



Health, Rights, and Recognition: LGBTQIA+ Advocacy in South Asia: Call for Action

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ABSTRACT

This article explores the complex intersection of health, human rights, and legal recognition for LGBTQIA+ individuals in South Asia. Despite global progress in LGBTQIA+ advocacy, many South Asian countries still rely on outdated colonial-era laws that criminalize same-sex relationships and fail to protect sexual and gender minorities from discrimination. While nations like India (2018), Nepal (2015), and Bhutan (2021) have taken steps toward legal recognition, widespread social stigma and a lack of enforcement continue to marginalize LGBTQIA+ communities. The article highlights how legal invisibility and societal prejudice contribute to health disparities, especially in mental health, HIV prevention, and access to gender-affirming care. Drawing from reports by Human Rights Watch, UNAIDS, and ILGA Asia, the article presents evidence that LGBTQIA+ individuals in the region frequently face discrimination in healthcare, with many avoiding treatment due to fear of judgment or legal repercussions. In response to these systemic issues, the article calls for urgent reforms, including the decriminalization of same-sex relationships in countries where such laws remain, the implementation of anti-discrimination protections, inclusive healthcare policies, provider training, and increased community participation in policymaking. It emphasizes that safeguarding LGBTQIA+ rights is not only a legal necessity but also a



public health imperative. By addressing these long-standing gaps, South Asian nations can move toward a more inclusive and equitable society where everyone, regardless of their gender identity or sexual orientation, can live with dignity and access essential services without fear or prejudice.

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Introduction

According to world health organization the LGBTIQ+ health is refers to the physical, mental, and emotional well-being of people who identify as lesbian, gay, bisexual, transgender, intersex or queer. In South Asia, the individuals of the LGBTQIA+ community continue to face different problems, and there are systemic barriers to accessing equitable healthcare, which is a great example of how deeply cultural, legal, and social inequalities are connected. The discourse surrounding LGBTQIA+ rights in South Asia presents a complex tapestry woven from diverse cultural, legal, and socio-political threads. The region, comprising countries such as India, Pakistan, Nepal, Bangladesh, Sri Lanka, Bhutan, the Maldives, and Afghanistan, is characterized by deep-rooted traditional values and social norms that have historically marginalized sexual and gender minorities. Despite such entrenched challenges, the last decade has witnessed important legal advancements and growing social awareness about LGBTQIA+ issues in several countries. Notably, landmark judicial interventions such as the Supreme Court of India's decriminalization of consensual same-sex relations in the landmark *Navtej Singh Johar v. Union of India* case have marked a turning point in the legal recognition of LGBTQIA+ rights in the subcontinent (SC Observer, 2022). This ruling not only invalidated Section 377 of the Indian Penal Code but also symbolized a broader challenge to societal discrimination, setting a precedent for human rights advocacy in the region.

In Pakistan, LGBTQIA+ communities continue to face significant legal and societal obstacles. Homosexuality remains criminalized under colonial-era laws, and widespread social stigma exacerbates the marginalization and invisibility of queer individuals (Khan, 2023). The intersection of conservative cultural norms and religious doctrines further complicates efforts toward achieving equality and protection. Nonetheless, grassroots activism and digital platforms have started to carve out spaces for dialogue and visibility, suggesting cautious optimism for future progress.



Afghanistan's situation is particularly dire for LGBTQIA+ individuals. The return of Taliban rule in 2021 led to the rapid erosion of basic human rights and freedoms, with sexual and gender minorities facing severe persecution, criminalization, and threats to their lives (Freiheit Institute, 2023). The Taliban's strict interpretation of Islamic law explicitly punishes same-sex relations, often with capital punishment, creating an environment of extreme fear and invisibility for queer communities. Many LGBTQIA+ Afghans have been forced into hiding, exile, or face constant risk of violence, making Afghanistan one of the most hostile environments for LGBTQIA+ rights in the region.

