

# Report summary

## THE STATE OF SEXUAL VIOLENCE AGAINST ASEXUALS IN VIETNAM AND RELATED FACTORS

### 1. The Situation of Sexual Violence Among People on the Asexual Spectrum in Vietnam

Among the 442 respondents on the asexual spectrum who completed the survey, 58.4% reported having experienced at least one incident of sexual violence.

And among the reported victim, 53.7% of individuals on the asexual spectrum reported experiences of being solicited, pressured, or coerced into sexual activities (such as unwanted touching or sexual intercourse) against their will. In addition, a large proportion reported unwanted sexual physical contact (31.1%). These behaviors may include touching sensitive body parts or being forced to engage in sexual acts they did not consent to.

People on the asexual spectrum have also experienced new forms of sexual violence occurring in online spaces, including being asked or pressured to send explicit images or videos (5.1%). They have also reported being denied autonomy over contraceptive choices or having contraceptive methods intentionally sabotaged (1.4%).

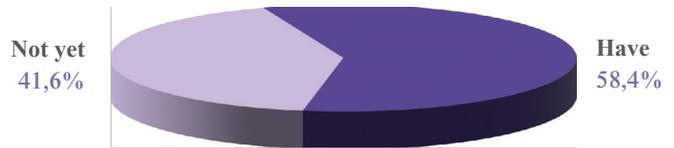


Chart 1. Experiences related to sexual violence among people of the Asexual spectrum (n = 442)

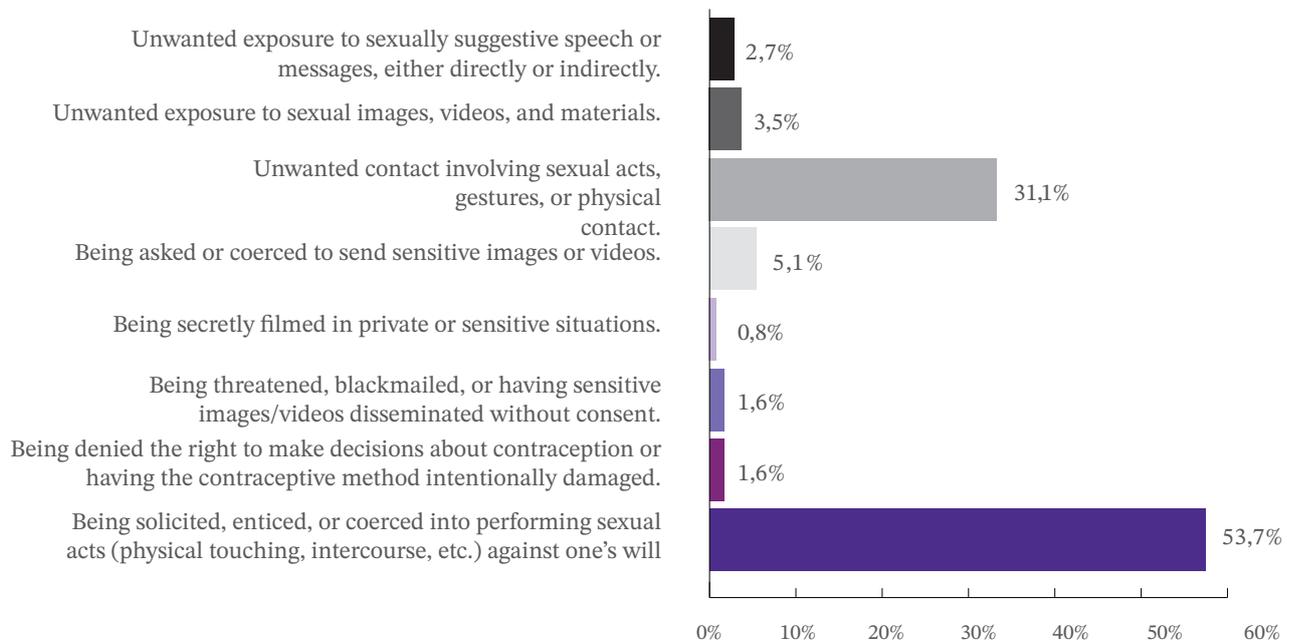


Chart 2. Forms of sexual violence experienced by survey participants (n = 258)

Notably, violence against asexual individuals often **does not occur solely as sexual violence**, but is intertwined with **other forms of violence**, such as psychological or physical abuse. Among the 442 participants, 34.5% reported experiencing one additional type of violence, 21.7% experienced two types, and 6.6% experienced all three forms of violence surveyed in addition to sexual violence.

