappar & Kaur (2009)| To examine the representation of homosexuality in a newspaper | Newspaper articles \( n = 86 \) | Malaysia       | New Straits Times (an English newspaper in Malaysia) | 74.4% had portrayed a negative image of homosexuals. |
| Barmania & Aljunid (2017) | To explore the attitudes of stakeholders involved in HIV prevention policy in Malaysia towards transgender women | Ministry of Health staff, religious leaders, people (including transgender women) with HIV \( n = 35; \) aged 18 and over | Kuala Lumpur | Interview  | Religion: Ministry of Health staff expressed difficulty in recognizing transgender human rights due to the country’s religious regulations based on Qur’an and Sunnah. Religious leaders discouraged men from impersonating the characteristics of women and physically changing their body. Some religious leaders facilitated programs to “cure” transgender women. |
**Table 2 continued...**

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<thead>
<tr>
<th>Author (year)</th>
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<th>Instrument</th>
<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Earnshaw et al. (2016)</td>
<td>To examine differences in sociodemographic and clinical characteristics as well as an endorsement of MSM stereotypes, fear, prejudice, and discrimination intent</td>
<td>Medical and dental students (1,158; Mage = 22.4)</td>
<td>Malaysia</td>
<td>Adapted Stigma Scale to measure fear, prejudice, and discrimination intent towards MSM; Measure of stereotypes</td>
<td>Contact: Participants who had the previous contact with MSM had lower ratings of stereotypes, fear, prejudice, and discrimination intent than those without previous contact with MSM. Religion: Muslims had higher ratings of stereotypes, fear, prejudice, and discrimination intent against MSM than Buddhists.</td>
</tr>
<tr>
<td>Foong et al. (2020)</td>
<td>To investigate the association between ethnicity and religion with attitudes toward LGBT patients</td>
<td>Medical students (n = 228; Mage = 23.3)</td>
<td>Kuala Lumpur</td>
<td>Attitudes Toward LGBT Patients Scale-Malaysia</td>
<td>Ethnicity: The most negative attitude towards LGBT patients was found among Malay, followed by Chinese and Indian. Religion: The most negative attitude toward LGBT patients was found among Islam practitioners, followed by Christianity, Buddhism, and Hindus.</td>
</tr>
<tr>
<td>Jerome et al. (2021)</td>
<td>To examine public receptivity towards LGBT among Malaysian LGBT people</td>
<td>LGBT individuals (n = 15; age range = 20-49)</td>
<td>Malaysia</td>
<td>Interview</td>
<td>Network: Participants' perception of LGBT was shaped by peers, family members, and LGBT communities. Religion: The perception that LGBT is a sin was shared by those with Islamic and Christian faith.</td>
</tr>
<tr>
<td>Kaur &amp; Kaur (2022)</td>
<td>To understand the perspectives of Sikhs on homosexuality</td>
<td>Youth (n = 85; age range = 21-45)</td>
<td>Malaysia</td>
<td>Mixed method of single-item quantitative questions and focus group discussions</td>
<td>More than one-tenths thought it was wrong to be attracted to the same or both genders (11.9%), or homosexuality or bisexuality was a disease (13.1%). More than one-fifths thought LGBT could be fixed religiously (24.7%) or scientifically (23.5%). Religion: Among participants who perceived heterosexuality as the norm, associations were made with religious belief and the law of nature.</td>
</tr>
<tr>
<td>Luhur et al. (2020)*</td>
