Research on
The Lived Experiences of
Lesbian, Bisexual
and Queer Women
in Kenya
RESEARCH ON
THE LIVED EXPERIENCES OF
LESBIAN, BISEXUAL AND
QUEER WOMEN
IN KENYA
Accreditation

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ABBREVIATIONS

AFRA- Artistes for Recognition and Acceptance
CAL- Coalition of African Lesbians
FIDA- Federation of Women Lawyers
GALCK- Gay and Lesbian Coalition of Kenya
IDAHOT- International Day against Homophobia and Transphobia
KELIN- Kenya Legal and Ethical Issues Network
KNHCR- Kenya National Human Rights Commission
LBJ- Lesbian, Bisexual, Queer
LGBQTI- Lesbian, Gay, Bisexual, Queer, Transexual, Intersex
MSM- Men who have sex with Men
MSW- Male sex workers
NGLHRC- National Gay and Lesbian Human Rights Commission
INTRODUCTION

This report explores the lived experiences of Lesbian, Bisexual and Queer (LBQ) identifying women in Kenya. The data used to develop the analyses was acquired through a qualitative research carried out in three major towns in Kenya. As such, this study provides insights into the scopes and experiences of structural and everyday violence LBQ women face in Kenya. This will help LBQ organizations in Kenya to fine-tune and upscale their interventions. It will also point out knowledge gaps and provide new avenues for applied research to support LBQ movement building. Accordingly, this report will conclude with a set of recommendations per research finding to help LBQ organizations in shaping their agenda’s, developing targeted and effective interventions and increasing their overall impact. On the whole, this research report will contribute to building the LBQ movement in Kenya. A stronger LBQ movement in Kenya will allow individuals and their representative groups and organizations to (re-)claim their spaces and work towards achieving economic, health, political and social security for target groups, as well as challenge the existing forms of patriarchal oppression.

The report will further disentangle several dimensions of the lived experiences of LBQ women in Kenya around the following themes: Legal structures, gender performance, health, starting a family, spirituality and class positions. Firstly, we will examine the different concepts and terms used in this report and discuss the methodologies applied in more depth. Secondly, we will provide a political and historical overview to the current contexts in which LBQ women navigate their daily lives. Thirdly, we will explore the said themes by analyzing the narratives of our respondents. We will end the report by formulating recommendations for further research and by highlighting specific areas for intervention by LBQ organizations based on the different dimensions that encompass the lived experiences of LBQ women in Kenya.
CONCEPTS AND TERMINOLOGY

**LBQ**
In this report we use the acronym ‘LBQ’ as opposed to ‘LBT’ because of the political context of the Kenyan LBQ movement. The term queer refers to any person whose sexual or gender identity or expression does not conform to the gender pronouns he or she and these persons do not necessarily identify as lesbian or bisexual. This may include Trans identifying people, gender non-conforming people or others.

**Structural violence**
Acts of physical violence never stand alone; they emerge from structural violence by which we mean poverty, exclusion and/or humiliation. This research looks at the impact of both structural violence and acts of violence on LBQ women. Violence is not an anomaly, but part and parcel of social processes. Direct acts of violence that threaten bodies and the bare life of bodies arise from structural violence such as exclusion mechanisms in society. For instance, exclusionary aspects of notions of citizenship and belonging in Kenya are based on specific ethnic, age and gender configurations. These shape legitimating discourses of escalating and excessive direct acts of violence against ‘others’, such as LBQ women. The concept of structural violence allows for a focus on the violence of such routine political practices, (the drawing up of political categories and the writing of national histories) and on the discursive, socio-economic and political conditions that allow and legitimize the ‘undisguised’ political violence and its ‘routinisation’ in everyday life. Structural violence describes the violence written into the making and continuation of contemporary political arrangements, and into the production of majorities and minorities. The conditions that make direct acts of violence possible, and the way that they are shaped by shifting power relations and concomitant exclusion
mechanisms, must be part and parcel of any analysis of violence. It is therefore crucial to look beyond direct acts of violence as extraordinary events.

**BACKGROUND AND URGENCY**

At present, Kenya is at a crossroad. On one hand, LGBTIQ organizations have become more visible and are increasingly recognized by State institutions (see more below). On the other hand tensions around LGBTIQ people are also on the rise within Government and public domains. The latter is intrinsically linked to the former. Accordingly, this crossroad underpins the urgent need to gain more insight into the lived experiences of LGBTIQ people and of LBQ women in particular. Very little research has been done to understand the perspectives and experiences of these highly marginalized women, whereas more knowledge about them may engender more public support for growing political spaces for them. This support is much needed to tip the current impasse in favor of more social, economic and political freedom for LBQ women and for LGBTIQ people in general, in Kenya.

This research is grounded within a feminist framework, by which we mean our conceptual and political point of departure is one that aims to amplify alternative voices and experiences of marginalized women, and other narratives that challenge heteropatriarchy. This research will encourage and enable a series of new dimensions for further research and actions that might guide the LBQ movement in Kenya in becoming more cohesive, efficient and relevant to their member organizations. Subsequently, the research document will support these organizations to do the same for their recipients. A stronger LBQ movement in Kenya will also improve its relationship to CAL, and as such it will be able to play a more constructive role in building a Pan-African network of LBT organizing. Ensuing exchanges of knowledge will help all actors involved in teasing out the similarities and contextual differences of LBT/LBQ women in sub-Saharan African countries. Accordingly, the strategic networks and fundamental knowledge bases of CAL will be strengthened, and this will support collective advocacy, interventions and research.
METHODOLOGY

The researchers first undertook a desk review of international and national literature on LBT women and of policy documents and reports from representative organizations in Kenya. Based on this review, a topic list was developed that was used to conduct 18 semi-structured interviews\(^1\) with women participants who identified as LBT. Three cities were chosen for the research, Nairobi, Mombasa and Kisumu based on the growing number of women who identify as LBQ living in these areas. They are aged between 22-48 years. We recruited the women through our organizations, and their members mostly fall in this age bracket. We purposefully left out minors, that is, those 18 years and under as this may have triggered problems with local authorities. There are very few known LBT women above the age of 50 within the current LBT networks. Four of those interviewed work as LBQ activists, the others are engaged in different economic sectors including business, civil service and hospitality.

The topic list\(^2\) was first tested with three participants and adjusted accordingly to improve the structure of the qualitative interviews in line with the research objectives and the responses by the first participants. All interviews were between two and three hours and were transcribed verbatim. They were then analyzed through comparative and discourse analyses of the narratives. As noted previously, the

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\(^1\) All women who are directly quoted in this report are made anonymous and all other details in their narratives that may have an impact on their security are also left out.

