

Psychological problems caused by China's overly conservative attitudes towards homosexuality

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Abstract. With the increase in research on homosexuality, more and more countries and regions are beginning to recognise and accept lesbian, gay, bisexual and transgender (LGBT) minorities and to care about their legal rights and physical and mental health. As there is less research on homosexuality in China, this paper sets the scope of the study to China, targeting the heart and health problems caused by the overly conservative attitude towards homosexuality in China. To a certain extent, it enriches the research on homosexual mental health in China, and also gives some suggestions to solve homosexual mental illness. Using case studies, literature research and data analysis, the paper concludes that understanding the risks of the disease and reducing social oppression are important factors in improving the mental health of homosexuals and that university education can help to eliminate prejudice and discrimination against homosexuals, thereby protecting the mental health of homosexuals.

Keywords: homosexuality; mental health; gender minority group; LGBT minority.

1. Introduction

With numerous domestic and international scholars studying homosexual behaviour, people's knowledge and understanding of homosexuality are becoming clearer. As a result, around the world, various groups have chosen to speak out for the LGBT+ community, fighting for their relevant rights and caring for their physical and mental well-being. The legal situation of lesbian, gay, bisexual, and transgender (LGBT) rights is broad and highly diverse across the spectrum. Some countries recognise same-sex marriage or other forms of same-sex unions and see LGBT people as part of the diversity of the human community, while others outlaw same-sex sexual activity or cross-dressing and impose penalties such as imprisonment or even the death penalty. In China, however, there is relatively little research on homosexuality due to the long absence of an accurate definition of homosexuality, of which the issue of mental health in relation to homosexuality has not yet been addressed by too many researchers. This paper examines the psychological problems caused by the overly conservative attitudes towards homosexuality in China. By examining case studies, reading past literature, and analysing survey data and models, this paper finds that although the proportion of homosexuals in China is small, the base is large, so understanding the risks of disease and reducing social oppression is crucial to improving the mental health of homosexuals. At the same time, university education and the environment can help to eliminate prejudice and discrimination, further protecting the mental health of homosexuals. This paper goes some way to enriching the research in this area in China, as well as offering suggestions for addressing the mental health of the LGBT+ community in China.

2. How Stereotypes in Different Social Contexts Influence Gender Minority Groups' Mental Health

Homosexuality is a fundamental pattern of behaviour that has been prevalent throughout human history and across cultures, whether in highly developed industrial societies or primitive tribes, today in the 21st century or in ancient times. Research has shown that although homosexuals are a minority of the Chinese population, their absolute numbers are significant, especially as homosexuality is a cross-cultural and pervasive phenomenon [1]. In China, homosexuality is not a crime nor officially recognized as a disease. However, homosexuality has not had an accurate definition and legal

definition in China for a long time, yet at the same time, homosexuals have been subject to public criticism. Since 1989, Wang Xiaobo and Li Yin have been researching homosexual men in China and have published a book, *Their World*, based on their findings. Having gained an in-depth understanding of the real life of the gay community, Wang and Li openly suggested that homosexuality and heterosexuality both are natural phenomena [2]. He called the phenomenon of fraudulent homosexuality an "ugly phenomenon." However, before the public had a chance to see the homosexual community properly, AIDS was discovered in China, and there was more prejudice against the homosexual community, homosexuality began to be stigmatised, and many scholars even discussed the morality of homosexuality. In 1997, Chinese law gave homosexuality a clear position and abolished the crime of hooliganism, which vaguely criminalized same-sex sexual activity.

Moreover, in 2001, the Chinese Medical Association's Psychiatry Branch removed "self-concordant homosexuality" from its diagnostic guidelines. Since then, homosexuality has not been a crime in China and is no longer considered a disease or mental illness. Even though homosexuality is not criminalized by law and is not officially considered a mental illness, homosexuality is still not respected in China, and there are cases of people being forced to undergo sexual orientation reversal therapy or training and being sent to psychiatric hospitals [3,4]. For instance, a young man reveals his experience of seeing a psychiatrist. His psychiatrist told his mother that homosexuality was no different from any other mental illness, such as depression, anxiety, or bipolar disorder, and told the young man to stay for treatment [5]. Homosexuality is still seen by some people, and even by some doctors, as a disease, and "reversal therapy" is offered for homosexuality. Research shows that sexual minorities have lower levels of mental health than heterosexual groups. Sexual minorities are at greater risk for depression, anxiety, substance abuse and dependence, suicidal behaviour, risk-taking sexual behaviour, health conditions, etc. [6].