<td>To identify public opinion about transgender people and their rights</td>
<td>Adults (n = 500; age range = 16-64)</td>
<td>Malaysia</td>
<td>Global Attitudes toward Transgender People Survey</td>
<td>38.5% disagreed that transgender people should be protected from discrimination by the government. Age: Participants aged 16 to 34 were less likely than those aged 50 to 64 to perceive that transgender people should be protected. 39.0% agreed that transgender people had mental illnesses, and men were more likely to think so. Contact: 41.8% agreed that Malaysia is becoming tolerant towards transgender people, and those who know a transgender person were more likely to think so.</td>
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<tr>
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<td>Sample descriptor</td>
<td>Location</td>
<td>Instrument</td>
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<tr>
<td>Malayalam (2020)</td>
<td>To identify factors related to young adults’ attitudes toward homosexuals</td>
<td>Young adults ($n = 40$; $M_{age} = 26.1$)</td>
<td>Kuala Lumpur</td>
<td>Attitudes toward Homosexuality (ATH) Scale</td>
<td>10.0% had a negative attitude towards homosexuals. Contact: Participants with previous contact with homosexuals had a more positive attitude towards gay and lesbian people.</td>
</tr>
<tr>
<td>Manalastas et al. (2017)</td>
<td>To identify correlates of homonegativity</td>
<td>Adults ($n = 1,300$; aged 18 and above)</td>
<td>Malaysia</td>
<td>2 single items in the nationally representative World Values Survey</td>
<td>58.7% did not want homosexual neighbors. 60.5% thought being homosexual was not morally justifiable. Gender: Women were more likely to reject homosexual neighbors. Age: Older participants were more likely to reject homosexual neighbors. Religiosity: Those who rated religion as important in life were more likely to reject homosexual neighbors.</td>
</tr>
<tr>
<td>Ng et al. (2015)</td>
<td>To determine factors associated with attitudes toward homosexuality</td>
<td>Nursing students ($n = 495$; $M_{age} = 19.5$)</td>
<td>Kuala Lumpur</td>
<td>Homosexual Attitude Scale (HAS)</td>
<td>Religion: Negative attitude towards homosexuality was higher among Muslims than non-Muslims. Religiosity: Those with higher internally oriented religiousness had a worse attitude towards homosexuality.</td>
</tr>
<tr>
<td>Pew Research Center (2013)</td>
<td>To identify the acceptance level towards homosexuality</td>
<td>Adults ($n = 822$; aged 18 and above)</td>
<td>Malaysia</td>
<td>A single-item</td>
<td>86.0% responded that society should reject homosexuality.</td>
</tr>
<tr>
<td>Tan (2012)</td>
<td>To explore demographic differences in attitude towards homosexuality</td>
<td>University students ($n = 80$; $M_{age} = 21.6$)</td>
<td>Peninsula Malaysia</td>
<td>Attitudes toward Homosexuality (ATH) Scale</td>
<td>33.8% had a negative attitude towards homosexuality. Religion: Negative attitude towards homosexuality was higher among Muslims than among Buddhists.</td>
</tr>
<tr>
<td>Ting et al. (2022)</td>
<td>To examine LGBT aspects that were spotlighted in online news articles</td>
<td>Newspaper articles ($n = 60$)</td>
<td>Malaysia</td>
<td>Four newspapers: MalaysiaKini, The Star Online, Free Malaysia Today, and Astro Awani Online</td>
<td>All newspapers had portrayed LGBT negatively to some degree, with associations made with Malay and Muslims and quotations from religious leaders and ministerial sources.</td>
</tr>
</tbody>
</table>