\(^2\) The topics of focus for the research were health, economics, spirituality and social security of LBQ women in Kenya.
analytical approach is grounded in a feminist framework that seeks to bring out the alternative voices of marginalized women; i.e. voices that have been hitherto ignored in political spaces and academic works. Our epistemological position is that knowledge is embodied, and this type of analyses helps us to circumvent the essentializing tendencies so common in research. Instead, we aim to emphasize the plurality and the fluidity of LBQ lives and as such take the self-positioning of women as the starting point of analyses rather than allotting categories to them. This critical viewpoint will allow us to grasp the multiple and varying layers of their context bound senses of the self, and help the LBQ movement to develop interventions that matches such fluidity.

In addition to narrative analyses, the research included several focus groups discussions (also recorded and transcribed verbatim) to discuss and check specific preliminary findings. Contextual information was gathered through informal talks and observations that were recorded in field notes using condensed notes.

The limitations of this study are linked to both practical and methodological factors. Firstly, the scope of this research in time and resources did not allow us to include rural regions in Kenya. Hence, the lived experiences explored here are from urban women. Secondly, time and money constraints also hindered us in carrying out research with women that are not somehow connected to our member organizations. Accordingly, the lived experienced of the women discussed below only concerns women that have, to some extent, access to information and other resources from LBQ organizations. This challenge resulted in the limited inclusion of women who may engage in same-sex practices but who do not necessarily identify with LBQ and who do not affiliate with LBQ organizations. This was due to the limited time available to carry out the extensive fieldwork needed to conduct research with this group. The research also did not include people who are female bodied but who identify as men and/or other trans positions, nor with male bodied individuals who identify as women and so on.
Overall it is our aim to fill a gap of knowledge about a group of highly marginalized women who are stigmatized by the allotted subject position of ‘lesbian’ in Kenyan society. Not all the women interviewed identified with the label lesbian, hence our emphasis on other positions such as bi-sexual and queer. Yet, all women who participated in this study were viewed as ‘lesbian’ in society and had to relate to the implications this fact raised. The focus on the LBQ women was chosen because of the lack of knowledge about the impact of being viewed as lesbian has on women’s lives and how women navigate the different types of violence legitimized by this type of ‘othering’.

The marginalized positions shared by LBQ women have many parallels with other groups of marginalized women such as female sex workers. From an intersectional perspective these include class, age and gender positions. We recognize that in the Kenyan context, ethnicity plays a big role people’s decision making but this is mostly seen in politics and not in LBQ communities. However, we have not opted to include this group of marginalized women because we aim to focus on the particularities of hetero-normativity in relation to stigma and positioning and the material effects of such processes of ‘othering’ in the lives of LBQ women. This is where the possible parallels between female sex workers stops. Sex workers are discriminated and harassed because of the work they are engaged in, not for their sexual and romantic desires and practices. We want to focus on the women who are discriminated because of their alternative sexualities and practices and interrogate how this affects their social, economic and political positioning. This does not withstand the fact that some of the conclusions and recommendations have wider implications for other marginalized groups of women as well.

We have chosen a qualitative methodological and feminist theoretical framework based on our research emphasis on lived experiences. Conclusions based on individual narratives are valid and, to some extent, generalizable because of the insights these give on embodied histories and on how structures and discursive patterns become visible in individual lives.
CONTEXTUAL ANALYSIS

Despite existing laws that discriminate against sexual and gender minorities, Kenya has a growing number of women who identify as LBQ. Since its inception in 2006, the Gay and Lesbian Coalition of Kenya (GALCK) has supported a number of LBT organizations in different regions of Kenya to help them address the issues they face. The issues range from physical violence, to home evictions and mental health problems. Due to the fragmented nature of GALCK’s efforts, these have not yet resulted in structural change. LBQ women continue to face direct acts of violence, social stigmatization and isolation, undetected mental health problems and poverty.

There is still very little data on the actual scope and lived experiences of marginalization and discrimination of LBQ women in Kenya. Lack of data has contributed to the fragmentation of efforts, and accordingly their vulnerabilities have even been on the rise in recent years. We understand this from a growing number of cases of violence, insecurities and human rights violations that are reported by LBQ women to representative organizations. There are a number of reasons behind the increase in reports. Firstly, the fact that more representative organization began to track such incidents in recent years. Secondly, the growing social space enabled by these organizations may also have led to an increased visibility and thus vulnerability of LBQ women in the public domain. Finally, for many different reasons some of which are explored below, Kenyan society is marked by a deep-seated homophobia, often whipped up by right-wing evangelical support from within Kenya and also from the USA.
HISTORICAL CONTEXT OF ALTERNATIVE SEXUALITIES AND SAME-SEX PRACTICES AMONG WOMEN IN KENYA

“...My grandma - my paternal grandmother’s sister- was queer... she told me herself. Of course she didn’t use the term queer... She liked girls so she refused to get married to any man and never had any children.” [Nia, 19th May 2015 Nairobi]

The colonial government and the introduction of Christianity, among other historical processes, imposed fixed notions of masculinities and femininities on the subjects of the newly forged colonial state called Kenya. These hetero-normative structures contributed largely to the erasure of what we now understand as queer practices, from the dominant social space and social memory.

The hegemony of the white and/or male gaze in (pre-)colonial studies, for instance, has not only led to the erasure of queer practices in Kenya in general, but especially a lack of knowledge building on such desires, narratives, and positions among Kenyan women. As a result, very little literature is available on the diversity of woman-to-woman relationships - such as sexual attractions, romantic expressions and even formal marriages - in pre-colonial, colonial, and even post-colonial Kenya. Hence, the narratives of alternative sexual and romantic practices among and between women have for long time mostly been shared within the privacy of intimate settings. The above excerpt shows that some of these narratives have been passed on orally to the next generations, and several have even been captured in literary works.

Despite this omission of ‘queer’ history, it is widely known that a great number of Kenyan communities, most notably the Kalenjin (encompassing the Nandi, Kipsigis,

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3 Murray, S. O. (1998) "Homosexuality in 'Traditional' Sub-Saharan Africa and Contemporary South Africa"

4 The Equal Rights Trust in partnership with Kenya Human Rights Commission (2012): In the Spirit of Harambee; Addressing Discrimination and Inequality in Kenya pg 28
and Keiyo), Kuria, Akamba and Kikuyu groups), had (or still have) institutions of marriage that allowed older women to marry younger women. These unions served as an avenue through which older women were able to have children if they were barren, access resources such as land and exercise social influence by taking up what were (and still are) commonly considered male positions within patrimonial structures. In these mainly patriarchal societies, inheritance and succession for instance passed through male lineage. Women could only access such positions of power through woman-to-woman marriage.

In general, these unions involved an older woman, who was not married, who had been childless (and widowed), or who had no male heir. This older woman was largely considered the ‘husband’, and she married a younger woman, the ‘wife’, who would bear her children. The ‘husband’ paid bride wealth and observed all other rituals culturally required of a suitor. The ‘bride’ was allowed by her ‘husband’ to take up a male lover (often selected by the ‘husband’) for the purposes of procreation. Any children begotten of the union were recognized socially and legally as the rightful offspring of the ‘husband’. The older woman thus supported the children in the same manner as would any other father. The ‘husband’ was also promoted to the status of a senior man, and enjoyed all rights, obligations and privileges associated with that position in society.

