

# Towards a Lesbians, Gays, Bisexuals, Transsexuals and Transgendered (LGBT) Stigma and Discrimination Index for Sri Lanka



A pilot study by:

**EQU▲L GROUND**

**Dedicated to  
Charles Nigel de Silva  
1970-2010**

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## Acknowledgements

*To Charles Nigel de Silva, our colleague who is no longer with us but whose foresight and commitment gave life to this project; we dedicate this document to him.*

The development of this project would not have been possible without the dedication of many individuals and organizations to which EQUAL GROUND is forever grateful.

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## **Abbreviations**

AIDS	Acquired Immune Deficiency Syndrome
HIV	Human Immunodeficiency Virus
LGBT	Lesbians, Gays, Bisexuals, Transgendered and Transsexuals
PLHIV	People Living with Human Immunodeficiency Virus
SO/GI	Sexual Orientation or Gender Identity
STI	Sexually Transmitted Infection
UN	United Nations

## Definition of terms

Where found in this document the following terms mean;

Bisexual:	a person who is physically, emotionally and/or spiritually attracted to both men and women
Closeted:	to be secretive about one's sexual orientation and/or gender identity
Come-out:	to disclose one's sexual orientation and/or gender identity
Gay:	a person who is physically, emotionally and/or spiritually attracted to someone of the same sex; usually used to describe men
Heterosexual:	a person who is physically, emotionally and/or spiritually attracted to someone of the opposite sex
Homophobia:	irrational fear of, aversion to, or discrimination against homosexuality or homosexuals
Lesbian:	a woman who is physically, emotionally and/or spiritually attracted to other women
LGBT community:	the umbrella term used to refer to all people who identify as lesbian, gay, bisexual, transgender or transsexual
Transgender:	a person who identifies with or expresses a gender identity that differs from the one which corresponds to the person's sex at birth
Transphobia:	irrational fear of, aversion to, or discrimination against transsexuals or transsexuality or transgendered people
Transsexual:	a person who psychologically identifies with the opposite sex and may seek to live as a member of this sex especially by undergoing surgery and hormone therapy to obtain the necessary physical appearance (as by changing the external sex organs)

***Declaration: The terms as defined above are taken from other sources. Sources are listed in the Referencing and Bibliography section.***

## **Abstract**

The Lesbians, Gays, Bisexuals, Transsexuals and Transgendered (LGBT) Stigma and Discrimination Index of Sri Lanka is a quantitative study of LGBT related stigma and discrimination faced by LGBT Sri Lankans living in Sri Lanka. The basis of the research is that LGBT people in Sri Lanka face such high levels of stigma and discrimination in their everyday lives that undermine their ability to access basic human rights.

This particular research was conducted by EQUAL GROUND and analyses data collected with the aid of a questionnaire from 119 LGBT individuals to meet the aim of the research. The research employed ethical processes to ensure confidentiality. To support data analysis; tables, graphs and charts are used to represent information from the study.

This LGBT Stigma and Discrimination Index of Sri Lanka found that LGBT people face discrimination such as physical, emotional, verbal and psychological abuse. Additionally, these forms of discrimination are faced in family, religious and social settings. LGBT people are also barred from accessing their basic human rights such as access to adequate housing, gainful employment, education and healthcare.

LGBT related stigma in Sri Lanka is also gravely internalized. People who identify as LGBT or feel that they are; live in fear, seek harmful treatment they believe will cure them from what is thought a disease, and even consider or try to take their own lives.

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# Chapter 1

## 1. Introduction

### 1.1 Background

EQUAL GROUND is a Non-Profit organization based in Colombo, Sri Lanka. The vision of the organization is to attain true equality for all sexual orientations and gender identities in Sri Lanka. As the only organization in Sri Lanka working to achieve equal social and political rights for the lesbian, gay, bisexual, transsexual and transgendered (LGBT) community, their work is primarily focused on advocacy and programmatic intervention. An extensive amount of EQUAL GROUND's work has been focused on raising awareness to enable communities where LGBT people can live and lead fulfilling lives free from stigma and discrimination the same as their heterosexual counterparts.

The work of the organization is challenged by archaic discriminatory laws, religious, political and social fundamentalism. Section 365A of the Sri Lankan Penal Code criminalizes homosexual acts between consenting adults. Religious institutions alike, deny and ridicule homosexuality and society continues to discriminate against and stigmatize sexual minorities and people who do not act within their socialized gender roles (Brown, 2011). The extent of stigma and discrimination has reportedly been extended to homophobia and transphobia directed towards LGBT people. However, the true extent of this homophobia remains unknown as there has been no study done to quantify; how discrimination and stigma is faced, who perpetrators are or how LGBT lives are affected.

This research project is therefore directed towards creating an understanding of stigma and discrimination directed toward LGBT people in Sri Lanka. It is a quantitative research within the LGBT community seeking to gain information on how individuals face stigma and discrimination within different settings. It will form the Sri Lanka Lesbians, Gays, Bisexual, Transsexual and Transgendered Stigma and Discrimination Index which will give an understanding of the extent to which LGBT related stigma is prevalent and expressed.

### 1.2 Nature of the problem

In 2011 EQUAL GROUND conducted the first qualitative research into the lives of lesbian and bisexual (LB) women. This particular research focused on violence against LB women in rural Sri Lanka. This study combined with constant reports including those which come through the EQUAL GROUND Counseling Hotline, indicate that in most instances LGBT people are not readily accepted in Sri Lanka. Furthermore, LGBT people are not left alone to lead lives free

from hate and discrimination related to sexual orientation and/or gender identity. As an organization which works within and on behalf of the LGBT community EQUAL GROUND continues to witness unfair treatment of LGBT people that goes against their basic human rights. LGBT people are not free to live in peace or with dignity in Sri Lanka where oppression extends from physical and emotional abuse to psychological torment.

There have been no developments in the LGBT community to ascertain a true picture of the extent of stigma and discrimination facing the community. The lack of development of such information continues to affect the LGBT community itself creating a myriad of consequences. There is a lack of redress for the attacks on LGBT people which stems from stigma and discrimination. EQUAL GROUND is also unable to meet some of the unmet needs of the community due to this as well.

Measuring stigma and discrimination in the LGBT community will not only give us an idea of how stigma and discrimination is perpetrated against LGBT people, such a study will also affect change. Not only will it inform the work EQUAL GROUND does with the general Sri Lankan population to eradicate stigma and discrimination, it will also support the need for policy change that will uphold the human dignity of LGBT people and protect their integrity as Sri Lankans.

### 1.3 Aim of the study

The aim of this study is to investigate how lesbians, gays, bisexuals, transgendered and transsexual people face stigma and discrimination in Sri Lanka.

### 1.4 Objectives of the study

The study is aimed at reaching the following objectives;

- 1- Quantifying stigma and discrimination facing LGBT people in Sri Lanka.
- 2- Form the basis of a tool that will measure stigma and discrimination facing LGBT Sri Lankan people over time.
- 3- Creating an understanding of the different environments in which stigma and discrimination against LGBT people is prevalent.

### 1.5 Brief description of the methodology

The methodology employed in this research can be broken down into five significant stages. Stage one of this study is the development stage. In this stage, the aims and objectives of the research as well as the proposed outcomes of the study are identified. It is also in this stage of the research that the needs of the study relating to ethical processes and resources are

identified. The research tool is identified and designed and the method of sampling and the sample size, determined.

Based on the fact that LGBT people are difficult to locate, EQUAL GROUND first locates as many people as they can themselves and then uses the snowball sampling method to find more people to take part in the study. As a pilot study the aim is to get data from at least 30 of each group that make up the LGBT community.

The second stage of the study entails identifying possible candidates for the research team, conducting training of the team to meet the needs of the study and finally selecting the research team.

Data collection is contained in stage three of the research. Stage four is strictly concerned with data capturing; quality checks will be done to select the data set that will be used in the next stage of the research. The fifth and final stage of the study is data analysis and reporting. The nature of the data is nominal and will therefore enable the use of graphs and charts to represent the information gained from the data. Analysis will also include cross-tabulation analysis among variables. Statistical analysis and explanation of information in graphs and charts shall be the basis of this pilot survey. A qualitative approach will also be used to gain greater insight into some of the information collected from the research.

### 1.6 Scope of the study

EQUAL GROUND though based in Colombo, works within a total of four provinces in Sri Lanka through satellite officers. The areas targeted for this research are namely; Colombo, Anuradhapura, Kalutara, Nuwara Eliya and Galle. The research will be focused on data collected from lesbians, gays, bisexuals, transgendered and transsexual people in the named areas.

Due to the fact that the geographical community developments of Sri Lanka can be divided into four sub groups; town, large town, plantation and rural areas, in seeking to represent LGBT people in all areas the data represented is collected from all four areas. Language and race was also considered and the study ensures that all three languages are represented; Tamil, Sinhala and English.

### 1.7 Significance of the study

There is a lack of information available about the LGBT community of Sri Lanka. Thus this study aspires to serve as a catalyst for the development of information about the Sri Lankan LGBT community. This not only has the ability to create information and extend knowledge base but also the potential to improve understanding of sexuality and gender issues as well as focused stigma and discrimination.

While this study is limited to collecting data from only four of Sri Lanka's nine provinces; the consideration in its development which ensures that major groups of people are represented from different cultures and social environment, allows for an understanding to be reached on how stigma and discrimination is experienced by LGBT Sri Lankans as a whole.

The project has the potential to inform improvement in laws and policies to protect Sri Lankan LGBT citizens. It also has the ability to inform behavior change by demonstrating how stigma and discrimination directed towards LGBT people disrupt their lives and hinders their individual progresses. It is vital in identifying the needs of the community thus informing targeted programmatic intervention seeking to advance the lives of LGBT Sri Lankans. This LGBT Stigma and Discrimination Index will also serve as an advocacy tool that will advance the work of EQUAL GROUND in the campaign for decriminalization.

### 1.8 Layout of the study

This study will continue over another four chapters. Chapter two which will follow immediately serves as the literature review for this study. This chapter will focus particularly on an extensive review of literature related to stigma and discrimination in general as well as within an LGBT framework.

In chapter three of this paper the methods used to conduct the research will be explained thoroughly in their different stages to enable a better understanding of the research processes.

Chapter four will seek to meet the aim of the study through performing statistical analysis on the data and exhibiting the results. The results will be discussed extensively from a statistical perspective.

The final chapter of this study will be chapter five. It is in this chapter that conclusions will be drawn based on the information in the study. It is also in this chapter that recommendations will be covered.

# Chapter 2

## Literature review

### 2.1. Introduction

Lesbians, gays, bisexuals, transsexuals and transgendered people in Sri Lanka are faced with countless challenges. This research is primarily concerned with the stigma and discrimination that they face. There is also an interest in access to human rights. It is hypothesized that stigma and discrimination are both correlated with access to human rights. The level of stigma and discrimination facing LGBT people in Sri Lanka is such that; they are denied access to health-care, education, protection under the law, employment and their other rights are challenged not only by individuals but also by the state.

In authenticating this research it is important to unpack ideas of stigma and discrimination and the effects both have on individuals, their development and their wellbeing. Of importance, is that an understanding of rights and access to rights be given. The range of literature in this study is therefore expected to create and understanding of stigma and discrimination and also holistically link stigma and discrimination to human rights.

### 2.2. Quantifying LGBT related stigma and discrimination

Though there are a multitude of reports daily about the stigma and discrimination LGBT people around the world face, through the media and word of mouth; no research could be found that quantifies stigma and discrimination against LGBT people in any part of the world. This restricted the ability to compare the current Sri Lankan study with any study exactly of its kind. On the other hand though, a myriad of research could be found that quantified stigma and discrimination about “out-groups” (Goffman, 1963). The most relevant research and the one that will add value to this study is the People Living with HIV (PLHIV) Stigma Index. The PLHIV Stigma Index measures stigma directed towards HIV positive people on the basis of their HIV status.

The relevance of the PLHIV Stigma Index lies within the layout of its questionnaire. The breakdown of stigma is significantly relevant to LGBT related stigma. Like PLHIV, this research hypothesizes that LGBT people face stigma in the work place, education environment, and health sector and generally in their everyday lives. Not only is the experience of stigma experienced by these two groups in similar settings, the ways in which discrimination is expressed is also familiar to both groups. Like the PLHIV Stigma Index this LGBT related stigma and discrimination index being undertaken by EQUAL GROUND share the school of thought that stigma and discrimination affects the stigmatized access to human rights.

This research thus hypothesizes that similar findings of the PLHIV Stigma Index will be part of this pilot study. Those stigmatized suffer from internalized stigma which manifests itself into fears, withdrawal and other issues.

### **2.2.1. Understanding stigma**

The extensive work on stigma by Erving Goffman is of particular interest to this study because he explored the idea of stigma and drew important attention to the ideas of how the stigmatized responds to stigma. He has made a remarkable assessment of how people who belong to a stigmatized group are affected by the stigma that is associated with the group they belong to; and has explained at length how these individuals seek not to draw attention to themselves which will cause them to be individually stigmatized.

Stigma, according to Goffman (1963), is associated with blemishes in one's character which can be seen as "weak will, domineering or un-natural passions, treacherous and rigid beliefs and dishonesty". Among the stigmatized Goffman listed homosexuals. The relevance in his definition lies within its use today. LGBT people, then covered under the umbrella term homosexuals, face state driven stigma today on the basis of homosexuality being an un-natural act against the order of nature (Penal Code 365A).

With regards to the behavior of the stigmatized Goffman offers input which is of relevance here. The notion that members of the stigmatized group fear stigma so much that they want not to be associated with the stigmatized group forms part of the basis of this research. In consideration is that LGBT people do not come out about their sexual orientation and/or gender identity for fear of being discriminated against. Goffman supports these bases formulated by the ideology that this research is being built on. He offers that the stigmatized individual employs the method of "covering" (Goffman, 1963) in fear of being "outed" and in turn stigmatized. This theory expresses that effort is made to not behave or act in ways that are associated with the stigmatized group. Not only is it expected that the participants in this research employs this method of covering, it is also expected that the reasoning behind it is as expressed by Goffman's theory.

On the issue of coming out Goffman offers that the stigmatized in an attempt to protect himself from the associated discrimination that comes with stigma he confides only in a few individuals. These individuals are usually close and may react negatively with rejection. However, the stigmatized remains known to those whom he has come out to as "one who relates honorably" (Goffman, 1963). This research will investigate the willingness of LGBT people to come out and to whom. Is Goffman's stigma theory applicable in this sense? Do LGBT people come out to those they are closer to?



### **2.2.2. Understanding discrimination**

Discrimination is “a distinction, whether intentional or not but based on grounds relating to personal characteristics of the individual or group, which has the effect of imposing burdens, obligations, or disadvantages on such individual or group not imposed upon others, or which withholds or limits access to opportunities, benefits, and advantages available to other members of society” (Supreme Court of Canada, 1989). This definition of discrimination offers a holistic approach to the discrimination faced by LGBT people in Sri Lanka. The state upholds archaic discriminatory laws that bar LGBT individuals from accessing opportunities and benefits that heterosexual Sri Lankans have access to. Society imposes burdens on LGBT people in ways such as blackmail and manipulation.

The work of psychologist Gordon Allport (1954) is relevant for this notion; offering that discrimination harms the minority group (Allport, 1954). This supports the current study in that LGBT Sri Lankans are prevented from “achieving goals, getting education or jobs” (Allport, 1954). What is of grave importance and relevance in Allport’s work is the supposed harm associated with discrimination. In the context of the current study harm is looked at not only as denying one access to services or blocking them from equal opportunities, it is also concerned with physical, sexual, emotional and psychological harm. It is also concerned with the harm that people associated with the minority group is faced with; such as LGBT people’s family members.

The study is not concerned only with whether or not discrimination harms LGBT people but also with the levels of which discrimination is prevalent in this minority group.

### **2.3. Stigma and discrimination; true denial of access to human rights**

For centuries LGBT people like other minorities such as blacks, have faced discrimination based solely on their sexual orientation and/or gender identity. This level of discrimination has significantly undermined access to and the enjoyment of human rights (Yogyakarta Principles, 2007). Of relevance to access to human rights and the enjoyment thereof is the form of discrimination that people face from, by and at state level because of sexual orientation and/or gender identity.

State sanctioned discrimination remains prevalent in Sri Lanka. Coupled with cultural, religious and social ideologies, LGBT persons remain extremely challenged, faced with discrimination. This research proposes that not only does discrimination and stigma undermine human rights, but also recommends that to uphold the true dignity and rights of LGBT people, all forms of discrimination, especially state sanctioned discrimination, must be eliminated. LGBT individuals must be protected by the state and their human rights must be granted regardless of sexual orientation and/or gender identity.

The most applicable literature that would add value to this discussion is that of the United Nations – Born Free and Equal, Sexual Orientation and Gender Identity in International Human

Rights Law. The relevance lies not only within the framework of it being an internationally recognized document, but within the framework of Sri Lanka being a member state of the United Nations (UN) and must therefore comply with binding international legal standards (Yogyakarta Principles, 2007). The document outlines what this research will prove; that sexual orientation and gender identity based discrimination prevents LGBT people's access to their human rights and rapes them of their dignity as human beings. Several articles are applicable to the Sri Lankan context.

The inability of the police to protect LGBT people as this study will prove is a violation of Article 3 under the Universal Declaration of Human rights. The present research will demonstrate that LGBT people also face discrimination from the police and often cannot access their right to the security of person as stipulated by Article 9 in the International Covenant on Civil and Political Rights in fear that they may be highly discriminated against by the state.

The Born Free and Equal UN document expresses that all individuals' rights to access healthcare, education, housing, employment and security of the person should be upheld by the state. This research will demonstrate that this is not upheld in Sri Lanka where LGBT people are; forced to leave their homes, fear to or refuse to seek medical attention, lose their jobs purely based on discrimination, blocked from education and are not provided with remedy or redress as victims of human rights violations.

The importance of understanding LGBT related stigma and discrimination and the extent to which it spans is embedded in the fact that a group of people is affected. Stigma and discrimination labels them as different and unacceptable which cause severe trauma and suffering. Understanding the threat discrimination poses on human rights symbolizes the need for change and improvement both at state level as well as within civil society.

# Chapter 3

## Methodology

### 3. Introduction

This chapter will outline the methods employed in this research project in a stage by stage process. Detailed explanation of all stages of the research process will be given.

*Stage one* was aimed primarily at developing the study. This stage thus was focused on identifying how the sample will be selected, deciding on and designing the research tool.

The aim of *stage two* was to create a research team for the project. This involved identifying and training individuals then finally, selecting the team for the research.

*Stage three* was aimed at collecting data. This stage involved locating the subjects and carrying out face-to-face interviews.

*Stage four* was aimed at data capturing. In this stage the data collected in the preceding stage first had to go through a quality check process then questionnaires that passed the quality check was captured with the use of Epi Info 7.

The final stage of the process, *stage five*, was aimed at analyzing and creating an understanding of the captured data thus creating a report for the study.

All stages of the research entailed in-depth processes which will now be outlined below.

#### 3.1. Stage 1

Stage one of the research was concerned with identifying and selecting the sample as well as identifying and developing the research tool.

##### 3.1.1. Sampling technique

One of the main challenges associated with this research is sampling. LGBT related stigma is so prevalent that LGBT people do not want to be known as LGBT people within their wider communities. They fear being discriminated against and are convinced that the less people know about their sexual orientation and/or gender identity the less chance they have of facing any form of discrimination. Furthermore, it is impossible to even talk about LGBT issues in some communities because there is a real threat of being physically attacked (EQUAL GROUND UPR report, 2008).

After careful consideration of all the influencing factors the method of sampling that was employed in this research is the **Snowball Sampling Method**. This method of sampling enabled access to subjects the researchers themselves would not have otherwise had access to. The non-random sampling selection was preceded by EQUAL GROUND's random selection of 34 known LGBT people to take part in the study. Once these 34 people were identified they were encouraged to recommend other LGBT people to take part in the research.

### 3.1.2. Sample size

The number of LGBT Sri Lankans living on the island has not been officially established. Initially EQUAL GROUND had set out to collect data from 100 LGBT individuals. After engaging with the selected sampling method, data was then collected from 135 LGBT individuals from five areas; Anuradhapura, Kalutara, Nuwara Eliya, Galle and Colombo. The basis of selecting these areas, as opposed to others, was based purely on the fact that the organization had established relations in the areas and could thus carry out the research safely.

Though 135 individuals participated in the research, quality control reduced the sample size. The quality control process, which will be outlined later, accepted only 119 subjects for the study.

The sample is representative of individuals from all three language backgrounds in Sri Lanka; Sinhala, Tamil and English. People from all four geographical locations are also included in the study; town, rural area, large town or city and plantation. In chapter four of this report the demographics of the study is outlined to demonstrate a representative sample. For these reasons the sample size is adequate.

### 3.1.3. The research tool

A questionnaire was developed for the research which guaranteed all participants anonymity. The questionnaire is divided into five sections with some sections having subsections. Majority of the questions in the questionnaire were close-ended questions with options to choose from. However, in section 3 and 5, there were a few open ended questions. Each questionnaire is given an identification number.

Section 1 of the questionnaire was dedicated to the demographics of the research; titled "**Information about you**". It contained twelve separate questions about the respondent's; age, ethnicity, religion, sexual orientation, relationship status, living arrangement, length of non-heterosexual relationship, area in which one lives, salary level, education, employment status and whether or not they are sexually active.

Section 2 is further divided into three subsections; section 2A, section 2B and section 2C. Section 2A of the questionnaire is titled; "**Your experience of stigma and discrimination from**

**other people**". This section of the research has eight separate questions with each question having three parts. In general it contains information about the settings in which respondents have been stigmatized or discriminated against in the last two years, on what basis they were excluded and by whom were they excluded. Section 2A also assesses whether individuals were aware of being gossiped about and/or experienced any form of verbal, physical, emotional or psychological abuse in the last two years, the reason(s) and by whom.

Section 2B of the questionnaire, **"Your access to work, health services and education"**, contains information about stigma and discrimination in the mentioned settings. With thirteen questions in that section, some questions having three parts, information about being excluded and the basis of exclusion from work, education and healthcare is gathered. This section also poses questions about discussions on sexual orientation, gender identity and sexual and reproductive health which participants had with different people.

Finally, Section 2C of section 2 is focused on internal stigma and fears. Titled **"Internal stigma (the way you feel about yourself) and your fears"**, this section of the questionnaire gathers information about; respondents experiences of fears and taking bias decisions. The section contained only of three main questions but a number of statements to select yes or no to.

Section 3, **"Effecting change"** addresses LGBT people's ability to get help for stigma and discrimination, their knowledge about the law as it relates to LGBT people and their support of other LGBT people. This section contains a total of nine questions, both open ended and closed.

Section 4 of the questionnaire, **"Disclosure and confidentiality"**, poses four specific questions to the respondents. It focuses on how different people in the participant's life got to know about their sexual orientation and/or gender identity, whether they face any pressure to come out, breach of confidentiality by professions and finally about the reaction of people who know about the participants sexual orientation and/or gender identity.

The final section of the questionnaire, Section 5, contains only two open ended questions to the respondents. Titled **"Problems and challenges"**, this section of the questionnaire asks the respondents to express in their own words what the main challenges and problems associated with them being LGBT and being in a committed relationship are.

In the development of the questionnaire, a pilot questionnaire was first completed by 15 LGBT persons. Based on their feed-back the questionnaire was then improved and finalized. Once this was done, the questionnaire was made available in all three official languages; Sinhala, Tamil and English. Prior to implementation the research team facilitated a consultation with community members and other organizations working on any form of LGBT related issues to approve the questionnaire.

### **3.1.3.1. Problems with the research tool**

One of the main challenges encountered with developing the questionnaire was that there was no LGBT related study to follow. The only available study that could be used as guidance was the People Living with HIV (PLHIV) Stigma Index. The problem with the PLHIV Stigma Index was the structuring of the questionnaire in such a way that it is highly HIV focused. However, with careful considerations the research team was able to develop a questionnaire that would gather information to meet the aims and objectives of this study.

Once the questionnaire was developed in English it needed to be translated into Tamil and Sinhala. This also was a challenging process as neither of the two languages provided words of expressions for important terminologies.

### **3.2. Stage 2: The research team**

The research team consisted of two head researchers and 10 field officers or enumerators. The head researchers were responsible for developing the study in its entirety which included developing the tool, the methodology, the report and drive the research process. The enumerators were focused on data collection and working directly with participants in the study which also included mini counseling sessions and referrals.

The nature of the study required that enumerators were; from the LGBT community, had worked extensively in the LGBT community, had some form of counseling capabilities and were in close proximity to the location of participants. These criteria meant that enumerators during interviews would be able to relate to LGBT respondents in terms of sexual orientation and gender identity issues. Furthermore, they enabled some form of compensation for participants who would have to recall painful events. Close proximity to subjects was implemented to reduce cost but to also allow for further support from enumerators in the event that painful issues resurfaced that individuals would need assistance with.

All enumerators went through the two-day training process. The training contained concepts of sexual orientation and gender identity. They were trained about counseling issues that may arise from interviews. The guidelines of the research were outlined in this workshop and the survey policies and procedures were explained to the team. The training session also involved the team in role plays associated with the study and collecting the needed data.

### **3.2.1. Problems selecting the research team**

The key challenge in this process was finding enumerators who met all the requirements of the study. Though some enumerators had worked extensively in the LGBT community, they themselves did not identify as LGBT individuals. Though this proved to be a challenge based on requirements; it did not affect data collection as respondents were familiar with these enumerators and their work and were able to identify with them on this basis.

### **3.2.2. Confidentiality**

The project policies and guidelines facilitated a high level of confidentiality to protect the participants. The interviewers were all briefed on this at the two-day workshop. Confidentiality issues outlined in the process emphasized that the information collected from individuals was not only highly sensitive but also confidential. Enumerators had to agree that they would maintain confidentiality as well as respondents' anonymity to be part of the research team.

At the interview both the interviewee and the enumerator signed a confidentiality agreement.

## **3.3. Stage 3: Data collection**

Data for this pilot survey was collected from a total of 135 LGBT individuals from the fourth quarter of 2011 to January 2012.

### **3.3.1. Method**

The data was collected in face to face interviews solely between the participant and the enumerator. The process involved the enumerator first informing the respondent about the scope and nature of the study. Once this was done the interviewee had to then establish interest to take part in the study. When genuine participation was established confidentiality issues were addressed. The participant read/was read the consent form which both the enumerator and the interviewee signed. The form covered both issues of confidentiality and consent.

The questionnaire was then administered to the interviewee. To ensure transparency, enumerators had to sit side by side with the respondent so that they could see the responses the enumerator was filling in. Where necessary, enumerators had to provide counseling during sessions. For extreme cases referrals were made to specialists. Some cases required other forms of referrals for which assistance was provided.

### **3.3.2. Problems with data capturing**

In general, the problem with face to face study is that it enables a bias such that interviewees do not feel comfortable enough to be honest about the issues being discussed. While this was true in some cases mainly relating to demographics such as salary level, sexual orientation and other aspects; it was not the case for most. Some respondents were not open about some issues in the demographic section of the questionnaire, thus, some questionnaires were rejected. This will be further addressed in the data capturing section.

Most questions were close-ended questions; however, interviewees spoke at length in responding to close ended questions. This made the data collection process highly time consuming.

## **3.4. Stage 4**

This stage of the research was mainly concerned with data capturing. However, a quality control test preceded the data capturing process to ensure data quality.

### **3.4.1. Quality control**

To ensure that the data did not distort the results or create any form of bias a very stringent quality control process was followed. This quality control process was undertaken by three independent evaluators and ensured that only a set of qualified questionnaires entered the sample for analysis.

Once all questionnaires were collected from individual enumerators they were given in for quality control. This process was carried out with the guidelines set out by the research team. The quality control guidelines are attached in the appendices (appendix A).

The stringent quality control process rejected a total of 16 questionnaires and 119 questionnaires entered the study; therefore  $n = 119$ .

### **3.4.2. Data capturing**

The quality control process ensured data integrity and manual accuracy. To maintain this Epi Info 7 was selected as the tool for data collection. The program was used in conjunction with Microsoft Office Excel 2010.

Epi Info 7 enabled double entry which was used to locate inconsistencies in the data. The questionnaire was designed in Epi Info 7 and two identical but separate forms were stored for data entry. Initially two data capturing personnel entered the data from all 119 questionnaires into their individual Epi Info database. Then the first test for accuracy was performed.



The two data base files were merged and in accuracies were found in both files thus the data set was rejected. The data was reentered until the captured data was relieved of inaccuracies. However, trusting that both data capturers finally got it right was not enough. The data was then exported to Microsoft Office Excel 2010 and prepared for final checking.

Three independent searchers were brought in to check for inaccuracies in the system data. This meant that they had to confirm that what was in the Epi Info 7 database truly reflected the data in the individual questionnaires. Hence, they checked the data transported to Office Excel against the individual hardcopies. All three searchers reported that the database accurately reflected the hardcopies of the questionnaires and the data was accepted for analysis.

#### **3.4.2.1. Advantages in data capturing**

Redesigning the questionnaire enabled quality data in the sense that it could reject enumerator's mistakes. In a number of sections of the questionnaire there were skip instructions to the interviewee, noting human mistakes, some interviewees covered sections they were not supposed to. However, in recreating the questionnaire in Epi Info 7, check-codes were written into the program to skip questions that were not be answered providing certain answers were given for previous questions.

The program allowed a true reflection of the questionnaire hard copies through double entry as explained above. This along with the other procedures involved in the data capturing process, eliminated human mistakes in data capturing and thus improved data analysis by simple means of accuracy.

### **3.5. Stage 5: Data analysis**

Once stages 1-4 above were completed the next stage in the methodology was data analysis. The nature of the data is quantitative and categorical with nominal values. A limited amount of qualitative data is also contained in this study. The qualitative data is expressed only in narrative form to give insight on the issues of stigma and discrimination contained in this study. With regards to the nominal data a quantitative statistical approach is used to analyze the data.

Frequency analysis is the main method used. Frequencies are explained with the use of graphs and charts coupled with narratives. Crosstabulation analysis is also employed. This form of analysis enables the comparison of two data sets in the study which helps to draw conclusions of statistical independence of variables.

### **3.5.1. Limitations of data analysis**

While the study provides a wealth of data to inform the findings of this research, the nature of the data is such that it limits statistical analysis. Crosstabulation analysis is performed but only to inform association of variables rather than establish the type relationship between those variables. In this study Crosstabulation was limited because data did not meet all conditions for a Chi-Square test which would inform the type relationship between two or more variables; whether variables were significantly dependent or independent of each other.

This chapter has presented the rigorous research methodology employed in this LGBT related stigma and discrimination Index.

# Chapter 4

## 4. Results and discussion

This section of the study will create an analysis of the data collected from 119 lesbians, gays, bisexuals, transsexuals and transgendered individuals in Sri Lanka. The questionnaire posed to respondents is analyzed in its entirety to meet the aim of the study. Overall, this chapter is aimed at displaying the findings of the survey as well as analyzing its findings to create an understanding of stigma and discrimination facing LGBT people in Sri Lanka.

Analysis is provided in accordance with the layout of the questionnaire to enable clarity. What follows immediately are some points to note while going through the report presented.

### 4.1. Interpreting the information contained in this research

While 119 questionnaires passed the quality control test employed in this project it is important to take note of the following:

- Data accuracy: Concrete measures explained in the methodology of this research have been taken to ensure that the data analyzed reflects the data contained in the questionnaires used in this study.
- Not all questions were answered by all interviewees, therefore,
- totals will differ while analyzing different questions from the questionnaire.
- The word “Missing” where found in the results accounts for the number of questionnaires where the information was not available.

## 4.2. Demographic data analysis

This section of the report is an overview of the characteristics of the sample in this LGBT-related Stigma Index. It provides an overview of the 119 interviewees' demographic profiles. In giving a report on the data contained in Section 1 of the questionnaire, it is primarily aimed at demonstrating the efforts made by the sampling strategy to ensure that a good representation of the LGBT population is afforded.

### Age of respondents

Table 1: Age distribution of interviewees

AGE	Frequency	Percent
Adult aged 18-24 years	22	18.49%
Adult aged 25-29 years	34	28.57%
Adult aged 30-39 years	34	28.57%
Adult aged 40-49 years	19	15.97%
Adults aged 50+ years	10	8.40%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

Due to the fact that the Sri Lankan law which criminalizes homosexual acts between consenting adults and pedophilia are under the same act (Section 365A: Penal Code of the Democratic Socialist Republic of Sri Lanka), extreme care was taken to ensure that only adults of consenting age were covered in this research. Hence, only adults above 18 years were interviewed.

### Ethnicity

Table 2: Distribution of respondent's ethnicity

ETHNICITY	Frequency	Percent
Burgher/Eurasian	4	3.36%
Malay	1	0.84%
Mixed/other	10	8.40%
Moor	17	14.29%
Sinhalese	79	66.39%
Tamil	8	6.72%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

The 2001 Census Provisional data of Sri Lanka reports that 73.8% of the population is Sinhalese, Moors account for 7.2% of the population, Tamils for 8.5% and others which included specified and un-specified accounts for the remaining 10.5%.

The data above appears unbiased with 66.39% of the sample size being Sinhalese, 6.72% Tamils and a further 12.6% accounting for other (Burgher/Eurasian, Malay and unspecified other). With 14.29% of the sample size being Moor, which almost doubles the national statistic, the figure may cause concern. However, it must be taken into account that 16 other questionnaires did not pass the quality control tests employed which would otherwise balance the proportions of ethnic groups.

### **Associated religion**

Table 3: Distribution of respondent's religion

<b>RELIGION</b>	<b>Frequency</b>	<b>Percent</b>
Buddhism	65	54.62%
Christianity	24	20.17%
Hinduism	7	5.88%
Islam	18	15.13%
None of the above	4	3.36%
Other	1	0.84%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

There are four basic religious groups on the island; Buddhists, Christians, Muslims and Hindus. The 2001 Census Provisional Data for Sri Lanka reported that 69.1% of the population identifies as Buddhist, 7.6% as Muslim, 7.1% as Hindu, 6.2% as Christians and the further 10% of the population did not specify.

In the presented information there is great representation from all religious groups. Furthermore, the data can primarily be viewed as unbiased. The fact that the numbers of Christians and Muslims in the group are high is a result of the fact that; Malays and Moors make up the Muslim population primarily and Sinhalese, Burghers and Tamils can be of the Christian faith.

## Education

Table 4: Education background of the respondents

EDUCATION	Frequency	Percent
No formal education	2	1.68%
Primary school	15	12.61%
Secondary School	49	41.18%
Technical college or university	53	44.54%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

The table above demonstrates that individuals in the research were from different education backgrounds. Though education is free even at the tertiary level for Sri Lankans, it is not expected that every Sri Lankan will pursue education at the tertiary level. It is expected that individuals will drop out of school for different reasons. However, it is expected that rate of drop out will be less than the rate of completion (people who complete schooling) which is demonstrated by the information in the table.

## Employment

Table 5: Distribution of respondent's employment status

EMPLOYMENT STATUS	Frequency	Percent
In full-time employment as an employee	66	55.46%
In part-time employment as an employee	13	10.92%
Intern	3	2.52%
Self-employed full-time	14	11.76%
Self-employed part-time or casual worker	13	10.92%
Unemployed and not working at all	9	7.56%
Unpaid volunteer	1	0.84%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

It is expected that a country can sustain itself by providing full employment to its citizens who will aid in economic development. Therefore, it is also expected that the study will show more people being fully employed.

The data establishes that people from different economic background were considered as part of the study.

## Residential location

Table 6: Distribution of the different areas in which respondents live

AREA IN WHICH YOU LIVE	Frequency	Percent
Large town/City	77	64.71%
Plantation	3	2.52%
Rural area/village	20	16.81%
Town	19	15.97%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

Though respondents were from only 5 districts, there were efforts made to include people from different residential locations. These attempts were met. The large number of people from the large town or city area is expected. The 2001 Census Provisional data supports the idea that more people are moving away from the plantations and rural areas to settle in towns and cities across the island.

## Income

Table 7: Respondent's income in the last 12 months

INCOME IN THE LAST 12 MONTHS	Frequency	Percent
Below LKR 10,000	16	13.45%
LKR 10,000 to 25,000	30	25.21%
LKR 25,000 to 40,000	24	20.17%
Over LKR 40,000	49	41.18%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

The data above demonstrates that individuals from different financial backgrounds, stipulated by this study, were part of the survey.

## Sexual orientation

Table 8: Respondent's sexual orientation

<b>SEXUAL ORIENTATION</b>	<b>Frequency</b>	<b>Percent</b>
Bisexual female	8	6.72%
Bisexual Male	22	18.49%
Gay	30	25.21%
Lesbian	34	28.57%
Transgender	22	18.49%
Transsexual	3	2.52%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

Initially the data was to contain 30 individuals from four different groups; bisexuals (male and female), gays, lesbians and Trans (transgendered and transsexual). During data collection there were flaws which were detected early creating a need for added questionnaires to be completed. A total of 135 questionnaires were completed, however, only 119 passed the stringent quality control process. Unfortunately, it was not possible to have an equal number of questionnaires to represent each group

The data however remains almost evenly distributed with 28.57% of the respondents identifying as lesbians, 25.21% as gays, 25.21% as bisexuals and the remaining 21.01% identifying as transgendered people.

## Relationship status

Table 9: Respondents' relationship status

<b>RELATIONSHIP STATUS</b>	<b>Frequency</b>	<b>Percent</b>
Committed relationship	48	40.34%
Heterosexual relationship/marriage	4	3.36%
Heterosexual relationship/marriage and another same sex relationship	11	9.24%
Open relationship	17	14.29%
Single	39	32.77%
<b>Total</b>	<b>119</b>	<b>100.00%</b>

This data simply shows that there was full representation from different relationship backgrounds.