Note. “Weighting was applied to improve the representativeness of the sample, but it cannot be considered a probability-based sample. Wordings and phrasings were retained in these authors’ work to prevent meaning loss.”
Discussion

Summary of Evidence

This paper presents the first scoping review on attitudes towards LGBTQ people in Malaysia with evidence concerning factors that correlate with cisheterosexist attitudes. Similar to the Global Acceptance Index (Flores, 2019), the nationally representative World Values Survey ranked Malaysia in second place in Southeast Asia for having the most negative attitudes toward gay and lesbian people (Manalastas et al., 2017). Echoing previous studies that posit cisheterosexism is a multilevel phenomenon that affects the living experiences of LGBTQ at institutional, interpersonal, and individual levels (Lim et al., 2020; Luhur et al., 2020; K. Tan et al., 2021), this review found cisheterosexism to be promulgated on several fronts in Malaysia, including healthcare providers (Earnshaw et al., 2016; Foong et al., 2020; Ng et al., 2015; Vijay et al., 2018), religious leaders (Barmania & Aljunid, 2017), media (Alagappar & Kaur, 2009; Ting et al., 2022), and ministerial representatives (Barmania & Aljunid, 2017).

Sources of cisheterosexism in Malaysia include religion (e.g., regulation of normative expressions of gender and sexuality through religious rules), cultural values (e.g., collectivism where group goals are emphasized), family values (e.g., preservation of family lineage), and criminal laws on LGBTQ people (Abdullah & Amat, 2019; Jerome et al., 2021; Yeo et al., 2021). To feel safe from discrimination is often a taken-for-granted privilege among cisgender and heterosexual people in Malaysia, as they are less likely to be affected by cisheterosexism compared to their LGBTQ counterparts (Barmania & Aljunid, 2017). The LGBTQ-criminalizing context in Malaysia allowed the emergence of sexual orientation and gender identity change efforts (SOGICE) that aim to repress one’s LGBTQ identity to conform to cisgender and heterosexual ways (Tan, 2022). The new generations become more consciously aware of the importance of sustaining social cohesion, they are more likely to demonstrate mutual respect among nations. However, as attitudes towards LGBTQ people are also influenced by religiosity and preconceived stigma (Manalastas et al., 2017; Ng et al., 2015; Ting et al., 2022; Vijay et al., 2018), Malaysian students need to be
offered educational platforms to understand the various forms that cis-heterosexist injustices can manifest and the resultant health inequities that LGBTQ people face. Another useful intervention is the bystander training that can foster the development of prosocial LGBTQ allies with abilities to interrupt cis-heterosexism and provide emotional support to victimized LGBTQ people (Dessel et al., 2017).

Cis-heterosexism can hinder LGBTQ people from accessing timely and essential sexual health interventions such as PrEP (Lim et al., 2020). International studies have also shown increased mental health needs of LGBTQ people due to the effects of cis-heterosexism that manifest as enacted stigma (overt form of discrimination that seeks to delegitimize LGBTQ people’s own understanding of sexual and gender identities; Veale et al., 2017). It is worrisome that healthcare services, which should be supporting LGBTQ people during some of the most difficult times of their lives, may present obstacles to accessing essential general and mental healthcare or may be avoided for fear of unhelpful and non-inclusive treatments (Zay Hta et al., 2021). Even though health professionals were less likely to possess cis-heterosexist attitudes compared to the general population (Foong et al., 2020), some continued to express at least a moderate level of discriminatory intent that stemmed from stigma-related attitudes such as fear, internalized shame, and a belief that LGBTQ people do not deserve decent care (Vijay et al., 2018). Although the criminalizing laws on LGBTQ identities may serve to legitimize cis-heterosexist attitudes, health professionals have the responsibility to abide by the code of professional conduct to ensure the fair and just treatment to all patients, irrespective of sexual orientation and gender (Malaysian Medical Council, 2019).

A relationship between health professionals and LGBTQ patients should premise on a culturally-safety framework (Baldwin et al., 2018). Cultural safety expands beyond cultural competence that requires health professionals to focus on learning LGBTQ cultures and involves recognizing the social marginalization context of LGBTQ people and challenging the hegemonic cis-heterosexism implicated in healthcare delivery (e.g., requiring transgender people to “prove” their gender dysphoria condition for access to hormone treatment) that perpetuate oppression against LGBTQ people (Baldwin et al., 2018; Tan, 2022). A culturally-safe health professional strives to provide services—with the input of LGBTQ people—that are cognizant of sexual and gender diversity and responsive to patients’ health needs and engage in a careful reflexive process to critically examine their prejudices to avoid assuming expertise about a culture outside of their own (Baldwin et al., 2018). Until the day mainstream healthcare can deliver culturally-safe services, there needs increased funding for LGBTQ-friendly non-governmental organizations to provide safe spaces for LGBTQ people to access necessary medical information and interventions (Barmania & Aljunid, 2017).

The media plays a powerful role as a storyteller in depicting an image of a particular population (Alagappar & Kaur, 2009). Media tends to identify “newsworthy” incidents and report these through a cis-heterosexist lens (Alagappar & Kaur, 2009). Research has found that LGBTQ issues commonly receive negative coverage in Malaysian media, for example portraying LBGTQ people as sexual or gender deviant who ought to be criminalized; this is especially true for government-linked media (Ting et al., 2022). Ting et al. (2022) also found that Malaysian media has served to assert the dominance of cisgender and heterosexual people by drawing quotes from prominent figures (e.g., ministers and religious leaders) who shared prejudicial views on LGBTQ identities. A recent poignant case is the persecution of Nur Sajat, a transgender woman, by Malaysian religious authorities (Head, 2021). “We do not want to punish him, we just want to educate him” was a quote from the Religious Affairs Minister Idris Ahmad in reference to the gender presentation of Nur Sajat, and LGBTQ activists have responded with a need to bolster LGBTQ rights as outlined in the international human rights standards such as the Yogyakarta Principles (Head, 2021; Tan, 2022). Exposures to negative LGBTQ-related messages on media have associations with the poor mental health of LGBTQ people (Hughto et al., 2020). Therefore, structural interventions need to be put in place to increase positive representations of LGBTQ people, including educating journalists to report LGBTQ issues based on factual evidence (e.g., LGBTQ is not a mental illness; American Psychiatric Association, 2013) rather than disseminating provocative contents that perpetuate cis-heterosexism.
Limitations and Recommendations for Future Research