In research on the Nandi woman-to-woman marriage practices, Oboler challenges the popular assertions that this institution had no sexual dimension, often reproduced by her participants, by positing that this may have reflected pertinent gender ideals rather than actual behavior. In her criticism of Oboler’s work, Wieringa holds that

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7 Wieringa S. Tommy Boys, Lesbian Men and Ancestral Wives; Female sex practices in Africa 2005.
Oboler should have indeed explored further how women who narrated that they felt ‘real affection’ for each other expressed such emotions in practice.

The majority of the interview participants for this report shared the historical evidence of woman-to-woman unions and individual narratives of desires and relationships between women in pre-colonial and colonial times helped them fight ‘internalized homophobia’. With this we mean an LBQ identifying person’s direction of negative social attitudes toward the self, leading to a devaluation of the self and resultant internal conflicts and poor self-regard.8 Strikingly, the notion of internalized homophobia was a dominant theme in the interviews, and shall be further explored below.

PROBLEM ANALYSIS: CURRENT TENSIONS AFFECTING LBQ WOMEN

In May of 2015, William Ruto, Kenya’s Deputy President at a Sunday church service declared that there was no room for ‘gays’ in Kenya9. This was prompted by a court ruling stipulating that the National Gay & Lesbian Human Rights Commission (NGLHRC) should be legally registered by the Kenyan government10 This controversial but constitutionally sound pronouncement, sparked a heated debate in the public domain about what is popularly dubbed ‘homosexuality’ and so called ‘gay rights’. This was not Mr. Ruto’s first such utterance. In the run-up to the presidential election in 2013, he equated ‘homosexuals’ to dogs11. Within the political sphere, the terms such as ‘gays’ and ‘homosexuals’ are used loosely and broadly to refer to anyone, especially

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8 Meyer IH, Dean L. (1998) Internalized homophobia, intimacy, and sexual behavior among gay and bisexual men, in Stigma and sexual orientation: Understanding prejudice against lesbians, gay men, and bisexuals.

9 http://uk.reuters.com/article/2015/05/04/uk-kenya-gay-idUKKBNONP10620150504


11 http://79crimes.com/2013/02/15/protest-over-kenyan-claim-that-homosexuals-dogs/
men, viewed to be non-conforming sexually and/or in their gender performances. As stated, homophobia is solidly rooted within the Kenyan religious and political rhetoric, and has a long history of state-sponsored discrimination and violations against LGBTIQ Kenyans to gain political mileage.

Remarkably, same-sex identities and practices among women are usually only mentioned alongside those of men and are not explored or discussed separately. Homophobic political and religious actors often go into painstaking detail to describe to the public the alleged sexual deviance and immorality of sexual acts between men, yet rarely discuss such practices and relationships among women. Men in love and/or engaging in sexual acts with each other triggers deep hate and rampant violence against them are common. Gay men are widely held as morally corrupt, dirty and promiscuous, whereas LBQ women are generally considered mere victims. In popular imaginations, they are often framed as victims of abuse by men, of peer influence (at boarding schools for instance), or of ‘westernization’. These limitations within the public debate have contributed to a profound lack of understanding of female queerness in Kenya.

This report is an attempt to build a better knowledge base on and contextualization of the lived experiences of LBQ women. Although not mentioned in detail, most ‘anti-lesbian’ sentiments maintain that romantic relationships and sexual practices among women are deviant, unnatural, and abhorrent to moralities. The homophobic political elite, championed by the ‘anti-gay’ caucus in the Kenyan parliament, recently referred to lesbianism as a ‘cult’ that seeks to recruits young bright girls. It even named a few of the more visible lesbian activists in the country as the ‘high priestesses’ of this alleged ‘cult’. This again speaks to the existing myths that shape dominant discourses on LBQ women in Kenya.

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12 http://www.unaids.org/en/resources/presscentre/featurestories/2013/july/20130703kenyavisit#.VUy7oM8GqFw.facebook

13 http://www.youtube.com/watch?v=gY4FWWap4rw
In March 2014, a dangerous spike of violence against LGBTIQ people in Kenya was observed by the NGLHRC following the formation of the parliamentary 'anti-gay' caucus which called for citizens’ arrest of ‘gays and lesbians’. These incidences steadily increased immediate after the presentation of the ‘Kenya Anti-Homosexuality Draft Bill’ in July 2014. The draft bill called for the public stoning of ‘foreign gays’, life imprisonment for repeating offenders and the specific criminalization of lesbian sexual acts (the current Penal Code only refers to same-sex practices between men). The Bill has not been accepted by Parliament as yet, but it did spark growing violence against LBQ women, for example as described by one of the research participants:

“I was publicly undressed by some “bodaboda” (the cyclist to a motorcycle that is used as a public form of transport in Kenya) guys in Kasarani... I am butch; I always dress in a masculine way, that day I was going to school. I found the motorists at the stage, they were always there, and some were even my friends. I knew their faces and would sometimes say hi as I passed them. That day they just started shouting at me, asking if I was a boy or girl...they were many... they surrounded me and started grabbing me and tearing of my clothes. They were laughing. They tore off my shirt and were pulling my trousers. Some women who sell vegetables in the nearby kiosks intervened. They covered me up in “lesos” (a traditional fabric that has different patterns) and walked me home... This happened in broad daylight.” [Leila, 18th May 2015 Nairobi]

In line with (but not necessarily linked to) the dominant focus on alternative sexualities and sexual practices among men in the public domain, LBQ organizing within the Kenyan LGBTIQ movement is much less visible. Of the 16 LGBTIQ groups

14 NGLHRC (2012-2014), Legal Aid Summary (see attached)
under the umbrella of GALCK only two are actively working specifically on LBQ women issues. Positions of power, even within the LGBTIQ movement, are rarely given to LBQ identifying women, further reducing their visibility. This is in spite of the pivotal role played by LBQ identifying women in the creation of queer spaces within civil society as well as in the formation of GALCK in 2006. In addition, in contrast to men there are also very few ‘out’ LBQ women engaging with the public whether in a professional or personal capacity. A partial answer as to why LBQ women are underrepresented in positions of power and in public advocacy can to be found in the emphasis by NGOs and international donors on ‘men who sex with men’ (MSM) in attempts to curb the HIV/AIDS crisis. During the early stages of NGO funding and organizing, funds were allocated for medical and advocacy interventions targeting MSM and others who were seen as high risk populations, such as sex workers. This has boosted the development of a vast infrastructure of organizations and services for gay men while largely ignoring LBQ women. Another contributing factor is tied to the patriarchal power configurations that still affirm the dominance of men over women, even within queer organizing. All this perpetuates many misinformed assumptions and myths about female queerness and the wider public does not have any alternative information on LBQ identities and practices, to counter rampant lesbophobia in society.