Beyond legal frameworks, the lived experiences of LGBTQIA+ individuals in South Asia are often shaped by limited access to healthcare, education, and social services, contributing to heightened vulnerability and health disparities (Shrestha, 2023). Discrimination and violence persist as critical barriers that undermine the well-being and dignity of queer populations. Research underscores the need for inclusive public health policies and targeted interventions that address these systemic inequities (Freiheit Institute, 2023). The ongoing struggle for LGBTQIA+ rights in South Asia thus reflects a broader global narrative of resistance, resilience, and the quest for recognition. This article aims to critically examine the status of LGBTQIA+ rights across the region, exploring both the opportunities emerging from recent legal reforms and the persistent challenges posed by societal attitudes and institutional barriers. By understanding the socio-legal landscape and highlighting the voices of marginalized communities, the discussion seeks to contribute to a deeper understanding of the dynamics that influence queer rights movements in South Asia and to advocate for sustained efforts toward equity and inclusion.

Historical Context and Legal Frameworks

Colonial Legacy and Criminalization

A key driver of these inequities is the criminalization of same-sex relationships, a legal relic from colonial-era penal codes. For instance, Section 377 of the Indian Penal Code, which was partially repealed in 2018 in India (SC Observer, 2022), still forms the basis for similar laws in Bangladesh and Sri Lanka, criminalizing consensual same-sex relationships. These laws perpetuate stigma and create an environment of fear, discouraging LGBTQIA+ individuals from seeking healthcare. The persistence of such colonial-era laws underscores the need for comprehensive legal reforms across the region. Colonial-era laws were introduced primarily to impose Victorian moral values on colonized societies,



framing non-heteronormative relationships as "unnatural offenses." The impact of these laws extended beyond criminalization; they institutionalized systemic discrimination that persists today.

Limited Legal Protections

While some countries have taken steps toward recognizing LGBTQIA+ rights, the legal protections remain piecemeal and inadequate. For example, Nepal's 2015 Constitution is one of the most progressive in the region, recognizing sexual and gender minorities and granting them fundamental rights. However, implementation has been inconsistent, and many LGBTQIA+ individuals report persistent discrimination and inadequate healthcare access. Similarly, Pakistan's Transgender Persons (Protection of Rights) Act, 2018, provides significant legal protections but faces substantial implementation challenges due to societal resistance and weak enforcement mechanisms. Despite these progressive legislations, challenges remain unaddressed.

In Nepal, for instance, procedural delays in issuing citizenship documents reflecting gender identity have caused significant hardships for transgender individuals seeking healthcare. Similarly, in Pakistan, the resistance to implementing the Transgender Persons Act highlights the gap between legislative intent and societal readiness. ILGA Asia reveals that less than 30% of LGBTQIA+ individuals in Pakistan feel that legal protections translate into real-world safety or accessibility. In Pakistan, LGBTQIA+ individuals continue to face significant legal and societal risks due to the absence of protective laws and the presence of punitive ones. Same-sex sexual activity remains criminalized under Sections 377 and 294 of the Pakistan Penal Code, which date back to British colonial rule. These laws are used to target individuals perceived to be engaging in same-sex relationships or non-conforming gender expression. Although enforcement may be inconsistent, the mere existence of these laws fosters a climate of fear and vulnerability (ILGA World 2025).

While Pakistan passed the Transgender Persons (Protection of Rights) Act in 2018, granting certain legal rights and recognition to transgender individuals, the broader LGBTQIA+ community, including lesbian, gay, and bisexual individuals, remains legally unprotected and socially marginalized.



Country	Same-Sex Sexual Activity	Same-Sex Marriage	Anti-Discrimination Laws	Transgender Rights	Adoption Rights	Notes
India	Legal (since 2018)	Not legal	Partial (only in the workplace)	Recognized as a third gender; Transgender Persons Act 2019	No (some exceptions for single LGBT persons)	Strong civil society activism; marriage case pending in the Supreme Court
Nepal	Legal	Constitutionally open to it (not yet implemented)	Broad protections under the Constitution	Third gender recognized	Ambiguous	One of the most progressive in South Asia
Bangladesh	Illegal	Not legal	No	Third gender recognized (2014), but social stigma is high	No	Penal Code 377 still applies; a crackdown on LGBTQIA+ groups
Pakistan	Illegal	Not legal	No	Transgender Persons Act 2018 recognizes rights	No	Trans rights are relatively progressive, but same-sex acts are criminalized
Sri Lanka	Illegal (but rarely enforced)	Not legal	No	No formal recognition	No	Decriminalization under discussion
Bhutan	Legal (decriminalized in 2021)	Not legal	No	No legal recognition yet	No	Emerging LGBTQ+ movement



Maldives	Illegal (under Sharia law)	Not legal	No	No recognition	No	Highly conservative, very limited rights
Afghanistan	Illegal	Not legal	No	No recognition	No	LGBTQIA+ individuals face severe persecution under Taliban rule

Table: legal status and rights of LGBTQIA+ individuals in south Asian countries

(ILGA World. (n.d.). ILGA World Database).

