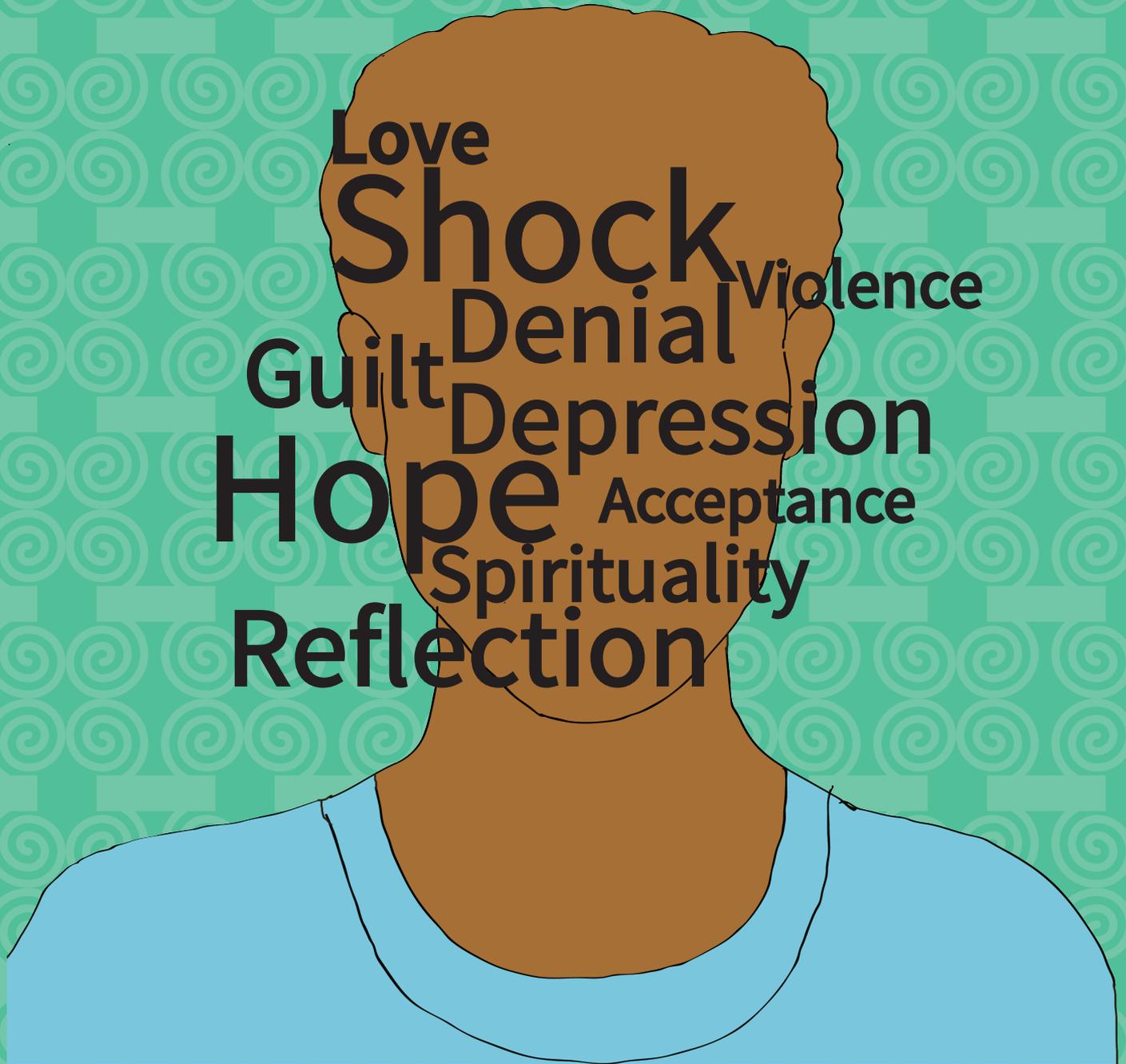


# My Child is Different



A Baseline Study of the Perceptions and Experiences of Parents, Families and their Lesbian, Gay, Bisexual, Transgender and Intersex Children in Uganda

 **chapter  
four**

PROTECTING CIVIL  
LIBERTIES & PROMOTING  
HUMAN RIGHTS FOR ALL





**chapter**  
**four**

PROTECTING CIVIL LIBERTIES &  
PROMOTING HUMAN RIGHTS **FOR ALL.**

“My Child is **DIFFERENT**”

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**A Baseline Study of the Perceptions and Experiences  
of Parents, Families and their Lesbian, Gay, Bisexual,  
Transgender, and Intersex (LGBTI) Children in Uganda**

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# Acronyms

<b>CSOs</b>	Civil Society Organizations
<b>DEO</b>	District Education Officer
<b>DISO</b>	District Internal Security Officer
<b>EAC</b>	East Africa Community
<b>EACJ</b>	East African Court of Justice
<b>ED</b>	Executive Director
<b>FGDs</b>	Focus Group Discussions
<b>HIV</b>	Human Immunodeficiency Virus
<b>HRAPF</b>	Human Rights Awareness and Protection Forum
<b>IEC</b>	Information, Education, Communication
<b>LGBTI</b>	Lesbian, Gay, Bisexual, Transgender, Intersex
<b>NGO</b>	Non-Governmental Organization
<b>PFLAG-U</b>	Parents Families and Friends of Lesbians and Gays- Uganda
<b>RDC</b>	Resident District Commissioner
<b>SOGI</b>	Sexual Orientation and Gender Identity
<b>TV</b>	Television
<b>UNEBC</b>	Uganda National Examinations Board
<b>USAID</b>	United States Agency for International Development

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*“I mostly fear for how my son will grow up and will be treated if am old, if I die or if am not here to love him. Many people say different things and nothing is good, so I have to be good to him. Am scared he will not make it in life like the usual people. For all his life people are going to look at him differently. People say a lot and I am scared for him. They say we bring white people here that am helping my son be a homosexual...”*

**- Parent Transgender woman**

## Executive Summary

The Parents, Families, and Friends of Lesbians and Gays (PFLAG)-Uganda project builds on the former and on-going work of Chapter Four Uganda that provides legal representation, research and documentation, and general support to the LGBTI community in Uganda through the support of families and allies of LGBTI individuals. This report provides the findings of a baseline survey that was commissioned by PFLAG-Uganda’s convener in order to obtain verifiable data on the current attitudes and experiences of parents and families of LGBTI individuals in Uganda. This data will inform the development of PFLAG-Uganda programs and will also make available to the public viable data that as of now does not currently exist.

The survey was carried out between August 2017 and June 2018 mainly in Kampala and involved a total of eighty parents, guardians, family members, and friends of LGBTI individuals. These respondents were sourced through word of mouth and by issuing an open call for respondents shared on social media through the official accounts of Chapter Four Uganda.

Some respondents who were unavailable during the data collection period answered to the questionnaires that were in form of online forms. The survey also targeted LGBTI individuals and service providers (i.e. counsellors and clinical psychologists). Some of the service providers we reached out to were religious and conservative, after knowing more about the topic of the baseline study, they denied us access to their premises. (In the process of reaching out to counselling centres, we found that most had affiliations to a religious institution.)

Data collection methods included Literature review, Household interviews, Semi-structured interviews, Key Informant Interviews, and Focus Group Discussions (FGDs).

**The study found the following:**

### **Parents’ responses to learning about their children’s sexuality and gender identity**

All of the parents interviewed grappled with their children’s distinctive sexuality and gender identity and sought to try and understand their children – most concluded that being gay or transgender was a disorder that could change with appropriate counselling, conversion therapy and divine intervention. Parents tended to struggle to accept their children or family members who are LGBTI and oftentimes, initially reacted in anger, denial and sometimes used abusive tones. In some instances, parents denied LGBTI children key forms of support including school fees and financial allowances. Others imposed a forced banishment from homes in an attempt to compel their children to change. However, with continued dialogue, time, and persistence from their LGBTI children; or perhaps because of a parent’s own initiative and parental love, some parents simply tolerated and accepted the reality with the hope that their children would eventually reform to ‘normalcy’. However, acceptance is sometimes out of tolerance and is short-lived, leaving LGBTI children confused, frustrated and in a state of distrust and their relationship with their family strained and unpredictable.

It was also found that whereas acceptance of their children as LGBTI is already challenging and gradual, in a private setting like a home, perceived or actual societal pressure also plays a huge role in undermining parents’ ability to reach out to their children and communicate to understand how best to support them. Sometimes parents were more concerned about ‘what people will think’ and protecting their own reputations and family name than loving and protecting their LGBTI children.

The negative reactions of parents towards LGBTI children is partly a result of a lack of accurate and credible information on how to handle a child's "coming out" process. Unless a parent is keen on researching 'western' authored literature<sup>1</sup>, they are usually uninformed or misinformed about how to fully provide meaningful support to their children. Oftentimes parents will only have access to locally sourced information that reinforces misconceptions that LGBTI persons tend to engage in destructive behaviours, harmful practices or that homosexuality itself is destructive to one's health and livelihood. An LGBTI individual is often seen to be 'wasting their lives' and a source of embarrassment to the family. Mothers tended to face the brunt of the burden of shame and blame for having produced and raised children that turned out to be LGBTI.

The decision to protect and accept their child often led some mothers to be ostracized from the extended family, places of worship, and social associations. Mothers also tended to show more concern and interest in reaching out to their children to possibly reconcile differences and to be able to provide them support.

## **Access to support for parents and/or family of LGBTI children**

Research has found<sup>2</sup> that access to information and support systems that educate parents and families on how to deal with having an LGBTI child is vital to the wellbeing of the child as well as protecting and nurturing their relationship with their child.

This study found that parents and families of LGBTI children are impacted by their child's "coming out,"<sup>3</sup> including having to take the blame for their children's sexual orientation, dealing with the shame associated with having an LGBTI child, and not knowing how to adjust to the changes in family dynamics that having an LGBTI child in the family may pose.

In most cases, any public information about their children being LGBTI will most likely result in deliberations that may lead to stigma and discrimination towards the family for being associated with LGBTI children

There is no specific support system for parents struggling to accept or deal with their children being LGBTI, any existing support tends to focus on LGBTI individuals' issues directly. This often leaves parents/families responding out of ignorance or with extremities, due to lack of adequate knowledge, proper guidance, and familiarity with the subject.

While acceptance of LGBTI children by parents may take a long time, the study also revealed that access to adequate information about LGBTI people from sources that parents trust is vital in guiding them to understand their children and learning how they can best support them.

Of all those interviewed, there were no parents who knew which places to turn to for support, none of them even understood the nature of support that they needed. Further still, as would be the norm in other circumstances, they could not turn to friends and family for counsel because of fear of stigma and embarrassment.

Attempts by some parents to reach out for help to certain organizations were often undermined by slow response or a non-existence of service providers with skills and information to provide the necessary support. As a result, parents of LGBTI children rarely sought support from public facilities, but instead privately engaged individuals that they trusted such as church counsellors or 'well-travelled' individuals known to them within human rights organisations.

Relatives can be a good source of support for parents of LGBTI children. The study found that relatives who have been exposed to different 'lifestyles', especially through travel to more diverse contexts such as South Africa, North America and Europe, or have interacted with LGBTI individuals, seemed to be more willing to make a case for the acceptance and love of LGBTI children. These relatives were also earmarked as credible sources of information on LGBTI issues for other family members who were seeking understanding and information.

The study also identified older generations or grandparents as a source of support for facilitating acceptance of LGBTI children in families. This is in a particular case in which the grandparent took in or became a caretaker of a child that had been banished from their home for being gay or whose parents denied them support after discovering their different orientation/gender identity.

In some cases, grandparents were brought in as mediators between parents and their children to dissuade parents from making drastic decisions like disowning their children for being LGBTI.

<sup>1</sup> Parents in Uganda usually depend on print and television media as their source of news and information about social issues. Since the Media hardly publishes any progressive information about LGBT issues, the only source that remains is the internet. The average age of parents in this baseline study is 50-70, an age group that has a reputation for their limited understanding and usage of the internet. This makes it difficult for parents/families of LGBTI individuals to access the kind of educational information needed to adequately support their children who 'come out'.

<sup>2</sup> Ryan, C (2009). Helping families support their LGBT children. Available at: [https://nccc.georgetown.edu/documents/LGBT\\_Brief.pdf](https://nccc.georgetown.edu/documents/LGBT_Brief.pdf). San Francisco State University.

<sup>3</sup> Coming out of the closet, or simply coming out, is a metaphor for LGBT people's self-disclosure of their sexual orientation or of their gender identity Available at: <https://bit.ly/295CEmD>

Grandparents therefore seemed to be more understanding and tolerant of their grandchildren and could possibly play an important role in influencing other family members to be more supportive and accepting. In the Ugandan society and indeed Africa, grandparents are usually regarded as wise and their opinions on disputes are always taken seriously.

Additionally, grandparents in Uganda have also historically taken up responsible care of their grandchildren for various circumstances such as increased single parent households, increased orphans as a result of HIV/AIDS and the shared responsibility that is borne out of the phrase 'It takes a village to bring up a child' among others<sup>4</sup>. They therefore usually don't make an exception when it comes to LGBTI children that have been ostracised.

## Support for parents of LGBTI children

The study found that there are no support systems specifically tailored for parents and/or relatives of LGBTI children in Uganda. Instead, these parents and/or relatives utilize services available for the general public such as psychosocial support from religious institutions, mental health institutions, or social services from existing human rights organizations. The services that the parents in this baseline study accessed were conducted by service providers who were unfamiliar with core LGBTI issues and had not received any prior professional training to manage the sensitivities surrounding the topic.

It was also found that some parents did not seek personal or family therapy because of the indifference commonly attached to seeking out and receiving counselling and psycho-social services in Uganda. It is common to hear remarks such as 'In African traditions; we have aunties and other clan elders to solve family issues, not an outsider like a counsellor' or 'Counselling is a luxury only reserved for white people'. The option of having an outsider resolve a family's personal matters is also often met with hesitation from the typical Ugandan household.

According to the majority of the respondents in this study, the biggest issue was that existing psychosocial support services were unaffordable to the average income-earning parent, who constituted 80% of our respondents.

Some representatives of organizations that were interviewed acknowledged that they only extend their support to LGBTI individuals in as far as it intersects with their work, including programs targeting social services and promotion of human rights for children, youth, or marginalised groups in general. Psychosocial support services specifically tailored for families of LGBTI individuals were therefore non-existent.

Further still, the current support that is affordable can only be accessed through LGBTI organisations and is in most cases limited to members of the specified organizations, excluding those, who for different reasons, may not be eligible to become members of these organisations.

The study also found that LGBTI individuals seeking support from public health centres were sometimes treated no differently from other clients. In most instances however, counsellors were reported to be unprofessional and unethical after discovering that the client was in fact LGBTI. Respondents reported that the counsellors would then proceed to make insensitive and degrading comments<sup>5</sup> that were not only demeaning but also traumatizing to LGBTI persons seeking their services and support. There was also an expressed lack of confidentiality from service providers, as well as the high costs of services, which renders them inaccessible.

LGBTI individuals often grapple with strained relationships with their parents and family members as a result of coming out or being outed. They often rely on various support systems to cope, which include; (i) friends, especially for immediate assistance such as temporary refuge, housing and meals (ii) places of worship for temporary solace or spiritual guidance, (iii) non-governmental organisations (NGOs) for legal and medical support, and (iv) grass roots community counsellors and medical personnel for health services.

4 Read: The changing role of older people in African households and the impact of aging on African family structures. Page 3-9 <https://bit.ly/2PlzPNn>

5 Excerpt of an interview with K.T August 2018. "...when my parents found out about me being lesbian, they ordered me to go to a Pastor affiliated with All Saints Church that has an office at Akamwesi Complex...i remember him telling me that I have a mental illness, he said I'm no longer living, I'm possessed with a spirit in me. He said I don't deserve to mix with people, I should be locked up until I get better. In one of the sessions, that was like hypnosis, He told me to recite 'I'm not well'..., 'I'm unstable'... for hours..."

Overall, this study found that parents of LGBTI children often struggle with understanding and coming to terms with their children's sexuality and gender identity. They have limited to no access to information, professional advice and/or support networks.

**The following recommendations were made by respondents to address this gap:**

### **To PFLAG and other human rights organisations that would like to support LGBTI individuals, and their parents/families:**

- (i) Facilitate the establishment of support groups for parents/families of LGBTI children. These support groups should be a space for the parents/families to meet regularly, share experiences, and obtain both peer support and professional support.
- (ii) Provide regular and consistent access to credible information to parents that will facilitate greater understanding, acceptance and support of LGBTI children by their families. This information should include materials related to the lived realities of LGBTI persons and the consequences of the negative actions of their parents and families.
- (iii) Provide information and training on LGBTI rights and issues to counsellors and NGO staff who would like to offer support to LGBTI individuals but do not have sufficient information and/or skills to enable them to do this effectively.
- (iv) Develop activities that are guided by the needs of parents, families, and their LGBTI children
- (v) Provide opportunities for members of the LGBTI community to undertake professional studies that respond to the needs of the community (e.g. counselling, therapy, and psychosocial and clinical support). This will enable LGBTI individuals to provide these services to their community directly, thereby eliminating the issue of biased service providers.

### **To the Government (through Parliament):**

- (vi) Formulate policies within public health institutions that make it mandatory for service providers to provide unbiased and non-discriminatory services to LGBTI individuals, their parents, and family members. These policies should provide a grievance response mechanism for individuals that experience discrimination or verbal assault within these institutions.
- (vii) Strengthen/enhance legal protection against the abandonment of LGBTI children by their parents and create specific legal consequences for abandoning and assaulting children.

### **To counsellors and other service providers:**

- (viii) Professional clinical psychologists and psychotherapists should increase provision of non-discriminatory, non-judgmental, cost friendly, sociable, and tailored services to the LGBT community and their parents and families and create an environment where their services can be accessed safely.

