



Health of LGBT People in Nigeria

Exploring the Intersectionality of Culture, Religion and Laws

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Abstract

Multiple forms of discrimination creates a system of oppression that adversely affects the life experiences of the burden bearers. Multiple group identities exposes individuals to social oppression and exclusion at different levels. The interaction and overlapping of systemic injustice at multiple levels creates a hostile environment that becomes a psychological stressor. Marginalised social identities can seek redress under the law but for criminalised identities this is not an option. Such laws therefore create a platform that justifies and reinforces the social oppression. The Nigerian law that criminalises LGBT identity as well as ‘people who support them’ effectively targets family members, friends and colleagues of people who are suspected to be/identifies as LGBT people. These people are therefore at risk of social exclusion and regarded as criminals by association. By criminalising family members and friends this law robs LGBT people of social support and introduces multiple layers of discrimination and oppression against LGBT people in Nigeria. This is partly responsible for shaping the expression of other forms of social oppression experienced by LGBT people in Nigeria.

Key Words: LGBT, Nigeria, culture, religion, health, laws


Introduction


Discrimination and criminalising laws are barriers which have excluded lesbians, gay, bisexual and transgender (LGBT) people from being recognised as equal citizens within their own countries [1]. Social exclusion places individuals in a disadvantaged position among their peers, within families and communities thereby preventing them from participating in activities that will lead to development, progress and empowerment. It also leads to inability to access resources and opportunities in life. Socially excluded people are thereby segregated to the fringe of society and become invisible to the public and healthcare system [2].

In contemporary Nigeria, gay is a popular derogatory word commonly used as a noun to refer to people who engage in same sex sexual behaviour. Lesbians are not recognised by any word, but come under the umbrella homosexual. People who assume alternative gender identity and expression are also commonly referred to as gay/homosexual. Being identified as a gay man/ woman or homosexual can result in arrest, imprisonment and physical violence [3]. The physical violence is sometimes extended to organizations providing health related services to LGBT people [4].

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Nigeria does not recognise same sex marriages or civil union for same sex couples. Shortly after he assumed office in July 2015, the current president of Nigeria, President Muhammadu Buhari publicly





reiterated his support for the Same Sex Marriage Prohibition Law passed by his predecessor President Goodluck Jonathan in January 2014 [3]. The law states that individuals convicted for contracting same sex marriage are liable to 14 years imprisonment. People who registers, operates or participates in gay clubs/societies/organizations and their supporters are liable to 10 years of imprisonment. Thereby effectively putting an end to efforts at getting the law reversed during his tenure [5]. The country has been ranked as one of the highly intolerant African countries towards LGBT people because of this law which violates the African Charter on Human and Peoples' Rights adopted by the African heads of states and African governments in June 1981 in Nairobi, Kenya [6,7].

The law was first proposed as the Same Sex Marriage Prohibition Act by the Executive Council in 2006. Three years later during a public discussion of the act on the floor of the National Assembly, gay activists came out to speak against the proposed law which generated negative public response and increased public support for the law [8,9]. Attributing the political climate solely to this law alone will however be misleading because Nigeria's criminal code remains unchanged since the colonial era with regards to imprisonment for homosexual behaviour [10].

The constitution developed in 1999 for the federal republic of Nigeria post-independence retained various sections of the criminal and penal code inherited from the British [10,11]. Over the years, some sections have been amended but not chapter 21, section 214 which stipulates that any person having carnal knowledge of another person against the order of nature or allows a male person to have carnal knowledge of him or her against the order of nature is liable to imprisonment for 7 years [10]. The constitution in its current form is at variance with the laws in England, Wales, Scotland and Northern Ireland which decriminalized same


sex sexual behaviour in 1967,1981 and 1982 respectively [12].


Apart from the variety of laws, one of the barriers to the inclusiveness of LGBT people in Africa and Nigeria is religion, which is a central part of African culture [13]. The way of life of the average African person is mostly influenced by the teachings of one of the two dominant religions; Islam and Christianity. Both religions in Africa very strongly oppose same-sex sexual behaviour and the leaders have been quick to lend support for anti-same sex laws [14]. Religious organizations and members of their congregations in Nigeria have used the law in preaching from time to time [15,16]. The Sharia law operated by some states in the northern part of Nigeria criminalises homosexual practice with severe sentences. LGBT people living in Nigeria therefore occupy a unique position of being criminalised by three distinct laws, all the religions and the culture of the three main ethnic groups in the country.