On September 10, 2022, during China's Mid-Autumn Festival, Yan Gao, a 19-year-old male student at the Shandong Academy of Arts Dance School, committed suicide at his parents' home. After Gao's suicide, his family looked through his mobile phone chat logs to find out the truth. In the records, Gao claimed that he was going to write a suicide note and that he was going to state in it that his teacher was the direct cause of his death. Gao claimed to have been discriminated against and suppressed by his class teacher and this outstanding dancer who could have been on the stage of China's 2022 Spring Festival Gala had been placed in a poor class because of his dance level (students in China are divided into classes based on their grades, with the top students in a class with the top students and vice versa). Eventually, he mentions that he likes men and is homosexual. He felt himself an outlier in the crowd and ostracised by teachers and others at school. The pressure he felt eventually led him to commit suicide to end his life. Sexual orientation is not the main cause of mental health problems; rather, it is the environmental response triggered by a sexual orientation that increases this risk [6]. The non-supportive school environment harmed the school life of the GLBT group, such as absenteeism, violation of school rules, less participation in school activities, lower academic achievement and substance abuse, suicidal tendencies and depression, and low self-esteem [7].

3. Analysis

In order to better understand the factors that influence health and the variations in health in China, a study was conducted using data from the Chinese General Social Survey (CGSS) in 2005, 2008, and 2013 [8]. Individual and contextual factors that were shown to affect self-reported health status were initially examined using an ordinal complementary log-log model. Differences in health status between subgroups were also analysed in light of the determinant model's findings [8]. Gender, race, social position, emotional state, geographical location, and time of day played significant roles. These health factors influence one another, as evidenced by the fact that the health status of research-related subgroups is affected differently by various health determinants [8]. Even while personal and social variables are typically the most influential in determining health status, it was discovered that different groups in China have varied requirements to maintain and improve their health [8].

Healthcare access and affordability must be prioritized in China's public policy, according to a new analysis, to enhance the country's health and narrow the health gap [8].

3.1. The origin of categorisation

Knowledge from the past is used to categorise ideas. Homosexual communities aid people in making sense of their environment, but at the same time, they simplify matters too much [9]. The creation of stereotypes is an inevitable by-product of humans' innate tendencies toward simplification [9]. It is difficult to tell if a person's preconceived notions aid or hinder their capacity to make sense of the world because they cannot think without categories [9]. People believe that if they were placed in the same social group, it must be because they share some essential characteristics. Because of this, generalizations about the group's members are possible [9].

An article by Sue-Lin Wong and Jason Lee highlights LGBT parents in China who are breaking taboos [10]. To a triplet donor mother, being born in China during a rapid transformation is a huge blessing. She claims that she would not be alive today if she had been born during the Cultural Revolution; therefore, things are much better now [10]. It is nevertheless a common practice to categorize people based on factors including ethnicity, sex, and gender that have no bearing on their ability to succeed or flourish [11]. As a result of discrimination or bias based on a person's identity or background, many people feel marginalized and are forced to withdraw from society. When persons are subjected to bias, they face barriers to full social inclusion [11]. It has a bearing on people's odds, choices, and results, all of which contribute to their standard of living. The United Nations is fighting discrimination because it violates human rights. The United Nations' stated mission includes encouraging "everyone to work together to promote and preserve human rights and basic freedoms for everyone, regardless of race, gender, language, or religion." [11].

3.2. Homosexuality as a risk factor for mental illness?

Research on the mental health of lesbian, gay, and bisexual (LGB) communities halted in the 1960s and early 1970s due to the controversy over whether homosexuality could be considered a mental disease [12]. A conservative viewpoint, which wished to label homosexuality a mental disease, squared off against an affirmative stance. Even though the debate over categorizing homosexuality was settled when it was removed from the Diagnostic and Statistical Manual of Mental Disorders in 1973, its ramifications are still being felt today. The historical anti-gay attitude and stigmatization of LGB persons have allowed for the gradual introduction of beliefs that LGB people are more prone to suffer mental health problems than heterosexual people [12].

