



Lived experiences and public perceptions of sexual and gender minorities in Kenya

1.0 Background

Lesbians, gays, bisexuals, transgender, queer, and other gender non-conforming (LGBTQ+) people in sub-Saharan Africa face identity-based violations of their human rights and injustices arising from stigma and discrimination across socioecological levels. In Kenya, the increasing prominence of LGBTQ+ activity is accompanied by the persistence of legal sanctions against same-sex behavior and the perpetuation of deep-seated cultural prejudices. These factors perpetuate harassment, discrimination, and acts of violence against individuals within the LGBTQ+ community. Furthermore, Kenya's Penal Code contains provisions that prohibit same-sex activities as an unnatural offence punishable by up to 14 years in prison. Religious and heteronormative social norms adversely affect the lives of LGBTQ+ individuals. However, there is inadequate data on the lived experiences of LGBTQ+ people.

To gain more insights into the situation for LGBTQ+ people in Kenya, the African Population and Health Research Center

(APHRC) implemented a mixed methods study to understand the lived experiences of LGBTQ+ people and the general public's perceptions of LGBTQ+ issues. We explored the current situation for LGBTQ+ people in terms of factors contributing to, and the nature and forms of social exclusion. Specific aspects examined in the study included daily experiences of stigma, discrimination, human rights abuses, the well-being of, and legal framework for LGBTQ+ people. The brief summarizes the findings of a 2022 study of the lived experiences of sexual and gender minorities across four Kenyan counties, namely, Nairobi, Eldoret, Kisumu, and Mombasa. The study highlights the impact of societal attitudes, health challenges, and access to support services for LGBTQ+ individuals across the four regions. In Kenya, the increasing prominence of LGBTQ+ activity is accompanied by the persistence of legal sanctions against same-sex behavior and the perpetuation of deep-seated cultural prejudices. These factors perpetuate harassment, discrimination, and acts of violence against individuals within the LGBTQ+ community.

2.0 The objectives of the study were to:

- 1 Examine LGBTQ+ people's experiences with policies and public discourse on sexual and gender minorities' issues.
- 2 Explore social, educational, security, and economic experiences of LGBTQ+ people and the implications of these experiences on their mental well-being.
- 3 Assess LGBTQ+ people's access to social welfare and comprehensive health care services.
- 4 Explore LGBTQ+ people's experiences managing their sexual and gender identities within the legal, social, and cultural norms in Kenya.
- 5 Capture the impact of COVID-19 and related response measures on the LGBTQ+ community.

3.0 Methodology

For the lived experiences study, we employed a mixed-methods approach, combining both qualitative and quantitative data collection techniques. Surveys and in-depth interviews were conducted with LGBTQ+ individuals to capture a wide range of experiences. Data collection occurred in urban and rural areas to ensure a diverse representation of the LGBTQ+ community in Kenya. The methodology also included key informant interviews (KIS) with stakeholders and service providers to gather insights on the availability and effectiveness of support services.

While for the public perceptions survey, we conducted a descriptive quantitative study in the four counties. We selected the counties based on the number of civil society organizations (CSOs) working with LGBTQ+ people in the counties. Eligible participants were aged 18 years and older, able to answer questions in either English or Kiswahili, and had resided in the area for at least a year. We targeted about 350 participants in each county.

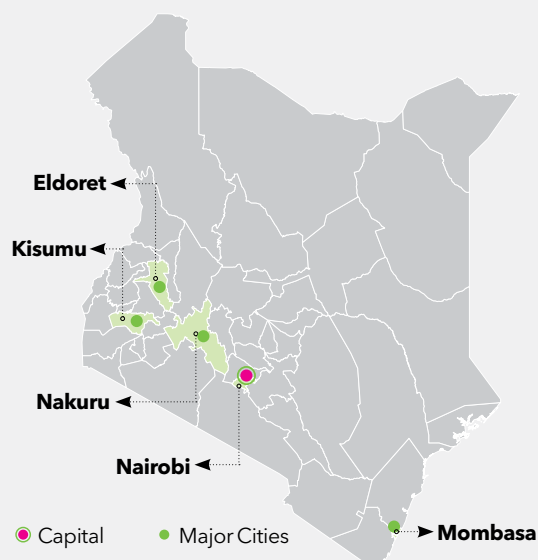


Figure 1. Study settings

4.0 Findings

Examination of sexual and gender minorities' lived experiences in Kenya

Overall, 58.5% of interviewees identified as homosexual, 39.4% as bisexual, 1.5% as heterosexual, and 0.6% as asexual. Regionally, there was a significant difference in the interviewees who identified as homosexual or asexual: Eldoret (58.5%), Kisumu (69.9%), Mombasa (51.6%), and Nairobi (56.8%). Concerning gender identity, 876 (55.2%) identified as cisgender males, 319 (20.1%) as cisgender females, 155 (9.8%) as non-conforming, 130 (8.2%) as transgender females, and 94 (5.9%) stated they were transgender males as seen in table 1.

