RESEARCH THAT MATTERS

THE ECONOMIC COST OF LGBT STIGMA AND DISCRIMINATION IN SOUTH AFRICA

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EXECUTIVE SUMMARY

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Lesbian, gay, bisexual, and transgender (LGBT)[1] South Africans experience barriers to economic and social inclusion related to structural inequality and social stigma along multiple axes (e.g., race, sexuality, gender, sex). While Apartheid, the system of institutionalized racial segregation that officially commenced in 1948,[1] created and sustained this inequality for decades, South Africa's rebirth as a nation—reflected in the passage of a new constitution in 1996 and recognition of 11 national languages[2] —positions the country to continue to advance the rights and well-being of its full, diverse population. An estimated 634,000 South African adults are willing to self-identify as lesbian, gay, bisexual or "other" than heterosexual or straight and 1.1% of cohabitating couples report that they are living in same-sex marriages/partnerships to survey collectors.

Despite a progressive legal landscape for sexual minorities (LGB), and courts that have upheld the rights of transgender adults, LGBT South Africans experience sizable barriers to economic inclusion based upon race, sexual orientation, and gender identity and expression. Black Africans (79.2%) are the majority in South Africa, followed by "Colored"/mixed race ancestry (8.9%), White (8.9%), Indian or Asian (2.5%), and other (0.5%).[3] Although Apartheid ended in 1994, 25 years ago, South Africa is regarded as having one of the highest levels of inequality in the world.[4] For instance, analyses of the 2011 South African census show unemployment rates for Black, Colored, and White same-sex households at 30.9%, 16.7%, and 4.2%, respectively, as compared to 26.4%, 14.1%, and 3.8% for different-sex households. [5]

Although laws prohibiting same-sex sexual behavior were deemed unconstitutional in 1998, public attitudes towards homosexuality and gender nonconformity (expressions of masculinity and femininity that deviate from stereotypical sex-linked expectations of gender) remain negative. According to a 2016 survey led by the Other Foundation, seven out of 10 South Africans felt strongly that homosexual sex and breaking gender dressing norms were simply 'wrong' and 'disgusting.'[6] Levels of violence against LGBT people, as well as concerns about victimization among South African LGBT people are high.[7]

The Conceptual Framework for Action on the Social Determinants of Health[8] informed this study. Norms and values that privilege the dominant group (white, heterosexual, cisgender, gender conforming) and stigmatize others (racial and sexual and gender minorities) shape living and working conditions. LGB (as well as T) stigma[9,10] and structural racism[11] are mediated through governmental and institutional policies, as well as through interpersonal dynamics, and influence exposure to violence, sexual assault, school-based bullying, as well as access to resources (i.e., wages, competent health services). Two primary data sources, the 2015 and 2016 South African Social Attitudes Surveys (2015/2016 SASAS) and the 2011 South African Census, were used to create a snapshot of the socioeconomic and health status of LGB and gender nonconforming adults, and, for the very first

[1] Several acronyms are used in this report, including LGBT, LGB, and LGBTI in order to accurately reflect the information sources used in this report. I represents intersex and is referenced along with LGBT populations in many South African governmental strategic plans. Hence, the recommendations contained in this report refer to LGBTI people.

time, of same-sex cohabitating couples. As described in chapter IV, these, and other sources, including published articles and reports, were used to calculate estimates of the economic costs of stigma and discrimination against LGBT and other gender nonconforming people in South Africa.

KEY FINDINGS

- Gender nonconforming (e.g., women perceived as masculine and men perceived as feminine) heterosexual and LGB individuals were *less* likely to be employed than gender conforming heterosexual individuals (33.8% and 14.9% versus 46.4% employed, respectively). Gender nonconforming LGB individuals were the *least* likely to be participating within the paid labor force.
- The monthly earnings of gender nonconforming heterosexuals and GB men was, on average, 30% lower than that of gender conforming heterosexual men, accounting for socio-demographic characteristics and job type.
- Estimates of suicidality among LGBT people vary; however, most studies report rates that far exceed the lifetime suicide attempt rate (2.9%) observed in the general population in 2002-2004.[12] In 2004, 17% of LGBT individuals in KwaZulu-Natal[13] and 21% in Gauteng[14] surveyed for the OUT Study reported lifetime suicide attempts.
- In 2017, HIV sero-prevalence among men who have sex with men was estimated at 26.8%, compared to 18.9% amongst the general population,[15] and may be twice as high among transgender women in the region.[16]
- Violence, particularly sexual violence, against LGBT South Africans is common. More than one in ten (11%) LGBT 16 to 24 year-olds who completed the recent OUT LGBT Well-being survey reported having experienced rape or other sexual abuse at school within the prior 24 months.[17] Nearly a third (31%) of lesbian and bisexual women from southern Africa who participated in a HIV risk study reported lifetime experiences of sexual violence. [18] In contrast, 3.7% of all South African adults surveyed in 2002-2004 reported lifetime experiences of sexual violence.[19]
- Gender nonconforming adults, including those who are heterosexually-identified and those who are LGB-identified, were more likely to feel personally unsafe most days compared to gender conforming adults (25.4% vs. 20.7% and 35.5% vs. 17.5%, respectively), particularly when "walking alone in the dark" (51.9% vs. 41.9% and 45.5% vs. 20.2%, respectively).
- Nearly half (48%) of health sector workers who completed the 2015/2016 SASAS endorsed statements that they "think it is disgusting when men dress like women and women dress like men," and 42% indicated that they "think gay men [and lesbians] are disgusting."
- Majorities of gender nonconforming heterosexuals and LGB adults (73% and 77% respectively) which completed the 2015/2016 SASAS were dissatisfied or very dissatisfied with their access to health care.

Annual economic costs of LGBT stigma and discrimination are estimated as follows:

- US$ 316.8 million due to wage discrimination and underemployment related to sexual orientation and gender expression.
- Between US$ 3.2 billion and US$ 19.5 billion due to health disparities disproportionately experienced by LGBT adults.

- Between US$ 10.5 million and US$ 64.8 million due to sexual assault disproportionately experienced by LGBT adults.

RECOMMENDATIONS

Given South Africa's progressive Constitution, and recognized need for an inclusive and sustainable economy, the following recommendations expand upon existing policies and infrastructure to promote the full inclusion of LGBT and other gender nonconforming people in South Africa. Moreover, an exciting opportunity exists to promote conversations about Africanizing approaches to development that draw from the concept of *Ubuntu*[20] and would place collective responsibility and care at the center of public policy and practice. Such an approach would harness all creative forces in society to promote development in South Africa.

Overarching recommendations

- Produce reports on implementation and inclusion of LGBTI[2] people in governmental strategic plans (see Tables below) and Chapter 9 Commissions (e.g., Commission for Gender Equality, South African Human Rights Commission, Commission for the Promotion and Protection of the Rights of Cultural, Religious and Linguistic Communities) and advisory groups (e.g., National Task Team on Gender and Sexual Orientation-based Violence Perpetrated against Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Persons).
- Include LGBTI people as full members on all Chapter 9 Commissions and advisory groups across all sectors of government.

[2] I represents intersex and is referenced along with LGBT populations in many South African governmental strategic plans. Hence, the recommendations contained here refer to LGBTI people. However, as the research literature is thin about the experiences of intersex people, the term LGBT is used most often in this report.

Specific Recommendations

Reduce stigma through structural change that supports education and norm change to prevent violence, harassment, and discrimination against LGBTI and other GNC (gender nonconforming) people and support reporting and appropriate responses to such experiences.

- Foster inter-departmental collaboration between the police and the Department of Justice, which lead the National Task Team on Gender and Sexual Orientation-based Violence, with the Department of Education and the Department of Social Development to increase efforts to prevent violence, harassment, and discrimination.[21]
- Change negative attitudes that promote violence and harassment against LGBTI and other GNC people by integrating interventions in state-funded efforts to reduce interpersonal violence—both within public schools and within community environments. For instance, SOGIE (sexual orientation, gender identity, and gender expression) material could be added to the school-based Life Orientation curriculum.
- Train all police, hospital staff, and first responders within schools and universities, and beyond, to offer LGBTI-competent responses to violence victimization, harassment, and discrimination. Provide anti-bias training and evaluate the impact of this training on performance, including the impact of "sensitivity" training on the performance of officers within the Department of Home Affairs regarding LGBTI asylum seekers.
- Utilize the wide-reaching influence of the South African media to provide positive images about and messaging of LGBTI and other GNC people.[22]

Ensure appropriate implementation and monitoring of LGBTI-protective legislation.

- Create a cohesive plan for implementing and monitoring LGBTI-protective legislation across legislation, including an assessment of the extent to which current legislation protects transgender and GNC people (i.e., on the basis of gender identity and expression.)
- Ensure that relevant officials, such as police, justices and magistrates, receive proper training and resources regarding SOGIE issues, and especially in relation to racial inequality, to ensure the implementation of SOGIE-related legislation.[23]
- Increase access to marriage for same-sex couples across South Africa by ensuring that a willing marriage officer is present in every Department of Home Affairs office through the implementation of The Civil Union Amendment Bill.[24,25]

Reduce barriers to identity documents for transgender people

- Modify Act 49—Alteration of Sex Description and Sex Status Act 49 of 2003 to allow gender identity marker change on birth certificates without medical diagnoses or intervention.

Improve access to competent health care for LGBTI people[26]

- Increase training by health care providers and others in the health care system regarding the provision of LGBTI-competent care.
- Ensure the provision of counseling and access to hormone therapy for transgender people at primary care levels to ensure wider accessibility to rural and peri-urban communities.

Foster LGBTI-inclusive working environments.

- Adopt inclusion as a key management principle and support the formation of LGBTI employee groups to advise businesses regarding institutional policies, practices, and resources (e.g., sexual harassment, dress-code, LGBTI-affirming counseling). See resources at The LGBT+ Management Forum.
- Adopt policies and practices that promote fairness and positive outcomes for racial minorities and women, as well as sexual and gender minorities (LGBTI people), and other GNC people and their families (e.g., family responsibility leave, provident fund provisions).

Enable LGBTI-inclusive outcomes monitoring by adding LGBTI (SOGIE) measures to surveys and administrative systems.

- Include multiple SOGIE (i.e., sexual orientation identity, gender identity, gender expression, sex assigned at birth, intersex measures, sex of romantic partners) measures in all large, state (meaning publicly-funded) surveys, the Census, and administrative data systems (e.g. General Household Survey, Quarterly Labour Force Survey), as shown in Tables D and E below. These data should be used to explore variability in economic, health, and well-being across sexual orientation, gender identity, gender expression, and race, as well as to assess the potential impact of public policies on LGBTI and other GNC people.
- Ensure that systems for monitoring harassment and discrimination track and report discrimination by SOGIE and are known to and accessible by LGBTI and other GNC people.

Conduct further research on LGBTI issues to build on the analyses of same-sex couple households and LGB and GNC adults included in this report.

- Further data collection and analyses of the experiences of transgender and intersex people are needed to fill voids in the South African data landscape.
- Further research on the experiences of LGBTI people who are not currently residing in same-sex couple households is needed—particularly in large, representative datasets that support analyses stratified by sex and race, among other demographic characteristics.
- Monitor and evaluate current and future efforts to promote the inclusion of LGBTI people as outlined through the recommendations above.
- Conduct further social science research on sexual and gender diversity, past and present, within South Africa.
- Continue to evaluate and improve the collection of SOGIE data on the South Africa Census. Specifically, research on the reporting of relationship status on the household roster, particularly in households with multiple married/partnered adults, would be helpful.
- Study the role of LGBTI people in the informal economy and investigate strategies to cultivate and promote LGBTI-owned small businesses to reduce economic inequities and social stigma associated with being LGBTI.

Table 1.1. Governmental strategic plans that explicitly mention LGBTI populations

NAME	PURPOSE	DESCRIPTION
Department of Basic Education Revised Five-Year Strategic Plan 2015/16-2019/20[27]	The plan "identifies important strategic outcome-oriented goals and objectives against which the Department of Basic Education's medium-term results can be measured and evaluated by Parliament" (p. 9).	"Inadequate safety measures in schools" is identified as a "strategic risk." One of the ways this risk is to be mitigated is to provide "guidelines on LGBTI programme" in schools (p. 57).
Department of Justice and Constitutional Development Strategic Plan 2017-2020[28]	The document outlines medium- to long-term policies and programs to be implemented by the Department and related offices, as well as key performance indicators. The document serves as a monitoring and evaluation apparatus to which the justice sphere is held accountable.	One of the "strategic objectives" was to finalize the National Action Plan regarding the "management of crimes against the LGBT community" (p. 34). LGBTI persons are identified as at risk of exposure to "violence and related harm" (p. 23).
Department of Social Development Strategic Plan 2015-2020[29]	Outlines the strategic objectives and department aims to be achieved in the 5-year period (p. 9).	Gender-based violence (GBV) is viewed to as encompassing the "homosexual community" (p. 19). The Director-General acknowledged that "[t]he homosexual community is even more vulnerable because of discrimination and prejudices that continue to prevail" and states that the department will continue efforts to make the "Command Centre" network, which responds to violence, more accessible (p. 10).
Human Sciences Research Council Strategic Plan 2016/2017 - 2020/2021[30]	Outlines the "strategic way forward" for HSRC for the aforementioned period (p. 1).	The Human and Social Development (HSD) research sub-program includes an investigation on "marginal sexualities" (p. 23). HSD has also produced research outputs concerning homophobia, hate crimes, and gender-based violence which aligns with the National Development Plan on "building safer communities" (p. 60). HSRC conducts its own performance monitoring and evaluation.
National Action Plan to Combat Racism, Racial Discrimination, Xenophobia and Related Intolerance 2016 – 2021 (draft for public consultation)[31]	Guide and basis to develop public policy to combat and eliminate "racism, racial discrimination, xenophobia and related intolerance" in both private and public levels (p. 7).	The document mentioned several targets to achieve, namely "[r]eview and strengthen measures adopted with regard to promoting tolerance, in particular in the field of education and through awareness-raising campaigns, including in the media" and "[p]ass the Hate Crimes legislation." (p. 47)

NAME	PURPOSE	DESCRIPTION
National Development Plan 2030[32]	Outlines the plan to eliminate poverty and reduce inequality by 2030 (p. 24).	One of the goals of the Plan is to reduce gender-based violence, which is considered to also impact "transgendered communities, gays and lesbians severely" (p. 395). The Department of Planning, Monitoring and Evaluation (DPME), is responsible for tracking progress towards the goals identified in the Plan. In the latest report, dated March 2018, no mentions of SOGIE or LGBTI were found.[33]
National Intervention Strategy for Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Sector[34]	Strategy to address sex- and gender-based violence against LGBTI people.	A monitoring and evaluation program to track progress is one of the goals of the strategy, but there is no detail about implementation.
National Strategic Plan for HIV, TB and STIs 2017-2022[35]	Strategic plan to reduce the public health threat of HIV, TB, and STIs. This is the fourth iteration, done by South African National AIDS Council (SANAC).	MSM and transgender people are identified as one of the key populations for HIV and STIs. "Other" LGBTI populations are considered as one of the vulnerable populations for HIV and STIs (Goal 3, p. 23). Monitoring and evaluation is done via the Integrated bio-behavioral survey (IBBS) and population size estimation (p. 79). IBBS of men who have sex with men (MSM) was launched in 2014 as the South Africa Men's Health Monitoring Study (SAMHMS),[36] while IBBS of transgender women was launched in early 2018.[37] Both IBBS have not produced any reports that appear to be available to the public.
South African Human Rights Commission Revised Strategic Plan for the Fiscal Years 2015-2020[38] South African National LGBTI HIV Plan, 2017-2022[39]	"The revised strategic plan sets out the vision of the Commission and highlights future prospects that could affect its work, particularly issues regarding financial and human resources" (p. 2) National strategic plan for HIV targeted towards the LGBTI population, coordinated by the South African National AIDS Council (SANAC).	The plan recognizes that "inequality and unfair discrimination, including on the grounds of…gender…and sexual orientation, remain a challenge" (p. 20). However, there is no specific mention of SOGIE in the Commission's strategic goals (only referred broadly as "human rights.") Various surveys, including population size estimations and integrated bio-behavioral surveys, will be conducted by SANAC as part of monitoring and evaluation efforts (p. 21). No further details were available, and none of the surveys appear available to the public.

Table 1.2 Governmental strategic plans that do not mention LGBTI populations

NAME	PURPOSE	DESCRIPTION
Commission for Gender Equality Five-year Strategic Plan 1 April 2013 - 31 March 2018[40]	"The strategic Plan is aimed at the consolidation of the strategic activities over the next 5 years in pursuit of the vision for a society free from gender oppression and inequality" (p. 5).	No mention of SOGIE topics (e.g. LBT women) in the document.
Department of Health Strategic Plan 2015-2020[41]	"The Department created this Strategic Plan to ensure that the nation's resources are working toward the same goals as articulated in the National Development Plan" (p. 5).	Cites the Medical Schemes Act, Employment Equity Act and Promotion of Equality and the Prevention of Unfair Discrimination Act as some of the legislations applicable to the Department (p. 12), all three of which contain some measure for protection based on SOGI. However, there is no other specific mention of SOGI or LGBTI people in the document.
Department of Labour Revised Strategic Plan 2015-2020[42]	The plan "reflects the strategic outcome-oriented goals and objectives which the Department of Labour will endeavour to achieve over the period 2015 to 2020" (p. xi).	Cites the Employment Equity Act as one of the legislations applicable to the Department (p. 3), which contain some measure for protection based on SOGI. However, there is no other specific mention of SOGI or LGBTI people in the document.
Statistics South Africa (SA) Strategic Plan 2015/2016 - 2019/2020[43]	"The objective of this 5-year Strategic Plan is to set a new direction for Stats SA in order to increase the supply and use of official statistics by enabling the state to conduct its business in a Transparent and Accountable manner and enabling the state to make Results-based decisions to drive Transformation" (p. 16).	No mention of LGBTI people, including same-sex households, in the document.

Table 1.3. National health guidance (select) and related white paper on the National Health Insurance system that mentions LGBTI populations

NAME	PURPOSE	DESCRIPTION
Standard Treatment Guidelines and Essential Medicines List for South Africa: Primary Health Care Level, 2018 Edition[44]	The document "comprises evidence-based standardised guidance for healthcare workers, in order to promote equitable access to safe, effective, and affordable health services" (p. ii)	Being LGBT is identified as one of the key risk factors for self-harm/suicide (p. 16.18). The document also identified that mental illness is more common amongst transgender people and people with "alternative sexual orientations" (p. 16.20).
National Adolescent & Youth Health Policy 2017[45]	To provide "guidance to departments and organisations working with the Department of Health on how to respond to the health needs of young people" (p. 1).	Sexual and reproductive health services were identified as "often [not meeting] the needs" of LGBTI youth and adolescents (p. 7).
Socio-Economic Impact Assessment System (SEIAS) Final Impact Assessment (Phase 2): White Paper on National Health Insurance[46]	"The White Paper on NHI is aimed at providing a policy framework for transforming health system in the manner in which health care services are financed and purchased, as well as how these services are provided. NHI is aimed at transforming the fragmented two-tiered health system, the public and private, into a unified health system as envisaged by the 1997 White Paper on the Transformation of the Health System in South Africa" (p. 2).	Consultations with stakeholders in civil society identified a "[c]oncern that NHI does not address adequately the LGBTI community" (p. 22).

Table 1.4. Nationally-representative surveys (select)

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
Census South Africa	Statistics South Africa	Yes	Limited	Census 2011[47] **P-02 RELATIONSHIP** **What is (name's) relationship to the head or acting head of the household?** 02 = Husband/Wife/Partner	First administered post-Apartheid in 1996, then in 2001 and 2011. Possible to identify same-sex households through the question on relation to household head. Census 2011 had 4,418,594 respondents who participated in the survey.[48]
Community Survey	Statistics South Africa	Yes	Limited	CS 2016:[49] **3.7.1.5 What is (name's) relationship to the head or acting head of the household?** 02 = Husband/Wife/Partner CS 2007:[50] P-07 RELATIONSHIP **What is** (the person)**'s relationship to the head or acting head of the household?** 02 Husband/Wife/Partner	Administered in 2007 and 2016. CS 2016: 3,328,867 persons[51] and 984,627 households[52] were sampled. CS 2007: 1,047,652 persons[53] and 246,618 households[54] were sampled. Possible to identify same-sex households through the question on relation to household head.

