

**Joint Submission LGBTIQ GROUPS Submission to the Universal
Periodic Review (UPR) Regarding the Protection of the Rights of
LGBTI Persons in Angola**

**3rd Cycle of the Universal Periodic Review 2019, Submitted by
March 28**

Prepared by the following civil society organizations, allies, groups and collectives working on sexual orientation and gender identity issues in Angola:

Arquivo de Identidade Angolano - Angolan Identity Archive

A feminist queer group that creates LGBTIQ content as a response to the lack of gender and sexuality information in Angola. Focusing in creating an archive, the group works in education, documentation and promotion securing the translation of African LGBTIQ books into Portuguese, creating books about gender, sexuality and stigma and discrimination, creating visual content such as videos with testimonies from the Angolan LGBTIQ community and bringing visibility to the LGBTIQ community in the country.

As a queer feminist group the Archive comprehends the need to create LGBTIQ content due to the lack of such material in the country but has been slowly focusing more in LBT issues.

Recently the group created an office space which is also a safe space for LGBTIQ people with workshops, meals and cultural activities.

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Iris Angola Association

Non-governmental organization for the defense and promotion of the rights of lesbian, gay, bisexual, transgender, queer and intersex people in Angola.

The approach to homosexuality in Angola still suffers from the excessively reserved nature due to cultural and religious issues, for which reason there is no data, information and studies regarding the LGBTQI community in Angola

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Women at heart: Transgender women group

A Transgender women group with the mission to fight for trans rights. Created in 2018 with Trans women members of IRIS, and with support from USAID's LINKAGES project, the group convenes once a month in Luanda to discussed topics that trans women face and access services provided at the community drop-in center run by AIA.

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SUMMARY

1. LGBTIQ SOCIO ECONOMIC CONTEXT

1.1 Angola is facing a political change, with a new president in power and a social reality that struggles to get out of an economic crisis, there are structural changes that still affect LGBTIQ people, such as higher unemployment rate than the general population¹, at 26%. It is also estimated that 36% of LGBTIQ people live in poverty according to the European Union Gender diagnostic from 2015².

1.2 This socio-economic reality makes the lives of the LGBTIQ community in Angola, already a vulnerable group, more challenging. There are no policies that address issues such as sexual orientation and gender identity in the country. As an openly LGBTIQ person, access to formal forms of employment, health services and other opportunities are a daily struggle.

1.3 In 2011, data from the first integrated biological and behavioral surveillance (IBBS) survey conducted in Luanda province, using respondent-driven sampling (RDS) among men who have sex with men (MSM) reported that 30.5% of the sample (n=797) reported having no occupation while 52.9% reported no income during the last month³. This study was funded by the President's Emergency Plan for AIDS Relief (PEPFAR). A second PEPFAR-funded, IBBS study conducted in 2017, using a venue-based sampling strategy and implemented by the flagship USAID project LINKAGES in five provinces of Angola, did not find much improvements, 6 years later for MSM as table 1 shows nor for Trans women, as table 2 shows.

Demographic Socioeconomic Characteristics of MSM by province in Angola
Table 1: Características sócio-demográficas e econômicas dos HSH por província, Angola
Inquérito do Formulário C, Resultados ponderados

<i>Tabela 1</i>	<i>Luanda</i> (n = 456)	<i>Benguela</i> (n = 256)	<i>Bié</i> (n=68)	<i>Cabinda</i> (n = 39)	<i>Cunene</i> (n = 196)	<i>Total</i> (n=1015)
	%	%	%	%	%	%
Have job						
Yes	67.4	71.5	49.4	29.6	65.5	66.9
Not	32.6	28.5	50.6	70.4	34.5	33.1
Level of schooling						
none	0.0	0.3	1.3	0.0	2.5	0.1
Primary	7.9	7.5	10.5	3.5	20.1	8.1
First Cycle	30.6	35.9	22.6	41.3	30.7	30.9
Second cycle	52.5	44.1	58.2	49.1	44.7	51.9
University	9.1	12.1	7.5	6.1	2.0	9.1
Enrolled in a school						
Yes	25.8	42.2	43.1	61.7	57.4	27.8
Not	74.2	57.8	56.9	38.3	42.6	72.2