Table 1

Characteristic N=1,587 ¹	Frequency (%)
Age (years)	
18-24	834 (52.7)
25-30	487 (30.7)
31-35	152 (9.6)
>35	111 (7.0)
Biological sex	
Female	442 (27.9)
Male	1,140 (71.8)
Other	5 (0.3)
Gender identity	
Cisgender (female)	319 (20.1)
Cisgender (male)	876 (55.2)
Non-conformers	155 (9.8)
Transgender (female)	130 (8.2)
Transgender (male)	94 (5.9)
Other (specify)	13 (0.8)
Sexual orientation	
Asexual	10 (0.6)
Bisexual	625 (39.4)
Heterosexual	24 (1.5)
Homosexual	928 (58.5)
County	
Nairobi	366 (23.1)
Eldoret	432 (27.2)
Kisumu	372 (23.4)
Mombasa	417 (26.3)
Employment status	
Employed	374 (23.6)
Self-employed	374 (23.6)
Unemployed	839 (52.9)
Ever attended school	
Pre-primary/primary	188 (11.9)
Secondary	705 (44.6)
Highest educational attainment	
Undergraduate/master's/PhD	466 (29.5)
Vocational	220 (13.9)
Individuals aware of participants' sexual orientation	
Friends	1,454 (91.6)
Family	642 (40.5)
Coworkers	313 (19.7)
No one	80 (5.0)
Preferred not to answer	7 (0.4)
Other	46 (2.9)
Relationship status	
Cohabiting	62 (3.9)
Dating	730 (46.0)
Divorced, separated, or widowed	24 (1.5)
Married	85 (5.4)
Single	654 (41.2)
Other (specify)	32 (2.0)

a Limited knowledge of LGBTQ+ rights

There is more awareness on their constitutional rights regarding freedom and health. From qualitative data, there is more awareness of the right to health and more familiarity with the anti-homosexuality law in the Penal Code.

"You know, most of those that cover gay people are just the normal laws that cover everyone else. In the Constitution, human rights are protected, for instance, freedom of movement, freedom of privacy, voting, and all these freedoms, but there is nowhere that specifies the rights of the LGBTQ+."

b Awareness of laws forbidding discrimination when applying for jobs

Generally, most participants were not aware of any laws forbidding discrimination against a person's sexual orientation or gender identity when applying for a job (Figure 2). About one fourth (24.1%) of the participants were reported to be aware of laws forbidding discrimination based on gender identity when applying for a job. Two out of ten participants (21.6%) were aware of laws forbidding discrimination against sex characteristics or being intersex when applying for a job. Of those aware of laws forbidding discrimination when applying for a job, Eldoret reported the highest number of participants (29.9%) aware of the laws, while in Nairobi, about 2 out of 10 (22.8%) participants indicated being aware of laws that forbid discrimination against people because of their sexual orientation when applying for a job (Figure 3).

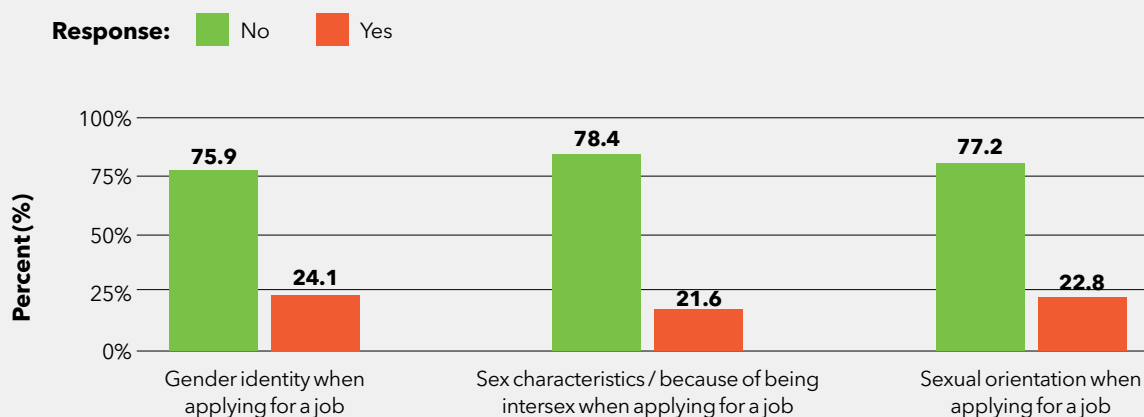


Figure 2: Law that forbids discrimination against persons because of their sexual orientation, gender identity, or sex characteristics/intersex when applying for a job