## Living status

Table 10: Living status of individuals who reported to be in a non-heterosexual relationship

NON-HETEROSEXUAL RELATIONSHIP LIVING STATUS	Frequency	Percent
You and your partner are living together	23	30.26%
You and your partner are not living together	53	69.74%
<b>Total</b>	<b>76</b>	<b>100.00%</b>

Lesbians, gays, bisexuals and trans people do not have the freedom to reside with their same sex partners as they would like. The gap between those living together and those living apart should be taken into the context of Sri Lanka where due to prevailing social, cultural and economic constraints most people remain in the family household until they are married to a person of the opposite sex. It must also be stressed that due to security issues relating to stereotypes, stigma and discrimination, all of which this report will focus on, most LGBT people, chose not to live with their same sex partners.

## Length of same sex relationships

Table 11: Distribution of the length of time respondents have been involved with their same sex partners

LENGTH OF NON-HETEROSEXUAL RELATIONSHIP	Frequency	Percent
0-11months	13	17.11%
10-14years	6	7.89%
1-4years	33	43.42%
15+years	9	11.84%
5-9years	15	19.74%
<b>Total</b>	<b>76</b>	<b>100.00%</b>

This tabulated report demonstrates that while this study included people who were single at the time the data was captured, it also considered people in sexual relationships.

The above data demonstrates that individuals from different groups and backgrounds were part of this study. While there appears to be majority in some groups it must be taken into context. Hence, the fact that some groups are larger than others does not mean there is a bias as it also represents the state of the Sri Lankan population in general where some groups have far more members than others.

### **4.3. Personal experience of stigma and discrimination**

This section of the study will focus on respondent's experience of stigma and discrimination. It focuses on both internalized and external stigma and discrimination that individuals themselves have been victims of.

#### **4.3.1. Experience of stigma and discrimination from other people**

Section 2A of the questionnaire was aimed at examining how lesbians, gays, bisexuals, transsexual and transgendered people experience stigma and discrimination in various settings/environments. This section considered exclusion from; social gatherings, religious activities and/or places, and family activities.

Furthermore, section 2A assesses how stigma and discrimination is faced by LGBT people in these different environments/settings. Interviewees provided information about; being gossiped about, verbal abuse, physical abuse, emotional and psychological abuse, as well as being victims of blackmail and manipulation.

Data is presented in the forms of graphs and tables. Crosstabulation analysis is employed to assess relationships between variables.

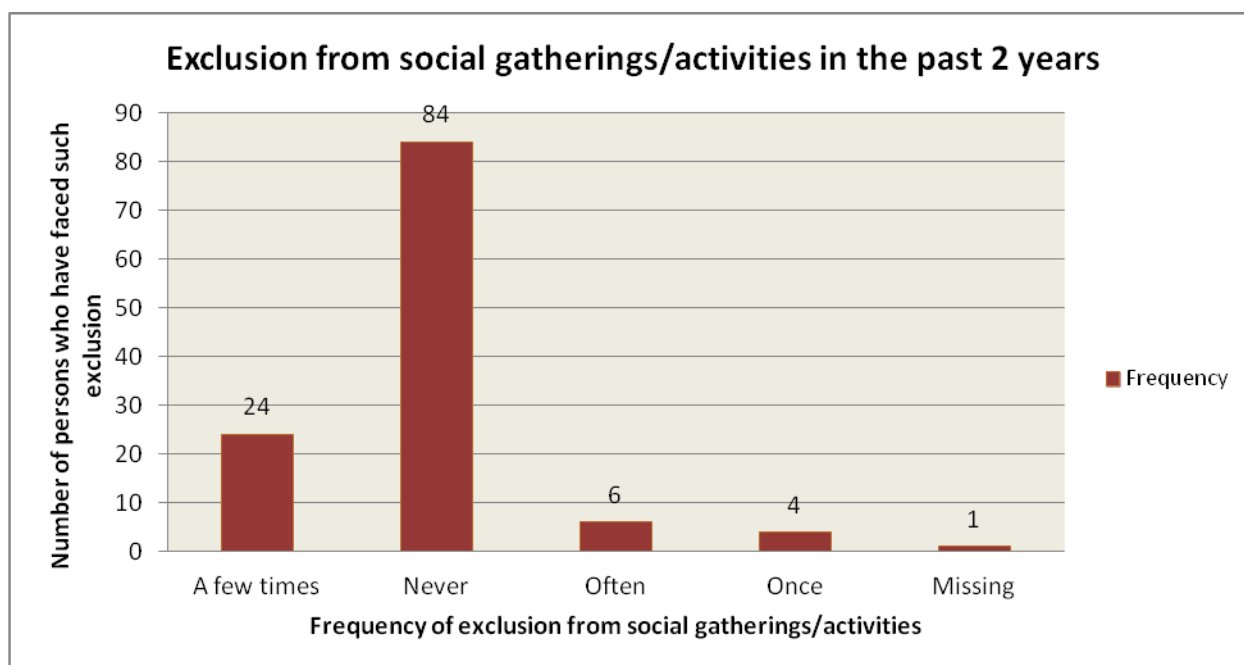
Reading the tables in this section;

- 1- "Sexual" is exclusion based on sexual orientation,
- 2- "Gender" is on the basis of gender identity or expression,
- 3- "Both" is exclusion on the basis of both gender identity and sexual orientation,
- 4- "Other" represents exclusion for other reasons,
- 5- "All" represents exclusion based on all of the above. That is exclusion faced because of sexual orientation, gender identity and other reasons, and
- 6- "Unsure" accounts for not sure why

Note that variables are included only where respondents have selected them. Hence, some tables will have only a few of the above variables included while others will have all.

## Exclusion from social gatherings/activities

Figure 1: Exclusion from social gatherings or activities on the basis of gender identity/expression and sexual orientation in the past two years



Respondents were asked how often they had been excluded from social gatherings or activities such as weddings, funerals, parties, and clubs in the past 24 months. Respondents from all areas (rural areas, towns etc) had experienced this form of exclusion. While most respondents hadn't faced such exclusion, 28.57% were excluded at least once and 25.21% experienced this more than once. One interviewee failed to answer the question.

Table 12: Crosstabulation of exclusion from social activities or gatherings against the reasons for exclusion

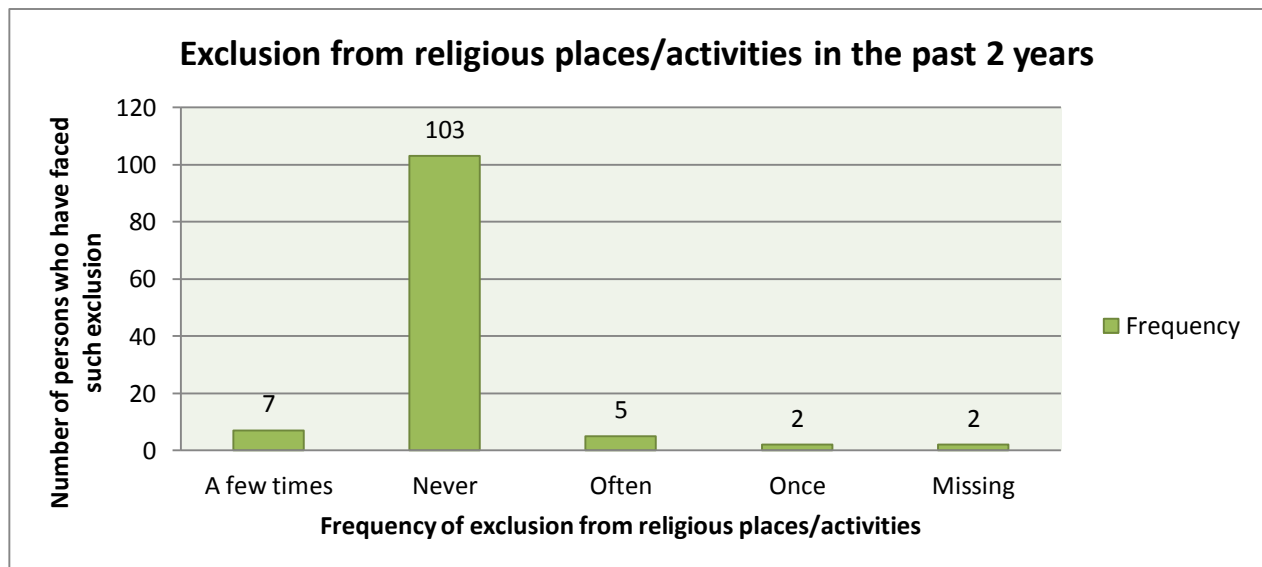
Frequency of exclusion	Reason for exclusion					Total
	SEXUAL	GENDER	BOTH	OTHER	ALL	
A few times	6	6	10	2	0	24
Often	2	1	3	0	0	6
Once	1	1	1	0	1	4
<b>TOTAL</b>	<b>9</b>	<b>8</b>	<b>14</b>	<b>2</b>	<b>1</b>	<b>34</b>

Of the 34 people who have been excluded from social gatherings 41.18% have faced this exclusion based on both their sexual orientation and their gender identity or expression. Notably, 26.47% of the respondents face this exclusion due to their sexual orientation and 23.53% due to their gender identity or expression. A further 5.88% of the 34 respondents face this exclusion for reasons not related to their sexual orientation or gender identity, while the remaining 2.94% face this exclusion for reasons related to their sexual orientation, gender identity/expression among other reasons.

Response to this question has shown that 26.89% of the total number of respondents had their social standings weakened in the past two years due primarily to bias on the basis of their sexual orientation and/or gender identity/expression. The impact of this is that it fosters isolation which may in return lead to LGBT people withdrawing from social activities/gatherings in the future. Individuals then miss out on gaining from factors that would otherwise aid in their personal development.

### Exclusion from religious places or activities

Figure 2: Frequency of exclusion from religious activities or religious places in the last two years on the basis of sexual orientations and/or gender identity/expression



Of the 119 respondents two did not respond to the question directed at assessing whether they had faced any form of exclusion from religious places or activities in the past 24 months. Over 100 persons stated that they had not been victims of such stigma or discrimination in the past 24 months accounting for 86.55% of the respondents. The remaining 11.76% of the interviewees have faced this form of exclusion at least once and 10.08% have more than once.

With 4.2% of the respondents facing such exclusion often in the past 24 months there is a cause for concern.

While there is a large number of respondents who have not faced any form of religious exclusion it must not be taken for granted that this is a prime issue in the lives of Sri Lankan LGBT people. It must be taken into account that people do not live openly about their sexual orientation or gender identities/expressions due to stigma associated and directed from religion in the first place. Later in the report it will be realized; that a vast majority of the respondents have not disclosed their sexual orientation and/or gender identity/expression in the religious setting.

Religion plays an important role in the lives of individuals. It creates a sense of belonging and thus excluding individuals from such activities can hinder that need to belong.

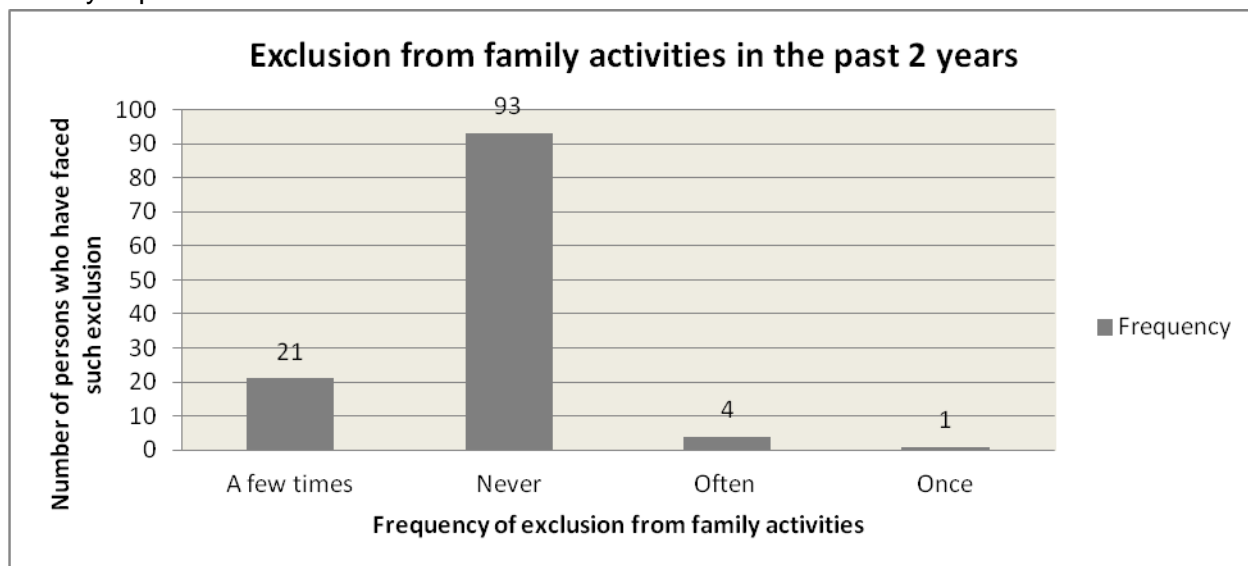
Table 13: Crosstabulation of exclusion from religious activities or places against the reasons for such exclusion

Frequency of exclusion	Reasons for exclusion			Total
	SEXUAL	GENDER	BOTH	
A few times	2	2	3	7
Often	2	2	1	5
Once	0	1	1	2
<b>TOTAL</b>	<b>4</b>	<b>5</b>	<b>5</b>	<b>14</b>

With a total of 14 persons having faced exclusion from religious activities, 35.71% faced this form of exclusion based purely on gender identity/expression. Another 28.57% were excluded from religious activities/places and the remaining 35.71% excluded based on both gender identity or expression and sexual orientation. This data reveals that religious exclusion is based purely on the basis of stigma associated with gender identity and expression. This form of exclusion dehumanizes individuals and sets them apart as unworthy of the grace usually associated with religious association.

## Exclusion from family activities

Figure 3: Exclusion from family activities on the basis of sexual orientation and/or gender identity/expression



The vast majority of respondents have never faced exclusion from family activities. However, 21.85% have been excluded at least once and 3.36% face this exclusion often. With 17.65% of the respondents having faced exclusion from activities a few times in the last 24 months there is a cause for concern in how stigma and discrimination is expressed in the family unit.

Table 14: Crosstabulation of exclusion from family activities against the reasons for exclusion

Frequency of exclusion	Reasons for exclusion			Total
	SEXUAL	GENDER	BOTH	
A few times	3	12	6	21
Often	0	2	2	4
Once	0	1	0	1
<b>TOTAL</b>	<b>3</b>	<b>15</b>	<b>8</b>	<b>26</b>

Of the 26 individuals who have faced exclusion from family activities in the past two years the majority 57.69% have been excluded on the basis of gender identity or expression. Exclusion from family activities on the basis of sexual orientation is another 11.54% and the remaining 30.77% face this exclusion based on both sexual orientation and gender identity or expression.

The fact that individuals are excluded from basic family activities such as cooking, eating together, sleeping in the same room among other things is of grave concern. Such

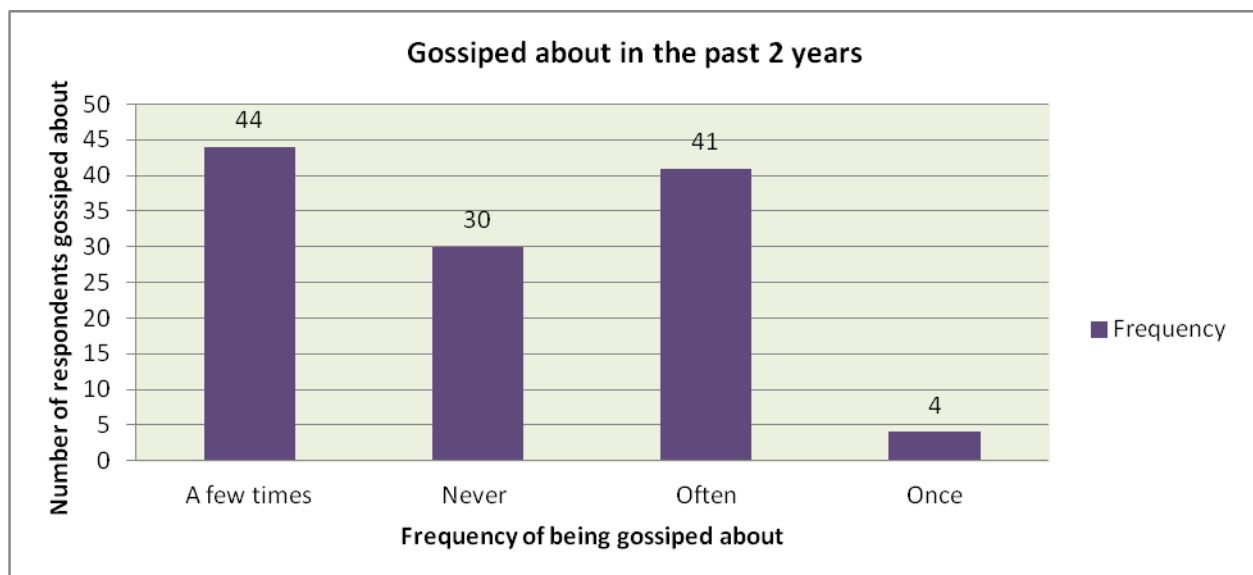
marginalization of individuals creates a break down in the family unit and further questions individuals' self-worth. The implications also may include individuals isolating themselves from the family unit having to exist without the safety and sense of belonging that family creates.

#### 4.3.1.1. Expression of stigma and discrimination

As stigma and discrimination takes place in different environments it also takes different forms. Respondents were asked specific questions in section 2A of the questionnaire about the ways in which they have experienced stigma and discrimination in the past 24 months.

##### Gossip

Figure 4: Respondents' experience of being gossiped about in the past 24 months



Majority of the respondents reported that they were aware of being gossiped about. Only 25.21% of the respondents reported that they are not aware of ever being gossiped about in the past two years. With 74.79% of the respondents having reported being aware of being gossiped about in the past 24 months, 46.07% of them are faced with this challenge over and over again.

Table 15: Crosstabulation of the frequency of being gossiped about against the reasons

Frequency of gossip	Reasons for gossip						Total
	SEXUAL	GENDER	BOTH	OTHER	ALL	UNSURE	
<b>A few times</b>	27	4	6	3	2	2	<b>44</b>
<b>Often</b>	21	2	14	1	2	1	<b>41</b>
<b>Once</b>	1	1	1	1	0	0	<b>4</b>
<b>TOTAL</b>	<b>49</b>	<b>7</b>	<b>21</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>89</b>

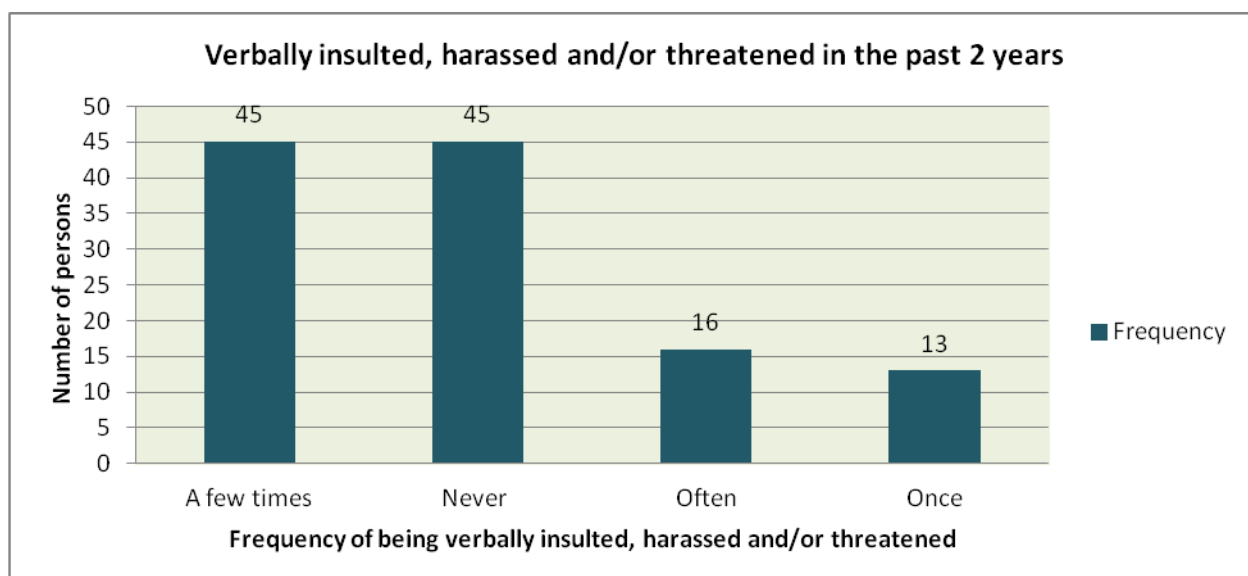
Of the 89 interviewees who have reported that they have been aware of being gossiped about, the vast majority have stated that this gossip has been purely about their sexual orientation. This accounts for 55.06% of those who are faced with this problem. Another 23.6% of these respondents have been gossiped about in regards of both their sexual orientation and gender identity/expression, while 7.87% has been due to their gender identity or expression. Some individuals were not sure of the subject behind the gossip about them though they were aware of being gossiped about. Some 5.62% of respondents stated that they were being gossiped about for reasons not attached to their sexual orientation or gender identity.

Gossip demonstrates disapproval and has the ability to alienate individuals. Of concern is the fact that 4.5% of the respondents have reported being aware of being gossiped about for reasons attached to their sexual orientation and gender identity/expression coupled with other reasons. In such cases individuals are made to feel that they do not fit in with the community to which they belong. Their sense of being part of a group or community is weakened.



## Verbal insults, harassment and/or threat

Figure 5: Interviewees' responses to being verbally insulted, harassed and/or threatened in the last two years



Question 5a of Section 2A of the questionnaire asked respondents to state whether they had been victims of verbal abuse, harassment and/or threats in the past 24 months. While 62.18% of the respondents had been victimized in this regard, 37.82% had not fallen victims to such abuse, harassment and/or threats. The same number of persons who had not been victims in the past 24 months had been victims a few times. Another 13.45% had been victims of verbal abuse, harassment and/or threats in the past 24 months.

Reoccurrence of verbal abuse indicates lack of respect and regard and can increase fear.

Table 16: Crosstabulation of the frequency of which respondents experienced verbal insults, harassment and/or threats against the reasons

Frequency	Reasons for verbal insults, harassment and/or threats					Total
	SEXUAL	GENDER	BOTH	OTHER	ALL	
A few times	4	26	14	1	0	45
Often	1	9	5	0	1	16
Once	0	7	4	0	1	13
TOTAL	5	42	23	1	2	74

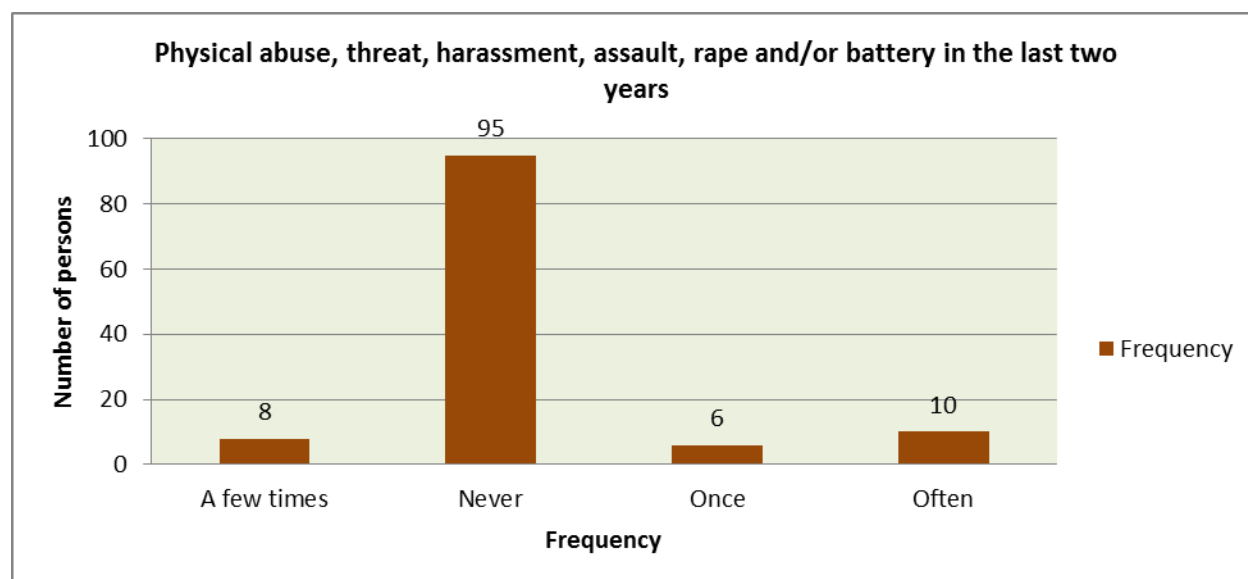
A total of 74 respondents reported being victims of verbal insults, harassment and/or threats. For most of these respondents the reason for such victimization was related to their sexual

orientation, gender identity/expression or both. Individuals who have faced this kind of stigma and discrimination based purely on their sexual orientation are 6.76%. Those who have been victims of such abuse based entirely on their gender identity 56.76%. Of the 74 respondents who have faced verbal insults, harassment or threats, 31.08% have, based on their sexual orientation and gender identity or expression.

Evidence that 2.7% of individuals have faced verbal insults, harassment and/or threats for reasons associated with their sexual orientation and gender identity or expression alongside other reasons is indicative of intense discrimination. Further evidence that one individual faces such level of discrimination quite often should not be overlooked. This is evidence that the level of discrimination can be heightened in some instances and can therefore affect individuals differently.

### Physically abused, harassed, threatened, assaulted, rape or battery

Figure 6: Interviewees' responses to being physically abused, harassed, threatened, assaulted, and/or being victims of rape or battery in the last two years



The study revealed that stigma and discrimination against individuals based on sexual orientation and/or gender identity/expression goes beyond gossip and mere insult. While 63.03% of the respondents reported not having been victims of physical abuse, threat, assault, harassment, rape or battery; 36.97% reported that they have been victims in the past 24 months. Majority of those who have been victims of such levels of discrimination have faced this more than once in the past two years.

Table 17: Crosstabulation of the frequency of physical abuse, harassment, threat, assault, rape and/or battery against the reasons

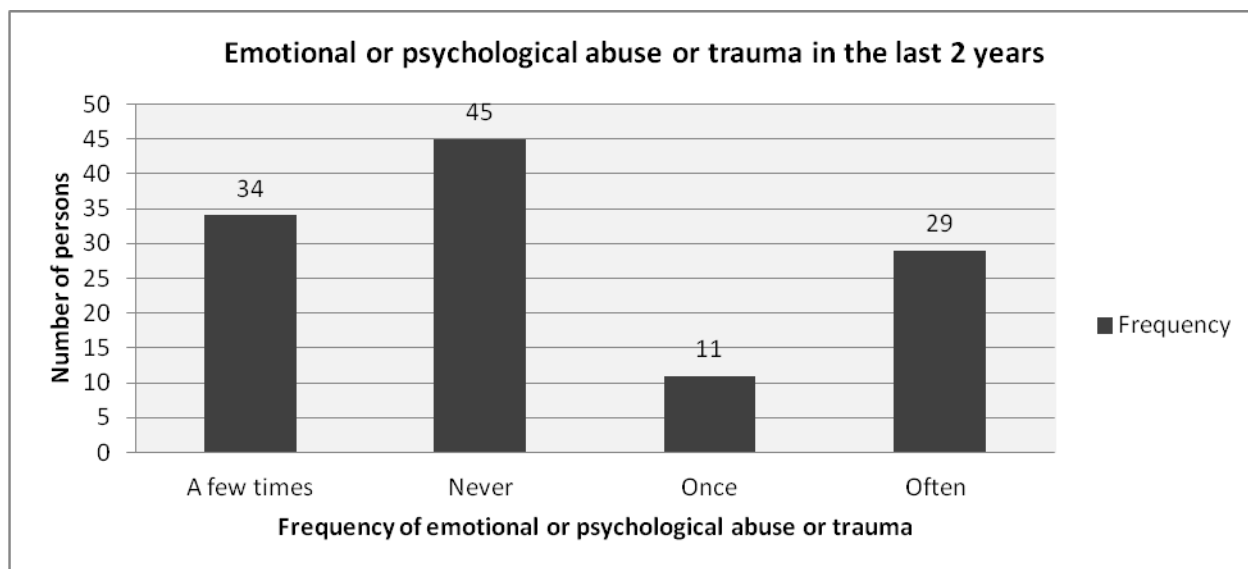
Frequency	Reasons for physical victimization				Total
	SEXUAL	GENDER	BOTH	OTHER	
<b>A few times</b>	1	11	7	0	<b>19</b>
<b>Often</b>	0	5	2	0	<b>7</b>
<b>Once</b>	0	6	9	3	<b>18</b>
<b>TOTAL</b>	<b>1</b>	<b>22</b>	<b>18</b>	<b>3</b>	<b>44</b>

Exactly 50% of the respondents who reported being victimized physically stated that this was due to their gender identity or expression. Another 40.91% stated they were victimized due to both their sexual orientation and gender identity or expression. Some respondents reported that the reason(s) for being physically victimized were unassociated with their gender identity/expression and their sexual orientation.

The extent of physical abuse is extremely concerning. Majority of the respondents who have faced any form of physical abuse in the past two years have been victimized strictly because of their gender identity or expression. This is suggestive that society enforces socialized gender roles and expression of gender and takes drastic actions against those who attempt to act or be different. The fact that only one person has reported being victimized physically on the basis of sexual orientation is contextual. While gender expression is visible, sexual orientation is not. Further in this analysis this will be linked to disclosure of sexual orientation and will thus give support to the fact that this small number being reported cannot be over looked.

## Emotional or psychological trauma or abuse

Figure 7: Responses to being victims of emotional or psychological trauma or abuse in the last 24 months



Respondents were asked whether they had faced any form of emotional or psychological trauma or abuse in the past 24 months. Only 37.82% of the respondents stated that they had not faced emotional or psychological abuse/trauma. However, 62.18% of the interviewees had faced some form of psychological or emotional trauma or abuse in the past 24 months. A concerning 52.94% of the respondents, more than half the total number of respondents, had faced emotional or psychological abuse or trauma more than once in the past two years.

Table 18: Cross-tabulation of the frequency in experiences of psychological or emotional trauma or abuse against reasons

Frequency	Reasons					Total
	SEXUAL	GENDER	BOTH	OTHER	ALL	
A few times	4	14	11	3	2	34
Often	0	18	9	2	0	29
Once	2	3	3	2	1	11
<b>TOTAL</b>	<b>6</b>	<b>35</b>	<b>23</b>	<b>7</b>	<b>3</b>	<b>74</b>

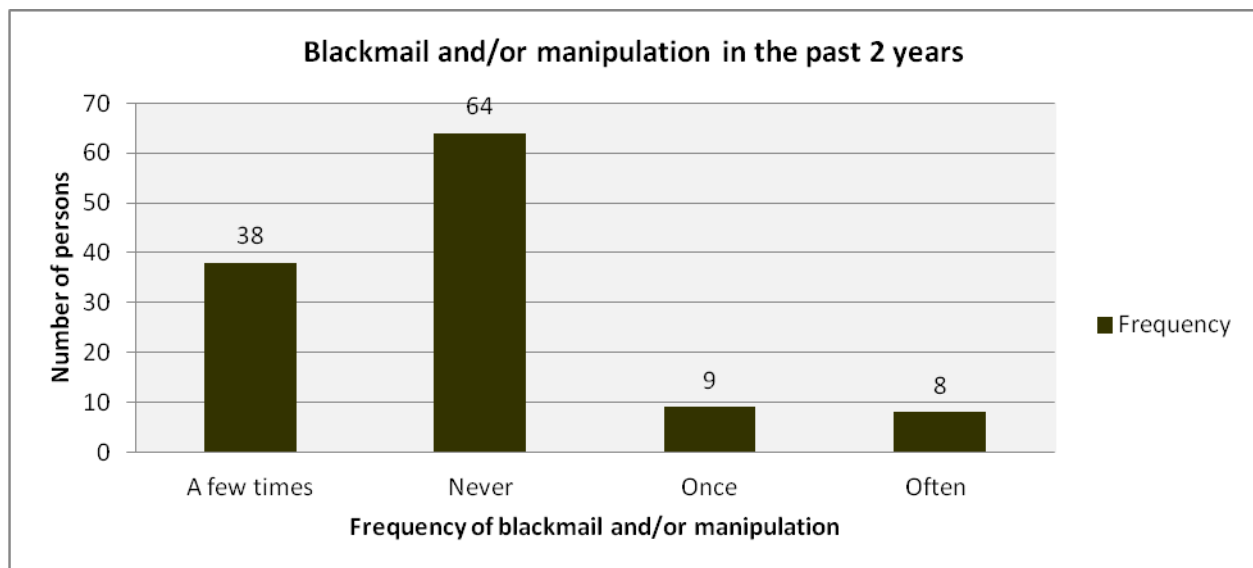
Experience of psychological or emotional trauma or abuse is greater than the previous other forms of victimization reviewed. Again the greatest experience is strictly related to expression of

gender or gender identity which accounts for 47.30% of the 74 respondents. A further 31.08% of them have been victims of this form of discrimination for reasons associated purely with their gender identity and/or expression and their sexual orientation.

The data shows that individuals also face this form of victimization for other reasons not associated with their sexual orientation or gender identity and expression. The fact that 85.14% of these individuals are faced with continuous emotional and psychological abuse or trauma repetitively is evidence that their sense of power is challenged. Their sense of power is undermined continuously.

### Blackmail and/or manipulation

Figure 8: Frequency of respondents' experience of blackmail and/or manipulation in the last two years



Some respondents have been blackmailed and/or manipulated repeatedly; 31.93% have been a few times and 6.72% often. On the other hand 53.78% have not been victims of blackmail or manipulation in the past 24 months.

Table 19: Crosstabulation of the frequency of blackmail and/or manipulation against the reasons

Frequency	Reasons					Total
	SEXUAL	GENDER	BOTH	OTHER	ALL	
A few times	3	22	11	0	2	38
Often	2	5	1	0	0	8
Once	1	6	1	1	0	9
<b>TOTAL</b>	<b>6</b>	<b>33</b>	<b>13</b>	<b>1</b>	<b>2</b>	<b>55</b>

The implication of blackmail and manipulation is that it drives fear into the victims and often results in individuals acting in ways they wouldn't under normal circumstances. It takes away individual's freedom of choice and power. Accounting for victims of blackmail and/or manipulation based exclusively on reasons associated to individuals' gender expression/identity is 60% of those who fall victims. A further 23.64% of these individuals face this form of discrimination based entirely on their sexual orientation and gender identity/expression. Not many individuals face this form of victimization on other bases and 10.91% face this form of discrimination based stigma associated with their sexual orientation only.

Repeated use of blackmail and/or manipulation severely undermines individuals.

#### 4.3.1.2. Perpetrators of discrimination against LGBT people

Overall, majority of the respondents faced discrimination directed towards them by their families, friends or neighbors. Interviewees also faced discrimination in the workplace directed towards them by their colleagues and employers alike. The clergy themselves have played roles in victimizing LGBT people.

Some respondents faced abuse by their same sex partners; in most instances this is between live-in partners. There is no form of redress for these individuals. Respondents have also reported abuse directed towards them from government officials, armed forces, legal professionals and the police. No respondent reported taking up legal actions against any of these individuals. In general this section of the report shows the level of fear and loss of power present. It also reveals a trend in diminishing individual's value and sense of responsibility and well being.

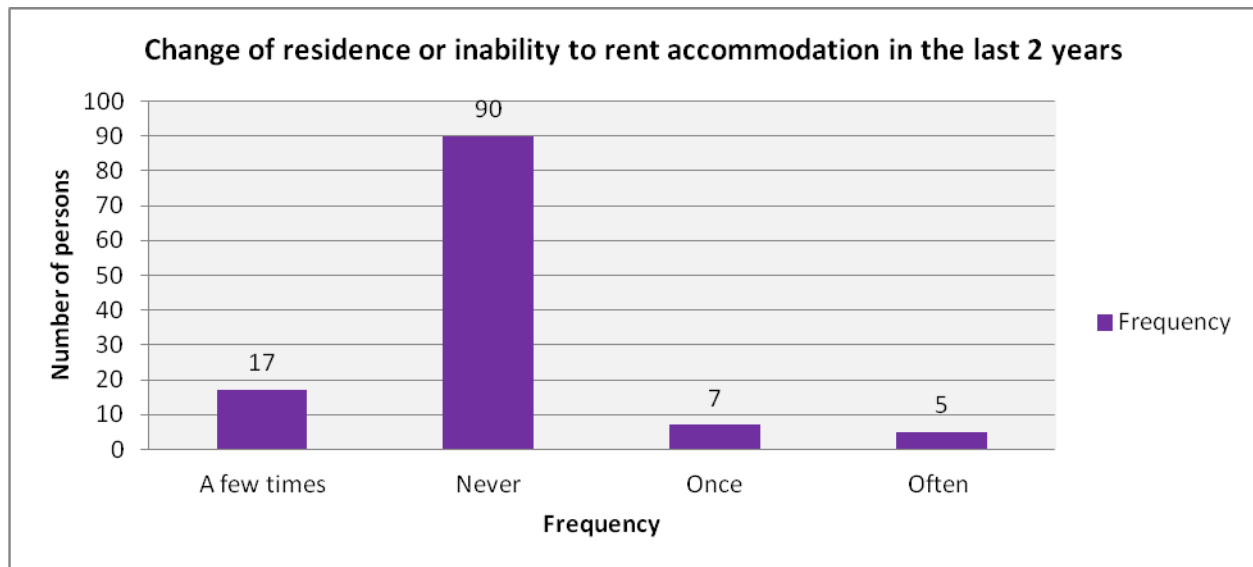
#### 4.3.2. Access to work, health services, housing and education

The right to attain a fulfilled life for lesbians, gays, bisexuals, transsexuals and transgendered persons is challenged by bias towards their sexual orientation and/or gender identity. Section 2B of the questionnaire focused on gaining information about the violation of person's rights to

access gainful employment, adequate housing and at least primary education. It also focuses on how their families have been affected by stigma and their abilities to discuss issues surrounding their sexual orientation and gender identity openly.