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
General Household Survey	Statistics South Africa	Yes	Limited	GHS 2017:[55] **1.1 What is ……'s relationship to the head of the household? (i.e. to the person in column 1)** 2 = Husband/wife/partner of person 01	Administered annually since 2002. Possible to identify same-sex households through the question on relation to household head. Uses the 2013 Master Sample, which included 3,324 primary sampling units with an expected sample of 33,000 dwelling units.[56] 2017 survey had 21,225 households[57] and 72,291 persons[58] sampled.
Living Conditions Survey	Statistics South Africa	Yes	Limited	LCS 2014-2015:[59] **1.6 What is ……'s relationship to the head or acting head of the household?** 02 = Husband/Wife/Partner of person 01	First and only was administered in 2014-2015/ Data collected from 27,527 households across the country.[60] Possible to identify same-sex households through the question on relation to household head.
Quarterly Labor Force Survey	Statistics South Africa	Yes	No	None	Administered quarterly since 2008. Used the 2013 Master Sample, which includes 3,324 primary sampling units with an expected sample of 33,000 dwelling units.[61] Latest iteration from Q2 2018 had 69,082 cases.[62]

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
South African National Health and Nutrition Examination Survey	Human Sciences Research Council	Yes	No	None	Administered in 2013. 10,000 households (VPs) were sampled, of which 8,168 were valid, and 6,306 agreed for interview. A total of 25,532 individuals (92.6%) completed the interview.[63]
South African National HIV Prevalence, Incidence, Behaviour and Communication Survey	Human Sciences Research Council	Yes	Yes	Questionnaire on sexual history included a measure for sexual orientation; however, we were unable to access the physical questionnaire to view the specific measure at the time this report was prepared.[64]	Administered in 2002, 2005, 2008, 2012, and the latest in 2017. 2017 survey had 11,743 valid households and 39,132 eligible individuals in which 82.2% and 93.6% of the sample provided valid responses, respectively.[65]

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
South African Social Attitudes Survey	Human Sciences Research Council	Yes	Yes	**Would you describe yourself as being a member of a group that is discriminated against in this country?** Yes No Do not know **On what grounds is your group discriminated against? PROBE: 'What other grounds'?** f. Gender g. Sexual orientation *Note: point g is "sexual preference" on surveys prior to 2008.*[66] SASAS 2015[67] and 2016[68] **235. Which of the following options best describes how you think of yourself?** Heterosexual or straight Gay or lesbian Bisexual Other (Don't know) (Refused to answer) *Note: question 252 in 2016 iteration.* **236. What best describes how you present yourself in public in terms of how you dress and act?** Strongly, and exclusively masculine Mostly masculine A mixture of both masculine and feminine Mostly feminine Strongly, and exclusively feminine Neither masculine or feminine (Don't know) (Refused to answer) *Note: question 253 in 2016 iteration.*	Sexual orientation and gender identity measures were first added in 2015. Although the sample is nationally representative, the total target sample size is only 3,500, with 3,115 responses in 2015[69] and 3,079 responses in 2016.[70]

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
Survey of Activities of Young People	Statistics South Africa	Yes	No	None	Administered in 1999, 2010, and the latest in 2015. 2015 survey had 13,640 valid samples,[71] 2010 has 17,372.[72]
Victims of Crime Survey (VOCS)	Statistics South Africa	Yes	Yes	VOCS 2015-2016[73]/2016-2017[74] **Does the fear of crime prevent you from doing any of the following in your area?** 4 = Dressing in any way you want 5 = Expressing your sexual orientation	Administered annually since 2011. Possible to identify same-sex households through the question on relation to household head. VOCS 2015 includes for the first time a measure for sexual orientation and gender expression. Sample is nationally representative. Samples used in VOCS 2015 and 2016 were based on the 2013 Master Sample, which included 3,324 primary sampling units with an expected sample of 33,000 dwelling units.[75]
Youth Risk Behavior Survey	Human Sciences Research Council	Yes	No	None	Administered in 2002, 2008, and 2011. 2008 survey was conducted nationally in a randomly selected sample of 251 schools for a total of 10,270 learners. The survey notes that "[o]f the 10,270 respondents, the 173 who had not identified their gender as male or female were removed from the analysis" (p. 20)[76] We were unable to access the 2011 survey at the time this report was prepared.

Table 1.5. Government vital statistics systems[77]

NAME	AGENCY RESPONSIBLE	LGBTI INCLUSIVE?	NOTES
Recorded Live Births	Statistics South Africa	No	Sex is recorded as male or female and assumes different-sex parents.
Marriages and Divorces	Statistics South Africa	No	Uses "bridegroom" and "bride" (2008-present) or "husband" and "wife" (2006-2007) instead of gender neutral terms.
Mortality and Causes of Death	Statistics South Africa	No	Sex is recorded as male or female.

HISTORY AND SOCIOPOLITICAL CONTEXT

S.N. Nyeck

INTRODUCTION

Since the adoption of the post-Apartheid constitution of 1996, South Africa has been a leading example of progressive reform for lesbian, gay, bisexual, transgender, and intersex (LGBTI)[3] persons in Africa and the world. Chapter 2 of South Africa's Bill of Rights Section 9 (3 & 4) stipulates,

> The state may not unfairly discriminate directly or indirectly against anyone on one or more grounds, including race, gender, sex, pregnancy, marital status, ethnic or social origin, color, sexual orientation, age, disability, religion, conscience, belief, culture, language and birth. No person may unfairly discriminate directly or indirectly against anyone on one or more grounds in terms of subsection (3). National legislation must be enacted to prevent or prohibit unfair discrimination.[78]

The South African Constitution also recognizes that "everyone has the right to secure ecologically sustainable development and use of natural resources while promoting justifiable economic and social development."[79] The international community has come to define sustainable development as "development that meets the needs of the present without compromising the ability of future generations to meet their own"[80] through a multi-stakeholder model of policymaking and implementation. Thus, the inclusiveness of the economy must be determined not only by representation in the policy-making process, but also by representation in national opportunities and through indicators of "shared prosperity."[81] Assessing economic inclusion this way means that attention to patterns that allow or restrict LGBT people's ability to contribute to economic growth with their human capital (their most natural resources), skills, and other assets, and benefit from it, is needed.

Previous research has described direct and indirect costs to the national economy associated with stigma and exclusion. In Indonesia, reduced workplace productivity and health disparities for LGBT persons were noted, along with potential loss in national revenue due to reputational cost and divestment of international investment.[82] Conversely, the estimated benefits of LGBT inclusion in the Indian economy are: "potential growth, along with the loosening of restrictive gender roles, can contribute to unleashing additional creative energy and economic growth opportunities."[83]

LGBT inclusion in economic life has strategic implications for South Africa as a regional and continental power because it asserts the duty of citizens to become agents of sustainable and social development. The *African Charter on Human and People's Rights* recognizes such individual duties as encompassing the duty to,

[3] Many South African governmental strategic plans refer to LGBTI populations. Hence, the recommendations contained in this report refer to LGBTI people. However, because the research literature is thin about the experiences of intersex people, the term LGBT is used most often in this report.

> respect and consider his fellow beings without discrimination…serve national community by placing his physical and intellectual abilities at its service…serve and strengthen positive African cultural…values with other members of society, in the spirit of tolerance, dialogue and consultation, and in general to contribute to the promotion of the moral well being of society. To contribute to the best of his abilities, at all times and at all levels, to the promotion and achievement of African Unity.[84]

Despite the exclusively masculine language in the Charter, the duties it outlines justify public policy and social behavior that enhance the productive capability of all members of society, including LGBT persons. South Africa is uniquely positioned to carry lessons of political and legal inclusion across Africa, as well as those of economic empowerment embedded in a broader Africanist vision of productive individuals and communities,. An exciting opportunity exists to promote conversations about Africanizing approaches to development that feature Africanist notions of hospitality, collective responsibility, and care—as is conveyed in the concept of *Ubuntu.*[85]

This study is concerned with the economic and social status of lesbian, gay, bisexual, and transgender (LGBT) people in South Africa. Although the acronym LGBT is used widely, it does not convey the many ways in which South Africans understand sexual orientation, gender identity (an individual's internal perception and naming of one's gender irrespective of one's sex), and gender expression (visible expression of one's gender identity, or how an individual presents their gender externally, such as through mannerisms, clothing, or behaviors). We acknowledge different terms in indigenous languages to describe same-sex and same-gender loving persons in South Africa,[86] but the report retains the conventional use of LGBT.

A social determinants of health framework[87] informed this study in that LGB (and T) stigma[88,89] and structural racism[90] are conceptualized as macro-level forces that inform governmental and institutional policies, as well as interpersonal dynamics, to shape living and working conditions for LGBT people. As such, this study reviews the legal landscape for LGBT people in South Africa, public opinion research, and the social science literature, and conducts original empirical analyses of large, representative datasets to characterize and begin to estimate the costs of LGBT stigma and discrimination on the national economy. We locate this work within a history of the oppression and resistance of LGBT South Africans. The impact of colonialization and the demise of Apartheid merit attention because they help to inform our understanding of the state of LGBT rights and underpinnings of LGBT stigma and racial inequality that exist in South Africa today. Finally, we propose recommendations to elevate the status of LGBT people in South Africa within the existing landscape of efforts to promote economic development and human rights.

LGBT PEOPLE IN SOUTH AFRICA: HISTORY AND SOCIOPOLITICAL CONTEXT

Scholars have begun to describe the complex ways in which people within the Southern Africa region thought about sexuality and gender pre-colonialization,[91] noting that most people in South Africa today do not view same-sex relations as African.[92] An extensive repertoire of ways that gender and sexual diversity were understood and accepted in traditional cultures has been collected through personal interviews by The Gay and Lesbian Archives of South Africa (GALA).[93,94] Same-sex relationships, among women and men, existed within indigenous pre-colonial societies of Southern Africa,[95,96] as did and do multi-spousal (wives) family arrangements.[97] And, while the term *transgender* did not exist in indigenous cultures, traditional spiritual practices did and do allow for boundary-crossing and are aligned with the notion of gender change.[98]

Apartheid, a political system of segregation based on race and established by Dutch Calvinist and English Puritan settlers, lasted from 1948 until 1994 in South Africa. Keeping people of different "races" separate included regulating sexuality. Normative sexuality was defined by the beliefs of the European settlers who constructed and sustained the Apartheid system. Roman-Dutch views of marriage included "the comparison of the relationship between husband and wife with that of Christ and his congregation provided for the view of marriage as a relationship between one man and one woman solely.[99] Moreover, sexual puritanism became one of the characteristics of segregation under the leadership of D.F. Malan, the first Prime Minister of the Apartheid regime who was also a Minister of the Dutch Reformed Church.[100]

Efforts to control sexuality pervaded the Apartheid period and is reflected in The Prohibition of Mixed Marriage Act no. 55 of 1949[101] and The Sexual Offense Act no. 23 of 1957[102] which prohibited both interracial and homosexual relationships. The Apartheid regime depended on brute force to regulate intimacy. A regular supply of armed forces to enforce these Acts was secured through the enrollment of White males into the Union Defense Force created in 1912 (later renamed as the South African Defense Force in 1957)[103] for the defense of morality and of the territory. The Apartheid regime enlisted the clergy and the medical establishment to quarantine the "sexually unfit" within the military and among its prisoners. According to Kaplan, "conscript ranks were screened for homosexuals by doctors and chaplains. Threatened with punishment if they did not comply, they were admitted to the secretive Ward 22 at 1 Military Hospital, Voortrekkerhoogte, Pretoria and received psychiatric shock therapy or chemical castration. [104] In later years, homosexual women were also selected."[105]

Eradicating homosexuality, even among the White population, was therefore seen as necessary to maintain racial superiority. The extent of the repression did not fully come to light until the Truth and Reconciliation Commission of South Africa (TRC) hearings in mid-1990s. During the transition to a democratic South Africa, a team of researchers and activists uncovered about 900 cases of young men aged 16 to 24 years old who underwent forceful surgeries and hormonal treatments in military hospitals over a period of approximately two decades.[106] Forceful therapy conversion of homosexuals, which, in South Africa, included sex and gender identity change to maintain an "opposite sex" sexual orientation, was condoned in the world until 1973 when the American Psychiatric Association declared that homosexuality was not a mental illness or sickness.

Harold, one of the survivors of Apartheid gay mutilation, puts it as follows:

> "The army has whole gay battalions who they just shunted and let be. But if things went wrong and you ended up in the hands of the psychologists then it could get very bad. In my case it began with electric shocks and only ended after they'd already given me breasts, and then the army said it had abandoned the whole policy."[107]

Under the Apartheid regime, homosexuals were bodies to be experimented on and discarded at the discretion of the state. Even as the state decriminalized interracial sex in 1980s, same-sex relations remained criminalized as they were still seen as "a cause of social breakdown and an impediment to good citizenship."[108]

The sexual history of Apartheid cannot be understood in isolation, but must be seen as a broad-based policy of multilayered and systemic exclusion that primarily served to economically impoverish, isolate, and psychologically torture Black Africans of all sexualities and gender identities. Apartheid policies such as land confiscation and inferior Bantu education applied to all Black Africans.[109] Apartheid showed both the micro and macro dynamics of exclusion, the consequences of which place current concerns about sexual and gender minorities within a historical perspective of a struggle that cannot be restricted to a single-issue in South Africa. Attention to the needs of various LGBT groups and their complex experiences in South Africa is needed for a truly inclusive approach to sustainable development—especially in key areas such as economic development and public health.[110]

DEMOCRATIZATION AND SEXUAL RIGHTS IN SOUTH AFRICA

Beginning in the 1980s, lesbian and gay persons and groups became agents of socio-political transformation in South Africa. In 1986, newly formed lesbian and gay rights groups, the Lesbian and Gays against Oppression (LAGO) and the Gay and Lesbian Organization of the Witwatersrand (GLOW), capitalized on international criticism of Apartheid to communicate their broad social justice platform to various audiences abroad and at home.[111] Thus, the "gay and lesbian movement was ultimately successful because its leaders were wise enough to present their struggle as forming part of a broader struggle against oppression by the Apartheid state"[112] and eventually succeeded in gaining recognition with the African National Congress.

Still, in the early 1990s, as South Africa prepared for a transition from Apartheid to a full democracy, "gay rights" received little attention despite the inclusion of sexual orientation in the interim constitution. As organizer Theron observed, "no attempt [was] made to scrap the law (Sexual Offenses Act no. 23 of 1957) which criminalize[d] male homosexual behavior [...] to introduce legislation that will protect gays from victimization."[113] In 1992, when academic research on "non-normative" sexuality was scant in South Africa, the newspaper *Exit* conducted a survey of 611 subscribers, mostly gay men, and documented frequent anti-gay violence including verbal abuse, sexual assaults, being kicked or punched, followed or chased, threats of violence, and destruction of property. About 78% of the respondents felt that existing laws were still inadequate in addressing social violence and discrimination.[114] In the following years, growing gay and lesbian activism led to the repeal of sodomy laws in 1998, and other discriminatory legislation, and to the recognition of same-sex unions in South Africa in 2006 (Civil Union Act of 2006).[115]

Gay and lesbian activism not only preceded the emergence[116] of democracy in South Africa, but it presented the country with the opportunity to broaden its commitment to sustainable development and support for human rights. Gay and lesbian Black activists such as Tseko Simon

Nkoli, Beverly Palesa Ditsi, and others[117] built linkages between gay and lesbian liberation and the anti-Apartheid struggle among Black South Africans. This process of linking gay and lesbian struggles to larger societal challenges is ongoing. Over ten years after the passage of the 1996 constitution, the *Prevention and Combating of Hate Crimes and Hate Speech Bill*[118] was finally approved by the Department of Justice and Constitutional Development in March 2018 and submitted to the Cabinet in preparation for a new legislation.[119] The intent of this legislation is to curb hate speech based on specified categories including, but not limited to, "gender and gender identity…sex (which includes intersex and sexual orientation)."[120]

Opposition to the comprehensive inclusion of LGB persons came from government officials themselves during the transition to democracy period. It took political and strategic organizing by LGB persons to bring about the change in views about sexual orientation and gender identity. That is, different LGB organizations banded together to help repeal Apartheid-era criminal laws and to actively campaign for the adoption of anti-hate policies.

Sexual rights advocates in South Africa have long advocated for legal protection and broad-based social inclusion as core to their struggles for liberation. For instance, in the mid-1990s, it became important to explain the meaning of the proposed new Bill of Rights and to explicitly identify the likelihood of persistent victimization if sexual orientation were to be protected under a new constitution without first repealing the existing criminal law that specifically targeted gay persons. Interest groups such as the National Coalition for Gay and Lesbian Equality (later known as the Lesbian and Gay Equality Project)[121] and the Equality Foundation argued that the term "sexual orientation" was both broad and neutral enough to apply to heterosexuals and homosexuals, in other words, was inclusive of any discrimination based on sexual orientation, while others insisted that homosexual behavior should remain categorized as a crime.[122]

Hence, post-Apartheid, South Africa's commitment to social justice to redress past injustices based on race and other characteristics did not automatically guarantee the decriminalization of homosexuality. Persistent gay and lesbian activism, including the contributions of bisexual and transgender people who may have been less visible at that point in history, its strategic partnerships with allies within the African National Congress (ANC), and research, helped steer South Africa toward an inclusive constitutional reform.

LEGAL ANALYSIS OF LGBT RIGHTS IN SOUTH AFRICA

The Constitution of South Africa is the progressive backbone of legal protection in the country. In most cases, administrative law specifies areas of application of the general provisions of the Bill of Rights—specifications that are beneficial to LGBT persons, even if they are not explicitly inclusive of transgender people. For instance, Chapter 2 of the Bill of Rights makes provisions for the preservation of human dignity as a right to be "respected and protected" by everyone (Section 10), freedom and security of the person (Section 12), the right to fair labor practices (Section 23), equal access to housing (Section 26) and healthcare services (Section 27), and basic education (Section 29).[123]

Employment anti-discrimination is reinforced in the Employment Equity Act no. 55 of 1998 Chapter 2, Section 6(1) and section 185 of the Labor Relations Act of 1995 Section 187 (1f), which qualifies as unfair practice, an employer discriminating against an employee on the basis of sexual orientation.[124] Chapter 3 provision 4 (1) of The South African Housing and Rental Act of 1999 further specifies the constitutional provision of equal access to housing as follows:

> a landlord may not unfairly discriminate against such prospective tenant or tenants, on one or more grounds, including race, gender, sex, pregnancy, marital status, sexual orientation, ethnic or social origin, color, age, disability, religion, conscience, belief, culture, language and birth.[125]

Chapter 2 (Section 27) provides for equal access to health care services and Chapter 4 Section 24(2) specifies that registration for medical schemes is deemed satisfactory when it "does not or will not unfairly discriminate directly or indirectly any person on one or more arbitrary grounds including race, age, gender, marital status, ethnic or social origin, sexual orientation, pregnancy, disability and state of health" (Chapter 4 (24)(2)(e)).[126] Moreover, Chapter 1 of The Medical Scheme Act 131 of 1998 recognizes as dependent, "a spouse or partner, dependent children or other members of the member's immediate family in respect of whom the member is liable for the family care and support" -- thereby making LGBT families eligible for benefits.

The Civil Union Act No. 17 of 2006, 497 (29441) allows "same-sex civil marriage as well as civil unions for both unmarried same-sex and different-sex couples. Rights include the right to family responsibility leave and protections against domestic violence."[127] However, Section 6 allows that:

"A marriage officer, other than a marriage officer referred to in section 5, may in writing inform the Minister that he or she objects on the ground of conscience, religion and belief to solemnising a civil union between persons of the same sex, whereupon that marriage officer shall not he compelled to solemnise such civil union."[128] A list published by the Department of Home Affairs in 2016 reveals that only 117 out of 409 offices nationwide welcomes same-sex couples who wish to marry under the Civil Union Act,[129] limiting access to marriage licenses for same-sex couples and reducing their access to the economic benefits of marriage.[130]

The Alteration of Sex Description and Sex Status Act no. 49 of 2003 enables gender marker changes with limitation and restrictions. Under the broad category of "any person," the Act applies to "sexual characteristics altered by surgical or medical treatment or evolved through natural development resulting in gender reassignment," or as a result of an intersex status defined as "a person whose congenital sexual differentiation is atypical to whatever degree."[131] While the Act does not make it

compulsory that an applicant had to have undergone gender reassignment surgery, there is some evidence of narrow interpretation of the Act by Department of Home Affairs officials.[132] Even though the Act holds that hormonal treatment is sufficient, a diagnosis of "Gender Identity Disorder" is still needed.[133] While progressive at the time it was drafted, The Alteration of Sex Description and Sex Status Act no. 49 of 2003 is currently in opposition to human rights standards as expressed in the Yogyakarta Principles regarding self-determination and bodily autonomy and integrity.[134] It requires transgender persons to have themselves diagnosed with a disorder and to obtain medically-supported transition in order to be legally recognized. The Act also prevents transgender persons from keeping their medical records private—violating their right to privacy.