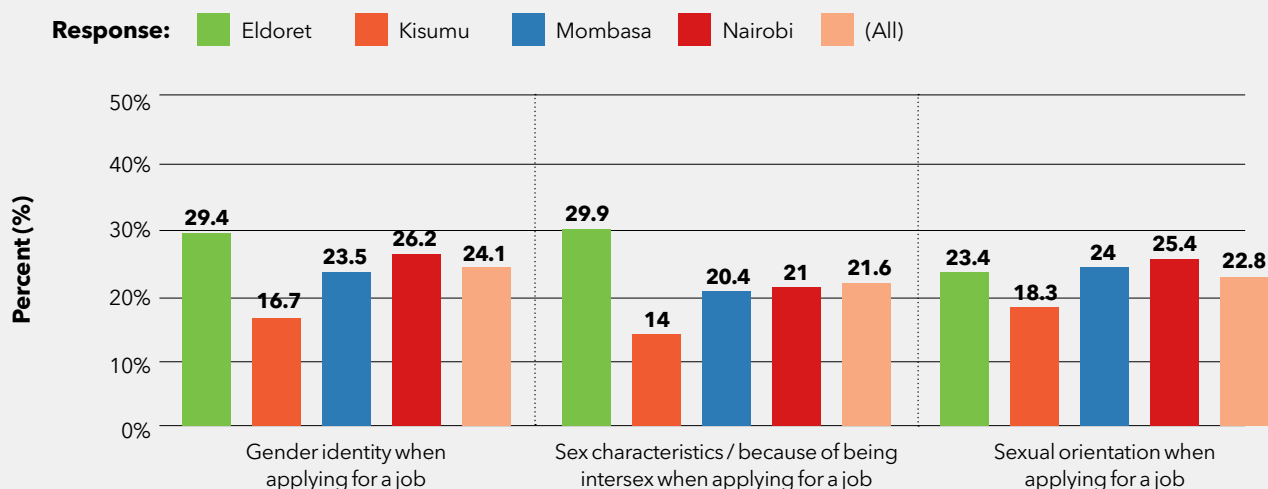


Figure 3: Law that forbids discrimination against persons because of their sexual orientation, gender identity, or sex characteristics/intersex when applying for a job.

C Freedom of expression

According to the survey findings (Figure 4), about a third of the participants (34%) stated that they express their sexual orientation or gender identity, while 35% indicated that they mostly freely express gender identity and sexual orientation. Regionally, Kisumu had the highest proportion of those who stated they freely (42%) or mostly freely (48%) express their gender and sexual orientation.

