

**LGBT Health and Rights in
East Africa:
A Snapshot of Successes and
Challenges for the Advocacy
Community**

September 2007

Sexual Health and Rights Project



OPEN SOCIETY INSTITUTE
Public Health Program

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Introduction

OSI's Sexual Health and Rights Project (SHARP), in partnership with Open Society foundations and initiatives in Africa, is exploring ways to expand support to Lesbian, Gay, Bisexual and Transgender (LGBT) health and rights efforts in Eastern and Southern Africa. SHARP gathered information about community needs, funding opportunities, and challenges by developing contacts with local advocates and groups and other donors, and by reviewing existing data and reports. While there is a tremendous amount of information available, it appears that those supporting the work sometimes have limited awareness of the full range of efforts being undertaken. In order for donors to work more effectively, it is important for this information gap to be bridged.

In light of the variety and volume of information, this paper is intended to be a summary document for all funders interested in supporting LGBT health and rights in East Africa. It is not meant to be exhaustive, but to provide a snapshot of regional LGBT needs and opportunities. While the authors have strived for accuracy, the LGBT advocacy and funding arena is a rapidly changing environment and situations may have changed since the time of writing.

The information is organized into five topics: Challenges to the LGBT movement; LGBT groups operating in East Africa; reports and convenings focusing on LGBT issues in Africa; potential opportunities for future advocacy on LGBT issues; and recommended next steps for funders. We hope this analysis will help donors develop strategies and collaborations for supporting LGBT health and rights in the region.

Perceived Challenges to LGBT Health and Rights

Legal and Political Climate

Same-sex sexual acts remain illegal in the majority of African countries. South Africa is the most publicized exception due to its 1996 constitutional amendment which made South Africa the first country in the world to specifically enshrine LGBT rights. Some countries do not have specific legal provisions, but instead have codes and provisions against sodomy or "carnal knowledge of another person against the order of nature," which are used as grounds to imprison LGBT persons. Punishments on the continent range from life imprisonment (Uganda) to a sentence of two months (Rwanda). Politicians commonly fuel national homophobia, as in statements such as that made by Zimbabwe's president, Robert Mugabe:

"What an abomination, a rottenness of culture, real decadence of culture. [Homosexuals are] repugnant to my human conscience... immoral and repulsive... Lower than pigs and dogs... Animals in the jungle are better than these people because at least they know that this is a man or a woman... I don't believe they have any rights at all."

Homophobia

Homophobia remains the overarching concern for LGBT activists. The stigma and discrimination experienced in homophobic societies not only place LGBT and MSM at increased

risk for physical and emotional damage, but affect groups' abilities to gather, access resources, or speak out publicly. There has been tension among LGBT communities due to differing stages of readiness to accept the risks associated with activism. Some groups wish to support one another safely and quietly while others are pushing for LGBT and MSM to place public pressure on governments and society to make changes. Infighting over such strategies has often resulted in claims by one group that another is not "legitimate."

Identity

Identity claims can result in dissension among LGBT persons. MSM and bisexuals, for example, are considered in some circles to be outcasts of the LGBT movement because they are "not really gay." Those considered most stigmatized within LGBT communities are sex workers of any orientation who face added marginalization because of their activities. The All Africa Rights Initiative (AARI) recognizes these complex identity issues as a challenge to efforts to build a larger and more cohesive movement. Each of AARI's conferences, trainings, and reports has illustrated the ongoing debate over whom to include, exclude, or prioritize.

Exclusion of Women

Amidst this debate, one point of consensus was reached: women (of any orientation or identity) are largely underserved and overlooked within the broader LGBT "movement." Numerous organizations have chosen to separate men from women based either on the fact that their needs are different or that the lower status of women creates an added burden to already stigmatized groups. It is felt that foreign funders are less interested in supporting women's issues, especially related to health, because MSM are seen as being at higher risk for HIV infection. This risk delineation is debated, however, as many WSW also practice anal sex with men. Likewise, lesbians often have sex with men due to the strong social pressure to bear children. Of great concern is the high risk faced by lesbians of rape by men who believe that rape will "cure" these women. In response to a sense of neglect and rejection, LBT women have begun to step up their organizing through the formation of groups such as Minority Women in Action and the Coalition of African Lesbians.