Table 2. Legal mapping of the South Africa with regard to a range of laws that and regulations that affect LGBT persons[135]

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
Protection from Discrimination	Constitution of South Africa	Chapter 2 Section 9: "(3) The state may not unfairly discriminate directly or indirectly against anyone on one or more grounds, including race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, sexual orientation, age, disability, religion, conscience, belief, culture, language and birth. (4) No person may unfairly discriminate directly or indirectly against anyone on one or more grounds in terms of subsection (3). National legislation must be enacted to prevent or prohibit unfair discrimination."[136] Note: it may be possible for someone to try invoking a conscientious objection to providing service to LGBTI people, by invoking section 15 and 31 of the Constitution (freedom of conscience, religion, thought, belief and opinion, and right to practice one's religion and culture, respectively).[137]
	Promotion of Equality and Prevention of Unfair Discrimination Act (PEPUDA), Act No. 04, Year 2000.	The paragraph before the Preamble states that the Act serves "[t]o PEPUDA was enacted to give effect to section 9 read with item 23 (1) of Schedule 6 to the Constitution of the Republic of South Africa, 1996, so as to prevent and prohibit unfair discrimination and harassment; to promote equality and eliminate unfair discrimination; to prevent and prohibit hate speech; and to provide for matters connected therewith." The list of "prohibited grounds" of discrimination and harassment includes sex, gender, and sexual orientation.[138]
	Lallu v Van Staden Roodepoort Equality Court, Case No 3 of 2011.	Court held that a "neighbour's verbal abuse of a transgender woman amounted to harassment, hate speech and unfair discrimination."[139]
	Case of Nare Mphela vs her formal school principal and Limpopo Department of Education, Seshego Equality Court.	Court ruled in favor of Nare, who faced severe discrimination at her school due to her gender identity. Court found that the school's principal and the Limpopo Department of Education have breached the Equality Act.[140]

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
Right to Privacy, Decriminalization of Same-Sex Acts	Constitution of South Africa.	Chapter 2 Section 14: "Everyone has the right to privacy, which includes the right not to have— (a) their person or home searched; (b) their property searched; (c) their possessions seized; or (d) the privacy of their communications infringed."[141]
	Criminal Law (Sexual Offences and Related Matters) Amendment Act, 2007.	Sexual offense is codified in neutral terms - there is no specific gender or sexual orientation that is exclusively covered by the Act. Chapter 5 Section 27 defines "interested person" to mean "any person who has a material interest in the well-being of a victim, including a spouse, same sex or heterosexual permanent life partner..."[142]
	National Coalition for Gay and Lesbian Equality v. Minister of Justice, Johannesburg High Court ZACC 15; 1999 (1) SA 6; 1998 (12) BCLR 1517 (9 October 1998).	The common law crime of sodomy and "commission of an unnatural sexual act" as well as section 20A of the Sexual Offences Act, 1957 were deemed unconstitutional thus decriminalizing same-sex acts between consenting adults.[143]

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
Same-Sex Marriage	Not in the constitution.	N/A
	Civil Union Act No. 17 of 2006, 497 (29441) GOVERNMENT GAZETTE OF REPUBLIC OF SOUTH AFRICA (Nov. 30, 2006).	The Act allows "same-sex civil marriage as well as civil unions for both unmarried same-sex and opposite sex couples. Rights include the right to family responsibility leave and protections against domestic violence."[144] Section 6 allows for conscientious objection: "A marriage officer, other than a marriage officer referred to in section 5, may in writing inform the Minister that he or she objects on the ground of conscience, religion and belief to solemnising a civil union between persons of the same sex, whereupon that marriage officer shall not he compelled to solemnise such civil union."[145] A list published by the Department of Home Affairs in 2016 reveals that only 117 out of 409 offices nationwide welcomes same-sex couples who wish to marry under the Act.[146]
	Domestic Violence Act No. 116 of 1998.	The Act defines "domestic partnership" to include same-sex couples.[147]
	Minister of Home Affairs v. Fourie 2006 (1) SA 524 (CC).	The Constitutional Court ruled that same-sex couples have a constitutional right to marry.[148] This is the precursor to the Civil Union Act.
	Volks NO v Robinson and Others 2005 (5) BCLR 446 (CC)[149] *Du Toit and Another v Minister for Welfare and Population Development and Others* 2002 (10) BCLR 1006 (CC)[150] *J and Another v Director-General, Department of Home Affairs and Others* 2003 (5) BCLR 463 (CC)[151] *Gory v Kolver NO and Others (Starke and Others intervening*) 2007 (3) BCLR 249 (CC).[152]	"Courts have also recognized the duty of support between partners, immigration benefits, employment and pension benefits, joint adoption, parental rights to children conceived through artificial insemination, intestate inheritance and claims for loss of support when a partner is negligently killed."[153]

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
Adoption	Not in the constitution.	N/A
	Children's Act 38 (2005).	Section 231 (1)(a)(ii) states that "a child may be adopted jointly by partners in a permanent domestic life-partnership". Gender and sexual orientation-neutral language used throughout.[154]
	Du Toit v. Minister of Welfare and Population Development and Others, 2002.[155]	The Constitutional Court legalized adoption by "same-sex life partners".[156]
	J v. Director General, Department of Home Affairs, 2003.[157]	The Constitutional Court ruled that "a child born by artificial insemination to a lesbian couple was to be regarded as legitimate, and the partner who was not the biological parent was to be regarded as a natural parent and recorded on the child's birth certificate."[158][159]
Access to Employment	Not in the constitution.	N/A
	Labour Relations Act 6 of 1995.	Chapter VIII Section 187(1): "A dismissal is automatically unfair if the employer, in dismissing the employee, acts contrary to section 549 or, if the reason for the dismissal is- (f) that the employer unfairly discriminated against an employee, directly or indirectly, on any arbitrary ground, including, but not limited to...gender, sex..., sexual orientation."[160]
	Employment Equity Act 55 of 1998.	Chapter II Section 6(1): "No person may unfairly discriminate, directly or indirectly, against an employee in any employment policy or practice, on one or more grounds including ... gender,..., sexual orientation."[161]
	Atkins v Datacentrix (Pty) Ltd (2009) JS02/07 (ZALC).	The Court ruled that Datacentrix had "unlawfully and unfairly discriminated... on the grounds of sex and gender" in firing a "transsexual" employee. This case showed that gender discrimination includes discrimination based on one's gender identity.[162]
	Ehlers v. Bohler Uddeholm Africa (2010) JS296/09 (ZALC).	The Court ruled that the company had unfairly discriminated against the transsexual applicant in her firing due to her gender identity.[163]

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
Access to Healthcare	Constitution of South Africa.	Chapter 2 Section 27: "(1) Everyone has the right to have access to— (a) health care services, including reproductive health care; (b) sufficient food and water; and (c) social security, including, if they are unable to support themselves and their dependents, appropriate social assistance."[164]
	Medical Schemes Act 131 of 1998.	Chapter 4 Section 24(2): "No medical scheme shall be registered under this section unless the Council is satisfied that— (e) the medical scheme does not or will not unfairly discriminate directly or indirectly against any person on one or more arbitrary grounds including... gender...sexual orientation..."[165]
	No case law found.	N/A
Access to Housing	Constitution of South Africa.	Chapter 2 Section 26(1): "Everyone has the right to have access to adequate housing."[166]
	Rental Housing Act 50 of 1999.	Chapter 3 Section 4(1): "In advertising a dwelling for purposes of leasing it, or in negotiating a lease with a prospective tenant, or during the term of a lease, a landlord may not unfairly discriminate against such prospective tenant or tenants, or the members of such tenant's household or the bona fide visitors of such tenant, on one or more grounds, including ...gender, sex, ..., sexual orientation..."[167]
	No case law found.	N/A

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
HIV/AIDS	Not in the constitution.	N/A
	Promotion of Equality and Prevention of Unfair Discrimination Act (PEPUDA), Act No. 04, Year 2000.	Section 29(5)(c) gives an example of refusing to grant insurance services based on HIV/AIDS status as an "unfair practice". Section 34 states that HIV/AIDS status were to be given "special consideration" for its inclusion in the list of "prohibited grounds" of discrimination. [168]
	Employment Equity Act 55 of 1998.	Chapter II Section 6(1): "No person may unfairly discriminate, directly or indirectly, against an employee in any employment policy or practice, on one or more grounds including... HIV status..."[169]
	No case law found.	N/A
Freedom of Expression and Assembly	Constitution Sections 16 (Freedom of Expression), 17 (Assembly, demonstration, picket and petition), 18 (Freedom of association).	Generic language used; "everyone" is entitled to the rights of freedom of expression, freedom of assembly, demonstration, picket and petition, and freedom of association. [170]
	No statutes found.	N/A
	No case law found.	N/A
Immigration	Not in the constitution.	N/A
	Refugees Act 130 of 1998.	Chapter 1 Section 3: "...a person qualifies for refugee status for the purposes of this Act if that person- (a) owing to a well-founded fear of being persecuted by reason of his or her...social group..." The definition of "social group" includes sexual orientation (Chapter 1 Section 1(xxii).[171]
	National Coalition for Gay and Lesbian Equality and Others v Minister of Home Affairs and Others (CCT10/99) [1999] ZACC 17; 2000 (2) SA 1; 2000 (1) BCLR 39 (2 December 1999).[172]	The Constitutional Court "found a provision of the Aliens Control Act of 1991 to be unconstitutional and the non-South African partners of South African citizens are now permitted to apply for permanent residence – the Aliens Control Act granted the non-South African spouses of South African citizens the right to an immigration permit, implicitly denying this right to same-sex couples who at the time were not legally allowed to marry."[173]

ISSUE	CONSTITUTIONAL PROVISIONS, STATUTES, CASE LAW	NOTES
Military Service	Not in the constitution.	N/A
	Government's 1996 White Paper on National Defence.	Chapter 3 Section 52: "In accordance with the Constitution, the SANDF shall not discriminate against any of its members on the grounds of sexual orientation."[174]
	No case law found.	N/A
Legal Gender Recognition	Not in the constitution.	N/A
	Alteration of Sex Descriptors and Sex Status Act 49 of 2003.	Section 2(1): "Any person whose sexual characteristics have been altered by surgical or medical treatment or by evolvement through natural development resulting in gender reassignment, or any person who is intersexed may apply to the Director-General of the National Department of Home Affairs for the alteration of the sex description on his or her birth register."[175] While the Act does not make it compulsory that an applicant had to have undergone gender reassignment surgery, there exists evidence of narrow interpretation of the Act by Department of Home Affairs officials.[176] Even though the Act holds that hormonal treatment is sufficient, a diagnosis of "Gender Identity Disorder", which is classified as a mental or behavioral disorder, is still needed.[177]
	KOS and Others v Minister of Home Affairs and Others (2298/2017) [2017] ZAWCHC 90; [2017] 4 All SA 468 (WCC); 2017 (6) SA 588 (WCC) (6 September 2017).	Court ruled that the Department of Home Affairs was unconstitutional in requiring the transgender applicants to divorce their spouses prior to altering their legal sex documentation.[178]

As reflected in Table 2 above, South Africa is taking great strides towards creating an LGBT-inclusive society, although more work needs to be done to promote the full inclusion of transgender people. While sexual orientation is explicitly mentioned in legislative provisions, language about gender identity is less precise or missing altogether.

Fortunately, case law shows a progressive pattern of upholding equality and anti-discrimination policies and practices. For instance, although gender identity is not explicitly addressed in the constitution, the courts have often ruled in favor of transgender litigants. Gender discrimination has been found to encompass gender identity. In *Atkins v. Datacentrix*, the court held that there was "an element of gender involved" in the case.[179] In *Ehlers v. Bohler Uddeholm Africa*, the court found that firing someone for their transgender identity was *per se* unlawful discrimination, though it again did not specifically label it as gender discrimination.[180] In addition, discrimination based on transgender status is prohibited under the Promotion of Equality and Prevention of Unfair Discrimination Act (PEPUDA), which outlaws hate speech and discrimination on many grounds, including gender, sex, and sexual orientation.[181] PEPUDA was interpreted as protecting transgender people from hate speech based on their gender identity in *Lallu v. Van Staden*.[182]

A number of other advances, across an array of issues, have been made and these are described briefly here. In 2014, a ban categorically prohibiting men who have sex with men from donating blood was modified to focus on current sexual behavior.[183] [184] The government's *White Paper on National Defense*, adopted in 1996, prohibited the South African National Defense Force (SANDF) from discriminating against its members on the basis of sexual orientation and, as such, allowed LGB people to openly serve in the SANDF.[185] [186] In 2017, married transgender persons won the right to maintain their marriage without having to divorce first and remarry when one partner transitioned their gender, as was previously held under the Civil Union Act.[187]

Despite the presence of many protective laws, the state of exception under the emergency clause of the constitution does merit mention because it has implications for the future well-being of LGBT persons in South Africa. Under Section 37 of the Constitution,[188] undefined disorder that threatens the nation may call for states of emergency in South Africa. If this were to occur, non-discrimination rights might be suspended. This reality shows that legal protection for LGBT persons in South Africa remain vulnerable and demonstrates the need to protect LGBT persons from possible future direct and indirect state or private discrimination.

CULTURAL AND PUBLIC OPINION ABOUT LGBT PERSONS IN SOUTH AFRICA

Despite having one of the "most progressive [constitutions] in the world",[189] and many legal successes, attitudes towards LGBT people are negative in South Africa. South Africa ranked 52nd out of 141 countries on the Williams Institute's *LGBT Global Acceptance Index* – an aggregate indicator of public opinion towards LGBT people in the 2009-2013 period.[190] In 2013, 61% of South African respondents believed society should not accept homosexuality.[191] Negative attitudes were even more pronounced when survey questions were framed in terms of morality. Pew Research Center found that 62% of South Africans personally believe that homosexuality is morally unacceptable.[192] "[A] large majority (about 7 out of 10 South Africans) feel strongly that homosexual sex and breaking gender dressing norms is simply 'wrong' and 'disgusting.'"[193]

A recent online survey of public attitudes toward transgender people and their rights found that 55% of South African respondents wanted the country to do more to protect and support transgender persons, and yet, 35% were opposed.[194] Attitudes towards transgender people were similar in terms of the proportions positive and negative.[195] The extent to which the South African public views homosexuality, gender expression, and being transgender as similar or distinct issues is currently not known. Thus, it is possible that attitudes towards transgender people, LGB people, and towards gender nonconforming people, regardless of sexual orientation or gender identity, may vary.

SOCIODEMOGRAPHIC AND HEALTH CHARACTERISTICS

Debra Shepherd

ESTIMATION AND DESCRIPTION OF THE LGBT COMMUNITY IN SOUTH AFRICA

About the Data, Including Limitations and Strengths of Available Data

Enumerating the LGBT community and their households is by no means a simple task, made particularly difficult by the minority status (both socially and numerically) of this group compared to non-LGBT persons. As a result, only very large data sources can be regarded as useful for successfully estimating the size and describing the characteristics of this group.[196] Furthermore, datasets need to include questions on sexual orientation and gender identity (and assigned sex at birth) to successfully identify LGBT respondents. Several datasets were considered for this study, each with their own benefits and limitations. Most analyses featured in this report use the South African Social Attitudes Survey (SASAS) 2015/2016 or 2011 South Africa Census surveys (see descriptions below). We also cite findings from the pioneering national survey of LGBT individuals in South Africa from which the "Hate Crimes against Lesbian, Gay, Bisexual and Transgender (LGBT) People in South Africa" report of OUT LGBT Well-being and the Love Not Hate campaign were produced in 2016.[197] Lastly, given findings on school-based discrimination and victimization experienced by LGBT individuals aged 16 to 24 years in the OUT LGBT report, we used the 2015 Trends in Mathematics and Science Study (TIMSS) data to analyze the potential relationship between school-based harassment and victimization and academic performance.

The 2015 TIMSS assessed the math and science performance of grade 9 students across 47 countries. Aside from test scores in standardized mathematics and science tests, the TIMSS contextual questionnaires provide for a wealth of contextual data on the school and classroom environments experienced by students, including several questions on bullying and harassment. Overlap in the TIMSS survey questions with those included in the OUT LGBT Well-being survey allowed us to compare the general experiences of males and females aged 15 to 19 enrolled in Grade 9 in 2015 with those reported by LGBT youth in the latter.

The SASAS is a nationally representative, annual cross-sectional survey that has been conducted since 2003. The core module of the SASAS questionnaire aims to gather information on demographic, behavioral, and attitudinal variables of a sample of 3,500 adult respondents, whilst rotating modules on specific themes allow for more detailed attitudinal evidence to be gathered. In 2015 and 2016, a module aimed at gathering behaviors and attitudes towards LGBT persons was included. Simultaneously, additional items on respondent sexual orientation and gender presentation in public, in terms of dress and expression (for example, masculine, feminine, or androgynous), were included in the Respondent Characteristics module. Questions of this nature have not been captured in any of the larger, nationally representative household surveys such as the Census, General Household Survey (GHS), and Living Conditions Survey (LCS). The SASAS, therefore, provided us with the only scientifically valid, nationally representative survey that includes questions enabling identification of the LGB adult community, which, until now, was not possible. Limitations of the SASAS data include no information about transgender respondents and a relatively small sample size does not support analyses that are also stratified by sex or race.[198]

The 2011 Census is a large-scale, national data collection effort which occurs every 10 years and is aimed at providing population and household statistics to support planning and decision-making. Apart from its large size, the Census has a further benefit in that spouses and partners could be matched using the unique person identifier codes of respondents and the unique person identifier codes of their spouse/partner. Same-sex and different-sex households could be identified by using information about the sex of the respondent and spouses/partners. As described below, the Census questionnaire does not ask respondents about their sexual orientation or gender identity and sex assigned at birth, consequently, findings are limited to cohabitating same-sex and different-sex households. We have, therefore, chosen the Census analysis to stand alongside that of the SASAS to supplement findings from the SASAS data.

Characterizing LGBT and non-LGBT adults[199] using the 2015-2016 SASAS

Figure 1.1 below summarizes SASAS questions that allow for the identification of individuals' sexual orientation and gender expression. As shown in Table 3.1, 98% of respondents self-describe as heterosexual, while a total of 1.8% (0.8%, 0.6%, and 0.4% of individuals, respectively) self-describe as gay/lesbian, bisexual, or other (hereafter LGB). Although the latter percentage falls within the range that has been observed globally (1.2 to 6.8%), this may be an underestimate due to underreporting, as respondents may feel reluctant to disclose their sexual orientation to the data collector.[200]

Combining responses to the gender expression question above with respondent sex, we find that a significant majority (approximately 80%) of individuals report being either strongly or mostly gender conforming; that is, females reporting expressing themselves in a strongly or mostly feminine manner, and males reporting expressing themselves in a strongly or mostly masculine manner.[201] Further, 14% of individuals describe their gender expression as strongly or mostly gender nonconforming (females with strongly or mostly masculine expression, and males with strongly or mostly feminine expression), and approximately 7% of individuals report conforming to neither or both masculine and feminine dress and expression.

Figure 1.1. Sexual orientation and gender expression module in 2015 and 2016 SASAS

SEXUAL ORIENTATION: WHICH OF THE FOLLOWING OPTIONS BEST DESCRIBES HOW YOU THINK OF YOURSELF?	
Heterosexual or straight	1
Gay or lesbian	2
Bisexual	3
Other	4
(Don't know)	8
(Refused to answer)	9

GENDER EXPRESSION: WHAT BEST DESCRIBES HOW YOU PRESENT YOURSELF IN PUBLIC IN TERMS OF HOW YOU DRESS AND ACT?	
Strongly, and exclusively masculine	1
Mostly masculine	2
A mixture of both masculine and feminine	3
Mostly feminine	4
Strongly, and exclusively feminine	5
Neither masculine or feminine	6
(Don't know)	8
(Refused to answer)	9

In the analysis that follows, we group SASAS respondents into four sub-classifications on the basis of sexual orientation and gender expression to determine whether there are compounded effects of discrimination and stigma linked to sexual orientation and gender expression. These four classifications can be summarized as: heterosexual gender conforming (individuals who strongly or mostly conform to femininity in the case of females and masculinity in the case of males); heterosexual gender nonconforming (individuals who mostly or strongly conform to femininity in the case of males and masculinity in the case of females, or conform to neither masculine nor feminine expressions, or conform to a mixture of both); lesbian, gay, or bisexual (LGB) gender conforming; and LGB gender nonconforming. Adopting this grouping,[202] and using the 2017 mid-year estimate of the South African population, which according to Statistics South Africa, stood at approximately 56.5 million people, including 35.2 million adults ages 20 and up,[203] we estimate that 78% of South African adults ages 20 and up are heterosexual gender conforming, 19% of adults ages 20 and up (approximately 7 million people) are heterosexual gender nonconforming, and at least 1.8% of adults (approximately 634,000 people) self-identify as LGB or as other than heterosexual or straight.[4] No questions that would allow us to identify transgender respondents were included in the SASAS.

[4] This number is arrived at through multiplying the mid-2017 estimate of the South African adult population (20 years and older) of 35,205,117 by 1.8% and rounding up to the nearest 1,000; that is, 35,205,117 x 0.018 = 633,692.

Table 3.1. Sexual orientation and gender expression (SOGE) of 2015 and 2016 SASAS respondents

1: Sexual orientation	2015 (n=3,121)	2016 (n=3,021)	Pooled (n=6,142)
Heterosexual	98.2 (n=3,057)	97.1 (n=2,920)	97.7 (n=5,977)
Gay/lesbian	0.6 (n=20)	1.0 (n=33)	0.8 (n=53)
Bisexual	0.6 (n=15)	0.5 (n=11)	0.6 (n=26)
Other	0.2 (n=6)	0.6 (n=18)	0.4 (n=24)
Don't know	0.2 (n=19)	0.5 (n=17)	0.4 (n=36)
2: Gender identity expression	2015 (3,071)	2016 (2,958)	Pooled (n=6,029)
Strongly gender conforming	42.7 (n=1,229)	47.6 (n=1,388)	45.7 (n=2,617)
Mostly gender conforming	33.5 (n=1,144)	34.5 (n=1,063)	34.5 (n=2,207)
Mostly gender nonconforming	5.9 (n=180)	2.7 (n=88)	4.4 (n=268)
Strongly gender nonconforming	8.8 (n=272)	8.8 (n=287)	8.9 (n=559)
Neither/mixture of feminine and masculine	8.0 (n=246)	5.0 (n=132)	6.6 (n=378)
3: Sexual orientation & gender identity combinations	2015 (n=3,052)	2016 (n=2,925)	Pooled (n=5,977)
Heterosexual, gender conforming	75.9 (n=2,337)	81.0 (n=2,388)	78.4 (n=4,725)
Heterosexual, gender nonconforming	22.2 (n=674)	16.2 (n=477)	19.2 (n=1,151)
LGB, gender conforming	1.2 (n=19)	2.3 (n=34)	1.7 (n=53)
LGB, gender nonconforming	0.8 (n=22)	0.5 (n=26)	0.7 (n=48)

Note: Own calculations using SASAS 2015 and 2016. All n are unweighted counts. Percentages are weighted and reflect column and row (shown in italics and parentheses) percentages and may not sum to 100 due to rounding. Gender conforming individuals are males and females that reported presenting in public as strongly or mostly masculine and feminine, respectively. Gender nonconforming individuals are males and females that reported presenting themselves in public as strongly or mostly feminine and masculine, respectively, or reported that they present in public as neither feminine nor masculine, or as a mixture of feminine and masculine. The difference in the prevalence of LGB persons amongst the adult population between panels 1 and 3 is accounted for by missing/unreported information on gender identity expression; whilst non-missing information on sexual orientation is available for 6,142 survey respondents, only 5,977 respondents have complete information for both sexual orientation and gender identity expression.

Identifying same-sex and different-sex couples in the South Africa Census

As mentioned above, the absence of questions on sexual orientation in the Census person questionnaire means that we are limited to identifying married or de facto-married (living together) same-sex and different-sex couples by utilizing the unique person numbers and sex identities of married and partnered individuals.[204] Our analyses were limited to households that report only one married/partner couple per household. Excluding multi-partner households from the analysis is not to negate the existence of more complex arrangements within and across households but was deemed necessary due to a lack of information about the presence or absence of sexual relationships between individuals within complex households. For example, in cases where two women and a man were classified by the Census as part of one marital arrangement, difficulty in ascertaining whether the two women were sexually involved with each other, and thus should be counted as a same-sex household, or were each involved only with the man in the household, and thus should be counted as an different-sex household, created a risk of misclassifying heterosexual individuals residing in complex household structures into same-sex relationships.[205]

Our analyses of same-sex cohabitating couples also do not include single LGBT people, individuals in same-sex relationships not living together, bisexuals in different-sex relationships, and young and elderly LGBT people living with relatives. Nevertheless, the Census represents the largest national data in which we can identify same-sex households and also examine sexuality-related differences in socio-demographic and socioeconomic characteristics by sex and race in a segment of the LGB population. We find that 1.1% of couples in the 2011 Census self-identified as being in same-sex marriages/partnerships to data collectors.