Gaps in Legal and Policy Frameworks: Criminalization of LGBTQIA+ Identities

Laws criminalizing same-sex relationships persist in countries like Bangladesh, Sri Lanka, and Pakistan, creating an environment of fear and exclusion. These laws not only violate fundamental human rights but also undermine public health efforts by discouraging LGBTQIA+ individuals from accessing healthcare services. For instance, fear of prosecution deters many individuals from seeking necessary medical care, including HIV testing and treatment, further exacerbating health disparities.

Inadequate Anti-Discrimination Protections

Anti-discrimination laws that explicitly protect LGBTQIA+ individuals are absent in most South Asian countries. This legal vacuum leaves LGBTQIA+ individuals vulnerable to discrimination in healthcare, employment, education, and housing. The absence of such protections perpetuates systemic inequalities and reinforces social stigma. According to a report by Human Rights Watch, 78% of LGBTQIA+ individuals in South Asia have experienced discrimination in healthcare settings. While there have undoubtedly been signs of legal and social progress in select South Asian countries, the broader regional landscape continues to be characterized by a troubling absence of robust legal safeguards to protect LGBTQIA+ individuals from discrimination and harm. In the absence of comprehensive anti-discrimination laws, many individuals across the spectrum of sexual orientations and gender identities remain highly vulnerable to systemic marginalization in nearly every facet of life, including education,



healthcare, employment, housing, and legal recourse. Without legal protection, many face the constant risk of social ostracization, police harassment, familial rejection, and even physical violence.

Lack of Inclusive Healthcare Policies

Healthcare systems in South Asia often fail to recognize or meet the unique needs of LGBTQIA+ populations. Most national health programs are designed for the general population and do not include specific services for LGBTQIA+ individuals. As a result, important areas such as mental health care, HIV prevention, and gender-affirming healthcare are often neglected. For instance, men who have sex with men (MSM) and transgender individuals face higher risks of HIV infection, but they are frequently left out of national strategies due to stigma and criminalization. UNAIDS (2023) notes that fear of discrimination and legal repercussions prevents many LGBTQIA+ individuals from seeking HIV testing and treatment, increasing the vulnerability of these communities.

A significant barrier to inclusive healthcare is the lack of adequate training among healthcare providers. Human Rights Watch (2022) found that over 60% of healthcare professionals in South Asia lack even basic knowledge about LGBTQIA+ health concerns, contributing to experiences of discrimination in clinical settings. As a result, many LGBTQIA+ individuals avoid hospitals and clinics, fearing mistreatment or bias.

Furthermore, access to gender-affirming care is extremely limited. In India, some states have introduced subsidies for gender-affirming surgeries, but these programs are small-scale and difficult to access due to bureaucratic obstacles and poor awareness.

Health Disparities Among LGBTQIA+ Communities

Healthcare access for LGBTQIA+ individuals in South Asia remains a significant public health and human rights challenge. Despite some legal progress, most countries in the region continue to face deep-rooted stigma, discrimination, and systemic barriers that prevent queer individuals from accessing safe, inclusive, and equitable healthcare.

One of the major issues is the lack of sensitization among healthcare providers. Medical professionals often have little to no formal training in LGBTQIA+ health, leading to misdiagnosis, pathologization of queer identities, or outright refusal of care. Transgender and non-binary individuals, in particular, face



frequent harassment, denial of gender-affirming care, and are often forced to undergo invasive procedures to "prove" their identities.

Social stigma and fear of being outed prevent many LGBTQIA+ people from seeking healthcare in the first place. In conservative societies like Pakistan, Bangladesh, and Sri Lanka, being open about one's gender or sexual identity can lead to violence, family rejection, or even criminalization. As a result, many LGBTQIA+ individuals suffer in silence, leading to delayed diagnosis and treatment of physical and mental health conditions.