Poverty

In many places resources are scarce and government corruption is prevalent. Resulting problems are magnified for people who belong to a marginalized group that is openly persecuted by the government. Official registration is required for groups to gain legitimacy or to access funding. When it is known that groups support LGBT rights, they are often denied NGO status. In many ways, this leaves resource-strapped groups with no option but to seek foreign support for their efforts. Ironically, one of Africa's main arguments against homosexuality is that "it is a colonial import" and that it is "not African." Therefore, the fact that the majority of funds supporting LGBT and MSM groups come from Western nations only serves to reinforce this notion. The competition among groups for these limited funds has further divided them.

Foreign Funding

According to an activist in Sierra Leone, LGBT and MSM groups typically have a bidding process for the right to attend overseas conferences and trainings. He said that once in another country, activists can seek asylum or gain access to contacts which will put them in a better economic position for the long term. In countries where opportunities and jobs are already

scarce, LGBT persons and MSM often see working for an NGO as the best option they have for a better life. The desperation for overseas resources has resulted in the creation of some “paper” HIV/AIDS organizations and the illicit pocketing of funds. Within legitimate organizations, uneven bookkeeping practices can create internal arguments and divisions. When individual survival competes with the integrity of community organizing and movement building, funders can be caught in the middle, often without realizing it.

Lack of Resources and Capacity-Building Support

Apart from the myriad social, cultural, and political barriers, LGBT groups identify a huge need for resources and capacity-building support. Attempting to organize around health and rights in a hostile environment without materials and skills creates a situation ripe for burnout. Because of the relatively small population of self-identified LGBT and MSM persons, social circles overlap and relationships gone sour can affect the level of support and cohesion within communities.

Capacity-building topics that LGBT activists prioritize include: organizational development and management (e.g., NGO structure, strategic planning, human resource management); leadership skills; advocacy planning and implementation of advocacy campaigns; working with media; knowledge of international human rights standards (e.g., framing discourses on human rights of LGBT people within the public health / women’s rights / international sexual health and rights perspectives); and HIV/AIDS prevention. Very few LGBT organizations in Africa have office space, a computer, or basic access to the Internet, and are forced to work in Internet cafes or private homes. Very few activists earn a salary for their work.

A comprehensive and systematic capacity-building program does not exist for LGBT activists in East Africa. They seldom have the chance to participate in trainings, and what few opportunities are available do not always respond to their needs. Only a small number of activists have taken part in study visits to other countries.

Some East African LGBT activists express disappointment about their interaction with donors, saying they are invited to submit proposals to which they receive no response. Writing a proposal often means spending one’s own money on transportation and Internet costs and making a significant time investment. The lack of a response leaves activists feeling discouraged.

Religion

Religious institutions are often outspoken and hostile in regard to homosexuality. Since they hold a very powerful position within African society their influence cannot be overlooked. The following graph shows the percentage of people in Kenya, Uganda, and Tanzania who identify with religious groups:

RELIGION	KENYA	UGANDA	TANZANIA
Protestant	45%	33%	30%
Catholic	33%	33%	0%
Muslim	10%	16%	35%
African Traditional Religion	10%	18%	35%
Total	98%	100%	100%

*Statistics are from the CIA World Factbook, 2007

Throughout Africa, religion is the basis for most social interaction, and it is often the religious institutions that fill the gaps in basic needs that governments fail to fill. Due to this central role, exclusion of LGBT persons from religious institutions results in wide-ranging consequences. LGBT groups have identified some religious groups and individuals that are supportive of LGBT health and rights. Identification of religious allies remains a priority for many LGBT persons who feel isolated and see the church as a key link to social inclusion. For more information, see *State-Sponsored Homophobia and Its Consequences in Southern Africa*, a joint report by Human Rights Watch and the International Gay and Lesbian Human Rights Commission in which the role of religion in African society was described as “all inclusive” (<http://www.hrw.org/reports/2003/safrica/>).

LGBT Groups in East Africa

The following is a country-by-country summary of LGBT groups operating in Eastern Africa.