Demographic Socioeconomic Characteristics of transgender women by province in Angola
Table 2: Características sócio-demográficas e econômicas das mulheres transgênero por província, Angola

¹ 22% for the general population, according to data from 2016 (World Bank, <http://datatopics.worldbank.org/jobs/country/angola>)
² http://eeas.europa.eu/archives/delegations/angola/documents/press_corner/2015/diagnostico_genero_angola_pt_final_digital_pt.pdf

³ Population Size, HIV and Behavior Among Men Who Have Sex with Men (MSM) in Luanda, Angola: Challenges and Results in the First Biological and Behavioral Survey on HIV and Syphilis [1]

Inquérito do Formulário C, Resultados ponderados

<i>Tabela 1</i>	<i>Luanda (n = 46)</i>	<i>Benguela (n = 27)</i>	<i>Bié (n=2)</i>	<i>Cabinda (n = 2)</i>	<i>Cunene (n = 12)</i>	<i>Total (n=89)</i>
	%	%	%	%	%	%
Have job						
Yes	63.9	57.4	0.0	0.0	38.9	63.1
Not	36.1	42.6	100.0	100.0	61.1	36.9
Level of schooling						
none	3.9	0.0	0.0	0.0	5.6	3.8
Primary	7.5	0.0	0.0	50.0	55.6	7.8
First Cycle	36.1	32.8	0.0	0.0	22.2	35.7
Second cycle	51.4	50.8	100.0	50.0	16.7	51.2
University	1.1	16.4	0.0	0.0	0.0	1.6
Enrolled in a school						
Yes	17.9	44.3	0.0	0.0	77.8	19.2
Not	82.1	55.7	100.0	100.0	22.2	80.8

Socioeconomic and social vulnerability between MSM by province in Angola
Vulnerabilidade sócio- econômica e social entre os HSH por província, Angola
 Inquérito do Formulário C, Resultados ponderados

<i>Tabela 6</i>	<i>Luanda (n = 456)</i>	<i>Benguela (n = 256)</i>	<i>Bié (n=68)</i>	<i>Cabinda (n = 39)</i>	<i>Cunene (n = 196)</i>	<i>Total (n=1015)</i>
	%	%	%	%	%	%
<i>Had enough food, 12 months</i>						
Yes	67.4	60.9	71.1	75.7	65.0	67.1
No	32.3	39.1	28.9	24.3	35.0	32.5
Don't know	0.4	0.0	0.0	0.0	0.0	0.3
<i>Had Enough Money, 12 months</i>						
Yes	60.8	53.6	69.5	55.7	56.9	60.4
No	38.6	45.8	30.5	44.3	43.1	39.0
Don't know	0.6	0.6	0.0	0.0	0.0	0.6
<i>Have ben homeless, 12 months</i>						
Yes	7.4	16.5	15.5	11.3	19.3	8.2
No	92.6	83.3	84.5	87.8	80.7	91.8
Don't know	0.0	0.3	0.0	0.9	0.0	0.0
<i>Was victim of violence, 12 months</i>						
Yes	18.4	20.2	17.2	17.0	18.8	18.5
No	81.0	78.9	79.9	83.0	81.2	80.9
Don't know	0.6	0.8	2.9	0.0	0.0	0.6
<i>Suffered aggression by the police, 12 months</i>						
Yes	17.2	16.6	22.6	16.5	21.8	17.3
No	82.7	83.2	76.6	83.5	78.2	82.6
Don't know	0.1	0.3	0.8	0.0	0.0	0.1
<i>Had been in jail for 1 night, 12 months</i>						
	19.4	20.2	18.8	14.8	26.9	19.5