### **To donors and human rights organizations that would like to support LGBTI individuals and their parents:**

- (ix) Provide funding opportunities for members of the LGBTI community to undertake professional studies that respond to the needs of the community (e.g. counselling, therapy, and psychosocial and clinical support). This will enable LGBTI individuals to provide these services to their community directly, thereby eliminating the issue of biased service providers.
- (x) Widen the existing funding models to benefit organisations, movements or groups that aim to provide services to the LGBTI community through social intervention projects whose impact can only be measured in the long term.

# 1.0 Introduction

Uganda's 1995 Constitution provides for the respect, promotion and protection of the rights of all persons<sup>6</sup>. The Constitution is in tandem with international human rights instruments like the Universal Declaration on Human Rights (UDHR), as well as enabling frameworks like Chapter 1 of the African Charter on Human and People's rights (ACHPR) at the sub-regional level that oblige the signatories to recognise, promote, and protect human and peoples' rights.

However, despite this progressive legal framework, the prevailing political and social climate in Uganda is hostile to the recognition and protection of the rights of LGBTI individuals. By spreading negative, false misconceptions about the LGBTI community (such as 'recruitment' of children into homosexuality) politicians tend to fuel homophobia that stigmatises LGBTI persons, making them prone to violence and often characterize same-sex conduct and LGBTI identities as 'un-African' in attempts to rally populace support.<sup>7</sup> The lack of protection (legal and social) of LGBTI persons is also manifested through criminal laws (i.e. Uganda's Penal Code Act that criminalises same sex acts, and the Constitution that outlaws same sex marriage). Institutions further create an environment of legal intolerance by declining to register organisations advocating for protection of the rights of LGBTI persons.

When it comes to equal representation, the LGBTI community is not given a voice or consulted in the formulation of public policy and institutional protection mechanisms. Consequently, these factors lead to exclusion of LGBTI individuals in public interest processes and prevent them from freely expressing themselves about the challenges faced that negatively affect their lives and livelihoods. Further still, the lack of adequate legal protections for LGBTI persons hinders their access to unbiased legal redress in case of violations relating to discrimination, harassment, blackmail, extortion, etc.

The stigma, inequality and discrimination often experienced by LGBTI persons also contributes to their vulnerability. On a socio-economic level, Sexual and Gender Minorities often experience inequitable access to economic resources and employment opportunities.

The Williams Institute flagship report, 'The Relationship Between LGBTI Inclusion And Economic Development', An Analysis Of Emerging Economies' (2014) which was published as a part of USAID's LGBTI Global Development Partnership with an aim to undertake empirical analysis on the impact of social inclusion of LGBT people on economic development in 39 countries, found substantial evidence that LGBT people are more productive in the labor market when treated equally and that inclusion of LGBT people in the development process is linked to a stronger economy. Furthermore, if and when LGBT persons obtain employment, unfair treatment, discriminatory workplace policies, and unequal access to opportunities for growth tend to lower motivation, affect their ability to be effective, and to maintain their jobs.

In most emerging economies, national laws do not provide adequate protection from employment-related discrimination on grounds of sexual orientation and gender identity.<sup>8</sup> Equally, in Uganda, national laws and policies do not stipulate sexual orientation and gender identity as a protected ground against discrimination and inequality.

In August 2014, a few months after enactment, the draconian Anti-Homosexuality Act<sup>9</sup> was outlawed by Uganda's Constitutional Court on technical grounds. The law carried criminal sanctions such as life imprisonment for identifying as LGBT and for engaging in work around LGBT rights, and LGBT individuals could face criminal charges for being in same sex relationships and people/organisations working to promote LGBT rights would have been liable to a maximum prison sentence of seven years and a fine. At a regional level, the matter was also filed at the East African Court of Justice (EACJ) – *Human Rights Awareness and Promotion Forum (HRAPF) - Attorney General of (Reference No. 006 of 2014)* that challenged the Anti-Homosexuality Act as contrary to the rule of law and good governance principles set out in the East African Community Treaty. In this instance, the court decided that the case was moot as the reference challenged a law that had since been nullified by the domestic court in Uganda. There are currently over 35 organisations focusing

<sup>6</sup> Bill of rights of the 1995 Constitution of the Republic of Uganda. Available at: <https://bit.ly/2Or7dXL>

<sup>7</sup> Amnesty International, 'Making Love a Crime' Available at: <https://bit.ly/2SfUmhq>

<sup>8</sup> See A/69/318, para.17; and "Discrimination at work on the basis of sexual orientation and gender identity: Results of pilot research" (GB.319/L/LS/INF/1), International Labour Office, October 2013, pp. 2-3.

<sup>9</sup> Professor J. Oloka Onyango & 9 others vs. Attorney General of the Republic of Uganda (Constitutional Petition No. 8 of 2013) - This petition sought among others to challenge and decriminalize provisions of the Anti-Homosexuality Act of 2014 which criminalized free discussion, public debate and sharing of information pertaining to homosexuality. The provisions prohibiting the promotion of homosexuality (Provision that sought to criminalise NGOs and activists working on LGBT Human rights). The Constitutional Court judges unanimously nullified the law on grounds that it was passed without quorum as stipulated by law, without considering the merits of the case which included major rights violations like freedom of expression.

on promotion of LGBT rights and provision of tailored health and social economic services to the LGBT community in Uganda. This has ensured that the community, which is often ostracised and not prioritised by mainstream human rights organisations, has improved access to different services.

While there have been some progressive legal, health, social, and economic interventions that have been introduced to champion the rights, safety, and security of LGBTI persons at a national and international level -- for example The Human Rights compliance checklist<sup>10</sup> developed by Parliament of Uganda, a Landmark Resolution<sup>11</sup> on LGBT rights by the African Commission, and the appointment of an Independent Expert<sup>12</sup> on protection against violence and discrimination based on sexual orientation and Gender Identity by the UN Human Rights Council -- there is hardly any support or services to cater for the parents and/or families of LGBTI individuals.

## 1.1 Background

PFLAG-Uganda is a social intervention project that was conceptualised in 2017 to foster dialogue and reconciliation between LGBT individuals, their parents, and families. The project was founded to fill in the gap of non-existence of safe spaces where parents and families can come together to find support in the event that their child comes out as LGBT or they suspect or discover that their children are LGBT and desire to find ways to support their child or to deal with the conflicts that this revelation often brings to families. A 2016 study<sup>13</sup> showed that individuals who are more socially connected to family, friends, or their community are happier, psychically healthier and live longer, with fewer mental health problems than people who are less well connected. The quality of these relationships matters however, and it was found that being alone is better than living in conflict or within a toxic relationship. If properly supported, the project will focus on facilitating a support group for parents, family members, and their children, provide psychosocial support, and increase access to information for families on how to deal with having an LGBTI child. This will include the development and distribution of Information, Education and Communication (IEC) materials.

PFLAG-Uganda shall build on the on-going work of Chapter Four Uganda, an organization that has provided legal representation, legal counselling, and legal support to the LGBTI community in Uganda. The provision of these legal services has secured the liberty of individuals, supported organizational compliance with legal requirements in their work, and has ensured due process in the criminal justice system. However, the work of Chapter Four has not been able to address wider challenges of the LGBTI community. For instance, while Chapter Four provides legal support to clients, it does not, after representation has concluded, provide social support, such as to address the social repercussions faced by LGBTI individuals that are exposed to the media during trial. It does not address issues related to health and wellbeing, and it doesn't currently have a structure to offer support to families and allies with LGBTI children.

**In order to provide further support to the beneficiaries of Chapter Four Uganda and the wider LGBTI community in Uganda, the PFLAG-Uganda project seeks to accomplish the following overarching objectives;**

- Establish a support group/framework for parents, families, and relatives to facilitate access to Information, Education and Communication materials on LGBTI rights, structured dialogue and psychosocial support.
- To Carry out documentation and research on LGBTI related issues as it pertains to parents/families and their LGBTI children in Uganda and provide platforms for their dissemination
- Provide a safe space to share lived experiences and documented stories of LGBTI individuals and their families in order to inspire positive attitudes and debunk myths about Sexual Orientation and Gender Identity.
- Advocate for inclusive laws and policies and attitude change toward the LGBTI community.

Addressing the above objectives will contribute towards the achievement of the broader mission of Chapter Four Uganda: fighting discrimination and ensuring human dignity for all. It will extend the support and services of the organization to the families of LGBTI persons with the aim of facilitating understanding, acceptance, and consequently extending support their LGBTI family members.

10 The Parliament of Uganda Human Rights Checklist for Human Rights provides a mechanism to quickly alert Members of Parliament on the human rights implications of the provisions of a Bill, strategy, policy or government programme handled in Parliament. Available at: <http://chapterfouruganda.com/sites/default/files/downloads/Human%20Rights%20Compliance%20Checklist.pdf>

11 275: Resolution on Protection against Violence and other Human Rights Violations against Persons on the basis of their real or imputed Sexual Orientation or Gender Identity. Available at: <http://www.achpr.org/sessions/55th/resolutions/275/>

12 The Independent Expert has been mandated through Human Rights Council resolution 32/2. Available at: <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G16/154/15/PDF/G1615415.pdf?OpenElement>

13 Mental health foundation (May 2016) Relationships in the 21st century. London: Mental Health Foundation <https://www.mentalhealth.org.uk/sites/default/files/Relationships-in-21st-century-forgotten-foundation-mental-health-wellbeing-full-may-2016.pdf>

## 1.2 Objective of the PFLAG-Uganda Baseline Study

The overall purpose of this baseline survey is to provide verifiable data on the current attitudes and experiences of parents and families of LGBTI children in Uganda. By doing this, PFLAG-Uganda is able to fill the gap of absence of data on the experiences of parents, families, and their LGBT children in Uganda. This data will facilitate the development of PFLAG-Uganda programs and also inform benchmarks against which progress on objectives of the project are measured. The results of the study will be continually assessed during implementation of the PFLAG-Uganda programs and activities.

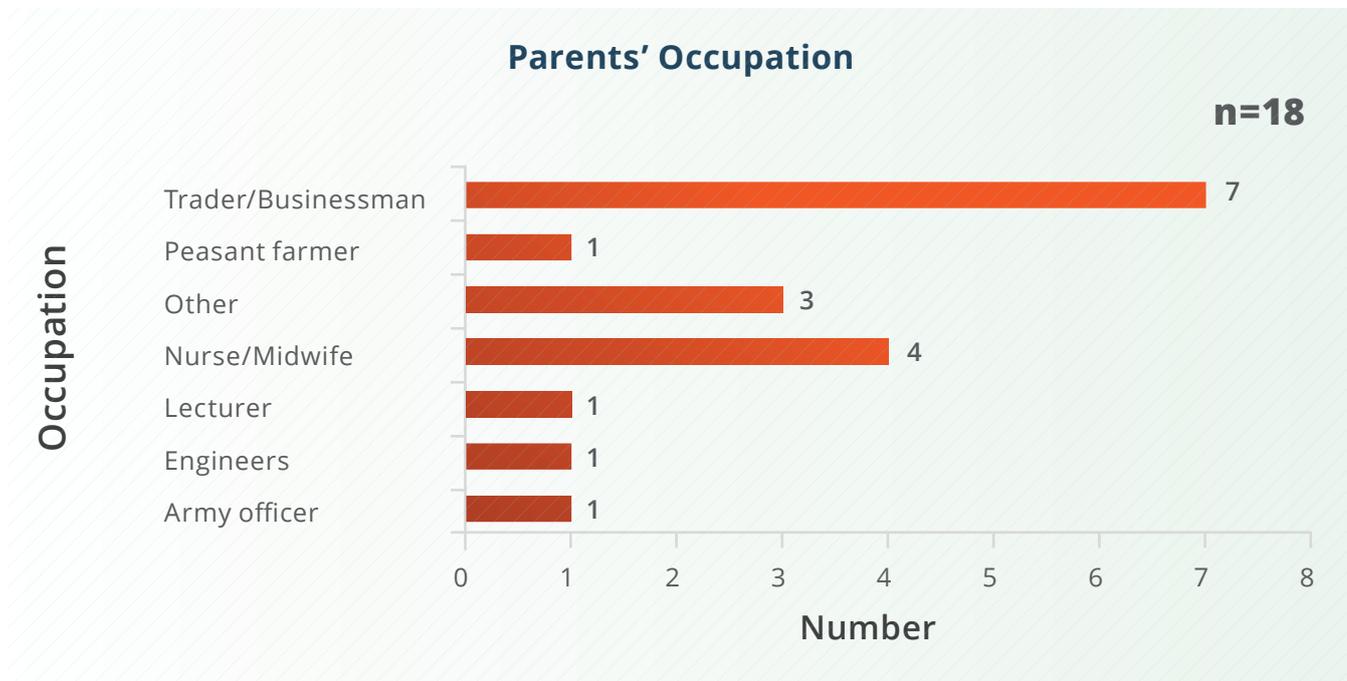
## 1.3 Methodology

The methodology used within the baseline survey was mixed and comprised of a desk-based literature review and a combination of one on one qualitative interviews, online questionnaires, and Focus Group Discussions. Participants in the study included a total of 80 respondents, including parents and guardians of LGBTI persons, representatives of institutions that provide psychosocial and counselling services, siblings of LGBTI persons and 'Out' members of the Ugandan LGBTI community. This list below showed the different methods used with the different groups of respondents:

- Two siblings (1 male and 1 female) of LGBTI individuals reached through one-on-one interviews;
- Twenty-Three 'Out' LGBTI individuals (9 male, 9 females, and 5 of 'other' sex) of which 11 were reached through one on one interviews while 12 were reached through a self-administered online questionnaire<sup>14</sup>
- Nine representatives of NGO institutions and psychosocial and counselling service providers who were reached through one-on-one interviews where they answered questionnaires.
- Four focus group discussions (FGDs) that consisted of Lesbian, Gay, and Transgender individuals. Each focus group had 5-15 people, with a total of 20-60 participants.
- Eight parents (3 male and 5 female) of LGBTI individuals reached through one-on-one interviews (see details below).
- Majority of respondents were from Kampala, Wakiso and Entebbe District. Those that responded through the Online questionnaire (Google form) were based in the United States while others were in Europe for studies and others were asylum seekers during the Baseline study period.
- Data was collected using digital form, designed using Open data Kit (ODK) software.

<sup>14</sup> All were adults i.e. above 18 years old

A majority of the parents interviewed were 60 years and above (53%), followed by 40% who are between the ages of 50-59 years, and 7% between the age of 30 and 39 years. As indicated in the table below, the majority of parents are traders/business owners and were based in Kampala and Wakiso districts respectively.



## 1.4 Study limitations

A key challenge with the study was in identifying and accessing respondents, particularly parents and family members of LGBTI individuals. This was largely because of the fear of exposure and misinformation about the legal status of LGBT individuals. For example, some family members expressed fear of being arrested in the event of participation in the study while others were afraid of the discrimination and stigma they would face if they associated with any LGBT related work.

LGBT individuals expressed reluctance to involve their parents and family members in what they termed as 'politics of LGBT issues' and denied us access to their family members due to the fear of complicating their already vulnerable relationships. This was despite the assurances from the data collectors and coordinators, which guaranteed the anonymity of interviewees and protection of their data.

There was also a limited number of LGBT individuals who are 'out' and open to their families. Most of the LGBT individuals asked to connect us to their families confessed that their parents, guardians, and siblings were unaware of their sexual orientation or gender identity. We also faced a limitation of distance while scheduling with respondents. We discovered that most parents and families whom we were connected to reside in towns outside Kampala, Wakiso and Entebbe- whis was our designated area of coverage/scope for the study. We also discovered that most parents are not 'tech savvy' or did not have access to internet and computers, which affected our ability to send online questionnaires which would have solved the distance issue. Online questionnaires would have also catered to their preference of avoiding one-on-one interviews. As result, this study draws on the experiences of only a few parents/family members who were willing and able to meet with the team of respondents despite the above limitations.

## 2.0 Parents' perspectives of Igbti persons

Parents of Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBTI) children that were interviewed for this study have all had to travel their own 'journeys' to try and understand their children and respond in a way that they each deemed appropriate at different stages of the relationship with their child. In all instances, whilst there was some indication that their child was 'different or unique' from a young age, none of the parents thought that their children would end up identifying and living their lives as LGBT.

### 2.1 Parents who struggle with acceptance of their children's Sexual Orientation and Gender Identity

In some instances, parents have come to terms with their children's Sexual Orientation and Gender Identity and accepted the children as they are. However, despite understanding the concepts that define their children, some parents still attribute the 'gayism'<sup>15</sup> to a choice or environmental factors.

*"They are normal people and just the only problem is the habit, he is not born being a homosexual or a trans at times it's the habits or group work it is an influence of peers but they are normal."*

**- Parent of a transgender woman**

The parents all hope that there is a way in which the children can change and become 'normal'. However, if their children remain resolute in their choices and repeatedly engage their parents about who they are, then the parents accept the situation and leave it to a higher being to effect the change i.e. a sense of resolve. In a sense, this is not full acceptance of the child as such, but tolerance of the situation with the hope that it might change as a result of divine intervention or that their children are simply going through a rebellious phase in their lives.