**LEGAL STRUCTURES AND LBQ WOMEN**

Kenya promulgated a new constitution in 2010\(^\text{16}\) that has been hailed as amongst the most progressive and liberal among democratic nations worldwide. The constitution seeks to ensure liberty, justice, equality and fraternity of all citizens. More specifically, its provisions guarantee economic, social and cultural rights. These are stipulated by the Bill of Rights and thus form an integral part of Kenya’s democratic state. The purpose of recognizing and protecting human rights and fundamental

\(^{16}\)http://www.kenyaconstitution.org/
freedoms is to preserve the dignity of individuals and communities and to promote social justice and the realization of the potential of all human beings. These rights should thus form the framework for social, economic and cultural policies, but in practice this is not always the case.

This spirit of inclusivity and equality is embodied in Article 27 of the Constitution, which states:

(4) The State shall not discriminate directly or indirectly against any person on any ground, including race, sex, pregnancy, marital status, health status, ethnic or social origin, color, age, disability, religion, conscience, belief, culture, dress, language or birth.

(5) A person shall not discriminate directly or indirectly against another person on any of the grounds specified or contemplated in clause (4).

(6) To give full effect to the realization of the rights guaranteed under this Article, the State shall take legislative and other measures, including affirmative action programs and policies designed to redress any disadvantage suffered by individuals or groups because of past discrimination.

The Constitution proposes an altruistic mode of governance in which the state not only strives to achieve equality, but is also mandated to undo past discrimination and harm by for instance, creating systems that redress old power structures and concomitant persecutions through affirmative action. In practice, many minorities, including sexual and gender minorities (in number and/or power), still face rampant persecution by the state on a daily basis.

More specifically, the State continues to discriminate against LBQ women through frequent arrests, denial of access to basic rights and amenities, and through all kinds

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of other exclusion mechanisms that hamper the participation of LBQ women as rightful citizens in Kenyan society. Legitimizations for these iniquities are often drawn from section 162-165 of the Penal Code, which criminalizes ‘unnatural acts’. These clauses limit jurisdiction to what they refer to as ‘carnal knowledge against the order of nature’ between males or with a male partner without further specifying what this may entail.

The Kenyan state, and by extension the wider public, does not seem to differentiate, for instance, between alternative identity expressions and same-sex practices among and between men. Yet, only the latter are criminalized. Criminalization focus entirely on male citizens fitting within a rather fluid definition of homosexuality’ (i.e. any man who identifies as LGBTIQ, or any man who takes up positions that are widely held as sexual or gender non-conforming, and any man who is perceived to be different in such ways) is deemed to be a criminal. Women however are not even mentioned due to the fact that LBQ relationships are generally deemed “ok” as long as they do not threaten heterosexual structures. This is illustrated by the fact that LBQ women are framed as ‘victims’ of past heteronormative societal structures for example: growing up with a violent father, past sexual violence by a heterosexual partner or past emotional challenges by an unfaithful heterosexual partner. Other justifications of the rampant persecution of LGBTIQ people by police and fellow citizens are based on public condemnations, which are largely informed by the moral panic of political and religious leaders. As stated, this also has a major impact on LBQ women, hence increasing instances of lesbophobia.

Several lawyers, opinion makers and civil society organizations (such as KELIN\(^{18}\), FIDA\(^{19}\), Professor M. Mutua and the KNCHR\(^{20}\)) question the legitimacy of certain

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\(^{18}\) Kenya Legal and Ethical Issues Network

\(^{19}\) Federation of Women Lawyers

\(^{20}\) Kenya National Commission of Human Rights
sections of the Penal Code in relation to the new Constitution of Kenya 2010. The Bill of Rights, according to this view, supersedes the Penal Codes. Article 21(1) and (2) of the Constitution of Kenya states, for instance, that it is the fundamental duty of the State and every State organ to observe, respect, protect, promote and fulfill the rights and fundamental freedoms of every citizen.

The above landmark ruling in April 2015 that ordered the government registration of the NGLHRC underscores the legal grounds for this view. In their verdict, the bench reiterated the prominence of the constitution by stating that:

“The state has to act within the confines of what the law allows, and cannot rely on religious texts or its views of what the moral and religious convictions of Kenyans are to justify the limitation of a right.”

While no legislation in Kenya specifically mentions sexual acts between women, LBQ women who engage in sexual practices with other women might qualify to be charged under the Sexual Offences Act (2006), i.e. section 11 that criminalizes ‘indecent acts’ between adults. Again, this clause does not further explicate what this may constitute. The ambiguities of the relevant clauses in the Penal Code and the Sexual Offences Act, allow for arbitrary decisions and power by the judiciary in interpreting and issuing verdicts according to personal moral views. However, there has not yet been any reported prosecution of women accused of engaging in sexual practices with other women under these laws, despite widespread police harassments and general violence against LBQ women. Nonetheless there are fears that the current tensions may lead to persecutions, especially when the aforementioned draft bill and the ‘anti-gay’ caucus in parliament are considered.

**SAFETY OF LBQ WOMEN AND GENDER PERFORMANCES**

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Understanding alternative sexual identities and practices are a fundamental part of female queerness in Kenya. There is however, no singular way to grasp and represent LBQ narratives, positions and performances in Kenya. Each of the interview participants negotiated, performed and navigated female queerness within the Kenyan society in their own diverse ways. The lived experiences of LBQ women were indeed shaped by the oppressive identity positions dominant in Kenya society. However, the way these shaped and intersected with different gender expressions, levels of education, religion, class positions, geographical location, and family backgrounds, among others, varied widely. Certainly, the only point of convergence among all the participants was their awareness of ‘being different’ with regard to their sexual identifications and practices. Nonetheless, this shared sense of difference played out in dramatically different ways in their lives.

In the group discussions with the participants, the conversations often revolved around identity politics and labels. Participants identified themselves using labels such as “pure lesbian” - by which they meant that they were not sexually attracted to men; “gold star”- colloquially meaning a lesbian identifying woman who has never had sexual intercourse with a man; and “no-label” colloquially meaning lesbians who do not use identities such as butch, femme, boi, tommy etc. Following their own conceptualizations of these labels, the women described different expectations attached to them. For instance, one participant stated that a “masculine presenting” LBQ woman (also dubbed butch, tommy, boi or gender-fuck) is expected to perform within a hetero-normative ideal masculine role, and mentioned that the reverse applies for feminine presenting LBQ women.

I think studs should be the providers in the relationships. In reality femmes often carry the financial burden. I think it’s because it’s hard for studs to get jobs. [Ayan, 23rd April 2015 Kisumu]
According to the views shared by many participants, using their own terms; ‘masculine presenting’ LBQ women are more visible and more likely to be perceived as ‘lesbian’ or sexually non-conforming in the public domain. Nine out of 10 participants who identified as studs, butches or tommys admitted to being constantly conscious of their surroundings and security. They told the researcher that they were frequently challenged by family, teachers, friends or even strangers about their gender performances.