SOCIO-DEMOGRAPHIC CHARACTERISTICS OF ADULTS AND THEIR HOUSEHOLDS BY SEXUAL ORIENTATION AND GENDER EXPRESSION

Table A.1 (see Appendix) displays weighted socio-demographic characteristics of SASAS respondents by sexual orientation and gender expression (SOGE) classification. Individuals who identify as gender conforming, irrespective of sexual orientation, are more likely to be male and are less likely to be White when compared to individuals who are gender nonconforming. Self-reported LGB individuals are less likely to be Black African than heterosexual individuals, whilst heterosexual gender nonconforming individuals are more likely to be Black African than all other SOGE groups.

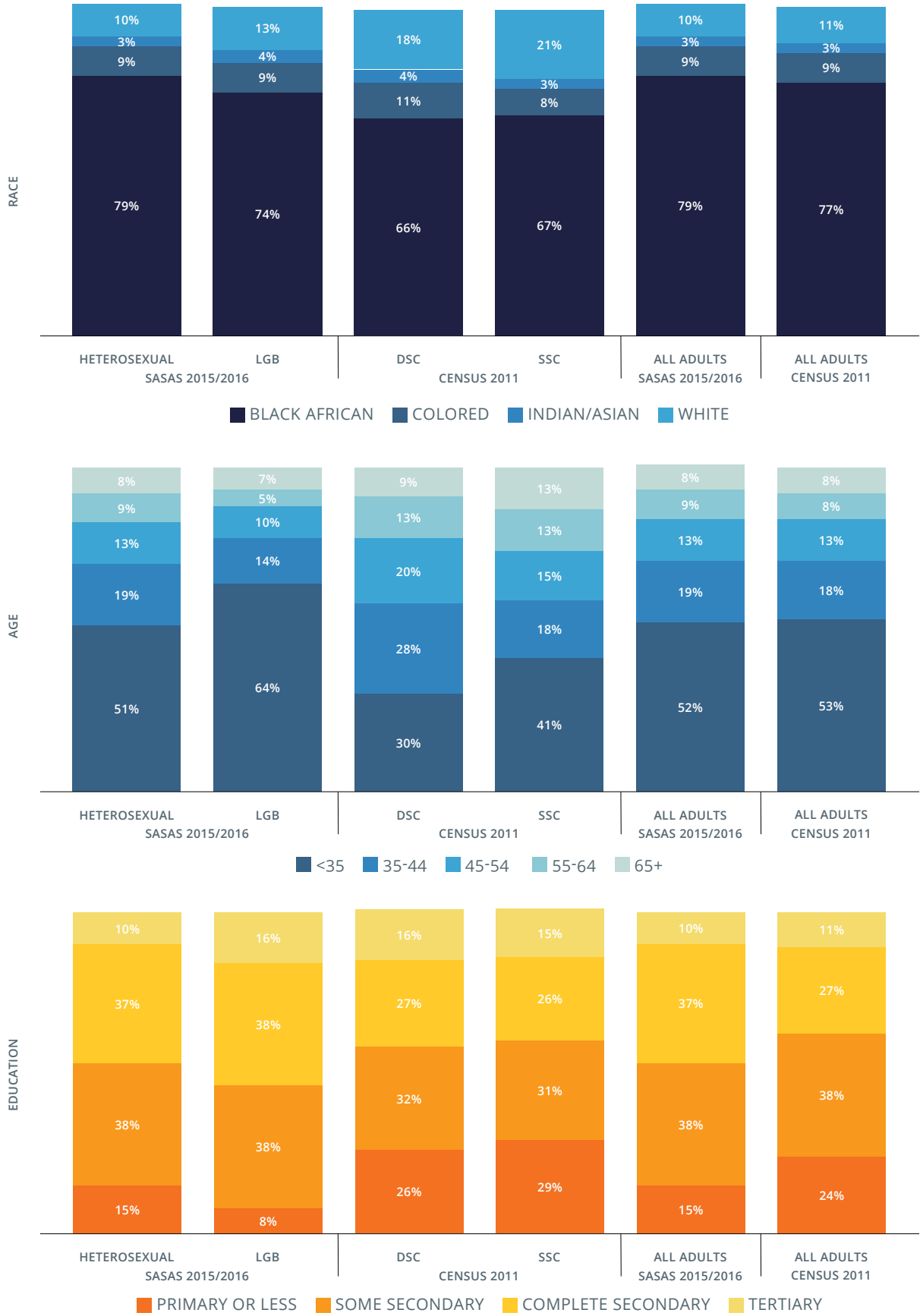
Clear patterns by age emerge, with LGB and gender nonconforming (GNC) persons significantly more likely to be under the age of 35 years. The younger overall age of LGB and GNC people may contribute to observed differences in marital status across groups: less than 40% of South African adults report being married or living with their partner, with the proportion being lowest amongst LGB individuals. LGB gender conforming individuals are significantly more likely to be in a relationship. LGB gender nonconforming individuals are least likely to report being in a relationship. This is an important finding for the Census analysis which is focused on married and partnered couples only, as it suggests that these datasets would be representative of less than 30% of the LGBT adult community.

Finally, whilst there is no discernible pattern in household location of SOGE groups by metro or non-metro area (except in the case of heterosexual, gender nonconforming persons who are less likely to reside in urban metro areas and more likely to reside in tribal authority areas), LGB individuals are over-represented in urban areas. Alternatively, rates of self-disclosure as a sexual minority may be lower in rural areas due to heightened stigma and may also vary by race and age.

In light of the findings above, it becomes relevant to mention the potential bias resulting from self-identification; that is, differences in self-reporting of sexual orientation linked to differences in stigma and discrimination faced by individuals of different racial, age, and socioeconomic groups. As stressed by theorists of sexuality, sexual expression is shaped by both the social construction of sexuality, as well as by culture[206] -- with the latter determining the beliefs, norms, myths, ideals, and expectations that, once internalized as cultural scripts, influence sexual desires and behaviors both consciously and unconsciously. For example, in cultural contexts that value allocentrism, individuals are more likely to adjust to the expectations of the social group. Identity is also affected by cultural context.[207] Self-identity, therefore, cannot be considered a defining characteristic of “gay”, “lesbian” or “bisexual” in all contexts, [208] with individuals’ self-identification linked to cultural differences in terminology and social undesirability.

Figure 1.2 below indicates the distribution of race groups across LGB and same-sex couple and different-sex couple groups (hereafter SSCs and DSCs) in the SASAS and Census data relative to the overall adult population. Black South Africans are somewhat under-represented amongst LGB-identified individuals, while White South Africans are somewhat over-represented. Self-identified LGB individuals, as well as those in SSCs, are also over-represented by those younger than age 35. Individuals with some or complete tertiary education are over-represented amongst self-identified LGB, as well as amongst SSCs and DSCs in general.

Figure 1.2. Distribution of race, age, and education across sexual orientation (SASAS) and same-sex and different-sex couples (Census)



Note: Own calculations using SASAS 2015/2016 and Census 2011. SSC = same-sex couple, DSC = different-sex couple.

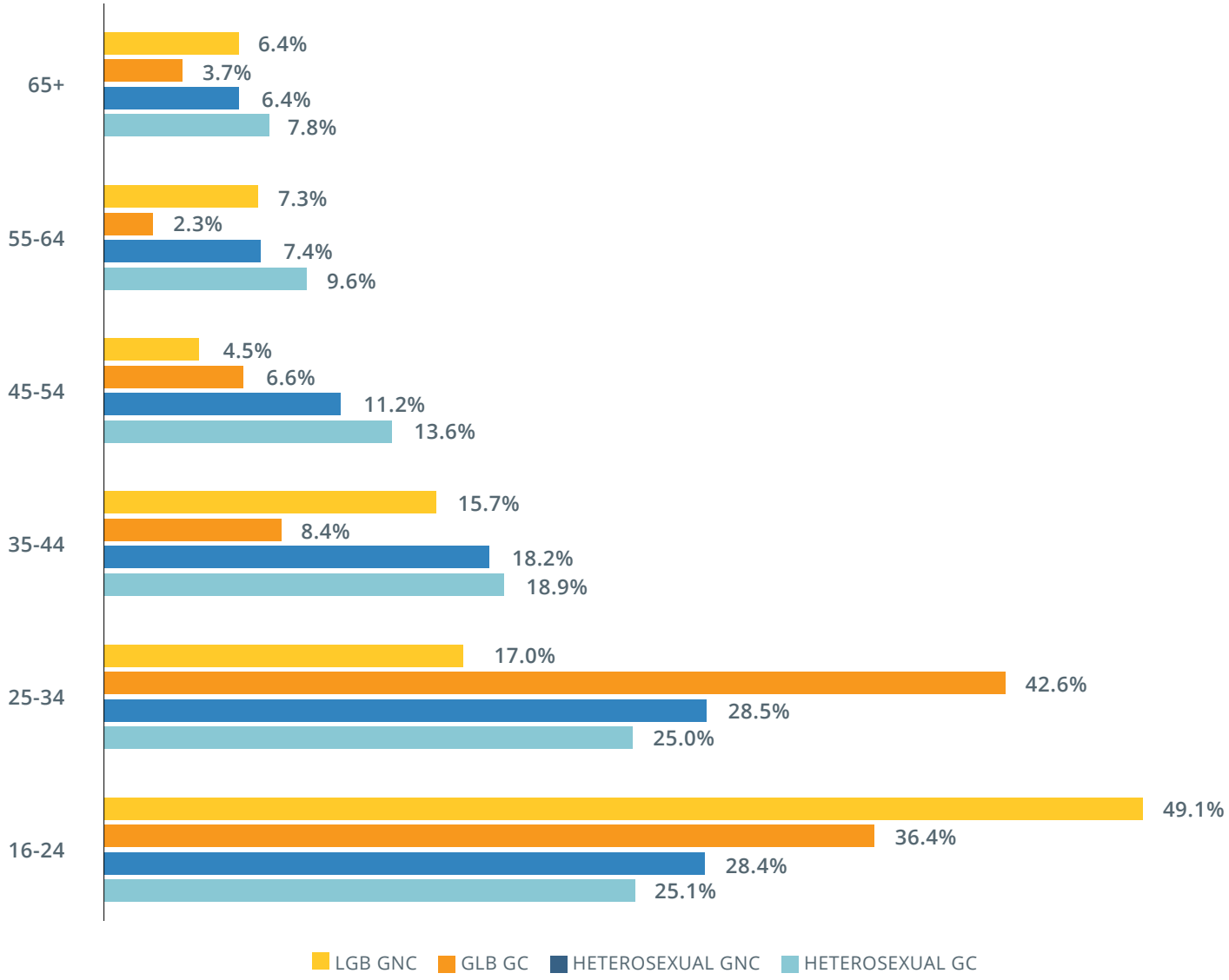
These patterns may indicate that self-identification of LGB and SSC status may be correlated with socio-demographic characteristics that are associated with differences in experiences of stigma and discrimination. In order to account for potential self-identification bias, the descriptive assessment of socio-economic outcomes is accompanied by multinomial logistic regression analyses of the relationship between SOGE group and these outcomes, adjusting for socio-demographic characteristics.

SOCIO-ECONOMIC CHARACTERISTICS OF ADULTS AND THEIR HOUSEHOLDS BY SEXUAL ORIENTATION AND GENDER EXPRESSION (SOGE)

Weighted socio-economic characteristics of the SASAS respondents by SOGE classification are displayed in Table A.2 (see Appendix). There are some noticeable, and important, differences in the socio-economic characteristics of LGB, GNC, GC, and heterosexual individuals and their households; these are visually depicted in Figures 3.3 to 3.9.

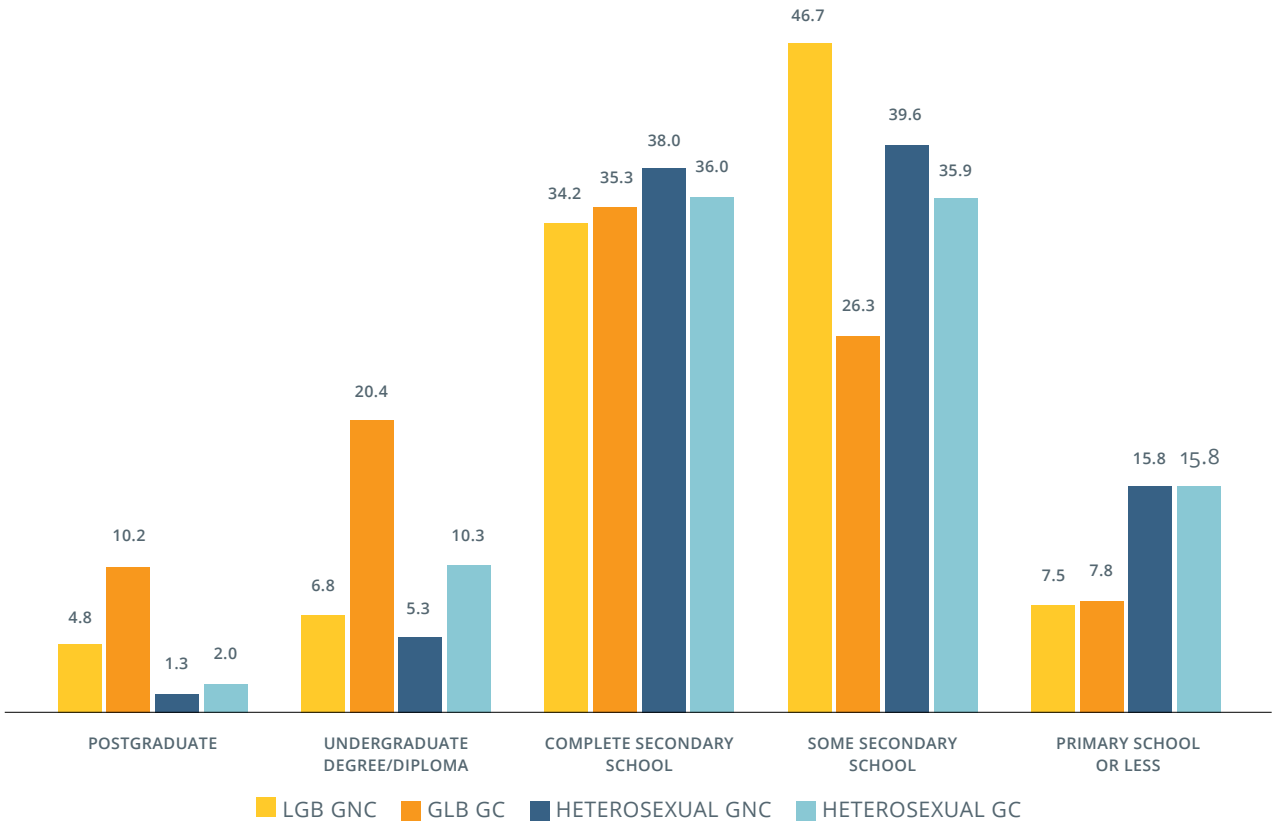
From Figure 1.3, we see that about half of LGB GNC adults are younger than 24, as compared to 25-35% amongst the other SOGE categories. LGB GC adults are also younger, on average, than both heterosexual groups. A large percentage (43%) of these individuals are 25 to 34 years old which could account for the greater prevalence of tertiary education amongst LGB GC individuals, specifically, with almost a quarter having attained some tertiary education (Figure 1.4). Higher educational attainment amongst LGB GC persons relative to heterosexual GC persons remains statistically significant after controlling for age, sex, marital/relationship status, race, and geographical area (see Table A.3). We further note that heterosexual GC adults are more educated, on average, than heterosexual GNC adults, which could also be related to differences in age distribution, as the latter were evidenced to be significantly younger than the former. However, controlling for socio-demographic characteristics, we find heterosexual GNC individuals to be significantly less educated than their GC counterparts (see Table A.3).

Figure 1.3. Age distribution by SOGE group



Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

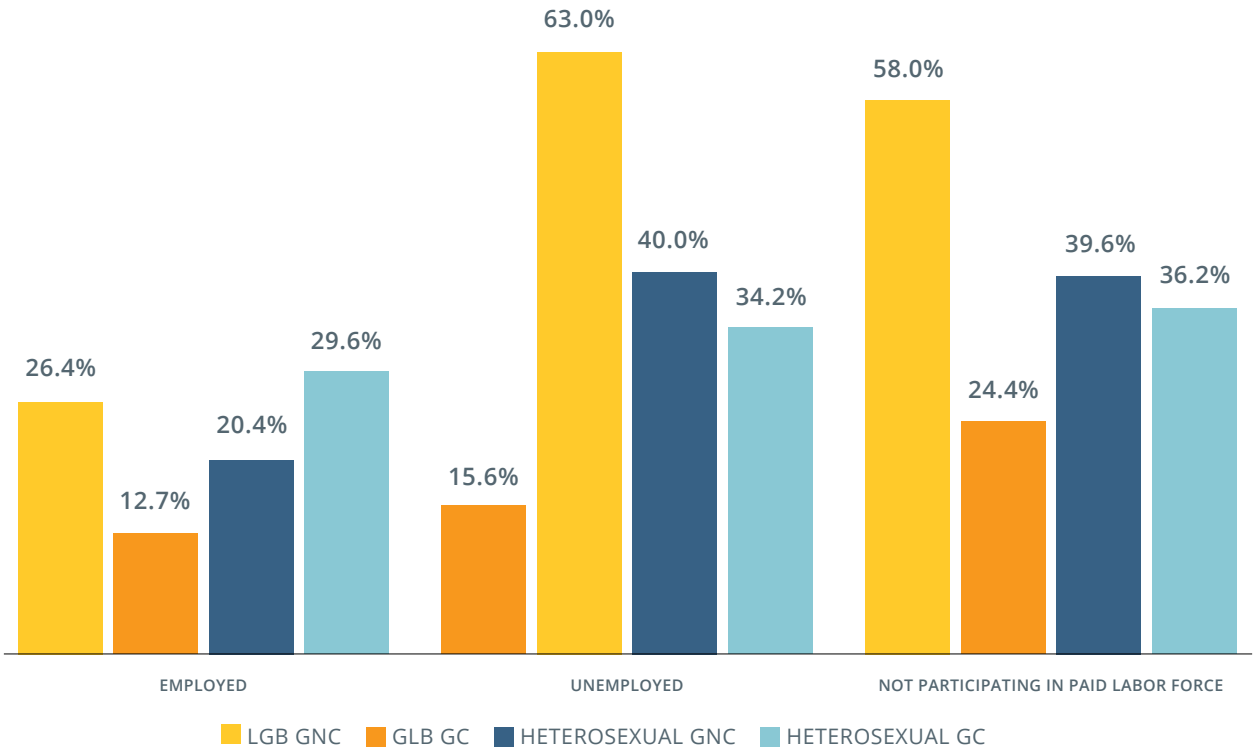
Figure 1.4. Education distribution by SOGE group



Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

These differences in age and schooling across SOGE groups also appear to influence labor force participation; younger and less educated groups are less likely to be in the labor force, and if they do find themselves in the labor force, are less likely to have full-time paid work. From Table A.2 (and graphically depicted in Figure 1.5), we note that both heterosexual GNC and LGB GC individuals are significantly less likely to be employed than heterosexual GC individuals. LGB GC individuals are significantly more likely to be unemployed and looking for work. These relationships remain statistically significant after controlling for socio-demographic characteristics (see Table A.3). Finally, we find that LGB GNC adults are least likely to be participating within the paid labor force.