*"My view about people like my child, what I realized is that some children are born differently, there are boy children right from childhood who don't like wearing boy's clothes. And sometime a parent can tell how that child might turn out. My view is that the child should be talked to, counselled by the parent but if the counselling fails then you accept the child, pray to Allah to restore the child and if the child remains that way."*

**- Parent of a transgender woman**

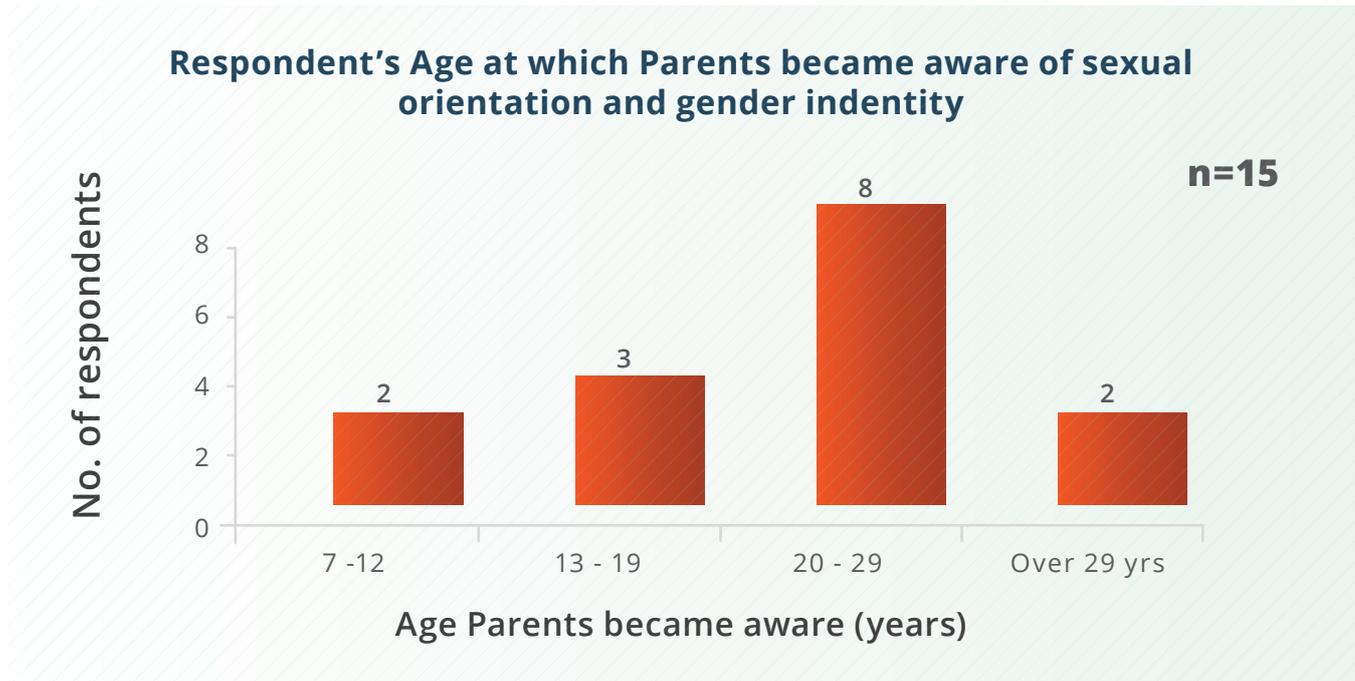
*"...the desire to have a normal child.... don't think it can get out of my heart. It cannot. It cannot just be automatic like that. It will take some good time, many, many years though now I've tried to see that I have accepted everything, yeah but you cannot erase everything like that...."*

**- Parent of a gay man**

<sup>15</sup> Reference to what most parents consider 'gay behavior'

Studies<sup>16</sup> show that children as early as 3.5 years old exhibit behaviours that correlate with their sexual orientation later in life. Studies also show that gender dysphoria<sup>17</sup> which determines transgenderism<sup>18</sup> may occur between the ages of 2 and 5, which is the same age at which most typically developing children begin showing gendered behaviours and interests.

The baseline study however revealed that most of the parents interviewed got to know the sexuality or gender identity of their children when the children were between the age 13-29 years. Possibly because this is the point at which the children were either more comfortable expressing their sexuality, and/or could no longer hide it. These individuals are by the time of the study between 25-40 years



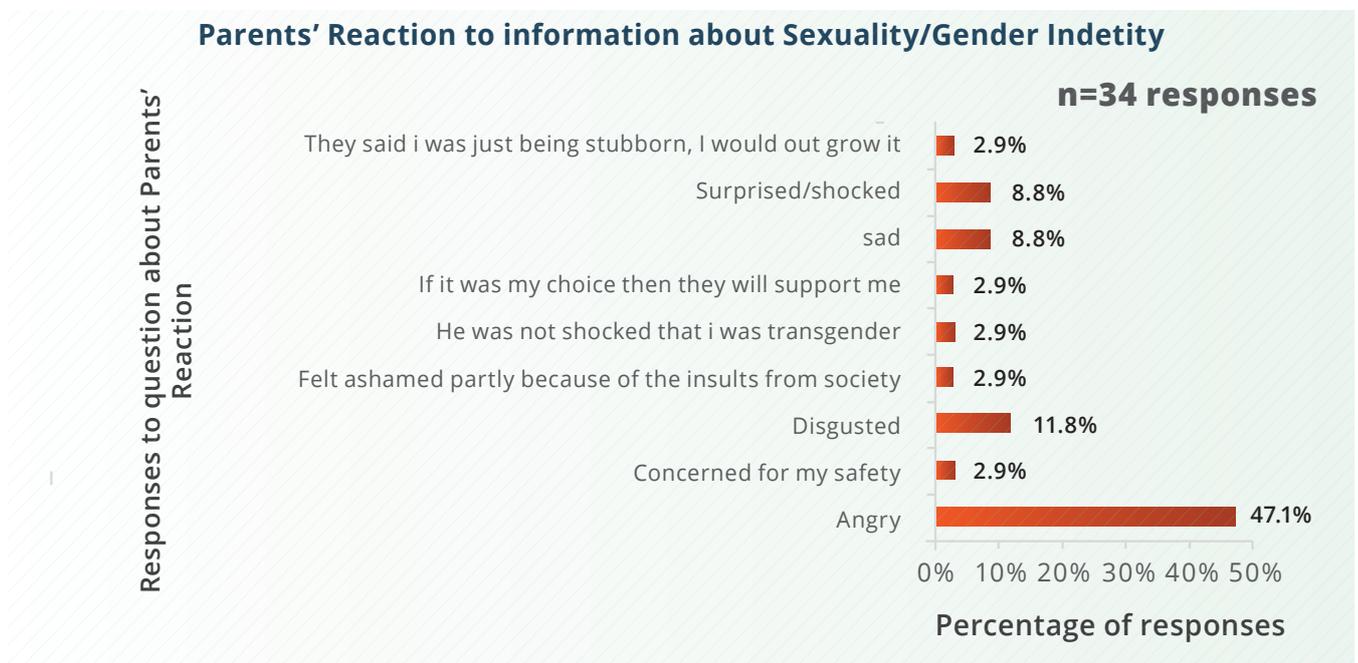
<sup>16</sup> Toddler play may give clues to sexual orientation: Available at: <https://www.sciencemag.org/news/2017/03/toddler-play-may-give-clues-sexual-orientation>

<sup>17</sup> Gender dysphoria involves a conflict between a person's physical or assigned gender and the gender with which he/she/they identify. People with gender dysphoria may be very uncomfortable with the gender they were assigned, sometimes described as being uncomfortable with their body (particularly developments during puberty) or being uncomfortable with the expected roles of their assigned gender. American Psychiatric Association definition of Gender: <https://www.psychiatry.org/patients-families/gender-dysphoria/what-is-gender-dysphoria>

<sup>18</sup> Transgenderism Definition: a state or condition in which a person's identity does not conform unambiguously to conventional ideas of male or female gender.

All the parents interviewed grappled with the issue of their children’s sexuality and gender identity and sought to try and understand their children. The initial reaction to children ‘coming out’<sup>19</sup> voluntarily or ‘being outed’ tended to be anger and harsh remarks. As indicated in the diagram below, in the majority of instances, parents reacted in anger, in large part because of the shame and embarrassment that they envisioned would be imposed upon the family and the family name. Fathers, who constituted 38% of our parents interviewed tended to respond more harshly compared to mothers, and in most cases blamed the child’s divergent sexual orientation and gender identity on their mother. In some traditional Ugandan cultures, a mother is usually blamed for a child’s ‘bad behaviours and failures’, while the fathers take credit for all the successful aspects of the child’s life. This practice is common due to the fact that the role of raising a child in most cases lies solely on the mother, while the father is relied on as a breadwinner<sup>20</sup>.

The graph below shows findings from parents about how they responded when they got information about their children’s sexual orientation and gender identity and an account from LGBT individuals about how their parents reacted when they got information about them.



In the graph above, we note that ample size determined the use of either percentage (more than 30 respondents) and number of respondents less than 30. In cases where there were multiple responses, the percentage may not add to 100, or maybe more than 100%

<sup>19</sup> Voluntarily telling their parents, family and/or friends about their different sexuality or gender identity.  
<sup>20</sup> In a Master's thesis titled A qualitative exploration of parents' perceptions on a Parenting Skills Training Program in Kitgum, Northern Uganda by Fien Vandendriessche, A respondent argued that a mother should be seen as a key figure in the upbringing of a child. Found at Chapter 3: section 2.2 ([https://lib.ugent.be/fulltxt/RUG01/002/274/876/RUG01-002274876\\_2016\\_0001\\_AC.pdf](https://lib.ugent.be/fulltxt/RUG01/002/274/876/RUG01-002274876_2016_0001_AC.pdf))

After the initial anger, disgust and sadness, parents then went through a process of trying to understand their children's sexuality and to convince them to stop the behaviour, and ultimately for some, their resignation to the fact that their child is LGBT.

*"Maybe I should talk about transgender because she is one of them. With that one, according to what she told me, it was not her choice to be born like that, that's what she really told me so even me, I can't say anything like that because this is something done maybe, you are created like that. I have no choice to change everything. Initially I was very harsh on her, and I realized the more I was harsh, the more she kept a distance from me. I was wondering what is wrong with my child, he was always wearing makeup like a girl, I began seeing him do all sorts of things I think when he was in high school (senior five/senior six). People around where we were staying started saying what's wrong with that one? And indeed, wherever he could pass, they could point fingers and being a parent you are tortured but even if I used to sit him down and talk to him, there was no change. He would always associate with girls so I had no choice, he was always with the sisters, he couldn't mind putting on a blouse, shirt or shorts for girls because the girls at home would put on shorts the more so everyone at home was very annoyed but again as a mother you could get annoyed but bring him back to you."*

**- Mother of a transgender woman**

Coming to terms with a child's Sexual Orientation or Gender Identity takes a long time, and is often a confusing and painful time for a parent. But some parents try very hard to reconcile their misgivings about their children's sexuality/gender identity with their parental love for them. There were some examples of mothers who continued to reach out to their children in order to convince them to change, despite the children avoiding them. The mothers expressed to us the process of feeling pressure from society that they felt judges and blames them for their children's sexual orientation and gender identity.

*"I was really stressed, at the same time he was not staying at home so even if you call, you will talk for a short time and if you pin him, you won't see him at home. That thing also tortured me because I needed my children at home but if you talk about it you push him away.....when he was doing his masters, he told me he was a transgender and there he came out to tell the world. He would come home with hair, wearing a wig and I said my friend, now you are torturing me and the more he frequented the house, there was no peace between me and the dad.... I prayed but the prayers never helped me in anyway, maybe I prayed to keep him alive but to change him- it was in vain. What else could I do? Because this is not like a young kid that you could whip, I left him to be.... I only prayed about it. Even talking about it with my own relatives, I felt ashamed. I felt ashamed..."*

**- Mother of a transgender woman**

## 2.2 Parents who fight to protect their children

There were also a number of instances of some mothers who 'fight' for their children. Some LGBT respondents intimated to us during the study that there were cases where their parents fought for their rights when society or institutions attempted to deny such rights or discriminated against them because of their perceived sexual orientation and gender identity, even when the parents were not fully accepting of them being LGBT:

*"....so, I registered for my Uganda National Examinations Board (UNEB) exams and the headmistress said I won't sit but my mum was so positive that she kept moving. The incident happened the second week of the second term my mum was moving to the District Internal Security Officer (DISO), it was in Jinja, the Resident District Commissioner (RDC), District Education Officer (DEO), all of those guys- the headmistress would always go behind my mum's back telling them not to help the woman. My mum came to Kampala like three times to UNEB offices, those guys told her am going to sit, those guys said even though you have killed someone you are entitled to do your exams. So, we got the letter, and took it to the headmistress, still the woman refused, I swear, I can even show you those letters, my mum has all of them, I was expelled from school for 'gaysim' and allegations that I was sexually harassing other girls .... I swear if you can give me time I can get you those papers I swear. My father didn't get to know about that incident because my mum tried to hide it from him. I don't know if my mum knows that I am gay..."*

**- Lesbian individual**

Discovering that you have an LGBT child consequentially causes tension in any family, but in some cases, as confessed by one mother, choosing to defend your child and support them against other family member's ridicule can have dire consequences. A mother was forced to leave the family home resulting from a separation with her husband because he blamed her for supporting and encouraging their child's transgender identity:

*"..before I moved out of the family home, when I was staying with the dad he could really be on my neck because he was accusing us, that we are the people who pushed him to be the way he is, and up to now, that's what he says, the mother, the sister, you people are to blame. He has never accepted him the way he is, never. No it cannot happen, for him he said he cannot, his decision stands."*

**- Mother of a transgender woman**

There were also examples of where the parents blame each other when their children come out as LGBT:

*"..... I am one of the lucky people because my parents are not friends one will say it is because of your mother and the other will say because of your father so I left them fighting. So my mum is like I think it is because your father didn't take care of you and my dad is like it is because your mum didn't take good care of you so there was no direct blame on me and it has never been there. My maternal family is accusing my dad and my paternal family is accusing my family, so yeah...."*

**- Lesbian woman**

## 3.0 The process of parents and families seeking support

All the parents interviewed during the study did not know where to turn to for support, or the nature of support that they needed when they got knowledge of their children being LGBT. They were hesitant to turn to friends and extended family for counsel and advice because of fear of stigma and the embarrassment that is often attached to families that have an LGBT child.

*“...how many people in Uganda would understand the word transgender?... even taking him for counselling, I was not aware of that, although I really don't know if counselling would have helped. Even talking about it with any other people, I felt ashamed.”*

**- Father of transgender woman**

*“At first I kept it to myself and maybe the family around but later on I had to tell them because there I needed some help especially when my child was moving out of the country, it was a hard moment.”*

**- Mother of transgender woman**

In general, there is no structured support for parents and families within existing LGBTI rights organisations, as mentioned by a LGBTI individual;

*“No. No one, no one. No one or any organization gave any support, not even getting down to interview me. No one even tried to come to me and said let's go together to your mum and we see how we can get down to reconcile you, no one...”*

**- Lesbian individual**

The absence of this support could be due to the lack of progressive therapists and counsellors whom organisations can partner with, or due to the fact that no parents or family members feel safe enough to approach these organisations to seek support. LGBT individuals also usually prefer to keep their interactions with the LGBT community separate from their interactions with their families.

The study also found that having more information about LGBTI individuals enables the parents to have a better understanding of their children, and helps them to appreciate that their children are not ‘the only ones like that’, or that they are not the only parents with LGBT children. However, when this information is provided by people they know well and trust, it is more convincing. For example, one mother had obtained information from the internet and from her child, but remained unconvinced that being a LGBTI person is normal and not a choice. However, when she spoke to her sister, who told her stories of all the LGBTI people she had met and interacted with and emphasised that they were completely normal, she was more convinced and became open minded:

*“...When I talked to my young sister, she was aware and at least she had seen these people, she used to move abroad, she has been staying there, coming back. She was telling me you people don't know this but we have many more people like him in the country just because you don't know them. People are under cover because they are fearing the situation going on in the country but they are normal people like us and there is no way you can change. There at least when you talk to someone you at least feel good....”*

**-Mother of Transgender woman**

Providing consistent information, for instance through regular conversations on what being LGBT means seems to also have the potential to ‘convince’ family. Some of the LGBT respondents intimated that the more conversations you have, the more you normalise the issue and lessen the taboo nature that surrounds the topic. Possibly, this is because the various conversations provide an opportunity for the family members to gradually overcome any biases and concerns.