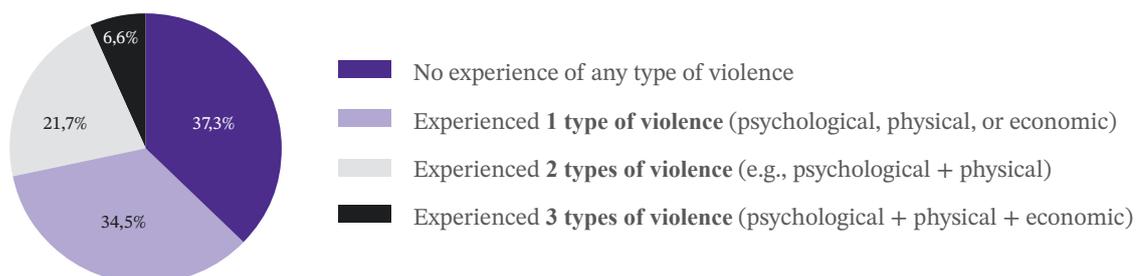


Chart 3. Number of types of violence experienced by survey participants (n = 442)

### 1.1. Perpetrators of Sexual Violence

Most incidents were committed by people unknown to the victims (37.3%), including individuals outside their close social circle such as former teachers, people met on social media, or strangers.

The data also indicate that two groups of people close to asexual individuals were responsible for sexual violence: Friends (16.5%), Romantic partners (15.8%).

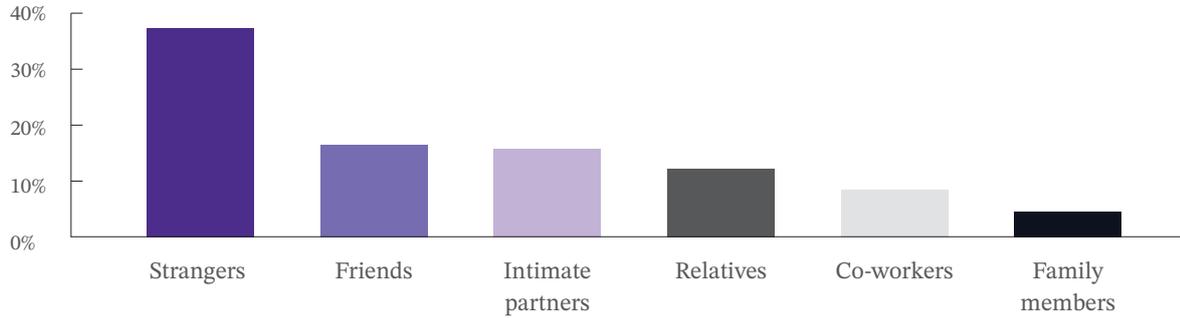


Table 4. Perpetrators of sexual violence (n = 258)

One asexual individual (VT11 - a 25-year-old cisgender woman on the asexual spectrum) recounted experiences of coercion and abuse from a colleague shortly after coming out: *“That colleague, after hearing me say that I was asexual, pretended to understand, but in reality, they didn’t. They tried to change me by, during a company outing when I was drunk, forcibly kissing me and groping me. Then they said they thought they could change me .”*

### 1.2. Locations Where Sexual Violence Occurs

Sexual violence against asexual individuals most frequently occurs in private spaces, including private homes, guesthouses, or hotels (34.4%), followed by public spaces such as supermarkets, parks, and public transportation (27.2%).

Another common setting is online spaces. One in five asexual individuals who experienced sexual violence reported that it occurred through online platforms or electronic communication (20.6%).

Table 1. Locations where sexual violence occurred (n = 258)

Location	n	%
1 Private spaces (homes, guesthouses, hotels, homestays, etc.)	152	34,4
2 Workplace	33	7,5
3 Educational settings	58	13,1
4 Public spaces (supermarkets, parks, public transport, etc.)	120	27,2
5 Social gathering spaces (interest groups, clubs, etc.)	37	8,4
6 Online spaces and electronic media	91	20,6
7 Other	5	1,1

### 1.3. Sexual Violence Intended to “Correct” or Change Sexual Orientation

Additionally, 40.2% of individuals on the asexual spectrum reported that perpetrators expressed pressure or intent to “fix” or “correct” them.