### Access to housing

Figure 9: Respondents having to change their place of residence in the last 24 months or were unable to rent accommodation in the same time period



The interviewees were asked whether they have had to change their place of residence or been unable to rent accommodation in the last two years. Though 75.63% of the respondents have not had to change their place of residence or were not unable to rent accommodation in the past two years, 18.49% of the respondents had to either change their place of residence or were unable to rent accommodation repeatedly. The remaining 5.88% have had to change their place of residence or were unable to rent accommodation once in the past two years.

Table 20: Crosstabulation of the reason for change of residence or inability to rent accommodation and the frequency of occurrence

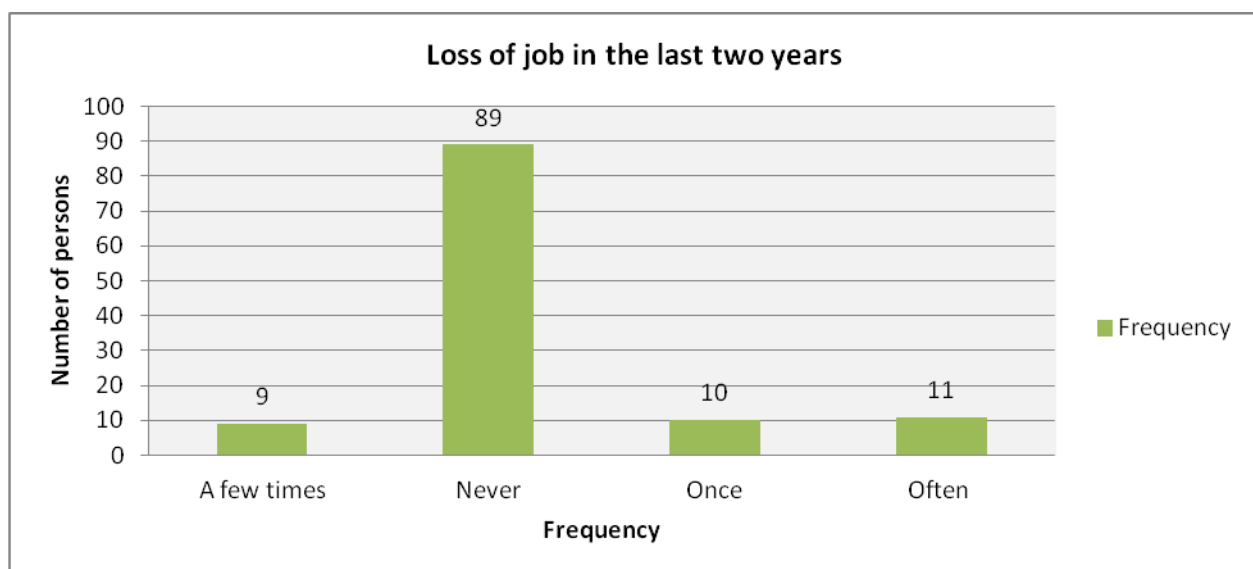
Frequency	Reasons					Total
	SEXUAL	GENDER	BOTH	OTHER	ALL	
A few times	1	4	9	1	2	17
Often	2	2	0	0	1	5
Once	0	3	4	0	0	7
<b>TOTAL</b>	<b>3</b>	<b>9</b>	<b>13</b>	<b>1</b>	<b>3</b>	<b>29</b>

Individual's safety to a living environment is challenged by discrimination and stigma. Only one individual reported being unable to rent accommodation or having had to change their residence for reasons unassociated to their sexual orientation or gender identity. Individuals unable to rent accommodation or having had to change their place of residence in the past two years are 10.34% of the total 29 based only on sexual orientation. Affected on the basis of gender identity or expression are 31.03% and being affected based on sexual orientation and gender identity/expression among other reasons is another 10.34%.

It is concerning that 18.49% of these individuals have had to change their place of residence repeatedly in the past 24 months. It demonstrates a high level of discrimination and stigmatization. It suggests that one cannot live freely in a place where their stigmatized sexual orientation or gender identity is known and their sense of security is continuously challenged.

## Access to work

Figure 10: Experience of loss of jobs in the past two years





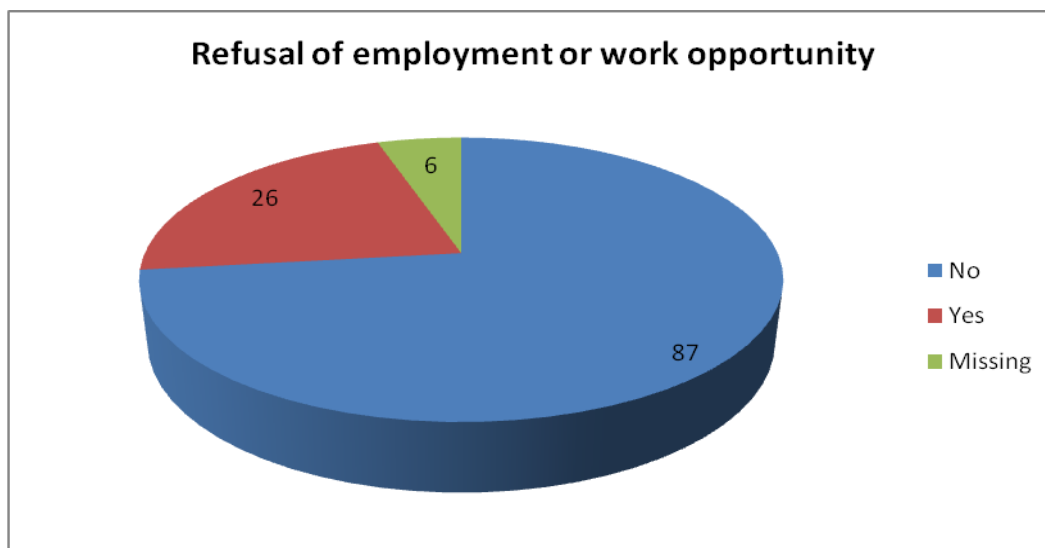
A total of 25.21% of the respondents have lost their jobs at least once in the past two years. Of concern though, is the fact that 15.97% of the respondents have lost their jobs repeatedly in 24 months. The fact that 74.79% of the respondents were able to secure their jobs in the last two years must be contextualized; a great number of individuals are self employed.

Table 21: Crosstabulation of respondents' frequency of respondents losing jobs against the reasons

Frequency	Reasons				Total
	SEXUAL	GENDER	BOTH	OTHER	
<b>A few times</b>	2	4	3	0	<b>9</b>
<b>Often</b>	6	1	4	0	<b>11</b>
<b>Once</b>	1	4	4	1	<b>10</b>
<b>TOTAL</b>	<b>9</b>	<b>9</b>	<b>11</b>	<b>1</b>	<b>30</b>

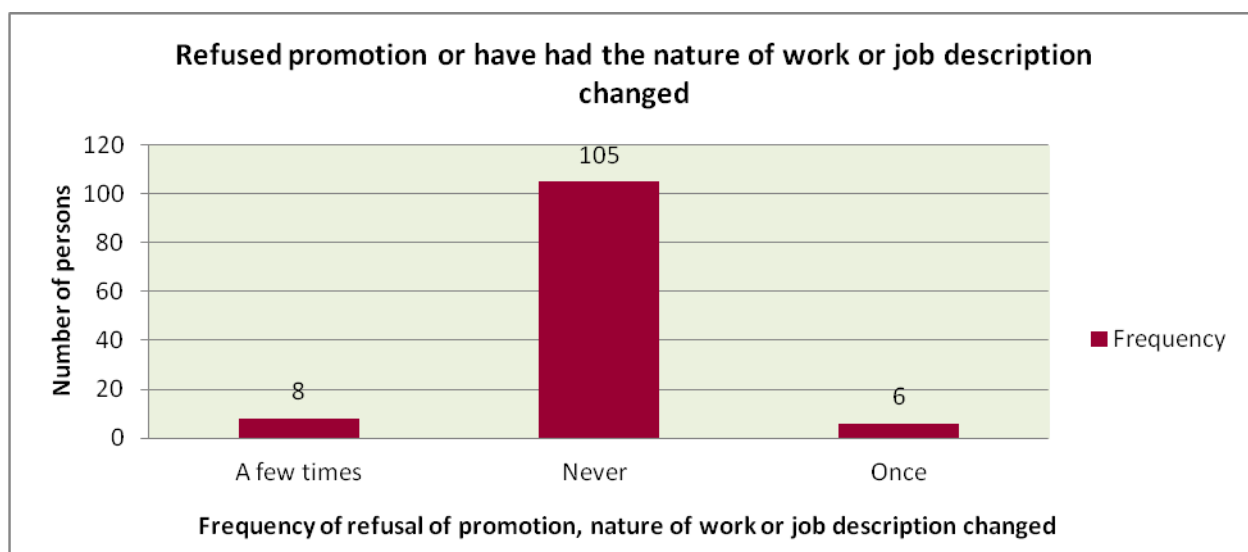
In this case the number of individuals being victimized on the basis of gender identity or expression and sexual orientation are equal accounting for 30% each. Only one person reported having lost their job for reason not associated to their sexual orientation or gender identity/expression once in the last two years. The remaining 36.67% of the 30 individuals have lost their jobs based both on sexual orientation and gender identity or expression.

Figure 11: Number of respondents who have been refused employment or work opportunity in the last two years for reasons associated with their gender expression/identity and/or sexual orientation



Individuals were asked to specify whether they had been refused employment or a work opportunity in the last two years. Only 113 respondent answered this question. A large number of individuals answered “no” but 21.85% of the respondents stated they had been either refused employment or denied work opportunity based entirely on their sexual orientation and/or gender identity.

Figure 12: Frequency of change in respondents' job description, nature of work or refusal of job promotion in the last two years



While for most individuals in the working world the nature of their work will only change according to their capabilities, for others it is based entirely on their sexual orientation or gender identity. A total of 11.76% of the respondents reported that they were either refused work promotion or have had the nature of their work or job discription altered in the past 24 months.

Table 22: Crosstabulation of respondents being refused promotion or having their job description changed against the reasons

Frequency	Reasons			Total
	SEXUAL	GENDER	BOTH	
A few times	2	3	3	8
Once	2	2	2	6
TOTAL	4	5	5	14

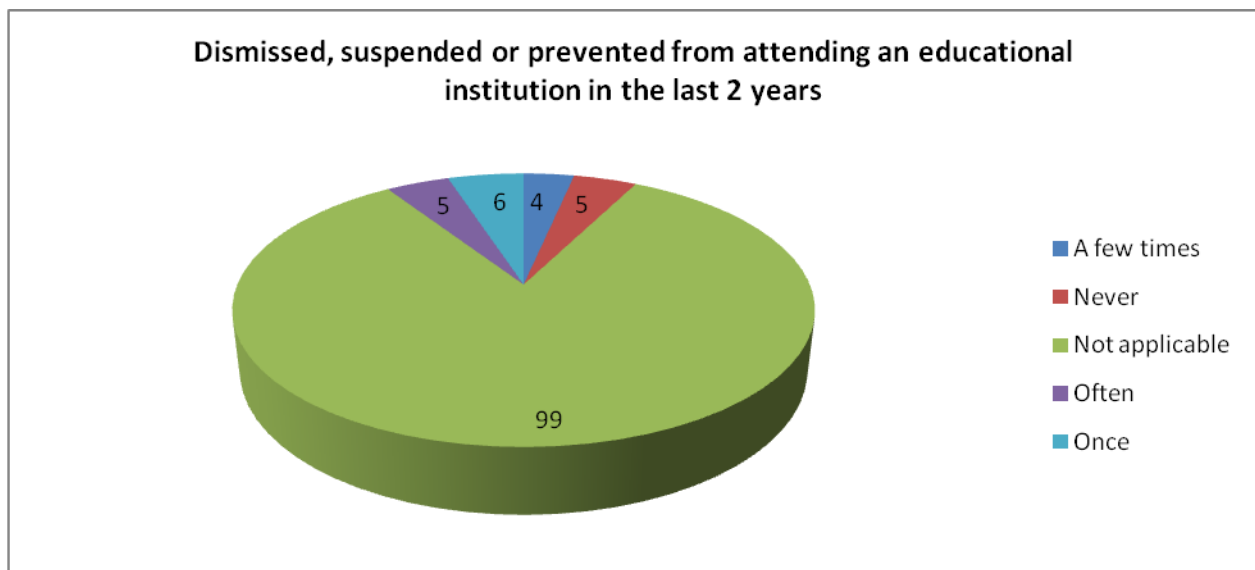
Of the 14 individuals who have had their job description or nature of work changed or have been refused promotion in the past two years, 28.57% have been due to sexual orientation. Significantly 21.43% of the respondents have been refused promotions or have had their job description or the nature of their work changed repeatedly on the basis of both sexual orientation and gender identity/expression.

One's ability to excel professionally is hindered by this kind of bias. It leaves individuals being cheated of being able to meet their full potential.

The data presented here reveals that the ability to earn a living has been taken away from individuals based entirely on bias and stigma. This is discriminating in itself. Their sense of power and ability to contribute financially to their own wellbeing or that of their dependents are both challenged drastically.

### Access to education

Figure 13: Evidence of dismissal, suspension or prevention from attending an educational institution in the last 24 months strictly based on bias associated with respondents' gender identity or expression and/or sexual orientation



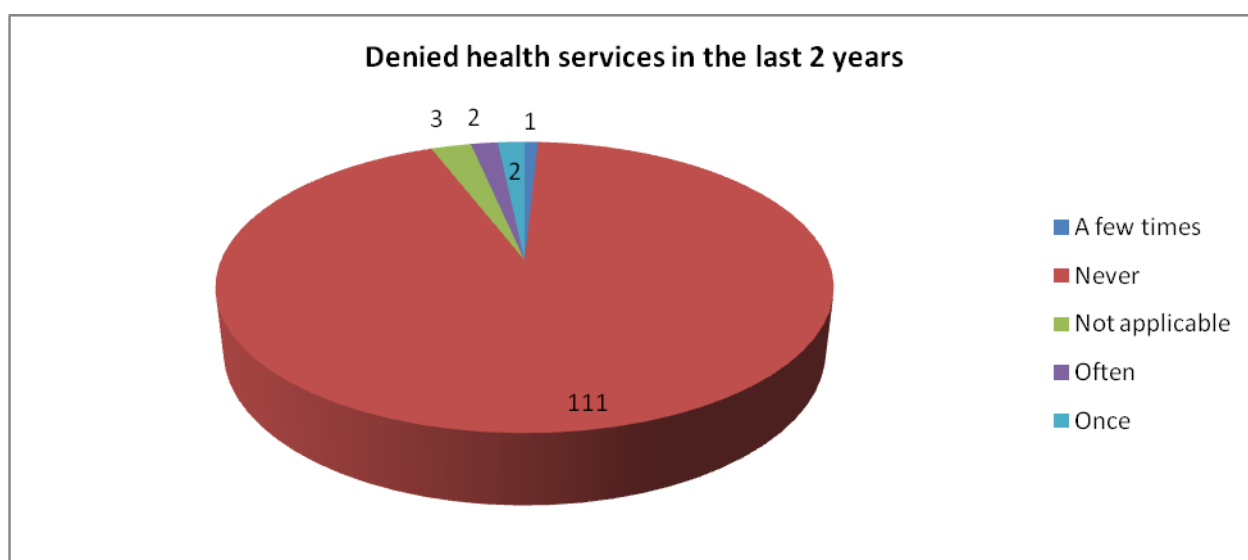
Respondents were asked whether in the last two years they had been dismissed, suspended or prevented from attending an education institution on the basis of sexual orientation and/or gender identity. Notably this question was not applicable for most of the respondents. Of the 20 individuals who were legible to respond to the question; 4.2% were victimized often, 5.04% once and 3.36% a few times. The remaining 4.2% of the respondents have not been dismissed,

suspended or prevented from attending an educational institution on the basis of their sexual orientation or gender identity in the last 24 months.

This hinders on one's right to acces education. Of greater concern is the fact that while Sri Lanka boasts free access to education for all its citizens there is failure to acknowledge that some people are not able to access education due to bias.

### Access to healthcare and services

Figure 14: Denial of health services in the last two years based on sexual orientation and/or gender identity



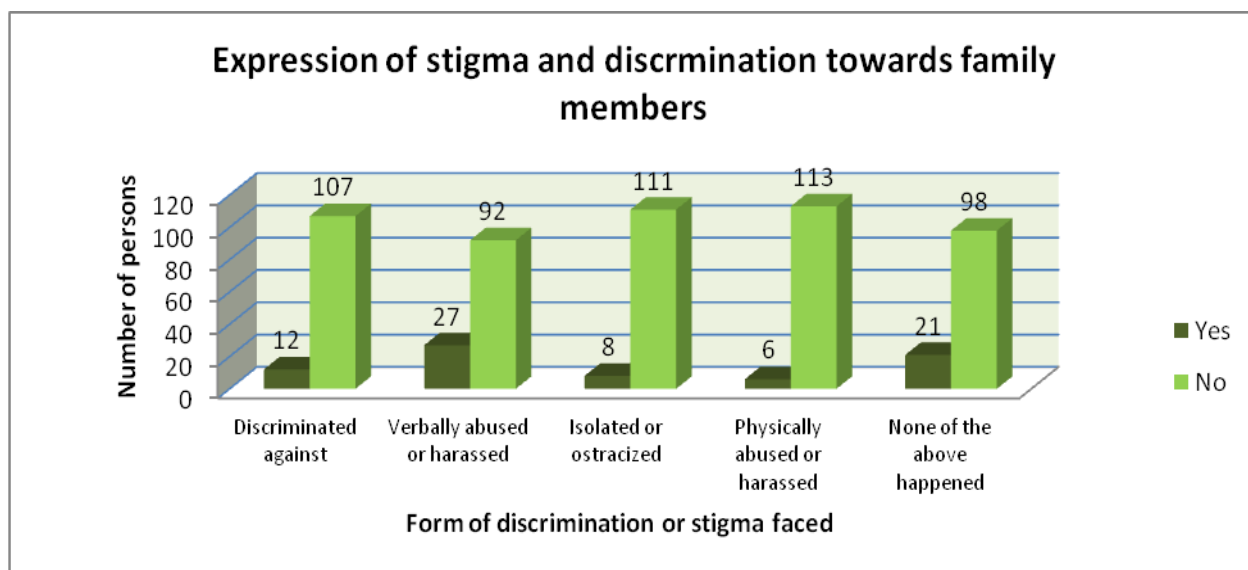
Evidence of any form of bias in availing health care or service to any individual should be taken seriously regardless of sexual orientation or gender identity or expression. Though majority of the respondents reported not having been denied access to health care in the past two years; it cannot be taken for granted that a few have. Specifically is the fact that an individual reported having been denied access to health care time after time. The fact that this denial of healthcare is based entirely on the fact that this individual identifies as of the LGBT community is suggestive of bias towards a group of people. Therefore, it is not only this individual who is affected but a community that is stigmatized and is subjected to discrimination which can result in the loss of lives.

This section of the report has given a realistic view of people's access to basic human rights. Evidently, LGBT people's right to employment, housing, education and healthcare is challenged. Though the challenge in health services and education is less experienced than that of employment and housing, it is vital that attention be paid to the two as government has direct influence in both departments. In relation to education the data reveals that 3 out of 4 times where persons are knowingly LGBT they can be suspended, dismissed or prevented from

attending an education institution. This fosters dishonesty as people are then forced to lie about their sexual orientation or gender identity in order to access education.

#### 4.3.2.1. Stigmatization and discrimination directed towards families

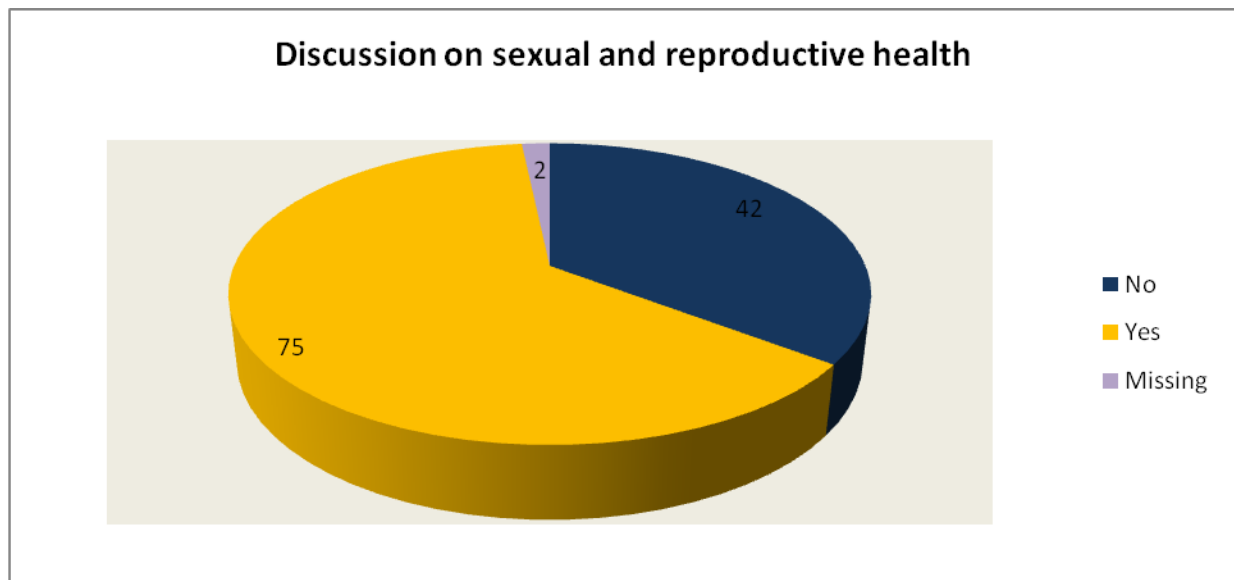
Figure 15: Frequency distribution of family members who have faced some form of stigma or discrimination due to respondents' sexual orientation and/or gender identity/expressions



Evidently stigma and discrimination affects the families of those affected directly or indirectly. Only 17.64% of respondents' family members have not faced any form of discrimination or stigma based on respondents' sexual orientation and/or gender identity in the last 24 months. On the other hand 44.54% of these families have been victims of stigma. This expression of discrimination especially that of isolation and being ostracized suggests to families that contact with them is unacceptable as it may spread homosexuality. It also causes families to want to disassociate themselves from their LGBT family members as their sense of belonging and ability to contribute to their community is challenged. Physical and verbal abuse directed towards family members undermines their family unit and take away their power.

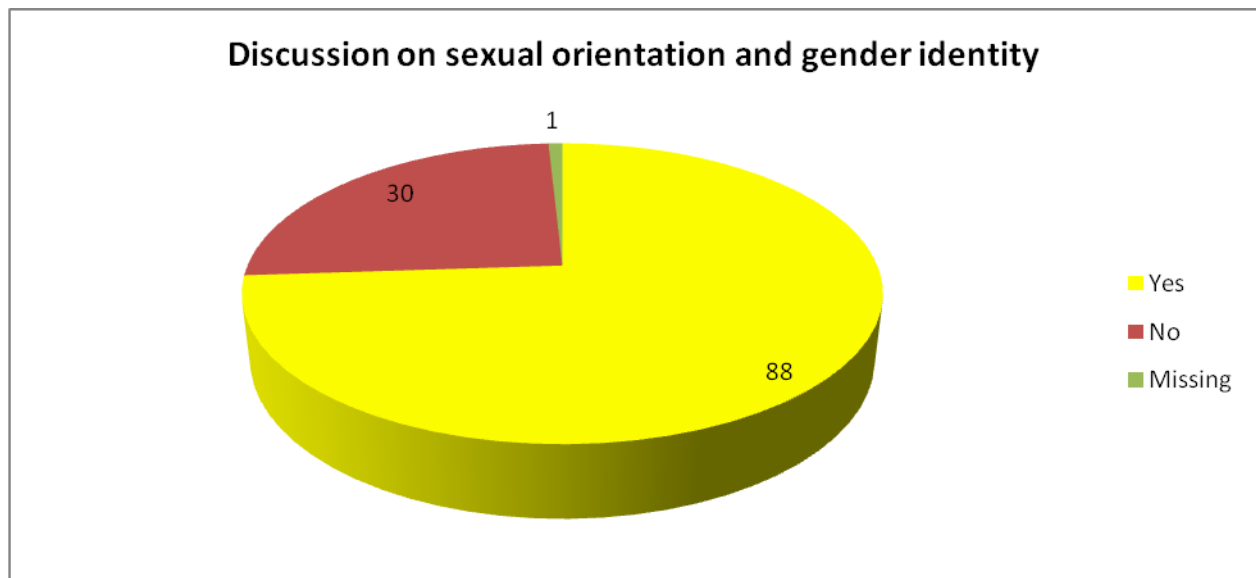
#### 4.3.2.2. Discussions on sexual orientation, gender identity and sexual and reproductive health

Figure 16: Responses to whether interviewees had any discussion on sexual and reproductive health in the last two years



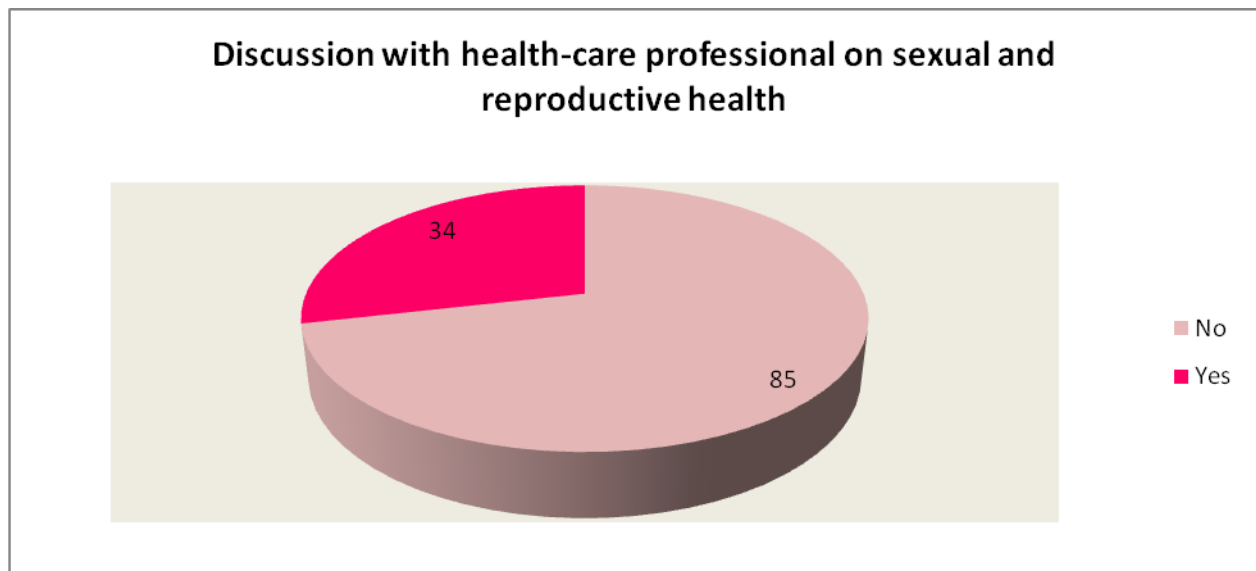
Most respondents reported having had some form of discussion on sexual and reproductive health in the last 24 months. Most of the respondents had these discussions with their same sex partners. A large number also had these discussions with their friends and others with health-care workers. Not many persons had these discussions with their family members, employers or colleagues and less than five individuals had these conversations with clergy.

Figure 17: Responses to whether interviewees had any constructive discussion on sexual orientation and/or gender identity in the last two years



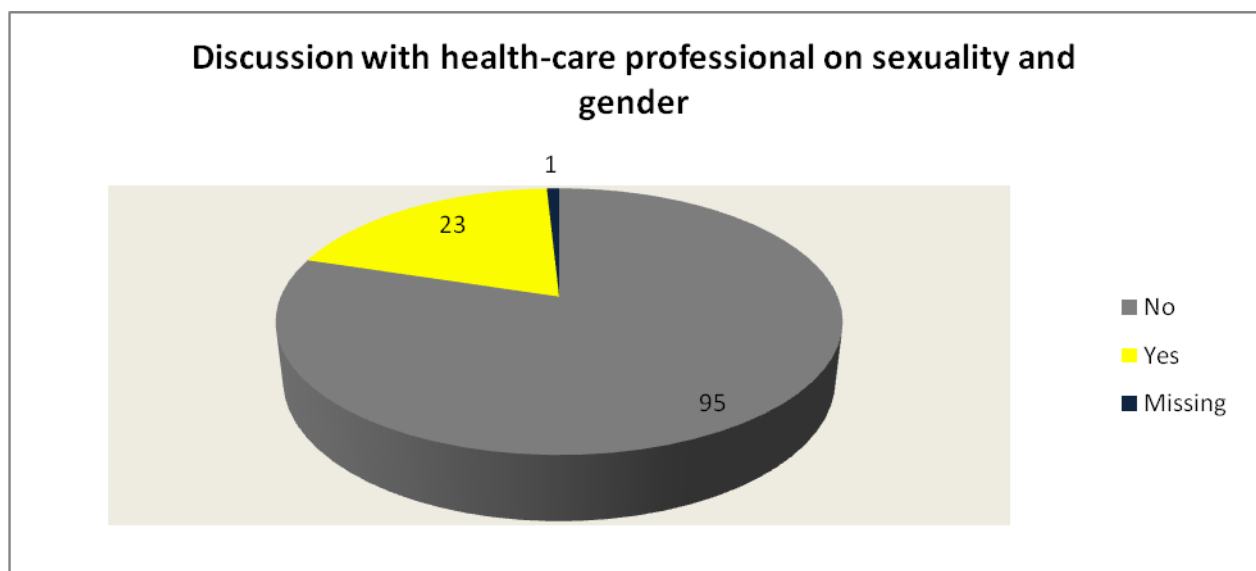
Respondents were asked whether they had had any form of constructive discussions on their personal sexual orientation and/or gender identity/expression in the past 24 months. Most respondents had. The majority though had had only with their same sex partners and close friends. A small number had these discussions with their colleagues as well as employers. Some individuals spoke to their husband or wife on this topic and others did with health-care workers, while other did with their family members. Some spoke to the clergy.

Figure 18: Responses on whether interviewees had any form of constructive discussion on their sexual and reproductive health with a health-care professional in the last 24 months



Respondents were asked to state whether they had had a constructive discussion with any health-care professionals in the last 24 months about sexual and reproductive health. The fact that 28.57% were able to discuss this issue signifies some level of openness and willingness by health-care professionals to discuss these issues.

Figure 19: Responses to discussion with health-care professionals on respondents' sexual orientation and/or gender identity in the last 24 months

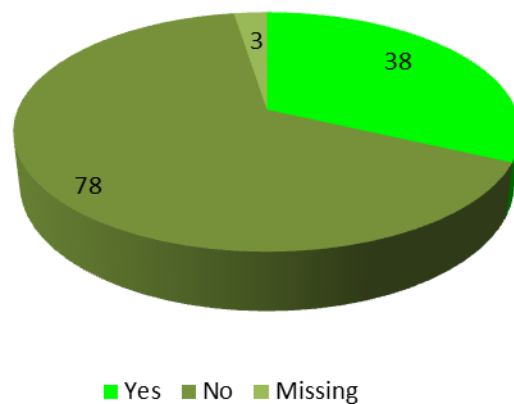




Reportedly, less people were able to talk about the more sensitive issue of sexual orientation and gender identity with health-care professionals. It demonstrates associated stigma towards the issue.

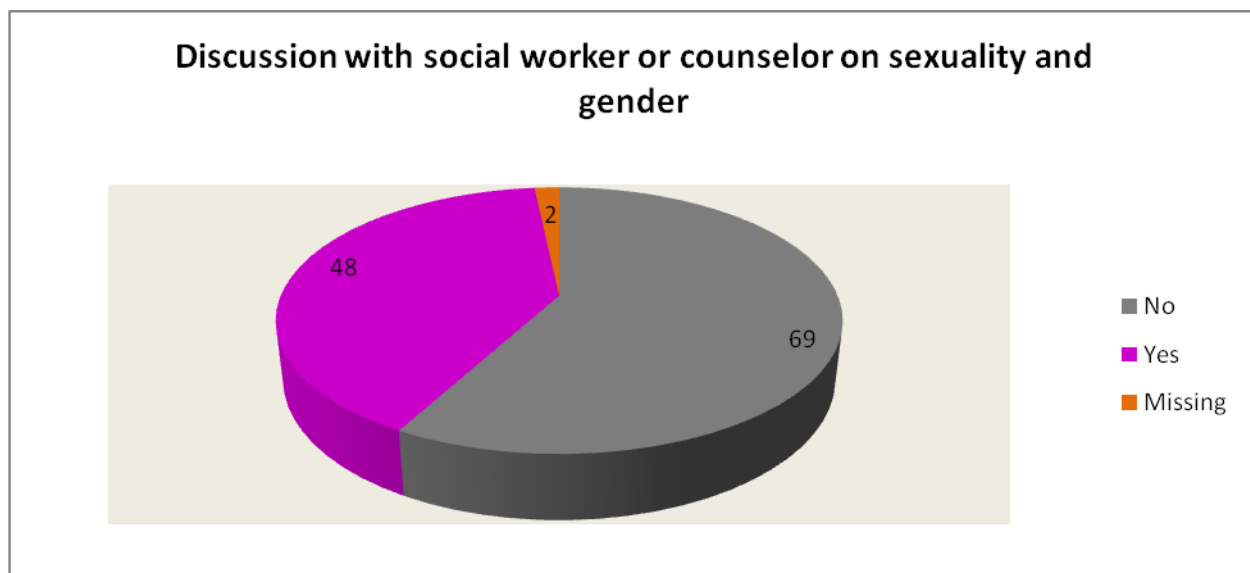
Figure 20: Constructive discussion with counselor or social worker on sexual and reproductive health

**Discussion with social worker or counselor on sexual and reproductive health**



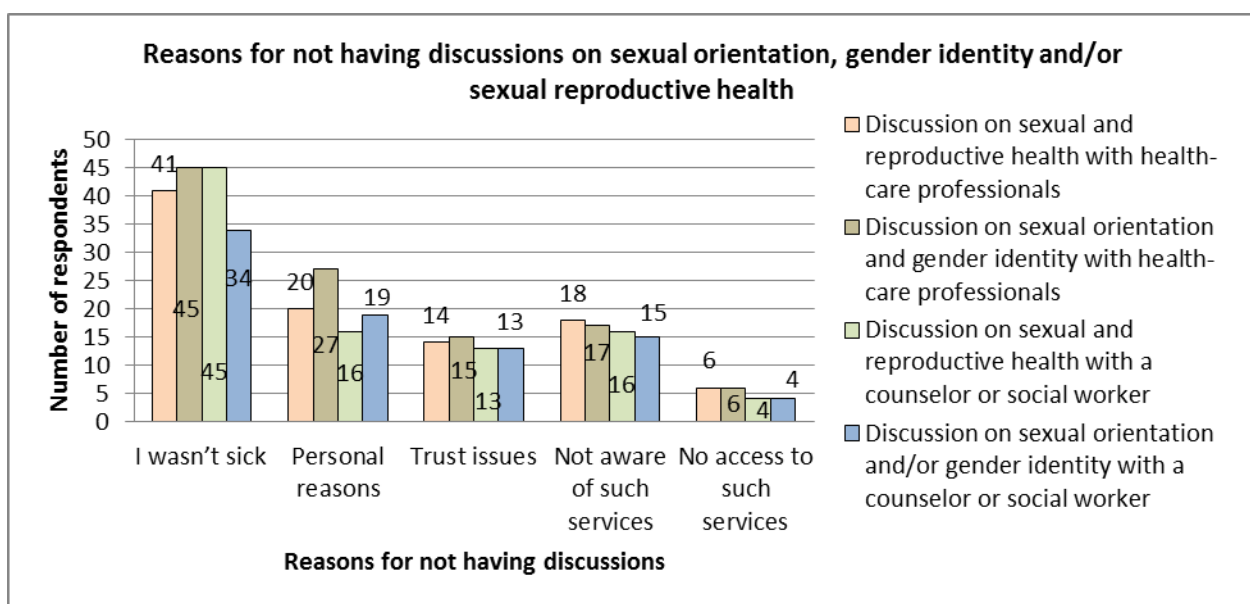
Though most individuals had not spoken to a social worker or counselor on the issues of sexual and reproductive health in the past two years, 31.93% had.

Figure 21: Interviewee's responses to having had a constructive discussion on sexual orientation and/or gender identity with a counselor or social worker in the last two years



There is a significant number of individuals who have had a constructive discussion with a counselor or social worker about their sexual orientation or gender identity in the last 24 months. With 40.34% of the respondents having had this experiences there appears to be some willingness on the part of the social worker and/or counselor to discuss these issues.