KENYA

Diverse Outing, Nairobi, Kenya

Contact: (diveout@gmail.com)

Diverse Outing seems to have gone underground and SHARP was unable to establish contact the group. However, the following description of Diverse Outing is listed on the public website of the Gay and Lesbian Coalition of Kenya: “We are a gay and lesbian organization working with the same in the peri-urban areas of Nairobi. Diverse Outing strives to offer medical support through its own physician to its members. Diverse Outing has a mission to inculcate a culture of acceptance of gays and lesbians in our society, without which we cannot grow. We have a membership of 20 persons and intend to surpass this. Diverse Outing has undertaken to create HIV/AIDS awareness in its area of operation which is primarily Kangemi (a slum area in Nairobi’s catchments).”

Equality Now! Development Group, Kisumu City, Kenya

Contact: Tom Abongo (tom_abongo@yahoo.co.uk)

Registered as an HIV/AIDS organization, the majority of members are graduate and post-graduate students at universities in Western Kenya. The group is focused on human rights, rights of access to healthcare and treatment, and education on HIV/AIDS.

Gay and Lesbian Coalition of Kenya (GALCK), Nairobi, Kenya

Contact: Pouline Kimani (poul85@yahoo.com)

GALCK is a coalition of eight LGBT organizations within Kenya. It has received capacity building support from Liverpool VCT (see description below) and Queer Solidarity (Norway). GALCK undertook its first activities on World AIDS Day in 2006, and soon followed with two presentations related to LGBT issues at the World Social Forum (WSF) in Nairobi. GALCK also hosted the “Q spot” (a tent set up as a safe space at the WSF for those interested in LGBT issues.) The Q spot held poetry readings, exhibitions, performances, film screenings, and offered support, counseling, and HIV testing.

Gay Kenya, Nairobi, Kenya

Contact: David Kuria (info@gaykenya.com)

Founded in 2004, Gay Kenya is now registered with the Kenyan government as Kenya Gay and Lesbian Trust (KEGALE) making it the first ever LGBT group to be officially registered in Kenya. An active member of GALCK, it participated in a World AIDS Day march and continues to work “to bring together likeminded people to address acceptance, stigma, and HIV among men who have sex with men.” The group’s primary focus is maintenance of a website for use as an advocacy tool and a safe space for LGBT persons (<http://www.gaykenya.com>). Due to an overwhelming number of online visitors after the World Social Forum, the site crashed, but it is anticipated to be back up by December 2007.

Gays, Lesbians, Bisexuals, and Transgendered (GALEBITRA), Nairobi, Kenya

Contact: Jeremy Mirie, Coordinator (galebitra97ke@yahoo.co.uk)

GALEBITRA works within government bodies to increase the visibility of LGBT communities, gather political support for legal reforms, and provide sexual health and rights trainings for LGBT in Kenya. With funding from the Ford Foundation, GALEBITRA distributed the “MSM Sexual Health Survey Report” in 2005, which made several recommendations for meeting the health needs of MSM in Kenya.

International Center for Reproductive Health Kenya (ICRH), Mombassa, Kenya

Contact: Dr. Stanley Luchters, Field Director (Stanley.luchters@icrhk.org)

Headquartered at the University of Gant in Belgium, ICRH has an office based in Mombassa which undertakes clinical trials focused on HIV prevention and treatment, along with some operational activities. ICRH has established a men who have sex with men (MSM) drop-in center and trained 40 MSM sex workers as peer educators. The peer educators are organized into four zones, each of which has a leader trained in counseling. The educators conduct home visits, provide Voluntary Counseling and Testing (VCT), and distribute condoms and lube to 77 “hot spots.” The Population Council recently funded ICRH to conduct a study of MSM sex workers in Mombassa. An abstract of this report is available at:

http://www.popcouncil.org/horizons/projects/Kenya_MSWMombasa.htm.

Ishtar, Nairobi, Kenya

Contact: Emmanuel Kamau/Aunty Ivy (emmanuelkamau@yahoo.co.uk)

Established in 1997, Ishtar works with MSM, many of whom are male sex workers and transgender persons. Ishtar is well connected with the populations it serves, and its effective communications network has made it a tremendous resource for research, which it supports wholeheartedly. It is registered as a community-based organization (CBO), even though the organization is not “openly” gay, and includes over 300 members. The group is a member of GALCK and partners with the University of Nairobi, Liverpool VCT, and Kenya AIDS Vaccine Initiative (KAVI). Ishtar’s mission is to improve the sexual health of MSM and reduce stigma and discrimination against them. It refers its members to KAVI health facilities for AIDS treatment, free testing, and other health services, and provides education about HIV/AIDS prevention.