These “corrective” actions often come from romantic or dating partners. Such behaviors typically begin with disbelief in the legitimacy of asexuality and violations of personal boundaries, and may escalate into prolonged abuse combined with psychological violence.

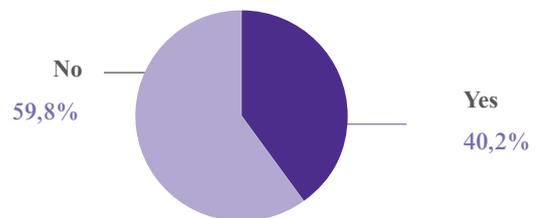


Chart 5. Percentage of asexual individuals pressured to change their sexual orientation (n = 258)

*“After many attempts at seduction and propositions that I refused, it gradually happened more and more often. I only vaguely remember, I really don’t remember why I agreed to have sex with them. It was almost like... I don’t know if they made me feel guilty or what, and I agreed to have sex with them, but there was nothing enjoyable about it. Throughout the whole process, I just lay on the bed, gritting my teeth, staring at the ceiling, wondering when this would end. After that, I went home and showered, I showered several times with soap, but I still felt very dirty.”* (VT01 - Non-binary, Asexual 21 years old recounting experience with their intimate partner)

## 2. Assessment of Help-Seeking After Experiencing Sexual Violence

Most respondents stated that they “did not feel it was necessary” (60.2%) or “did not trust the effectiveness of support services” (60.2%), reflecting a state of self-isolation driven by feelings of doubt, self-blame, or fear of being blamed.

When considering professional support services, many individuals faced additional barriers, including: Lack of information about support services (51.6% did not know where to seek help), Fear of identity disclosure (67.7%), High costs (34.4%), Stigma or prejudice from service providers themselves (61.3%)

Overall, psychological, familial, and systemic barriers overlap and reinforce each other, leading many victims to remain silent. This highlights the urgent need to develop sensitive, safe, and accessible support systems to break the cycle of isolation and silence faced by many asexual individuals in Vietnam after experiencing sexual violence.

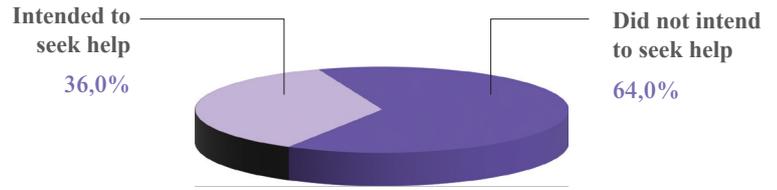


Chart 6. Intention to seek help after experiencing sexual violence (n = 258)

## 3. Mental Health of People on the Asexual Spectrum in Vietnam

Table 3. Distribution of psychological disorders among asexual individuals (n = 442)

Condition	n	%
Anxiety disorder	220	49,8
Depressive disorder	206	46,6
Post-traumatic stress disorder (PTSD)	64	14,5
No disorder	110	24,9
Other	100	22,6

Survey results on the psychological status of 442 participants show significant prevalence of mental health disorders.

- Anxiety disorders: 49.8%

- Depressive disorders: 46.6%

These findings reflect both the high prevalence and overlap of psychological difficulties experienced within the group

### 3.1. Depression, Anxiety, and Stress

Table 4. Levels of depression, anxiety, and stress according to the DASS-21 scale (n = 442)

Level	Depression		Anxiety		Stress	
	n	(%)	n	(%)	n	(%)
Normal	303	(68,6)	298	(67,4)	306	(69,2)
Mild	23	(5,2)	14	(3,2)	23	(5,2)
Moderate	43	(9,7)	39	(8,8)	41	(9,3)
Severe	22	(5,0)	27	(6,1)	48	(10,9)
Extremely severe	51	(11,5)	64	(14,5)	24	(5,4)

The study used the DASS-21 scale, which indicates that a considerable proportion of asexual individuals in Vietnam are facing an alarming burden of mental health disorders. The rates of severe and extremely severe depression, anxiety, and stress are significantly higher than estimates in the general population.