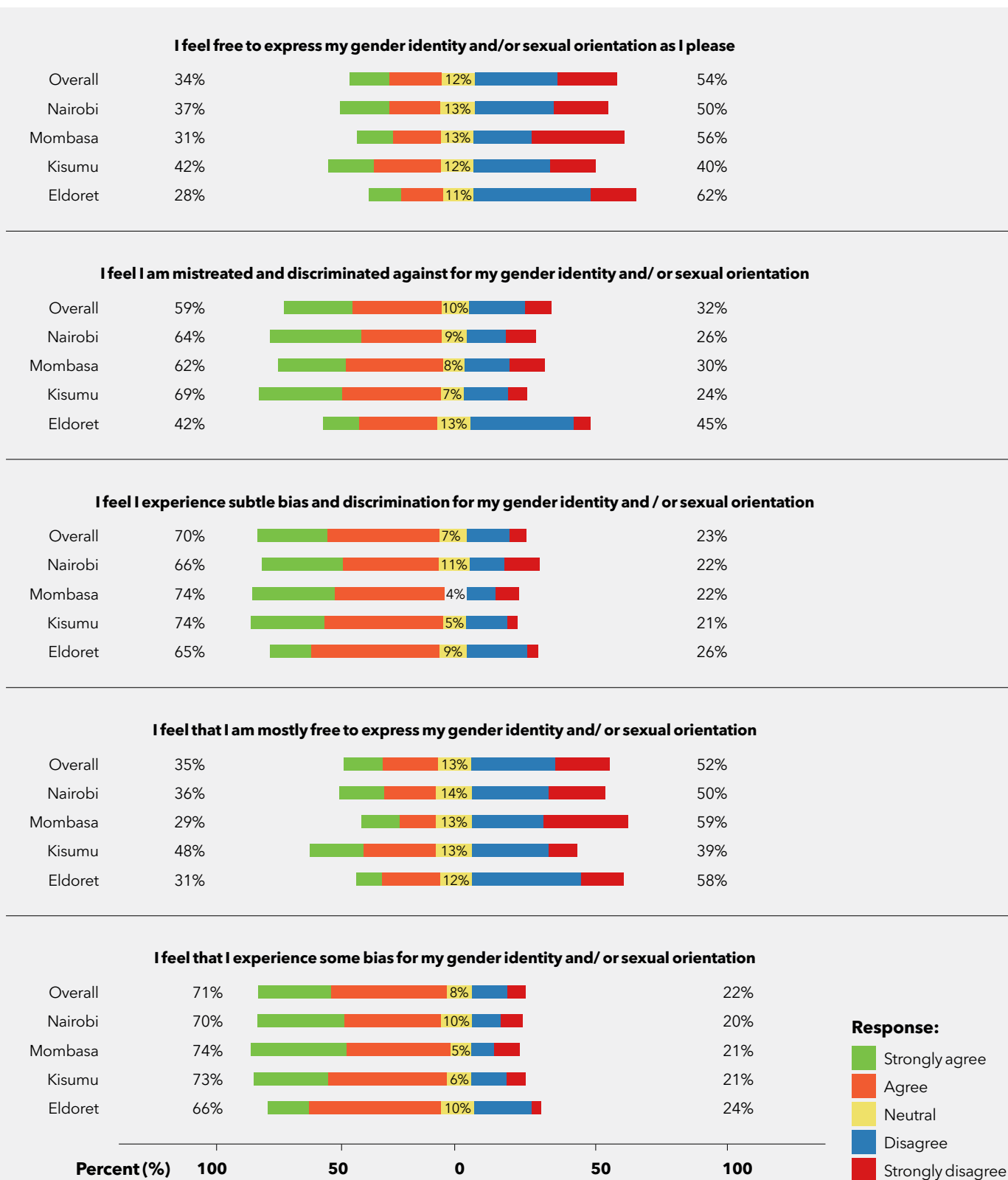


Figure 4: Frequency distribution of lived realities in everyday Kenya



Discrimination

Sexual orientation faces the most discrimination

According to the survey findings, discrimination toward LGBTQ+ people is prevalent (Figure 5). Most participants believed gay (83.7%), transgender (72.7%) and lesbian (62.4%) persons face the most discrimination, while intersex (54.6%) and bisexual persons (47.6%) are the least discriminated against.