Liverpool Volunteer Care and Treatment (LVCT), Nairobi, Kenya

Contact: Angus Parkinson, MSM Program Coordinator (msmservices@liverpoolvct.org)

LVCT uses a public health approach to shape its service delivery, research, and policy reform activities. LVCT's programs and activities encompass a wide range of populations including: MSM, rape survivors, hearing impaired persons, and youth. Activities include training of HIV counselors; technical support on how to move policy change forward for vulnerable groups; and capacity building of government entities to improve their service delivery and information dissemination related to vulnerable groups. LVCT has strategically placed itself within government policy committees in order to have influence over the Kenya National AIDS Strategic Plan. LVCT's advocacy resulted in the identification of MSM as a "vulnerable group" within the plan. It has developed a manual for MSM and a five-day training for MSM service providers.

Minority Women in Action (MWA), Nairobi, Kenya

Contact: Judith Wangu Ngunjiri (minoritywomen@mail2kenya.com)

MWA started in 2006 as a club for women that provided a safe social space and organized weekly movie nights. It is now registered with authorities as a CBO and has 17 registered members and a list of about 30 women who benefit from the organization's services. MWA is the only organization in Kenya that works to empower lesbian and bisexual women through weekly meetings or workshops, sports activities, such as basketball games, and camps. The organization is very active in GALCK and does most of its political work through the coalition. MWA leaders have been some of the most prominent voices of GALCK in Kenyan media during and following the World Social Forum.

TOMIK, Nairobi, Kenya

Contact: Mwangi Githahu, journalist (mwangi_g@hotmail.com)

TOMIK is a social network that primarily conducts behind-the-scenes advocacy work with a focus on the decriminalization of homosexuality. Comprised of professionals such as journalists and lawyers, TOMIK is also open to training other professionals, including doctors and human rights defenders, for the benefit of LGBT persons.

RWANDA

Horizon Community Organization (HOCA)

The group was founded in 2004 and currently includes 17 registered members (six men and 11 women.) HOCA has held two workshops since it began: a one-week-long community empowerment workshop in cooperation with the Coalition of African Lesbians, and another on feminism that drew participants from three Rwandan towns. It also provides support for LGBT people who are thrown out of their parents' homes because of their sexual orientation. The group intends to undertake a media/advocacy campaign in the near future.

TANZANIA

The following Tanzanian contacts were provided by Behind the Mask, a South African-based website that offers online support and networking for LGBT individuals and groups throughout

Africa (www.mask.org.za). SHARP has not yet followed up with these groups about their activities.

Community Peer Support Services (CPSS)

Contact: Joel Onditi (joelonditi@hotmail.com)

Tanzania Lesbian Association (TALESA)

Contact: (talesa_2000@yahoo.com)

UGANDA

Frank and Candy, Kampala, Uganda

Contact: Dr. Paul Semugoma (semugoma@gmail.com)

Founded in 2004, Frank and Candy offers HIV/AIDS prevention services (including education and condom and lubricant distribution); hosts a DVD-lending library; provides workshops for the community; and distributes a newsletter (which has been inactive in 2007). In September 2004, the group released the report “Same-Sex Sexual Behaviour, HIV, and Health Care in Uganda,” which was funded by the Ford Foundation and HIVOS.

Freedom and Roam Uganda (FAR-UG)

Contact: Kasha N. Jacqueline (jnkasha@gmail.com)

Founded in 2003, FAR-UG is the only lesbian group focused on advocacy, public media campaigns, social services, and empowerment of women in Uganda. The group has 43 registered members and about 20 unregistered beneficiaries. FAR-UG’s chairperson Kasha Jacqueline and spokesperson Victor Mukasa are among the most vocal and visible LGBT activists in Uganda.