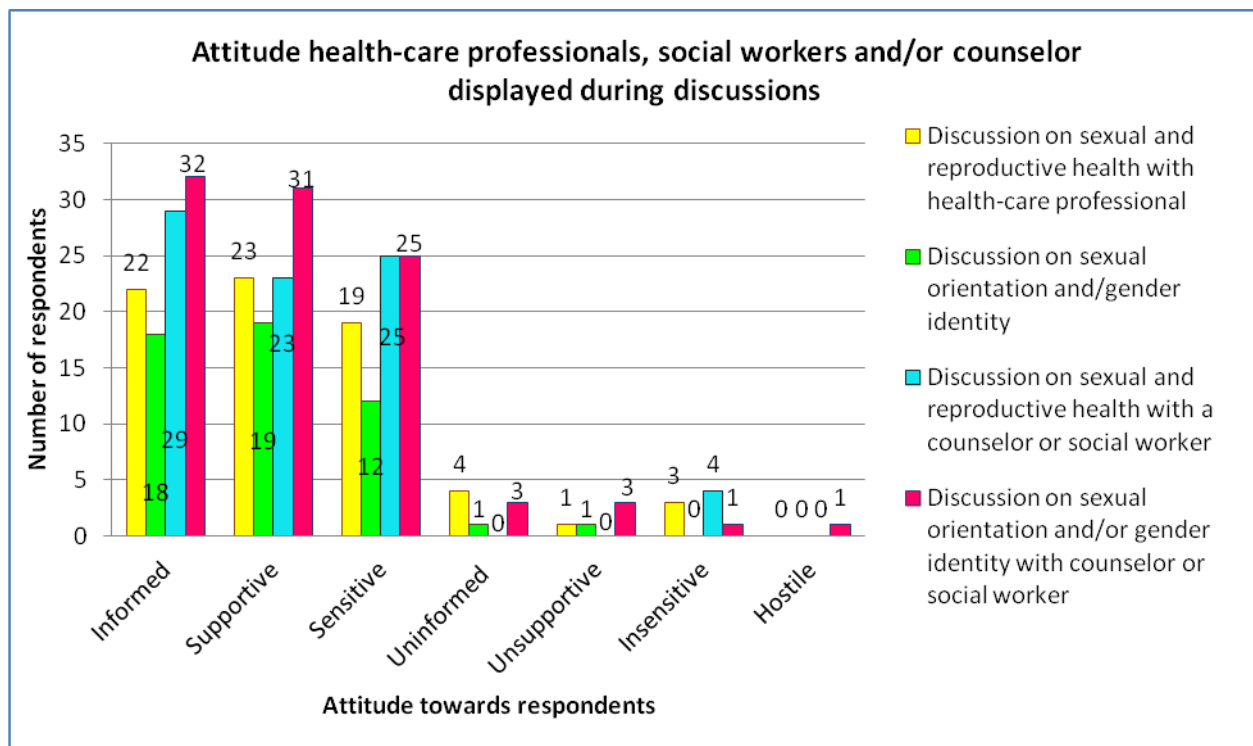
Figure 22: Respondents reasons for not having these forms of discussion in the last two years



Some respondents had not had any form of discussions with anyone in the last two years about their sexual orientation, gender identity and/or sexual and reproductive health. There were various different reasons for this and some respondents gave more than one reason. The smallest percentage of individuals do not have access to these services. Majority of the respondents on the other hand reported that they were not sick which suggests that had they been in contact with any of these persons there is a chance that they would be willing to have these discussions with them.

On the other hand some respondents reported that they have trust issues which signifies that they would not be willing to have these discussions. This shows the extent to which stigma affects individuals. There is fear that everyone will be discriminatory, hence they prefer not to even discuss these issues.

Figure 23: Experience of these discussions



Respondents were allowed to make multiple selections to describe their experiences of having these discussions. At least 19.33% of the respondents had had some form of discussion about their sexual orientation, gender identity and/or sexual and reproductive health in the last 24 months. For most of the respondents this experience was a positive one.

There are some negatives with regards to the discussions respondents were able to have with health-care professionals, social workers and/or counselors. A minority of health-care workers, social workers, and counselors are not well informed about the issues of sexual orientation and gender identity as well as sexual and reproductive health. Though only one respondent reported that a social worker or counselor displayed hostility towards them when they tried to discuss sexual orientation and gender identity it must not be over looked. This breaks the trust that individuals are expected to have in a counselor or social worker who are often rolemodels in society.

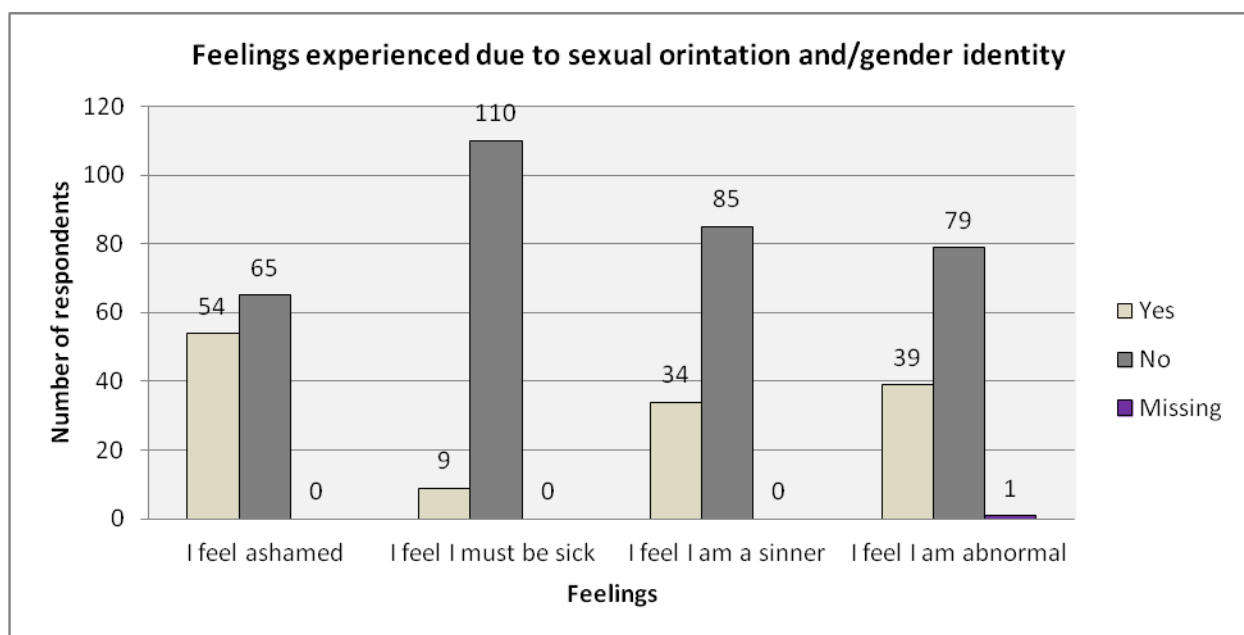
### 4.3.3. Internalized stigma and discrimination

Stigma is socialized in such a way that even those who are stigmatized often have personal issues themselves. Their feelings of not being able to fit in with the majority causes self doubt, feelings of abnormality, guilt and other negative feelings. More than often they themselves express discrimination either towards themselves or others who identify with them in the same regard that cause the stigma in the first place.

This section of the study will focus on identifying internalized stigma that respondents have experienced based on their sexual orientation and/or gender identity.

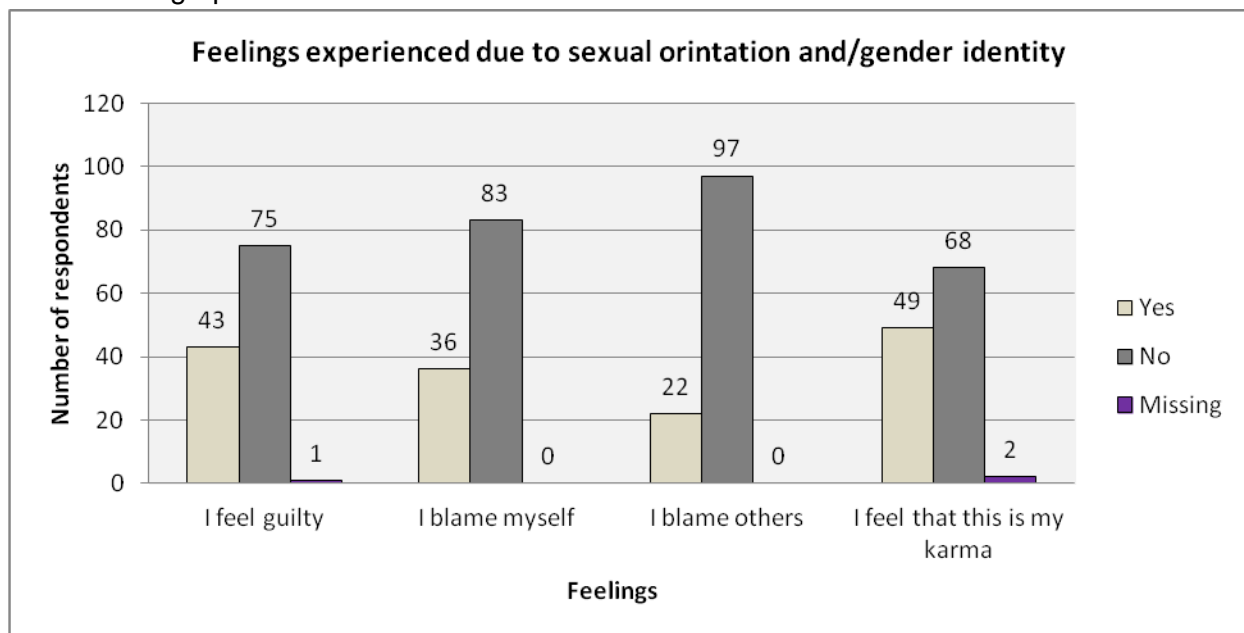
#### Experience of negative feelings

Figure 24: Experience of negative feelings due to gender identity/expression and/or sexual orientation - graph 1



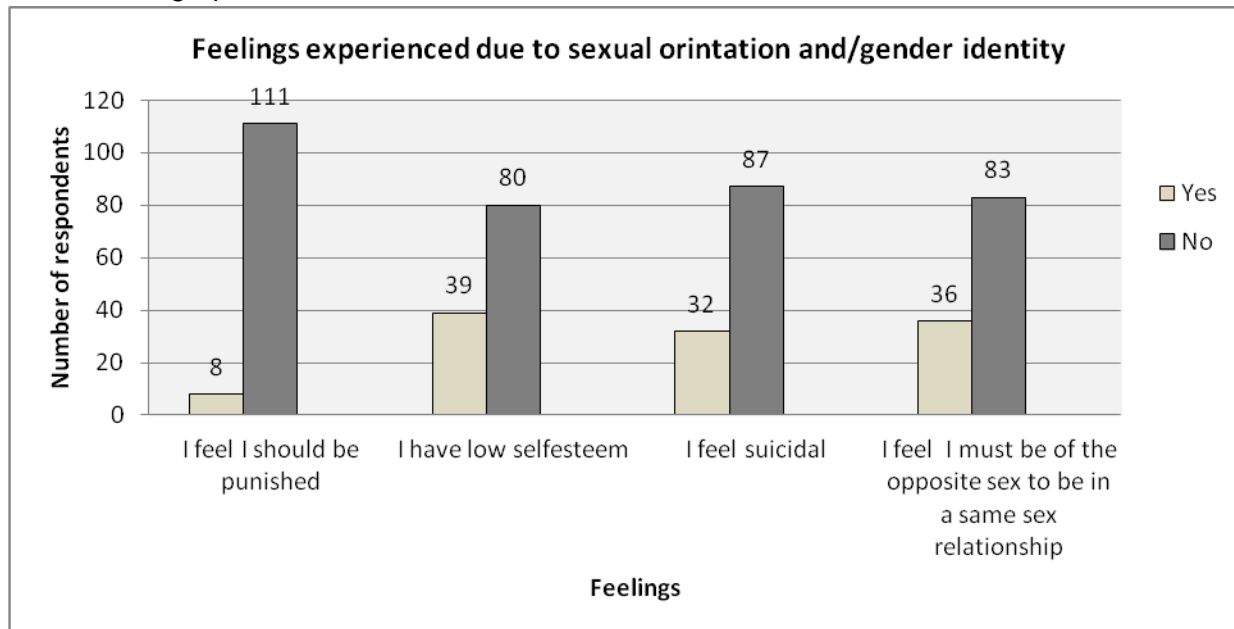
Due to the high level of stigma associated with sexual orientation and gender identity it is not shocking that a great number of persons experience feelings of shame and abnormality. There is a large number of persons who feel absolute shame about their sexual orientation and/or gender identity accounting for 45.38% of the respondents in the study. Of the 119 interviewees 32.77% experience feelings of abnormality. More than 25% of the respondents feel that because of their sexual orientation and/or gender identity they are sinners and 7.56% feel that they must be sick.

Figure 25: Experience of negative feelings due to gender identity/expression and/or sexual orientation - graph 2



The stigma associated with sexual orientation and/or gender identity leads individuals to associating blame for the supposed “blemish” in their character. Those who blame themselves for this difference that sets them apart from the majority are 30.25% of the respondents. Those who blame others are 18.49%. Some respondents felt that this was just their individual karma; 41.18%. Many respondents felt guilty about being LGBT; 36.61%.

Figure 26: Experience of negative feelings due to gender identity/expression and/or sexual orientation - graph 3



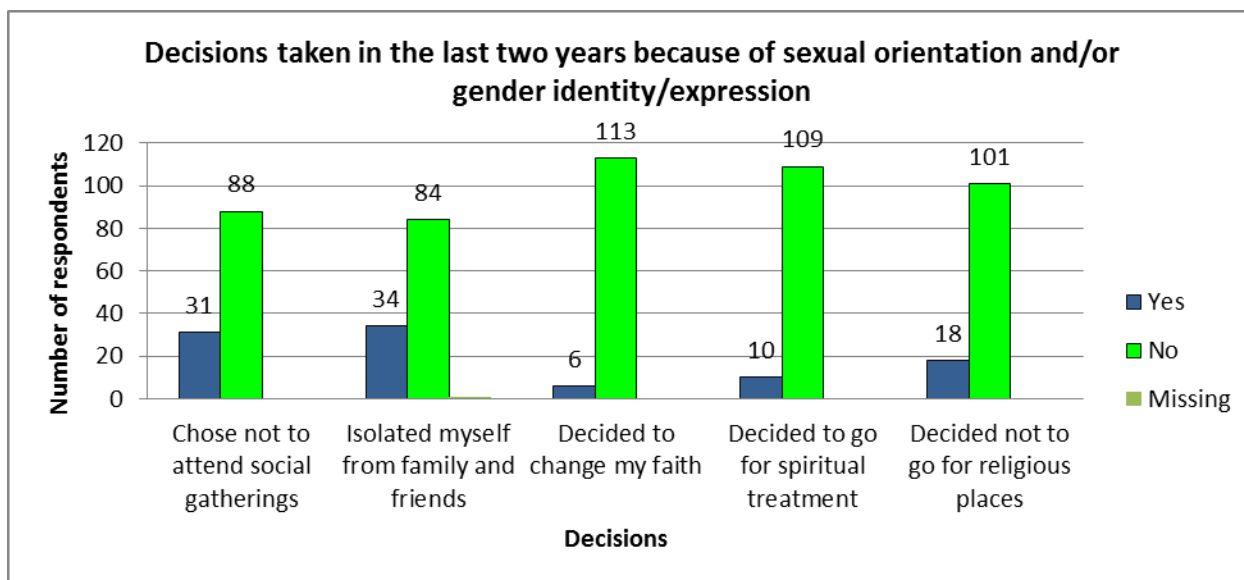
The level of stigma is so ingrained that individuals themselves feel that they should be punished for being LGBT. Of grave concern is the number of persons who feel suicidal; 26.89%. With 30.25% of the respondents feeling that they need to be of the opposite sex to engage in a relationship with someone of the same sex, it demonstrates a need to conform which often results from stigma and discrimination. Individuals also experience low selfesteem based on stigma associated with their sexual orientation and/or gender identity. A total of 32.77% of the respondents experience low self-esteem.

In general respondents experience negative feelings associated with their faith or spiritual nature. Some respondents experience feelings of sinfulness and associate their sexual orientation with karma. Furthermore respondents themselves are discriminatory and even think that they deserve to be punished. This has simply demonstrated how deeprooted LGBT related stigma and discrimination is in Sri Lanka.

### **Isolation, avoidance, withdrawal, conformance and treatment/cure**

People try to find different ways to deal with stigma and discrimination. While some try to conform to society's ideas of who they should be, others try to locate themselves in environments where they are more accepted. In some instances people even go to the extreme of trying to find a cure for their homosexuality or transsexuality as they believe it can be cured or this is a form of disease that can be cured or at least treated.

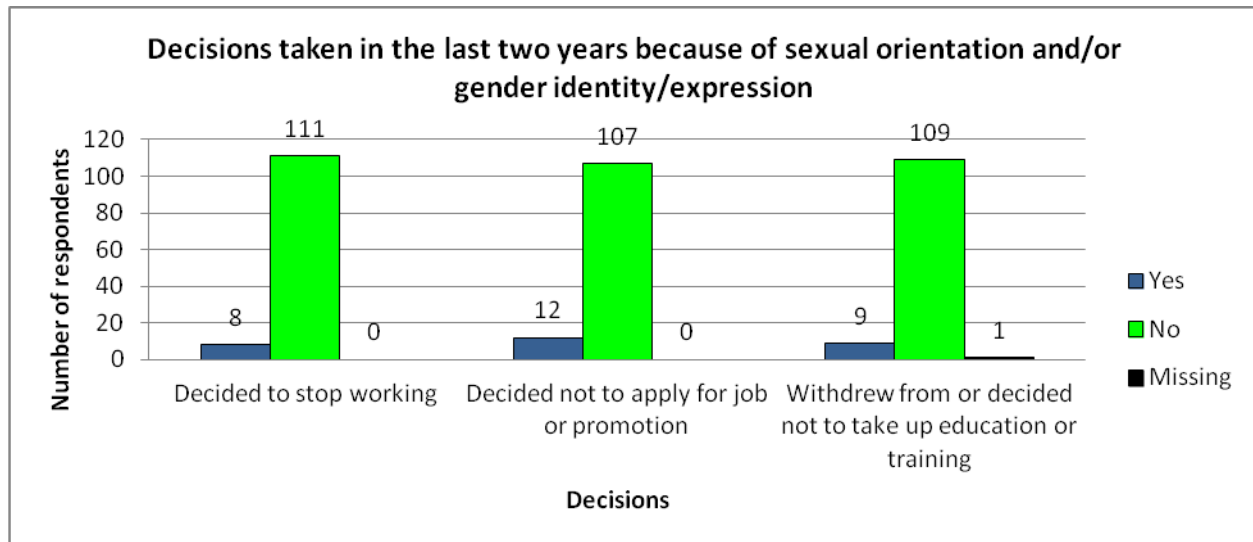
Figure 27: Decisions respondents have taken in the last two years because of their sexual orientation and/or gender identity/expression - graph 1



With the level of discrimination that respondents have reported experiencing in the last two years it is not shocking that so many individuals go into isolation. Of grave concern though is the fact that 28.57% of the respondents have isolated themselves from their families. The fact that people isolate themselves from their families is concerning because it challenges an individual's sense of identity. The 26.05% of respondents who have chosen not to attend social gathering or events also demonstrates that their sense of community is gravely challenged.

Based on faith, 15.13% have decided not to go to religious places and 4.2% have decided to change their faith. The belief that sexual orientation is a disease and can be treated is expressed by the 8.4% of respondents who have sought spiritual treatment for their sexual orientation and/or gender identity.

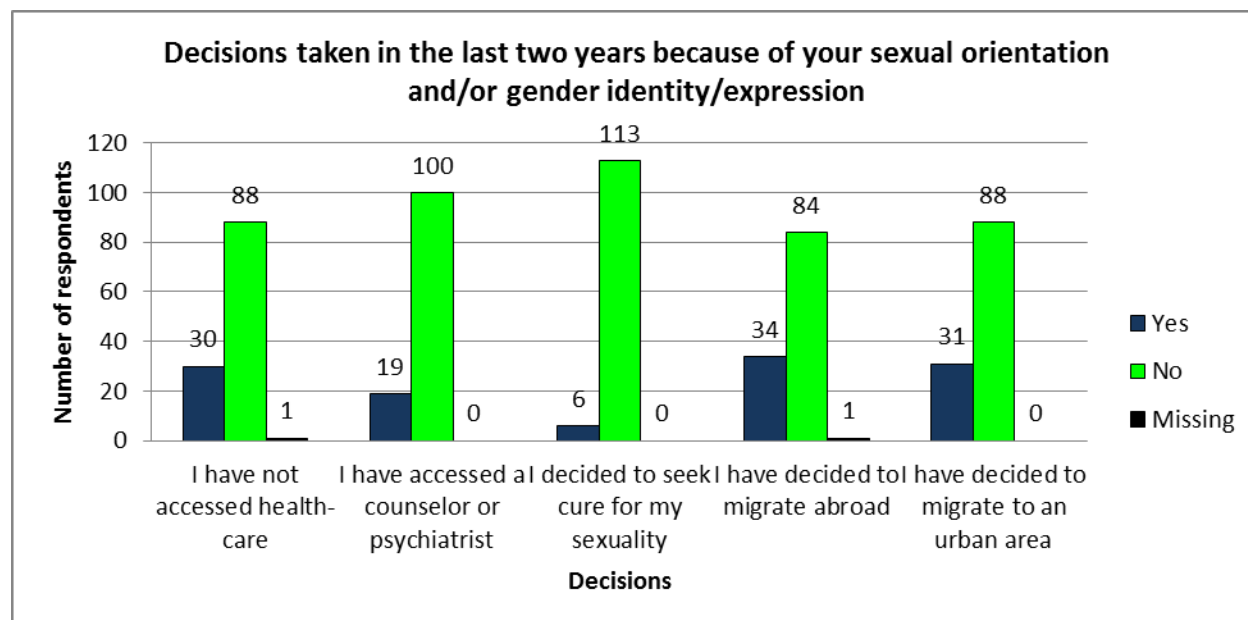
Figure 28: Decisions respondents have taken in the last two years because of their sexual orientation and/or gender identity/expression - graph 2



With the level of discrimination that individuals have faced and the loss of power in the work place it is not uncommon that some people would eventually stop working. This suggests that people are willing to take extreme measures to reduce the level of stigma and discrimination they are faced with in their daily lives, people even decide not to advance their education. The 10.08% of people who have decided not to apply for jobs or promotions reveals that there is a sense that people do not want to bring unnecessary attention towards themselves. It also suggests that people are silenced as are their capabilities.



Figure 29: Decisions respondents have taken in the last two years because of their sexual orientation and/or gender identity/expression - graph 3

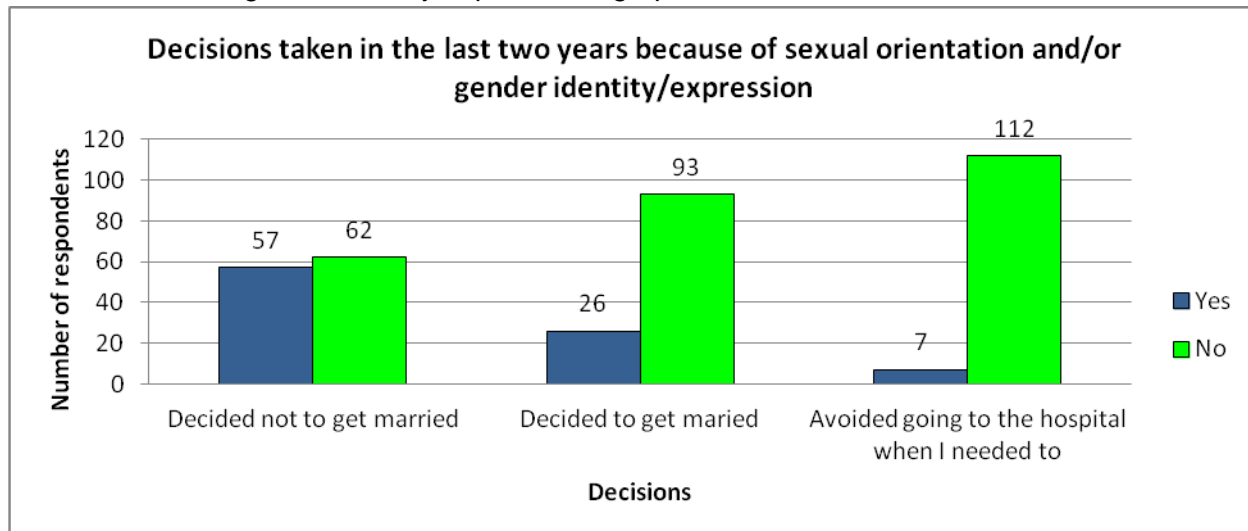


It is worrying that people have decided not to access needed healthcare because of stigma associated with their sexual orientation and/or gender identity. This demonstrates the dangerous implications of stigma and discrimination as 25.21% of the 119 respondents have decided not to access healthcare which may or may not be detrimental. Again there is evidence that people feel that they can be cured as 5.04% of the respondents have sought cure.

More research needs to be done to understand whether the 15.97% of respondents who have accessed a counselor or psychiatrist have done so to cope with the stigma and discrimination they are faced with or need to be cured or treated for being LGBT.

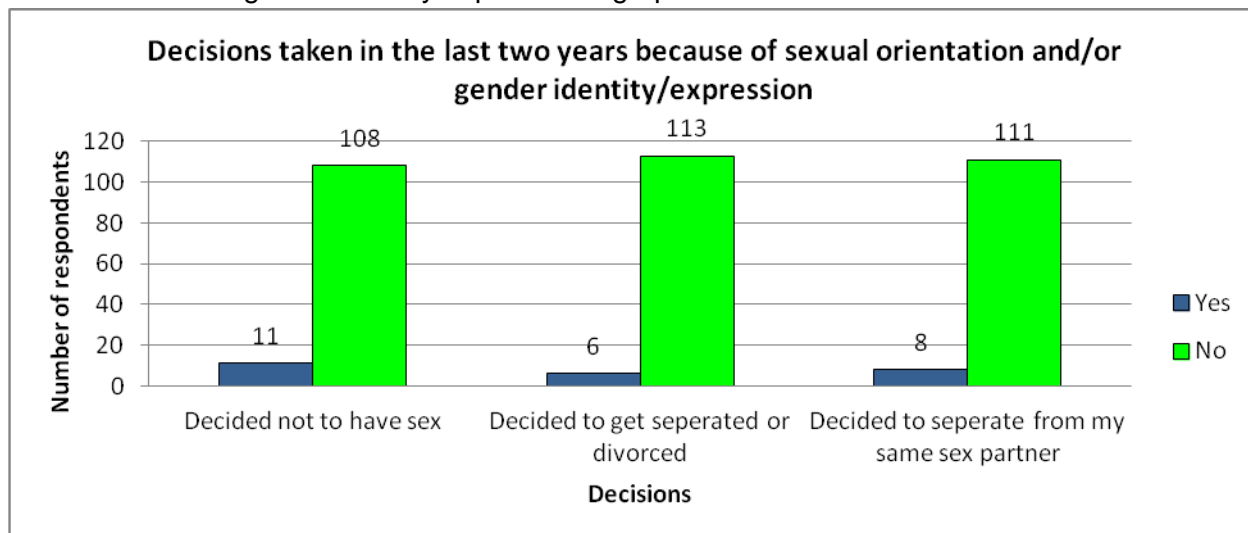
The issue of excessive migration of people is a threat to any country. Of concern is not so much the fact that 26.05% of participants have decided to migrate to urban areas in the last two years, it is the fact that 28.57% have decided to migrate abroad. It is unfortunate that people will be possibly displaced in the sense that they will have to leave their communities, families and friends because they feel unwanted and unwelcomed in their own country. But, it is even more unfortunate for the development of Sri Lanka. This migration abroad will add to the issue of brain-drain in Sri Lanka and has the ability to negatively affect economic development.

Figure 30: Decisions respondents have taken in the last two years because of their sexual orientation and/or gender identity/expression - graph 4



Again the implications of deciding to or not to get married are not truly self-explanatory. An understanding of whether this is to cope with stigma or discrimination or stand one's ground and be true to self is not established. Once more, one's medical health is affected by stigma and discrimination as 5.88% of the respondents have refused seeking needed medical assistance from the hospital.

Figure 31: Decisions respondents have taken in the last two years because of their sexual orientation and/or gender identity/expression - graph 5

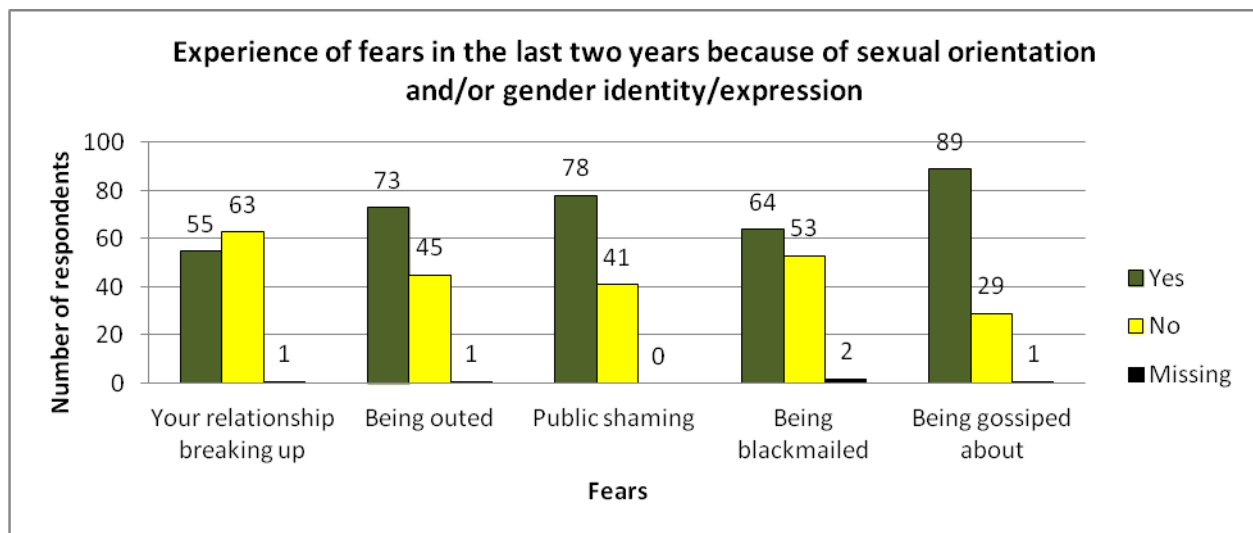


In the last two years some people have decided to separate or get divorced. Others have decided to get separated from their same sex partners while some have decided not to have sex. It is often that homosexuality is reduced to an act of sex. However, more information needs

to be gathered to determine whether the respondent's decision not to have sex is associated with; not wanting to have sex with people of the opposite sex because they do not have heterosexual desires as opposed to not wanting to commit a "moral sin" (related to faith) by having sex with someone of the same sex.

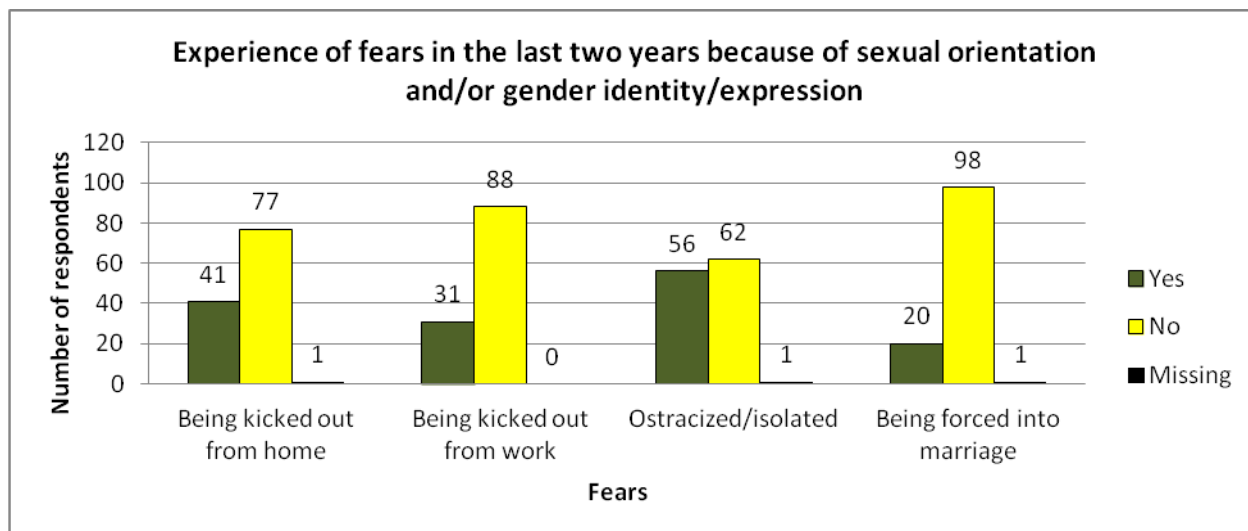
### Experiences of fear

Figure 32: Respondents' experience of fear in the last two years because of their sexual orientation and/or gender identity/expression - graph 1



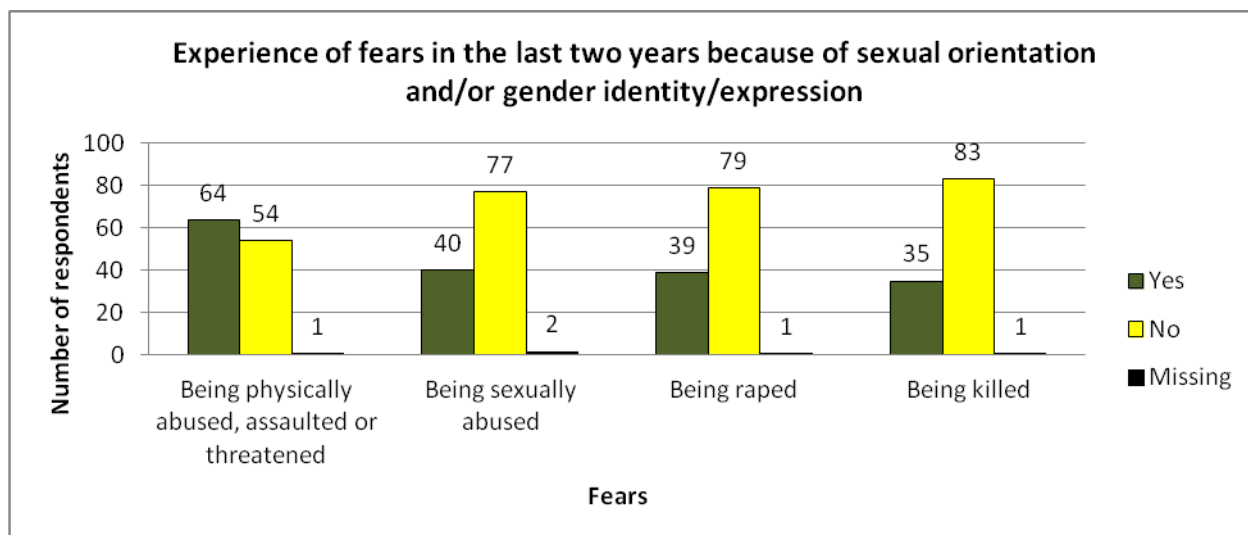
Majority of the respondents experience some kind of fear. Significantly more people fear being gossiped about. Though previously some respondents reported that they had not faced any form of blackmail or manipulation in the last two years, there seems to be many people who fear that this might happen to them. Knowing the effects that stigma and discrimination places on individuals and units on a whole, it is understandable that some people live in constant fear that their same sex relationships can crumble as a result.

Figure 33: Respondents' experience of fear in the last two years because of their sexual orientation and/or gender identity/expression - graph 2



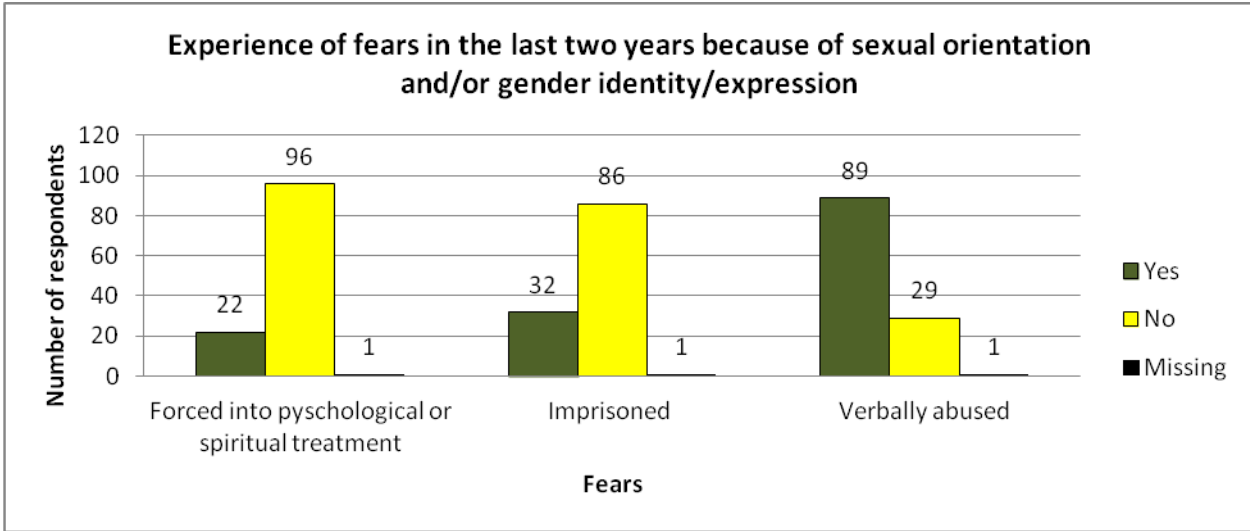
People fear losing their homes and jobs as well as being isolated or ostracized. Generally Sri Lanka still allows forced marriages, hence, it is understanding that LGBT fear being forced into heterosexual marriages. Stigma and discrimination sets people apart as different and against the normal order, it is therefore understandable that so many respondents live in fear of being ostracized because they are LGBT people.

Figure 34: Respondents' experience of fear in the last two years because of their sexual orientation and/or gender identity/expression - graph 3



The experiences of stigma and discrimination based on sexual orientation and/or gender identity is so grave in Sri Lanka that people even fear that they can be killed for being LGBT. It is concerning that so many of the respondents feel that discrimination will take severe physical forms including rape. People feel so powerless in their own sexuality and gender identity and fear that discrimination will include sexual abuse.