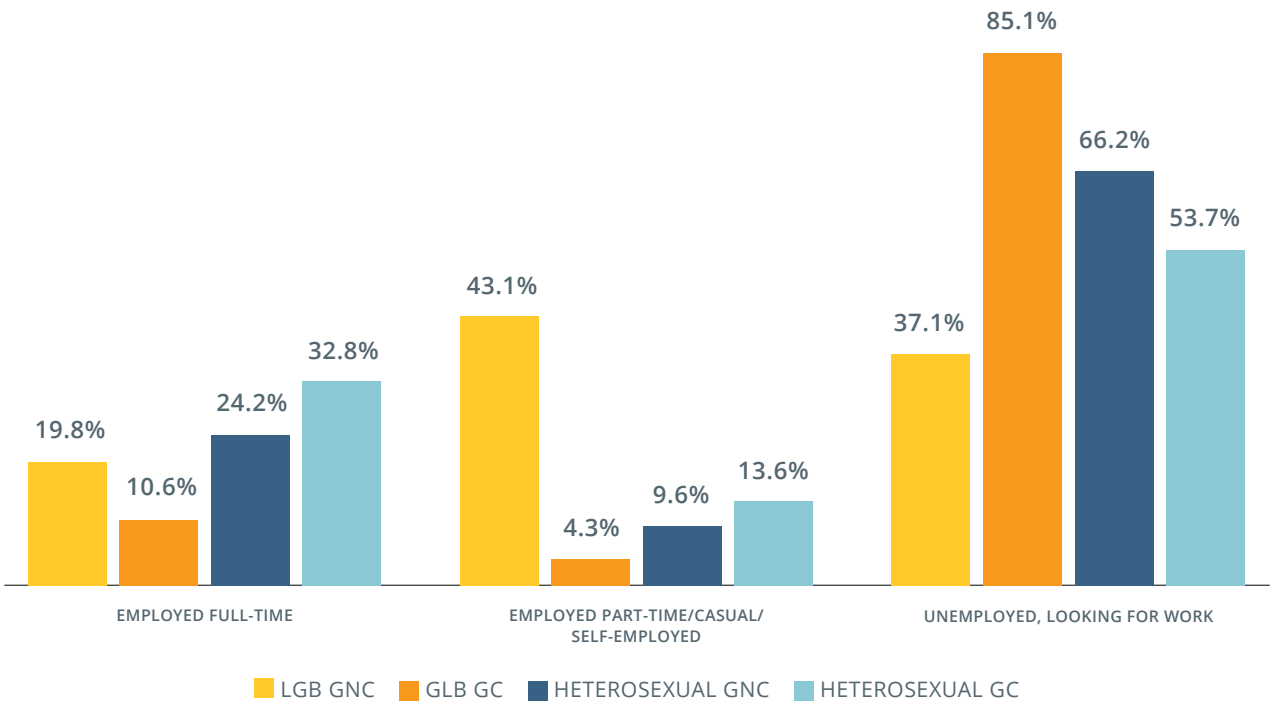
Figure 1.5. Labor participation by SOGE group



Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

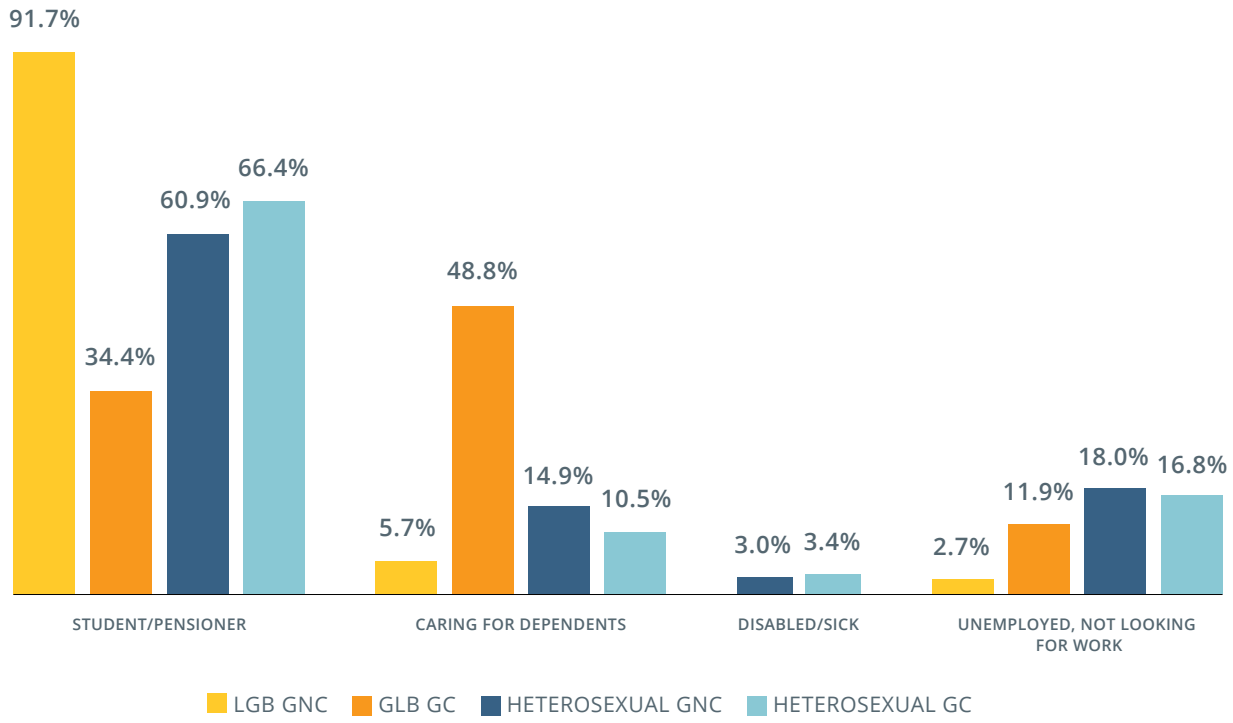
Although LGB GNC individuals have significantly lower participation in the paid labor force, those in the paid labor force are significantly less likely to be unemployed and actively seeking work, as well as more likely to be employed in part-time/ casual/ other[209] work (Figure 1.6). LGB GC adults, on the other hand, face the highest rate of unemployment.[210] Although the employment of heterosexual GNC individuals in full-time and part-time/casual paid work appears lower than that of heterosexual GC individuals, these differences appear to be explained by differences in socio-demographic characteristics, specifically location, which could account for differences in access to labor markets and employment opportunities. Similarly, we do not find any significant differences in unpaid participation of heterosexual GC and GNC groups (Figure 1.7). With regards to LGB groups, LGB GNC individuals are significantly less likely to be non-searching unemployed; the pattern of unpaid participation amongst LGB GC individuals is noticeably different from the other groups, with significantly more individuals in unpaid care of dependents and significantly fewer individuals reported to be scholars or pensioners.

Figure 1.6. Unemployment and employment by SOGE group



Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

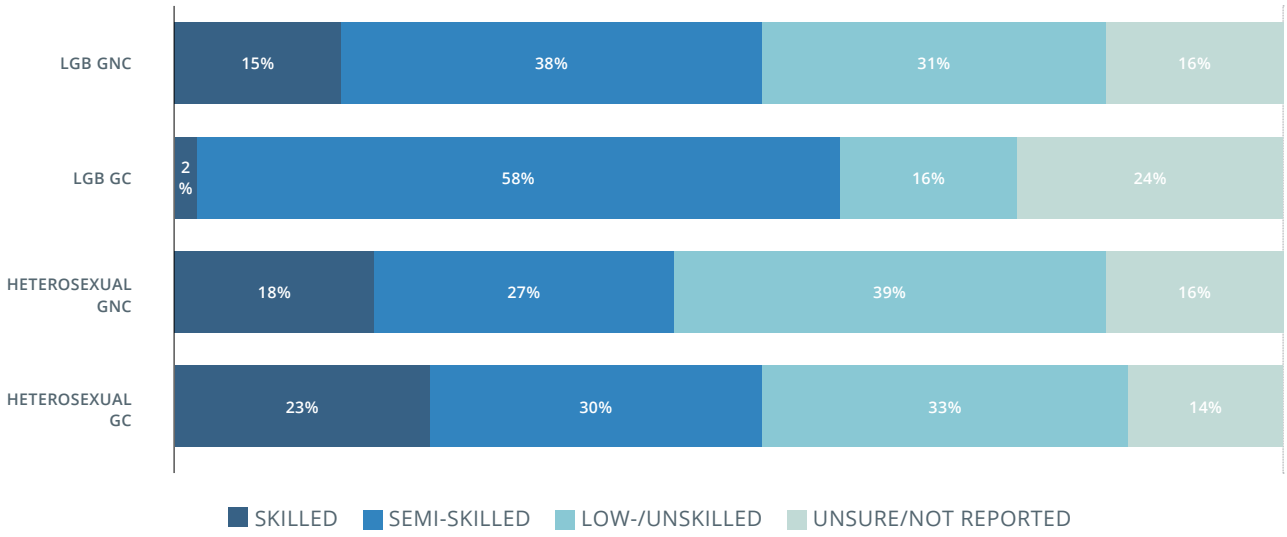
Figure 1.7. Other (unpaid) participation by SOGE group



Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

Differences in education, access to paid employment and employment type translate into skills differences across groups. Although there are no apparent differences in the skills level of currently employed individuals by SOGE category, when we extend the analysis to include all individuals reporting current or recent employment (Figure 1.8), we observe differences particularly across gender conformity. The distribution of skills across LGB GNC and heterosexual individuals is quite similar, except for skilled occupations where approximately 15% of GNC individuals currently (or recently) work, compared to 23% of heterosexual GC individuals. The jobs of LGB GC individuals, on the other hand, are predominantly made up of semi-skilled occupation, unclassified (recorded as "unsure") jobs, and informal self-employment.

Figure 1.8. Skill level of occupation by SOGE group



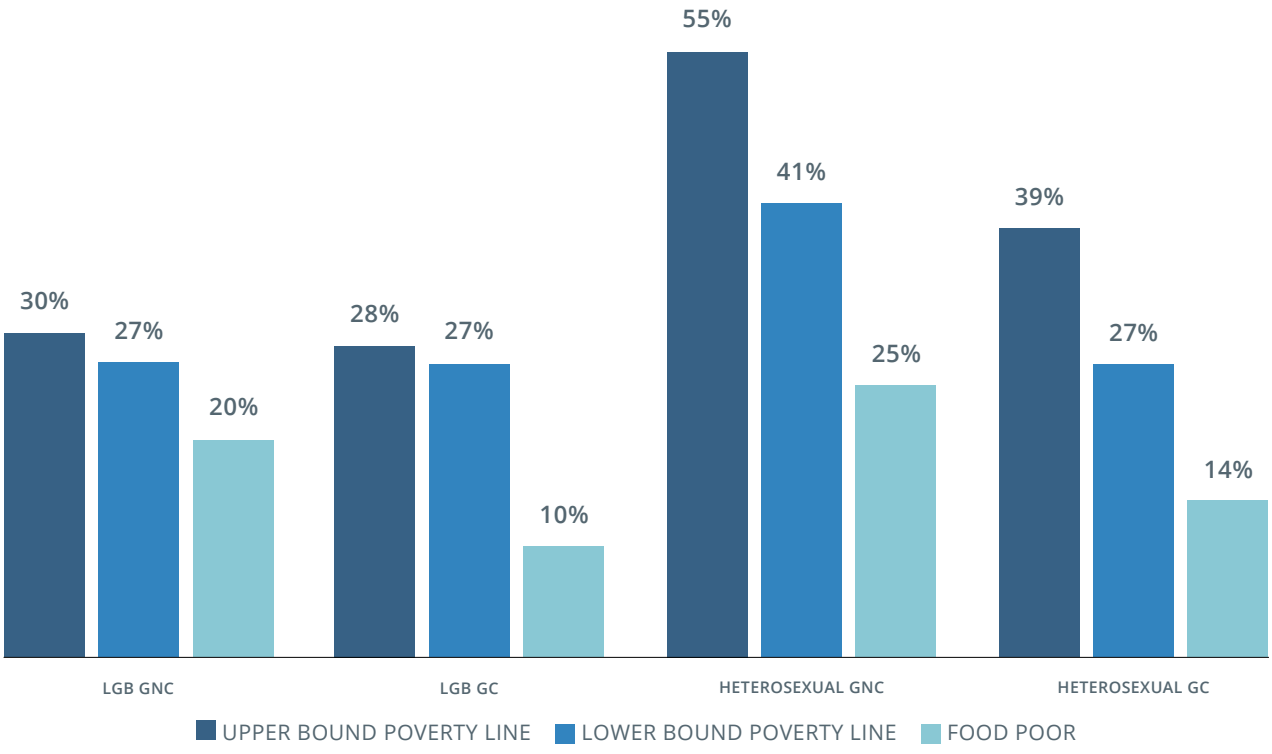
Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

With respect to household income and status, SASAS respondents were asked to describe which income class (in society) they believe or perceive themselves to fall under. The pattern of class distribution amongst heterosexual GC adults is fairly identical to that observed for the entire sample, whereas heterosexual GNC adults are over-represented amongst the self-classified lower class, and LGB adults are over-represented amongst the self-classified middle and upper classes. Household monthly income is largely in agreement with these classifications;[211] approximately 45% of heterosexual GNC adults report a monthly household income of less than US$150, compared to roughly 30% of heterosexual GC adults. Heterosexual GNC adults are also most likely to reside in households that have some form of social assistance, which is indicative of the financial vulnerability of these households. Interestingly, the statistics indicate that LGB adults are two to three times more likely than average to reside in households with a monthly income in excess of US$750; this is supported by the distribution of asset-wealth as captured by the Living Standards Measure (LSM) based on 29 household factors linked to asset ownership, dwelling, service delivery, and location. It is interesting to note that the over-representation of LGB individuals amongst the self-reported middle and upper classes is likely related to (material) asset-ownership and higher levels of education and not income alone, where the latter appears to follow a bimodal distribution, particularly in the case of LGB GC individuals. This may be because LGB individuals with higher levels of financial stability

are more comfortable self-identifying as LGB to data collectors, compared to those who are more economically vulnerable and, thus, might worry more about the potential impact of coming out.

The differences in income and asset distribution contribute to higher per capita poverty rates[212] amongst heterosexual GNC individuals, as indicated by headcount poverty rates calculated for three official poverty lines utilized by the South African government (Figure 1.9); specifically, the food poverty line (FPL) (the monetary value below which you cannot purchase enough food to meet a minimum energy intake) was set at approximately US$33 and US$38 per capita per month in 2015 and 2016, respectively; the lower bound poverty line (LBPL) was set at approximately US$48 and US$53 per capita per month in 2015 and 2016, respectively; and the upper bound poverty line (UBPL) was set at approximately US$74 and US$80 per capita per month in 2015 and 2016, respectively. GC individuals (irrespective of sexual orientation) face the lowest rate of food poverty (10-14%), whilst GNC individuals face the highest rate of food poverty (20-25%). Higher poverty amongst heterosexual GNC individuals remains when consideration is given to the lower and upper bound poverty headcounts. Poverty amongst heterosexual GC individuals is higher among LGB groups once the upper-bound poverty line is adopted; in fact, headcount poverty changes little for LGB groups when adopting the lower bound and upper bound poverty lines, providing further evidence for a bimodal income distribution amongst the latter group.

Figure 1.9. Headcount poverty rates by SOGE group



Note: Own calculations using SASAS 2015 and 2016. GC = Gender conforming, GNC = Gender nonconforming.

The finding that heterosexual GNC individuals face the highest levels of poverty is consistent with the earlier findings that members of this group are more likely to be less educated, as well as to hold low-skilled jobs in the labor market. It is difficult to draw generalizations about LGB GNC individuals,

not only because of the relative and absolute small size of this group, but because half this group is made up of young adults that are still in formal education. However, we can determine that LGB GNC persons are slightly more educated and skilled than their heterosexual counterparts, which is also reflected in their slightly greater representation in semi-skilled occupations. Contrastingly, heterosexual GC individuals hold less education than LGB GC individuals, yet the former is more likely to be employed in full-time and skilled employment, as well as face a lower likelihood of unemployment than the latter. These differences in labor market outcomes may be related to the fact that LGB GC individuals face more labor market stigma and discrimination (to be explored in the next section of this report) or make different labor supply decisions based on assumed gender roles within the home.

Overall, these findings illustrate socio-economic heterogeneity not only across, but also within sexual orientation and gender expression groups, with gender nonconformity and, to a lesser extent, LGB status being predictors of poverty. The SASAS data findings illustrate that the socio-demographic characteristics and socio-economic experience of LGB persons is quite varied and that GNC individuals, irrespective of sexual orientation, more pertinently experience economic and social exclusion.

A DESCRIPTION OF SAME-SEX COUPLES IN THE 2011 CENSUS

As mentioned earlier, large datasets are deemed more suitable for identifying the LGBT community given their small absolute and relative size within the broader adult population. However, data limitations prevent us from exploiting any of the larger, national datasets for describing differences between LGBT individuals/households and non-LGBT individuals/households, except for, that is, same-sex married/partnered individuals living together. From the SASAS data we determined that 30% of LGB persons are married or living with a partner, compared to about 35% of heterosexual persons. Therefore, the analysis conducted from these larger datasets is relevant only to subsets of the general and LGB populations, and any estimate of the LGB population provided by analysis based on SSCs only is likely to represent a dramatic undercount.[213]

One benefit of this larger dataset, however, is that further disaggregation of the data allows us to determine whether the experiences of LGBs in SSCs varies depending on ethnic/race group. Analysis of the Census (Table A.4) indicates how important race is for explaining patterns of economic disparity and affluence: White and Colored individuals in SSCs are observed to have higher levels of schooling attainment than their DSC counterparts, whilst Black African individuals in SSCs have lower levels of schooling than Black African individuals in DSCs. The fact that analysis of the SASAS data found LGB individuals to possess, on average, higher education could be explained by the fact that the LGB group is somewhat over-represented by White individuals, as well as younger (and potentially unmarried) individuals; therefore, differences within and across sexual orientation and gender expression groups are partly intertwined with broader class differentials observed within South African society.

We find no significant differences in the participation/labor force statuses and occupational skill levels of SSCs and DSCs within race group (Figure 1.10), which is quite different to what was observed from the SASAS data, where employment was significantly lower amongst heterosexual GNC and LGB GC individuals. This suggest that differences between SSCs and DSCs, and differences in the findings

of the SASAS and Census data, could be driven by differences in the racial composition of these groups. From Figure 1.9, we see that SSCs, relative to DSCs, are overrepresented by White individuals, although DSCs also appear to be over-represented by White and Colored individuals relative to the overall adult population. Finally, the Census indicates that SSCs experience generally higher rates of poverty than DSCs across all race groups, although household incomes were distributed fairly similarly across White and Colored individuals in SSCs and DSCs, whilst Black African individuals in SSCs have slightly lower household incomes than their DSC counterparts.

VICTIMIZATION AND WELLBEING OF LGBT AND NON-LGBT ADULTS

In the SASAS surveys, respondents were asked whether or not they would describe themselves as a member of a group that is discriminated against; a greater proportion of "yes" responses (weighted) were evidenced for LGB persons (38%) compared to heterosexual person (27%); this 11 percentage point difference is statistically significant at the 10% level. However, the majority of discrimination reported was racial (21% of respondents) and not linked to sexual orientation or gender;[214] approximately 10% of LGB individuals reported experiencing discrimination related to gender, which is significantly higher than the 1.5% of heterosexual respondents reporting gender discrimination. Similarly, 8% of LGB individuals reported discrimination related to sexual orientation, which is significantly higher than 1% amongst heterosexual individuals.

According to the OUT LGBT Well-Being study from 2016,[215] over half of the respondents (55%) expressed fear that they might experience discrimination due to their sexual orientation; 56% of respondents under the age of 25 (corresponding to 17% of the overall sample) reported having experiencing discrimination at school, and 10% of all respondents reported having experienced discrimination in the health sector. Although the SASAS sample is rather small to conduct disaggregated analysis, it is interesting to note that reports of gender discrimination were highest amongst respondents aged 25 to 34 years, and that discrimination linked to sexual orientation was most often reported by respondents younger than 35 and older than 65 years.

Table 3.2 summarizes the crime and safety experiences by SOGE group. Whilst there is no apparent difference in recent experiences of crime (apart from LGB GNC individuals who report significantly lower experiences of recent burglary or assault), GNC individuals are more likely than GC individuals to feel unsafe most days, particularly when walking alone in the dark. LGB GC people are significantly less likely to express a sense of unsafety than other groups, and significantly less likely than LGB GNC individuals to agree with the statement that gay men and lesbians are often victimized and assaulted. Conversely, LGB GNC individuals, on average, report significantly higher agreement with the statement that gay men and lesbians are often victimized and assaulted. It is worth reminding the reader that we evidenced LGB GC individuals to be over-represented on both ends of the income distribution; therefore, we cannot argue that the finding above is generalizable to the experiences of all LGB GC persons.

Findings from the 2016 OUT report points towards victimization being particularly high amongst school-aged youth; individuals aged 16 to 24 years expressed that they have ever experienced victimization based on their LGBT status, most commonly in the form of verbal insults (55%) and threats of violence (35%).[216] More than 1 in 10 (11%) LGBT 16 to 24 year-olds who completed the recent OUT LGBT Well-being survey reported having experienced rape or other sexual abuse at school

within the prior 24 months.[217] Nearly a third (31%) of lesbian and bisexual women from southern Africa who participated in a HIV risk study reported lifetime experiences of sexual violence.[218] In contrast, 3.7% of all South African adults surveyed in 2002-2004 reported lifetime experiences of sexual violence.[219] Approximately 3% of South African adults who participated in the 2015/2016 SASAS have physically assaulted GNC individuals, and a further 7% would consider doing it.

Table 3.2. Experiences of crime and safety, by SOGE group

	HETERO-SEXUAL GC	HETERO-SEXUAL GNC	LGB GC	LGB GNC
Recent victim of burglary/assault	25.0	25.8	35.5	14.7***
Feel personally unsafe on most days	20.7	25.4**	17.5	35.5**
Feel unsafe walking alone in the day	10.9	17.9***	4.1**	8.9
Feel unsafe walking alone after dark	41.9	51.9***	20.2***	45.5§
Agree that gay men and lesbians are often victimized and assaulted	29.4	29.6	23.8***	50.4***,§
Worry all/most of the time about becoming a victim of violent crime	15.0	23.5***	11.9	16.4

Note: Own calculations using SASAS 2015 and 2016. GC = gender conforming, GNC = gender nonconforming. ***p-value < 0.01, **p-value <0.05, *p-value < 0.10. Statistical significance is measured relative to heterosexual gender conforming.

BULLYING AND HARASSMENT OF LGBT YOUTH

As stated previously, findings from the 2016 OUT LGBT Well-being highlight high levels of victimization amongst school-aged youth; individuals aged 16 to 24 years report victimization based on their LGBT status, most commonly in the form of verbal insults (55%) and threats of violence (35%). The 2015 Trends in Mathematics and Science Study (TIMSS) that assessed the math and science performance of grade 9 students across 47 countries included several questions on bullying and harassment in the student contextual questionnaire. This allows us to compare the general experiences of males and females aged 15 to 19 that were in grade 9 in South Africa in 2015 with regards to harassment and bullying to the findings of the OUT LGBT Well-being report. Specifically, we compare the prevalence of verbal insults, threats of physical violence and incidences of being shoved/ hit/ kicked at school. Because the data is captured differently across the two datasets (present experience in TIMSS versus past experiences in OUT LGBT report), we posit that frequent experience (at least once a week or more) would be most correlated to recall of discrimination/ harassment when reflecting on time spent at school, and that grade 9 students suitably represent the lived experience of high school students. Our goal was to determine whether the occurrence of victimization and harassment at school is significantly related to poorer academic performance, which may account for higher drop-out and poorer school attainment rates amongst some LGBT youth.

We find that males report greater occurrences of bullying and harassment, particularly verbal and physical threats. Generally, we observe that reports of bullying and harassment amongst LGBT youths were higher than what is observed for the general grade 9 population in 2015. Whilst two-thirds of LGBT males reported experiencing verbal insults, just less than half of the grade 9 male population reported verbal insults. Similarly, the reported rates of being threatened physically and physically assaulted were roughly double amongst LGBT males. The rates of harassment and bullying amongst LGBT females were also higher than that of the grade 9 female population in 2015 (except in the case of being physically assaulted), although the differences are not as large as those observed for males.