However, a thorough examination of the data should reveal that the assumption that homosexuality is a mental problem has nothing to do with whether LGB people are more likely to have a mental illness [12]. A re-examination reveals that the argument's scientific explanation was founded on flawed reasoning. Whether or not homosexuality is a mental disorder has been a hot topic of discussion among scientists. This discussion was motivated by the inquiry, "Do many homosexuals experience mental health issues?" However, the study failed to address the central research topic [12]. The topic of whether or not homosexuality should be classified as a mental disorder is one of how things should be organized. The debate about what behaviours, ideas, and emotions constitute mental illness might yield insights. From a postmodernist perspective on scientific knowledge, this discussion of categorization is on the social construction of mental illness. Homosexuality was labelled by conventional wisdom and scientific consensus as "weird" emotions, ideas, and behaviours [12]. Therefore, the answer is contingent on a consensus among scientists and the general public, which is open to revision.

3.3. The risk factors for mental disorders in homosexual population

If the stress in society puts LGB persons at risk for excessive mental discomfort and disorders, then understanding this risk and the factors that mitigate stress and promote mental health is crucial [12]. Psychologists, public health professionals, and policymakers can use this knowledge to design

better preventative and intervention measures. Many studies have avoided discussing the mental health of LGB persons in the literature on psychiatric epidemiology to reduce stigma [12]. The removal of this vital subject matter was a direct result of this flawed methodology.

Recently, researchers have resumed their examination of the mental health of the LGB community [12]. This research demonstrates that gays and lesbians experience higher rates of mental health issues than their heterosexual counterparts. Substance abuse, mental health, and thoughts of suicide all fall within this category [12]. Researchers have linked mental health issues to the stressful social environment created by stigma, prejudice, and discrimination against members of stigmatized minority groups [12]. It clarifies why the LGB population experiences disproportionate mental health issues [12]. The term "minority stress" perfectly describes this conception. In the study, the researchers investigated the prevalence of mental illness through meta-analyses, which demonstrated that the prevalence of LGB individuals is larger than that of heterosexual individuals [12]. The researchers suggested a framework for considering how minority stress may account for the observed increase in disorder. Discrimination, the fear of rejection, staying hidden, covering up, internalized homophobia, and healthy coping mechanisms are all discussed in the model [12]. Using this theoretical framework, they assessed the current state of research, proposed avenues for further study, and analysed how their findings inform public policy.

China is concerned about the mental health of its ethnic minority populations because of its commitment to multiculturalism [13]. As time goes on, minority students in higher education receive more support. Members of China's ethnic minorities frequently face discrimination at work and in public. Both their ethnic pride and their view on life may suffer as a result of this [13]. Participants in a study on the relationship between perceived bias and mental health were Chinese university students from ethnic minority groups. The findings demonstrate that Chinese ethnic minority college student's mental health is negatively impacted by perceived bias in two ways: their ethnic identity and their optimism. A total of 54.9% of the predicted benefits of mediation materialized [12]. This study's focus on the Chinese cultural context suggests that feelings of discrimination can devastate a person's ability to see their ethnicity as a source of strength and possibility [13]. A sense of unfair treatment was a negative predictor of racial pride and future optimism. Both hope and the chain of hope effectively mediate the relationship between people's perceptions of their own bias and their subjective states of well-being. Ethnicity moderated the correlation between anti-discrimination sentiments and levels of hope. For college students from China's ethnic minority, the rejection-identification paradigm does not work because there is no significant relationship between perceived bias and mental health through ethnic identity [13].

Negative mental health outcomes are more common among those who identify as transgender or gender nonconforming (TGNC) due to their unique challenges as a marginalized [14]. People who belong to socially stigmatized minority groups often experience what is known as "minority stress." Research on TGNC persons in mainland China was analysed systematically to determine the most important findings [14]. The goal of the meeting was to pool the findings of previous studies on mental health disparities, identify areas of particular need, and generate novel research proposals that could inform clinical practice and policy. Twenty-eight quantitative and 2 qualitative papers were discovered [14]. The quantitative results demonstrated wide variations in respondents' perceptions of their mental health and the prevalence of depression, anxiety, substance use disorders, and stress [14]. In this community, self-injury and suicidal ideation are also widespread. Gender discrimination, difficulties accessing health care, a lack of social support, a drop in HIV preventive knowledge and awareness, and demographic factors like marital status, level of education, and gender identity were all contributors to mental disorder in both qualitative research [14]. The investigation also found no proof that mainland China's mental health and care regimens affirmed both sexes. The next step in eliminating transphobia and other negative cultural attitudes in mainland China will likely need a combination of educational and social-psychological interventions. The political and social ramifications of creating uniform guidelines for healthcare services available to transgender people

are considered [14]. The development of these specialized care programs and services will also necessitate funding efforts.