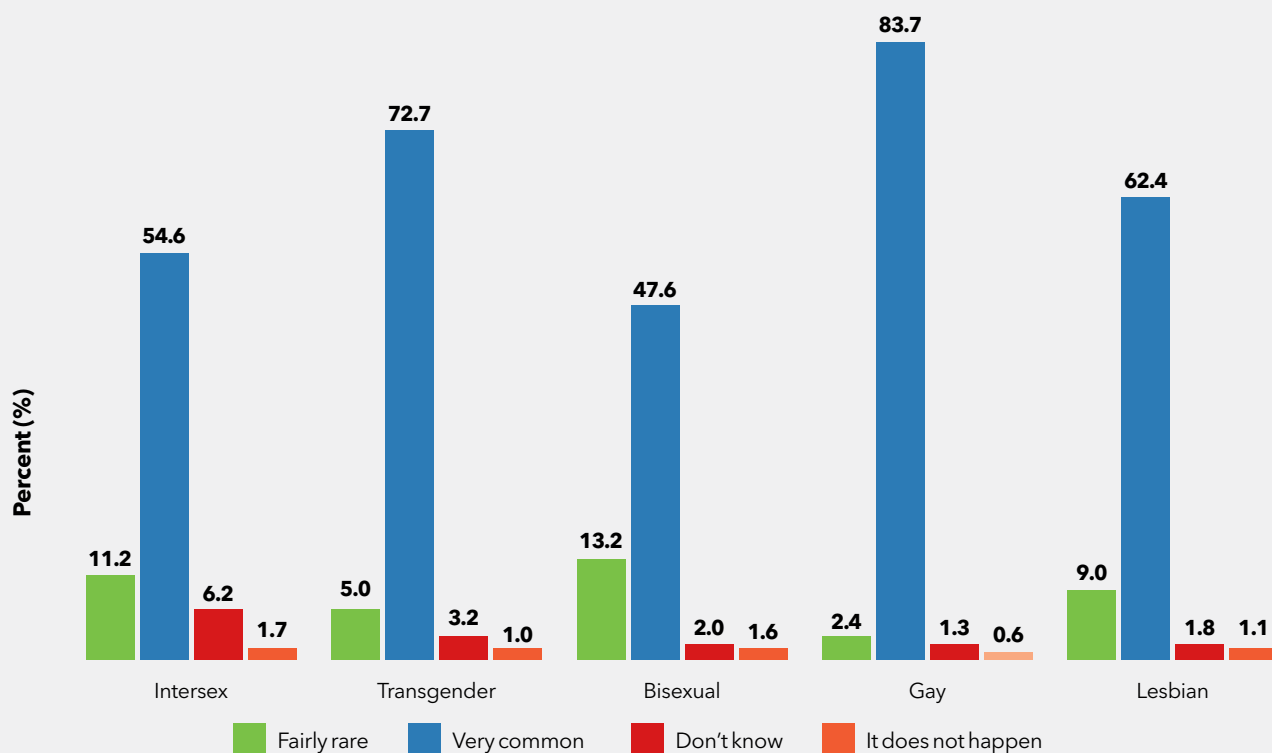


Figure 5: Participants' opinions about the sexual orientations that face the most discrimination.

Discrimination is more common based on gender expression (90%), gender identity (87%), sex (74%), and level of income (70%) than on religion, age, district of residence, or disability. Regionally, discrimination based on the level of income (84%) and residence (72%) was very common in Kisumu. A high proportion of LGBTQ+ participants from Kisumu report that they freely express their sexual orientation and gender-diverse identities. Qualitative data show that LGBTQ+ people in lower-income brackets experience more discriminatory acts compared to those in higher-income brackets. The majority (70%) of participants reported experiencing subtle bias and discrimination.

Seven out of ten participants (71%) reported that they experience some bias because of their sexual and gender identities. Both qualitative and quantitative data reveal differentiated discrimination against LGBTQ+ people. Quantitatively, gays (83.7%), transgender people (72.7%), and lesbians (62.4%) face the most discrimination, while intersex persons (54.6%) and bisexuals (47.6%) are less likely to experience discrimination. Relative to other minority groups, participants perceive discrimination to be higher among people with disabilities (76.6%), lesbian, gay, and bisexual (70.3%), transgender (63.8%), and minority and migrant groups (63.6%). Qualitative data show that transgender and feminine gay men face the most discrimination, while lesbians are more likely to be tolerated or accepted by the society. Mombasa seems somewhat tolerant compared to other regions and has the highest proportion (51.8%) of participants who had never experienced discrimination.

Health and Access to Services: The COVID-19 pandemic significantly disrupted access to HIV-related and sexual and reproductive health services. Shortages in antiretroviral (ARV) treatments and Pre-exposure Prophylaxis (prep) were reported, affecting the MSM community the most. Substance abuse was prevalent as a coping mechanism, with 40.6% of participants reporting marijuana use. Mombasa had the highest substance use rates, while Eldoret had the lowest.

Awareness and Access to Support Services: Knowledge of support organizations varied, with gay men being the most aware (81.2%) and intersex individuals the least (67.7%). Eldoret had the lowest overall awareness of support services. Qualitative data indicated that sensitization and security training provided by support organizations were crucial in helping LGBTQ+ individuals know their rights and how to report violations.

Public perceptions towards sexual and gender minorities

a Sociodemographic characteristics

Study participants' median age was 29 years, with a range of 25 to 36 years. A total of 1,652 residents of four counties: 502 in Mombasa, 450 in Nairobi, 372 in Kisumu, and 328 in Eldoret (Table 1) took part in the survey. Most participants (69.7%) were urban residents. The ratio of men to women was almost equal at 50.2% (males) and 49.6% (females). Almost all the participants, 1,626 (98.4%), had received a formal education, with 81 percent having completed secondary school or higher. Most participants were either employed (31.5%) or self-employed (41.7%). Majority of participants were Christians (81.9%).

b Awareness of and attitudes towards LGBTQ+ laws and rights

Overall, 43.9% of participants were aware of human rights concerning LGBTQ+ individuals. The proportion of participants who were aware of laws and human rights concerning LGBTQ+ people did not vary significantly by county.