The Same Sex Marriage Prohibition Act was hailed by religious leaders in the country. The Nigerian government in power at the time of the introduction of the law benefitted from the positive publicity generated within the country with improved rating of their performance by the populace [6,17]. This is however contrary to reactions from the international community. The law was widely condemned by Western leaders. The condemnation was subsequently followed by the threat of economic sanctions including withdrawal of funding for donor funded programs against the country if the law is implemented [18].

This sequence of events made Nigerians suspicious that there was a hidden Western agenda. This was a tactical error that resulted in greater acceptance of the law by Nigerians as shown by the opinion polls.

Subsequent opinion poll however showed a decline in general support for the law from 92% to 87% in 2015 [19]. This result has been





disputed by people who claimed the study was biased because the researchers were from LGBT organizations. In the absence of scientific studies, people have had to rely on information from key interviews and opinion polls to make decisions about LGBT related issues in Nigeria. Three years has gone since the law was passed, reports of persecution, arrest or violence against LGBT people have dwindled but the law remains in place. A state of uneasy calm exists where LGBT people are constantly on edge and critical issues pertaining to the health of LGBT people in the mainstream health sector remains largely unaddressed.

Impact on Health

The unfavourable social environment created by the current synergy between the laws, religion and culture will inevitably negatively impact on the physical health and social well-being of LGBT people living in Nigeria leading to health disparity [20]. The immediate effect of the law on utilization of HIV related services by HIV positive MSM has since been published [21]. There is dearth of evidence on the health problems of LGBT people in Nigeria, almost all the available studies was conducted among the MSM community and they revolve around HIV and STI. This has hampered generation of evidence based recommendations for tackling the social environment of LGBT people in Nigeria.

For young LGBT people the challenge is compounded by their dependent status on parental support for feeding, accommodation and schooling. To continue to enjoy this support, they are expected to conform strictly to the societal norms with regards to sexual orientation and gender identity. Having to lead a double life places a lot of stress on these young people which if not properly managed may lead to anxiety and depression. Nigeria is lagging behind in provision of sexual and reproductive health (SRH) services to young people [22]. Culture, religion and country level policies


influence provision and utilization of SRH services. The 2013 National Demographic and Health Survey (NDHS) shows that majority of adults in Nigeria oppose teaching adolescents about condoms to prevent HIV infection. Condom use at last sex was low among sexually active adolescents. Testing for HIV was a rare occurrence while self-reported symptoms of STI was high [23]. This has had an adverse effect on the health of the estimated seventy million young people but is expected to have an even bigger impact on LGBT young people.

Globally the health of LGBT people has been identified as an area demanding urgent research and intervention. LGBT health disparities resulting from lack of access and poor utilization of health services exist in literature [24]. Achieving good health and wellbeing will remain elusive as long as LGBT people are not part of the mainstream in societies. The slogan 'leaving no-one behind' emphasizes the United Nations commitment to ensuring that all people from all segments of society are entitled to good health [25]. However there is a recognition that tackling the social environment needs local input and locally designed intervention based on data from local research.

Research on the health of LGBT people in Nigeria has focused primarily on HIV and other sexually transmitted infections [21,26-30]. Even though a high burden of disease exists, as established by available data, providing health services to sexual minority groups remains a huge challenge [31,32]. In a country where HIV positive people experience stigma as a result of their HIV status it becomes a double jeopardy for an individual to be an HIV positive LGBT person.

Conclusion

To secure an enduring social environment, recognition of LGBT rights was preceded by gay rights activism in most countries. However, in Nigeria, gay activism appears not to be very



successful at changing criminalising laws at this point in time. Therefore, in trying to propose an agenda for inclusiveness of LGBT people in contemporary Nigeria, the perception of this researcher is that, a health-based approach rather than a legislative measure to repeal the law will be extremely beneficial in tackling the existing health disparity. Generating an action plan for providing SRH services based on global best practices will ensure that the rights of all individuals are protected. At the same time this shifts the conversation from religion and culture to promoting, maintaining and restoring the health and wellbeing of all people from all segments of the society.

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