4. Current difficulties for LGBT population seeking mental support

Over 75 million people in China identify as lesbian, gay, bisexual, or transgender, according to a recent poll conducted across the country [14]. As a result of their sexual orientation, gender identity, or gender expression, members of sexual minority groups experience prejudice, discrimination, violence, and a dearth of psychological support. Sexual minorities experience greater rates of psychological distress, anxiety, depression, suicidal ideation, and substance addiction problems than do heterosexuals and cisgender people [15]. Recently, China has invested heavily in improving mental health services [15]. The mental health service has made considerable progress in minimizing the stigma associated with mental health issues and increasing access to treatment. Alternatively, expanding funding for China's counselling and psychotherapy programs would greatly assist patients who have mental issues [15]. Few options exist for people in China seeking help for mental health issues, including counselling and psychotherapy. In addition, patients have a poor understanding of mental health and rarely consult with professionals in this field [15]. As a result, the Chinese government and health officials have been making concerted efforts over the past 20 years to educate the public and eliminate stigma [15].

A cross-sectional study was conducted in China with 15,611 lesbian, gay, and bisexual individuals to determine how many participants disclosed their sexual orientation to others and how many participants had negative healthcare experiences [16]. There are several institutional and individual barriers in the healthcare system that LGBT people must overcome. In China, where non-heterosexuality is officially suppressed, and service providers generally overlook the needs of non-heterosexual persons, researchers conducted the first large-scale quantitative study on LGB people's experiences with health care [16]. Such a phenomenon is due to the lack of a comprehensive study on the experiences of LGB individuals with health care. Few empirical studies solely focus on gay men and HIV.

The United Nations Development Programme (UNDP) and other organizations conducted an online poll. Recruiting efforts employed a mix of snowball and targeted sampling to identify potential new employees [16]. However, in China, a totalitarian country with relatively little data on LGB persons, the nationwide cross-sectional study of 15,611 lesbian, gay and bisexual people in China was only possible thanks to an extraordinary cross-sector partnership [16]. 15,611 Chinese LGB people made up the study's sample. Population characteristics and healthcare experiences of LGB respondents were described using frequency statistics and descriptive data [16]. Researchers used Chi-square tests to compare and contrast the lives of LGB people defined by various demographic characteristics [16]. Seventy-five percent or more of respondents said they would disclose their sexual orientation to healthcare providers if asked [16]. As few as 5.7% of respondents reported being asked by a doctor or nurse about their sexuality. Eight percent of LGB poll respondents reported negative experiences with medical professionals [16]. Only 5.7% of LGB Chinese who sought help from a psychologist reported receiving conversion therapy due to their sexual orientation, gender identity, or gender expression [16].

According to the poll's results, medical professionals need to acquire more knowledge about the LGB community and its culture [16]. There should be laws, rules, and regulations, as well as clearly defined standards of behaviour and explicit procedures and practices, to prevent discrimination against LGB people in China's healthcare system [16]. Researchers found it important to stress that conversion therapy is prohibited in China. Studies of patients' paths to treatment shed light on how those struggling with physical and mental health seek care [17]. Studies of the prevalence of mental illness in China found that 24 percent of those with a diagnosis were affected in some way, 8 percent received some form of professional assistance, and 5 percent sought out the advice of a mental health practitioner [17]. Of those who sought medical attention, 41% had only been seen by general

practitioners or Chinese medicine specialists [17]. Assessing the paths used by patients to find care is crucial for enhancing China's mental health system.

5. Conclusion

Although homosexuals make up only a small proportion of the population in China, their absolute numbers are large, especially given that homophobia is a global phenomenon. Homosexuality is neither a punishable offence nor a medically recognised disease in China. However, for a long time, China has lacked a clear definition of homosexuality, both legally and otherwise, and homosexuals have been subject to strict scrutiny. If social pressure is putting LGB people at risk of serious mental disorders and illnesses, it is important to understand this risk and the factors that can reduce pressure and improve mental health. It is therefore important to continue to conduct further research into the social pressures that cause mental illness in homosexuality and what the risks are. At the same time, a growing body of research suggests that universities should do more to help students from underrepresented groups to succeed academically. The bias against ethnic minorities in China is a widespread problem in the workplace and in everyday life. Many people drop out of society because they feel insecure due to bigotry or discrimination based on their identity or place of origin. Those who suffer from discrimination and prejudice often find it difficult to integrate into society without facing additional challenges. Therefore universities should pay more attention to the mental health of their students and provide timely support. It is also important to promote awareness of homosexuality in order to improve the environment in which homosexuals live and to protect the mental health of homosexuals.

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