“It makes me feel more sensitive about who I am, about the physical aspects of my body, and I feel like I have to be more careful. I think it’s quite stressful” (VT06 - Transgender Asexual Male - 20 years old).

### 3.2. Suicide Risk (ASQ)

Most participants reported having experienced suicidal thoughts or behaviors to varying degrees, significantly higher than estimates in the general population.

Individuals who had experienced sexual violence had a higher average suicide risk score compared to those who had not.

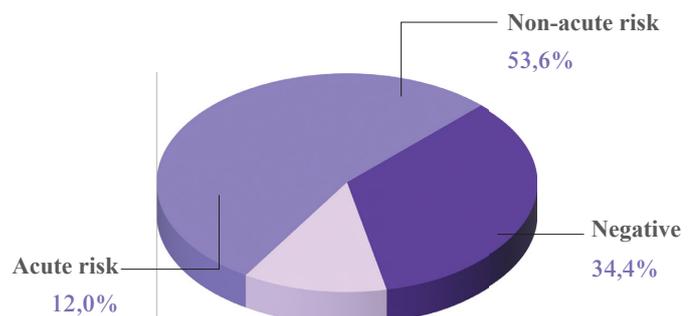


Chart 10. Suicide risk levels according to the ASQ scale (n = 442)

### 3.3 Post-Traumatic Stress Disorder (PTSD)

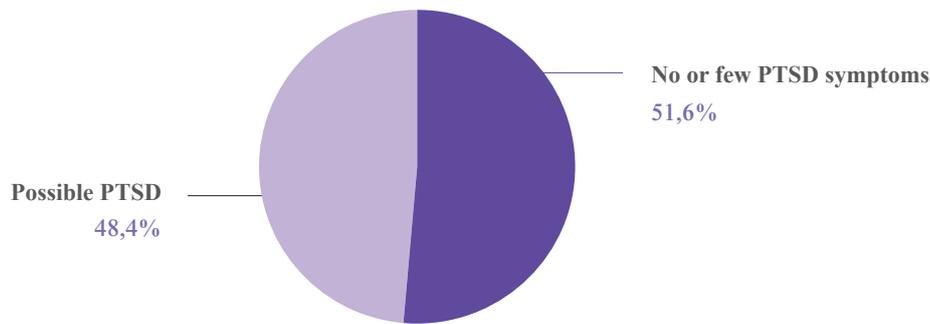


Chart 9. Frequency of PTSD symptoms among asexual individuals (n = 442)

Survey results show that among 442 asexual participants, 48.4% (n = 214) were identified as potentially experiencing PTSD, while 51.6% (n = 228) had few or no symptoms. Experiencing sexual violence increased the likelihood of PTSD symptoms by 1.61 times, while experiences of stigma and discrimination increased the likelihood by 1.86 times.

*“That feeling of panic? Yeah, it lasted a long time. I mean, as I said, it took me about two years to calm down. It wouldn’t come and go, it wouldn’t be constant, but rather in waves. You know, maybe when I’m happy, right? But then, after a certain period of time, those events would suddenly come flooding back, and I’d get scared and panic again.” (VT07 - demisexual Female - 22 years old)*

## 4. Prejudice, Stigma and Discrimination

More than half of participants (53.6%) reported experiencing stigma or discrimination related to their asexual orientation.

Common stereotypes faced by asexual individuals include:

51.6% were told they “just haven’t met the right person yet”

46.4% were told they must be lonely or incapable of love

43.4% heard statements such as “everyone eventually has to get married”

39.6% were labeled as having health or psychological problems

38.5% had their identity invalidated simply because they had previously had sexual experiences

One participant (VT04 - Non-binary, Asexual - 24 years old) shared: *“People will prefer the story if I’m non-binary, lesbian, gay... so that people see me as more integrated into the community... People will be more comfortable because it’s like I’m more clearly LGBT.”*

## 5. Recommendations

To support the community and improve the current situation, the research team proposes several recommendations:

- **Strengthen comprehensive support services:** Government agencies and organizations should develop gender-sensitive, safe, and accessible support services for victims of sexual violence, including psychological counseling, legal assistance, and medical care.
- **Increase social awareness:** Promote public communication and education about sexual diversity, including asexuality.
- **Strengthen the role of community and family:** Create more safe spaces for asexual individuals.
- **Continue research and data collection:** Increase resources for research and data on the asexual spectrum to ensure their representation in scientific evidence.