Anecdotal reports from secondary schools in South Africa note high drop-out rates amongst LGBT students, as well as high levels of homelessness and substance abuse. Comparisons of TIMSS grade 9 performance in mathematics and science by frequency of bullying and harassment at school

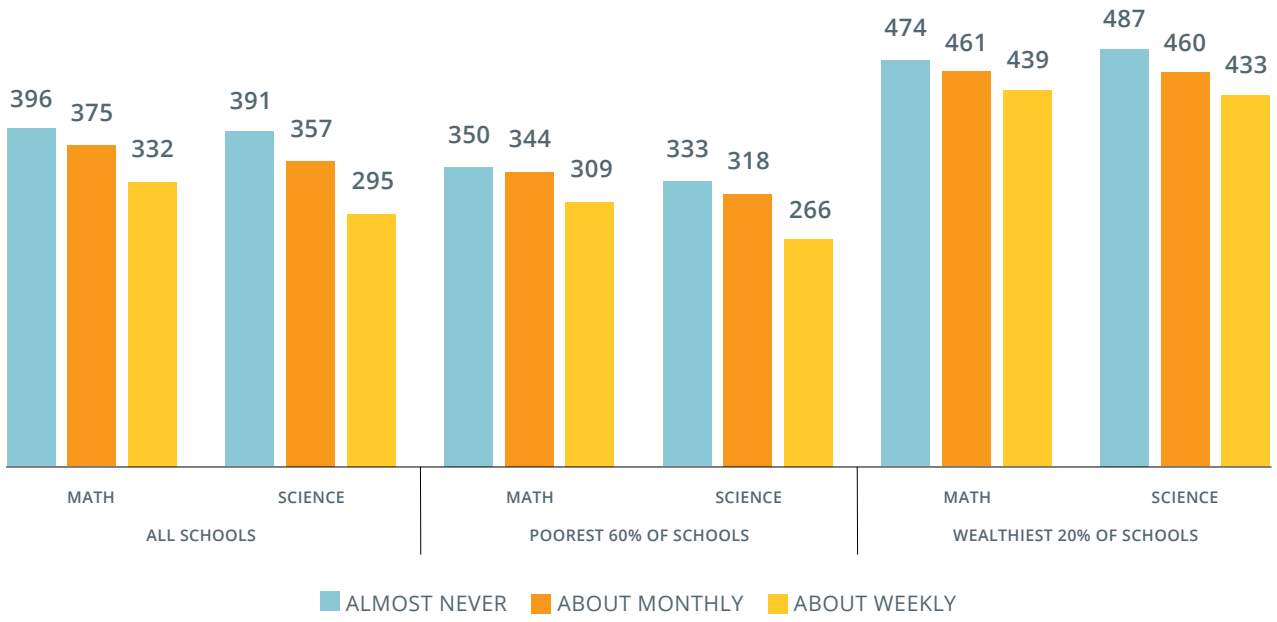
(Figure 1.10) indicate that students who experience discrimination at school on a weekly basis performed consistently lower on average than their peers; this trend emerges across both poor and wealthy school contexts. The performance gap between students who reported weekly bullying and harassment versus those reporting almost never experiencing bullying and harassment is 70 to 100 points when considering all schools but falls to about 40 to 50 points when observing the gap within school wealth groups. This suggests that experiences of bullying and harassment are more prevalent in poorer school settings. Nevertheless, this performance gap is, according to Spaull and Kotze,[220] equivalent to approximately 1.5 to 2 years of learning. Therefore, even if students remain in school, they are less likely to obtain a school-leaving qualification that permits them access to further studies, future employment, and potential wages.

Table 3.3. Experiences of victimization and bullying at school

	EXPERIENCED…	LGBT OUT WELL-BEING		TIMSS	
		MALE	FEMALE	MALE	FEMALE
Verbal insults	whilst at school	67*	46		
	at least once a week			32*	25
	once/ twice a week			16*	13
	once a week or more			48*	38
	never			33*	41
Threatened physically	whilst at school	48*	26		
	at least once a week			11	9
	once/ twice a week			10*	8
	once a week or more			21*	17
	never			60*	66
Hit/ kicked/ shoved	whilst at school	30*	9		
	at least once a week			10	9
	once/ twice a week			9	8
	once a week or more			19	17
	never			62*	67

Note: Own calculations using TIMSS 2015 and OUT LGBT Well-being 2016 report. * indicate a significant difference.

Figure 1.10. Average TIMSS test performance by occurrence of harassment and bullying



Note: Own calculations using TIMSS 2015

HEALTH DISPARITIES FOR LGBT ADULTS IN SOUTH AFRICA: DEPRESSION, SELF-HARM, AND HIV

According to the Global Burden of Diseases (GBD) Study of 2016, HIV/AIDS and interpersonal violence rank as the two highest contributors to loss of life amongst 15 to 49 year olds in South Africa, standing at 54.2% and 7% of total deaths, respectively. Self-harm ranks at number 6, contributing to 2.7% of total lives lost. As was discussed in the previous subsection of this report, the SASAS data indicates that GNC individuals, in particular, report greater concern over personal safety, and LGB individuals report greater incidences of victimization, which might account for lower levels of personal wellbeing among these groups. In the 2016 OUT LGBT Well-being study,[221] a third of respondents reporting having experienced victimization in the previous two years additionally reported that their self-esteem had been negatively impacted as a result.

We would, therefore, expect differences in concerns over safety and potential victimization, as well as differences in victimization experienced, to impact the mental and emotional wellbeing of LGBT versus non-LGBT individuals. Existing studies of the LGBT community in South Africa have found high rates of depression and suicide, particularly when compared to national benchmarks;[222] for example, the South African Depression and Anxiety Group (SADAG) reports that whilst stress, anxiety, and depression affect about 10% of the population, this proportion is 3 to 4 times higher amongst members of the LGBT community. Research suggests that this is most likely grounded in fear and experiences of discrimination and victimization.[223]

Estimates of suicidality among LGBT people vary; however, most studies[224] report rates that far exceed the lifetime suicide attempt rate (2.9%) observed in the general population in 2002-2004.[225]

These rates are very similar to those found in an epidemiological study covering 17 countries (including South Africa and six other low and middle income countries) which reported a lifetime suicide attempt rate of 2.7%.[226] In a sample of 329 gay/bisexual men from across South Africa, 16.5% had made suicide attempts because of their sexuality, with the rate amongst adolescents three times larger (38.7%).[227] In 2004, 17% of LGBT individuals in KwaZulu-Natal[228] and 21% in Gauteng[229] surveyed for the OUT Study reported lifetime suicide attempts. International studies (predominantly conducted in North America) have suggested that suicidal ideation amongst the transgender community is higher than that observed amongst LGB individuals, with various sample-based studies indicating suicidal ideation amongst transgender youth of approximately 45-50%. Comparisons of these rates to the national prevalence of suicidal ideation and attempted suicide implies that suicidal ideation is, as with stress, anxiety, and depression, 3 to 4 times higher in the LGBT community than the general population, and suicide attempts are as much as 8 times higher.

Risk factors for suicide may include HIV infection and disease progression.[230,231] Rates of HIV infection are higher among sexual minorities than for the population as a whole. HIV prevalence among men who have sex with men (MSM) was estimated at 26.8% in 2017, compared to 18.9% amongst the general population, and an estimated 10% among women who have sex with women.[232] MSM may face high levels of social stigma that make it difficult for them to disclose their sexuality to healthcare workers.[233] A recent study has put the likelihood of a transgender woman in Sub-Saharan Africa having HIV at twice the prevalence among MSM.[234]

A report by GenderDynamix,[235] a South African NGO, also points towards healthcare provider stigma as playing a crucial role in why transgender women are excluded from accessing HIV prevention services. Table 3.4 indicates responses to SASAS questions regarding satisfaction with health care provision. From the results we can clearly see that whilst LGB gender conforming individuals express the most satisfaction with the provision of health care in general, and STI treatment in particular, three-quarters of GNC persons, irrespective of sexual orientation, express greater dissatisfaction with the provision of health services. LGB GNC individuals expressed the lowest satisfaction (statistically significant) with both general health care provision and STI treatment.

In the pooled 2015-2016 SASAS data, 92 and 93 health sector and education sector professionals/ associate professionals were surveyed, respectively. Of the respondents working (or having worked) in the health sector, 48% responded that they “think it is disgusting when men dress like women and women dress like men”, and 42% responded that they “think gay men [lesbians] are disgusting”; approximately 15-17% of these respondents neither agreed nor disagreed with these statements. Similarly, 50% of respondents with work in the education sector responded that they “think it is disgusting when men dress like women and women dress like men”, 40-42% “think gay men [lesbians] are disgusting”, with a further 15-20% neither agreeing nor disagreeing with the statement. Therefore, as many as half of surveyed respondents who work in the health and education sectors hold the LGBT community in negative regard.

Table 3.4. Satisfaction with health services, by SOGE group

	HETERO-SEXUAL GC	HETERO-SEXUAL GNC	LGB GC	LGB GNC
Satisfaction with access to health care (proportion)				
Satisfied/ very satisfied	28	24	41*	17*
Neither satisfied/ dissatisfied	5	3*	9	6
Dissatisfied/ very dissatisfied	67	73***	52**	77§
Satisfaction with access to treatment for sexually transmitted diseases (STIs), including HIV/AIDS (proportion)				
Satisfied/ very satisfied	32	27**	51	14***,§
Neither satisfied/ dissatisfied	8	5***	10	17*
Dissatisfied/ very dissatisfied	58	68***	40**	68§

Note: Own calculations using SASAS 2015 and 2016. GC = gender conforming, GNC = gender nonconforming. Statistical significance is measured relative to heterosexual strongly gender conforming. ***p-value < 0.01, **p-value <0.05, *p-value < 0.10. § indicates significant differences at the 10% level between LGB strongly GC and LGB GNC.

COST ESTIMATES

Debra Shepherd

In this section of the report, we extend the analysis of the previous section that noted several differences in labor force participation across SOGE groups and attempt to put a cost to lost output (labor productivity) linked to stigma and discrimination faced by LGB and GNC individuals in the South African labor market. The presence of stigma and discrimination in the labor market will have two general negative impacts on economic output: (1) wage gaps between LGBT and non-LGBT people with similar abilities and human capital, and, (2) fewer hours worked (in part-time and casual jobs) by LGBT people linked to discrimination and constrained labor supply. Before we jump into the economic costing exercise, it is worthwhile exploring some reasons why labor supply and labor demand might differ across LGBT and non-LGBT individuals. However, it needs to be mentioned that in much of the existing quantitative research on labor market outcomes, focus is, for reasons of data availability, placed on the outcomes of lesbians and gay men compared to heterosexual women and men, and therefore much of what follows refers to LGB persons and groups.

Differences in labor supply between heterosexuals and lesbians/gay men can be caused by inherent differences across sexual orientation in society and, as a result, the labor market. For example, lesbians that realize early in life that they will not form part of a traditional household may decide to invest more in market-oriented education; by implication, lesbians unable to break free of traditional gender-based roles are likely to make fewer career-oriented decisions.[236] Partners in SSCs may exhibit less specialization in unpaid and paid labor force participation than partners in DSCs, which may represent as higher (lower) paid labor force participation and employment rates amongst lesbians (gay men).[237] Furthermore, differences in career decision-making and the choice of occupation between gay men/lesbians and heterosexuals can be attributed to gender nonconforming expression, as well as the existence of sexual orientation bias. Co-residing partners are better placed to 'specialize' as marriage (both legal and de facto) can provide for more security for partners that choose to not be part of the paid labor force.[238] Furthermore, employers may hold less bias toward LGB people who are (legally or de facto) married in same-sex relationships as their lifestyle may be perceived as more aligned with traditional social norms.

Quantitative research on labor market outcomes is particularly limited for bisexual and transgender persons. However, we can hypothesize that members of these groups, as with gay men, may impose restrictions on themselves and avoid male-dominated occupations for less masculine jobs that may offer lower salaries;[239] if the occupations pursued by LGBT persons conflict with the gender-role expectations imposed by society, they are more likely to be devalued and stigmatized. The devaluation of individuals failing to conform to traditional gender roles can also result in lower earnings, as their value to their employer/firm will not be properly evaluated. Constriction of self-concept and lower social support can additionally lead to premature foreclosing on the career choices of LGBT people.[240] Bullying of LGBT persons even before they enter the labor market (we recall from the 2016 OUT Well-being study that 55% of young LGBT persons reported being victims of victimization at school) can have impacts on labor market outcomes; evidence has shown that LGBT victims of bullying tend to be less educated, more prone to depression, face higher unemployment, and earn less than their similarly bullied heterosexual individuals and LGBT persons that were not bullied at school.[241]

Differences in the demand for labor of different groups of individuals are often attributed to discrimination. Several theories of discrimination have been developed to explain why we observe differences in the treatment and/or outcomes of different groups in the labor market, including *taste discrimination* (employers derive utility from being associated with individuals with certain traits),[242] *statistical discrimination* (employers use their beliefs about the productivity of LGBT individuals as a proxy for an applicant's productivity)[243], and the *justification-suppression model* (discrimination in the workplace derives from a lack of motivation on the part of the employer and/or co-workers and/or clients to suppress prejudice directed to an individual member of certain social group, as generated by social norms and beliefs).[244] Discrimination in the recruitment process can result in LGBT applicants self-eliminating themselves for particular jobs, being rejected by the employer, or being treated differently (e.g. offered less attractive conditions) than non-stigmatized applicants. Differently held gender stereotypes about lesbians and gay men, for example, could result in more negative bias faced by gay men (lesbians) when applying for male(female)-dominated jobs, and less bias when applying for female(male)-dominated jobs; for example, masculine characteristics, which stereotypically characterize lesbians, can serve as an external signaling function in the workplace. Discrimination by employers towards LGBT person results in higher unemployment rates and longer job search periods, as well as self-elimination from the paid labor force. Also, because sexual orientation is (in most contexts) a non-observable trait, LGB persons may choose to hide their sexual orientation at work; this type of 'coping strategy' would be less accessible to transgender and gender nonconforming individuals.

MODELING THE ECONOMIC COST OF STIGMA AND DISCRIMINATION ON LABOR AND PRODUCTIVITY

Wage Differentials

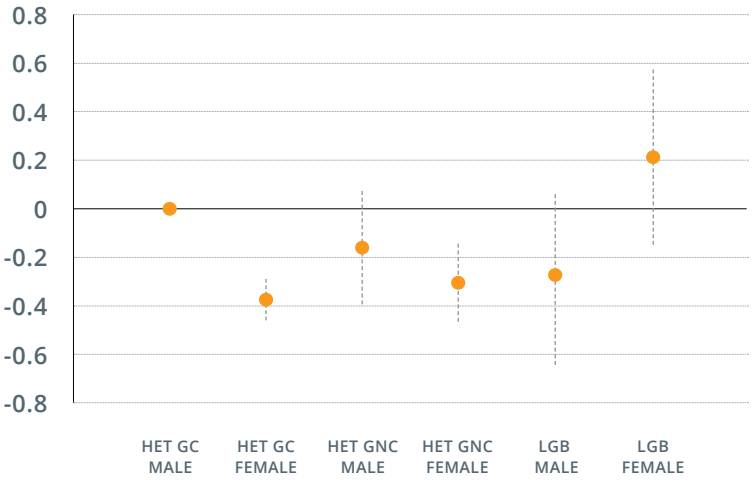
Given the high proportion of zero and unspecified income, we make use of sequential regression multiple imputation (SRMI) to impute missing/zero income data.[245] As the SASAS provides personal income through 14 income brackets, we make use of interval regression in our income gap estimations. Finally, in order to take out the positive skew in the distribution of income, the lower and upper bounds of the income brackets are log transformed.[246] Table A.5 (see Appendix) indicates the estimated income gaps between heterosexual GC individuals, and heterosexual GNC and LGB individuals for various samples and model specifications. Columns (1) and (2) indicate estimates of the income gap using the sample of full-time and part-time/casual individuals, respectively, and controlling for the usual human-capital characteristics of education and age (as a proxy for experience). Relative to (the omitted category) heterosexual GC individuals, full-time employed heterosexual GNC and LGB individuals earn less on average, albeit the difference is not statistically significantly different from zero. In the case of part-time/casual employment, LGB individuals are estimated to earn significantly more than all other groups.

Controlling for additional characteristics that are important for selection into the South African labor market, we find that heterosexual GNC individuals do not earn significantly different average incomes to their employed GC counterparts, whilst LGB individuals earn less (albeit not significantly different from zero) than heterosexual GC individuals. The models represented in columns (5) and (6) are estimated after combining all employed individuals into one sample. We find that, after controlling for productive and socio-demographic traits as well as employment type, there are no significant differences in the average incomes of SOGE groups. Furthermore, a large and significant gap between part-time/casual and full-time employed individuals is estimated.

The analysis above is repeated including interactions between sexual-orientation-gender-identity category, and the sex of the respondent (see columns (7) and (8)).[247] To simplify interpretation, the expected income gaps between each group and heterosexual GC men are plotted with 95% confidence intervals (see Figure 1.11). Controlling for productive and other characteristics, lesbians and bisexual females are expected to earn higher average incomes than all other groups, although not significantly different from the average incomes of males. Heterosexual GNC and gay/bisexual males, as well as heterosexual women (irrespective of gender expression) are estimated to earn estimated incomes that are below that of heterosexual GC males, although the difference is not statistically significantly different from zero in the case of the former.

The relation of gender and occupational choice (and access to hiring opportunities) may account for these differences in earnings. The higher earnings of lesbians and bisexual females is to be expected if the career choices and human capital accumulation of lesbians is different to that of heterosexual and GC counterparts, and stereotypically masculine traits are rewarded in the labor market. On the other hand, the lower expected earnings of gay/ bisexual males could result from a 'choice' to avoid certain male-dominated and lower-paying occupations or being passed-up for promotion opportunities relative to their heterosexual counterparts. There is also an income penalty for heterosexual individuals who fail to conform to traditional gender roles, and, in doing so, disrupt conventional assumptions about gender (and sexuality).

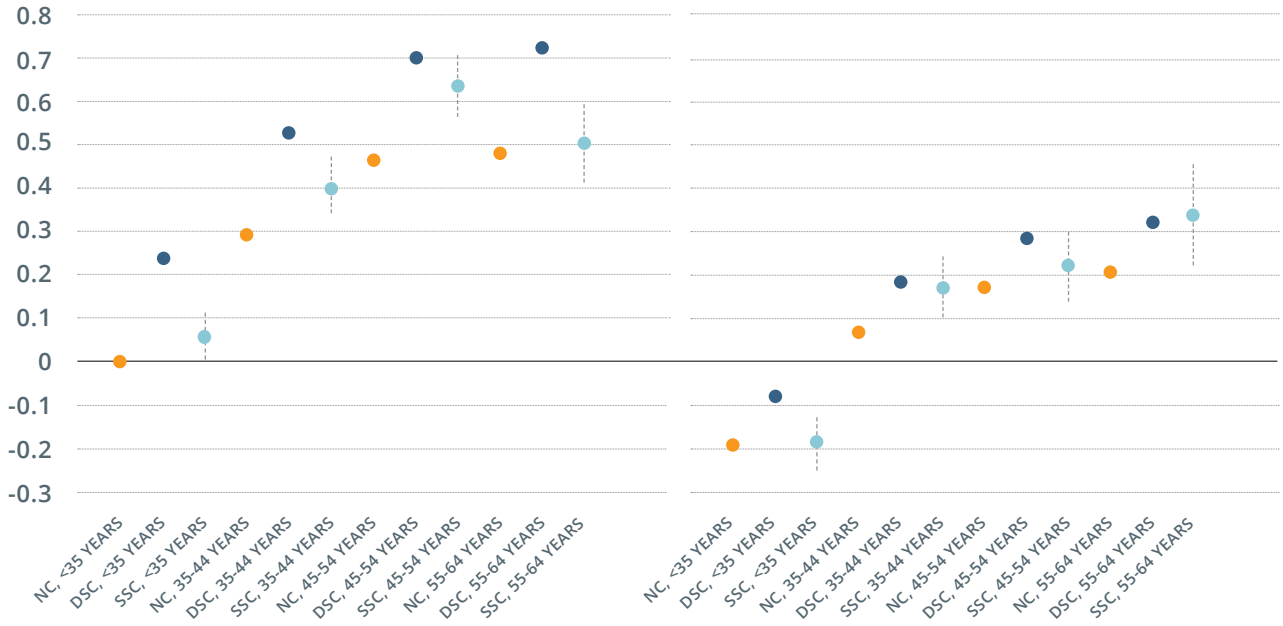
Figure 1.11. Estimated income gaps relative to heterosexual GC males



Notes: GC = gender conforming, GNC = gender nonconforming. Interval regression model controls for respondent's sex, age, education level, area of location, race, occupation and type of employment. The estimated gaps are constructed using a linear combination of regression coefficients, and dashed lines indicate 95% confidence intervals (standard errors computed using the delta method). Solid line is drawn at zero indicating the reference group (heterosexual GC males).

Figure 1.12 below similarly utilizes the Census 2011 data to illustrate the estimated income gaps between employed male and female adults, with distinctions made between adults that are not living together with a partner/spouse, adults who are part of a DSC, and adults who are part of a SSC.[248] Given the large size of the Census data, we are furthermore able to estimate the wage gaps by age group. As with the SASAS data, we find evidence that, in general, female workers earn approximately 25-35% less than male workers, controlling for human capital and socio-demographic traits. Men in SSCs earn significantly less than their DSC counterparts, except for within the age group 45 -54 years; the earnings gap between SSC and DSC males within the youngest and oldest age groups is 13-20%. This suggests that gay men (or at least those reporting to live with a partner or spouse) are remunerated less than their DSC counterparts who possess similar productive characteristics or face vertical occupational segregation that limits their earning potential. Women in SSCs earn generally similar to women in DSCs, and more than women that report not living with their partner/ spouse, or are not in a relationship (for brevity, we will term this group 'non-coupled' women); the only exception is the youngest age category (<35 years old), where the earnings of SSC and non-coupled women are not estimated to be significantly different, and DSC women earn significantly more. We therefore find that, for the roughly 30% of lesbians and gay men that are in marriages or co-residing with their partners, gay men in SSCs face an earnings penalty in the South African labor market relative to men in DSCs, whilst there is no similar earnings penalty for lesbian women in SSCs relative to women in DSCs aged 35 years and older.

Figure 1.12. Estimated income gaps across individuals in NCs, SSCs and DSCs (by age group)



Notes: NC = non-coupled, DSC = different-sex couple, SSC = same-sex couple. Men are on the left group, women on the right. Interval regression model controls for respondent's sex, age, education level, area of location, race, occupation and sector of employment. The estimated gaps are constructed using a linear combination of regression coefficients, and dashed lines indicate 95% confidence intervals (standard errors computed using the delta method). Note that standard errors on DSC and NC estimates are very small. Solid line is drawn at zero indicating the reference group (non-coupled males aged younger than 35).