Figure 35: Respondents’ experience of fear in the last two years because of their sexual orientation and/or gender identity/expression - graph 4



Considering the fact that Section 365A of the Penal Code of Sri Lanka criminalizes same sex relationships between consulting adults, it is quite understandable that people live in fear of being imprisoned for being LGBT. Of importance though is the influence that this law has on people’s lives. Even though the law has not been used to criminalize anyone in at least 50 years on the basis of homosexuality, people still fear that this law can be used against them.

With 18.49% of respondents fearing that they might be forced into psychological or spiritual treatment it is evident that people do not feel that they have any power to dictate their own lives. Evidently, their sense of power in making decisions for themselves is taken from them. Just as many people fear being verbally abused as being gossiped about. This indicates that these forms of discrimination are prominent in the Sri Lankan society.

#### 4.4. Effecting change

Stigmatization and discrimination has the ability to weaken individuals; people question their worth, make irrational decisions and often either attempt to conform or isolate themselves. This has all been evident in the report thus far. When a group of people are stigmatized even those

that do not face discrimination themselves feel threatened because they identify with those who are being discriminated against.

This section of the report therefore seeks to assess how gravely this group is affected. It will also assess whether this group of people feel that they have the ability to turn things around and lessen or eliminate discrimination they are faced with or the least improve the life experiences of LGBT Sri Lankans.

### Help for stigma

Figure 36: Respondents' knowledge of where to seek help for stigma and discrimination based on sexual orientation and/or gender identity/expression

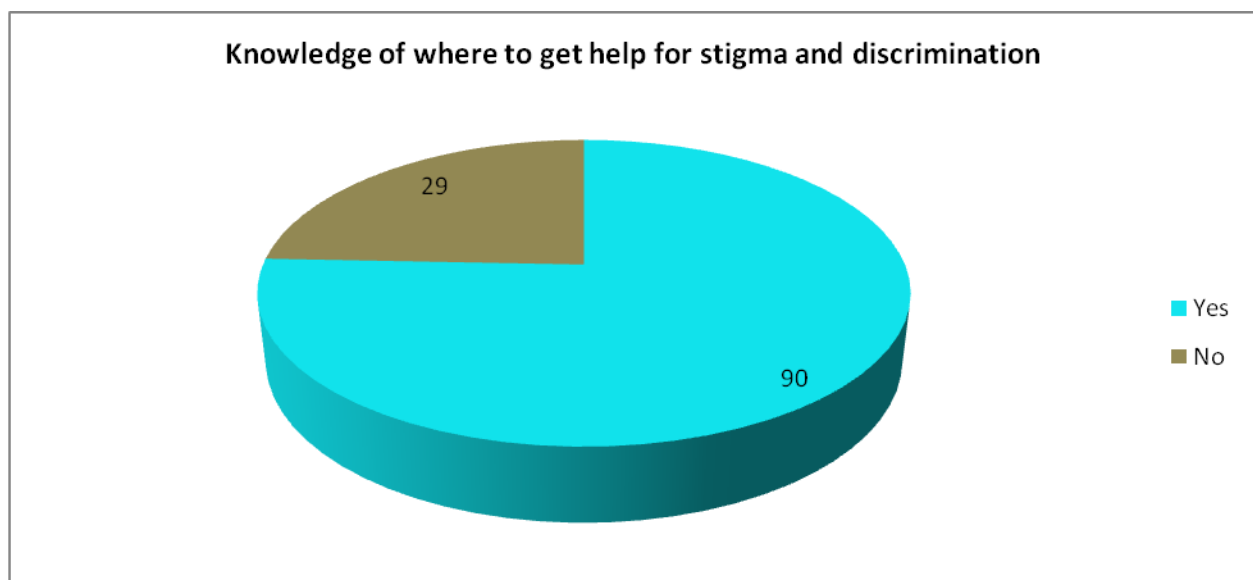
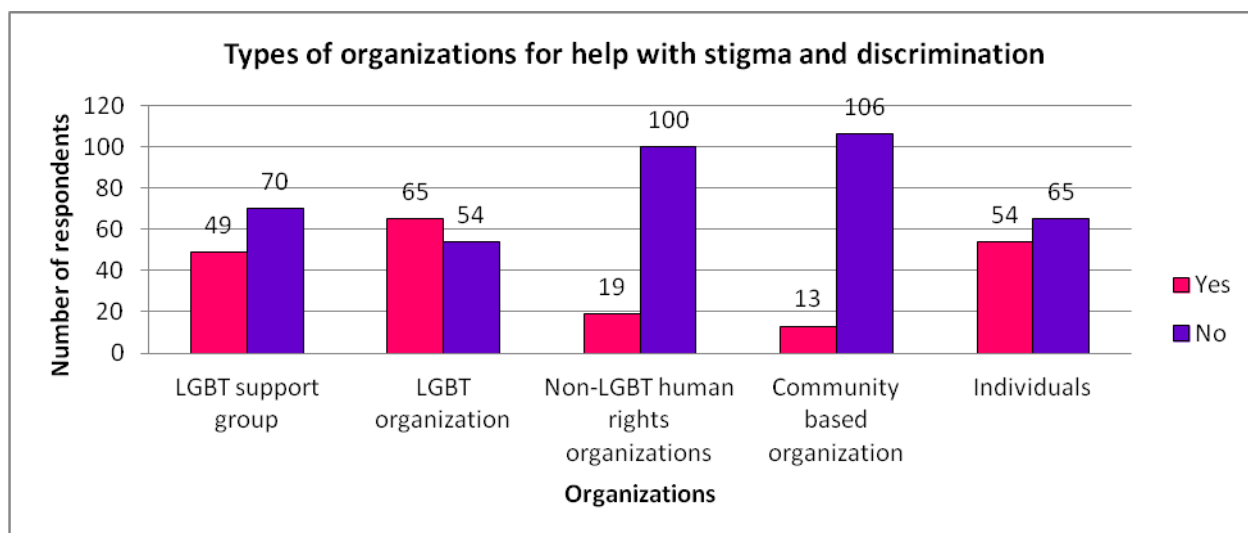
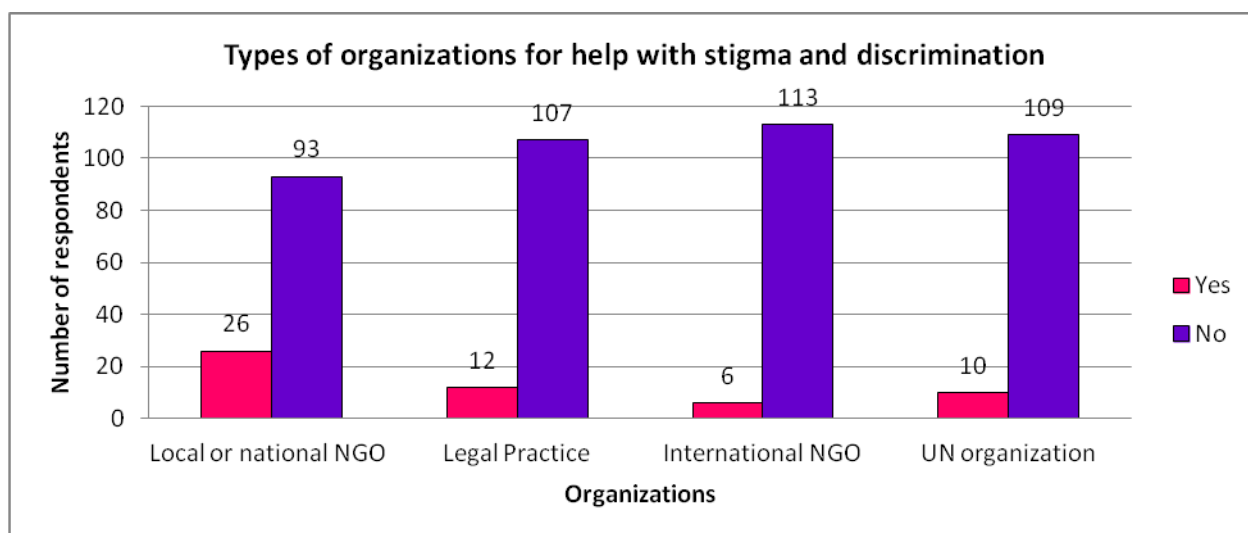


Figure 37: Organizations respondents have access to for help with stigma and discrimination based on sexual orientation and/or gender identity/expression - graph 1



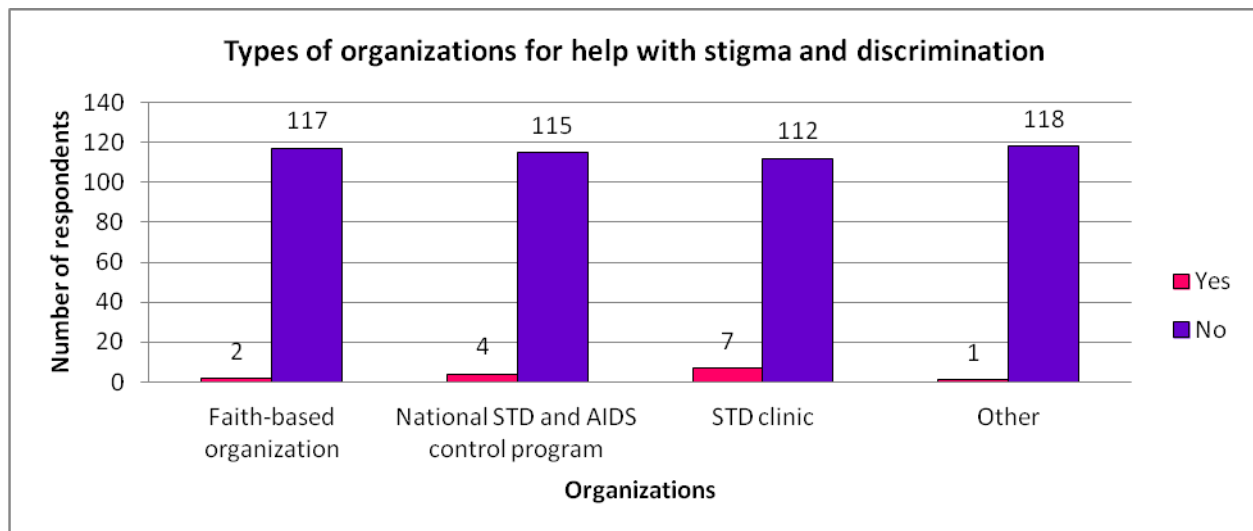
Most respondents know where to get help for stigma and discrimination based on sexual orientation and/or gender identity. Most individuals know of an LGBT organization that they can go to for help. Others have access to LGBT support groups and other individuals. Though not many, people do have access to other human rights organizations that are not LGBT focused and community based organizations.

Figure 38: Organizations respondents have access to for help with stigma and discrimination based on sexual orientation and/or gender identity/expression - graph 2



Individuals have access to other organizations as well that are non-governmental and to legal practices. Some persons also feel comfortable to get help for stigma from UN organizations.

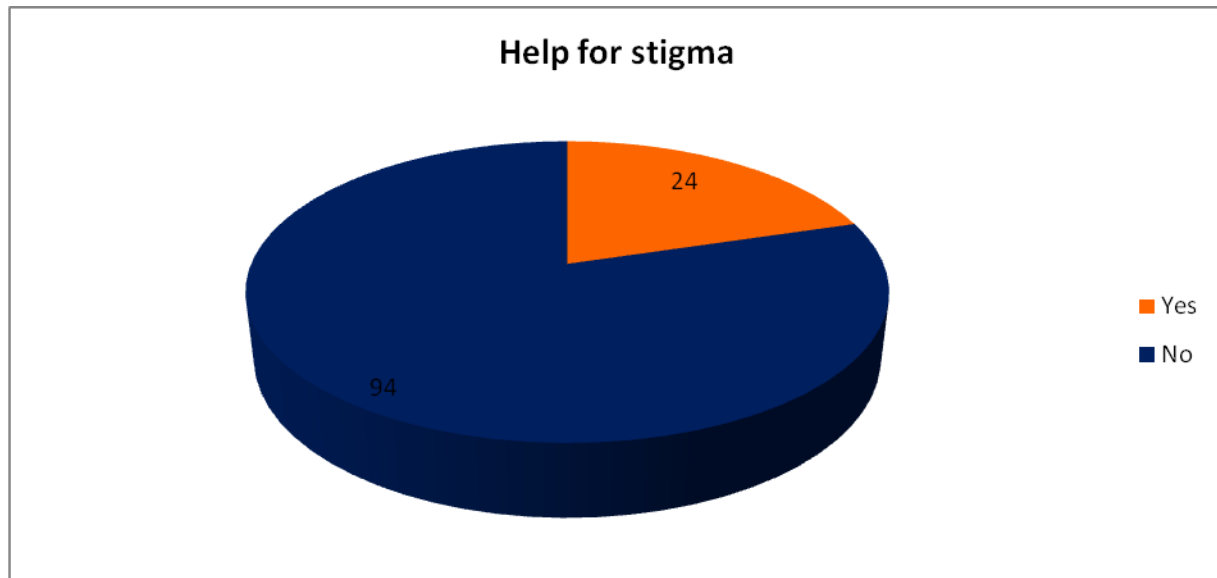
Figure 39: Organizations respondents have access to for help with stigma and discrimination based on sexual orientation and/or gender identity/expression - graph 3



Not many respondents feel they could seek help from faith based organizations for stigma and discrimination. Respondents know of STD clinics and other national STD and AIDS control programs that they could go to for help for stigma and discrimination on the basis of sexual orientation and gender identity. One individual knows of a women's rights organization that he/she could go to for help for stigma and discrimination related to gender identity and sexual orientation.



Figure 40: Distribution of respondents seeking help for stigma and discrimination in the last two years



Though many people know of where to go to get help for stigma and discrimination and so many respondents are constantly faced with stigma and discrimination even to the extent that this is often detrimental, only 20.19% of the respondents have actually sought some form of help. More research needs to be done to ascertain why some people refuse to seek help even though they are faced with stigma and discrimination.

## Support afforded to others

Figure 41: Distribution of whether respondents gave any form of assistance or support to other LGBT persons in the last two years

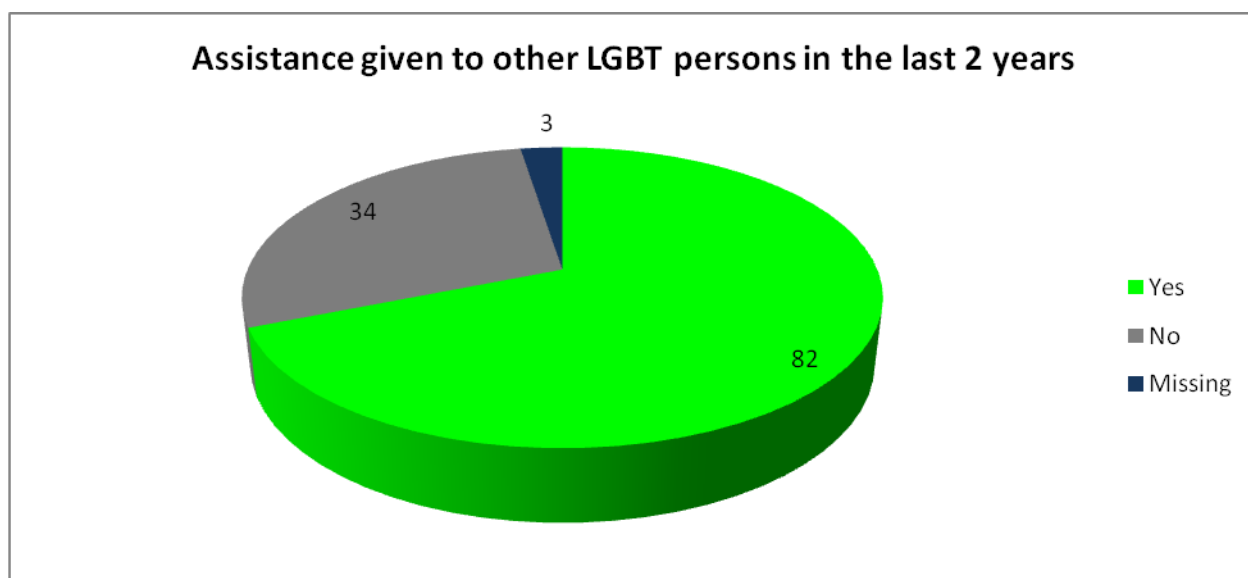
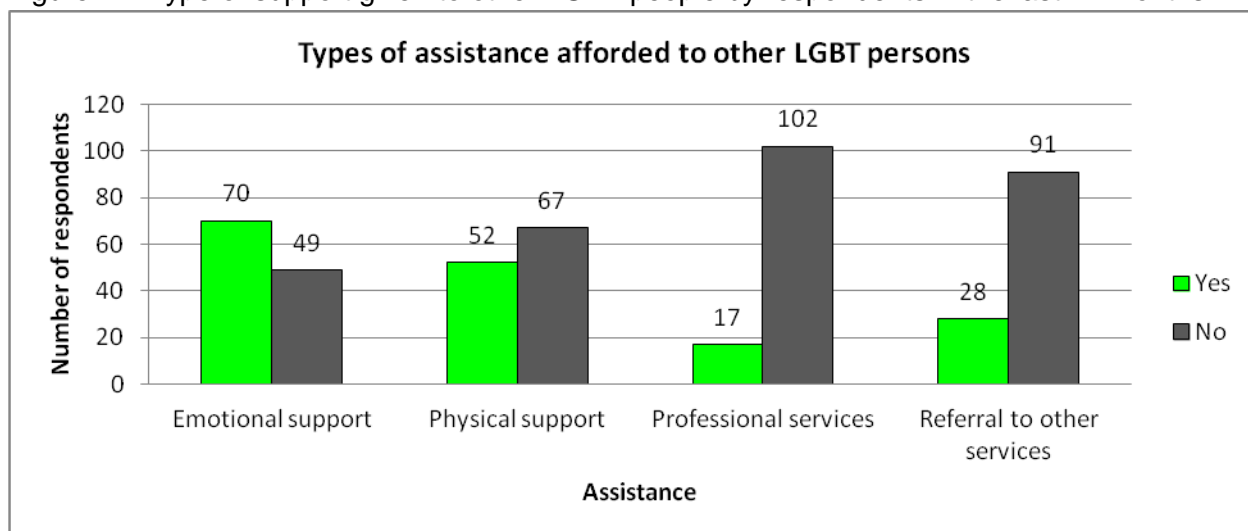


Figure 42: Type of support given to other LGBT people by respondents in the last 24 months



Respondents appear to be very supportive of other LGBT persons. This demonstrates a form of understanding for each others needs and experiences. Most respondents have provided emotional support to other LGBT persons in the last 24 months. A large number of respondents have provided other LGBT persons with physical support such as food or money among others.

Respondents provided other LGBT persons with professional services and 23.53% of the respondents referred LGBT persons to other services.

### Association to LGBT focused organizations

Table 23: Crosstabulation of respondents who are registered at an LGBT organization and respondents against whether respondents feel the need to be part of an LGBT organization

Registered at an LGBT organization	Feel the need to be a member of an LGBT organization		Total
	Yes	No	
Yes	34	0	34
No	39	46	85
Total	73	46	119

Respondents were asked to state whether they were registered as a member with any organizations that are focused on LGBT issues. By this, it not only considered organizations who take a holistic approach to address issues of the entire LGBT community, it also included organizations that are focused on one set of members from the group such as those focused only on trans issues. Only 28.57% of the respondents are registered at an LGBT focused organization. While the remaining 85 persons are not registered at an LGBT organization 45.88% of that number feel that there is a need to be affiliated with such an organization. Some people were neither registered at an LGBT organization nor did they feel the need to be associated with one.

The number of people registered at LGBT organizations and those who feel the need to be registered at one demonstrated that people are willing to seek some form of redress for the stigma and discrimination they are faced with in society. Most of the people who were registered at LGBT organizations were also the ones who have sought help for the stigma and discrimination they faced.

## Laws relating to sexual orientation and gender identity

Figure 43: Respondents' awareness of laws affecting the LGBT community in Sri Lanka

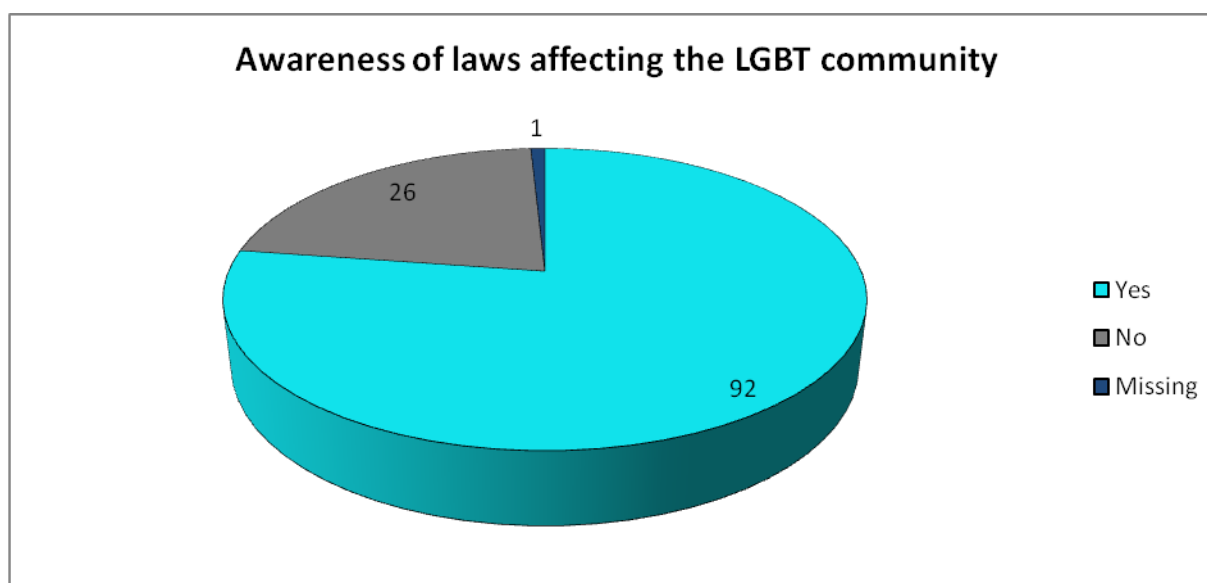
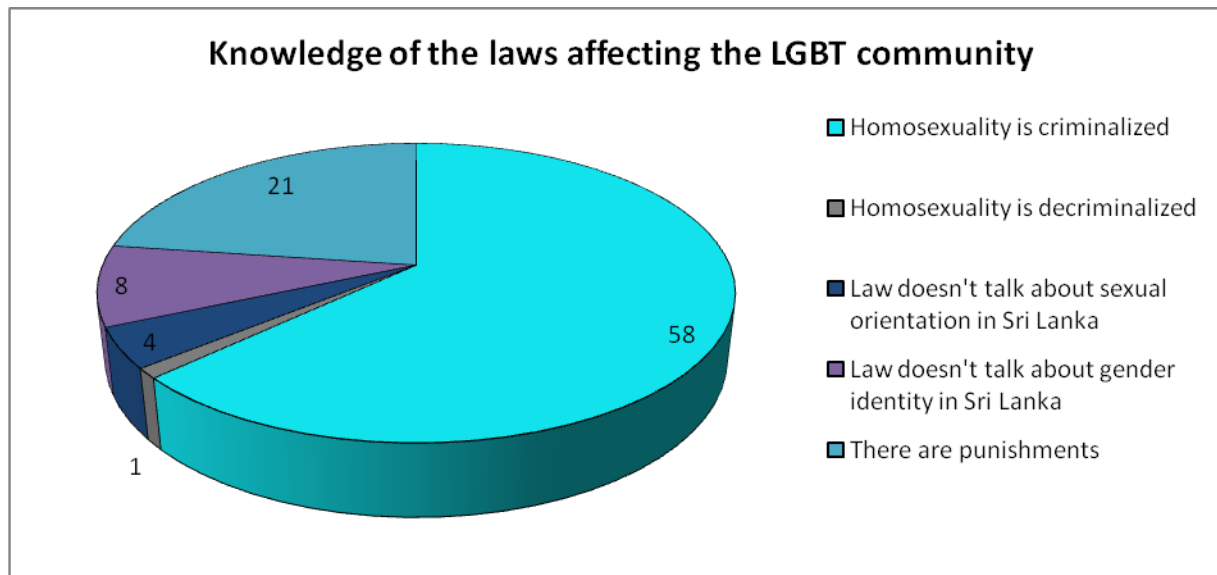


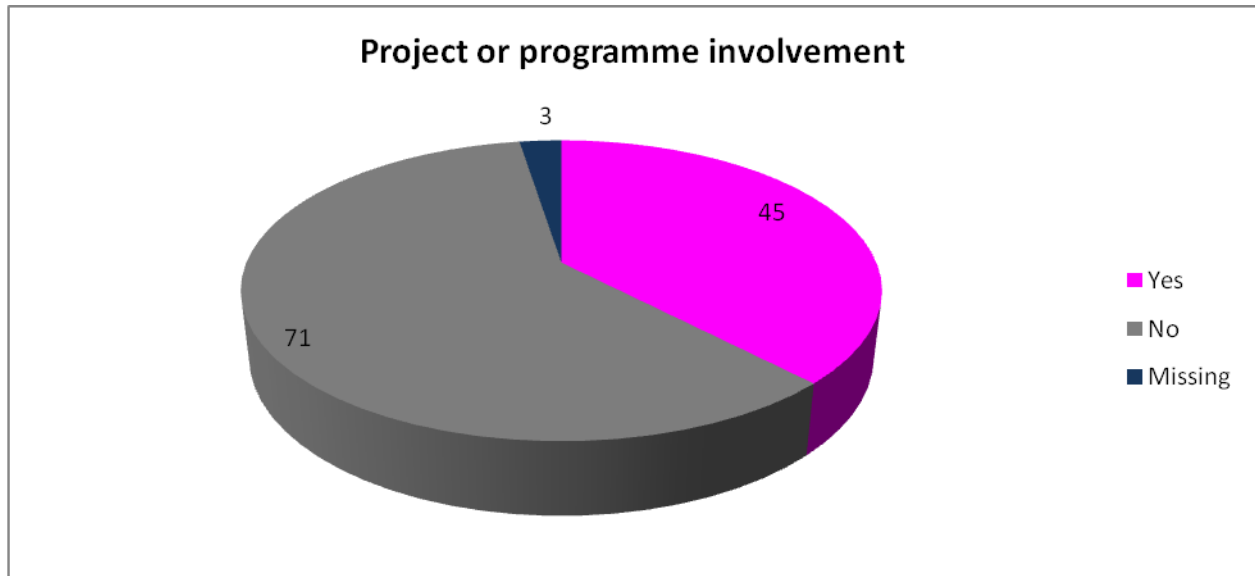
Figure 44: Respondents' general knowledge of the laws affecting the LGBT community



Though 77.31% of the respondents reported that they were aware of the laws affecting LGBT people in Sri Lanka, only 63.04% of those 92 people had correct knowledge of the law. Homosexuality is criminalized under section 365A of the penal code and is punishable by 2 to 10 years imprisonment.

### Involvement in programs and/or projects

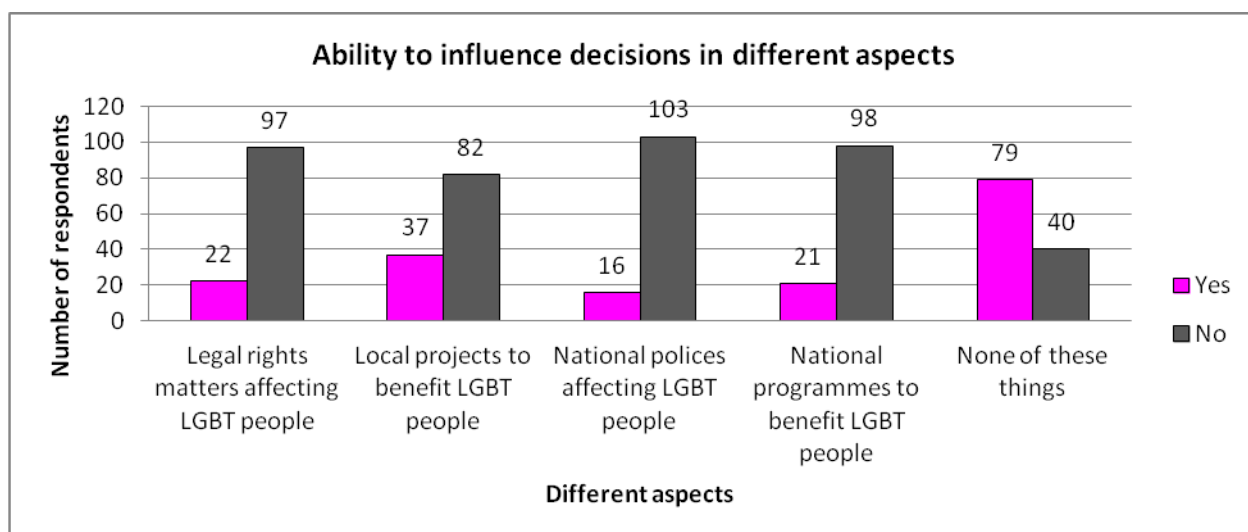
Figure 45: Respondents' involvement in programs and/or projects that provide assistance to persons of the LGBT community



Most of the respondents reported that they were not involved in any structured programs and/or projects that was primarily focused on providing assistance to LGBT people. Though only 37.82% of the respondents are involved, it is remarkable that the ratio of non involvement is only 1:1.63. This suggests that LGBT people are willing to get involved to advance their own lives and that of the rest of the highly stigmatized LGBT community.

## Ability to influence decisions

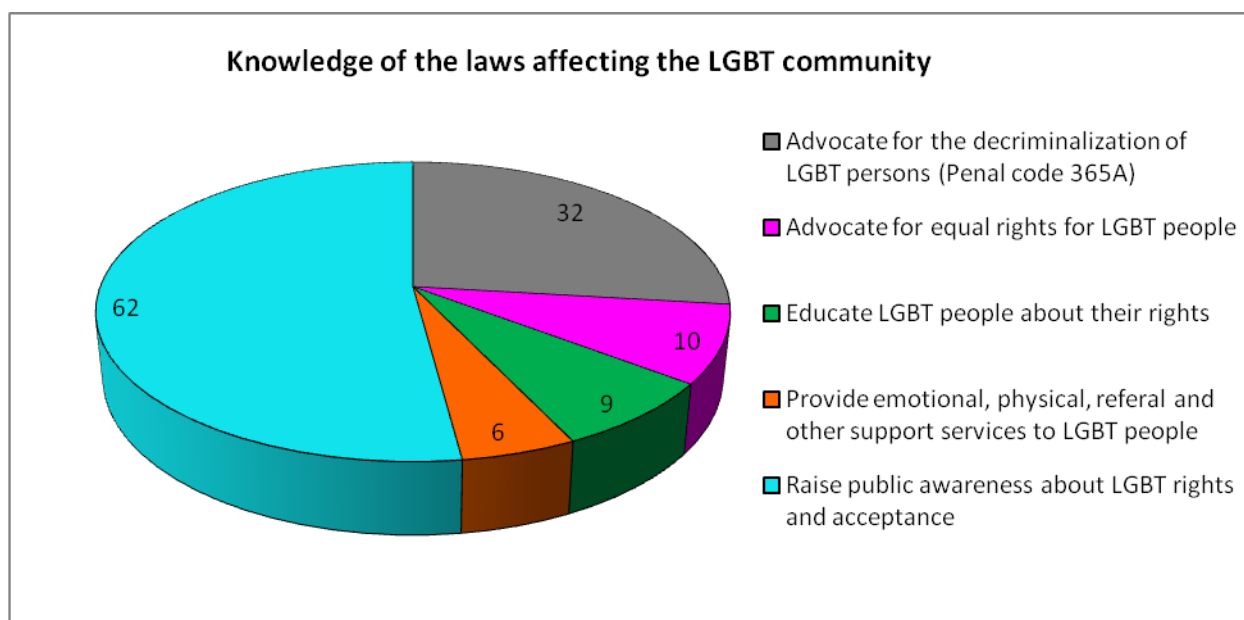
Figure 46: Responses to interviewees' belief that they have any ability to influence decisions in different aspects



Majority of the respondents feel that they do not have the ability to influence any form of policies, programmes, legal rights matters or projects regarding LGBT people. However, 31.09% feel that they have the ability to influence the direction of local projects to benefit LGBT people. Many people believe they have the ability to influence legal rights matters affecting LGBT people. What is encouraging is the fact that 13.45% and 17.65% of the respondents believe they have the ability to influence national policies affecting LGBT people and national programmes to benefit LGBT people respectively.

## Focus to relieve stigma and discrimination

Figure 47: The most important thing respondents believe organizations and individuals working against LGBT related stigma and discrimination should be focused on



Respondents were asked what was the one thing they thought was most important for organizations and individuals working on stigma and discrimination against LGBT people should be focused on. Most of the respondents reported that the main focus should be on raising awareness about LGBT rights and acceptance. More than 25% of the respondents felt that the main focus should be on advocating for decriminalization. Another 8.4% think that the main focus should be advocating for equal rights for LGBT people and another 7.56% feels that it should be to educate LGBT people about their rights. Minority of the respondents feel that individuals and organizations should be focused on providing emotional, physical, referral and other support services to LGBT people.

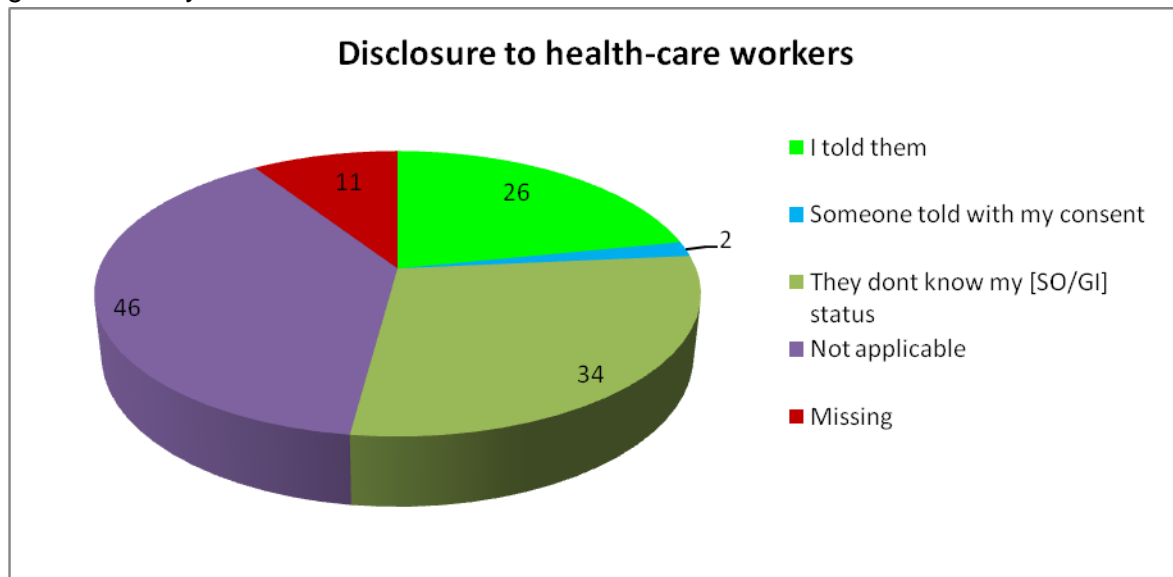
## 4.5. Disclosure and confidentiality

Where stigma and discrimination is directed towards a group of people it is likely that even members of the group who are not directly affected will take extreme measures to not be associated with that group. They develop trust issues also and will only be open to individuals they feel would not harm them. On the other hand where stigma is associated to an act, people attempt to discriminate against the stigmatized in an attempt to cause shame or cause them to be isolated or ostracized. In many cases LGBT people outed by either people they trust or people who simply assume that they are LGBT.

This section of the report will seek to associate how different people first came to know about respondents' sexual orientation and/or gender identity. It will also give information about confidentiality issues related to gender and sexual orientation.

### Civil servants

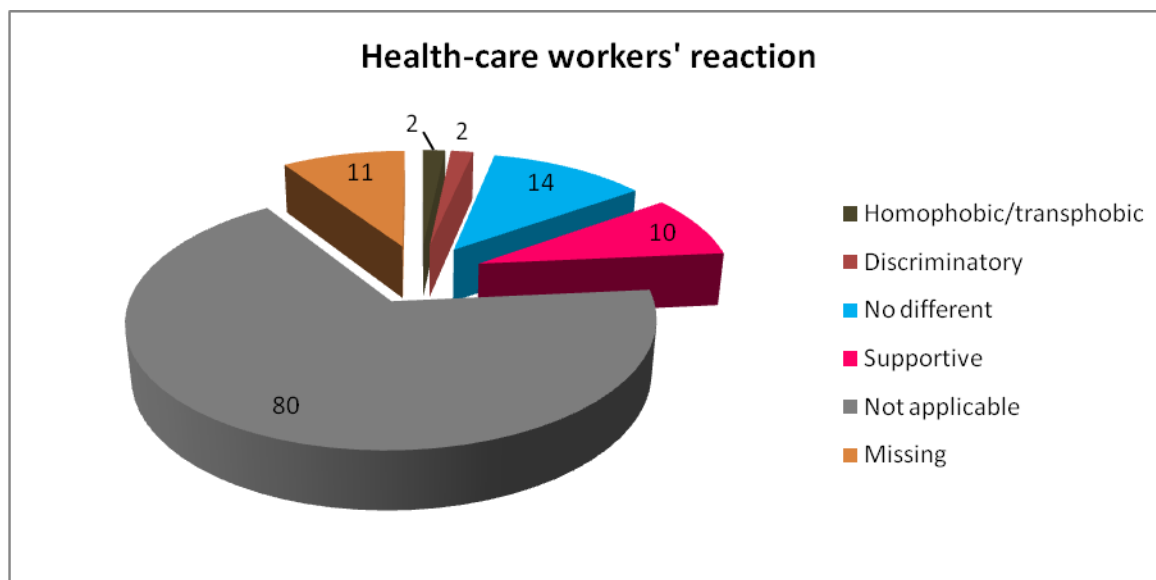
Figure 48: How health-care workers came to know about respondents' sexual orientation and/or gender identity



With 52.1% of the individuals reporting that health-care workers knew about their sexual orientation and/or gender identity, only 41.94% of them had told them about this themselves. Another 3.23% of the respondents had given consent to someone else to tell health-care workers about their sexual orientation and/or gender identity. More than 50% of the respondents reported that health-care workers did not know about their sexual orientation and/or gender identity.