“I am a stud, I think everyone looks at me and assumes that I am gay. One of my friends has been warned by her landlord not to have me over at her house because of how I look.” [Harley, 23rd April 2015 Kisumu]

“People behave as if gays are marked on their foreheads. I swear no one believes that I am a lesbian even when I tell them. It’s because I am femme...Even that IDAHOT march when people [LGBTIQ persons marching] were being stoned at Uhurupark. I was wearing a rainbow t-shirt and walking around freely. No one asked me a thing.” [Ahadi, 17th May 2015 Nairobi]

Bisexual identifying participants did not list security as a major problem. Rather, their primary concern was being ‘outed’ to their families or partners (for those in heterosexual relationships).

“I have no issues with insecurity at all. When people look at me they see me as an ideal wife and mother. Only my gay friends know that I date girls and I never let them interact with my family. My husband doesn’t know. He can never know!” [Doreen, 2nd May 2015 Mombasa]

Out of the 18 women interviewed in Kisumu and Mombasa, 15 expressed grave concern for their physical safety, and of these 15 the majority saw themselves as ‘masculine presenting’. This leads to the conclusion that those LBQ women who are visibly less conforming to gender norms in their performances of the self are at a
higher risk of encountering direct acts of violence than perhaps their counterparts. Participants stated unanimously that more ‘femme-looking’ LBQ women could often pass for ‘normal’ in public spaces.

Despite encountering frequent violence, LBQ women hardly report cases to the police. According to the NGLHRC 2014 report, 22 cases of attacks on LBQ women were reported between January 2014 and November 2014. Out of these cases only six were reported to the police. Participants explained that most LBQ women have no faith in the police and were often afraid to ‘out’ themselves and/or increase tensions in relationship to family members. Only two of the reported incidents were presented in court, and one of these was withdrawn upon the first hearing date following family intervention. The other case is still being investigated by the prosecution to gather more evidence to support it.

The issue of insecurity was perhaps the most discussed topic by the interview participants, both during the interviews and in the focus group discussions. This mirrors the popularity of this topic on LBQ online forums and in other virtual spaces. Participants explained that self-identifying studs experience triple marginalization: as women within patriarchal social structures; as LBQ women; and as ‘masculine presenting’. Self-proclaimed studs are, according to the participants, also excluded from State efforts to curb gender-based violence, and they are deliberately locked out of conversations around protection of women by State actors. The Kenya Police Service whose mantra is ‘Utumishi kwa wote’ (‘service for all’ in Kiswahili) routinely discriminate against and harass all LBQ women who seek their protection or report violations to them, but the self-proclaimed studs, the participant recounted, bear the brunt of this.

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22 NGLHRC 2014, Legal aid program mid-term report (see attached).

23 Conversation at NGLHRC civic education for LBQ women held on 17th January 2015.
“Of course I cannot go to the police, first I am a woman, and then am lesbian and a refugee! They will not listen to me. They will rape me again and throw me in jail. I am nobody here...I know that and they know that too.” [Jackie, Ugandan refugee, 10th May 2015 Nairobi]

Participants all narrated different stories about random arrests of LBQ women who were kept in police lock-up overnight only to be released without charges the following morning. Most times, however, they had to pay hefty bribes in order to be released or to avoid being taken to court on trumped up charges. Some, participants claimed, they were raped by police as a form of bribe to ensure their release. They did not give further details.

Alongside police brutality and violence from family and members of the wider public, the participants also stated that many LBQ women face evictions from their homes. Again, the self-identifying studs, claimed to be more in danger than their more ‘femme’ looking counterparts. However, similar to the other aspects of security risks mentioned above, all LBQ women were subjected to this type of violence and human rights violations on a regular basis. Many narrated being (or having friends who were) unlawfully evicted from their homes on suspicion of their sexual orientation and / or their gender non-conformity. In addition to the intersecting sexual orientation, gender identity and gender performance/presentation, there is also a class dimension to the evictions. For example evictions tended to occur in lower middle class and lower class neighborhoods where people interact more intensively with each other than in high-class areas, and where social ties are geared more towards cohesion and control. Interestingly, some evidence from the interviews shows that particular religious or political events may trigger such violence by landlords and neighbors. For instance, the highest incidences of violence in the Kenyan Coast, which has a largely Muslim population, are reported during Ramadan.

The people in my neighborhood want me out because they assume am a lesbian. They told me I should move because they can’t live with someone like
me... I could feel the tension, so I left. I haven’t been there in two weeks. I have been staying with a friend. It is hard... I can’t even go to her house during the day. I leave in the morning and come back at night so as not to raise the suspicion of her neighbors [...] it is funny; I work as a security officer at local organization. “Whenever anything happens they call me and ask me to go, assess that situation and I report back to them. When somebody is in trouble they call me. Now am in this situation, who will I call? I have alerted the office, I don’t know who to talk to in Nairobi. If it was a gay man, trust me they would have responded.” [Jay, 2nd May 2015 Mombasa]

Another security risk many LBQ women face, including self-identifying studs, is linked to different kinds of abuse from immediate or extended family members. The participants all talked of having experienced at least one incident of physical violence by relatives. Some participants even reported that they have had to deal with numerous attacks by family members either directed to them or their parents, who were at times blamed by others for raising queer children.

“They recently threw my friends and I out of our family home, I had been sick so my friends came to see me. My brother burst in and grabbed me by my throat telling us to get out, that we are satanic. Another brother a lawyer threatened to throw me in jail because what I was doing was illegal. Problem is that there are so many queers in the family now. Every time one comes out they try blaming it on me.” [Rose, 23rd April 2015 Kisumu]

One very painful aspect which came to the forefront during the interviews was a few participants reported that sometimes violence was meted out with the approval of their parents, and with the objective of teaching them to conform to gender and sexual norms. In explaining the impact of such violence, participants referred to a suicide case in July 2012. An LBQ woman committed suicide in Siaya County after her parents had held her hostage and had organized to have an older male family member rape her repeatedly in an effort to impregnate her and ‘cure’ her of what was widely
termed as ‘lesbianism’. The NGLHRC legal department database shows that the report of such cases of rape are on the increase, from two cases reported in Nairobi in 2012 to eight rape-by-family cases reported in Nairobi in 2014.

Rape in general is shrouded in shame and taboo, and this is only exacerbated in the case of LBQ women. Hence, victims rarely report these incidences to the police. This is also tied to the general mistrust of the police and the fact that they face violence from law enforcers. The few survivors that have reported being raped are almost always only interested in accessing immediate medical attention, but remain very hesitant about pursuing justice for all the obvious reasons. Participants of this research also raised concern over a lack of information on what to do to prevent rape, access support and how to assist rape survivors.