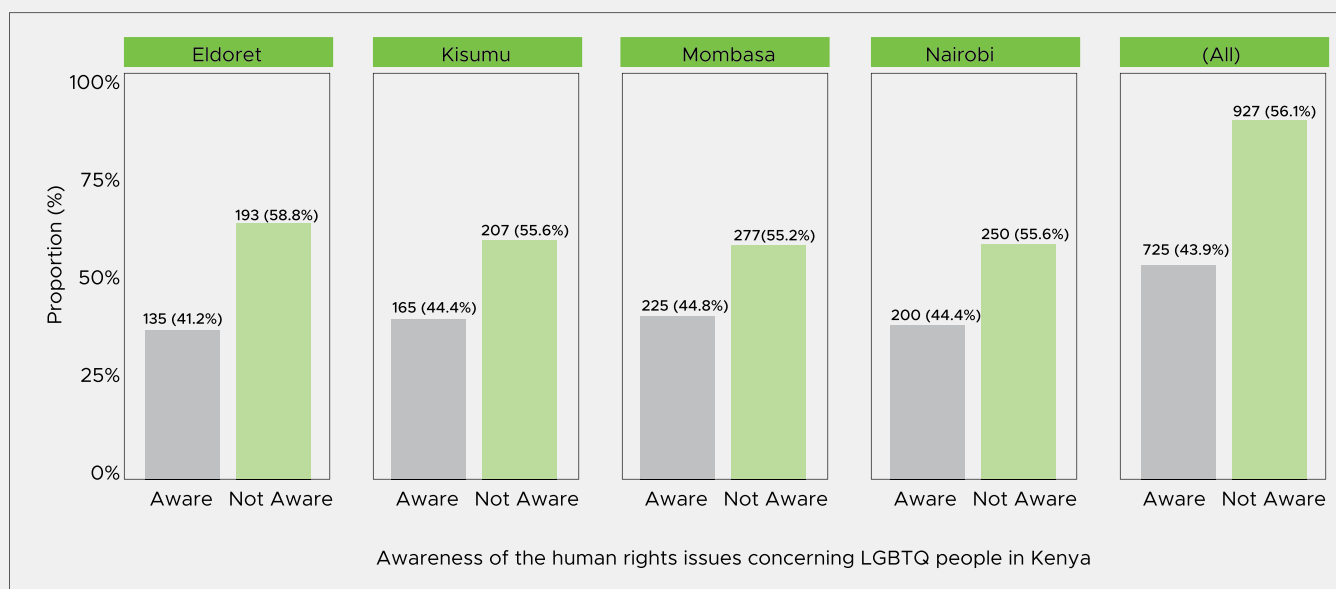


Figure 6: Awareness of the human rights issues concerning LGBTQ+ people in Kenya



Perceptions of societal attitudes and actions towards LGBTQ+ people

The data suggest that 17% agreed that LGBTQ+ people are accepted in the community, while 25% agreed that they are accepted in Kenya. Mombasa had the highest proportion (20%) of participants who agreed that LGBTQ+ people are accepted in their community. Six in ten participants (60%) agreed that people in their community are fearful of LGBTQ+ people. At the county level, 61% of participants in Kisumu agreed that people in their community were fearful of LGBTQ+ people.