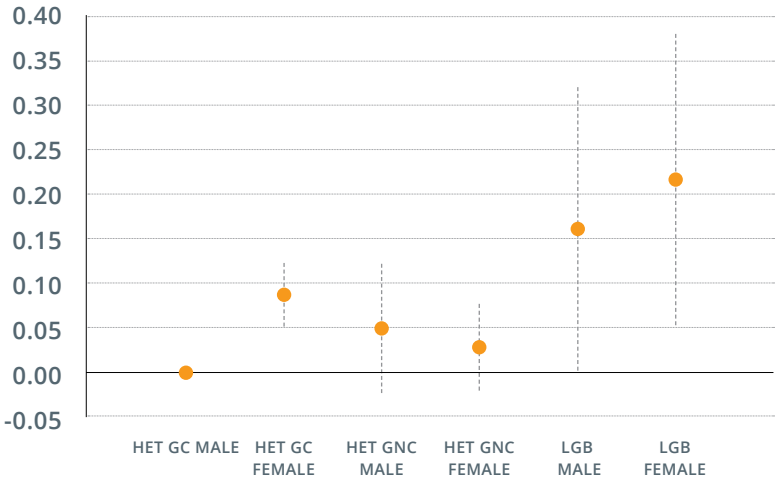
Employment (unemployment) gaps

A further source of lost labor output due to stigma and discrimination would be any decreases (increases) in employment (unemployment) of LGBT people that are unrelated to their human capital and ability. We utilize a linear probability model to regress human capital and socio-demographic characteristics[249] onto unemployment status; the resultant estimated gaps (computed relative to heterosexual GC males) are depicted with 95% confidence intervals in Figure 1.13. On average, heterosexual GC females and LGB individuals, irrespective of sex, face rates of unemployment that are 9 and 20 percentage points higher (statistically significant) than heterosexual GC males. There are no statistically significant differences evidenced between the unemployment rates of heterosexual GC males and heterosexual GNC individuals. It is noteworthy that whilst lesbians and bisexual females are not expected to earn significantly less than heterosexual GC males, the former face expected unemployment rates that are significantly higher than the latter. These findings are in agreement with existing research: heterosexual males are significantly more (less) likely than any other group to be employed (unemployed), and lesbians and bisexual females are most likely to be unemployed, which points towards more discrimination during the hiring stage, and/or a higher likelihood of being discharged from paid employment.[250]

Figure 1.14 similarly depicts estimated unemployment gaps between individuals that are non-coupled (NC), part of a DSC, and part of a SSC using the Census 2011 data. The conditional likelihood of unemployment clearly declines with age, more so for women than for men. In fact, the unemployment rate of men in DSCs is fairly stable over all age groups, with only a difference of 3 percentage points observed between younger and older men in DSCs. Men in DSCs are, apart from

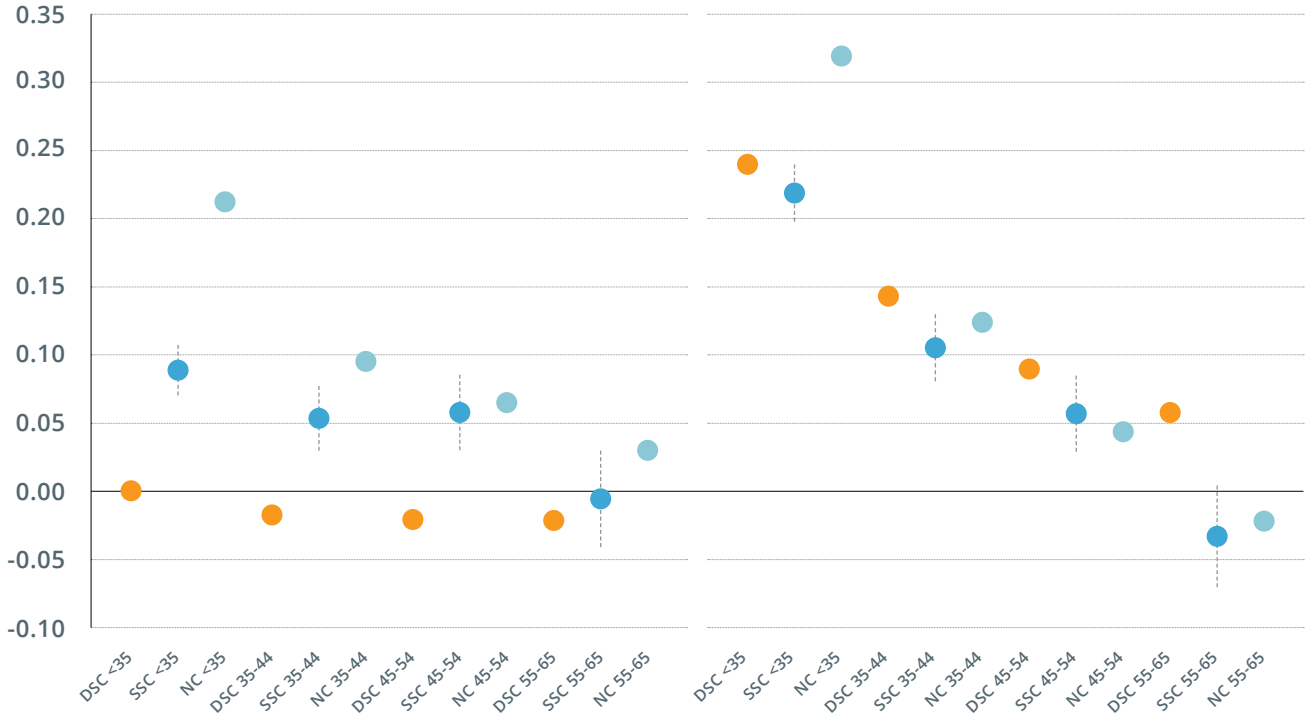
the oldest age group, significantly less likely to be unemployed than men in SSCs. Women in DSCs face consistently higher unemployment than men in DSCs, whilst amongst SSCs we observe that women have higher unemployment than men in the younger age groups, whilst no significant difference is evidenced for older men and women in SSCs. We find no evidence of significantly different expected likelihood of unemployment across women in DSCs or in SSCs (apart from the oldest age group).

Figure 1.13. Unemployment gap by SOGE group



Note: GC = gender conforming, GNC = gender nonconforming. Linear probability model of unemployment controls for sex, age, education level, race and area of location. The estimated gaps are constructed using a linear combination of regression coefficients, and dashed lines indicate 95% confidence intervals (standard errors computed using the delta method). Solid line is drawn at zero indicating the reference group (heterosexual GC males).

Figure 1.14. Estimated unemployment gaps across individuals in NCs, SSCs and DSCs (by age group)



Note: NC = non-coupled, DSC = different-sex couple, SSC = same-sex couple. Men are on the left group, women on the right. Linear probability model controls for sex, age, education level, area of location, and race. The estimated gaps are constructed using a linear combination of regression coefficients, and dashed lines indicate 95% confidence intervals (standard errors computed using the delta method). Note that standard errors on DSC and NC estimates are very small. Solid line is drawn at zero indicating the reference group (males aged younger than 35 in DSCs).

Computation of Economic Cost

The above findings imply a loss in economic output: As members of stigmatized groups are not hired into positions that best reflect their abilities and human capital, a loss of wages would reflect a decrease in productivity through, for example, talent not being attracted and/ or retained by firms, as well as there being little if no incentive for individuals to maximize effort. This loss in productivity would result in lower output per work hour, and, by implication, lower total output. Furthermore, output would decrease as stigmatized groups work fewer hours as a result of constrained labor supply decisions and lower labor demand.

Estimation of the economic cost of stigma and discrimination in the labor market relies on four key parameters: the wage gap, the employment (unemployment) gap, annual earnings per worker, and the number of stigmatized individuals. The first of these parameters we estimate to be 30%, which is the weighted average income gap (from Figure 1.12) of the four groups: heterosexual gender conforming females, heterosexual gender nonconforming males and females, and LGB males. We similarly estimate the second parameter to be 7.5 percentage points. Given the immense skew in the South African salary income distribution, we use the median monthly income in order to reflect the 'average' earnings within the South African labor market. The median monthly incomes of heterosexual GC males in full-time and non-full-time salaried work is R5,001-R7,500 (US$372-US$560) and R1,501-R2,000 (US$112-US$149), respectively. With roughly 70% and 30% of workers in full-time and part-time/casual employment, respectively, and taking the bracket midpoint, the weighted median monthly income of a heterosexual GC male is R4,900 (US$366).[251] Therefore, assuming all things constant, the estimated monthly loss in earnings (economic output) of a stigmatized worker with paid employment is R4,900 x 30% = R1,470 (U$108) per month, or R17,640 (US$1,315) per year. With approximately 9.6 million employed people in South Africa in 2015/2016 (QLFS, Stats SA), and approximately 15%[252] of all employed persons being identified as part of a group facing wage discrimination linked to sexual orientation and gender nonconformity, we estimate an annual lost labor income of 0.15 × 9,600,000 × R17,640 = R2.540 billion (US$189.56 million). Similarly, the monthly incomes (and economic output) lost due to the unemployment of LGB persons is R4,900 x 12 = R58,800 (US$4,350) per annum. Decreasing the unemployment rate of LGB persons by 7.5 percentage points is equivalent to increasing the number of employed LGB persons by approximately 25%, or about 29,000 individuals. Therefore, the underemployment of LGB persons is linked to an annual lost labor income of R58,800 × 29,000 = R1.705 billion (US$127.25 million). The total estimated costs of wage discrimination and underemployment related to sexual orientation and gender expression are US$316.81 million.

Table 3.5. Median wages and employment proportions across employment types

	HETEROSEXUAL GC MALES MEDIAN MONTHLY INCOME	PROPORTION OF ALL EMPLOYED
Full-time employment	R5,001-R7500	70.3
Part-time/ casual/ other	R1,501-R2,000	29.7
Weighted average monthly income	4,900	
Estimated loss in monthly income	1,470	

Note: Own calculations using SASAS 2015 and 2016. GC = gender conforming.

Modeling the Economic Cost of Health Disparities and Sexual Assault

Health as a form of human capital has important implications for economic outcomes. As already discussed in this report, LGBT people face higher incidences of mental and physical health issues compared to the general population. "Minority stress" refers to multiple forms of stigma and discrimination that have impacts not only in causing psychological stress in LGBT individuals, but also creates exclusions, both financially and socially, that prevent LGBT people from seeking health services. As with labor supply and productivity, it is possible to construct a model to estimate the economic impact of health disparities, such as depression, suicidality and HIV, for LGBT people. This modeling procedure involves two steps: first, estimating the "excess risk" of the condition as the difference in the current prevalence of the disease amongst LGBT people and the benchmark prevalence in the absence of LGBT exclusion (assuming that exclusion drives differences in rates between LGBT persons and the overall population); and second, assigning a cost (e.g. health care cost, lost productivity, early mortality) to these excess cases. As already discussed in this report, research conducted in the South African context puts suicidality (self-harm) amongst LGBT persons at approximately six times the rate of the general population, depression at approximately four times the rate of the general population, and the prevalence of HIV/AIDS at approximately twice the rate of the general population.

The health impact measure to be used is the disability-adjusted life year (DALY) estimated by the Global Burden of Diseases (GBD) Study 2016 for South Africa. This project estimates the burden of different conditions and injuries on years of life lost (YLLs) and years lived with a disability (YLDs), where the former is calculated as the standard life expectancy less age of death and the latter is valued according to public perception about the severity of health conditions, with one YLD less than one YLL. DALYs are then computed by adding up the YLLs and YLDs for each condition. The GBD total DALYs for South Africa in 2016 are (amongst adults aged 15 and older): 7,343,337 DALYs generated by HIV/AIDS; 359,347 DALYs generated by self-harm; and 336,501 DALYs generated by depressive disorders. Adopting a method used by many researchers to estimate the economic cost of an YLL/D, the health impact of each condition is translated into economic loss by valuing one DALY as one to three times a country's per capita income.[253] In 2016, per capita annual income in South Africa was US$5,490 (approximately R75,000), therefore three times per capita income is US$16,470, or R225,000. We note, however, that this macroeconomic measure yields a conservative estimate of the economic effect, as it does not fully capture the full cost of the burden of health conditions (e.g. loss of savings, absenteeism from work, lower investment in education).

Table 3.6 illustrates the economic costing exercise. First, we estimate the benchmark share of DALYs (A) experienced by LGB and GNC persons by their share within the overall adult population; this is 21.2% according to the SASAS 2015/2016 data. This proportion is beyond what is typically observed for the LGBT population in other countries, so we also adopt a lower-bound estimate of this proportion as 10.3%, which excludes gender nonconforming heterosexual males and females that mostly but do not strongly identify with femininity and masculinity, respectively. The share of DALYs at the current LGB and GNC prevalence rate (B) is estimated using the risk figures for the general (rg) and LGB and GNC (rc) populations identified in the discussion above as BU = 0.212 × (rc/rg) in the case of the upper-bound estimate, and BL = 0.103 × (rc/rg) in the case of the lower-bound estimate. In the case of the risk of HIV/AIDS, self-harm and depressive disorders, we approximate rc/rg to be 1.5, 4 and 3.5, respectively. The number of excess risk DALYs is computed as the difference in the

benchmark and current rates multiplied by the total DALYs, with the economic cost subsequently computed as the excess risk multiplied by one to three times the per capita GNI (see the final two rows of Table 3.6). Therefore, we estimate the economic cost of health disparities amongst the adult LGBT community to be US$3.18 billion to US$19.52 billion.

We adopt a similar approach to estimating the economic cost of sexual assault. According to the GBD study of 2016, interpersonal violence is the second highest ranked cause of death amongst South African adults aged 15 to 49 years. The prevalence of assault (common, grievous bodily harm and sexual) amongst South African households is generally very high, with just under 40% of South African adults reporting being a victim of any form of domestic violence in the South African Stress and Health (SASH) Study of 2003/2004. The prevalence of physical assault experienced by the general population in the SASH Study and reported in the OUT LGBT Well-being study of 2016 are very similar; approximately 7-8% of South African adults report being victims of domestic/physical violence, with the rate being significantly higher for women (approximately 14%) and young adults in school (18%). According to the crime statistics of 2015/2016,254 sexual assault accounted for approximately 13% of all reported cases of assault. As mentioned earlier, sexual assault and rape is significantly higher amongst the LGBT community, and we approximate r_c/r_g to be 3. With the number of DALYs linked to sexual violence amongst adults in 2016 at 9,279, we estimate the economic cost of sexual assault to be between US$10.49 million and US$64.79 million.

Table 3.6. Economic cost of "excess risk" health disparities and sexual assault

	HIV/AIDS	SELF-HARM	DEPRESSIVE DISORDERS	SEXUAL ASSAULT	TOTAL
TOTAL NUMBER OF DALYS (D)	7,343,337	359,347	336,501	9,279	8,039,185
Excess risk – upper bound					
Benchmark proportion of DALYs (A_U)	0.212	0.212	0.212	0.212	-
Current proportion of DALYs ($B_U = AU \times r_c/r_g$)	0.318	0.848	0.742	0.636	-
Excess risk ($B_U - A_U = C_U$)	0.106	0.636	0.530	0.424	-
Excess risk DALYs (C_U x D = E_U)	778,394	228,544	178,346	3,934	1,189,218
Excess risk – lower bound					
Benchmark proportion of DALYs (A_L)	0.103	0.103	0.103	0.103	-
Current proportion of DALYs ($B_L = A_L \times r_c/r_g$)	0.155	0.412	0.361	0.309	-
Excess risk ($B_L - A_L = C_L$)	0.052	0.309	0.258	0.206	-
Excess risk DALYs (C_L x D = E_L)	381,853	111,038	86,817	1,911	581,619
Economic cost of excess risk (millions US$)					
$\mathbf{E_L}$ × 1 × GNI p.c.	2,096.37	609.60	476.63	10.49	3,193.09
$\mathbf{E_U}$ × 3 × GNI p.c.	12,820.15	3,764.11	2,937.36	64.79	19,586.41

Note: GNI figure comes from the World Bank database using the GNI per capita, Atlas method for conversion to dollars. DALYs are computed using the Global Burden of Diseases Study of 2016. The benchmark share of DALYs is taken as the proportion of LGB and gender nonconforming in the population, as computed using SASAS 2015/2016 data. This proportion of 21.2% differs from the 15% used for the loss in wages calculation, as LGB and GNC persons are overrepresented amongst the unemployed and those individuals that do not participate in the paid labor force.

A COMMENT ON THE INFORMAL ECONOMY

S.N. Nyeck

The term "informal sector" is often used to refer to the underground economy that is not formally accounted for in national statistics. It is estimated that the size of the informal sector in South Africa is between 17%[255] and 30%[256] and encompasses activities such as "the wholesale, retail and trade sector (44%), services (16%), and construction (16%),"[257] street vending, and other income self-generating activities. According to the Quarterly Labor Force Survey of 2015, half of all part-time and casually employed individuals work in the informal sector, and 80% of self-employment occurs within the informal sector. While there is no standard definition or accounting of informality, it is considered the realm of employment when the business is not registered for tax purposes; when employment does not contribute to or receive pension from an employer; when work does not rely on written contracts for employment and does not contribute to unemployment benefit. Put differently, the informal sector represents "all economic activities by workers or economic units that are—in law or practice—not covered or sufficiently covered by formal arrangements."[258]

A study of street trade in South Africa shows that despite these vulnerabilities, the informal sector can be a reservoir of entrepreneurial creativity and leadership if well organized and politically engaged.[259] But research is yet to evidence the role of the informal sector either as potential aggravation of exclusion from state-sponsored benefit,[260] or as a potential incubator of trade-specific entrepreneurial skills for LGBT persons. Research on the role of LGBT people in the informal economy is recommended.

RECOMMENDATIONS

Given South Africa's progressive Constitution, and recognized need for an inclusive and sustainable economy, the following recommendations expand upon existing policies and infrastructure to promote the full inclusion of LGBT and other gender nonconforming people in South Africa. Moreover, an exciting opportunity exists to promote conversations about Africanizing approaches to development that draw from the concept of *Ubuntu*[261] and would place collective responsibility and care at the center of public policy and practice. Such an approach would harness all creative forces in society to promote development in South Africa.

OVERARCHING RECOMMENDATIONS

- Produce reports on implementation and inclusion of LGBTI[5] people in governmental strategic plans (see Tables below) and Chapter 9 Commissions (e.g., Commission for Gender Equality, South African Human Rights Commission, Commission for the Promotion and Protection of the Rights of Cultural, Religious and Linguistic Communities) and advisory groups (e.g., National Task Team on Gender and Sexual Orientation-based Violence Perpetrated against Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Persons).
- Include LGBTI people as full members on all Chapter 9 Commissions and advisory groups across all sectors of government.

SPECIFIC RECOMMENDATIONS

Reduce stigma through structural change that supports education and norm change to prevent violence, harassment, and discrimination against LGBTI and other GNC (gender nonconforming) people and support reporting and appropriate responses to such experiences.

- Foster inter-departmental collaboration between the police and the Department of Justice, which lead the National Task Team on Gender and Sexual Orientation-based Violence, with the Department of Education and the Department of Social Development to increase efforts to prevent violence, harassment, and discrimination.[262]
- Change negative attitudes that promote violence and harassment against LGBTI and other GNC people by integrating interventions in state-funded efforts to reduce interpersonal violence—both within public schools and within community environments. For instance, SOGIE (sexual orientation, gender identity, and gender expression) material could be added to the school-based Life Orientation curriculum.
- Train all police, hospital staff, and first responders within schools and universities, and beyond, to offer LGBTI-competent responses to violence victimization, harassment, and discrimination. Provide anti-bias training and evaluate the impact of this training on performance, including the impact of "sensitivity" training on the performance of officers within the Department of Home

[5] I represents intersex and is referenced along with LGBT populations in many South African governmental strategic plans. Hence, the recommendations contained here refer to LGBTI people. However, as the research literature is thin about the experiences of intersex people, the term LGBT is used most often in this report.

Affairs regarding LGBTI asylum seekers.

- Utilize the wide-reaching influence of the South African media to provide positive images about and messaging of LGBTI and other GNC people.[263]

Ensure appropriate implementation and monitoring of LGBTI-protective legislation.

- Create a cohesive plan for implementing and monitoring LGBTI-protective legislation across legislation, including an assessment of the extent to which current legislation protects transgender and GNC people (i.e., on the basis of gender identity and expression.)
- Ensure that relevant officials, such as police, justices and magistrates, receive proper training and resources regarding SOGIE issues, and especially in relation to racial inequality, to ensure the implementation of SOGIE-related legislation.[264]
- Increase access to marriage for same-sex couples across South Africa by ensuring that a willing marriage officer is present in every Department of Home Affairs office through the implementation of The Civil Union Amendment Bill.[265,266]

Reduce barriers to identity documents for transgender people.

- Modify Act 49—Alteration of Sex Description and Sex Status Act 49 of 2003 to allow gender identity marker change on birth certificates without medical diagnoses or intervention.

Improve access to competent health care for LGBTI people.[267]

- Increase training by health care providers and others in the health care system regarding the provision of LGBTI-competent care.
- Ensure the provision of counseling and access to hormone therapy for transgender people at primary care levels to ensure wider accessibility to rural and peri-urban communities.

Foster LGBTI-inclusive working environments.

- Adopt inclusion as a key management principle and support the formation of LGBTI employee groups to advise businesses regarding institutional policies, practices, and resources (e.g., sexual harassment, dress-code, LGBTI-affirming counseling). See resources at the LGBT+ Management Forum (http://lgbtforum.org/resources).
- Adopt policies and practices that promote fairness and positive outcomes for racial minorities and women, as well as sexual and gender minorities (LGBTI people), and other GNC people and their families (e.g., family responsibility leave, provident fund provisions).

Enable LGBTI-inclusive outcomes monitoring by adding LGBTI (SOGIE) measures to surveys and administrative systems.