Icebreakers Uganda, Kampala, Uganda

Contact: Frank Mugisha, Chairperson (lonelguy2003@yahoo.com)

Founded in 2004, the organization provides individual and online counseling to LGBT people who are in different stages of the coming-out process. The group is inspired and supported by the Manchester-based organization “Icebreakers.” The organization has created an informal self-support network, provides education on HIV/AIDS and sexually transmitted infections (STIs), and refers LGBT individuals to gay-friendly health services. Icebreakers Uganda has 100 to 150 beneficiaries a year and believes its unique contribution is made in reaching out to the LGBT community through the internet and working with LGBT people from outside Kampala.

Integrity Uganda, Kampala, Uganda

Contact: David Kato Kisule (diraguha@yahoo.com)

Integrity Uganda is a faith-based organization founded in 1999 by Christopher Ssenyonjo, an Anglican Bishop who was excommunicated from the church for his support of sexual minorities. The group registered as a CBO in 2003. Integrity Uganda, although mostly an LGBT organization, provides services to all marginalized groups. It offers counselling services, holds weekly Christian prayer services, and has plans to launch a poverty alleviation program. The group currently has about 40 registered members who practice different religions, including Islam.

Queer Youth Uganda, Kampala / Masaka / Jinja, Uganda

Contact: Sam Opio (queerug@gmail.com)

Founded in 2006, this organization has its headquarters in Kampala, as well as a solidarity group in Jinja and a small group in Masaka. Queer Youth Uganda has conducted three workshops for the LGBT community since it was started: two on legal issues in Kampala and Jinja, and one on HIV/AIDS prevention. It is also involved in lobbying foreign embassies to pressure the Ugandan government to end its homophobic policies.

Sexual Minorities Uganda (SMUG), Kampala, Uganda

Contact: Juliet Victor Mukasa (julie.mukasa@gmail.com)

SMUG is the umbrella organization of all LGBT organizations in Uganda. Its mission is to lead and organize LGBT organizations in the fight for the recognition of same-sex relationships and the removal of all forms of discrimination based on sexual orientation and gender identity. SMUG members and associate members currently include FAR-UG, Spectrum Uganda, Integrity Uganda, Icebreakers Uganda, and Queer Youth Uganda. (www.smug.4t.com)

Spectrum Uganda, Kampala, Uganda

Contact: Samuel Kizza Ganafa (kgsamuel2000@yahoo.com)

Spectrum Uganda focuses on HIV/AIDS prevention, treatment and care, and lobbying for policy change. It runs an informal self-support network for LGBT individuals (e.g., providing in-home shelter to those disowned by their families because of their sexual orientation), a referral system to gay-friendly health providers that serve 20 to 30 beneficiaries a month, and provides health and psychological counselling. Spectrum Uganda has a website under construction.

(www.spugin.8m.com)

Reports and Convenings

REPORTS

MSM Sexual Health Survey Report, Nairobi, Kenya

This report, produced in 2005 by GALEBITRA with funding from the Ford Foundation, is a qualitative and quantitative survey of 24 MSM in Nairobi, Kenya. From participants' responses, a clearer picture of the health needs of MSM in Kenya was identified. The report's recommendations include: train MSM peer educators; educate NGOs and CBOs working on HIV/AIDS about MSM needs and issues; create activities which promote sexual freedom and expression for MSM; involve the media in topical discussions related to sexuality; and produce materials that focus on MSM.

Off the Map: How HIV/AIDS Programming Is Failing Same-Sex Practicing People in Africa

Published in 2007 by the International Gay and Lesbian Human Rights Commission (IGLHRC), this report explores the ways in which governments, donors, and NGOs are denying a basic set of human rights protections to same-sex practicing Africans, and the potential impact of this denial on efforts to combat the AIDS epidemic. This report is available at:

<http://www.iglhrc.org/site/iglhrc/content.php?type=1&id=150>

Population Council Study – Understanding the HIV/STI Risks and Prevention Needs of Men Who Have Sex With Men in Nairobi, Kenya

LGBT, MSM groups, and allies have acknowledged the lack of HIV epidemiological data for these populations and are seeking opportunities for further studies to more adequately inform and assess health promotion efforts on the ground. This study was conducted in December 2006 by the University of Nairobi Center for African Studies in collaboration with the Frontiers and Horizons programs. Five-hundred MSM were interviewed, one-third of whom were reached through Ishtar's contacts. The study focused on sexual identity, networks, STI/HIV knowledge, and sexual practices.