“After he raped me I lay there crying…there was no one to call. I told the UNHCR, they sent me to hospital…When the other Ugandans came to see me, and I could not tell them why I was sick. It is so shameful. I only told one guy, he is like my brother.” [Jackie Ugandan refugee, 10th May 2015 Nairobi]

The research data from the literature review and review of social media also highlighted violence between lovers and partners. However, most participants were reluctant to discuss this despite efforts by the researcher to initiate a focus group discussion. Instead the participants managed to change the discussion to LBQ identities and labels and the expectations attached to them. In trying to unpack the different layers of their narratives, the researcher came to understand that this shift in the debate may hint towards some of the reasons for violence between LBQ partners. Although more research is needed, possible reasons might be untreated trauma, self-stigma, and social and economic isolation. More specifically, self-


25. NGLHRC 2014, Legal aid program mid-term report
proclaimed studs often see themselves as ‘providers’, in line with dominant masculine ideals, but as a result of extensive discrimination they are often less able to access long-term work opportunities than other LBQ women. The ensuing frustrations, gender anxieties and double bind (depending on and feeling responsible for a partner) can sometimes lead to physical violence between partners, especially when partners are able to work and have fulfilling careers.

LBQ WOMEN AND (MENTAL) HEALTH

Every person has the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care.\textsuperscript{26}

The above-mentioned security risks and rampant symbolic, physical and structural violence faced by LBQ women all have an impact on the health issues they face. In contrast to numerous organizations working on health among queer men, there is no single organization in Kenya working specifically on health among LBQ women. Several organizations have formed partnerships with mainstream health service providers, and are able to refer LBQ women to these partners in case of emergencies, but these are few and far between.

The lack of proper health care services for LBQ women partly derives from a lack of understanding of their health needs and risks. For instance, the general assumption is that women who engage in sex with women are not at risk of contracting STI’s and HIV. The research highlighted this and other dangerous assumptions that are widely held among LBQ women and which perpetuates certain risk behaviors among them.

The Government clearly falls short in its Constitutional mandate to provide the highest attainable standard of health for all citizens. In addition, the research

\textsuperscript{26} Article 43(1) Constitution of Kenya
participants all spoke of cases in which LBQ women were discriminated against by health care providers or were refused services in government hospitals. The participants stated that their main concerns were confidentiality and disclosure. Many LBQ women would rather avoid seeking medical services at all than risk having their privacy breached by medical professionals.

“We need health services. I used to go the VCT, and they would often ask if I had sex with a condom. If I told them that I have sex with women, the person interviewing me would go out and call their colleagues. I would get mad and walk out. If I can’t protect myself then I can’t protect my friend or partner.” [Daisy, 3rd May 2015 Kisumu]

In addition to discrimination, health care in Kenya is quite costly and some of the participants admitted to overlooking physical problems until it was often too late. Medical insurance costs are too high and the Government medical fund does not cover outpatient procedures. More specifically, LBQ partners do not qualify under spousal benefits. So unlike heterosexual partners, an LBQ woman who may have medical insurance does not qualify to cover her partner.

Alongside sexual, physical and reproductive health, most participants mentioned stress, depression and other mental ailments that in general can be termed as mental health problems. The above issues already indicate that anxieties stemming from self-stigma, social and economic isolation may lead to violence between partners. Even more prominent among LBQ women is the use (or abuse) of alcohol and drugs to try and quell such frustrations and ensuing depressions.

Most women shared with us the high levels of stress as a result of the different forms of violence they experience in daily life and how this has even led to depression. Trying to delve deeper into this topic was quite difficult. This was probably caused by the fact that mental health is a major taboo subject in Kenya, and cannot be separated from public debates on witchcraft, spells and religious non-conformity.
to the uncomfortable nature of these conversations throughout the Kenyan society, mental health issues are rarely talked about, including amongst LBQ women. Very few participants had an understanding of mental health issues despite their descriptions of mental ailments such depression and anxiety. They however did draw parallels between being an LBQ woman living in Kenya and being at a high risk of mental illnesses due to stress. Upon further exploration, a few reiterated that LBQ women often have stress related problems, such as depression, insomnia and anxiety, and mentioned that this derived from having to deal with discrimination, isolation, stigmatization and violence without proper treatment. They declared that as a result of accumulating stress, a large part of ‘lesbian culture’ in the larger cities in Kenya consists of heavy drinking and drugs abuse. LBQ women in urban areas are more likely to meet over drinks than for other activities like going to the movies or shopping. Reliance on bars as social venues may also contribute to increased pressures for LBQ women to engage in any form substance abuse, adding ‘peer pressure’ to the mix of challenges faced by LBQ women.

“As LBQ women we rarely take care of our bodies. There is a lot of drug abuse and alcohol dependency, this really stifles our development. I am working on a detoxification program where we are trying to train our community to reduce their alcohol and drug dependency for their health and wealth to improve.” [Nduta, 24th April 2015 Kisumu]

Nonetheless there are a number of organizations providing various types and levels of supports to the LBT community. For example, Artistes for Recognition and Acceptance (AFRA) is a LBQ organization in Nairobi that provides a ‘wellness through art’ project for LBQ women where women are urged to de-stress through artistic expression. NGLHRC also offers a space for monthly conversations dubbed “Because

27 2012 Committee on Health Care for Underserved Women (Opinion) Health Care for Lesbians and Bisexual Women

http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Health-Care-for-Underserved-Women/Health-Care-for-Lesbians-and-Bisexual-Women
Women” by LBQ persons on all aspects of their lives with a view of confronting shared challenges among LBQ women for social, physical and mental wellness. LBQ women also find ways to self-organize and support through gatherings such as picnics and sports aimed at providing safe spaces for congregation. However, these interventions are limited in scope. In fact, the lack of information and proper health services, and specifically mental health services, to LBQ women came out as one of the main urgent issues to be addressed by the LBQ movement.

The Gay and Lesbian Coalition of Kenya (GALCK) is the national umbrella body for Kenyan organizations working for the rights and social well-being of sexual and gender minorities. At policy level, GALCK advocates legal and policy reforms, including the decriminalization of consensual same-sex activity, the protection of LGBTIQ persons from discrimination and violence, and the protection and promotion of their health rights. Furthermore, the organization seeks to transform negative attitudes and behavior towards sexual and gender minorities by disseminating information and educational material that counteracts prejudice and ignorance. Ensuring access for LGBTIQ persons to sexual and reproductive health services tailored to their particular needs is one of the organization’s core objectives.

**LBQ WOMEN AND FAMILY**

Article 45 of the Kenyan constitution while purporting to guarantee every person’s right to start a family, LGBTIQ and other non-conforming Kenyans are not included.

1. *The family is the natural and fundamental unit of society and the necessary basis of social order, and shall enjoy the recognition and protection of the State*

2. *Every adult has the right to marry a person of the opposite sex, based on the free consent of the parties.*
For purposes of this research, family falls under three categories, immediate family, societal pressure around getting married and starting a family as a woman and the process of starting a family as an LBQ woman.