<i>Tabela 6</i>	<i>Luanda</i> (n = 456)	<i>Benguela</i> (n = 256)	<i>Bié</i> (n=68)	<i>Cabinda</i> (n = 39)	<i>Cunene</i> (n = 196)	<i>Total</i> (n=1015)
	%	%	%	%	%	%
Yes						
No	80.4	79.5	81.2	85.2	72.8	80.3
Don't know	0.1	0.3	0.0	0.0	0.3	0.2
<i>Received legal aid to solve the issue of violence/stigma</i>						
Yes	11.4	13.6	21.8	3.9	33.2	12.0
No	88.1	85.8	76.2	96.1	66.5	87.6
Don't know	0.4	0.6	2.1	0.0	0.3	0.5
<i>Violated, 12 months</i>						
Yes	18.9	16.4	24.7	21.7	22.6	18.9
No	81.0	83.6	74.5	78.3	77.2	80.9
Don't know	0.1	0.0	0.8	0.0	0.3	0.1
<i>Discriminated by a health professional, 12 months</i>						
Yes	14.0	9.4	6.3	3.9	37.6	14.0
No	85.8	89.1	85.4	96.1	62.2	85.6
Don't know	0.2	1.5	8.4	0.0	0.3	0.4
<i>Identify as "TS"</i>						
Yes	32.3	34.3	20.1	53.9	56.1	32.9
No	66.7	59.4	78.7	46.1	43.7	65.8
Don't Know	1.0	6.3	1.3	0.0	0.3	1.3
<i>Identify as LGBT</i>						
Yes	38.3	64.1	46.4	43.0	68.0	40.3
No	59.7	31.4	49.8	53.5	31.7	57.5
Don't know	2.1	4.5	3.8	3.5	0.3	2.2

1.4 When it comes to discrimination, the 2011 IBBS survey found that almost half of men who have sex (MSM) with men, 171 (46.2%) reported having suffered some form of violence in their lives, that is, they were physically or discriminated against in relation to homophobia, 133 (70.4%) report episodes. Among those reporting episodes of discrimination based on sexual orientation (165), 40.1% reported that it occurred many times in the last 12 months and at work, school, business and recreation areas.

1.5 While the two studies have provided valuable data to inform with respect to the problems faced by MSM, including men who identify as Gay, no studies exist in Angola yet that explore the conditions of Lesbians, Bisexual women and transgender men.

2. LGBTIQ LEGAL PROTECTIONS

2.1 According to ARASA's 2016 Human Rights Report⁴, "the Constitution of the Republic of Angola is the overarching law and includes provisions protecting human rights and dignity.

2.2 Article 23 provides for equality before the law and also contains a substantive equality clause: discrimination is

4 <https://idpc.net/publications/2016/07/hiv-tb-and-human-rights-in-southern-and-east-africa-2016>

prohibited on the grounds of ancestry, sex, race, ethnicity, colour, disability, language, place of birth, religion, political, ideological or philosophical beliefs, level of education or economic, social or professional status. Health status is not specifically mentioned as a prohibited ground of discrimination, but people living with HIV and TB are entitled to the protections contained in the Constitution. The Constitution also provides for equality in marriage.”

2.3 National law and policies

Since there’s no national law or policies that addresses directly LGBTIQ people, there’s plenty of law that addresses them indirectly as citizens such as:

- HIV Law - Angola has an HIV law dated from 2004, Law 8/04, that provides protection for people living with HIV but also criminalizes transmission
- Domestic Violence protection - (Law 25/11) According to European Union Angola’s Gender diagnostic there is a lack of consolidated data on the number of complaints and on the characterization of the type of violence. The victims have complaints in both the WCO, the MINFAMU and the DIFAMU, such as in police stations and the National Directorate of Criminal Investigation (DNIC) (which has a specific sector for these cases⁵)
- Criminal Code recently approved adds sexual orientation as a factor for non-discrimination in multiple crimes such as slander, threats but more importantly regarding access to employment.
- Labor law number 7/15
- National Policy for Gender Equality and Equity (Decree No. 222/13) and the Strategy for Advocacy and Resource Mobilization for its Implementation and Monitoring (PNIEG).
- Strategy for reproductive health 2009-2015
- Basic Law for Education
- Basic Law for Health services

3. UPDATES SINCE THE 2nd PERIODIC REVIEW

3.1 A new Criminal Code was approved on January 2019 and

❖ Non discrimination on the basis of sexual orientation

3.2 A new penal Code was approved in January and will be acting into force by April this year. In this new code, article 71 that was interpreted as criminalizing homosexuality was eliminated and replaced with one that makes punishable discrimination on the basis of sexual orientation and provides a non-discriminatory article regarding access to unemployment or services condemns any employer that fires and refuses to employ someone because of sexual orientation.