The main strength of this review is the inclusion of multiple academic sources (journal articles and theses) located through one local database (Malaysia Citation Index), two international databases (PsycINFO and Scopus), and additional hand searches at the Google Scholar, although the search was limited to those written in English. A wide net was cast to identify studies on attitudes towards LGBTQ people; however, these findings need to be examined within specific cultural contexts, including in relation to the multitude of factors that correlate with cis-heterosexist attitudes. For example, a positive attitude towards LGBTQ people does not necessarily translate to an intention to promote human rights for this population, as Luhur et al. (2020) found that certain political and religious circles have developed narratives of embracing LGBTQ people with civility and compassion to persuade them to undertake SOGIE.

Existing Malaysian research on this topic tends to center around gay and lesbian identities (see Table 1). Future research is required to explore attitudes towards LGBTQ people who identify outside the binary constructs of sexuality (e.g., pansexual and asexual) and gender (e.g., nonbinary people), as well as intersex people with unique sex characteristics. Moreover, the collection of empirical evidence on the relationships between socioeconomic status, social media use and educational status, and the degree of cisheterosexism will be crucial for informing targeted interventions to diminish cisheterosexism at specific platforms. As all existing Malaysian studies on attitudes towards LGBTQ people derived conclusions based on a cross-sectional design, future longitudinal studies are needed to discern the temporal precedence of factors that affect attitudes towards LGBTQ people among various generations in Malaysia.

Although overseas studies may provide useful evidence as starting points of discussion, more local research is warranted to push for policy change on issues that matter to the Malaysian LGBTQ population. Previous research on Malaysian LGBTQ people often has minimal input from these groups (K. Tan et al., 2021), and LGBTQ researchers (e.g., Kong, 2018) have advocated for the use of a participatory action research (PAR) framework to guide design and implementation phases of research. PAR serves to empower the participation of LGBTQ people as leaders by fostering a collaborative relationship between researcher and researched, paying attention to the oppressive systems that marginalize LGBTQ people, and valuing the culture-specific knowledge that Malaysian LGBTQ people possess. The current review also fell short of considering the intersecting forms of prejudices (e.g., racism, ableism, and religious discrimination) alongside cisheterosexism that LGBTQ people may experience. Future research could examine the interrelations of different forms of prejudices in constructing stigma against LGBTQ people and their impacts on the health and well-being of the diverse LGBTQ populations in Malaysia.

Conclusion

This scoping review has uncovered the deeply entrenched cisheterosexism across different parts of Malaysian society. Although most negative attitudes towards LGBTQ people can be attributed to the endurance of criminalizing laws since British colonial rule, as well as conservative religious regulations, perpetrators of cisheterosexism also include political leaders, religious leaders, health professionals, family members, and media. It is not the intention of this review to oversimplify or generalize the roles of these perpetrators by merely framing them as risk factors for LGBTQ people’s health and well-being. Rather, findings from this review endorse international literature (e.g., Dickinson & Adams, 2014; Veale et al., 2017) that have displayed agents such as family members, peers, and health professionals as crucial supportive networks to mitigate the negative effects of cisheterosexism and instill resilience among LGBTQ people.

Targeted interventions to reduce cisheterosexist attitudes, particularly among gatekeepers of access to social determinants of health such as health professionals, counselors, and educational staff, are required for those with high religiosity and who had no prior contact with LGBTQ people. This review also pointed out that demographic characteristics such as age, gender, and types of religion have relatively few associations with the degree of cisheterosexist attitudes. Instead, the key to promoting LGBTQ social acceptance is to address cisheterosexism that propagates at institutional (e.g., media, education systems, health systems, and religious settings).
and interpersonal (e.g., stigma and stereotypes that individuals across institutions hold against LGBTQ people) levels. A shift from the pathological conceptualization to an affirmative understanding of LGBTQ identities is essential, and recommendations were provided to question the scientific credibility of interventions to alter sexual and gender identities, to create a culturally-safe environment for LGBTQ people to access health care, and to disseminate non-pathologizing and accurate information on LGBTQ realities.