It is obvious that all LBQ women have families regardless of whether they are out to them or not. LBQ women who are out, fall into the categories of those whose families accept them and those whose families do not. LBQ women whose families don’t accept them face numerous challenges because more often than not, they find themselves outcasts as their families want nothing to do with them. This in turn puts them in the precarious position of having to cope without any support system. Their physical, economic and mental security is affected as they may find themselves homeless and having to find alternative ways of surviving such as theft and prostitution which then puts them in danger of further abuse.

With regards to starting a family; the Children’s Act no. 8 of 2001 of Kenya Cap 141 outlaws legal adoption of children by a homosexual. In Vitro Fertilization (IVF) and Artificial Insemination (AI) services are only offered in a few high profile medical centers at astronomical costs making them inaccessible to most LBQ women. While many of the participants expressed the desire to become parents, their lived realities leaves them only with the choice of engaging in sex with a male donor/partner.

“We have been together for 11 years. We live together. My partner wanted to pay dowry to my parents as a woman living with a woman. It is acceptable in her culture. She had been married before and was unable to have a child. She got separated from her husband. She wanted kids and she told her parents that instead of adoption I would give a child. Her sister ‘outed’us to her brother but we denied. The brother consented to the dowry since I would give them a child so I was their daughter. At that point I had to out myself to my

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28 Children’s Act no. 8 of 2001 s. 158 3(c)
mother as a woman living with a woman. She didn’t talk to me for a while then she confronted me on whether I was a lesbian or not. I kept quiet. I realized it was time to come out and I did, to all my siblings. My aunt found out, summoned me to the village and presented me with a man to marry. I pulled the bible on them and told them that when the time was right to get married I would get someone to get married. I think they are still waiting. The decision for us to have a child had clearly been made for us. It was great that we wanted a child too. We had differences when it came to donors, I didn’t like the people she (my partner) liked as donors for me. So we agreed that I would get one I liked as long as we got a baby. I got one I liked, he was a friend’s partner and he was agreeable to donating sperm provided that we didn’t involve him in the child’s life. It was a plus for me that he didn’t want to be in the child’s life. My partner was happy too because we were only willing to co-parent with a gay parent. When the decision was made we tried artificial insemination unsuccessfully for a number of times. We consulted a gynecologist and monitored my cycle for a year and when I was sure of my unsafe days I had sex was with him. This was the toughest decision for me, I wasn’t into men, time was running out and we really wanted to become parents. A month after, my partner bought a pregnancy test and we found out we were pregnant. We were overjoyed. We called our friends for a celebratory dinner and guys already started guessing whether it would be a boy or girl. My baby is now one year old, she is everything. She makes my life enjoyable. She has taught me what love is. I doubt I have ever loved anyone how I love her. My partner cannot stand it when we are away even for a night. My friends have turned her into the trophy queer baby. They bring her boy clothes, girl clothes, they show her off. She truly is my happiness.” [Joy* Kisumu]

In Kenya, families are viewed as an important social unit where procreation is the primary purpose of the family unit. Within the patriarchal structures of Kenyan society single women families are disadvantaged and viewed as incomplete.
With this background in mind, LBQ women are expected to continue with the family lineage which means getting married and bearing children to honor and reproduce the family. Those who do not conform to this expectation, are ostracized by both their families and the society at large forcing them to engage in harmful coping mechanisms which include substance abuse and dissociation of body and mind to handle the trauma of sexual interaction with a man. Conversely, those who conform to this expectation, often face ridicule from the queer community because they are viewed as a ‘sell outs.’ This is a catch 22 situation where their lived reality is that they can never emerge the winner.

“My family had been telling everyone that I was dead. They finally accepted me, after I got a boyfriend, pregnant and had a child. The women who know that am gay belittle me saying that I cannot tell them anything because I’m not gay. I remind them that I too had sex and have a child and they have nothing on me. I think that LBQ persons should have families to reduce discrimination. In Kenya if you don’t have children people call you ugly names.” [Daisy, 23rd April 2015 Kisumu]

SPIRITUALITY AND RELIGION AMONG LBQ WOMEN

Most religious institutions in Kenya are unashamed incubators for homophobia and intolerance for sexual and gender minorities. Religious leaders speak out regularly against equality and inclusion of LGBTIQ persons within Kenyan society. This homophobic rhetoric encourages and is used to justify violations against persons perceived to be queer. It normalizes systematic attacks against sexual and gender minorities and exacerbates the self-stigma among religious LBQ women.
“I would remove my dagger and kill if I met any homosexual or lesbian.”
[Religious elder in Wajir, Northern Kenya]²⁹

Although Kenya is a secular state, it is nonetheless strongly influenced by religious institutions that serve a population of about 75% Christians and 14% Muslims. The Christian vote is therefore heavily coveted by politicians who frequent churches and popularize themselves through irresponsible political gimmicks, such as advocating for homophobia. Some of the most homophobic speeches by the political elites are made during Sunday church services amid prayers and chanting in tongues by the fervent believers.³⁰

A lot of LBQ persons have religious backgrounds and admit to struggling to reconcile their religious beliefs and their sexual and gender identities, practices and positions.

“I am very spiritual, partly because of my upbringing. We are a musical family and I am always the soloist when we sing as a family. I am a regular church goer and observe the Sabbath when I can. I wish I can do more, but it’s discouraging sometimes the things they say about homosexuality.” [Nduta, 24th April 2015 Kisumu]

“I am a Christian; I used to serve in the church a youth leader and treasurer for the church women group. Since I started accepting my sexuality I have been keeping away from the church. I have not attended services for the last three months and I keep avoiding church members because I do not how to stand before the church at the altar anymore. I know the bible well and I know how to pray. I ask God to forgive me if I have sinned.” [Mwashuke, 4th May 2015 Mombasa]

²⁹ 2011, Kenya Human Rights Commission Report; The Outlawed Amongst Us p31
³⁰ See https://www.youtube.com/watch?v=bjxsDyRPnMs
Studies show that many LGBTIQ identifying persons feel most unwanted and threatened by the different religious groups in Kenya. However, participants also revealed that a majority of them seek refuge and acceptance from these same religious groups.\(^3\) Most groups however reject them or treat them with suspicion.

“I used to go to church. My pastor one day accosted me, saying that he had a vision that I was a lesbian. I admitted to him that indeed I am lesbian, but I had not come to recruit his congregation like he seemed to allege. Since that day I haven’t gone back to church. I pray and worship alone in the house.” [Hellen, 2\(^{nd}\) May 2015 Mombasa]

To avoid rejection, some LBQ women find it better to gather together and worship or meditate together and some have formed churches that welcome LGBTIQ persons. One such church, The Other Sheep Ministries, has been ministering to the queer community for the last five years. In 2014, another LGBTIQ friendly church, the United Coalition of Affirming Africans (UCAA) announced itself at a religious conference in Nairobi that was geared to fostering dialogue leaders with Christian and Muslims backgrounds. They campaigned for the acceptance and inclusion of LGBTIQ persons within religious spaces.\(^3\) LGBTIQ churches are considered by the interview participants as positive ways to help LBQ women to counter self-stigma and relieve social anxieties.