3.3 This is a major improvement for Angola’s LGBTI community, as access to employment has been a challenge to the enjoyment of rights of this group:

❖ HIV Criminalization of Sexual transmitted diseases

3.4 Measures such as these create serious problems of access to health services for those with little or no access. On the other hand, they do not necessarily address the issue of sexually transmitted diseases, they create blame and sets risk and violent situations for people living with HIV or any other disease to disclose their status. As one of the vulnerable groups to access health services, LGBTIQ people will be facing even more barriers to do so.

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4. ONGOING CHALLENGES

4.1 Serious challenges remain to be resolved in various areas of public life for LGBTIQ persons. These challenges can be found in different testimonies from people from the LGBTIQ community that faced or either violence, problems in access justice, or discrimination in public places. One of the cases is the attempt violation faced by a group of lesbians reported and publish in Identity Archive website⁶.

Consultations with stakeholders point to several key issues, including but not limited to:

- **Nom discrimination and equality** - Non inclusion of non discrimination on the basis of sexual orientation and gender identity and expression in the different policies, strategies and directives such as access to education, violence response, access to health.
- **Lack of access to health.** – due to the level of health technician’s discrimination and specific services for LBQ women and intersex people. Consequently, this limits the access that LGBTIQ people have over all to health services.
- **Lack of access to Education** – LGBTIQ persons face discrimination in accessing schools, since there’s no inclusion of sexual orientation and gender identity and expression in school norms and curriculum. .
- **Discrimination in labor and employment** – Without a comprehensive antidiscrimination law or a provision in the Labor Code prohibiting discrimination on the basis of SOGIESC, obliging private institutions to address discrimination has been difficult.
- **Lack of access to justice** – access to justice for all human rights abuses is a challenge for Angolans and the justice system is often characterized by corruption and inefficiency. The justice system suffers from poor infrastructure and a lack of adequately trained and qualified personnel and cases take a long time to finalize. For LGBTIQ people very few cases have reached the court and very few lawyers provide assistance to LGBTIQ cases. We don’ts know if any case has been ever prosecuted.

4.2 Nonetheless we include even if not with statistics one more challenge faced by LGBTIQ people on daily basis.

- **Violence Against LGBT people by their families.** – The lack of information on how INCA (Angola national Institute for the Child’s welfare) works, makes LGBTIQ people facing violence situations, to be reluctant to use their services. Resorting to shelters is also a low probability because of stigma and discrimination. As consequence, the responses for violence has been inside the LGBTIQ community itself, with informal shelters, showing the solidarity within the community. These experiences of violence often begin at home, with perpetrators being the child’s own family. This situations have a domino effect, since some tend to result in expulsion from home, leaving LGBTIQ people homeless, either no possibility to attend school since parents refuse to pay, to no experience to access a job returning to common informal employment such as home cooks, hairdressers and sometimes sex work.

5. Analyses of LGBTIQ challenges one by one

5.1.Non-discrimination and equality

Key challenges to non-discrimination and inequality:

- Gender-based violence

5.1.1 The constitution of Angola provides the principle of equality and non-discrimination, article 23 as a fundamental right. However, there is still no specific law that includes the needs of non-discrimination behavior against LB women or any kind of law that expressly condemns violence or discrimination based on sexual orientation or gender identity. Although the proposed revision of the penal code expressly refers to sexual orientation and non-discrimination in the working space.

⁶ www.aia-ao.org

Recommendations:

- Review the current domestic violence law to broaden its scope to include gender-based violence that can include then the unique situations faced by LGBTIQ people, specifically violence on the basis of sexual orientation and gender identity and expression.

5. 2. Access to health

Key challenges to access to health:

- Need to increase clinical competencies and sensitization of health providers on LGBTIQ issues
- Lack of humanization of care in hospitals, is not unique to LGBTIQ people but is worse for them.
- Need for an assisted reproduction program in the case of lesbian and bisexual women.
- Lack of training and equipment to diagnose STIs that affect men who have sex with men; stock outs of treatment medication for most common STIs
- Need for medical follow-up for transgeneros in the transition process or gender reassignment and hormonal therapy.
- Need for specific follow-up for intersex, especially in post-surgical trauma issues due to genital mutilation.