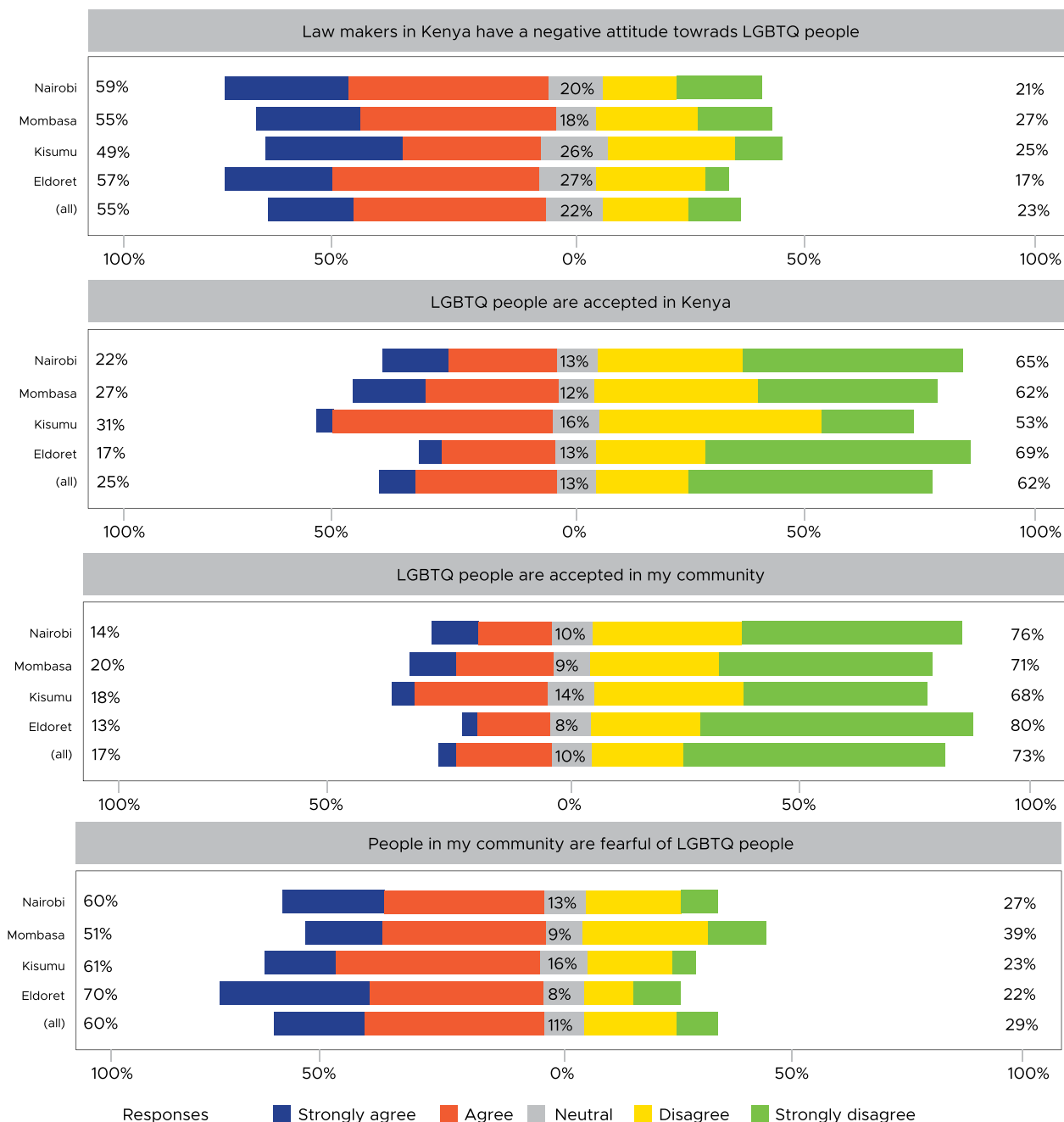


Figure 7: Perceptions of societal attitudes and actions towards LGBTQ+ people



Participants' feelings about LGBTQ+ people and rights

Overall, more than two-thirds (71%) agreed or strongly agreed that people who identify as LGBTQ+ should be treated equally under the law. 37% of the participants agreed or strongly agreed that they felt positive towards LGBTQ+ people, and about four in ten participants agreed or strongly agreed that they supported LGBTQ+ rights.