**ECONOMIC POSITIONS AMONG LBQ WOMEN**

Wherever there is homophobia, queer persons are targeted, discriminated against and denied access to services. This directly translates to lower education levels, lower

\(^3\) 2011, Kenya Human Rights Commission Report; The Outlawed Amongst Us p25

\(^3\) [https://www.youtube.com/watch?v=bHlaVmj9-aM](https://www.youtube.com/watch?v=bHlaVmj9-aM)
productivity, lower earnings, poorer health, shorter lives and lower participation in the labor force.\textsuperscript{33} Many of the participants, especially the self-identifying studs, reported being denied employment opportunities on account of their gender performances.

“\textit{Studs are discriminated against in the job market because of how we dress and express. This leaves us at a disadvantage especially where someone missed out on opportunities for higher education because of their sexual and gender identities.}” [Kai, 24th April 2015 Kisumu]

“They have less economic opportunities. We are poor because if you are LGBTIQ and your employer finds out they chase you away. They say you are abnormal. All we can do is have businesses and run them how you like. I once went for an interview in Sudan, I walked in with a suit and they said that I couldn’t be interviewed because am a woman. Same also happened when I was asked to wear a dress and I couldn’t so I lost the opportunity.” [Daisy, 23rd April 2015 Kisumu]

These discriminatory practices against LBQ women reduce their economic opportunities and effectively lower their quality of life. Low and medium income earning LBQ women are more likely to face further discrimination and human rights violations owing to their inability to personally guarantee their own safety and security. This in turn poses risks to their physical and mental health situation.

CONCLUSION

\textsuperscript{33} Preliminary findings by Dr. Lee Badgett’s study of the economic cost of homophobia in India suggest that there are costs associated with discrimination against LGBT persons in any country. In India that cost could be as much as $30.8 billion every year. 
http://www.huffingtonpost.com/2014/06/13/homophobia-economy-india_n_5488662.html
The in-depth interviews and focus groups discussions focused on six themes: Legal structures, gender performances, health, family, spirituality and class positions. These themes all related to the overarching challenges LBQ women face in Kenya, namely security.

Legal structures hardly mention LBQ women specifically, but this research highlighted that this does not withstand their harassment by state representatives in practice. In extension, the wider public also draws on the criminalization of same-sex practices among men to condemn and even legitimize violence against LBQ women. As long as political and religious leaders continue to galvanize support through inflammatory ‘anti-gay’ rhetoric (and connecting it to ‘westernization’ etc.), the way to legal reform, though necessary and constitutional, is a still a long way ahead. Most participants recognized this, and have developed different strategies to circumvent legal persecution and harassment by police.

With regards to gender performances, this study highlighted that self-identifying studs in particular, face high risks in public spaces. However all participants have encountered some kind of violence because of their gender performances and/or sexual orientation and practices at least once in in their lives, and most feel as if they risk violence on a daily basis. The everyday fear and the trauma of having experienced often frequent violence were reinforced by a shared sense of ‘being different’ and not accepted by their families, friends and the wider Kenyan public. So called ‘masculine presenting’ LBQ woman not only bore the brunt of such violence, they also experienced higher levels of anxiety because they wanted to adhere to masculine ideals, such as ‘being the provider’, but often lacked access to economic opportunities following rampant discrimination of gender non-conforming individuals in Kenyan society.

Alongside violence and safety, health was another main issue affecting LBQ women in Kenya. All participants claimed that there is a profound lack of information among LBQ women about for instance sexual health, and an even more structural lack of
health services that specifically cater for LBQ women. Many LBQ women even avoid health services out of fear of discrimination. This not only badly affects physical health. Accumulating stress caused by untreated traumas, depressions and social anxieties also lead many LBQ women to try and suppress ensuing mental ailments with excessive alcohol and drugs abuse.

Mental health was particularly problematic in relation to social and economic isolation and concomitant anxieties, especially among self-identifying studs. Art projects, social groups that organize picnics and LGBTIQ churches are considered by the interview participants as positive ways to help LBQ women to counter self-stigma and relieve social anxieties. These initiatives, however, are still very fragmented and small in reach.

The following recommendations are geared towards helping LBQ groups and organization to join efforts, improve and upscale efficacy and inclusivity, and create better foundations for both knowledge creation and program development to bring about positive change in LBQ women’s lives in Kenya. Therefore the formulated recommendations below focus on LBQ groups and organizations and not Kenyan government and other possible stakeholders.

RECOMMENDATIONS

The following recommendations are meant to continue the rather scattered initiatives that presently aim to improve security, economic opportunities and social spaces for LBQ women, and help scale up these opportunities to become more targeted/effective and more long-term.

Legal structures

- Educate more LBQ women about their rights, how to navigate legal challenges and where to seek help.
- Involve more LBQ women in research that seeks to bring about legal reform.
• Encourage more LBQ women to develop legal support systems to collectively help potential victims of legal persecution.

**Safety**
• Help more LBQ women to engage in strategies to safely navigate different public spaces without compromising their own integrity.
• Encourage more LBQ women to develop support systems and networks on physical safety through which members can update each other on security situations.
• Train more LBQ women on how to find relevant information and (develop) other resources (such as emergency funds) needed to safeguard personal safety.

**Health**
• Engage in further research and educate health care providers about the specific (mental) health needs and rights of LBQ women.
• Organize more general and sexual health training for LBQ women.
• Besides more research, develop better health services and other initiatives (such as counseling and social support groups) that specifically address the mental health issues many LBQ women suffer from; and initiate rehab groups.

**Family**
• Inform LBQ women about the different pathways to starting a family as LBQ women in Kenya.
• Encourage self-organization among (aspiring) LBQ parents to support each other and share information and experiences.
• Where possible involve friends and other family members to expand the support and solidarity networks for LBQ families.

**Spirituality**
• Improve support of spiritual self-organization.
• Help spiritual groups and emerging churches that involve LBQ women to connect and to learn from each other.
• Where possible, look for wider connections with churches that are LGBTIQ friendly to improve the social spaces for the different LGBTIQ churches.

Class positions
• Encourage economic self-organization among LBQ women, and develop training in business management and financial literacy.
• Build capacity and leadership among economic self-organizations by LBQ women; help them connect to existing opportunities by NGOs and government, and ensure that these groups become completely self-reliant.
• If possible, start an employment agency for LBQ women who do not want to set up a business, help them improve their education levels, and build networks among companies that are LGBTIQ friendly.