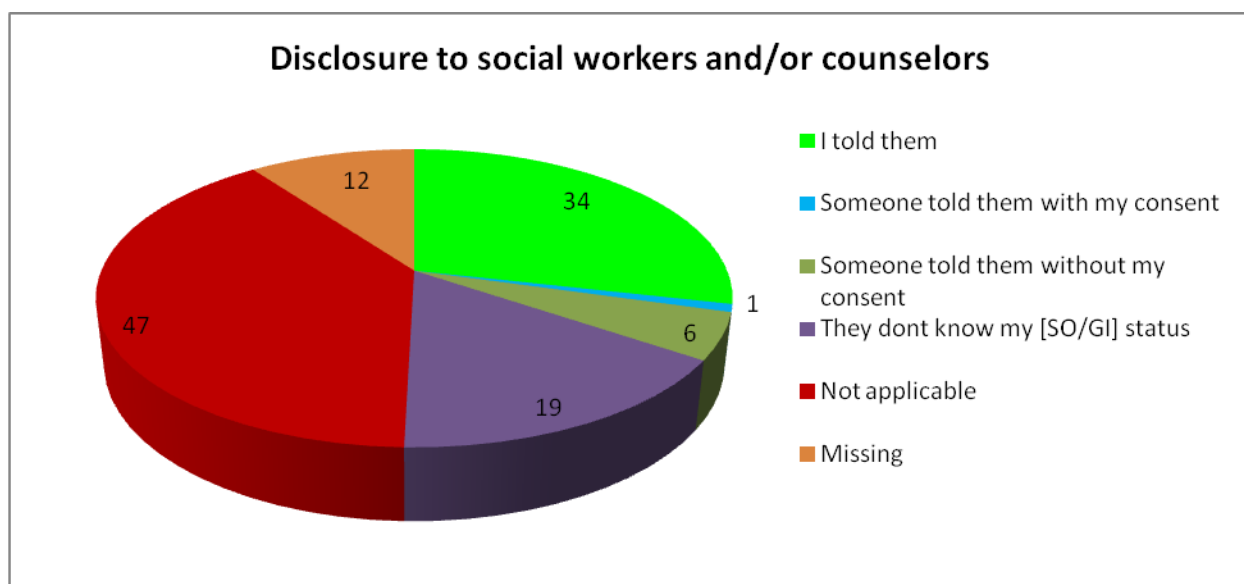


Figure 49: Health-care workers' reaction towards respondents when they found out about their sexual orientation and/or gender identity



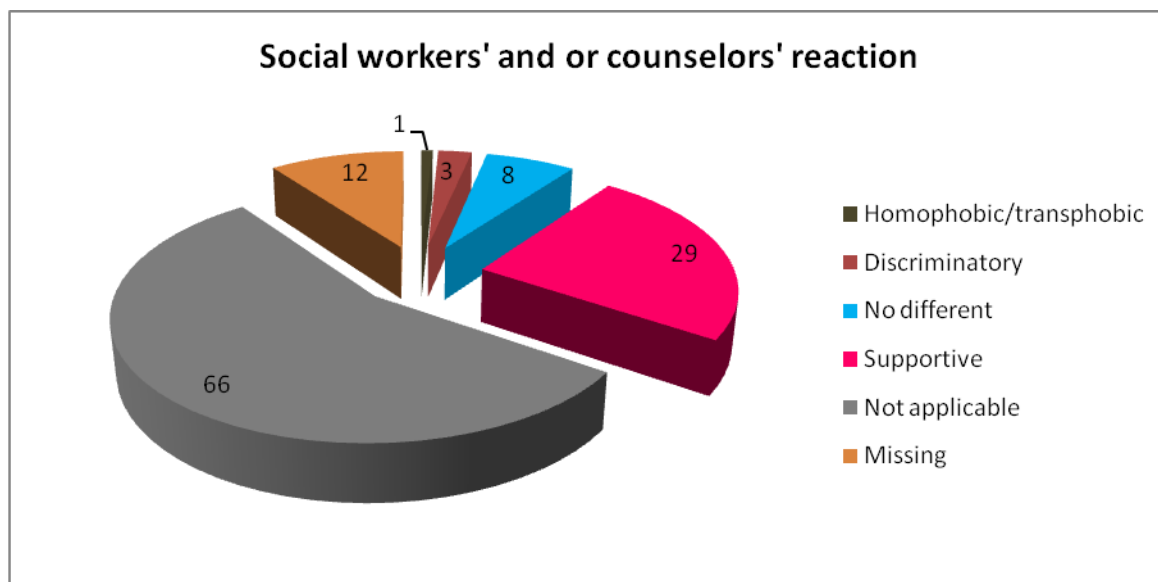
Of the 28 persons who reported that health-care workers knew of their sexual orientation and/or gender identity, 50% and 35.71% reported that health-care workers treated them no differently while others were supportive respectively. The 14.29% of people who reported that health-care workers were discriminatory, transphobic or homophobic reveals that discrimination spans to the health-care system.

Figure 50: How social workers and/or counselors came to know about respondents' sexual orientation and/or gender identity



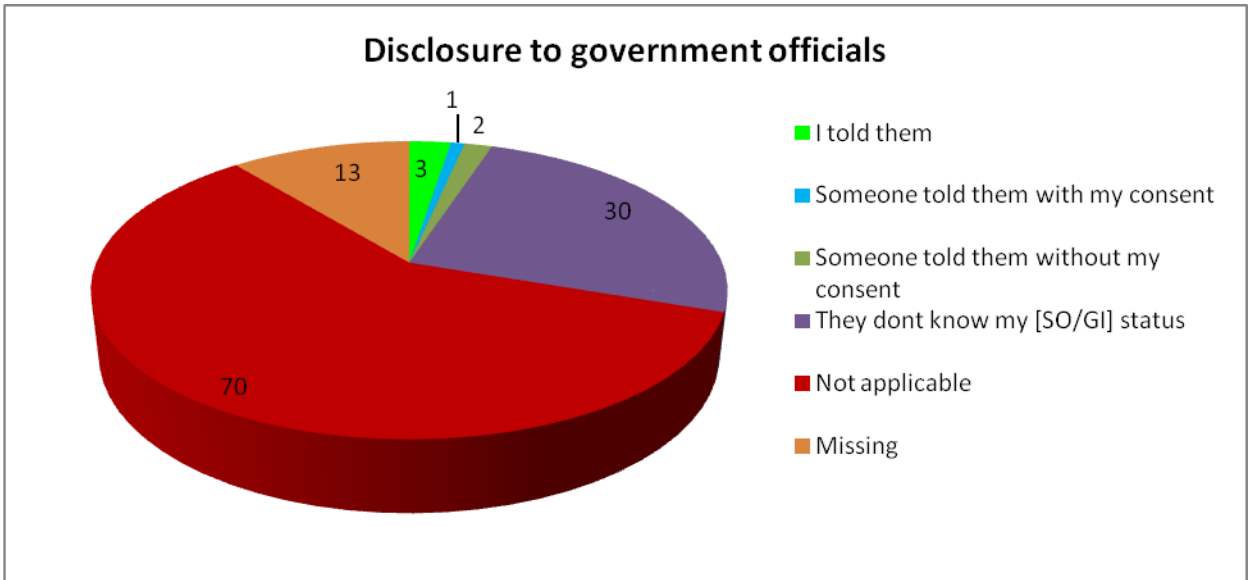
Of the 41 persons whose sexual orientation and/or gender identity is known by social workers or counselors, 82.29% of them have stated that this was disclosed by them. With seven people having their sexual orientation and/or gender identity disclosed of by others only 14.29% consented to this prior to the disclosure and the others did not authorize at all. More research needs to be done to see if disclosure to social workers and/or counselors was malicious. It is important to know whether or not non-consensual disclosure by others is stigmatic or an attempt to afford LGBT people some form of redress.

Figure 51: Social workers' and/or counselors' reaction towards respondents after finding out about their sexual orientation and/or gender identity



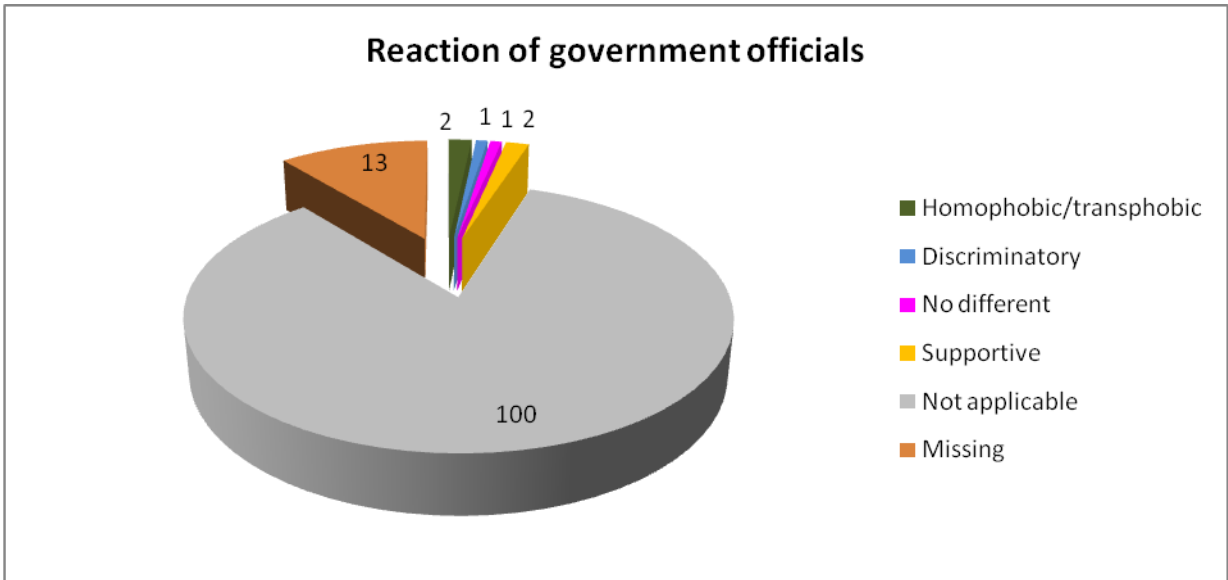
Majority of the respondents reported that social workers and/or counselors were supportive or acted no different after they found out about their sexual orientation and/or gender identity. There is a problem of discrimination and stigma displayed by some social workers.

Figure 52: Disclosure of respondents' sexual orientation and/or gender identity to government officials



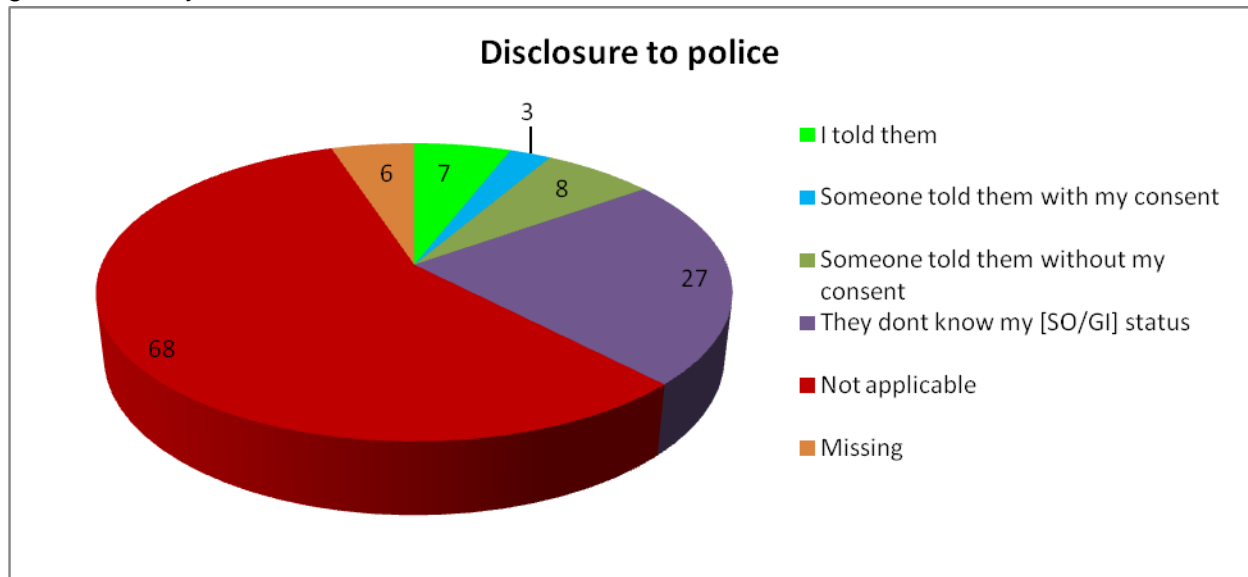
Only six persons reported that government officials knew about their sexual orientation and/or gender identity. Equally, 50% of them reported that they disclosed themselves and that someone else disclosed for them.

Figure 53: Reaction of government officials towards respondents after finding out about their sexual orientation and/or gender identity



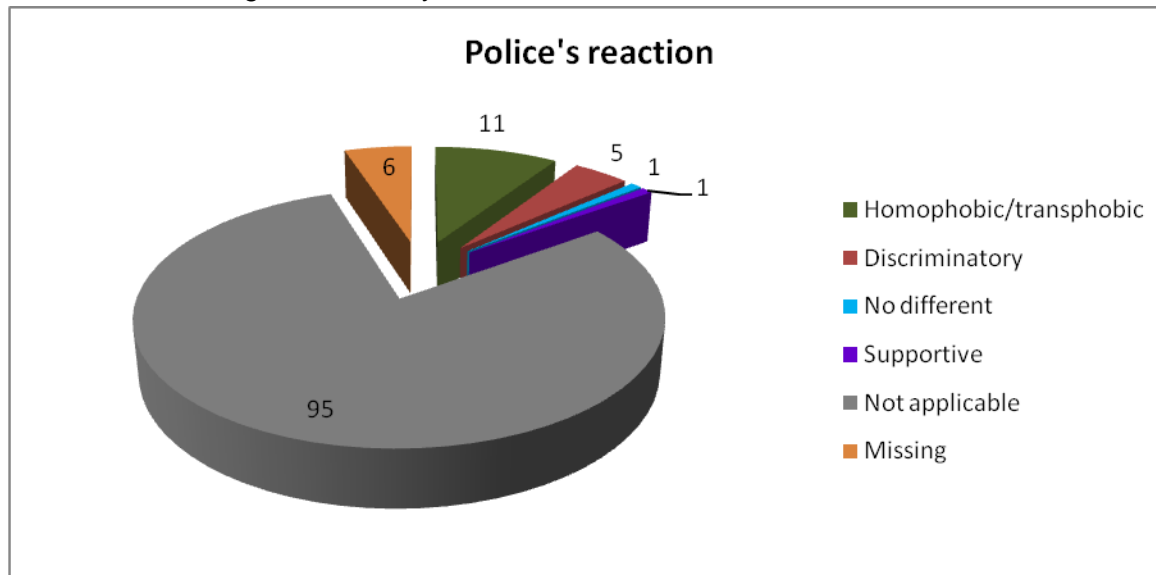
The exact same persons who reported that they disclosed themselves reported that they were either treated no differently or that they were supportive. The three individuals who reported that their sexual orientation or gender identity were disclosed of by others reported that government officials were either transphobic, homophobic or discriminatory. This data suggests that people are more likely to disclose if they anticipate that people will not be discriminatory towards them.

Figure 54: How the police came to know about the respondent's sexual orientation and/or gender identity



More people have reported that their sexual orientation and/or gender identity was disclosed of by people other than them. Only 5.88% of the respondents reported that they disclosed to police themselves. More research needs to be done to gather whether disclosure made by individuals was forced or voluntary.

Figure 55: Reaction of police towards respondents after gaining knowledge about their sexual orientation and/or gender identity

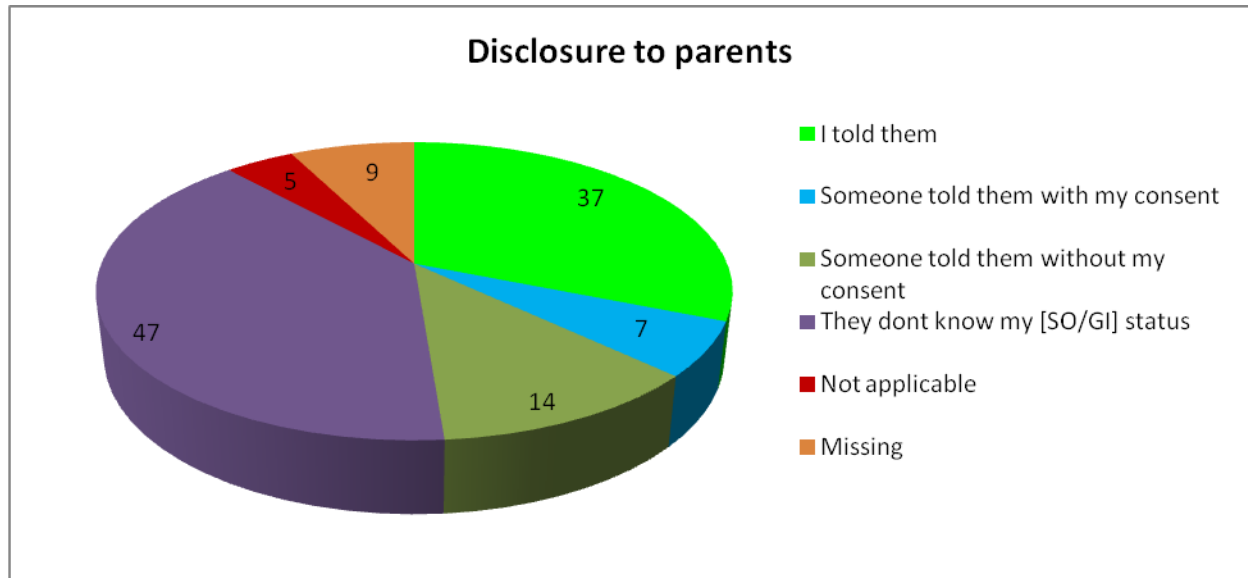


For all but one of the respondents who reported that the police gained knowledge about their sexual orientation and/or gender identity from other people the police have responded negatively. Police are evidently homophobic, transphobic and discriminatory towards LGBT people. They have displayed this form of behaviour towards 88.89% of the respondent's who they knew or suspected to be LGBT people.

On the other hand some police have shown some form of humanity towards LGBT people by being supportive towards them. Others have treated LGBT no different after learning about their sexual orientation and/or gender identity. This too suggests that where respondents believe that police will be non-discriminatory they are more likely to disclose their sexual orientation and/or gender identity.

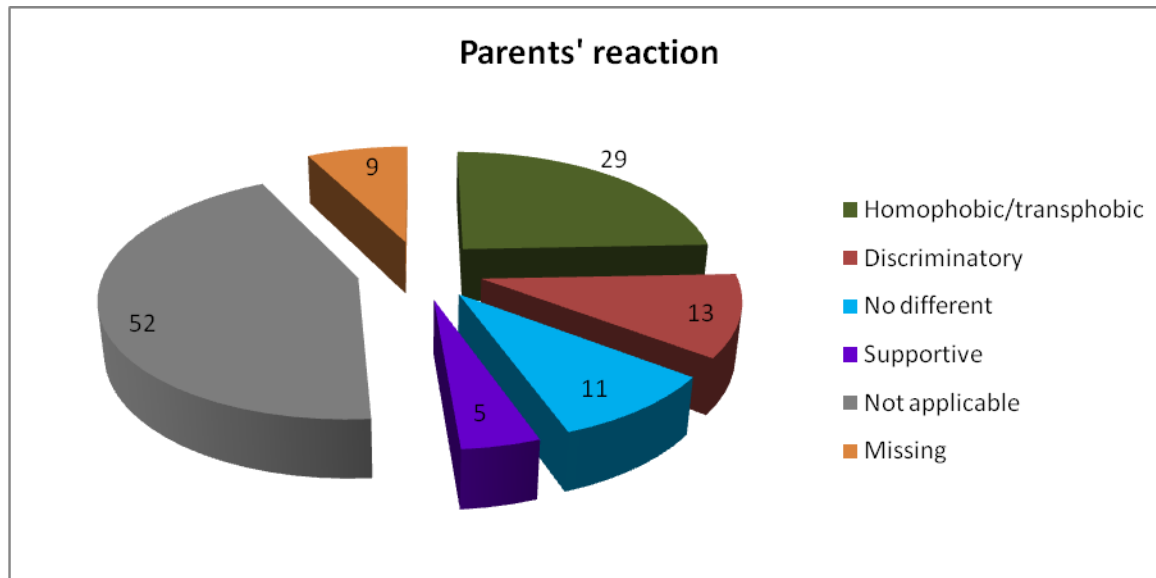
## Family and friends

Figure 56: Disclosure to respondent's parents about their sexual orientation and/or gender identity



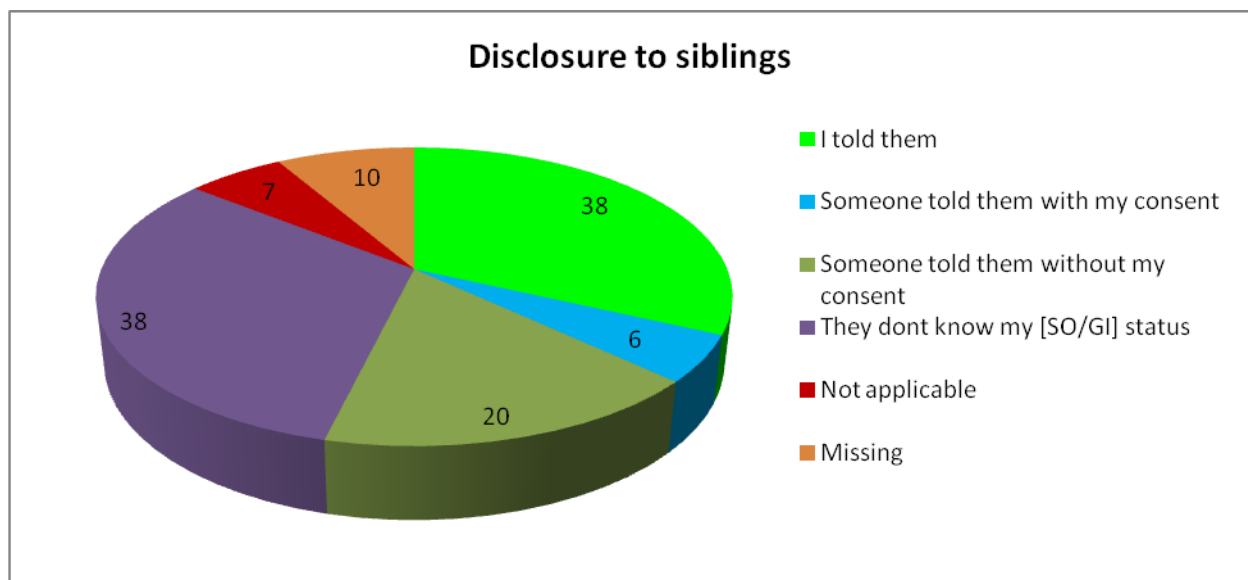
Many participants reported that their parents do not know about their sexual orientation and/or gender identity. Of the 58 individuals who reported that their parents knew about their sexual orientation and/or gender identity 36.21% of them stated that this disclosure was made by someone other than them. The majority reported that they did not authorize this disclosure.

Figure 57: Parents' reaction towards respondent's after finding out about their sexual orientation and/or gender identity



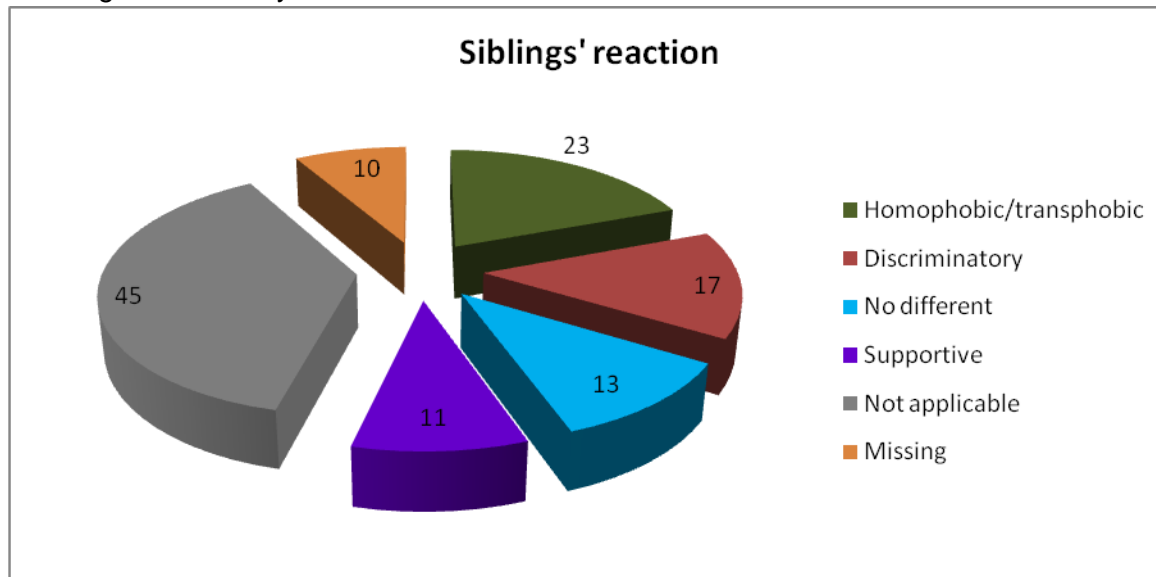
More respondents have reported that their parents have acted homophobic, transphobic or discriminatory after finding out about their sexual orientation and/or gender identity. However, 27.59% of these parents have been either supportive or have acted no different towards them.

Figure 58: How respondents' siblings came to know about their sexual orientation and/or gender identity



Respondents seem likely to disclose to their siblings. Of those whose siblings are aware of their sexual orientation and/or gender identity 31.25% of them did not agree to this disclosure. Many respondents stated that their siblings did not know about their sexual orientation and/or gender identity.

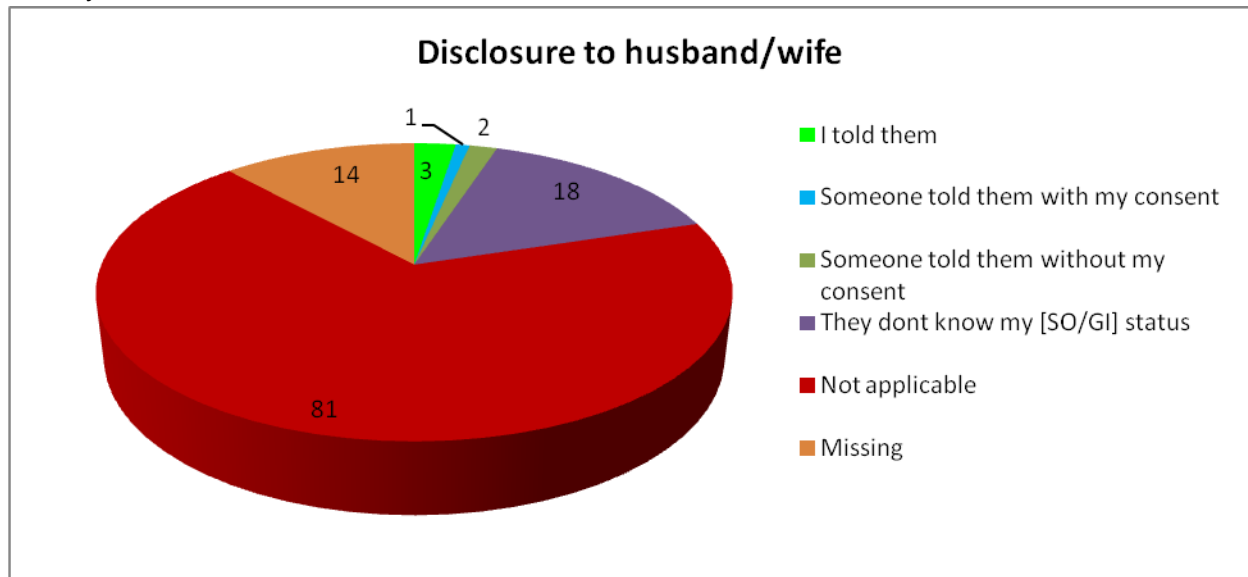
Figure 59: Siblings' reaction towards respondents after finding out about their sexual orientation and/or gender identity



Most respondents stated that their siblings have acted homophobic, transphobic or discriminatory towards them after finding about their sexual orientation and/or gender identity. Of the 64 respondents whose sexual orientation and/or gender identity have been disclosed to their siblings 37.5% of them have received support or have been treated no differently.

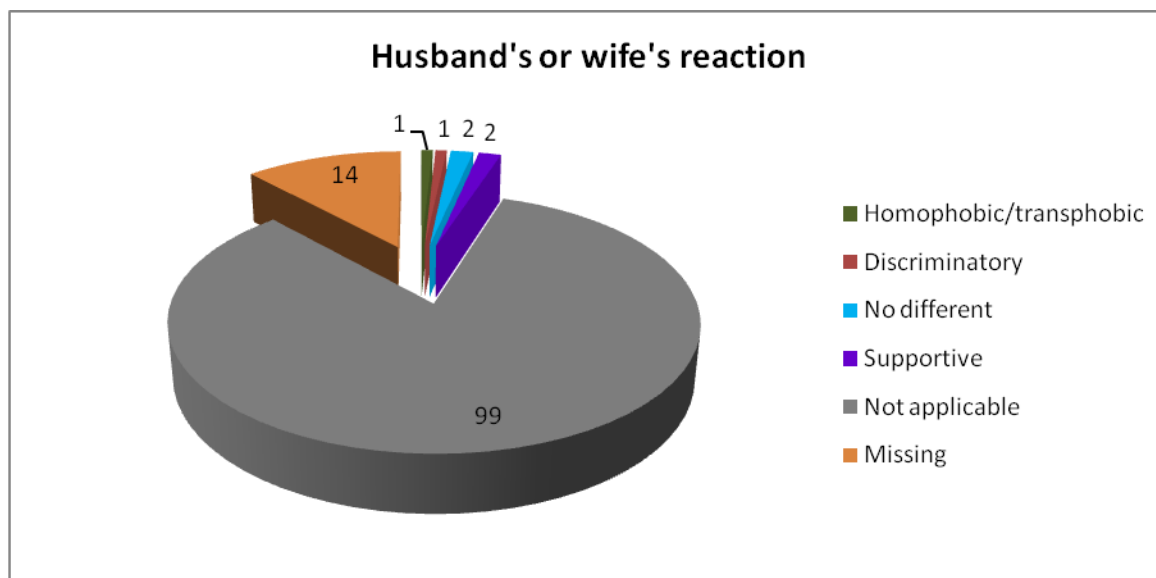


Figure 60: Disclosure to respondents' husband/wife about their sexual orientation and/or gender identity



Where applicable majority of the respondents have reported that their husbands/wives do not know about their sexual orientation and/or gender identity. Again some persons reported that their sexual orientation and/or gender identity was disclosed of without their consent.

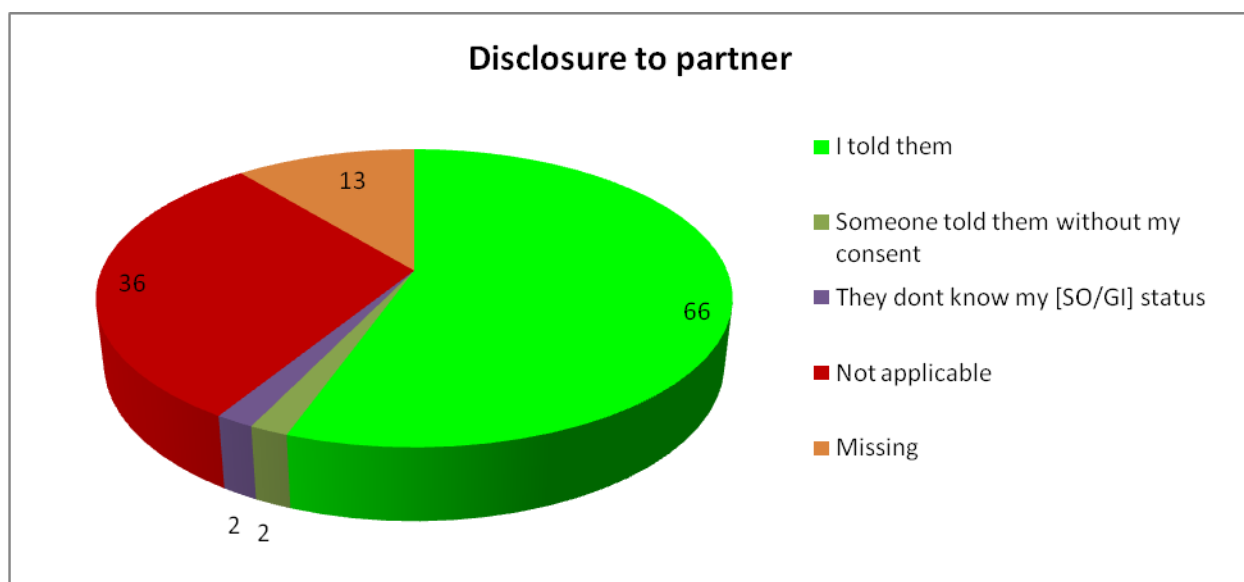
Figure 61: Reaction of husband or wife towards respondents after finding out about their sexual orientation and/or gender identity



Majority of the respondents' husbands/wives have reacted in a supportive way or have acted no different after learning about their sexual orientation and/or gender identity. Though it is

unacceptable to justify stigma, more research must be done to understand whether this stigma is based entirely on the fact that one is LGBT or whether their spouses reacted in this manner based on hurt, deceit or for other reasons not entirely related to homophobia or transphobia. This clarity needs to be made due to the fact that the same two people whose sexual orientation and/or gender identity was disclosed by someone else without their consent are the persons whose spouses have reacted in this manner.

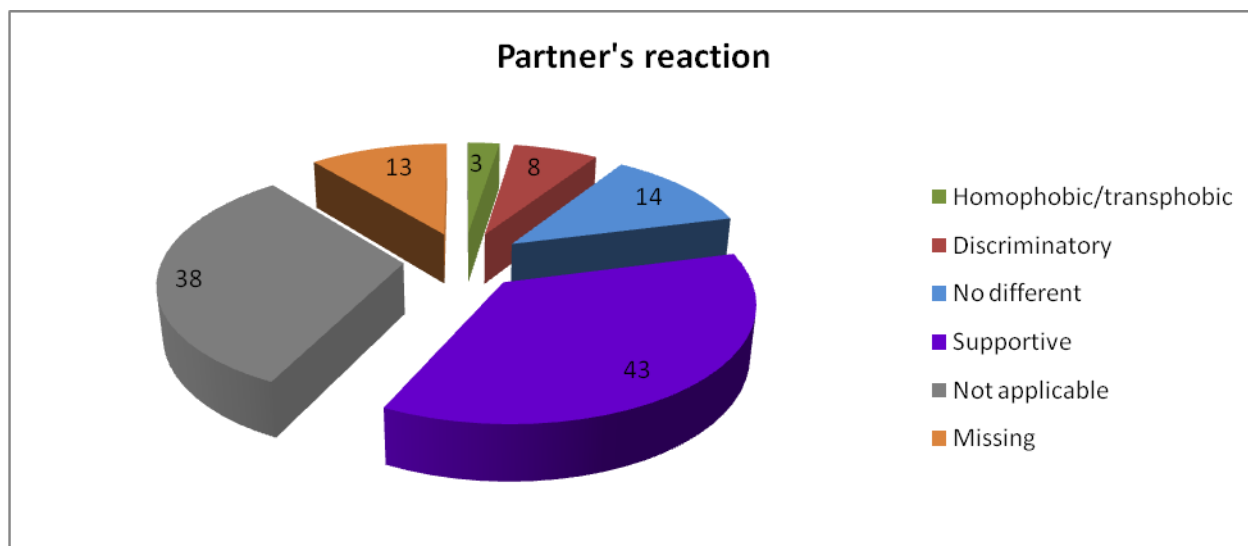
Figure 62: Disclosure of respondents' sexual orientation and/or gender identity to same-sex partner



Respondents were asked how their same-sex partners first became aware of their sexual orientation and/or gender identity. More people are willing to disclose their sexual orientation and/or gender identity to their partners'. This increase in the number of people who disclose themselves is contextual. It is expected that in order to engage in a loving same-sex relationship they have to disclose.

The two people who reported that their partners do not know of their sexual orientation and/or gender identity are bisexual and transgender. This suggests that people are afraid of being stigmatized even by people who form part of the stigmatized group they too are part of.