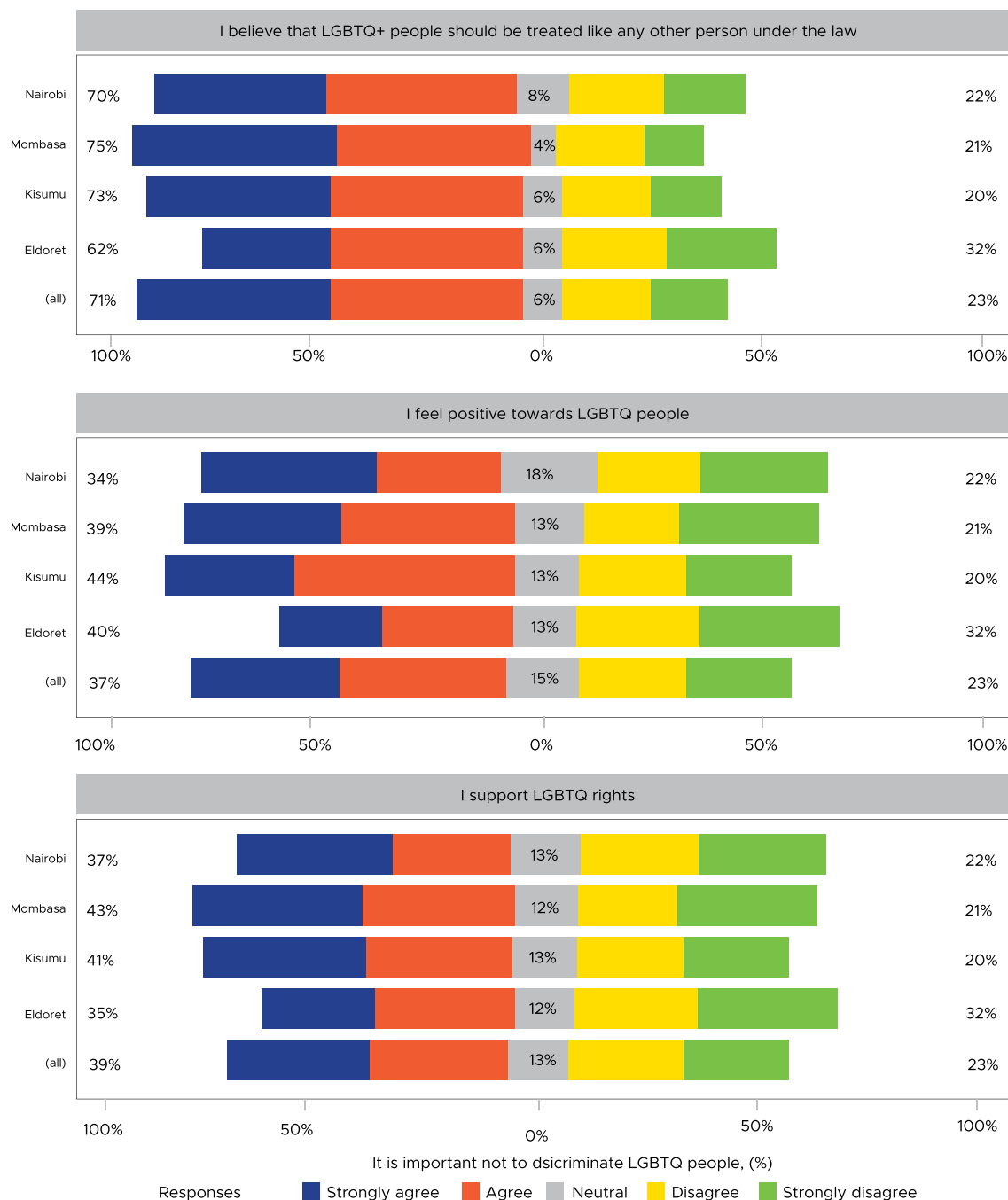


Figure 8: Participants' feelings about LGBTQ+ people and rights



Participants' views on discrimination against LGBTQ+ people

81% of participants agreed or strongly agreed that LGBTQ+ people should not be discriminated against in health facilities or social protection or welfare programs (76%).



Figure 9: Participants' views on discrimination against LGBTQ+ people

5.0 Conclusion

LGBTQ+ people, through advocacy efforts, actively pursue social inclusion. We sought to find out the lived experiences of LGBTQ+ people in four counties in Kenya. Specifically, we explored LGBTQ+ people's lived experiences in policy, social, educational, social welfare, health, security, and economic realms, and the implications of these experiences on their mental well-being within the legal, social, and cultural norms in Kenya. We also captured the impact of COVID-19 and related response measures on the LGBTQ+ community. In doing so, we explored issues around stigma, discrimination, acceptance, tolerance, and rights. Meanwhile, Kenya criminalizes same-sex behavior. Overall findings demonstrate that negative attitudes toward LGBTQ+ individuals persist. Members of the LGBTQ+ community are regularly marginalized and subjected to oppression.

The public perceptions survey results provide critical information on societal attitudes and actions toward LGBTQ+ persons in four counties. Despite study's limitations, including the topic's sensitivity, we were able to reach a broad demographic to elicit data that can inform policies and laws, as well as community-based activities centered on LGBTQ+ persons in Kenya. The study demonstrates that research on LGBTQ+ in public can be done despite the obstacles such as religious and cultural beliefs, stigmatization, discrimination and illegality.

In conclusion, the study points to contradictions in discrimination, acceptance, laws, and support for LGBTQ+-related rights. While there is overwhelming support for laws that support equality irrespective of gender, acceptance of LGBTQ+ people is low and support for their rights divided.

6.0 Recommendations

- **Enhance Support Services:** Increase funding and resources for organizations that support LGBTQ+ individuals, particularly in health-related areas to ensure continuous supply of essential medications like ARVs and pep.
- **Raise Awareness:** Implement targeted awareness campaigns to improve knowledge of rights and on available support services across all regions, with a focus on less informed areas like Eldoret.
- **Policy and Legal Reforms:** Advocate for stronger legal protections against discrimination and violence towards LGBTQ+ individuals. Engage with policymakers to address legal gaps that leave LGBTQ+ individuals vulnerable.
- **Community Sensitization:** Conduct sensitization and security training within the LGBTQ+ community to improve safety and reporting mechanisms. Strengthen community networks to provide immediate support to victims of discrimination and violence.
- **Continuous Monitoring and Research:** Continue research to monitor the evolving needs and experiences of LGBTQ+ individuals, particularly in response to external crises like the COVID-19 pandemic. Use these findings to inform policies and interventions aimed at improving the quality of life for sexual and gender minorities.
- **Stakeholders implementing interventions to support sexual and gender minorities should leverage on positive public views to garner public support for interventions to support sexual and gender minorities.** Widespread endorsement of the rights of LGBTQ+ to equal treatment in workplaces, educational institutions, homes, places of worship and health facilities may be critical in expand ally networks, especially community and religious leaders
- **Enhance access to justice to protect LGBTQ+ rights and mitigate discrimination through relevant training for legal and law enforcement officers, and human rights defenders on reporting violence and supporting victims of violence to access justice for LGBTQ+.**
- **Programs to improve awareness and knowledge of community members and related stakeholders on LGBTQ+ rights are needed.** Civil society organizations should implement programs that raise community awareness on sexual orientation, gender identity, and gender expression issues, as well as educate community members and institutions such as places of worship and work, health facilities, and learning institutions on these issues.