Like GALEBITRA's MSM report, recommendations from the Population Council study include a call for specialized counseling and peer education. The report offers eleven key findings, including: MSM are not a negligible population in Nairobi; the sexual behavior of MSM has implication for both men's and women's reproductive health; MSM are vulnerable to stigma, discrimination, and violence; reported condom use is high; use of oil-based lubricants, which can make condoms vulnerable to breakage, was common; a majority of MSM in the study report having had an HIV test; confidentiality is the most important factor for MSM when choosing a treatment facility; many health providers are aware that MSM exist and are seeking treatment at their facilities, but prefer not to discuss treatment and counseling issues with them. This report is available at: http://www.popcouncil.org/horizons/projects/Kenya_MSMPrevNairobi.htm

Urgent Action Fund Report – LGBT Organizing in East Africa: The True Test for Human Rights Defenders, Lake Naivasha, Kenya

Commissioned by the Ford Foundation and HIVOS, this December 2005 report emerged from a LGBT funders roundtable meeting in Kenya. The meeting was called to discuss the context in which LGBT organizing takes place, the experiences of LGBT groups within Kenya, Uganda, and Tanzania, the challenges faced by the movement, and directions for future efforts. The Urgent Action Fund Report is available at: <http://www.urgentactionfund.org>

Urgent Action Fund Report – “This Body!” Supporting Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBT) Organizing in East Africa, Nairobi, Kenya

The Astraea Lesbian Foundation for Justice, The Ford Foundation's Office for Eastern Africa, Global Fund for Women, and HIVOS supported a regional conference for LGBT activists in June 2006 to identify concrete ways to advance dialogue around sexuality. The report captures the challenges that funders face in seeking to support LGBT work and provides a concrete framework upon which legal activism can be grounded. Successful experiences of LGBT organizing and advocacy in Southern Africa was shared to inform and nurture an East African LGBT movement. Finally, the report provides insightful reflections on activism and how movements are built. This report is available at: <http://www.urgentactionfund.org>

CONVENINGS

African Commission on Human and Peoples' Rights: LGBT Strategy Consultation, Banjul, Gambia

The International Gay and Lesbian Human Rights Commission, in partnership with the All Africa Rights Initiative, the Coalition of African Lesbians, and Behind the Mask, convened an eight-day strategy meeting in 2006 on LGBT rights in the African human rights context. The consultation brought together 18 sexual rights activists to examine the human rights violations faced by African LGBT and MSM persons, and explored mechanisms for redress established by the African Charter on Human and Peoples' Rights. This gathering coincided with the African Commission on Human and Peoples' Rights session, which provided activists with the opportunity to express their concerns to the African Union, the international organization of African governments. The meeting was largely comprised of training sessions and skills-building workshops led by participants and resource persons from overseas.

All-Africa Symposium on HIV/AIDS and Human Rights, Johannesburg, South Africa

This week-long conference held in February 2004, brought together 55 participants from 22 LGBT groups representing 17 African countries. The intent was to build a support network from which to launch a more strategic approach to improving the health and rights of LGBT individuals in Africa. The needs identified by this report fall within three broad categories: information; training/capacity building; and general support and resources. Recommendations include: creation of safe spaces for coming together; training for healthcare and social workers; development of educational materials for LGBT and the public; establishment of crisis response mechanisms; sensitization programs on HIV/AIDS and STIs; and activism and networking trainings. The report also indicates that a six-member steering committee, representative of East, West, and Southern Africa, was elected. This committee was tasked with creating a constitution for the All Africa Rights Initiative (AARI). This Symposium report is available at:

http://www.kubatana.net/html/archive/hivaid/040601iclgalz.asp?sector=HEALTH&year=2004&range_start=1

Pan-African LGBT Conference, Johannesburg, South Africa

From May 5-8, 2007, the International Gay and Lesbian Association (ILGA) brought together more than 60 LGBT activists from 15 African countries to discuss ways to consolidate their movement and move forward on self-organizing efforts on a regional level. African activists at the conference created an 11-member, interim board to govern the newly formed Pan-African LGBT federation. The activists set up five regions in Africa – North, South, East, West, and Central – and elected two representatives from each region. Specific goals of the interim board include:

- Creating a legal entity for the African regional federation, to be based in South Africa;
- Fundraising for both the organization and the next regional conference;
- Drafting a constitution to be submitted at the next conference; and
- Facilitating access to information for LGBT groups throughout Africa.