Figure 63: Reaction of same-sex partners towards respondents after finding out about their sexual orientation and/or gender identity

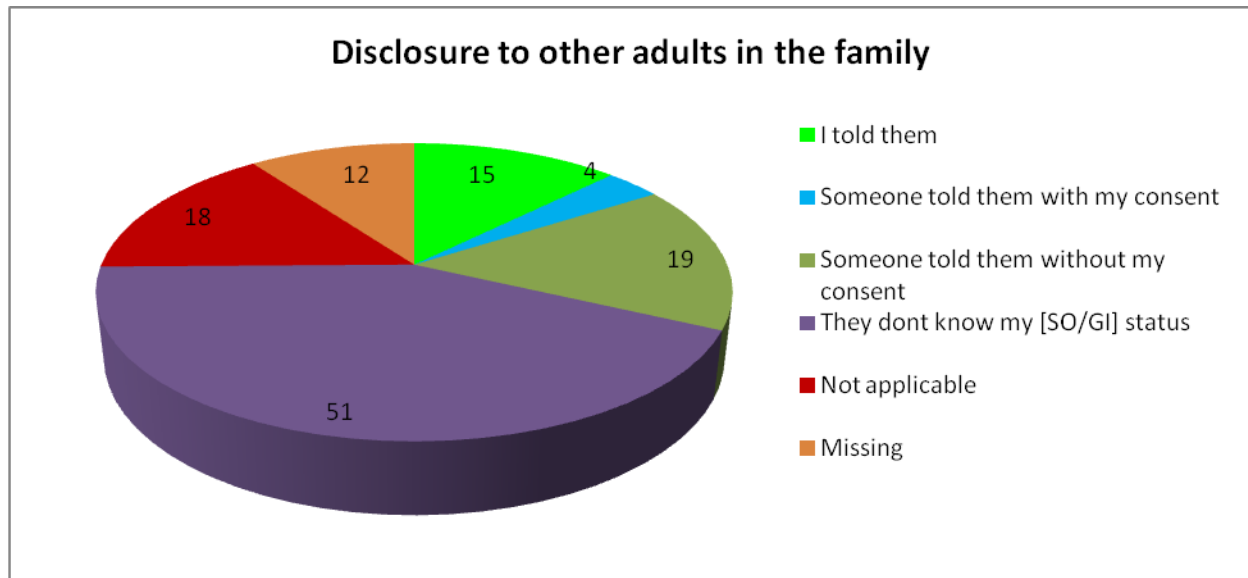


There is also expression of stigma within the LGBT community. The respondents who reported that their partners either acted homophobic, transphobic or discriminatory were in same-sex relationships and either came out as transgendered or bisexual people. This expression of stigma LGBT people themselves express towards other LGBT persons exemplifies the gravity of stigma and discrimination surrounding homosexuality and transsexuality in Sri Lanka.

One transgender person reported that their partner was discriminatory after being told by someone else that she's transgendered. Again the basis of stigma and discrimination needs to be understood. Whether people would be less homophobic if LGBT people are honest and open with them is called into question.

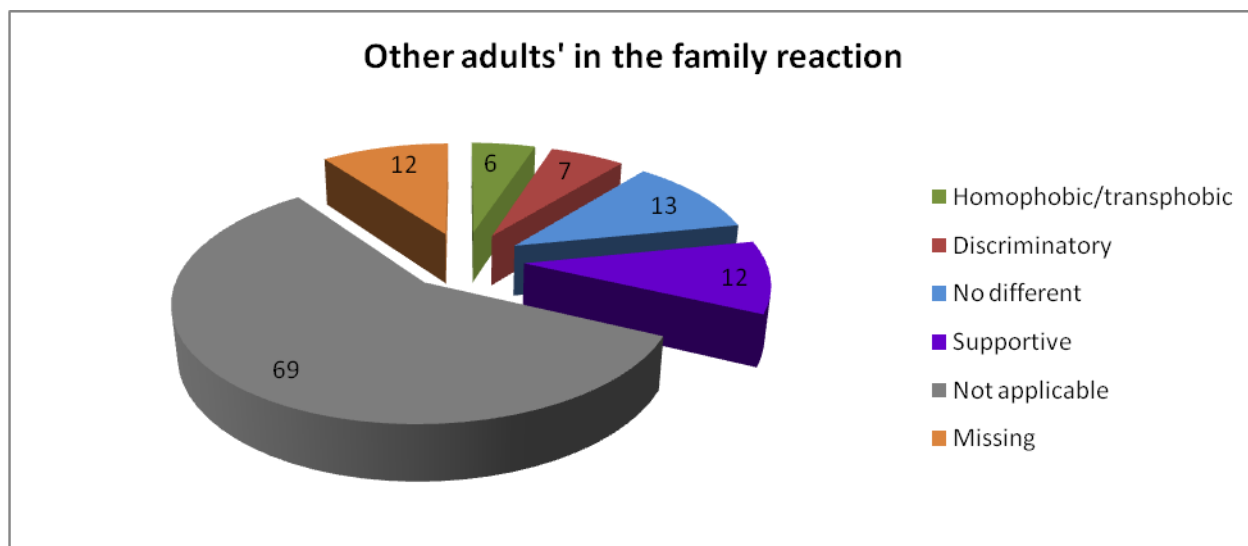
The level of support and no change in how partners treat respondents also signifies that people are more willing to disclose to other LGBT people because they anticipate that they will not be stigmatized or discriminated against.

Figure 64: How other adults in the respondents' family came to know about their sexual orientation and/or gender identity



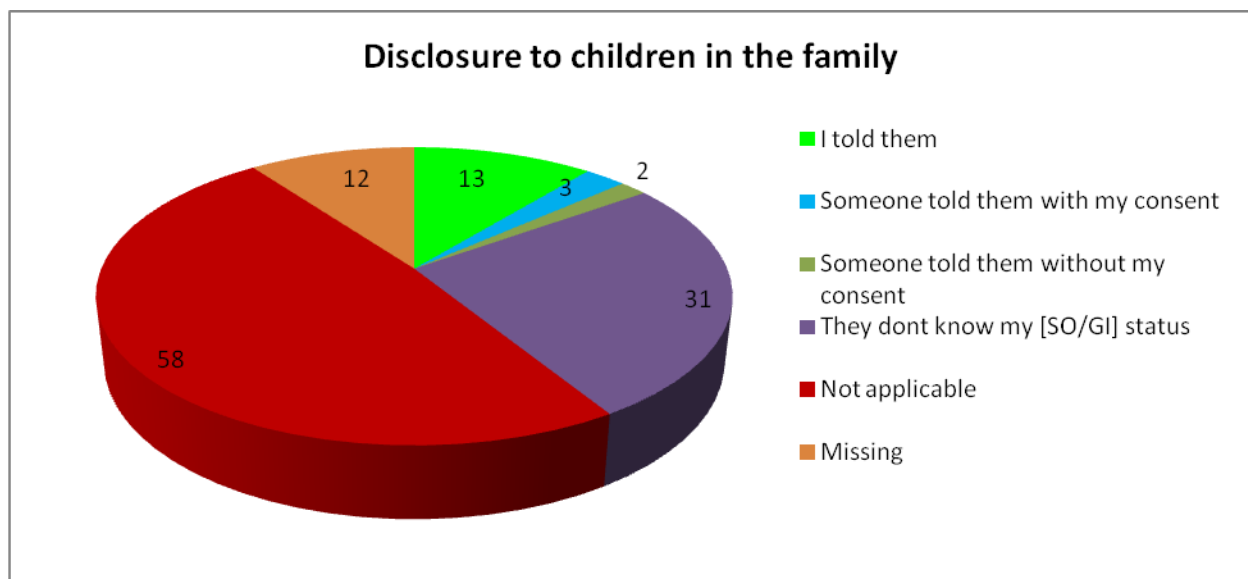
Where applicable, majority of the respondents have reported that other adults in the family do not know of their sexual orientation and/or gender identity. Many people disclosed themselves and some authorized the disclosure of their sexual orientation and/or gender identity by someone else. For majority of the respondents whose sexual orientation and/or gender identity is known by other adults in the family they did not authorize this disclosure. The assumption can be made that not many people are comfortable with letting other adults in the family know of their sexual orientation and/or gender identity.

Figure 65: Reaction of other adults in the family towards respondents after finding out about their sexual orientation and/or gender identity



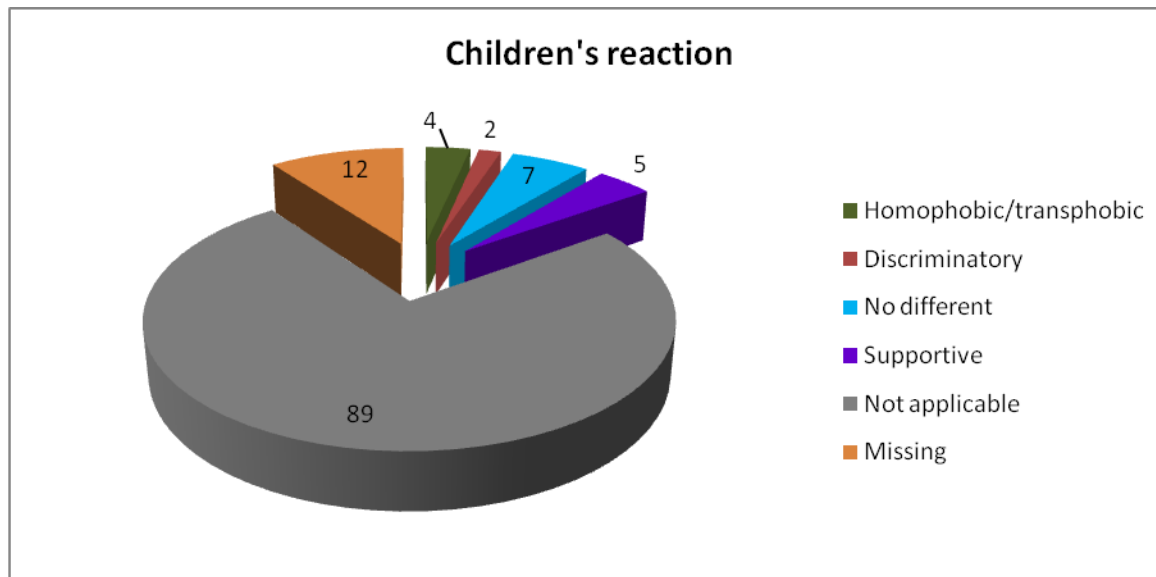
Adults in the family tend to be more open to knowing about interviewee's sexual orientation and/or gender identity. Most have acted no different or have shown support upon disclosure. For some respondents though they have been faced with homophobia, transphobia or discrimination. In most instances those faced with discrimination were not the ones to disclose their sexual orientation and/or gender identity.

Figure 66: How children in the respondent's family came to know about their sexual orientation and/or gender identity



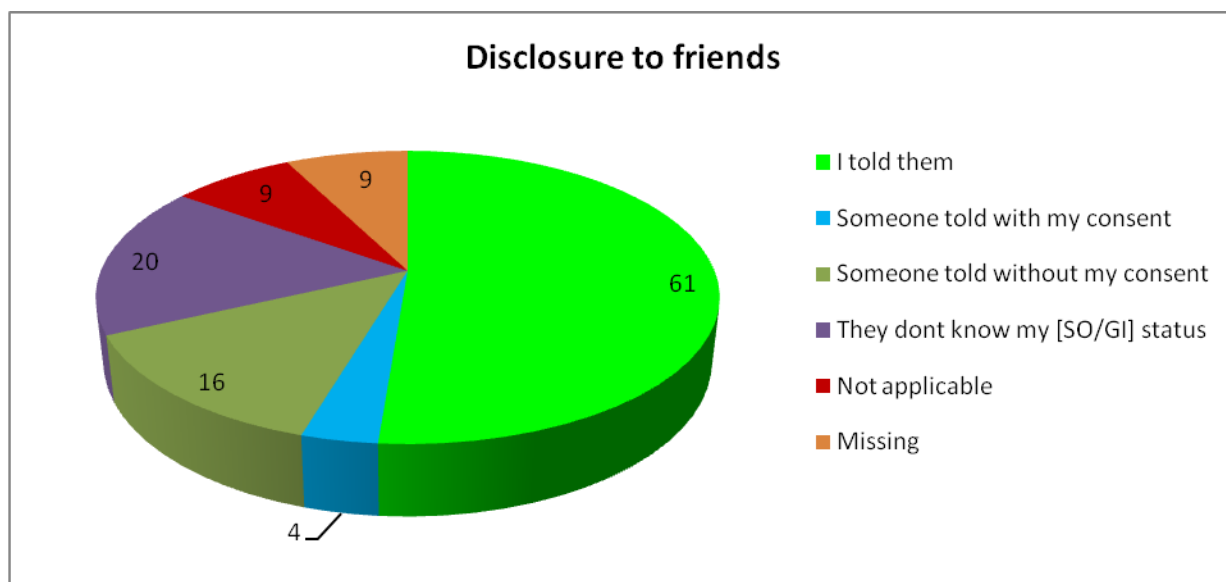
Where applicable most children in the family do not know the sexual orientation and/or gender identity of the respondents. In most cases respondents themselves have disclosed to children in the family. Others have consented to someone else disclosing, while some have had this disclosure made without their consent.

Figure 67: Reaction of children in the family towards respondent's after finding out about their sexual orientation and/or gender identity



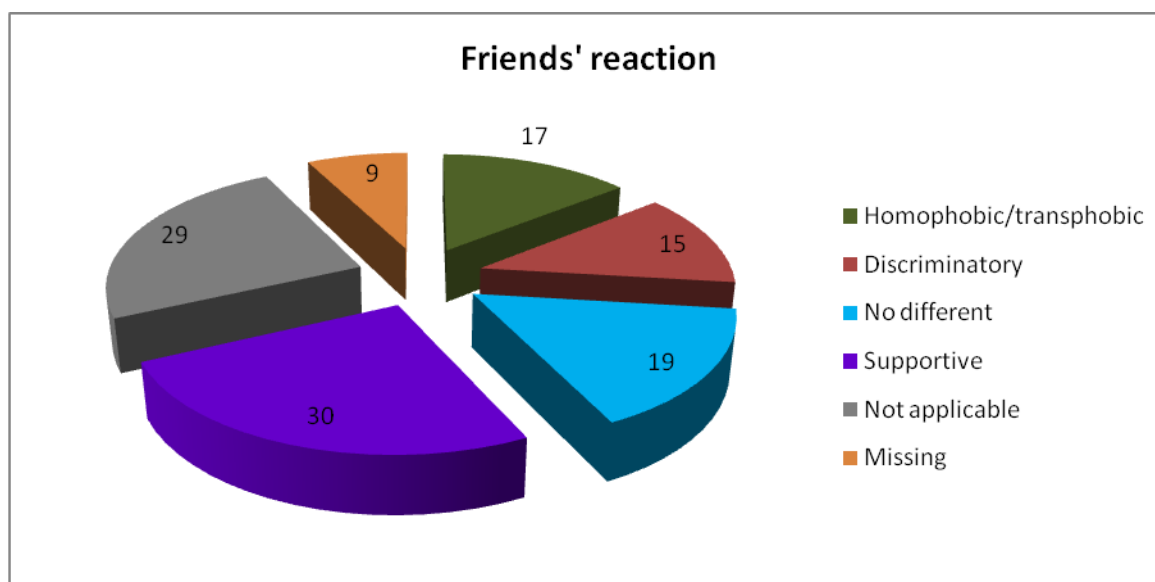
Most children have acted in a supportive manner or have acted no different towards respondents after learning about their sexual orientation and/or gender identity. In other cases children have responded with homophobia, discrimination or transphobia. This provides evidence that social stigma and discrimination is learned early in one's life.

Figure 68: Disclosure of respondents' sexual orientation and/or gender identity to their friends



Respondents appear more open to disclose their sexual orientation and/or gender identity to friends. In some instances they have had others disclose on their behalf, in others the disclosure was made without their consent. Many people reported that their friends did not know of their sexual orientation and/or gender identity.

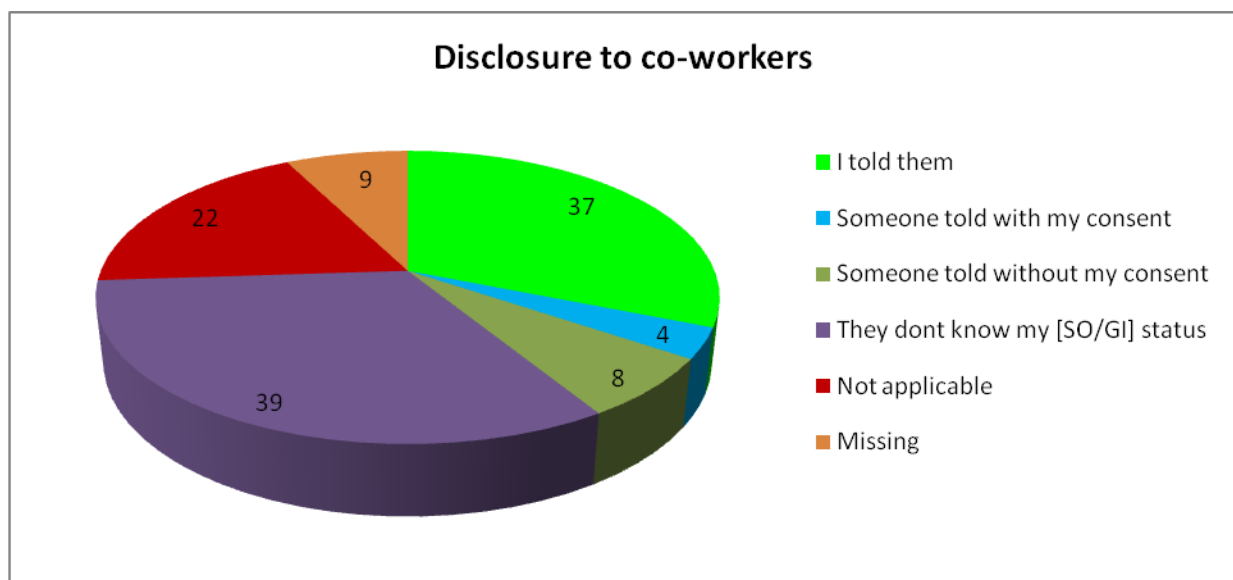
Figure 69: How respondents' friends reacted after finding out about their sexual orientation and/or gender identity



It appears that more people are willing to come out to their friends if they anticipate that they will be supportive. In most instances where respondents have either come out to their friends themselves or have had someone disclose on their behalf friends have responded positively. The LGBT stigma index also found that some people were supportive even in the case that the respondents sexual orientation and/or gender identity was disclosed to them without the respondent's consent. Friends have acted homophobic, transphobic and discriminatory whether the disclosure was made by the respondents or by someone else with or without the respondent's consent.

### Professional/work environment

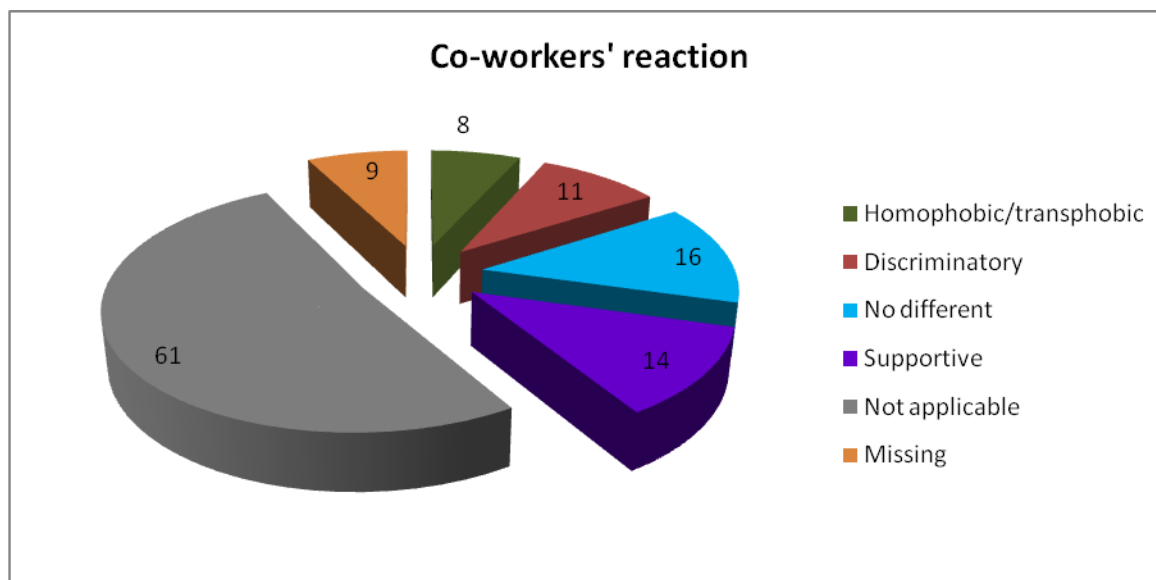
Figure 70: Disclosure of respondents' sexual orientation and/or gender identity to their co-workers or colleagues



Where applicable most respondents' sexual orientation and/or gender identity is known to their colleagues or co-workers. In most of these cases respondents have disclosed themselves. In light of applicability 16.33% of the respondents have had their sexual orientation and/or gender identity disclosed to their colleagues without their consent and 8.16% have consented to disclosure by someone else.



Figure 71: How co-workers have acted towards respondents after finding out about their sexual orientation and/or gender identity



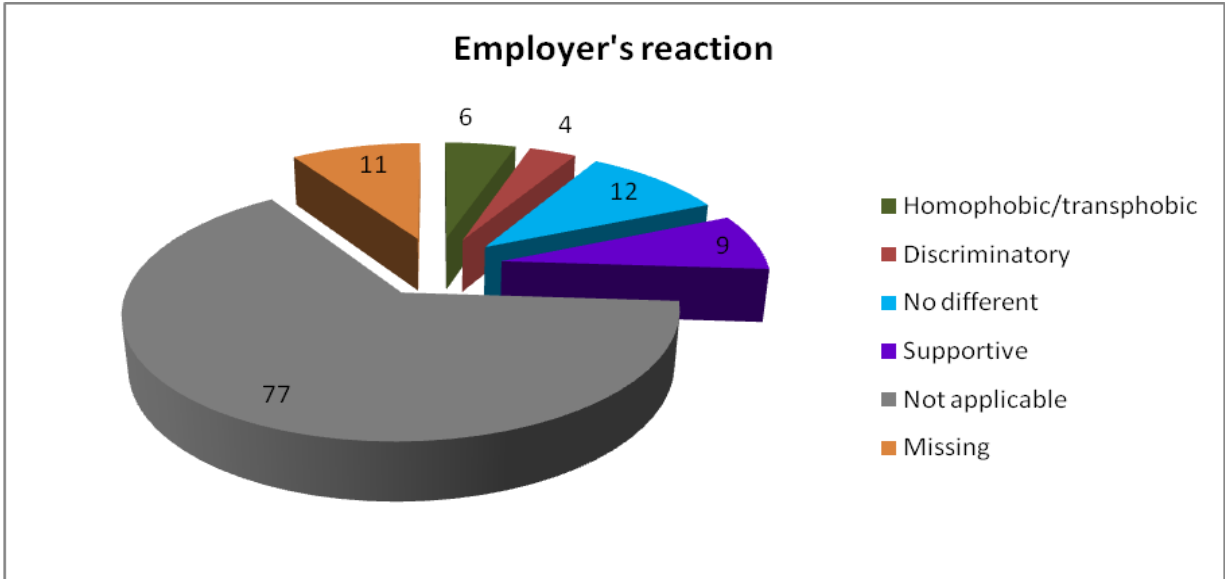
Co-workers who were told of the respondents' sexual orientation and/or gender identity with the respondents consent either acted no different towards the respondents or were supportive. Majority of the colleagues who were told about respondents' sexual orientation and/or gender identity by the respondents themselves were supportive or acted no different but some were also homophobic, transphobic or discriminatory. Only two respondents were treated positively by their colleagues when someone disclosed without their consent.

Figure 72: How employers’ found out about the respondents’ sexual orientation and/or gender identity



Most repondents have not had their sexual orientation and/or gender identity disclosed to their employers. For those whose employers know of their gender identity and/or sexual orientation most have them have diclosed themselves. For others this disclosure was made by others most of which were not consensual.

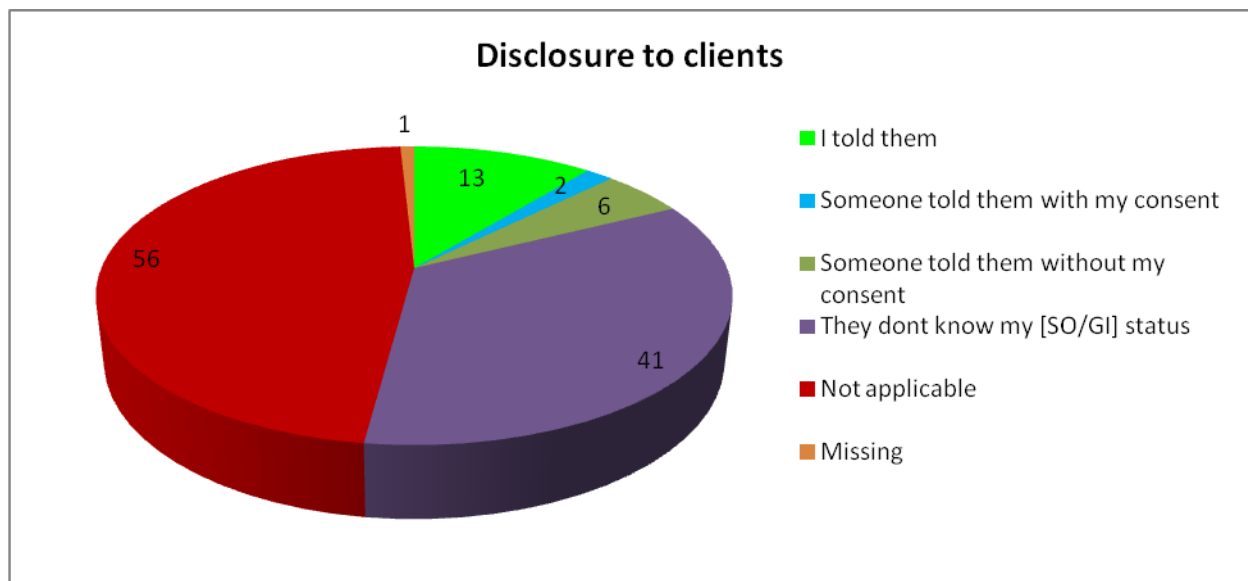
Figure 73: Employers’ attitudes towards respondents after finding out about their sexual orientation and/or gender identity



Of the 31 people who have had their sexual orientation disclosed to their employers most of them have received a positive response. However, 32.26% of these respondents were either treated in a homophobic, transphobic or discriminatory manner.

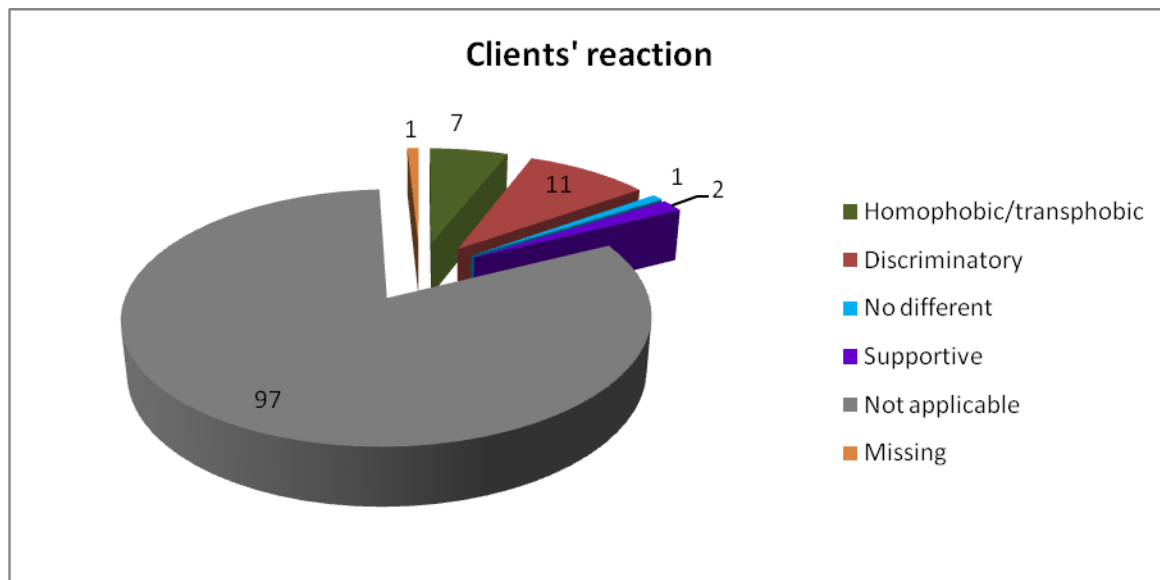
One respondent reported that the help she had sought for stigma was related to work. She was employed for almost four years at a company and once her sexual orientation was made public by malicious colleagues she was fired. This matter was not resolved in the respondent's favour.

Figure 74: Disclosure of respondents' sexual orientation and/or gender identity to their clients



Most respondents have not disclosed to their clients. For those whose clients know about their sexual orientation and/or gender identity most of them had disclosed themselves. And of the 21 persons who have had disclosure 28.57% of them have had this disclosure made without their consent.

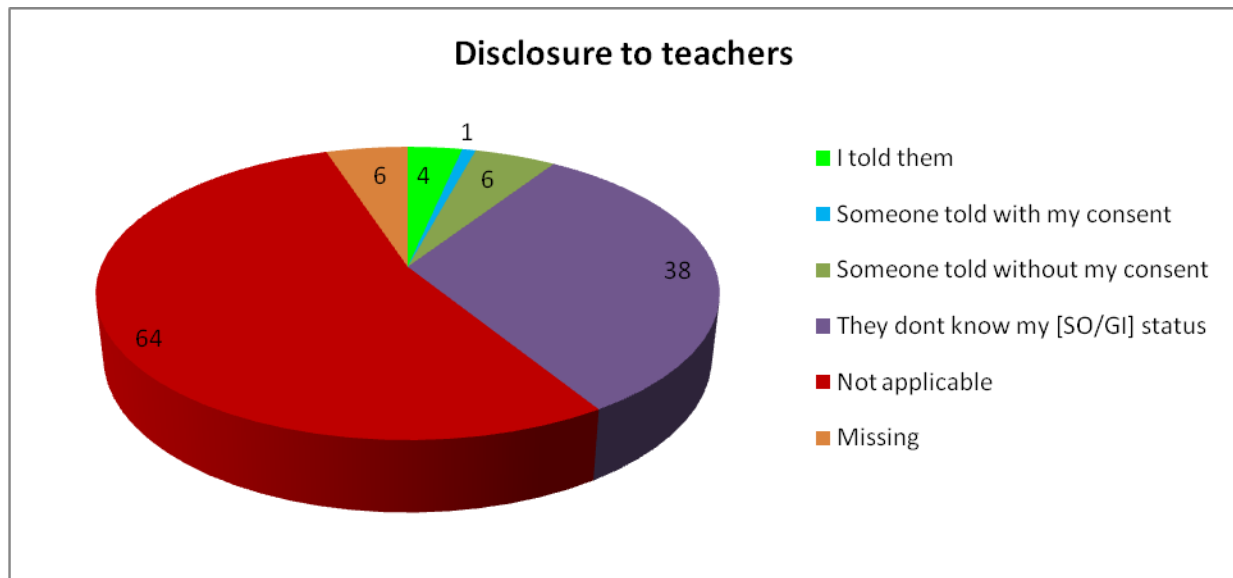
Figure 75: Reaction of clients after finding out about the respondents' sexual orientation and/or gender identity



Of the 21 respondents whose clients knew about their sexual orientation and/or gender identity 85.71% of them responded negatively. The majority were discriminatory. However, more research needs to be done to understand the level of discrimination that was expressed.

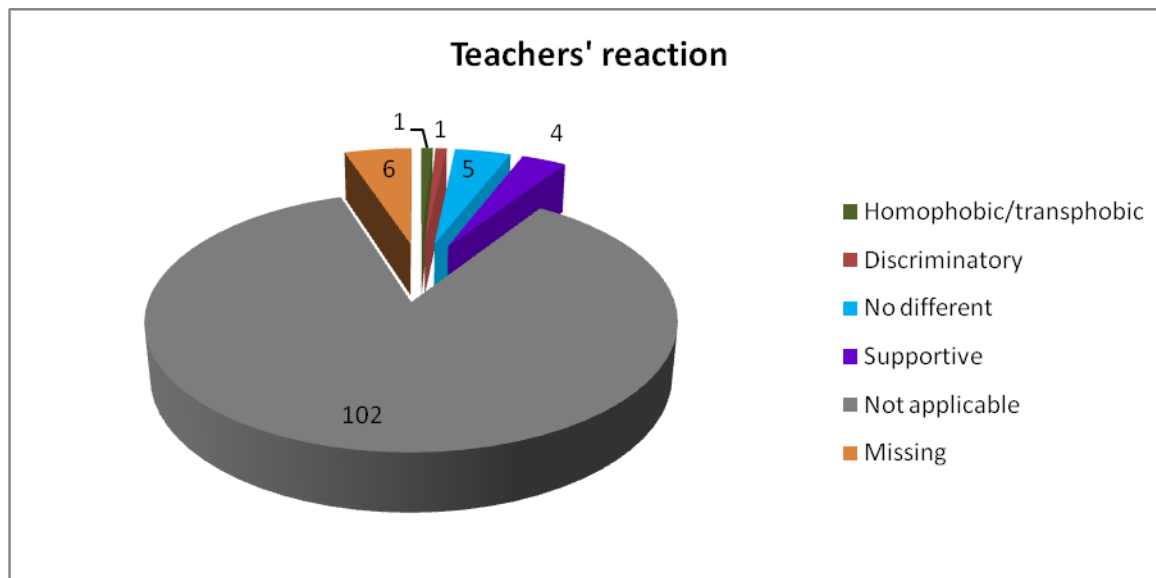
## Learning environment

Figure 76: Disclosure of respondents' sexual orientation and/or gender identity to teachers/lecturers



Respondents were asked to state how their teachers/lecturers first came to know about their sexual orientation and/or gender identity. Where applicable majority of the respondents reported that their teachers did not know of their sexual orientation and/or gender identity. For those whose teachers knew, majority of them did not give consent to the person who disclosed.

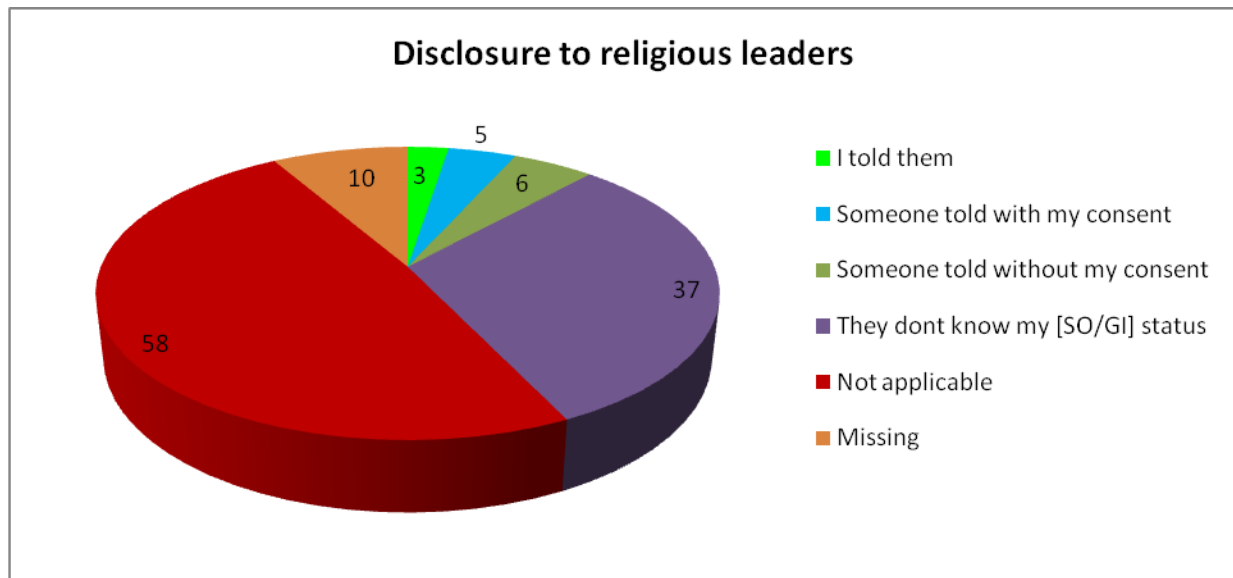
Figure 77: Teachers' or lecturers' reaction towards respondents' after finding out about their sexual orientation and/or gender identity



Where respondents disclosed to teachers themselves they were always treated no differently or teachers were supportive. This suggests that respondents are more likely to come out to teachers they anticipate will not be discriminatory. In majority of the cases where disclosure was made by others without consent, teachers have also been supportive or have acted no different. However, some teachers have been discriminatory, transphobic or homophobic.

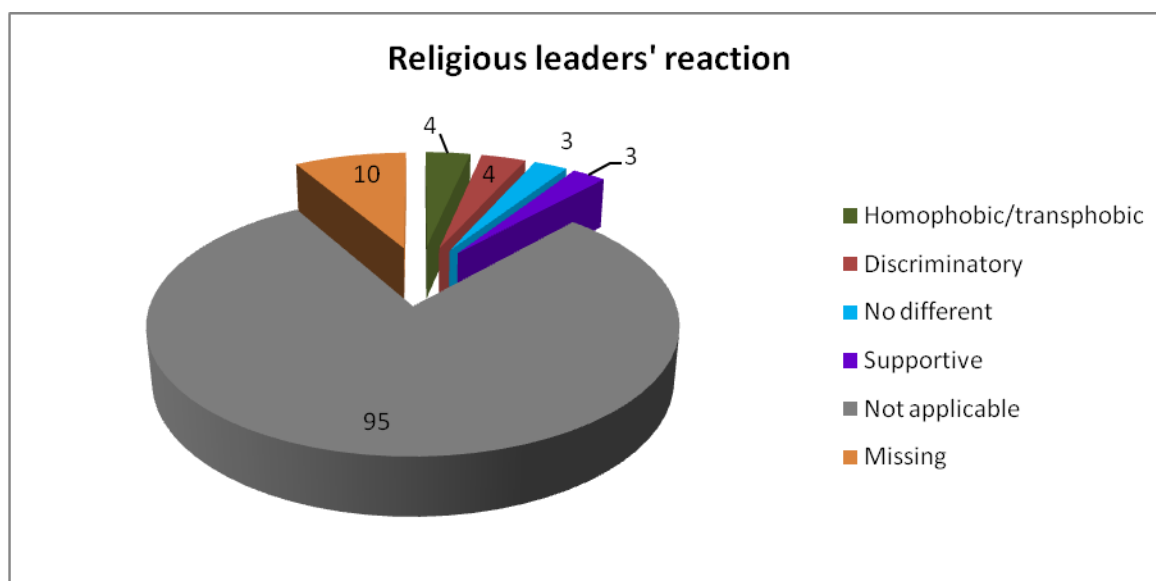
## Religious environment

Figure 78: How religious leaders came to know about respondents' sexual orientation and/or gender identity



Most people are not willing to disclose their sexual orientation and/or gender identity to religious leaders. Where disclosure has been made it has been by someone other than the respondent and in most cases this disclosure was nonconsensual.