Mental health problems are particularly acute, driven by chronic stress, discrimination, and lack of psychosocial support. Queer individuals in South Asia are at increased risk for depression, anxiety, substance use disorders, and suicidal ideation — yet most mental health professionals in the region are not trained to work with LGBTQIA+ clients in a culturally competent and affirming way. Cultural and societal factors further compound these challenges. South Asian societies often uphold traditional gender roles and heteronormative values, marginalizing individuals who do not fit in. Stigma and discrimination manifest in various forms, including family rejection, workplace discrimination, and violence against LGBTQIA+ individuals. Such exclusionary practices directly impact mental health, contributing to high rates of depression, anxiety, and suicidal ideation within the community. Mental health disparities are often exacerbated by a lack of inclusive mental health services and culturally competent healthcare providers

Structural barriers also include limited legal protections. While countries like India have decriminalized same-sex relationships, legal rights such as marriage equality, anti-discrimination laws, and inclusive healthcare policies remain absent or weakly implemented. In Afghanistan and parts of Pakistan, homosexuality remains criminalized, forcing LGBTQIA+ individuals to live underground, without any access to supportive healthcare.

The HIV/AIDS epidemic disproportionately affects LGBTQIA+ populations in South Asia, particularly men who have sex with men (MSM) and transgender individuals. Despite global progress in combating HIV/AIDS, legal barriers and stigma in South Asia hinder effective prevention and treatment efforts. UNAIDS reports that criminalization of same-sex relationships and societal stigma deter individuals from seeking HIV testing and treatment services, contributing to higher infection rates. For example, India accounts for nearly 2.4 million people living with HIV, with MSM comprising a significant proportion of new cases annually. Targeted interventions, such as community-based HIV testing and



counselling centres, have proven effective in reducing infection rates. However, the lack of similar initiatives in other South Asian countries highlights the regional disparity in addressing LGBTQIA+ health concerns. According to the National AIDS Control Organization, which is currently in phase V following UNAID guidelines of 95% 95% 95%, India has achieved a 46% reduction in new HIV infections since 2010, a success attributed to targeted interventions for key populations (NACO Report 2020).

There are also gaps in health data and research. Without reliable, disaggregated data on LGBTQIA+ health needs, policymakers struggle to design effective interventions. This invisibility reinforces the cycle of neglect. Despite these challenges, grassroots organizations and queer-led NGOs across the region are working to fill the gaps; offering community clinics, mental health support, and HIV/AIDS prevention services tailored to LGBTQIA+ individuals

Recommendations: *A Call to Action for South Asian Countries*

Despite growing awareness and small legal victories in parts of South Asia, LGBTQIA+ individuals continue to face deep-rooted social stigma, discrimination, and structural inequalities. The region's shared colonial histories, conservative cultural values, and varying degrees of legal recognition have made it difficult for many LGBTQIA+ people to live with dignity and access essential services. To ensure justice, equity, and health for LGBTQIA+ individuals, South Asian countries must adopt inclusive, rights-based approaches. The following recommendations aim to guide governments, civil society, healthcare providers, and regional stakeholders in creating a safer and more inclusive South Asia for all.

Decriminalization of Same-Sex Relationships

One of the most fundamental steps toward equality is the complete decriminalization of consensual same-sex relationships. While India has repealed Section 377 of the Indian Penal Code, similar colonial-era laws remain in force in several South Asian countries, including Pakistan, Bangladesh, and Sri Lanka. These laws do not just criminalize LGBTQIA+ individuals—they legitimize discrimination, incite violence, and prevent people from seeking healthcare, justice, or social support. South Asian governments must repeal such discriminatory laws and ensure that LGBTQIA+ identities are not treated as criminal offences. Alongside legal reform, public education campaigns must be introduced to raise awareness, dispel myths, and reduce backlash by promoting respect for diversity.



Comprehensive Anti-Discrimination Legislation

Decriminalization alone is not enough. There must be robust anti-discrimination laws that explicitly protect individuals from being treated unfairly based on their sexual orientation, gender identity, or gender expression. These protections should extend across key areas such as healthcare, employment, education, housing, and public services. Clear legal pathways should be established for LGBTQIA+ individuals to report abuse, denial of service, or violence, with dedicated bodies to investigate and resolve complaints. Without legal protection, many people remain vulnerable to exclusion and exploitation.