More information on the conference is available at:

http://www.ilga.org/news_results.asp?FileCategory=50&ZoneID=2&FileID=1081

World Social Forum, Nairobi, Kenya

In January 2007, the WSF covered a vast array of issues under the topic of “the human right to health and the creation and development of universal, comprehensive and equitable health systems and social security in the African and world context.” LGBT and MSM organizations hosted at least nine sessions addressing LGBT health and rights. Health and rights-based messages were shared at information stands, which also served as a safe space for LGBT and MSM in attendance, several of whom faced hostility when they publicly “came out.” The East African press widely covered the issue. Journalist Lucas Barasa wrote in the *Nation* newspaper, “A new phenomenon is gaining currency in the country: Lesbians, gays and transsexuals are coming out openly to demand their rights. The group stole the show at the World Social Forum ... with their stand being a crowd puller.”

While groups and individuals from the LGBT community felt ready to take a stand and make their voices heard, their actions also triggered a backlash. The director of Ishtar, whose photo and interview were featured prominently in the *Nation* newspaper, wrote an email expressing the need for some time away from Nairobi, where he felt under constant scrutiny. Thus, the WSF induced mixed feelings among advocates – excitement that the LGBT community seemed able and ready to advocate publicly for their health and rights, and concern for the risk such public attention may bring. Press coverage related to the WSF is available at:

<http://www.mask.org.za/index.php?page=kenya>

Potential Opportunities for Advocacy

Public Presence

Despite barriers, there are clearly strides being made by LGBT communities to organize around health and rights. The needs, strategy, and action plan that came out of the 2004 AARI conference point to significant common ground upon which health and rights can be improved. Addressing homophobia through a multi-faceted approach at all levels of society and government is a tremendous task, but the openings that have emerged from recent efforts are not insignificant. *Kenya Post* journalist Mwangi Githahu indicates that the simple fact that “a crowd of about 150 people ... gathered” at the WSF “to listen to a panel discussion of homosexual rights, the law and strategies to overcome discrimination” is evidence of a shifting climate on the continent (January 28, 2007).

Allies

Around the world, human rights groups and HIV/AIDS groups have traditionally been the primary allies of LGBT and MSM communities. In East Africa, these groups are slowly beginning to embrace LGBT issues in a much more public and direct fashion than ever before. Likewise, universities have stepped up their support through research, as seen with the University of Nairobi’s study of MSM. LGBT groups are continuing to search for allies in other fields. One emerging religious ally is South African Archbishop and Nobel Prize Laureate Desmond Tutu who recently stated at a WSF news conference in Nairobi, Kenya: “To penalize someone because of their sexual orientation is like what used to happen to us; to be penalized for something which we could do nothing [about] -- our ethnicity, our race ... I would find it quite

unacceptable to condemn, persecute a minority that has already been persecuted." (Article available at: www.mask.org.za/article.php?cat=kenya&id=1459).

Technology

In a region where stigma and discrimination is a significant concern, LGBT and MSM groups have managed to develop some safe spaces through technology. The internet has propelled community organizing and helped local groups and individuals gain access to examples of activism from around the world. Online social groups have helped LGBT persons and MSM feel they are not alone, and for many, this encouragement has led them to come out more publicly. Websites such as Behind the Mask (www.mask.org.za) and the one run by Gay Kenya (<http://gaykenya.com/>) provide information and support. Internet access, however, is primarily limited to urban areas, leaving those in rural settings with little information and support. While groups recognize the gap between urban and rural, discussion has yet to move beyond identification of the problem.

Recommended Next Steps

Increase Coordination Among Funders

The interplay of poverty and competition for outside funding suggests that donors should develop collaborative funding strategies that support the goals identified by the movement as a whole. Communication between donors is key to reducing divisions between groups. In addition, increased coordination can better facilitate co-funding opportunities, thus broadening the scope and impact of work in the region.