5.2.1 LGBTIQ people are still facing discrimination when accessing health services. This is in part because sexual orientation and gender identity is still a very new topic that has just now started to be addressed in the health system services specially on how health workers should provide a more humanize service for all.

5.2.2 Access to health for LB (Lesbian, Bisexual) women has been indirectly connected to the continues work that has been done towards Men who have sex with Men (MSM), where a risk evaluation form with sexual practice with question such as same-sex practice has been included in some health facilities. The inclusion of LGBTIQ people in focal groups is usually in programs and activities related to MSM and trans women. Therefore, the health programs are focusing only in one part of the LGBTIQ acronym, and since in Angola LBIT people are not consider key population, there is no specific response for access to HIV and STI servicers for them.

5.2.3 One could argue that the LB women response is included in the health programs for women, but there is no specific inclusion or mention of LB women specially in the sexual and reproductive rights plan. When it comes to sexual orientation and gender identity, there is still much to be done when it comes to health workers to better understand and deliver a more differentiated service for not only Lesbian and Bisexual but also Intersex and all transgender people.

5.2.4 The LINKAGES project⁷ is USAID's flagship key populations program working in 30 countries and in Angola since 2015. In partnership with the Ministry of Health and the National HIV and AIDS Institute (INLS), LINKAGES has trained over 300 health professionals and administrative personnel on how stigma and discrimination can create obstacles to access to health services for key populations. The trainings have taken place in over 19 health facilities in Luanda province. The training includes the importance of assessing risk for HIV with patients and offers a simple questionnaire that can help providers ask about multiple partners, same-sex sexual practices and frequency of condom use to help providers address

⁷ <https://www.usaid.gov/what-we-do/global-health/hiv-and-aids/partnerships-and-projects/linkages-project>

risk-taking behaviors with their patients.

5.2.5 Although some of this work had influence health workers to deliver a more humanized service and to understand the impact of discrimination and its consequence to access to health, this does not eliminate the fact the intended objective of programs, such as this one, is to collect information sole about Trans women and MSM. The collection of information on LB women and intersex individuals has not been requested by the government.

Recommendation
❖ Approve, the new strategic Plan for 2015 until the next years, including sexual and reproductive services for LB women spevifically papanicolau exams for HPV screening and family planning in public health facilities ❖ Amend the forms attached to the national strategic plan for health to included information regarding intersex people, speciafficlay refering to three types of sex (man, female and intersex) ❖ Revise the HIV plan and definition for key population to include LGBTIQ people as key population to respond to the lack of access to health for LB women

5.3. Access to Education

Key challenges to access to Education: ▪ Need to combat stigma and discrimination against LGBTIQ people in schools. ▪ Lack of educational and information (IEC) material on inclusive sexual orientation and gender identity for LGBTQI people. ▪ High dropout rate of LGBTQI students, mainly gay and transgendered students. ▪ Lack of preparation and updating of teachers in LGBTQI.
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5.3.1 Having access to education is still one of the main issues for LGBTIQ people, especially lesbian women that are not performing their femininity and gay men that are not performing their masculinity and overall transgender people can be perceived as breaking the gender norms finding barriers to be accept in school. The struggle to continue studies is not only bound by school norms that dictates gender expression, but also by family imposition due to the lack of financial support. Many lesbians give up studying because they are not well accepted in school and cannot pay for their own school when family decides to stop supporting financially when found they sexual orientation.

Recommendations
❖ Amend the national education law and the topics approved for the education curriculum in school, specifically to include sexual orientation and gender identity and expression.

5.4. Access to employment

Key challenges to access to Employment:

- Unemployment is one of the biggest challenges, since most LGBTQI people are unemployed.
- Inequalities and lack of inclusion policies of LGBTQI in access to employment.
- Weak economic power.
- Need for programs to combat stigma and discrimination in the workplace, causing many LGBTQI to stop working.
- High number of dismissals motivated by sexual orientation and gender identity

5.4.1 Access to employment is still a very huge struggle for LB women in Angola. While formally the Labor Law protects everyone, there are still situations of discrimination against LBGTIQ individuals in work environment. Situations such as sexual harassment and exploitation happen very often.