*...I am a last born and only girl in my family, when my mother first found out about my sexuality from the newspaper outings, she was heartbroken and very angry with me. I felt sorry for being Lesbian, and told her so, but later I realised that she was taking advantage of my apologies to guilt trip me and torture me psychologically in the hopes I would change*

*my sexuality. So, I stopped apologising and kept emphasising how I have tried but cannot change, I also asked her to stop speaking about my sexuality like it's a disease, and explained the effect it has on me. I told her to offer me support and love me as I am instead of condemning me all the time. This tactic of being unapologetic has worked overtime.*

**- Lesbian individual**

*"I believe it's not my fault that XXXXX turned out like that. When people ask me, I say I carried the womb like other women, I produced like any other woman and this is the child I never raised outside the home, he was there, we brought him up when you are seeing but if he turned to be like that it was not my fault at all. It wasn't my fault..."*

**- Mother of Gay individual**

*"... My brother... he shouted, even my mum shouted also at first but with time she came to understand me because I kept on telling her this is me, this is who I am, and I will never change even if you do what, whoever tries to change me I will never change. Up to now she hasn't yet accepted but at least she has some information about how to handle me maybe or how to take things..."*

**- Gay individual**

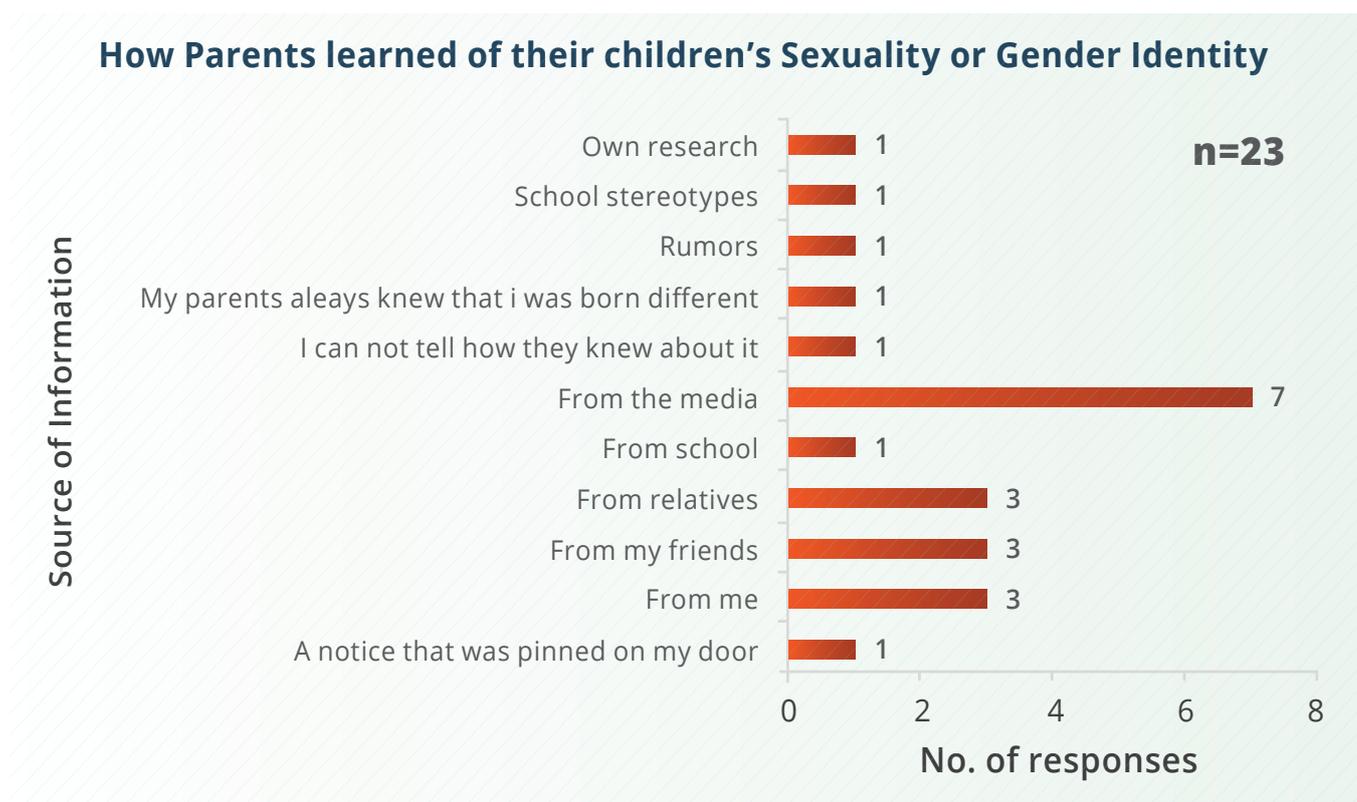
Another factor that contributes to acceptance by parents and family members is when an LGBTI individual is able to become financially independent and contribute to supporting their family, as indicated in the story below:

*"...In the beginning for me, my mum- she never ever said even anything. I think she just got to understand and said I have to accept, this is my child. I remember at some point she said God gives you all kinds of children but as a parent you have to love them, there is nothing you can do so she didn't actually react badly but the rest of my family like the extended family, they didn't like me going to their homes, something like that but now that has changed. Yea am actually now a resourceful person in the family, yea now I can say 98% of the family now accepts me, even of recent, actually this month I lost an uncle, actually the only uncle of the family that was left, then I went to the village for the burial and everything was fine only that I was attention for some other people, the mourners but the family, nothing..."*

**- Transgender man**

## 4.0 How parents found out about their children’s sexual orientation and gender identity (sogi)

In the baseline study, we asked parents about both how and where they got the information that their child was LGBT, as well as their sources of information about SOGI issues. In addition, we asked LGBT individuals how their families got to know about them being LGBT. The majority of parents interviewed (30%) learned about their children’s Sexual Orientation and Gender Identity from the media. The graph below also indicates that 13% learned about their child’s sexual orientation and gender identity from relatives, friends and school.



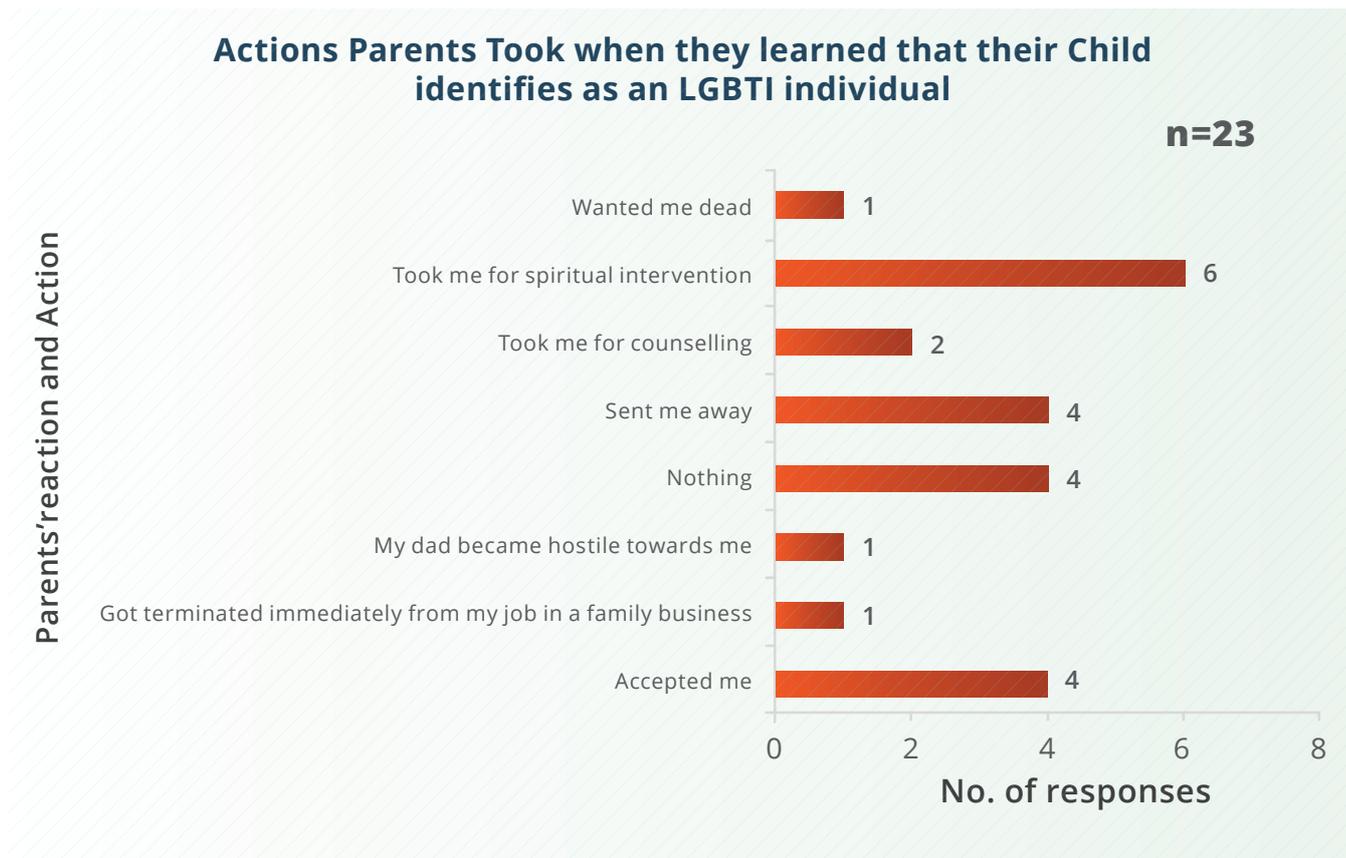
The fact that majority of parents got to know about their children’s sexual orientation and gender identity from the media showed that the majority of LGBTI individuals in Uganda are not usually accorded the privilege of controlling their coming out process, which is one of the most important and scary phase in any LGBTI identified individual.

*‘...I woke up one day in 2014 to numerous phone calls, asking me if I had seen my daughter on the front page of the red paper. At first, i thought maybe people were just mistaking the girl in the papers for my daughter until the paper was brought to me at home. I had never before felt so ashamed and worried...’*

**-Mother of Lesbian Individual**

## 4.1 Actions parents took after learning of their children’s Sexual Orientation and Gender Identity

Another question in the baseline study was what actions were taken by parents after learning about their children being LGBT. The study showed that parents’ actions varied after learning that their child identifies as LGBT. The graph below indicates that 26% of parents took their child for spiritual intervention seeking solutions- this action was meant to ‘cleanse’ their children of such bad behaviours and/or evil spirits. The other 17% either sent the children away from home, accepted or tolerated their children, or did nothing.



## 4.2 The process and the levels of parental acceptance of their LGBT children

The study findings show that, at the onset, only few of the parents (17%) accepted their children and the news of their different sexual orientation and gender identity. There were, however, exceptions in which parents expressed some form of acknowledgement about their child’s orientation and gender identity and their expressed journey towards acceptance

*“...She’s never judged me, she’s always there for me, she was just curious. Her response was positive, all she wanted was to know, her reaction was responsive, was motivating...”*

**- Gay individual**

*“I kept quiet, I did not want to lose my son. I just kept wondering but never did anything. Confused. But had no choice. I became supportive and inquisitive after.”*

**- Mother of a transgender woman**

### 4.3 The cycle of denial and acceptance

Sometimes parents and family members went through a cycle of acceptance and denial, as shared by one of the interviewees below:

*“... Well, initially they were ok and supportive ...one of the first questions I got was whether I was serious, or I was joking, and I said I was serious. The second thing that I was asked when she realized that I was serious was whether I would be staying in school because one of the key misconceptions that people have about queer people is that we don't want to study we want drop out of school so when she realized that I wanted to remain in school and stay focused, she was like ok, I mean that was at first. Eventually she became very, I would say aggressive because she became more of are you really this person, why are you still this person, I think she thought it was a phase and I would change my mind at some point but I didn't so there was that. So, at first it was friendly but eventually it became tough but now we are friendly again so I think she needed time for processing...”*

**- Lesbian individual**

In another instance, this cycle of denial and acceptance is difficult for the children to deal with:

*“.... mum still calls me and compares me to thieves and murderers, you know, like it still has that thing until now like saying people have children who are thieves and murderers you are still my child and .....am I like I don't want to be your child on those terms and that's part of the reason why I put their names and phone numbers in this study because I don't want to try to have a relationship with them when I can't trust them and part of the reason why I can't trust them is because they tried to kill me because of this stupid thing like really who tries to kill their child because they are queer, you know? And my parents are educated, it's so foolish so me am not willing to have a relationship with people who are homophobic, I don't care if they are my family, I don't care if people are saying oh they grew up in a different time.... because I also grew up in a time where I was told to hate myself, yeah, but I have had to go through the process of learning just to appreciate myself as a person despite even all the stuff that they said, they can go through that process without bringing their toxins into my life. So maybe we will work on it, we will get some support together after they have gotten some information and worked on themselves....”*

**- Lesbian individual**

When the parents oscillate between acceptance and denial, it can be confusing for the LGBTI child, who is not sure about the level of acceptance by their family, as indicated in the example below:

*“...with my family one of the biggest was I think coming out, but what I think is disturbing for me is that even after coming out and telling my parents that I was a lesbian woman they still insisted and started asking me questions or if I came home with a guy they would ask oh is this your boyfriend, it was really confusing because you would think if you have come out you have come out but when you have come out and people are still doubting its very disturbing so it was always confusing like are they friendly to gay because you don't know what's happening. Yes, the being unpredictable sometimes we would talk, and she is like how is your partner then other days I don't want to hear about it, it was like that and that was a big challenge for me. So, she just told me not to talk about it with my other friends, so another challenge was always when you see you are dating somebody and you have a partner in your life its serious your parents have to know about it because there is Christmas, there is Easter all those holidays so you have to go with a person but when you don't talk about it then you are like then I can't take my person home so that was always for me a challenge. At some point, I actually stopped going for holidays, but you know things get better at some point so for me those were the challenges....”*

**- Lesbian individual**

The journey towards acceptance of LGBT individuals by their parents and family members can take a long time. Often giving the parents and family time to come to terms with the child's sexuality and identity and providing information can be valuable and the most viable option. In addition, having family members who are more accepting and can speak to other family members also helps, as narrated in the experience below:

## The Very, Very Long Journey Towards Acceptance by my Family<sup>21</sup>

*“...well, they found out from school... the director had to call my mother, calling my mum, my mum was so surprised she was so shocked, actually she almost got pressure ... my dad came to school and he was so angry and annoyed, even at school he started beating me so seriously telling me how I have embarrassed him, how I have ashamed the whole family and actually from there he told me; I think am done with you, am not paying your fees school any more I think you can find out a way of paying your school fees or if you cannot you can drop out, but am done with you am no longer helping you. So I left school and came back home. Reaching home, I found a lot of my family members, but before getting into the house, my mum told me that ‘you are not supposed to be here, this is not your home any more’.... I was so scared at that time and so puzzled because I didn’t know where to go and by then I only had one gay friend that I knew. I contacted my friend but he was not in Kampala so he connected me to someone where I stayed for a few days, before moving in with my friend who supported me...one day my mum contacted me and I explained to her that I am still gay, and she said ok, ‘it’s fine but I don’t think your father will accept you because me myself I will not accept you at this time but it will take me time, whatever you are doing is not right, it’s so evil’ and I tried to explain to her so I told her- mum, I think am a human being and I think am your son but to me I know am your daughter because I don’t feel like am a man, am a transgender woman and that caused a lot of drama again at home. My mum told my dad that I said am a girl that I don’t feel like a man, my dad actually wire gyiyavirako ddala naayagala oba okwankolera ki na agamba nti bwe ndifa..(cut his wires completely, and wondered aloud when I will die)..he said I pity myself as a father because you are my son you cannot do such stupid things, tomanyira(don’t disrespect me) you are ashaming my family bintu bingi bingi...(many many things). Kati after some time, my friend contacted my dad told him I would like to meet you Ssebo my dad said it is ok, we went with my friend in town, I met my dad but he didn’t want to talk to me, he was talking to my friend. My friend explained to my dad but still my dad would not accept, ...but instead wanted the police to come and arrest me because the things am doing are for satan. Kuva olwo dadi wange ne mu sonyiwa ne mu vaa ko(since then I left my dad alone) After like six months nasaala wo ngende waka wenyini nga ne jajja wange jaali(I decided to go to home where my grandmother was). I approached my grand mum and I explained everything to her, she said it’s ok, ‘you are my grandson... do whatever you feel like doing am not forcing you to be what you are not if you feel that you are a girl, then be a girl and if you feel that you are a boy, be a boy.’ My grand mum assured my dad and my dad said its ok but did not want me home because I would spoil the other children. Kati from there slowly by slowly I continued talking with my mum and my mum accepted me totally she said it’s ok, ‘...be whatever you feel like being I don’t know what you want to be, if you feel like being a girl or if you feel a boy be a boy, your dad will also accept you with time...’ My mum accepted me and said you are welcome to my family, but it will take time for me to talk to your dad and convince him before you return home....”*

– Transgender woman

## 4.4 How experiences within other cultural contexts can help accelerate acceptance

Parents and/or relatives who have had exposure to western cultures, because they lived and interacted with the LGBT community outside Uganda, had personally interfaced with the community, or have lived or worked with LGBT people, are often able to convince others about the normalcy of sexual orientation and gender identity. This usually offers support and guidance to parents and families who are struggling to understand and accept their children, or who feel like their children are an isolated case among the majority. As expressed by one respondent:

*“...I think it depends on your background. Another thing it depends if your parents have been out of the country, if they have been exposed because why am saying that is when I got issues and was at police, the officer was really understanding not because he wanted to understand but because he had lived in the city that had many gay people and he got to know that they cannot do anything so he was even talking to other police officers, the other police officers were taking it as if we’ve killed people but for him he was in the right place because he has lived with these people ...”*

– Lesbian individual

<sup>21</sup> Narrated by a transgender woman

## 4.5 Parents who express outright denial of their child's sexual orientation and gender identity

After an LGBT person comes out, it is often the case that parents also embark on the process of coming out as a parent of an LGBT person. First, they find the news unbelievable (even though there may have been signs that their child are different from a young age) and as the study showed, a majority of parents remain in denial, completely rejecting the notion that their child identifies as LGBT. One respondent gave an example below:

*"... well, at first they were in denial mostly my sister and my siblings were in denial they were like maybe she's going through a phase, my cousins were telling me you are going through a phase, there is something that's happening to you, someone is influencing you, some white people are coming and giving you money to fund you and teach you things then my mum she straight away refused she's like no my daughter is not gay, you are not gay. She said I have nothing to do with you, me I don't have gay children, she didn't want anything to do with me so I had to leave home and then stay with friends because it was very uncomfortable...you know so I had to go to safe haven with some friends. But at first my sister and my brothers my siblings said that am just going through some phase even now they think am just going through something that's going to end like it's going to be like one bad dream and its done. My mum she just refused to accept, she just said no, I don't want anything to do with these gay things, she doesn't even acknowledge it, she doesn't even say the word, she doesn't acknowledge gay in her word no, yea...."*

- Lesbian individual

## 4.6 In some extreme cases, parents of LGBT people wished their children would die.

In one instance, a parent got so upset when they discovered that their child was a Lesbian that they locked the child in the house and tried to kill them before they were rescued by friends.

*"They tried to kill me and then they disowned me, they tried to get me arrested by the police umm, basically they tried to cut me off, yea. That's the entire family, I think the only person in my family that I speak to right now is my mum and I started talking to her may be three years ago? Everybody else I haven't spoken to since then which was four years ago.... they cut me off but I really didn't mind because I am not interested in living with people who want me dead yeah..."*

- Lesbian individual

## 4.7 "Exorcizing the spirit" of homosexuality and different gender identities

Despite Uganda's statute that declares it to be a secular state, which means that we have separation of church and state, the reality is that this separation doesn't exist. Religion often influences how laws are made, as well as how the Ugandan society treats its LGBT population. Almost all arguments against homosexuality are based on the religious teachings and beliefs. Perhaps not coincidentally, majority of Ugandans are introduced to religion<sup>22</sup>from the time they are born. Religious beliefs and excerpts from holy books such as the Bible/Quran have always been used to oppose same sex relationships and same sex marriage. It is therefore unsurprising that the majority of parents turn to religion as an anticipated remedy to their child's sexual orientation and gender identity.