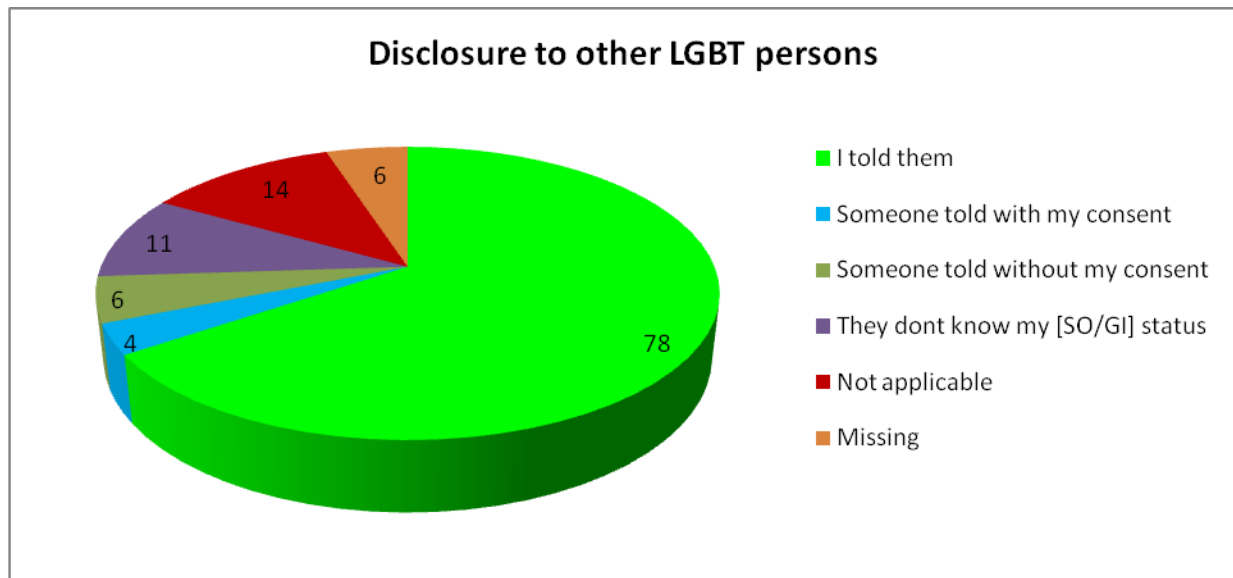
Figure 79: Religious leaders' attitude towards respondents' after finding out about their sexual orientation and/or gender identity



Majority of the religious leaders to whom disclosure had been made had been discriminatory, homophobic or transphobic. Some, however have treated respondents no different or have been supportive.

### Civil society

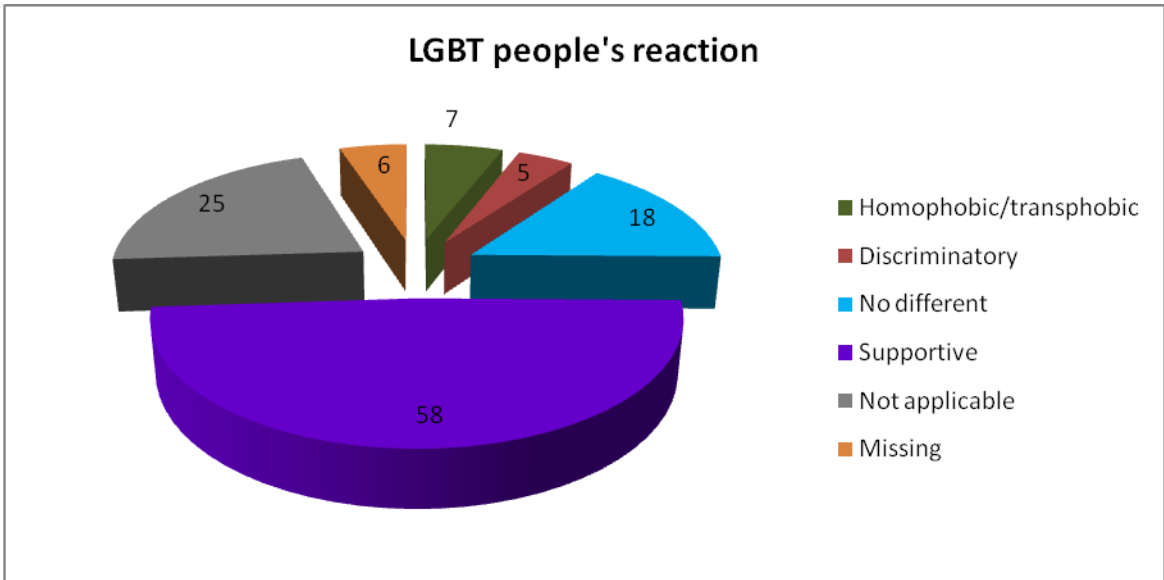
Figure 80: Disclosure of respondents' sexual orientation and/or gender identity to other LGBT persons



Majority of the respondents have come out to other LGBT people about their sexual orientation and/or gender identity themselves. Evidently interviewees are more able to relate to those they identify with. Some people try to disassociate themselves from the rest of the LGBT community by not disclosing at all. There needs to be more research to understand why this is so.

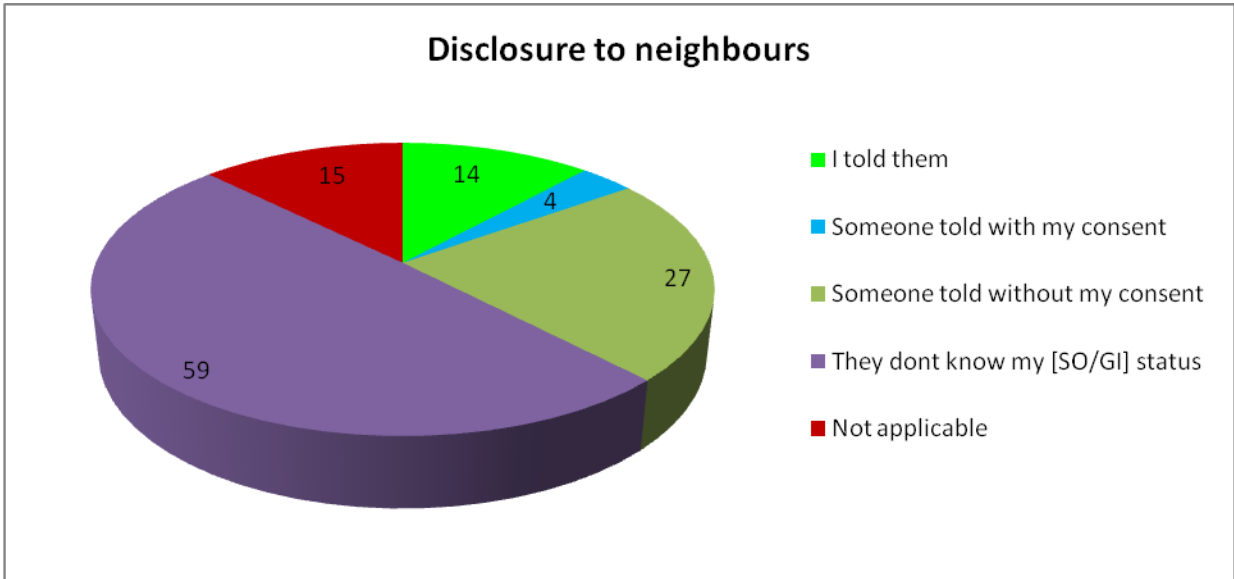


Figure 81: Reaction of other LGBT people towards respondents' after finding out about their sexual orientation and/or gender identity



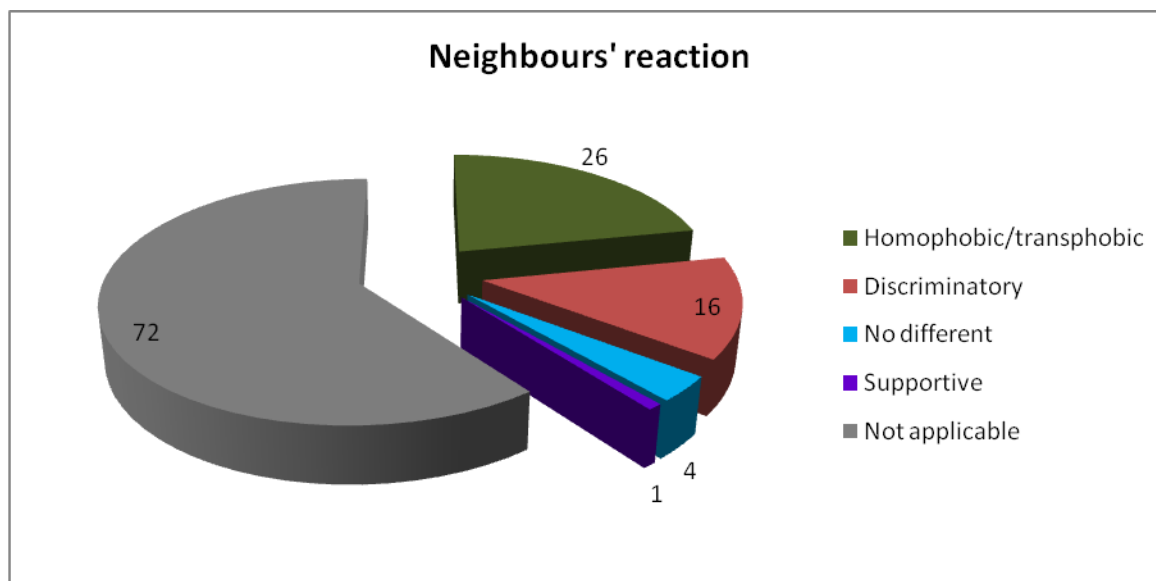
Though LGBT people are stigmatized under the same umbrella they themselves stigmatize and discriminate each other. Though most LGBT persons are supportive towards other LGBT persons, many remain homophobic or discriminatory even though they share similar identities which cause them to be stigmatized as a whole. More research is needed within the community itself to understand the seriousness of discrimination.

Figure 82: How respondents' neighbours came to know about their sexual orientation and/or gender identity



Most people reported that their neighbours do not know about their sexual orientation and/or gender identity. However, for most of those whose neighbours know about their sexual orientation and/or gender identity this disclosure was not consensual. There also appears to be some level of trust for some respondents in their neighbours as many of them have disclosed themselves.

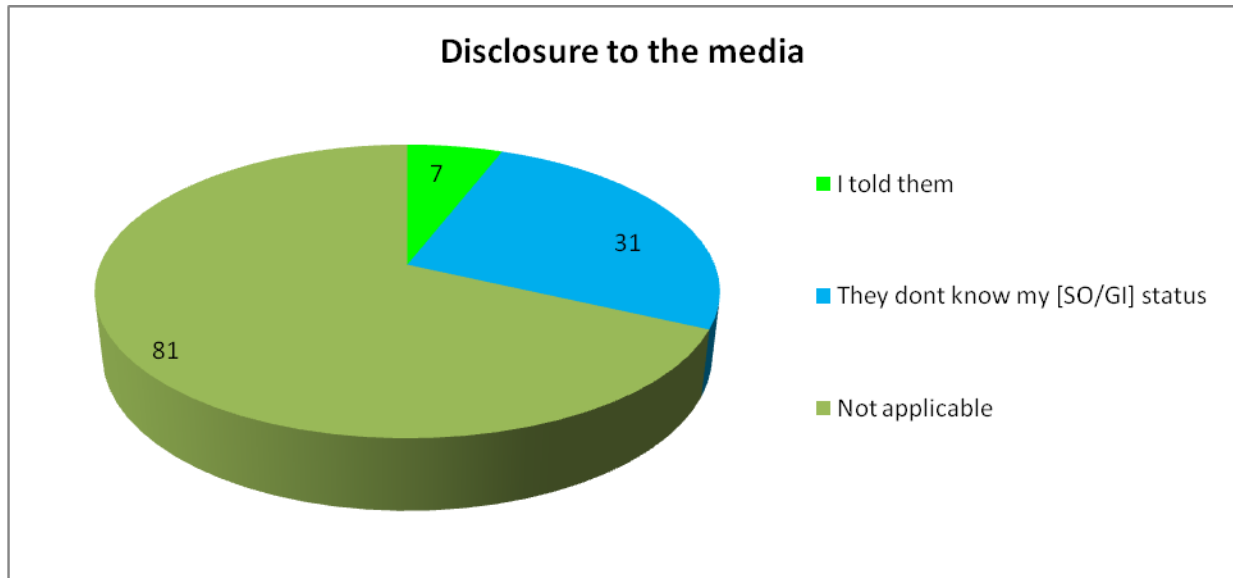
Figure 83: Neighbours' attitudes towards respondents after finding out about their sexual orientation and/or gender identity



In all cases where the disclosure was made without the interviewee's consent, neighbours have been transphobic, discriminatory or homophobic. Not many respondents have been treated positively upon disclosure.

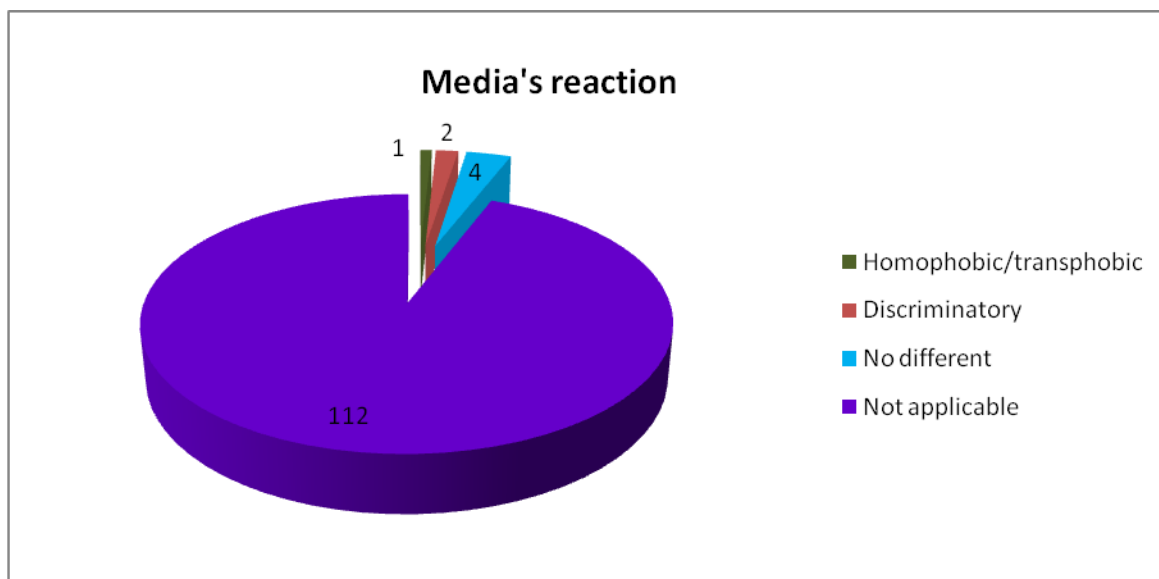
## Media

Figure 84: How the media came to know about the respondents' sexual orientation and/or gender identity



For most respondents this was not applicable and others reported that the media did not know about their sexual orientation and/or gender identity. For all respondents who reported that there was disclosure made to the media they all had made this disclosure themselves.

Figure 85: The media's attitude towards respondents' after finding out about their sexual orientation and/or gender identity



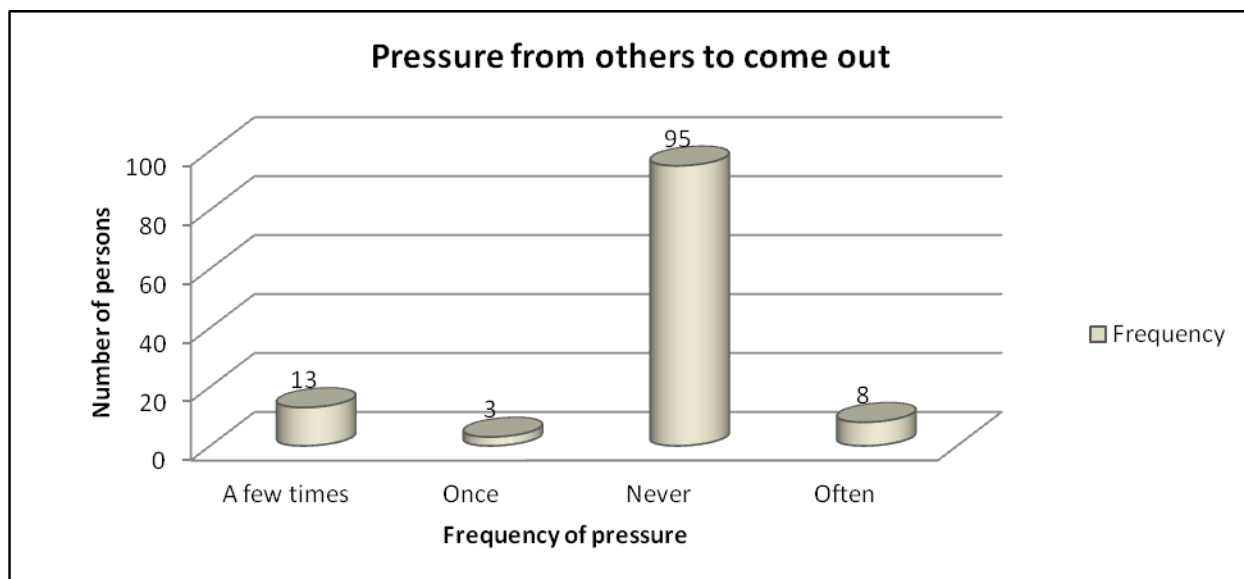
Respondents seem to be willing to come out to the media if they know that they will not be discriminated against. Most respondents who have disclosed, reported that the media treated them no differently. In other cases there has been homophobic, transphobic or discriminatory reaction by the media.

In most cases there needs to be more research to understand the reason for people disclosing respondents' sexual orientation and/or gender identity without their consent. In some instances respondents whose sexual orientation and/or gender identity was disclosed without their consent have faced extreme discrimination such as physical abuse and blackmail among other forms of discrimination by the same individuals this disclosure was made to. For others, though disclosure was made without their consent they have not faced discrimination by those persons. Some people for example had their gender identity and/or sexual orientation revealed to social workers or counselors and got assistance for internalized stigma and discrimination. Therefore the basis of disclosure needs to be investigated to ascertain the implications of this disclosure.

The results in this section supports Goffman's theory. People seem more likely to come out to the people they are closer to.

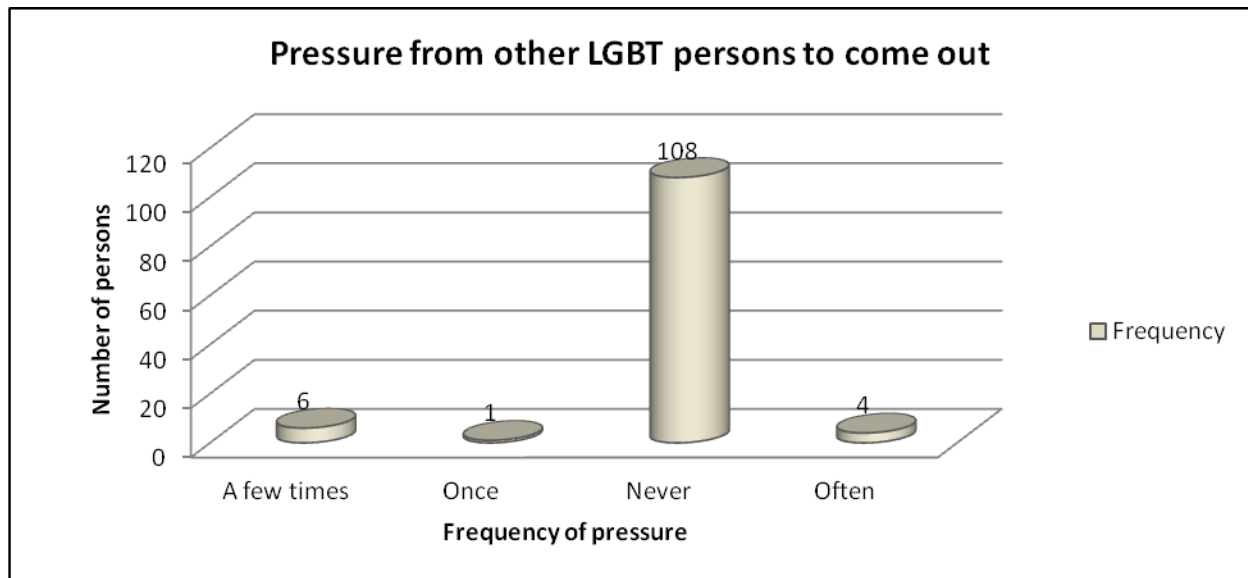
### Pressure to disclose

Figure 86: Responses to whether the interviewees' had any form of pressure from persons who don't identify as LGBT to come out about their sexual orientation and/or gender identity



The survey found that people are faced with pressure to come out about their sexual orientation and/or gender identity. Most of the respondents have not faced this form of pressure. However, 17.65% of these respondents face this form of pressure over and over again.

Figure 87: Experience of pressure by respondents from other LGBT people to come out about their sexual orientation and/or gender identity

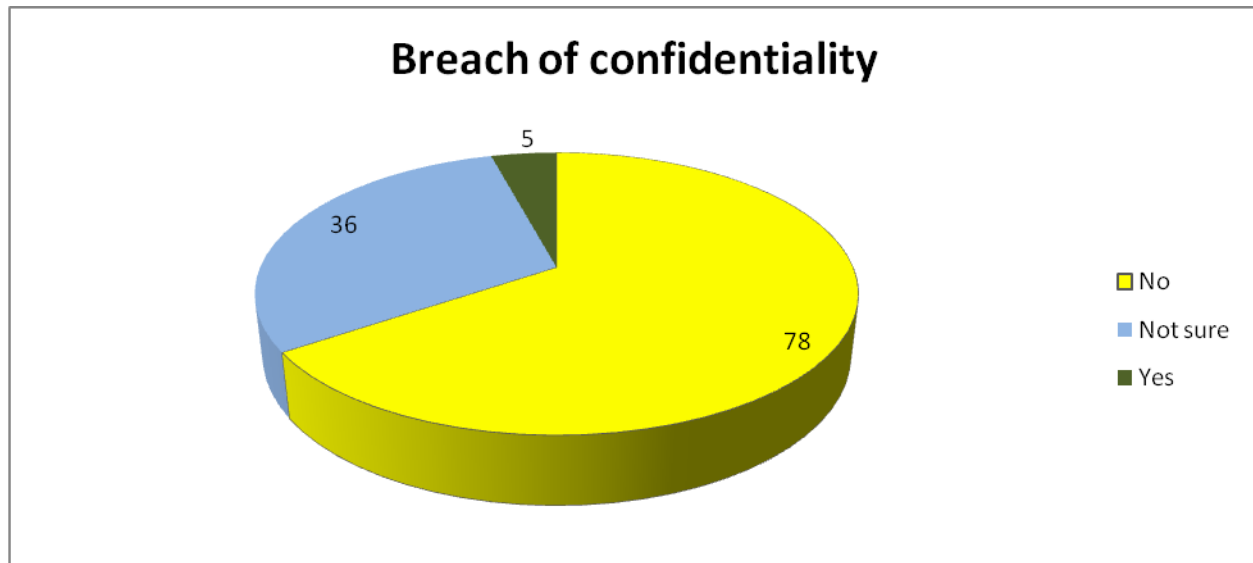


Though there is less pressure from the LGBT community on respondents to come out about their sexual orientation and/or gender identity there is some level of pressure present. Of the 119 respondents 9.24% of them have been forced to come out at least once and 8.4% of them are repeatedly forced into coming out.

This form of pressure is discriminatory in itself as it forces individuals to act against their will.

## Confidentiality

Figure 88: Breach of confidentiality by a professional where confidentiality forms part of the basis of their work



Interviewees were asked to indicate whether any professional service providers such as doctors, counselors, lawyers and so on who were obliged to maintain confidentiality ever disclosed their sexual orientation and/or gender identity without their consent. Most respondents reported that they never experienced such breach of confidentiality. Some respondents were not sure that confidentiality was upheld. However, some respondents reported that this breach was made.

Breach of confidentiality especially by those who are binded by law to uphold it strengthens mistrust. It also further marginalizes people as they seek to isolate themselves.

### 4.6. Qualitative analysis

A limited number of open-ended questions were included in the questionnaire. In Section 3, Effecting change, individuals were asked to narrate how they have resolved any form of issues with stigma and discrimination either on their own or with assistance from others. The narrative required that individuals state the particular issue, how the issue was resolved and who assisted if any assistance was granted. Some individuals reported issues of being mariginalized in the family setting and being assisted by either friends, other family members or social workers, organizations and couselfors.

One case was job dismissal on the basis of homosexuality. This individual was assisted by an organization and was helped with finding new employment. Another person was dismissed from a sports team and was not accepted back on the basis of suspicion of homosexuality even with

the help of a social worker. A few people loss their place in the family home and were helped by friends with housing.

When asked about respondents' main problems and challenges in relation to being openly bisexual, lesbian, gay, transgendered, or transsexual most individuals reported that they do not have any individual challenges. However, many of those same respondents reported that they feared being outed and further procecuted by the law. Others reported that they had issues accessing services that enable survival. Individuals expressed that their biggest challenges and problems are; lack of acceptance, access to developmental aid, lack of equality, cultural and social issues and lack of freedom that heterosexuals have. One individual expressed that it is impossible to focus on an intimate relationship with her same-sex partner because there are too many other issues around her sexuality to focus on.

For most people it is difficult to be in a same-sex committed relationship because of the stigma attached to the LGBT community. Others stated that the social and legal issues are too grave to take the chance of having a real relationship. The lack of legal value for same-sex relationships also poses a problem for some respondents.

# Chapter 5

## 5. Conclusion and recommendations

The aim of this LGBT related stigma and discrimination index is to investigate how lesbians, gays, bisexuals, transgendered and transsexual people face stigma and discrimination in Sri Lanka. In finalizing this pilot study a conclusive summary of the key findings of the research will be made along with key recommendations.

### 5.1. Conclusion

The study found that stigma and discrimination is not only expressed by those who make up the group that is not stigmatized; but it is also internalized by the stigmatized individual and manifests itself in different ways. Its manifestations range from feelings of fear to withdrawal and avoidance. Stigma and discrimination isolates individuals and undermine their power and prevent them from accessing services and human rights.

Subdividing the questionnaire into subsections enabled the possibility of creating a focused understanding of LGBT related stigma and discrimination in Sri Lanka. This technique facilitated understanding; the environments in which stigma and discrimination is faced, the perpetrators, the forms discrimination take, and the effect both have on LGBT people. Furthermore, it provides systematic knowledge about the attempts LGBT people make to address stigma and discrimination. To further this understanding it is feasible to create a summary in line with the classifications made in the analysis.

#### 5.1.1. Environment in which stigma and discrimination is faced

The findings of the study revealed that LGBT people face LGBT related stigma and discrimination in different settings. Most of the discrimination faced by respondents is within the social setting; 28.57% reported that they were excluded from social gatherings. The second highest level of discrimination is faced within the family unit, where respondents are excluded from family activities. Respondents are also excluded from religious places and activities.

Notably the research found that most of the exclusion from social activities was by friends; and for disclosure on sexual orientation and/or gender identity, the highest level of disclosure was made to friends. Furthermore, not many people's sexual orientation and/or gender identity has been disclosed in the religious setting. A relative number of individuals' sexual orientation and/or gender identity have been disclosed to their family members.



### **5.1.2. Reasons for stigma and discrimination**

The main factors that contributed to LGBT related discrimination are; sexual orientation, gender identity or both. However, in most cases the study revealed that more people were discriminated against on the basis of gender identity/expression or for both sexual orientation and gender identity. The only factor that sexual orientation was the main cause for discrimination is gossip.

### **5.1.3. Perpetrators of LGBT related stigma and discrimination**

A major problem that the study revealed is that LGBT people do not live in safe home environments. Some individuals are stigmatized and discriminated against by their family members in the home, their same-sex partners and even neighbors. There is also state sanctioned discrimination facing LGBT people; police, legal professionals, armed forces and other government officials continue to discriminate against LGBT people.

In the religious settings clergy are reported as perpetrators of stigma and discrimination towards LGBT people. At work LGBT people are discriminated against and stigmatized by their employers and co-workers.

### **5.1.4. Forms of discrimination**

Discrimination against LGBT people reportedly is expressed in different ways. LGBT people experience stigma and discrimination by being denied access to services, being abused or receiving threat of abuse and through provocation. The study revealed that between 4.2% and 74.79% of the respondents face some form of LGBT related stigma and discrimination.

The less faced discriminatory measure is that of denial to health services. Gossip is the highest level of discrimination faced by respondents.

With regards to access to human rights; access to housing, work, education and health-care, more people are denied employment and many people's advancement in their career is challenged by discrimination. The fact that less people report being discriminated in regards to education is contextual. Majority of the participants were not in the position to be affected in this regard.

The study reported high levels of verbal abuse, emotional abuse and blackmail alongside gossip. A significant number of people were also victims of physical abuse; 20.17%.

Respondents' family members were also victims of LGBT related stigma and discrimination. Discriminatory measures included; verbal abuse and harassment, isolation and physical abuse and harassment.

### **5.1.5. Effects of stigma and discrimination**

This study revealed that stigma and discrimination on the basis of sexual orientation and gender identity affected participants to a great extent. Not only are they fearful; they experience negative feelings, isolate themselves, take decisions they wouldn't have otherwise taken, they feel powerless, and some even seek treatment or cure for their trans/homosexuality.

Between 6.72% and 45.38% of the respondents experience some form of negative feelings such as shame and guilt because of the stigma associated with and the discrimination they face because of their sexual orientation and/or gender identity.

Between 4.2% and 47.90% of the respondents have taken decisions they wouldn't have taken had it not been for LGBT related stigma and discrimination. These decisions include isolation, avoidance and withdrawal as well as conformance and accessing treatments and cure for their homo/trans-sexuality. Many respondents have decided to isolate themselves from their family members. Some have also decided to not seek employment or access health-care.

For many participants in the study, though they have not faced any form of discrimination themselves, fear of LGBT related stigma and discrimination is still an issue. Between 16.81% and 74.79% experience some form of fear associated with their sexual orientation and/or gender identity. The two greatest fears expressed by respondents are being gossiped about and being verbally abused. A great number of individuals fear being outed and being a victim of public shaming.

Stigma and discrimination also has the ability to affect Sri Lanka in terms of economic development. The research shows that 1 in every 4 LGBT person have decided to migrate abroad because of LGBT related stigma and discrimination. This contributes to brain-drain in the country especially considering that almost 50% of the respondents are educated at the tertiary level and has the ability to stagger economic development.

### **5.1.6. Addressing stigma and discrimination**

The analysis of the data revealed that respondents take some form of measures to address LGBT related stigma and discrimination.

Between 19.33% and 73.95% of the respondents had a constructive discussion about their individual sexual orientation, gender identity or sexual and reproductive health. Some respondents though reported that they have trust issues which affect their ability to discuss these issues with anyone. These discussions revealed that social workers, health-care workers and counselors offer LGBT people some form of space to discuss these issues openly.

Many people know of different organizations and individuals to get help from for stigma and discrimination. However, not many people who have been stigmatized or discriminated against

have sought help. Only 28.57% of the respondents are registered with an organization whose primary focus is LGBT related.

LGBT people relieve each other of the effects of stigma and discrimination by providing help to each other. Between 14.29% and 58.82% of the respondents provided some form of assistance to other LGBT people. Assistance included physical support such as provision of food and money.

Most LGBT people believe that to address LGBT related stigma and discrimination, individuals and organizations should be focused on raising public awareness about LGBT rights and acceptance. A great number felt that advocating for the decriminalization of homosexuality in Sri Lanka should be the primary focus.

In its entirety, the study reveals that LGBT related stigma and discrimination in Sri Lanka affects many LGBT people either directly or indirectly. It also proves that stigma and discrimination takes away LGBT people's power and denies them access to basic human rights. The theory offered by Ervin Goffman is also proven. LGBT people enforce covering; they remain closeted about their sexual orientation and gender identity in fear that they will be further stigmatized or discriminated against if they are honest and open about their sexual orientation and gender identity.

## **5.2. Recommendations**

This research project has outlined extensively the level of LGBT related stigma and discrimination facing LGBT people in Sri Lanka. It has outlined extreme violations of LGBT people's human rights by the state and civil society. In light of these findings it is necessary to make recommendations directed at the state of Sri Lanka; LGBT organizations and individuals working to alleviate LGBT related stigma and discrimination, LGBT Sri Lankans and civil society.

Recommendations on improving the quality of this study will also be made.

### **5.2.1. LGBT Sri Lankans**

LGBT related stigma and discrimination is faced by LGBT people all over the world and is thus not unique to Sri Lanka. Some countries offer redress for people who suffer from stigma and discrimination unlike Sri Lanka. While the state does not offer any form of redress, many organizations in Sri Lanka offer assistance to LGBT people and some organizations are primarily focused on addressing LGBT related stigma and discrimination. This research thus advises LGBT people who suffer stigma and discrimination to not continue to suffer in silence.

They should find individuals and organizations that can offer help and come out about the stigma they face purely on the basis of their sexual orientation and gender identity.

### **5.2.2. Individuals and organizations working on LGBT issues**

In light of the fact that LGBT related stigma and discrimination stems from civil society and as stated by majority of the respondents, individuals and organizations working on LGBT issues need to focus more on raising public awareness about LGBT rights and issues. This has the ability to reduce stigma and in turn lessening discrimination by civil society.

LGBT organizations and individuals also need to find new ways of addressing stigma and discrimination as it relates to affording LGBT people redress for this concentrated stigma and discrimination. They also need to motivate government to decriminalize homosexuality and afford LGBT people access to their basic human rights.

Further education of the LGBT community about their rights and the law needs to be part of the focus of reducing stigma and discrimination. LGBT people are unaware of the law which makes them vulnerable.

### **5.2.3. Civil society**

Society has a social responsibility to ensure that people live free from fear and discrimination especially because they themselves are the main drivers in this. Thus individuals, family members, friends, neighbours and other people need to take measures in reducing LGBT focused stigma and discrimination. Such measures may include not engaging in gossip on the basis of sexual orientation and/or gender identity and other forms of discrimination.

### **5.2.4. The Sri Lankan Government**

As a member state of the United Nations; Sri Lanka is hereby recommended to uphold the human dignity and human rights of its people without discrimination on the basis of sexual orientation and/or gender identity. To enable this, the state must first eliminate state sanctioned discrimination by decriminalising homosexuality between consenting adults. Furthermore, the state of Sri Lanka is hereby recommended to uphold the principles and recommendations of the Born Free and Equal-Sexual Orientation and Gender Identity in International Human Rights Law.

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Table 23:	Crosstabulation of respondents who are registered at an LGBT organization against whether respondents feel the need to be part of an LGBT organization

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# APPENDIX A

## The Lesbians, Gays, Bisexuals, Transgendered and Transsexuals Stigma and Discrimination Index for Sri Lanka

### Quality control guidelines

The below points outline the quality control process for accepting a questionnaire that will be included in the pilot study. These guidelines must be followed to ensure data accuracy and integrity.

- Accept a questionnaire that is fully completed and has 0 inconsistencies
- Where inconsistencies are found in questionnaires, first contact the enumerator
  - Sit with the enumerator and clarify inconsistencies
  - Should the enumerator not be able to afford clarity follow all steps below before rejecting or accepting a questionnaire
- Reject a questionnaire if sexual orientation is not specified
- Only accept a questionnaire if question 6 in Section 1 is not answered; ALL other questions must be answered in this section for the questionnaire to be accepted
- Reject a questionnaire with more than two inconsistencies, which gravely affect the full understanding of the questionnaire.
  - For e.g. if respondents say that they are “between the ages of 18-24 and have been in a relationship 15+ years” coupled with “I have never lost my Job because of my sexual orientation and/or gender identity, but then further gives a reason for loss of job such as because of sexual orientation” rather than blank
- DO NOT reject a questionnaire because a respondent did not answer a question in Sections 2-5
  - However, reject a questionnaire if, and only if, two consecutive sections are not completed in section 1-4
- Reject a questionnaire if the questionnaire is not completed as instructions stipulate
  - That is, if the instructions state to tick only one answer and more than one are ticked
  - However, in the event that this “mistake” is only made once accept the questionnaire if no other inconsistencies are found

**This process must be completed by three different evaluators and must be done separately on all questionnaires completed. Where evaluators disagree the research leaders take the full decision on whether the questionnaire enters the sample based entirely on the guideline above.**

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**"Equality for all Sexual Orientations and Gender Identities: Human Rights for Everyone"**