5.4.2 The draft Penal Code has been in discussion in the past years, and [article 197](#) (“Discrimination”) of the draft stated that it ***“is criminalized with a two years prison sentence and 240 days fine if someone fires or refuse to hire someone based on race, religion, ethnicity, sex or sexual orientation.”***

5.4.3 This is one of the fewest provision that expressly mentions sexual orientation. If approved, the new penal code will allow LB women to have a legal instrument in case of rights violations in the work place.

Recommendations:

- ❖ Amend the labor law to include the prohibition of discrimination based on sexual orientation to access to employment or services stipulated in the Penal/Criminal Code, as way to reinforce this right.

5.5. Access to justice

Key challenges to access to justice:

- Need for policies to facilitate access to justice.
- Weak information and legal education.
- Need for programs to combat stigma and discrimination in the judiciary

5.5.1 According to ARASA’s 2016 human rights report, access to justice for all human rights abuses is a challenge for Angolans and the justice system is often characterized by corruption and inefficiency. The justice system suffers from poor infrastructure and a lack of adequately trained and qualified personnel and cases take a long time to finalize.

5.5.2 There are several national institutions to protect human rights: the Parliamentary Commission on Human Rights, Petitions, Complaints and Citizens’

5.5.3 Suggestions consist of 22 members of Parliament and are mandated to accept complaints from members of the public about human rights abuses. The State Secretariat for Human Rights was established in 2010 to promote human rights. There is also a Justice Ombudsman with a human rights mandate. Human rights activists have raised concerns about the functioning of these institutions, especially their lack of independence and a lack of will to address human rights violations. Both the CEDAW Committee and the African Commission on Human and Peoples’ Rights recommended the creation of more independent human rights institutions.

Recommendations:

- ❖ Approve procedures to facilitate access to justice such as a normative inside police station regarding sexual orientation and gender identity
- ❖ Revise the the legal information givens to law enforcement teams by including topics such as sexuality to adresses issues around discrimination on the basis of sexual orientation, gender identity and expression
- ❖ Revise programs that combats stigma and discrimination in the judiciary sytem by creating a focal person to respond to violence that included sexual orientation and gender identity and expressio
- ❖

6. FINAL RECOMMENDATIONS FOR MOVING FORWARD

6.1 As a way to respond to this challenges and to better create a non-discrimination response for LGBTIQ people we recommend the following:

Recommendations

- ❖ Review the current domestic violence law to included gender base violence to provide a response for violence faced by LGBTIQ people, spcifically violence on the basis fo sexual orientation and gender identity and expression.
- ❖ Amend the national education law and the topics approved for the education curriculum in school, specifically to include sexual orientation and gender identity and expression.
- ❖ Revise the HIV plan and definition for key population to include LGBTIQ people as key population to respond to the lack of access to health for LB women
- ❖ To implement the new penal Code by training officials to respond to the lack of access to justice, if possible, a specific official to respond to situations of discrimination based on sexual orientation in the violence response department
- ❖ Amend the labor law to included the non discriminaton based on sexual orientation to access to employment or services stipulated in the Penal/Criminal Code, as way to reinforce this right.
- ❖ Approve, the new strategic Plan for 2015 until the next years, including sexual and reproductive services for LB women specifically papanicolau exams for HPV screening and family planning in public health facilities
- ❖ Amend the forms attached to the national strategic plan for health to included information regarding intersex people, speciafficlay refering to three types of sex (man, female and intersex)
- ❖ Approve procedures to facilitate access to justice such as a normative inside police station regarding sexual orientation and gender identity
- ❖ Revise the the legal information given to law enforcement teams by including topics such as sexuality to adresses issues around discrimination on the basis of sexual orientation, gender identity and expression
- ❖ Revise programs that combats stigma and discrimination in the judiciary sytem by creating a focal person to respond to violence that included sexual orientation and gender identity and expression