In one interview, it was shared that often when parents turn to prayer and/or exorcism, they do so due to desperation and a form of last resort. While these methods may seem like a necessity to save their child from the evil of homosexuality, but the experience is often traumatizing for the child. As asserted by one respondent, when it fails, the child can be disowned and banished from home:

*"...another thing if they get to know, one thing common among them that you expect them to do is that they will pray for you that is a common thing, for them to drive out the evil spirit from you, if they have not taken you to church, they will take you to the traditional shrines. Some of our colleagues have gone through these things, they have taken some to the pastors and they tell everything concerning you to the pastor and they put you on therapy of prayers, overnight prayers,*

22 Roman Catholic, 32 percent Anglican, 14 percent Muslim, and 11 percent Pentecostal Christian. Other religious groups, which collectively constitute less than 5 percent of the population, include Seventh-day Adventists, adherents of indigenous beliefs, Baptists, Orthodox Christians, Hindus, Jews, and those with no religious affiliation as per the; International Religious Freedom Report for 2017 United States Department of State • Bureau of Democracy, Human Rights, and Labor. "UGANDA 2017 INTERNATIONAL RELIGIOUS FREEDOM REPORT" Available at: <https://www.state.gov/documents/organization/281044.pdf>

*therapy of reading the bible, they want to put you in therapy so that you reform and get out of it, there is one I know who was taken to the shrine and they said there was a charm on him that if he touches a woman or anything sexual, he will run mad so imagine that person, he is very traumatized, fears to die when they realized it was not working, they chased him away from home because the mum was like she had done everything possible but you are not responding so you go away from home, you are no longer my child and even removed the name away from the child so we expect that..."*

**- Gay individual**

## **4.8 When parents and families use financial support to leverage change in their children's sexuality and gender identity.**

Children often depend on parents/family for all forms of support. When a child is considering coming out, one of the issues taken into account is the level of dependence on their parents, in case the relationship turns sour and financial, moral, and emotional support is withheld. A number of LGBTI individuals have had to drop out of school, not because of their refusal to study but because their parents and families stopped providing support in form of school fees and other moral support. A reason for this is that the parents may anticipate that withholding financial support could serve as a critical leverage to influence or force the child to 'change'.

This was a reality of one of the respondents whose parents suspended financial assistance for his education which forced him to drop out of school:

*"... I stopped going to school because of my father, my father couldn't pay for me because of who I am. It reached an extent where he wanted me to dress in dresses, skirts but I couldn't. He started even giving me hormones from the doctor and the hormones reacted badly..."*

**- Transgender individual**

## **4.9 Seeking a medical solution to cure homosexuality and transgender identities**

One of the common reactions from parents when their children come out as LGBT is the certainty that the child has a mental ailment that needs to be healed. This perception is often influenced by the misconceptions, myths and taboos that surround LGBT individuals in Uganda and the general ignorance that exists about homosexuality in society.

As noted above, there are some parents/families who also seek medical help, in the form of psychological and hormonal correction therapy to try and change their child.

*'When I came out to my family, one of my brothers payed for counselling for me with a reputable Pastor who is attached the Anglican church, when I started the sessions, I found him to be very homophobic. He was doing some mind things like asking me to chant 'I am not gay'...I quickly realised that this was not counselling to help me with my struggle to accept myself as LGBT, it was instead a conversion therapy. I told my family I would not go back to the counselling since he was making me feel terrible about myself. I chose my happiness and mental health over my parent's manipulative threats of withholding support to me if I did not go for the counselling'*

**- Lesbian Individual**

A few of the service providers interviewed (i.e. a clinical psychologist and counsellors) were appalled but unsurprised by the actions of these counsellors who have treated LGBT clients in such an unprofessional manner. One therapist gave her opinion about why parents may be inclined to take their children to such counsellors to change them:

*'...I actually don't see parents that often, maybe once in a while but it's not very common but what I hear from LGBT identified clients who struggle with family relationships, I can imagine culturally, it's often difficult for them because of the legislation part, the community attitudes whereby people think it's a wrong thing, I think often parents struggle with the feeling that they want to be loyal because it's their child, support their child but at the same time, they are also living in a culture where people don't approve so they have to live with the neighbours and others who have opinions about it and I think that's often difficult for them. Some parents also find it difficult because in their personal opinion its wrong as well so they find it difficult to relate to their child if their child doesn't want to change. Some parents can be supportive but they do it in secret so they don't necessarily stand up in the community because they know the risks involved as...'*

In one incident, a parent who found out about his child's sexuality/gender identity during a television episode where the child was being arraigned in court before the media, said he took it upon himself to counsel his child, but from his submission, it seemed that the aim of the counselling wasn't to help his child cope but to scare him into changing his sexuality/gender identity.

*'...I had to counsel him me myself trying to show him that what he is doing is wrong and cautioned him that in case someone got to know about it would be dangerous maybe could be harmed and I told him that as a parent I won't chase him away from home but he has to change for his personal safety. Told him that what if many people get to know about this? Won't they stone and kill you? Because they hate the gays, lesbians, the trans and bisexuals...'*

**- Father of a transgender woman**

## 4.10 Grandparents as key supporters and advocates

The role of grandparents as a source of support is also critical. Grandparents seem to be more open to accepting their grandchildren and could possibly play an important role in trying to change family attitudes to be more supportive. One individual recounted their experience;

*"..... Another thing, I got this problem at school when they got to know I got suspended so my grandfather was there all alone for me but when he passed on things started going bad because my grandfather was the only person who would understand me. Yeah I used to get suspensions but my grandfather used to comfort me and used to help me out to look for schools...."*

**- Gay individual**

## 4.11 Just ignore the situation and did not do anything

In another instance, one lesbian identifying individual who is 24 years of age shared that her parents and family have decided to ignore her sexual orientation and it is not an issue that is discussed at all during any of the family forums:

*"... I don't know if they know, it's not something that we have discussed because I just live my life the way I do so I don't know if they know and if they do what they say or think, there is no discussion that we have really had. There is no discussion that we have had, no, I haven't engaged anyone. Well, there are just two of my siblings but I told them on whatsapp one day, and they were like if that's what you have decided. I don't know if they are ok with it I sent them the whatsapp message at 3am and said I understand if none of you responds. I just threw it at them but have never really had any one on one with any of them. Really I have gone to visit my sister, she has met some of my friends but there is no discussion that we have had. So, let's say I know how they think, I know how they feel, my siblings some of them I have lived with my young sister and I pay some of her school fees I help them but I come from a family where we don't really talk about things. I don't know if my decisions are ok with my family but that is because maybe I don't really expose myself to my family that much like the older people so I leave no room for questioning, judging so...."*

**- Lesbian individual**

The baseline study found that sometimes parents didn't do anything in response to their children's coming out or being outed. One parent told us the following:

*'...Confused. But had no choice. I became supportive and inquisitive after. I kept quiet, I did not want to lose my son. I just kept wondering but never did anything...'*

**- Mother of transgender woman**

In another instance of a gay identified individual, family members also seemed to know but they decided not to discuss it:

*“... for me personally I think they know but they don't talk about it and they don't want to know because they already have letters from school expelling me and the reasons for my expulsion, but they don't talk about it, in fact whenever am expelled, the next day they ask me to go look for a school. They have never called clan meetings but I know in their heart of hearts, when they heard the information, they are hurt although they don't want to show me, that's what I believe but my business is my business, their business is their business, what concerns both of us, when it comes to education, they will play their role, where I don't need their role, I do it so that's it...”*

**- Gay individual**

## 4.12 Crushing of parents' expectations

Some parents believe that LGBT children shall never amount to anything because of their sexual orientation and gender identity. This is because of the widely held negative and false misconceptions that LGBT individuals have a mental illness and will inevitably tend to engage in harmful sexual practices like multiple partners (perhaps as a result of legal prohibitions against same-sex marriage) and dangerous social habits like drug and alcohol abuse. This was expressed by one LGBT individual during the study:

*“... You know with parents, they expect much from us their children but when it comes to someone who is like gay, lesbian or what when you turn to be like that, most parents lose like their expectations. Maybe she expected that you will become like someone big, you help her out may be with home issues but when you turn out like that, then she is like I don't want to get anything out from this one...”*

**- Transgender man**

## 4.13 Acceptance or tolerance

The study showed that when LGBT children are able to earn a living and prove most misconceptions against them wrong, parents and families tended to conveniently change their minds. However, this mind-set change does not always mean full acceptance and support. According to one individual, his family maintained a relationship with him because of what they could get from him, so in his view it is not a relationship of acceptance but one of tolerance in order to attain financial benefits:

*“... now the problem with that communication like by the time when you get some money, you do some shopping and take some things at home you will see that kind of thing- I even don't know how to call it like 'kumosola'-(favouritism)? you know they say things like, tebimkwatako bintu bya bisiyazi(things of homosexuality don't concern me). So I think they need some help from me maybe some funding for the young kids or maybe something for home use and many other things...”*

**- Gay individual**

## 5.0 Challenges faced by parents and/or relatives of lgbti children

One other key issue we needed to explore when this baseline study was commissioned was the challenges faced by parents/families with LGBT children. There is an abundance of research on the challenges faced by LGBT individuals in Uganda- which provides activists and organisations a baseline for developing support systems to address them. But, in trying to understand what is holding back most LGBT individuals from realising their full potential, it is also important to understand their family backgrounds and family dynamics. After all, healthy family relations and proper upbringing have a direct correlation with a child's proper growth and development.

This study revealed that parents and/or relatives of LGBTI individuals who were outed or had come outface a number of challenges as articulated below:

### 5.1 Two parents, one Muslim and the other Anglican, described their experiences of experiencing stigma from the community:

*"... In the neighbourhood, they talk a lot about my child but I have learnt to deal with that, I now have a sponge in my ears that I don't hear, or don't really care what they say about my child...I also have faith that Allah will pity my child and my child will be fine, that's what I think"*

- Parent of gay individual

*"...Normally now the society turns to look at you as a different person even though it's not you who has changed. They say that one spoils the child. Others believe we would have used an iron hand to put him right, people say we should have gone as far as taking him to prison, beaten him, all sorts of punishments. That's what most people say, that we were just negligent about the whole thing. Peoples' perceptions are one of the challenges but even me, am also tortured, psychologically by their negative words..."*

- Parent of Transgender woman

### 5.2 Other parents expressed challenges of experiencing apprehension and concern for their children's health and wellbeing as well as worry about who would take care of their children in the event that they passed on:

*"...I have heard and there was a time I was watching television (TV) and I heard that children like my child can easily get diseases, they get sick in the anus, they cannot defecate properly, they can easily contract Human Immunodeficiency Virus (HIV). All these things worry me..."*

- Parent of Gay individual

*"I mostly fear for how my son will grow up and will be treated if am old, if I die or if am not here to love him. Many people say different things and nothing is good, so I have to be good to him. Am scared he will not make it in life like the usual people. For all his life people are going to look at him differently. People say a lot and I am scared for him. They say we bring white people here that am helping my son be a homosexual..."*

- Parent Transgender woman

### 5.3 One mother experienced the challenge of obtaining unsolicited and derogatory information about her child from various sources without knowing how to process it, which caused confusion and strife in the home:

*"He (my husband) would go on the computer and search whatever is on the computer and calls me, come and see more about your child, so it was torturing me. He was searching about homosexuals because he didn't know about transgender,*

*he was only on homosexuals. I remember my son brought some of the medical information he said he got from Mulago, actually I have it at home, he said me I am this, you can search on that, read about this but this is the way I am now. He said earlier on he hadn't known what he is when he was young but he said he had done research, gone to Mulago and gotten checked to be sure and he had found out that he was that. So he said, I have nothing to change me now and now am happy because I have realised that am who I am now, that's what he told me, he left the information with us at home and that was that. He just came in briefly from campus and dropped the information and left. She at least tried her level best to educate us but we could not listen. The more he talked about that then the more we faced it rough at home...."*

**- Parent of Transgender woman**

#### **5.4 One LGBT individual stated that her challenges with family were a result of her parents' preference for believing in misinformation and biased information from the media and bigoted religious leaders :**

*"...the funny thing is that I grew up with these people, that means they know me, they knew what I was doing but it was like the moment the word lesbian entered my father's head, he said you are useless, you are going to fail in school, I have been top of my class since I was in P.1 but my father heard the word lesbian and then suddenly everything goes down so I think that they have a very distorted view of reality so I really need queer people to spend some time getting our stories out there. In terms of I think they need more information about queer people because all their information is based on this stereotypes and misconceptions which they see on TV of pastor Ssempha saying people eat 'pupu' (feces) so just the dispelling of those myths would be valuable....."*

**- Lesbian individual**

#### **5.5 One parent described the challenge of increased tensions that occur in family relations as a result of their child revealing her gender identity:**

*"... It's quite, quite difficult, yea. In the family, having such a child causes tension, you cannot be on good terms with the husband, you are every now and then quarrelling, it became too much for me that I eventually separated from my husband and left our family home...."*

**- Parent of Transgender woman**

#### **5.6 Absence of information that could have helped parents know what to do when their children came out.**

In addition to lack of information, parents revealed how their situation was made more challenging due to the absence of other parents who could act as role models, share their experiences, and establish a form of a support system: None of the parents interviewed were aware of any other parents with LGBTI children, no one talked about it in their women groups, and two parents told us that the only messages they had heard in their places of worship always seemed to point out that it was an ungodly curse to have an LGBT child or that homosexuality doesn't exist in Uganda. Further, according to some parents, because it was hard to identify signs that their child may be LGBT, they were grossly unequipped to deal with their children coming out. All parents in the study stated that they would appreciate a forum that would enable them to meet, share information, and obtain support from other parents who are in a similar situation or from a professional counsellor. As one parent stated :

*"... I think it would help to be meeting in groups as parents of children in the same category because you can talk, and you feel relieved. This would be like a support group of parents going through the same thing. The parents should meet with the counsellor because as parents, most of us don't know, we don't know anything going on and others say we are bewitched, that is the most challenging thing. But I don't believe in that ..."*

**- Parent of Transgender woman**

## 6.0 Resources for LGBTI persons who sought support

From this study, it was noted that LGBTI individuals mainly sought forms of support from medical service providers, places of worship, parents, friends, and civil society organisations (CSOs).

### 6.1 Some sought support from hospitals/clinics

The LGBTI community has fought hard to gain access to quality health care for the last five years; this work, coupled with pressure from development funders, has guaranteed that select health centres respect and serve LGBTI identified clients. However, this service is not devoid of discrimination and unethical practices perpetrated by service providers. Health service providers, despite their training and education, often fail to separate their personal beliefs about sexual orientation and gender identity with the principle of 'Do no Harm' that all doctors are required to abide by. Some individuals interviewed in the study were able to receive quality support, but a few of them experienced prejudice and intimidations as narrated below:

*"...so what am presenting is our service providers like the Bassawo, you people should talk to them because otherwise these people don't belong to the community so when somebody meets you and is like what is this because he asked me, what if mum hears about this because he is my cousin, what if mum hears of this, won't she die of pressure? That's what he asked me and I was like no, so that's it so I don't know if he is the one but I suspect he should be the one who told them, I just suspect..."*

- Gay individual

The respondent below experienced stereotyping from a medical worker:

*"...when you go to the health centre, someone who is said to be sensitized about how LGBTI people are, they still have this thing of discrimination, or they have some stereotypes about how LGBTI people are... just in case if I came and said hi, how are you they will say that's already kukwana (conning) and we find this often, it is all around..."*

- Transgender woman

### 6.2 Some went looking for solace and support in a place of worship

The majority of Ugandans have been socialised to turn to some form of religion -especially through prayer- whenever they experience problems. Even with this common practice, a confidential, empathetic or positive response from places of worship are not always guaranteed. This occurred amongst those considered to be of the strongest faith, as demonstrated in the story below:

*"... so I think at the beginning of this year, I had shared my sexuality with my friend at church, he wasn't a church member but I thought he is old enough, when you are a Christian, and you are old enough in the faith, you kind of hold people's burdens, people come speak to you like a counsellor and you are expected to keep 'mam'(quiet) about everything and YOU are supposed to pray about it. So I told him you know what, this is the thing, it hasn't gone away however much I've prayed about it so he was like ok it's no problem we shall pray about it together. I think about two three months later, he goes and tells my pastor this guy should not minister in church because he is gay..."*

- Gay individual

### 6.3 Receiving some support from parents and family members

In some instances, LGBTI individuals may be aware of some family members who could be supportive, but they are hesitant to come out to them because of their love and concern and the need to protect them from the negative attention, shame, and stigma that is often associated with families of LGBTI individuals. One individual highlighted this below:

*“...personally, I have a very supportive mother maybe I could actually tell her about that but mum has been very supportive, she is 70 years, turning 71 years next year in May but I would think sitting her down and giving her another burden would be too much for her- so I will spare her that, even though I know she is very, very understanding. she worked in the medical field and she would be able to understand. She is the only person I can still run to when everything falls apart, I really, really know that she would take me as I am and she will not ask questions...”*

**- Lesbian individual**

## 6.4. Seeking Support from Civil Society Organisations (CSOs)

A number of the LGBTI individuals have sought support from CSOs with diverse results. There were some respondents who shared negative experiences in which they did not receive any support from CSOs as they had anticipated. It is also possible that sometimes LGBT individuals go to organisations without fully understanding their full mandate or the internal limitations they have in handling some cases:

*“.... I haven't received any support, first of all we have organizations that are supposed to help us out during such times if you come out and you are alone but they don't do their job or even if they do it they will tell you give us 50% which is so bullshit\*.... I went to several organizations.... for real, no organization helped me, even my own organization XXXX they were just saying other things. Someone will say the Executive Director (ED) is not around as if the ED is the organization.... That particular time I needed someone to talk to..., the person they gave me to talk to, I was afraid that the next moment I was going to hear everything that we said in the room, there was no confidentiality...”*