Inclusive and Responsive Healthcare Policies

LGBTQIA+ communities in South Asia face unique health challenges, including higher risks of mental health conditions like depression and anxiety, increased vulnerability to HIV, and limited access to gender-affirming healthcare. National health policies must be revised to include inclusive programs that cater to the specific needs of these populations. Services like mental health counselling, STI testing, hormone replacement therapy, and gender-affirming surgeries must be integrated into public healthcare systems. Governments must ensure that LGBTQIA+ individuals can access these services without fear of judgment or discrimination.

Training for Healthcare Professionals

Bias and lack of awareness among healthcare professionals continue to be major barriers to care. Mandatory LGBTQIA+ sensitivity and inclusivity training should be introduced for doctors, nurses, and all allied health professionals. Training should cover topics like using correct pronouns, respecting gender identity, offering gender-affirming care, and addressing mental health needs specific to LGBTQIA+ people. These trainings must be embedded into the curriculum of medical and nursing schools to build a new generation of compassionate and competent healthcare providers.

Financial Support for Gender-Affirming Care

In many South Asian countries, gender-affirming healthcare is either not available in public hospitals or too expensive in private settings. As a result, many transgender and non-binary individuals face severe mental distress and financial burden. Governments should allocate funding to subsidize gender-affirming treatments, including hormone therapy, surgeries, and mental health support. Both public and



private insurance providers should be required to cover these services, recognizing them as essential healthcare rather than elective procedures.

Nationwide Public Awareness Campaigns

Public perception plays a critical role in shaping policy and societal behavior. South Asian countries should invest in nationwide campaigns to educate people about LGBTQIA+ identities, human rights, and equality. Using radio, television, social media, and community outreach, these campaigns should work to normalize diversity, reduce stigma, and promote empathy. Collaborating with local influencers, artists, religious leaders, and educators can help reach various audiences and build more inclusive communities.

Regional Collaboration and Solidarity

The challenges faced by LGBTQIA+ individuals in South Asia are often similar due to shared histories and cultural influences. Regional cooperation between countries like India, Nepal, Bangladesh, Pakistan, and Sri Lanka can promote knowledge exchange and build collective strategies. Cross-border summits, dialogues, and workshops should be organized to share best practices, legal reforms, healthcare models, and data collection strategies. South Asian regional bodies, such as SAARC, should formally include LGBTQIA+ rights in their agendas and frameworks.

Meaningful Inclusion in Policymaking

Policy decisions should not be made *for* LGBTQIA+ communities—they should be made *with* them. Governments and institutions must include LGBTQIA+ voices in decision-making spaces through advisory boards, focus groups, and formal consultations. Community members and activists should be empowered to lead program design, monitoring, and evaluation. Supporting grassroots LGBTQIA+ organizations with funding, training, and institutional recognition will ensure that policies respond to real needs on the ground.

Data Collection and Research

One of the biggest challenges in promoting LGBTQIA+ rights is the lack of reliable data. Governments must include questions on sexual orientation and gender identity in national surveys, censuses, and health assessments. Research, both qualitative and quantitative, should be encouraged to understand the health, education, and economic conditions of LGBTQIA+ individuals to understand the situation in a



more comprehensive way. Reliable data is essential to identify gaps, monitor progress, and create policies that are truly inclusive.

Monitoring, Evaluation, and Accountability

Laws and policies will only be effective if there are strong systems in place to implement and monitor them. Independent bodies should be established to evaluate the enforcement of LGBTQIA+-inclusive laws, track budget allocations, and assess whether services are being delivered effectively. Transparent reporting, regular progress reviews, and space for community feedback will strengthen accountability. Governments must show their commitment not only through legislation but also through consistent, measurable action.

Conclusion

Governments and stakeholders must prioritize the inclusion of LGBTQIA+ individuals in all spheres of society, particularly in the healthcare system. This requires revising legal frameworks to ensure that LGBTQIA+ rights are protected by the law. Laws that criminalize same-sex relationships or gender non-conformity contribute to the stigma and discrimination that this community faces. Decriminalizing same-sex relationships and enacting anti-discrimination laws are fundamental steps toward creating a more inclusive environment where LGBTQIA+ individuals can access healthcare and live without fear of legal repercussions. In conclusion, by implementing these comprehensive strategies, South Asia can work toward creating a more inclusive and equitable society that prioritizes the health and rights of LGBTQIA+ populations. With sustained commitment from governments, healthcare providers, and civil society, it is possible to address the deep-seated inequalities that persist and ensure that LGBTQIA+ individuals are given the resources and opportunities to lead healthy, fulfilling lives.

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