Declaration of ownership

This report is my original work.

Conflict of interest

None to declare.

References


Hughoto, J. M. W., Pletta, D., Gordon, L., Cahill, S., Mimiaga, M. J., & Reisner, S. L. (2020). Negative transgender-related media messages are associated with...


Appendix 1

Search strings used in PsycINFO, Scopus, and Malaysian Citation Index

PsycINFO (29)

Attitud* OR Belief* OR Bias* OR Discriminat* OR Internal* OR Opinion* OR Prejudic* OR Perception* LGB* OR gay OR homosexual* OR bisexual* OR lesbian* OR pansexual* OR asexual* OR trans* OR “mak nyah” OR genderfluid* OR intersex* OR queer OR “sexual orientation” OR “sexual identity” OR “sexual minority” OR “gender identity” OR “gender minority” OR “men who have sex with men” OR MSM

29 Results for Keywords: Attitud* OR Keywords: Belief* OR Keywords: Bias* OR Discriminat* OR Keywords: Internal* OR Keywords: Opinion* OR Keywords: Prejudic* OR Keywords: Perception* AND Keywords: LGB* OR gay OR homosexual* OR bisexual* OR lesbian* OR pansexual* OR asexual* OR trans* OR "mak nyah" OR genderfluid* OR intersex* OR queer OR "sexual orientation" OR "sexual identity" OR "sexual minority" OR "gender identity" OR "gender minority" OR "men who have sex with men" OR MSM AND Keywords: Malaysia* AND Year: 2011 To 2021

Scopus (145)

( TITLE-ABS-KEY ( attitud* OR belief* OR bias* or AND discriminat* OR internal* OR opinion* OR prejudic* OR perception* ) AND TITLE-ABS-KEY ( lgb* OR gay OR homosexual* OR bisexual* OR lesbian* OR pansexual* OR asexual* OR trans* OR "mak nyah" OR genderfluid* OR intersex* OR queer OR "sexual orientation" OR "sexual identity" OR "sexual minority" OR "gender identity" OR "gender minority" OR "men who have sex with men" OR msm ) AND TITLE ( malaysia* ) ) AND PUBYEAR > 2010

Malaysian Citation Index (36) When the attitude list was inserted as keywords in the MCI, the results returned as 3. Hence, a decision was made to expand the search by inserting the attitude list in “all fields.”

@art_title (Attitud*) | @art_abstract (Attitud*) | @art_keywords (Attitud*) | @art_title_others (Attitud*) | @art_abstract_others (Attitud*) | @art_keywords_others (Attitud*) | @journal_name (Attitud*) | @author_name (Attitud*) | @institution (Attitud*) | @art_pub_year (Attitud*) | @art_title (Belief*) | @art_abstract (Belief*) | @art_keywords (Belief*) | @art_title_others (Belief*) | @art_abstract_others (Belief*) | @art_keywords_others (Belief*) | @journal_name (Belief*) | @author_name (Belief*) | @institution (Belief*) | @art_pub_year (Belief*) | @art_title (Bias*) | @art_abstract (Bias*) | @art_keywords (Bias*) | @art_title_others (Bias*) | @art_abstract_others (Bias*) | @art_keywords_others (Bias*) | @journal_name (Bias*) | @author_name (Bias*) | @institution (Bias*) | @art_pub_year (Bias*) | @art_title (Discriminat*) | @art_abstract (Discriminat*) | @art_keywords (Discriminat*) | @art_title_others (Discriminat*) | @art_abstract_others (Discriminat*) | @art_keywords_others (Discriminat*) | @journal_name (Discriminat*) | @author_name (Discriminat*) | @institution (Discriminat*) | @art_pub_year (Discriminat*) | @art_title (Internal*) | @art_abstract (Internal*) | @art_keywords (Internal*) | @art_title_others (Internal*) | @art_abstract_others (Internal*) | @art_keywords_others (Internal*) | @journal_name (Internal*) | @author_name (Internal*) | @institution (Internal*) | @art_pub_year (Internal*) | @art_title (Opinion*) | @art_abstract (Opinion*) | @art_keywords (Opinion*) | @art_title_others (Opinion*) | @art_abstract_others (Opinion*) | @art_keywords_others (Opinion*) | @journal_name (Opinion*) | @author_name (Opinion*) | @institution (Opinion*) | @