**- Transgender woman**

In another instance, the CSO that was approached was mandated only to provide support for its members. Therefore, individuals who are not members or are not affiliated to CSOs in any way may be left out. In fact, that happened to one respondent as described in the story below:

*“... I found out that there is an organization that has a resident counsellor, then I had some hope and then it was crushed when they told me they only help members, they can't help me....”*

**- Lesbian individual**

## 6.5 Seeking out support from Friends

In a number of instances, LGBTI individuals relied on close friends for support. These friends tended to be few and in-between and were often people who accepted the LGBTI individuals for who they are. These friends are the ones that take you in when your parents/families threaten you or have thrown you out of home and you have no shelter or food. One respondent narrated their experience:

*“...my friend was really helpful during that time and that's one thing I will always be grateful for. She was there for me at the time, so she really pushed, it wasn't easy, but she pushed. So, yea, my friends helped, they took me out to socialise when I was 'broke' which was really awful because I couldn't take myself out, basically I was someone else's child, that's what I found out, they were taking care of me in ways no family really could and that's why I guess I can say right now with absolute certainty that I have no ties to my family and that makes me feel like their family. My friends, the ones who are there, those are the people no matter where I am, even if we are not in the same locality I will still call them, am like are you ok, are you well, because what they did for me in just that one year period was what I believe family should do for you all your life so to have that feeling I know it is actually possible to have people love you, be there for you and not judge you it was weird but it was nice....”*

**- Lesbian individual**

## 6.6 Accessing Counselling services

While some LGBT individuals have reached out and sought counselling services, with varying experiences, others have chosen not to seek counselling because of the underlying assumption that counsellors will be biased. When asked if they had ever sought counselling one respondent answered:

*“No support, I have not sought any support like counselling. I don't know if am ok, I don't think am ok ...Well so why would I seek counselling..., and tell them what? Let's be realistic, which counsellors will I go to as a transgender person and like how will they help me? ...”*

**- Transgender woman**

In other instances, they did not seek counselling because they were not aware of the appropriate/progressive counsellors to go to, and even when they were aware of the counsellor, these individuals were too expensive and inaccessible as narrated below:

*“... I have not sought any professional help personally, part of the reason for that is I think it's hard to find a therapist who understands your sexuality so that was one problem but even when you find that therapist they cost a lot of money, so I cannot afford one. So, I did try to find one at some point but at first, I couldn't find the person when I did find the person, they were too expensive so I couldn't get that support. But I think that over the years just having social circles has been very supportive and helpful, I think that has really been the biggest source of support for me...”*

**- Lesbian individual**

Some of the LGBTI individuals interviewed for this study sought and/or attended counselling sessions from religious institutions. However, in all the interviews, no respondents reported having had a positive experience with the religious-based counselling. Also, most of them ended their counselling sessions pre-maturely.

*“.....my brother paid for counselling, one of the best counsellors around a reverend he has a counselling thing at Akamwesi complex, it's one of those good counselling services so they paid for me to go and for me I thought that counselling was like some conversion because he was giving me some shocking things to say like am not gay and how being gay is like a mental illness that had happened to me and that I need to convert from it, he was giving me it was very traumatizing because in the head I was not feeling well, he was giving me so many weird things and telling me things, he was just demeaning me, I was feeling bad about myself and I was like this is not how counsellors are supposed to be, you know, so I fought the counselling because I was like I could not do this counselling and he was like you either do the counselling or you are out of the family. I was like I cannot decide and cannot do it anymore, I was like I tried but I couldn't continue doing it so in terms of counselling with that was the only support I got, we even tried going for counselling in XXXX but it didn't work out so as far as counselling with my family is concerned that's how it went....”*

**- Lesbian individual**

Another respondent described their experience with counselling as follows:

*“... So, then they got me to seeing a counsellor and I thought that would really be a good condition because I would rather see a counsellor because school was starting so I told him I will see you, but I knew my fees was in there so that was my condition. That was our relationship for a while until he started making some really bad comments, telling me about his life of infidelity, he was a saved counsellor telling me about sin and how he used to sleep around when he was not married and I was like I went to school and psychology and this is not how it's done and I was like ok if this is what I have to endure to get an education, it is better than going to rehab. So eventually I stopped going to the sessions and then my parents would always start like have you seen the counsellor, have you gone for treatment, I was like yes, but they would say we don't see any changes in you. So eventually I stopped, I said am done with this, I stopped seeing him, I blocked him....”*

**- Lesbian individual**

Throughout the study, it was acknowledged by all LGBTI identifying individuals that there is a need for psychosocial support:

*“... Yea, I've been talking to a therapist for some time, what else? Also, just reading and informing myself, yea because I think people take for granted the fact that we internalize the homophobic things that people tell us about ourselves and I think that it is .... crazy for your family to try to kill you, yea? It distorts certain things about the way that you view yourself and the way that you interact with people, so definitely I've been trying to get some help but also to teach myself about what it means to be lgbti because everybody believes queer people are disgusting in this country at least, that's the message we get every day, you are disgusting, you should be killed. That stuff affects anyone, even people who don't get disowned by their own families, you know, so for me I think just the fact that there was such a big disruption of my life because of my queerness, it forced me not to only look at oh am queer, am this, but also like, do I like myself as a person? So definitely am trying to support myself. ...”*

**- Lesbian individual**

According to LGBT identifying respondents, there is a wealth of information on HIV/AIDS, sexual and reproductive health, legal rights, etc. However, there is limited access to support and information related to their own their sexuality and identities, especially in the African context. A respondent expounded on this point:

*“There is just lots of information you need just getting to know yourself, I think that one of the challenges with our community is that there is information about HIV, there is information about community but there is really no information around like individual identities, what does it mean to be a gay man in Uganda, what does it mean to be a lesbian woman in Uganda or a bisexual person in Uganda so it’s all that, you need all that information a lot of us do... but aside from information generally, the other thing that we really need is the professional support, professional therapists who can talk to you, even religious leaders, they don’t always have to be a therapist I think. Am for therapist because I think it can work but those kinds of support services are definitely needed. But of course even family, any interventions around family I think will work, outside professional therapists and spiritual leaders. I think one of our biggest interactions is with families.*

*So, if our families don’t have any support to understand who we are even if we go and get therapy ourselves, we will go and come back to these families...”*

**- Transgender woman**

One individual considered every class in her psychology course as a counselling session:

*“... every lecture felt like a session for me, so it was healing in some way, I felt solace in my lectures somewhere I would find something honestly, .... every time you are in a lecture you find mummy issues, daddy issues and am like yea, that’s actually what happens because we are talking about different things and I see how they relate suddenly I understand myself better and with understanding myself better means I have to understand the people around me better so to move past the hate I had to sit down and stop just pointing fingers...”*

**- Lesbian individual**

## **6.7 When you turn to outsiders to mediate the tensions with family**

In one instance, an LGBTI individual sought help from medical officers and police officers to speak to her family:

*“...Yes, I have tried my best to make sure that my doctor talks with my father so they talk about my transitioning process and I contacted police sometime back so any problem that will happen to me they are aware because I have an officer who is my friend and accepts transgender women. At least I have his support and my doctor supports me too...”*

**- Transgender woman**

## **6.8 When you have no option but to figure it out on your own**

In a number of instances, LGBTI individuals had to figure out issues concerning their sexuality and their identities by themselves. This often involves confusion, regret, shame, and depression. However, respondents said the process was the most meaningful for them to fully understand and accept themselves, and also aided in developing their own self-love in spite of the voices that sought to make them feel otherwise.

## 7.0 Perspectives of service providers

The baseline survey data collectors met with three categories of service providers, including: those offering counselling services and practising clinical psychology, HIV/AIDS health services providers, and Civil Society Organisations working on human rights issues. While there is an abundance of counselling centres in Kampala and Wakiso, we were only allowed access to seven of the twenty that we reached out to for interviews. Some outright denounced the baseline study as being none of their concern by saying they don't deal with 'such people', others who had a religious based approach told us it was ungodly what we were doing, while others promised to meet with us but attempts to follow-up and sit with them for a meeting were futile.

### Counsellors perspectives

The counselling service providers who accepted to meet with the data collectors had the following submissions in response when asked if they provide services to the LGBT community:

*"...Well, we just provide counselling, yea, counselling mostly in relationships, families, basically in everything. We provide counselling. We first talk to the girls, then they tell you what they have, maybe they want to reveal to their parents their relationship status and they need somebody to be there with them to support them or they have issues, issues of not being accepted so we come in and talk to their parents on their behalf. Basically intermediary..."*

- Counselling Service provider

*"We don't have a particular policy to take on one particular group of people, I think we provide health services to everyone it doesn't matter which race, colour, religion or sexual orientation it doesn't matter to us so for us we will provide services to anyone that comes here because we treat conditions that anyone can have."*

- Counselling Service provider

### HIV/AIDS Health service providers

At a government aided health centre, the service provider that was interviewed asserted the right to health for all:

*"...As a health service providers, I believe pflag individuals are entitled to the right to health services like the rest of the population..."*

### Civil Society Organisations (CSOs)

The CSOs that were interviewed provide advocacy and support for a number of human rights issues. However, they do not provide specific support to parents and/or relatives of LGBTI children:

*"...We are basically a women's rights and children's rights organization specializing in prevention of violence against women and violence against children. We have even recently revised our values and deliberately put intersectional as one of our values so that it is explicit to us...so even if our work is not explicitly focusing on provision of services to that community, it intersects, and we address it as it intersects we are part of the human rights coalition..."*

- CSO staff

*"... we are feminist organizations that stand up for the rights of women at all times because for us we believe all women and men, women, girls, boys are of equal worth and value and a woman is a woman and we truly uphold a woman's bodily integrity..."*

- NGO staff

Some parents we spoke to approached individual leaders of human rights organizations because they expected that the Executive Directors (EDs) would have information and would be more understanding of their situation:

*"... I have heard that quite a number of parents have approached our ED to talk about their children and some children have personally approached her to try to talk to their parents, I remember I was comparing notes with her because she had this very difficult case of one of her relatives where her relative who is this really very nice person but their first born is gay and the relative always says that for me if I ever know that my child is gay, she is the type of person who thinks that all gay people need to be killed and now her child, her most favourite child is gay and it's our ED, the only family member who knows- so she is like aha, and the child confides in her because it's like only you are the only one who I can trust..."*

- CSO staff

## 7.1 Attitudes of service providers towards LGBTI persons

During the baseline study, we sought to uncover the attitudes of service providers. By understanding their attitudes, we hoped to develop a baseline of progressive service providers that we could refer PFLAG-Uganda clients to after programing starts.

In answering this question, most of them asserted that they treated LGBT clients like any other clients they work with:

*“...we treat them like any other client. For me personally it’s just like seeing any other client... maybe they come with some specific problems because of the legislations in Uganda but I would still treat them like any other client because they be depressed or equally anxious like any other person can be so to me it is not any special, like it would be special to any other person....”*

**- Counselling Service provider**

Although the current legal framework does not criminalise or prohibit the provision of services to LGBTI individuals, some of the CSOs admitted that they would like to address LGBTI rights issues, but are concerned about the legal ramifications of providing services and/or support:

*“... I think we are clear, that this is human rights abuse, we are clear that we cannot do one right and ignore another, we are all for solidarity across movements and connections. We have been grappling with how better to do that given the legal context we are in.... We are definitely not homophobic, I think let me summarise it like that, as an organization stand, I cannot speak for individuals.”*

**- CSO staff**

*“Ours is a human rights organization where we believe in rights for all, so we do not discriminate, and we have programs where we involve the sexual minorities groups, personally I head that program...”*

**- CSO staff**

Despite service providers’ apprehensions and lack of commitment to fully operationalising LGBT rights within their larger human rights work, there was general good will and assurance that they are willing to use their professional skills to help anyone that comes to them with a problem-whether or not a person identifies as LGBTI.

They also admitted that the LGBTI community has a unique set of issues that can only be dealt with when a safe environment is created where the service providers can provide interventions safely and the LGBTI clients can feel safe enough to seek these interventions.

Perhaps due to the small pool of service providers that we were able to speak to/or the general issues of client identity protection, none of the service providers we interviewed admitted to having spoken to a parent of an LGBTI individual. One counsellor explained to us that parents do not seek support from service providers due to the stigma and guilt that they feel, as re-counted below:

*“...But from what I hear from clients who struggle with relationships and I think what I can imagine is I think because it is culturally different because of where they are coming from , there is the legislation part, there is the community attitude whereby people think it’s a wrong thing so I think often parents struggle with feeling that they want to be loyal and support their child because it is their child but at the same time they are also living in a culture where people don’t approve so they also have to live with the neighbours and other people who have opinion about it so I think that makes it difficult for them. I think some parents also find it very difficult because in their personal opinion it is wrong, so they find it difficult how to relate with their child if the child doesn’t want to change or if it is something they have in their mind that they have to change. I think the parents can be supportive if they have to do it in secret, so they don’t come out in the open in the community because they know the risks involved as well so I think they struggle with them as well.”*

**- Counselling Service provider**

## 7.2 The nature of information and/or support that is provided to parents/families of LGBTI individuals by service providers

Another data point question that was posed to the service providers in the study was what support they provide to LGBTI individuals at an institutional level. Most of those interviewed admitted that they did not have an institutional policy on how to treat such clients, neither do they try to change parents' views about homosexuality or the relationship with the child; instead, they only provide information on general parent/children issues. If parents and/or family members need further information, the counsellors make a referral. One psychologist from a private health clinic intimated:

*"...I think in my profession I don't provide a lot of information which is complicated to explain, it's more about usually trying to find solutions to the clients so if they struggle with a relationship with their child for example it's more about finding what is really important to them because in most cases I think a parent will always want to support their child if they are not in a healthy relationship so they try to find out ways to do that within the social and cultural environment so I think we discuss about that and the options there ..."*

**- Counselling service provider**

Some of the service providers recommended the formation of self-help groups:

*"...I think in a way such self-help groups are the best in such situations whereby you can share similar situations and challenges. I would refer them back to the organization that sent them if there is an organization..."*

**- Counselling service provider**

Sometimes, the counsellors expressed their regret for not having the time to follow up with parents:

*".....with parents and relatives it is about being identified with, you know how society is as branded as LGBTI and you know most of them are ignorant about the law itself and also the culture so I've not seen any parent who is not influenced by the culture, maybe in the African culture lesbianism, homosexuality is an abuse of the culture so when they see it with their children, it's overwhelming and sometimes it is very hard for them to accept it at first, yea sometimes after we speak with them they begin to understand and eventually they will accept completely, although sometimes I don't have the time to follow up..."*

**- Counselling service provider**

Only one of the service providers offers information to parents:

*"...Our approach is educational and dialogue, so we educate parents on sexual orientation, gender identity, sex, sexuality, and then spirituality including human rights so that we can make them understand these issues ok, these matters so that they know their LGBTI people or LGBTI youth and children, they have not chosen to be LGBTI people, have not chosen to be lesbians and gay or bisexual, it is their sexual orientation..."*

**- Counselling service provider**

One Christian organization that provides spiritual support to LGBTI people strives to help parents understand unconditional love in the Christian faith. One of respondents mentioned that they ask parents,

*"...How are you bringing the image of Christianity amidst your children, amidst your LGBTI children? Does Christianity tell you to discriminate your own children? Does Jesus tell you to disown and banish your own children? No. What does Jesus tell you? To express unconditional love. And again, parents should know these are their children, they are attached to them you see, so this is how we try to encourage parents to accept their LGBTI children including some LGBTI youth themselves, some don't accept themselves, who they are because they have been told that they are possessed, they have been told that they are abnormal, they have been told that they are a disaster to the society you know? So what we do is to give out the information and messages that confirm this disparaged excluded, spitted on, trodden on LGBTI youth so that they can accept who they are and know that they are part and parcel of our society and they are created by God and they are ordained like you and me."*

**- Counselling service provider**

### 7.3 Institutional Capacity to provide support

The baseline study further sought to find out whether institutions that provide support to the LGBTI community are adequately equipped to provide appropriate support to parents/families of LGBTI individuals.

The counsellors in the institutions interviewed stated that they have the required professional counselling skills but what they do not have is a clear referral point for individuals who need more information on LGBTI issues.

*"...what we don't have is referral. I think there is no clear referral to support parents, like I have for example parents of children who are born with disabilities, so I know where to send them, I know they can go to this and this place for this and this support so I think for this group that is a bit more complicated..."*

**- Counselling service provider**

Some of the human rights organizations needed more information about LGBTI individuals and how best to work with them as the training they have received in their career doesn't include LGBTI topics.