Through a combination of regular conference calls and creation of a listserv, donors can better update one another about grantees, strategies, and resources. In this way, donors can build upon one another's efforts and fill gaps rather than repeating what has already been done. Once communication is strengthened, donor roundtables can serve as more formal strategizing forums. These meetings can also be an opportunity for new funders to share their interests and learn how to best fit into the work that is already underway. Roundtables can also provide opportunities for donors to get feedback and updates from grantees on the most recent needs and developments in LGBT health and rights. This would provide a formal means for grantees to make their voices heard and needs known; keep funders updated and collaborating; and facilitate discussion around strategy development that should be guided by those doing the work.

Donors should also allow LGBT organizations enough time to grow and identify their strategies and priorities before applying for funds. A sensitive approach is needed to ensure that groups have access to knowledge and skills, and the sufficient space and independence to move forward without experiencing external pressure. A participatory approach is needed to ensure that LGBT groups are fully involved in identifying the priorities for LGBT funding in the region.

Establish Safety Network for Activists

The WSF opened a much needed space for regional dialogue on LGBT issues, but it also placed the safety of individuals and groups at increased risk. From this and similar experiences, the need to protect the defenders of LGBT and MSM rights is clear. Lessons learned from other

regions for how to effectively establish a safety network for activists must be adapted for this region. It could be beneficial for a consultant to meet with LGBT and MSM groups in Kenya to identify the protective mechanisms that are needed and help determine the support that is required. This would help donors understand the best mechanism for funding such an initiative (e.g., what type of fund to establish, who would oversee it, and protocol/criteria for distribution).

Strengthen and Foster Linkages with Human Rights Allies

Ongoing support is needed from the international human rights community to maintain pressure on the regional political bodies to fulfill their duty to respect, protect, and uphold the rights of LGBT and MSM citizens. Donors can be key allies in this regard through strategic use of their global networks to effectively and quickly distribute updates on abuses. Continued effort to fund the human rights community, both regionally and globally, on LGBT issues is of paramount importance. Better linkages between LGBT and human rights groups are needed, as many LGBT groups have expressed the desire to better utilize human rights protections and mechanisms.

Build Group Capacity

Capacity building that focuses on groups rather than individuals will have a longer lasting impact on LGBT health and rights. Trainings should address needs identified by groups and should be spread among groups. Mutual sharing and exchange of mentoring would help build bridges between groups. This includes ensuring that adequate protection is available and developing regional LGBT networks to coordinate advocacy campaigns. Any effort funders can make to support promotion of cultural and traditional practices in the context of social gatherings (e.g., pride parades, film festivals, community centers) will strengthen community cohesion.

Capacity-building areas that have been identified as priorities by LGBT groups include: legal and human rights systems and usages; peer education/counseling; organizing and public sensitization techniques and strategies; LGBT-specific HIV/AIDS, safer sex, and reproductive health information; and organizational management.

Support Development of LGBT Resources

LGBT groups consistently identify the need for the creation of pamphlets, flyers, and other resources that address LGBT health and rights concerns. Culturally relevant literature is virtually non-existent in the region. Some groups, such as GALZ, have made the creation, publication, and distribution of LGBT literature their priority. Assistance with translation and distribution is needed for trainings and individual education. Due to the common argument that same-sex relationships and behaviors are “un-African,” culturally-specific literature is all the more important.

Address Access to Healthcare Barriers and Stigma Associated with HIV/AIDS

There is a gap in services for MSM and LGBT persons who need sexual health education that is tailored to their needs. For example, there are no campaigns geared toward the HIV prevention needs of MSM or WSW in Uganda. Further, there is no access to free condoms and lubricants. Peer education models have proven effective, but more widespread trainings are needed, especially among MSM, lesbian, and bisexual populations. In the formal healthcare sector, efforts to train healthcare providers about LGBT-specific health needs, stigma and

discrimination, and confidentiality are crucial to increasing access and utilization of healthcare services by LGBT persons. Resources such as OUT's booklet, "Understanding the Challenges Facing Gay and Lesbian South Africans: Some Guidelines for Service Providers," can be instrumental in this process. (This guide can be accessed at: <http://www.out.org.za>). LGBT groups would also benefit from the identification of more LGBT-friendly service providers.