*"... no, I don't think we have the adequate skills to support LGBT clients, we really need support, though we have gone through trainings and feminist counselling..."*

**- NGO staff member**

There is willingness by some organizations to provide the support. However, what they require is further information and skills, as is demonstrated by the story below:

*"Of course, having training for us so that we can know how to do it and then we will be happy to receive some people that might need support because what I know people within that community because of the safety issues they are kind of secretive, they would like to be sure that where they are going is safe. For me I would be really happy for us to get that kind of training and skills so that now we know, as an organization we know how to respond and then maybe there is at least two trusted staff who can engage..."*

**- NGO staff member**

One counsellor, who was hired by an LGBTI organisation to provide in house free counselling to members, explained how she would prefer to be part of a group of other affordable counsellors who could assist her to provide counselling services to the community;

*"...No. No because am just a, I would say a community counsellor, am just a community counsellor and as these issues go deeper, they need more, I keep referring. Because they are so sensitive they need somebody who is identifying with it but in my counselling I feel that they need other care, other support that is higher than mine like the people who have gone through trauma, they need higher so at least if I could associate with other counselling institutions that are higher than me because the job is also too big, at first, during my contract I accepted to work on five people per day but it's too short, they have so many issues I can't handle so I told them that I can take only two but even those two to get deeper you need support and it's a lot, it's a lot of work for me alone and am the only counsellor in my organization, others are doing other things. But I've tried to get other counsellors which is also very expensive because if you send them for further support, it is more expensive than I do, others don't have and they also fear to expose themselves further, because if you go to another counsellor you have to go back to them and me I take a lot of time to bring them out so it's really complicated..."*

**- Counselling service provider**

## 8.0 Possible interventions for parents

One other question that was asked during the study was what kind of interventions parents and families of LGBTI individuals would have needed when their children came out to them, and what kind of interventions they need currently. The parents and LGBTI individuals that were interviewed during the study made the following suggestions for possible interventions:

Some parents requested capital and/or other financial support/resources to enable them to support their children

*“... giving me capital to work for the child or even giving it to the child to help the child in a business to support him because this child follows my first-born daughter who is already married. Then the boy follows her, ok I say boy but now turned girl, I even fear mentioning his sex. He was bright at school but he could not continue with his education, so the capital would help to support him, I can build a home for him in a safe environment and look after him, this will also stop him from moving from place to place like the way he is currently doing because he has no money for rent...”*

**- Parent of transgender woman**

All parents interviewed expressed how important counselling would have been when they found out about their children's sexual orientation and gender identity. As one parent explained:

*“...another thing is may be if we had counsellors who could come talk to us, maybe that would have helped but we were just dealing with the situation as a family on our own. But me I believe like if we had some people who would come to educate, come and talk to us that one would have really helped. I think counsellors because much as we are parents, we are not like people who are so much educated, we are not, so people who are educated, well-educated like you meet counsellors you would really understand. Yea, people educated better than us. I feel like if all the information that XXXXX (our child) was giving us was delivered like by a professional counsellor, we would have believed, because with him telling us, me I felt that he was just covering up but if I had met someone who would come and talk to me, not once, not twice, at least for some time and at least if at all we could also meet with other parents who are in the same category I think there we can really see that this is something which is between you the child and the father, which is difficult...”*

**- Mother of transgender individual**

One respondent who was arrested in 2012 for being gay, stated that he would have preferred that his mother, who came to the bail him out of the police station had access to counselling services to lessen the trauma she was put through:

*“There should have been counselling at the time it happened even if I was in prison but there should have been counselling to explain to my mum that this is how her child was born, if you give birth to a disabled child will you throw them in the rubbish pit? No you wouldn't throw them away but your child is not disabled its just that that is how you gave birth to him you should gather together and know that that is who your child is. This is the information that should have been given to my mum and sister because no one has ever sat down my mum and sister and explained to them and let them know that am not the only person in this situation, there are also other people like me...”*

**- Lesbian individual**

A lesbian identified woman who was trained as a psychologist had this to say about her profession's contribution to the wellbeing of LGBTI individuals and their families:

*“...well, what I think, I think we need more psychologists who are aware of LGBTI issues, that's what I think as a psychologist myself that's why I told you the whole session of going through my classes made me understand my family more and myself so much more. They should be open to helping, non-judgmental, non-biased, they should be really good, who can approach this community from a place of love so that they actually help with the healing because the healing is needed all over ....”*

**- Gay individual**

Urgent call from parents to form a support group 95% of the parents interviewed stated that they would appreciate having a space where they can meet with parents of other LGBTI persons. This space would provide an opportunity for them to learn more about LGBTI persons, share their experiences, and provide each other with support as they deal with their own internal conflicts, as well as the embarrassment and stigma that such parents may feel in having an LGBTI child in Uganda. One parent explained the merit of having a support group as follows:

*“...I would like to meet other parents who have some challenges like mine. I have many questions that only I can answer since I can't ask anyone. I have tried to ask XXXXX friends, but they don't look at things like a parent. Tell whoever sent you to make sure my son is safe and has dignity where he goes. He needs to build a house because we are embarrassed with this one.”*

**- Parent of Transgender woman**

There was also a call from LGBT individuals for creation of opportunities for children to regularly speak to their parents; in a safe and professionally curated environment:

The study showed that opportunities for individuals to speak to their parents may also be a source of information and enable the parents accept their children for who they are, as narrated below:

*“....Hmm I think maybe there should be communication between like me and my mum, maybe there should be that support maybe if someone can talk to her not like one time or what but someone should talk to her maybe like today, next week, many times because I think talking to her for the very first time and then you quit I think that won't help in anything, that won't change anything but with many times like by the time I told her, you know what mum, am a gay man, she was like, she got shocked. She didn't even know what to tell me. I remember she cried that whole night. Early in the morning she just told me you know what, you no longer will stay in this house and you should leave and I was like mum you know what this and this but she just told me you just leave. But after like two months I went back, she welcomed me maybe like as her son, you know parents are always parents but you just see her and like know she is not well as she used to be and she is not welcoming as she used to be but with time, right now when I go there she can say hi there, you are welcome have tea but there is no much attention that she gives me....”*

**- Gay individual**

It should be noted however that not all parents are dismissive and may be willing to discuss the sexuality of their children publicly in a group or otherwise. For instance, one LGBTI individual gave an example:

*“...What I know about us our African parents are not like the others, if you call a parent and you are like ok we are here to talk about your daughter it's like this and this they are going to come out sad or reject the information you are providing. They will not even think about you, they will think about their reputation, mostly the rich parents. I've talked to my dad so much about hypothetical examples of lgbt individuals when we are driving together in the car then he said you know what, if I woke up one morning and found out that one of my children is like this, I will go to the bush for two weeks and then come back with a panga and kill them, yea, that's what he told me...”*

**- Lesbian individual**

There was further suggestion to have a pool of counsellors that can provide factual and credible information about LGBTI issues in Uganda and/or Africa to parents of all economic and social backgrounds:

*“... I think if they had had people to talk to first of all with information, because even though for example my parent is highly educated, has a masters degree and has worked for sixteen years in an international organization, she still doesn't know anything about lgbt issues even though she's somebody who is that exposed so imagine other parents who are out there, who are not at the level of education or social economic status where are they finding this information because this is a person who has internet and could have googled up this stuff and yet their reaction was still not very friendly so what's happening with those who have no information at all, who are just hearing about this for the first time? I think parents having, I think during the coming out process if she had had resources especially from Africa because I did get her some books but they were mostly foreign, from America, so its like different culture you know...”*

**- Lesbian individual**

In trying to change the hearts and minds of parents, access to information about an individuals' sexuality and gender identity is very important. One respondent emphasised the importance of LGBTI visibility and in addition the need to continue sharing the stories of LGBTI lived realities in a way that is accessible to parents and the general public:

*“... Yea, I think that we need to get the stories of our lives out there, we really need to, because me I want to know how people are surviving, and that's the thing because everybody who discovers that they are queer has to start from scratch, you get, all the stories we see are of this activist did this, this activist did this, what about, ok where did you go to school? Which neighbourhood did you grow up in? how did you manage to get where you are in this country, yea? Those are stories I want to hear, so I think that those also would have been helpful for my parents to hear, yea...”*

**- Lesbian individual**

*“... Aha.. well, I want them to be sensitized, I want them to know who is a transgender woman and who is a gay person, I want them to differentiate that. I want them to see the difference between a transgender woman, a gay man, a lesbian, and an intersex, because you know they don't know, they don't have no idea. The only thing they know is to judge me, you are gay, you are what, you know. They don't have that information, they don't have it. And another support I want them to get is, I want them to know about my transitioning process, what are hormones and what do they do?...”*

**- Transgender individual**

Another LGBTI respondent, who faced torture and harassment from her parents and other family members, further recommended that the government should consider imposing legal penalties for parents/families who emotionally and physically harass their children, or that the aggrieved children themselves be guaranteed a form of legal recourse. She further stated that parents of LGBT identifying individuals should be liable under the law and should face legal penalties for withholding financial and moral support to their children and consequently denying LGBTI children the right to education and proper shelter (when they chase their children from home).

## 9.0 Conclusion and recommendations

Overall, this study found that parents of LGBTI children often struggle with understanding and coming to terms with their children's sexuality and gender identity. Furthermore, it was evident that parents often have limited access to credible information, professional advice through counselling, and a lack of support networks or support groups that they could use for peer support. The following recommendations were made to address this gap:

### **To PFLAG and other human rights organisations that would like to support LGBTI individuals, and their parents/families:**

- (i) Facilitate the establishment of support groups for parents/families of LGBTI children. These support groups should be a space for the parents/families to meet regularly, share experiences, and obtain both peer support and professional support.
- (ii) Provide regular and consistent access to credible information to parents that will facilitate greater understanding, acceptance and support of LGBTI children by their families. This information should include materials related to the lived realities of LGBTI persons and the consequences of the negative actions of their parents and families.
- (iii) Provide information and training on LGBTI rights and issues to counsellors and NGO staff who would like to offer support to LGBTI individuals but do not have sufficient information and/or skills to enable them to do this effectively.
- (iv) Develop activities that are guided by the needs of parents, families, and their LGBTI children
- (v) Provide opportunities for members of the LGBTI community to undertake professional studies that respond to the needs of the community (e.g. counselling, therapy, and psychosocial and clinical support). This will enable LGBTI individuals to provide these services to their community directly, thereby eliminating the issue of biased service providers.

### **To the Government (through Parliament):**

- (vi) Formulate policies within public health institutions that make it mandatory for service providers to provide unbiased and non-discriminatory services to LGBTI individuals, their parents, and family members. These policies should provide a grievance response mechanism for individuals that experience discrimination or verbal assault within these institutions.
- (vii) Strengthen / enhance legal protection against the abandonment of LGBTI children by their parents and create specific legal consequences for abandoning and assaulting children.

### **To counsellors and other service providers:**

- (viii) Professional clinical psychologists and psychotherapists should increase provision of non-discriminatory, non-judgmental, cost friendly, sociable, and tailored services to the LGBT community and their parents and families and create an environment where their services can be accessed safely.

### **To donors and human rights organizations that would like to support LGBTI individuals and their parents:**

- (ix) Provide funding opportunities for members of the LGBTI community to undertake professional studies that respond to the needs of the community (e.g. counselling, therapy, and psychosocial and clinical support). This will enable LGBTI individuals to provide these services to their community directly, thereby eliminating the issue of biased service providers.
- (x) Widen the existing funding models to benefit organisations, movements or groups that aim to provide services to the LGBTI community through social intervention projects whose impact can only be measured in the long term.

# Annex

## ANNEX I

### Key Definitions

**LGBTI:** An acronym that stands for lesbian, gay, bi-sexual, transgender and intersex.

**Bi-sexual:** A person who experiences sexual, romantic, physical and/or spiritual attraction to people of their own gender, as well as other genders.

**Gay Individuals:** Men who are attracted to men in a romantic, erotic and/or emotional sense. It should however be noted that not all men who engage in same gender sexual behaviour identify as gay.

**Intersex:** Person born with any of several variations in sex characteristics including chromosomes, gonads, sex hormones and genitals that are not considered to be standard for either female or male.

**Lesbian Individuals:** Women who experience sexual, romantic, physical and/or spiritual attraction to other women. It should however be noted that not all women who engage in same gender sexual behaviour identify as lesbian.

**Transgender man:** A man who was assigned female at birth (biological) and yet their gender identity is that of a man.

**Trans woman:** A woman who was assigned male at birth (biological) and yet their gender identity is that of a woman.

## ANNEX II

### Good Practices for support to parents and families of LGBTI individuals

PFLAG, which stands for “Parents, Families, and Friends of Lesbians and Gays” was founded in 1973 and is currently the US’ largest family and ally organization that unites people who are lesbian, gay, bisexual, transgender, and queer (LGBTQ) with families, friends, and allies. Based in Washington DC and with over 400 chapters and a vast grassroots network across the US, PFLAG seeks to advance equality through; Support for families, allies and people who are LGBTQ; Education for ourselves and others about the unique issues and challenges facing people who are LGBTQ; and Advocacy in our communities to change attitudes and create policies and laws that achieve full equality for people who are LGBTQ.

The idea for PFLAG was inspired by Jeanne Manford when she matched with her son, Morty, in New York’s Christopher Street Liberation Day March, in 1972 which gave courage to other parents of LGBTI children to join her. She later began a support group for such parents meeting at a Methodist church in Greenwich Village. Later, this led to the growth of similar groups across the country, which offered ‘safe havens’ and mutual support for parents with gay and lesbian children. Representatives from these groups met in Washington, DC in 1979 after the National March for Gay and Lesbian Rights and by 1980, PFLAG began to distribute information to educational institutions and communities of faith nationwide to sensitise the public on LGBTI rights. With significant growth through extensive outreach, PFLAG grew into a big network that was formally launched as a national organisation in the US in 1981. It then became actively involved in challenging anti-gay crusades and worked to end the US military’s efforts to discharge lesbians, hence challenging institutional discrimination and further received notable success in organizing chapters in rural communities.

Further impact of PFLAG chapters included promoting inclusion of LGBTI children in educational institutions. This included; helping to pass the first Safe Schools legislation in the US in Massachusetts in the 1990s. A PFLAG family was responsible for the Department of Education’s ruling that Title 9 also protected gay and lesbian students from harassment based on sexual orientation. PFLAG has also developed signature programs to support the chapter network and to raise the family and ally voice in the battle for equality. Programs like Cultivating Respect: Safe Schools for All, Straight for Equality, and the National Scholarship Program.

**The following are some good practices for service providers who work with LGBTI children, youth, and families:**

**1) Identify community and online resources for LGBTI youth and families to teach parents and caregivers how to help their LGBTI children.**

**The Family Acceptance Project (FAP)** at San Francisco State University provides critical new research that shows that families have a major impact on their LGBTI children’s health, mental health, and well-being. The Family Acceptance Project (FAP) is a community research, intervention, education, and policy initiative that started in 2002. FAP studies how family acceptance and rejection affect the health and wellbeing of lesbian, gay, bisexual, transgender and intersex youth. Results are used to (1) help diverse families diminish rejection and provide support for their LGBTI children to reduce risk to discrimination, exclusion, harassment and violence as well as to promote their well-being; (2) strengthen families and help maintain LGBTI youth in their homes through provision of counselling support and follow-ups; and (3) support prevention and care for LGBTI children and adolescents using the family related model. FAP is affiliated with San Francisco State University. The work is carried out with guidance from health and mental health providers, families, youth, and community advocates.<sup>22</sup>

**UN response** - Agencies and entities in the UN system have increasingly addressed human rights issues relating to sexual orientation, gender identity and intersex status. For instance, the World Health Organisation, International Statistical Classification of Diseases and Related Health Problems (ICD)<sup>23</sup>, 10th Revision clarified that homosexuality was neither a disorder nor a disease when it removed sexual orientation from the International Classification of Diseases.

22 Caitlin Ryan: ‘Helping Families Support Their Lesbian, Gay, Bisexual, and Transgender (LGBT/LGBTI) Children’, available at [https://nccc.georgetown.edu/documents/LGBT/LGBTI\\_Brief.pdf](https://nccc.georgetown.edu/documents/LGBT/LGBTI_Brief.pdf) accessed online on 19/ Dec/2017; Also see, Ryan, C. (2009). *Supportive families, healthy children: Helping families with lesbian, gay, bisexual and transgender children*.

23 ICD is the official classification of diseases, health conditions and related health problems of the World Health Organization (WHO). ICD-10 was endorsed by the Forty-Third World Health Assembly in May 1990 and came into use in WHO Member States as from 1994. ICD is currently under revision, through an ongoing Revision Process and the release date for ICD-11 is 2018. See, <http://www.who.int/classifications/icd/en/>

In November 2014, UNICEF published an issues paper on eliminating discrimination against children and parents based on sexual orientation and/or gender identity. [UNICEF, Current Issues No. 9. November 2014]. Therein, UNICEF considers that there are a range of measures required to create an enabling environment for eliminating discrimination against children and parents based on sexual orientation or gender identity. Chief among them is to repeal laws that entrench such discrimination and in particular those that criminalize behaviours or 'promotion' of homosexuality, or the association of LGBTI children and individuals.

A progressive example is South Africa, which in 1996, famously adopted the world's first constitution to include express protections against discrimination based on sexual orientation. In addition, South Africa was the main sponsor of the first ever resolution on human rights violations based on sexual orientation and gender identity that was passed by the UN Human Rights Council in 2011.

## **2) Parents and caregivers need access to positive family role models to help learn new ways to support and care for their LGBTI and gender-variant children.**

Generally, there is still little research on therapeutic interventions geared towards parents of LGBTI children. The Hetrick Martin Institute in the USA provides models that are supportive in building and sustaining healthy family communication. It identifies how family support can impact the lives of LGBTI youth and provides training on counselling strategies for supporting, cohesive communication among family systems. It emphasizes trust and confidentiality as key for therapeutic cooperation.

Some good practices on support to parents of LGBTI individuals in Africa can be cited in South Africa – in 2016, National Population Unit (NPU) undertook a case study on the LGBTI community to assess the activities that are run by the organisation OUT, that provides Psychosocial Support Services to the LGBTI community including HIV counselling, general lifestyle counselling as well as advice and support. OUT services especially the psychosocial support services to LGBTI youth enables them as the LGBTI youth to understand health risks; increase their Sexual Reproductive Health Rights knowledge, build self-esteem, skills and confidence and motivate them to keep to healthy behaviours; and improve their relationships with their parents, families and the community. OUT also supports family members of LGBTI teens and promoting partnerships with their parents. OUT supports parents to accept their LGBTI teens and their sexuality through workshops, online counselling etc.

In the study referred to above, participants that were surveyed said that the LGBTI youth frequently encounter numerous challenges and they feel isolated, confused, depressed, and fearful as they attempt to navigate their emerging awareness of their sexual and/or gender identity. According to the key informants surveyed, the LGBTI youth within the ages 10 to 24 years, the challenges are largely about acceptance, people are struggling with their sexuality. Due to lack of information society keeps making them feel bad about this part of their lives and that of course makes them further vulnerable to substance abuse, in terms of coping, with the pressures and discrimination. Worldwide studies have shown South Africa is incredibly homophobic. In South Africa 85% of the society still say it's not acceptable at all, whereas in Holland which is more open and liberal, already like 70/75% say it is acceptable. It's not just the issue of discrimination, it is also the issue of the norm of heterosexuality, in which everyone just assumes everyone is heterosexual and that in itself is detrimental.

Evident in the findings is that LGBTI people are a target of general violence and crime. As LGBTI people in South Africa are stigmatized for their perceived sexual and/or gender 'deviance', they are also frequently discriminated against, through criminal acts, because of their sexual orientation and/or gender identity. Further research suggests that LGBTI survivors of hate crimes showed significantly more signs of psychological distress than did LGBTI survivors of comparable non-bias-motivated crimes. These feelings can last up to or exceed five years for LGBTI victims of hate crimes, especially if the person does not receive psychological help.

Participants surveyed believed that there is a trend of an institutionalized homophobia in the communities/areas that OUT serves in Pretoria– whereby institutions such as families, schools, police and justice departments, clinics, churches, workplaces, and youth clubs discriminate against LGBTI people. The respondents to the study also said that they had been discriminated against in the fields of education and employment and denied services. Lesbians and transgender people who did not follow conventional patterns of dress and appearance and lacked family support were particularly vulnerable to abuse and discrimination.

According to the key informants, initiatives to address social and health challenges should be prioritized, more efforts should be done to mainstream service providers and other interested parties. OUT still face lots of resistance in communities against LGBTI people. Recent research by Cochran et al. also has shown that LGBTI people experience lack of integration with communities they live in, social isolation and problems of self-acceptance and/or limited access to, formal or informal mechanisms of social/psychological support. LGBTI people have greater psychiatric illness than their heterosexual counterparts and this excess illness is related to exposure to stressors, such as prejudice, discrimination and violence.

The study further recommends that the curriculum, especially in the schools, should be revised, where 'in Life Orientation' and 'human sexuality' should be introduced so that people can know that there's diversity within sexuality. This will remove huge barriers that separate people. Evident from the findings is that OUT also addresses social and health challenges through one of their programs where they collaborate with tertiary institutions and other African countries. OUT organized dialogues and invited experts from the mental health field from African countries to participate in the dialogues. Through these dialogues OUT hopes that they will influence people, how they think and that they will take it back and apply to their home countries.

The findings of the research consistently indicate that the OUT website and telephonic counselling are most important sources for SRHR information among LGBTI young people. Young LGBTI people also use the psychosocial support services offered, the OUT clinic and youth groups to source health information and track issues they are concerned about. Beneficiaries sometimes make use of the public hospitals/clinics in Pretoria, but the public hospitals/clinics in Pretoria are not LGBTI youth friendly compared to OUT. Barriers to access hospitals and the clinics may sometimes include: lack of transportation and discrimination against LGBTI persons. According to the beneficiaries, they prefer to go to OUT for their psychosocial support and SRHR services due to the confidentiality and friendliness at OUT.

The LGBTI youth surveyed said that the quality of services OUT rendered is exceptional. The staff of OUT support them with difficulties they experienced regarding relationship challenges, depression, HIV status, insecurity regarding sexual identity, anxiety, etc. OUT services and especially the psychosocial support services of OUT continue to confirm (through usage and uptake) that they are indeed responding to the needs of their clients and communities. Additionally, they have shown leadership with the high quality of and demand for their expertise in training. The organization plays a leading role in promoting the psychosocial support and SRHR services among all young LGBTI people and the services offered are inclusive of all applicable groups e.g. young persons with disabilities, illiterate people, and different language groups etc. According to the beneficiaries of the psychosocial support services provided, OUT has supported them to come to terms with their sexuality and make informed choices about their sexual and health-seeking behavior. The service enable them as the LGBTI youth to understand health risks; increase their SRHR knowledge, build self-esteem, skills and confidence and motivate them to keep to healthy behaviors; and improve their relationships with their parents, families and the community.

One of the areas of improvement according to the key informants surveyed is that there is a need for more funding for the female clientele. An ongoing challenge in OUT is marketing of all the services; i.e. not reaching enough LGBTI people. Staff capacity is sometimes a challenge. Due to that, beneficiaries felt that their preferred psychologist/ peer educator is not always available and that can be a hindrance. Beneficiaries surveyed believed that OUT must employ more staff to go out to the communities and give them psychosocial support there especially for those people who find it difficult to come to OUT. Beneficiaries recommend that OUT offers their services and support also on a Saturday.

The psychosocial support services of OUT always keep the beneficiaries' sensitive health care issues private. The imperative to guard the LGBTI youth's confidentiality extends to every staff member of OUT. According to the key informants OUT staff is very attentive that the LGBTI youth can be especially concerned about confidentiality regarding their sexual orientation or gender identity. They may be put in considerable danger by being deliberately or accidentally 'outed'. Confidentiality is very crucial for them as expressed by the following quote:

*"The positive aspects of the face to face counselling which I accessed are that you only spoke to one psychologist and he was also a soundboard for me. I had a friend that I could talk to about my problems but you cannot always burden your friend about your problems, you want to be with your friend and be happy, do good things, have a good time not complain about your problems all the time.*

*This is what happened until I decided to come here at OUT. I started sharing my problems with the psychologist. The face to face counselling was and is still exceptional for me."*

Provision of youth-friendly services is a critical part of ensuring LGBTI young people receive the care they want and need, whether it is sexual or psychosocial support and health services. Access to such services helps LGBTI people to lead healthy and successful lives. The report provides seven essential components of OUT's youth-friendly services: confidentiality, OUT staff are professional and treat the LGBTI young people with respect and dignity, OUT's comprehensive service model, OUT's aim for a diverse, well-trained staff, swift service to the LGBTI youth, free cost services, and partnerships between parents, their LGBTI children and OUT staff.

Studies have shown that adult-focused programs and workshops can greatly strengthen parents' skills, willingness, and determination to have conversations with their LGBTI teens about their sexual identity. According to the key informants there are two issues with regards to coming 'out'. First of all a LGBTI person needs to find self-acceptance. To do that, OUT supports a client through the process of accepting who they are, their sexual identity or general identity. However, a very important part of the process is that family members, especially parents, find it difficult to accept that their child is gay or lesbian and therefore OUT supports family members of LGBTI teens and promoting partnerships with their parents. OUT support the parents to accept their LGBTI teens and their sexuality through workshops, online counselling etc.

The psychosocial services of OUT have achieved a lot since their period of existence. Over the last 17 years, OUT has developed a comprehensive service delivery model. This model combines and links macro work (policy inclusion and others) with the micro work of delivering services and the building of on-going expertise. OUT's comprehensive service model included preventative work as well as the provision of care and treatment. These services were provided through the OUT clinic, psychosocial support program, barrier method program, community outreach and online interventions. This psychosocial support services proved to be a huge success in Pretoria.

## ANNEX III

### Relevant Surveys

#### PFLAG Parents' Survey

Please seek consent from interviewee as follows:

"My name is \_\_\_\_\_. I am part of a team from Chapter Four. We are conducting a survey to assess the challenges faced by parents of LGBT children. I would like to ask you some questions which will take about 15 minutes. We will not record your name and any information that you provide is confidential, but will be analyzed with information provided in the same way by others participating in this survey so that the outcome will not be attributed to you or others who take part in the survey.

Your participation is voluntary, but we hope you will participate since your views are important.

Do you have any questions?

May I begin the interview now?" (If response is "NO", go to the next Respondent)

#### Respondents' identification characteristics

N°	Questions and filters	Coding categories	Skip to
101	Sex	Male.....1 Female ..... 2 Other ..... 3	
102	Age in complete years		
103	Date of birth	DD MM YY ..... ..	
105	Level of Education	Never went to school .....1 Primary .....2 Secondary .....3 Tertiary Instiution .....4 University .....5 Others .....6	
107	Monthly income level (Ug. Shs)	Below Ug. Shs 75,000.....1 Ug. Shs 75,000-150,000.....2 Ug. Shs 150,000-250,000.....3 Ug. Shs 250,000-350,000.....4 Ug. Shs 350,000-450,000.....5 Ug. Shs 450,000+.....6	

N°	Questions and filters	Coding categories	Skip to
201	What is your view of LGBTI persons?	They are sick/not normal .....1 It is a choice.....2 They are normal.....3	
202	When did you realise that your child is an LGBTI individual?	Between 1 and 2 years .....1 Between 2 and 4 years..... 2 Over 4 years.....3	
203	How did you get the information about your child's sexuality?	From the child..... 1 From other relatives..... 2 From child's friends.....3 From the media.....4 Other (Specify) .....5	
204	How did you get the information about your child's sexuality?	Surprised/shocked .....1 Disgusted .....2 Angry .....3 Sad .....4 Other (Specify) .....5	
205	What action did you take when you realised/learnt that your child is an LGBTI individual?	Sent the child away.....1 Took the child for counselling.....2 Took the child for spiritual intervention.....3 Nothing .....4	
206	Did you seek any support for your situation? (If No, skip to 211)	Yes.....1 No.....2	

N°	Questions and filters	Coding categories	Skip to
207	If Yes, where did you go to obtain that support?	School .....1 Churches .....2 Mosque .....3 Traditional healer ..... 4 Hospital/Clinic ..... 5 Peer/Parents support group .....6 Others (Specify) .....7	
208	Where did you get information about this support?	Online..... 1 Friends ..... 2 Family .....3 Media .....4 Other .....5	
209	Where (geographical location) was this support provided?	Kampala suburb.....1 Out of Kampala.....2 Other (Specify).....3	
210	What support did you receive?		
211	If No, why did you not seek any support?		

## How would you rate the quality of the support you received?

Variable	Poor	Fair	Good	Excellent
Physical accessibility				
Cost				
Confidentiality				
Professionalism				
Success				

What are the key challenges/issues you face as a family with an LGBTI child? .....

What are the challenges/areas for support you need in order to be a better parent to your LGBTI child?

What recommendations do you have for any institution that seeks to support parents/families of LGBTI individuals?

**Parents' Key Informant Interview**

**Please seek consent from interviewee as follows:**

"My name is \_\_\_\_\_. I am part of a team from Chapter Four. We are conducting a survey to assess the challenges faced by parents of LGBT children. I would like to ask you some questions which will take about 20 minutes.

We will not record your name and any information that you provide is confidential, but will be analyzed with information provided in the same way by others participating in this survey so that the outcome will not be attributed to you or others who take part in the survey.

Your participation is voluntary, but we hope you will participate since your views are important.

**Do you have any questions?**

**May I begin the interview now?"**

- 1) What is your view/attitude towards LGBTI persons?
- 2) When did you learn/realise that your child is an LGBTI individual?
- 3) How did you obtain this information?
- 4) How did you respond to this information?
- 5) Did you have a discussion with your child after obtaining this information? YES....NO.....
- 6) If, NO, what prevented you from having a discussion with your child?
- 7) If YES, what was the nature of discussion that you held with your LGBTI child after finding out this information?
- 8) What are the key challenges/issues that your LGBTI child has to deal with?
- 9) What are the challenges/issues that you, as a parent of an LGBTI child have to deal with?
- 10) What support have you sought to address the above challenges/issues, and from whom?
- 11) If you obtained support, how would you rate the quality and/or effectiveness of the above support?
- 12) What information and/or support do you need to be able to address the above challenges?

## **LGBTI Individuals FGD**

### **Please seek consent from interviewee as follows:**

“My name is \_\_\_\_\_. I am part of a team from Chapter Four. We are conducting a survey to assess the challenges faced by parents of LGBT children. I would like to ask you some questions which will take about 20 minutes.

We will not record your name and any information that you provide is confidential, but will be analyzed with information provided in the same way by others participating in this survey so that the outcome will not be attributed to you or others who take part in the survey.

Your participation is voluntary, but we hope you will participate since your views are important.

### **Do you have any questions?**

### **May I begin the interview now?”**

- 1) How did your parents/family know that you are an LGBTI individual?
- 2) What was the response of your parents/family to this information
- 3) What challenges/ issues have you had to deal with in relation to your parents/family and your sexuality?
- 4) What support have you and/or your family received to address the above challenges?
- 5) What support have you sought to address the above challenges/issues, and from whom?
- 6) If you obtained support, how would you rate the quality and/or effectiveness of the above support?
- 7) What information and/or support do you need to be able to address the above challenges?

## **Service Providers’ Key Informant Interview**

Please seek consent from interviewee as follows:

“My name is \_\_\_\_\_. I am part of a team from Chapter Four. We are conducting a survey to assess the challenges faced by parents of LGBT children. I would like to ask you some questions which will take about 20 minutes.

We will not record your name and any information that you provide is confidential, but will be analyzed with information provided in the same way by others participating in this survey so that the outcome will not be attributed to you or others who take part in the survey.

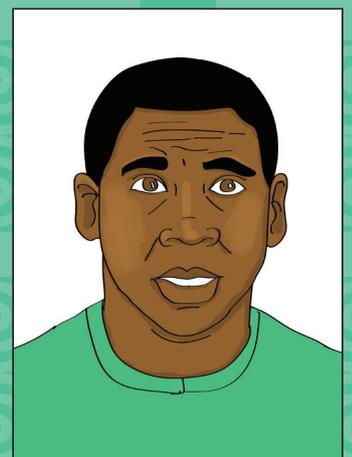
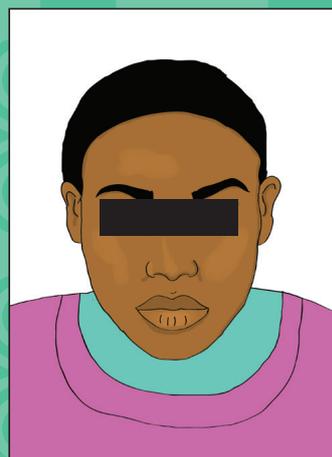
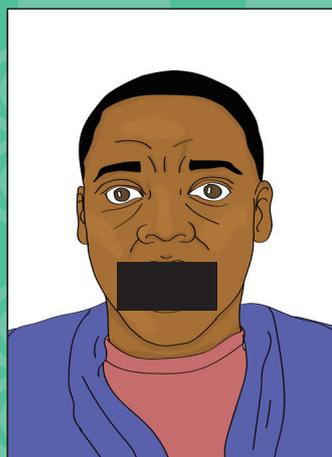
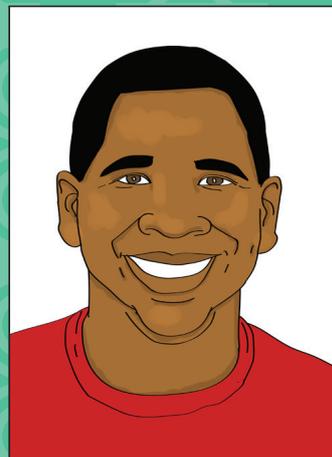
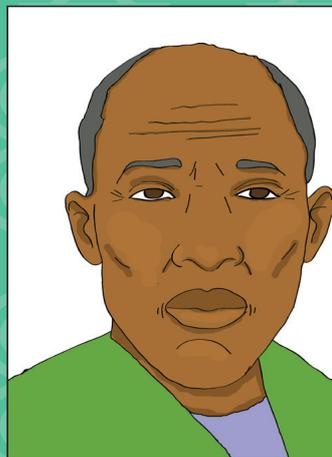
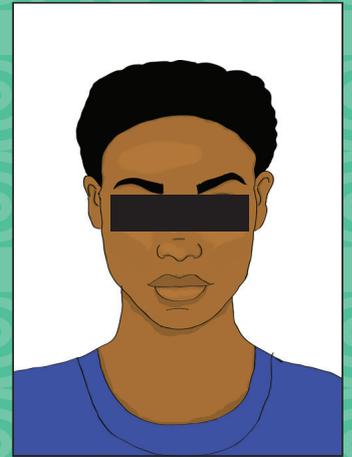
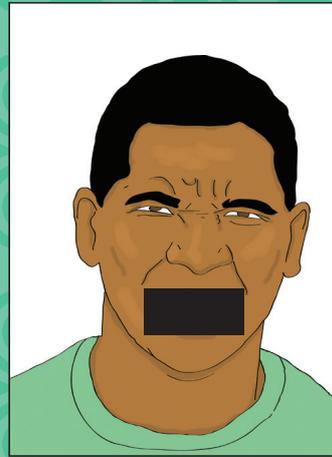
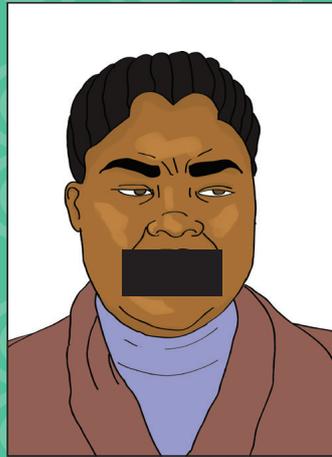
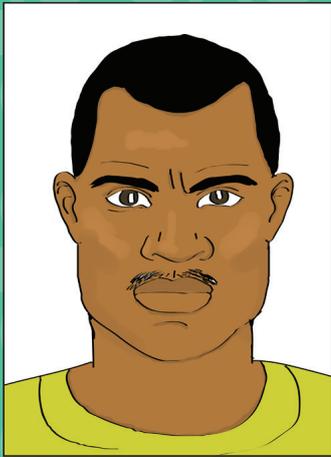
Your participation is voluntary, but we hope you will participate since your views are important.

### **Do you have any questions?**

### **May I begin the interview now?”**

- 1) What is your institutions position on providing support to LGBTI individuals and their parents/families?
- 2) What is your view/attitude towards LGBTI persons?
- 3) What are the challenges/issues that parents/relatives of LGBTI children have to deal with?
- 4) What is the nature of information and/or support that you provide to parents/families of LGBTI individuals?
- 5) Is your institution adequately equipped to provide appropriate support to parents/families of LGBTI individuals?
- 6) If Yes, what do you have to offer?
- 7) If No, what do you need in order to be able to provide appropriate support?





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