- Include multiple SOGIE (i.e., sexual orientation identity, gender identity, gender expression, sex assigned at birth, intersex measures, sex of romantic partners) measures in all large, state (meaning publicly-funded) surveys, the Census, and administrative data systems (e.g., General Household Survey, Quarterly Labour Force Survey), as shown in Tables D and E below. These data should be used to explore variability in economic, health, and well-being across sexual orientation, gender identity, gender expression, and race, as well as to assess the potential impact of public policies on LGBTI and other GNC people.

- Ensure that systems for monitoring harassment and discrimination track and report discrimination by SOGIE and are known to and accessible by LGBTI and other GNC people.

Conduct further research on LGBTI issues to build on the analyses of same-sex couple households and LGB and GNC adults included in this report.

- Further data collection and analyses of the experiences of transgender and intersex people are needed to fill voids in the South African data landscape
- Further research on the experiences of LGBTI people who are not currently residing in same-sex couple households is needed—particularly in large, representative datasets that support analyses stratified by sex and race, among other demographic characteristics.
- Monitor and evaluate current and future efforts to promote the inclusion of LGBTI people as outlined through the recommendations above.
- Conduct further social science research on sexual and gender diversity, past and present, within South Africa.
- Continue to evaluate and improve the collection of SOGIE data on the South Africa Census. Specifically, research on the reporting of relationship status on the household roster, particularly in households with multiple married/partnered adults, would be helpful.
- Study the role of LGBTI people in the informal economy and investigate strategies to cultivate and promote LGBTI-owned small businesses to reduce economic inequities and social stigma associated with being LGBTI.

Table 4.1. Governmental strategic plans that explicitly mention LGBTI populations

NAME	PURPOSE	DESCRIPTION
Department of Basic Education Revised Five-Year Strategic Plan 2015/16-2019/20[268]	The plan "identifies important strategic outcome-oriented goals and objectives against which the Department of Basic Education's medium-term results can be measured and evaluated by Parliament" (p. 9).	"Inadequate safety measures in schools" is identified as a "strategic risk." One of the ways this risk is to be mitigated is to provide "guidelines on LGBTI programme" in schools (p. 57).
Department of Justice and Constitutional Development Strategic Plan 2017-2020[269]	The document outlines medium- to long-term policies and programs to be implemented by the Department and related offices, as well as key performance indicators. The document serves as a monitoring and evaluation apparatus to which the justice sphere is held accountable.	One of the "strategic objectives" was to finalize the National Action Plan regarding the "management of crimes against the LGBT community" (p. 34). LGBTI persons are identified as at risk of exposure to "violence and related harm" (p. 23).
Department of Social Development Strategic Plan 2015-2020[270]	Outlines the strategic objectives and department aims to be achieved in the 5-year period (p. 9).	Gender-based violence (GBV) is viewed to as encompassing the "homosexual community" (p. 19). The Director-General acknowledged that "[t]he homosexual community is even more vulnerable because of discrimination and prejudices that continue to prevail" and states that the department will continue efforts to make the "Command Centre" network, which responds to violence, more accessible (p. 10).
Human Sciences Research Council Strategic Plan 2016/2017 - 2020/2021[271]	Outlines the "strategic way forward" for HSRC for the aforementioned period (p. 1).	The Human and Social Development (HSD) research sub-program includes an investigation on "marginal sexualities" (p. 23). HSD has also produced research outputs concerning homophobia, hate crimes, and gender-based violence which aligns with the National Development Plan on "building safer communities" (p. 60). HSRC conducts its own performance monitoring and evaluation.
National Action Plan to Combat Racism, Racial Discrimination, Xenophobia and Related Intolerance 2016 – 2021 (draft for public consultation)[272]	Guide and basis to develop public policy to combat and eliminate "racism, racial discrimination, xenophobia and related intolerance" in both private and public levels (p. 7).	The document mentioned several targets to achieve, namely "[r]eview and strengthen measures adopted with regard to promoting tolerance, in particular in the field of education and through awareness-raising campaigns, including in the media" and "[p]ass the Hate Crimes legislation." (p. 47)

NAME	PURPOSE	DESCRIPTION
National Development Plan 2030[273]	Outlines the plan to eliminate poverty and reduce inequality by 2030 (p. 24).	One of the goals of the Plan is to reduce gender-based violence, which is considered to also impact "transgendered communities, gays and lesbians severely" (p. 395). The Department of Planning, Monitoring and Evaluation (DPME), is responsible for tracking progress towards the goals identified in the Plan. In the latest report, dated March 2018, no mentions of SOGIE or LGBTI were found.[274]
National Intervention Strategy for Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Sector[275]	Strategy to address sex- and gender-based violence against LGBTI people.	A monitoring and evaluation program to track progress is one of the goals of the strategy, but there is no detail about implementation.
National Strategic Plan for HIV, TB and STIs 2017-2022[276]	Strategic plan to reduce the public health threat of HIV, TB, and STIs. This is the fourth iteration, done by South African National AIDS Council (SANAC).	MSM and transgender people are identified as one of the key populations for HIV and STIs. "Other" LGBTI populations are considered as one of the vulnerable populations for HIV and STIs (Goal 3, p. 23). Monitoring and evaluation is done via the Integrated bio-behavioral survey (IBBS) and population size estimation (p. 79). IBBS of men who have sex with men (MSM) was launched in 2014 as the South Africa Men's Health Monitoring Study (SAMHMS),[277] while IBBS of transgender women was launched in early 2018.[278] Both IBBS have not produced any reports that appear to be available to the public.
South African Human Rights Commission Revised Strategic Plan for the Fiscal Years 2015-2020[279]	"The revised strategic plan sets out the vision of the Commission and highlights future prospects that could affect its work, particularly issues regarding financial and human resources" (p. 2)	The plan recognizes that "inequality and unfair discrimination, including on the grounds of…gender… and sexual orientation, remain a challenge" (p. 20). However, there is no specific mention of SOGIE in the Commission's strategic goals (only referred broadly as "human rights.")
South African National LGBTI HIV Plan, 2017-2022[280]	National strategic plan for HIV targeted towards the LGBTI population, coordinated by the South African National AIDS Council (SANAC).	Various surveys, including population size estimations and integrated bio-behavioral surveys, will be conducted by SANAC as part of monitoring and evaluation efforts (p. 21). No further details were available, and none of the surveys appear available to the public.

Table 4.2 Governmental strategic plans that do not mention LGBTI populations

NAME	PURPOSE	DESCRIPTION
Commission for Gender Equality Five-year Strategic Plan 1 April 2013 - 31 March 2018[281]	"The strategic Plan is aimed at the consolidation of the strategic activities over the next 5 years in pursuit of the vision for a society free from gender oppression and inequality" (p. 5).	No mention of SOGIE topics (e.g. LBT women) in the document.
Department of Health Strategic Plan 2015-2020[282]	"The Department created this Strategic Plan to ensure that the nation's resources are working toward the same goals as articulated in the National Development Plan" (p. 5).	Cites the Medical Schemes Act, Employment Equity Act and Promotion of Equality and the Prevention of Unfair Discrimination Act as some of the legislations applicable to the Department (p. 12), all three of which contain some measure for protection based on SOGI. However, there is no other specific mention of SOGI or LGBTI people in the document.
Department of Labour Revised Strategic Plan 2015-2020[283]	The plan "reflects the strategic outcome-oriented goals and objectives which the Department of Labour will endeavour to achieve over the period 2015 to 2020" (p. xi).	Cites the Employment Equity Act as one of the legislations applicable to the Department (p. 3), which contain some measure for protection based on SOGI. However, there is no other specific mention of SOGI or LGBTI people in the document.
Statistics South Africa (SA) Strategic Plan 2015/2016 - 2019/2020[284]	"The objective of this 5-year Strategic Plan is to set a new direction for Stats SA in order to increase the supply and use of official statistics by enabling the state to conduct its business in a Transparent and Accountable manner and enabling the state to make Results-based decisions to drive Transformation" (p. 16).	No mention of LGBTI people, including same-sex households, in the document.

Table 4.3. National health guidance (select) and related white paper on the National Health Insurance system that mentions LGBTI populations

NAME	PURPOSE	DESCRIPTION
Standard Treatment Guidelines and Essential Medicines List for South Africa: Primary Health Care Level, 2018 Edition[285]	The document "comprises evidence-based standardised guidance for healthcare workers, in order to promote equitable access to safe, effective, and affordable health services" (p. ii)	Being LGBT is identified as one of the key risk factors for self-harm/suicide (p. 16.18). The document also identified that mental illness is more common amongst transgender people and people with "alternative sexual orientations" (p. 16.20).
National Adolescent & Youth Health Policy 2017[286]	To provide "guidance to departments and organisations working with the Department of Health on how to respond to the health needs of young people" (p. 1).	Sexual and reproductive health services were identified as "often [not meeting] the needs" of LGBTI youth and adolescents (p. 7).
Socio-Economic Impact Assessment System (SEIAS) Final Impact Assessment (Phase 2): White Paper on National Health Insurance[287]	"The White Paper on NHI is aimed at providing a policy framework for transforming health system in the manner in which health care services are financed and purchased, as well as how these services are provided. NHI is aimed at transforming the fragmented two-tiered health system, the public and private, into a unified health system as envisaged by the 1997 White Paper on the Transformation of the Health System in South Africa" (p. 2).	Consultations with stakeholders in civil society identified a "[c]oncern that NHI does not address adequately the LGBTI community" (p. 22).

Table 4.4. Nationally-representative surveys (select)

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
Census South Africa	Statistics South Africa	Yes	Limited	**Census 2011**[288] **P-02 RELATIONSHIP** **What is** (name's) **relationship to the head or acting head of the household?** 02 = Husband/Wife/Partner	First administered post-Apartheid in 1996, then in 2001 and 2011. Possible to identify same-sex households through the question on relation to household head. Census 2011 had 4,418,594 respondents who participated in the survey.[289]
Community Survey	Statistics South Africa	Yes	Limited	**CS 2016:**[290] **3.7.1.5 What is** (name's) **relationship to the head or acting head of the household?** 02 = Husband/Wife/Partner **CS 2007:**[291] **P-07 RELATIONSHIP** **What is** (the person)**'s relationship to the head or acting head of the household?** 02 Husband/Wife/Partner	Administered in 2007 and 2016. CS 2016: 3,328,867 persons[292] and 984,627 households[293] were sampled. CS 2007: 1,047,652 persons[294] and 246,618 households[295] were sampled. Possible to identify same-sex households through the question on relation to household head.

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
General Household Survey	Statistics South Africa	Yes	Limited	**GHS 2017:**[296] **1.1 What is ……'s relationship to the head of the household? (i.e. to the person in column 1)** 2 = Husband/wife/partner of person 01	Administered annually since 2002. Possible to identify same-sex households through the question on relation to household head. Uses the 2013 Master Sample, which included 3,324 primary sampling units with an expected sample of 33,000 dwelling units.[297] 2017 survey had 21,225 households[298] and 72,291 persons[299] sampled.
Living Conditions Survey	Statistics South Africa	Yes	Limited	**LCS 2014-2015:**[300] **1.6 What is ……'s relationship to the head or acting head of the household?** 02 = Husband/Wife/Partner of person 01	First and only was administered in 2014-2015/ Data collected from 27,527 households across the country.[301] Possible to identify same-sex households through the question on relation to household head.
Quarterly Labor Force Survey	Statistics South Africa	Yes	No	None	Administered quarterly since 2008. Used the 2013 Master Sample, which includes 3,324 primary sampling units with an expected sample of 33,000 dwelling units.[302] Latest iteration from Q2 2018 had 69,082 cases.[303]
South African National Health and Nutrition Examination Survey	Human Sciences Research Council	Yes	No	None	Administered in 2013. 10,000 households (VPs) were sampled, of which 8,168 were valid, and 6,306 agreed for interview. A total of 25,532 individuals (92.6%) completed the interview.[304]

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
South African National HIV Prevalence, Incidence, Behaviour and Communication Survey	Human Sciences Research Council	Yes	Yes	Questionnaire on sexual history included a measure for sexual orientation; however, we were unable to access the physical questionnaire to view the specific measure at the time this report was prepared.[305]	Administered in 2002, 2005, 2008, 2012, and the latest in 2017. 2017 survey had 11,743 valid households and 39,132 eligible individuals in which 82.2% and 93.6% of the sample provided valid responses, respectively.[306]
South African Social Attitudes Survey	Human Sciences Research Council	Yes	Yes	**Would you describe yourself as being a member of a group that is discriminated against in this country?** Yes No Do not know **On what grounds is your group discriminated against? PROBE: 'What other grounds'?** f. Gender g. Sexual orientation Note: point g is "sexual preference" on surveys prior to 2008.[307]	Sexual orientation and gender identity measures were first added in 2015. Although the sample is nationally representative, the total target sample size is only 3,500, with 3,115 responses in 2015[308] and 3,079 responses in 2016.[309]

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
South African Social Attitudes Survey (continued)				**SASAS 2015[310] and 2016**[311] **235. Which of the following options best describes how you think of yourself?** Heterosexual or straight Gay or lesbian Bisexual Other (Don't know) (Refused to answer) *Note: question 252 in 2016 iteration.* **236. What best describes how you present yourself in public in terms of how you dress and act?** Strongly, and exclusively masculine Mostly masculine A mixture of both masculine and feminine Mostly feminine Strongly, and exclusively feminine Neither masculine or feminine (Don't know) (Refused to answer) *Note: question 253 in 2016 iteration.*	
Survey of Activities of Young People	Statistics South Africa	Yes	No	None	Administered in 1999, 2010, and the latest in 2015. 2015 survey had 13,640 valid samples,[312] 2010 has 17,372.[313]

NAME	AGENCY RESPONSIBLE	ONGOING?	LGBTI QUESTIONS?	RELEVANT QUESTION(S)	NOTES
Victims of Crime Survey (VOCS)	Statistics South Africa	Yes	Yes	**VOCS 2015-2016**[314]**/2016-2017**[315] **Does the fear of crime prevent you from doing any of the following in your area?** 4 = Dressing in any way you want 5 = Expressing your sexual orientation	Administered annually since 2011. Possible to identify same-sex households through the question on relation to household head. VOCS 2015 includes for the first time a measure for sexual orientation and gender expression. Sample is nationally representative. Samples used in VOCS 2015 and 2016 were based on the 2013 Master Sample, which included 3,324 primary sampling units with an expected sample of 33,000 dwelling units.[316]
Youth Risk Behavior Survey	Human Sciences Research Council	Yes	No	None	Administered in 2002, 2008, and 2011. 2008 survey was conducted nationally in a randomly selected sample of 251 schools for a total of 10,270 learners. The survey notes that "[o]f the 10,270 respondents, the 173 who had not identified their gender as male or female were removed from the analysis" (p. 20) [317] We were unable to access the 2011 survey at the time this report was prepared.

Table 4.5. Government vital statistics systems[318]

NAME	AGENCY RESPONSIBLE	LGBTI INCLUSIVE?	NOTES
Recorded Live Births	Statistics South Africa	No	Sex is recorded as male or female and assumes different-sex parents.
Marriages and Divorces	Statistics South Africa	No	Uses "bridegroom" and "bride" (2008-present) or "husband" and "wife" (2006-2007) instead of gender neutral terms.
Mortality and Causes of Death	Statistics South Africa	No	Sex is recorded as male or female.

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Dignity, Equality and Freedom

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The Williams Institute is dedicated to conducting rigorous, independent research on sexual orientation and gender identity law and public policy. A think tank at UCLA Law, the Williams Institute produces high-quality research with real-world relevance and disseminates it to judges, legislators, policymakers, media and the public. These studies can be accessed at the Williams Institute website.

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RESEARCH THAT MATTERS

APPENDIX

Table A.1. Socio-demographic characteristics of adult respondents in the pooled South African Social Attitudes Surveys, by sexual orientation and gender expression group

	HETEROSEXUAL GC (N=4,725)	HETEROSEXUAL GNC (N=1,151)	LGB GC (N=53)	LGB GNC (N=48)	ALL (N=5,977)
ALL	78.9	19.3	1.2	0.6	100.00
Sex					
Female	46.3	72.5***	30.4***	79.3***	51.3
Male	53.7	27.5***	69.6***	20.7***	48.7
Race					
Black African	76.6	85.3***	79.6	53.3***	78.2
Colored	10.4	4.5***	7.9**	6.0*	9.2
Indian/Asian	2.8	2.8	3.0	7.4	2.8
White	10.2	7.5**	9.5	33.4***	9.8
Age					
16-24	25.1	28.4*	36.4	49.1***	26.0
25-34	25.0	28.5*	42.6***	17.0	25.8
35-44	18.9	18.2	8.4***	15.7	18.6
45-54	13.6	11.2*	6.6*	4.5***	13.0
55-64	9.6	7.4*	2.3***	7.3	9.1
65+	7.8	6.4	3.7	6.4	7.5
Marital status					
Married (spouse)	31.6	28.4	7.9***	23.9	30.9
Partner, live together	6.7	5.6	3.8	6.6	6.6
Partner, don't live together	11.3	11.4	37.2***	0.00	11.6
No partner or spouse	50.4	54.6*	51.2	69.6***	50.8
Area type					
Urban metro	44.5	36.5***	53.9	48.6	43.1
Urban non-metro	27.3	30.5*	34.4	33.5	28.0
Traditional Authority	25.0	30.2**	11.7***	17.9	25.8
Rural (farm)	3.2	2.9	0.00	0.0	3.1

Note: own calculations using a pooled SASAS 2015 and 2016 sample. All n are unweighted counts. Percentages are weighted and reflect column and row (shown in italics and parentheses) percentages and may not sum to 100 due to rounding. Gender conforming individuals are males and females that reported presenting themselves in public as strongly (exclusively) or mostly masculine and feminine, respectively. Gender nonconforming individuals include males that answered that they mostly or strongly present in public as feminine, females that answered that they mostly present in public as masculine, and males and females that answered that they present in public as neither feminine or masculine, or as a mixture of feminine and masculine. ***p-value < 0.01, **p-value < 0.05, *p-value < 0.10.

Table A.2. Socio-economic characteristics of adult respondents in the pooled South African Social Attitudes Surveys, by sexual orientation and gender expression group

	HETEROSEXUAL GC (N=4,725)	HETEROSEXUAL GNC (N=1,151)	LGB GC (N=99)	LGB GNC (N=54)	ALL (N=6,029)
ALL	78.4	19.2	1.7	0.7	100.00
Education					
Primary school or less	15.8	15.8	7.8	7.5	15.7
Some secondary school	35.9	39.6*	26.3	46.7	36.6
Complete secondary school	36.0	38.0	35.3	34.2	36.3
Undergraduate degree/ diploma	10.3	5.3***	20.4	6.8	9.4
Postgraduate	2.0	1.3	10.2	4.8	2.0
Participation in paid labor force					
Employed full time	32.8	24.2***	10.6***	19.8	30.9
Employed part time/ casual	12.6	8.8**	3.2***	33.7**	11.8
"Self-employed" (other)	1.0	0.8	1.1	9.4	1.0
Unemployed, looking for work	53.7	66.2***	85.1***	37.1	56.4
Not participating in paid labor force					
Unemployed, not looking for work	16.8	18.0	11.9	2.7***	16.9
Disabled/ sick	3.4	3.0	0.00	0.0	3.3
Caring for dependents	10.5	14.9**	48.8***	5.7	11.9
Student/ pensioner	66.4	60.9*	34.4**	91.7***	65.0
Occupation level					
Skilled	23.0	17.5*	1.6***	14.8	22.1
Semi-skilled	30.2	26.6	58.0	37.6	29.8
Low-/ unskilled	33.4	38.7	15.9	30.8	34.1
Unsure/ not reported	13.4	17.2	30.8	16.9	14.1
Class (self-reported)					
Lower	39.3	44.0**	22.2**	19.6**	40.3
Working	25.1	19.9**	20.8	24.6	24.3
Middle	29.0	31.0	45.1**	51.4**	30.0
Upper-middle/upper	4.3	3.8	11.9	4.4	5.4
Household income (monthly)					
< R1,000 (< US$75)	10.0	14.2***	7.6	21.3	10.9
R1,001–R1,500 (US$75–$110)	10.0	15.6***	9.3	3.5**	11.0
R1,501–R2,000 (US$110–$150)	13.3	16.8**	21.8	9.9	14.1
R2,001–R3,000 (US$150–$225)	17.5	14.9*	4.6***	12.2	16.8
R3,001–R5,000 (US$225–$375)	13.9	13.5	7.1	4.8**	13.7

	HETEROSEXUAL GC (N=4,725)	HETEROSEXUAL GNC (N=1,151)	LGB GC (N=99)	LGB GNC (N=54)	ALL (N=6,029)
ALL	78.4	19.2	1.7	0.7	100.00
R5,001–R10,000 (US$375–$750)	19.2	14.2***	20.8	17.8	18.3
R10,001–R20,000 (US$750–$1,500)	8.0	6.3	23.7***	14.6	7.9
R20,001–R30,000 (US$1,500–$2,250)	3.8	2.6	1.6	13.3*	3.6
R30,001+ (US$2,250+)	4.2	2.0***	3.6	2.7	3.8
Social assistance in household					
Child Support Grant	44.9	57.3***	34.5	30.1**	47.1
Old Age Grant	28.7	29.1	47.9**	13.2***	28.9
Disability Grant	4.5	6.9**	0.00	3.6	4.9
None	39.1	27.9***	42.6	52.3*	37.0
Headcount poverty rate					
Food poor	14.3	24.8***	10.1	19.8	16.3
Poor (lower bound line)	26.7	41.4***	26.7	26.9	30.0
Poor (upper bound line)	39.1	55.2***	28.4	29,5	42.3
Living Standards Measure (LSM)					
Low (LSM 1 -3)	4.1	5.9*	1.3	0.0	4.4
Medium (LSM 4 – 7)	55.3	61.1**	40.9*	37.8*	56.1
High (LSM 8 – 10)	40.6	33.1**	57.8**	62.2**	39.5

Note: Own calculations using SASAS 2015 and 2016. All n are unweighted counts. Percentages are weighted and reflect column and row (shown in italics and parentheses) percentages, and may not sum to 100 due to rounding. Gender conforming individuals are males and females that reported presenting themselves in public as strongly (exclusively) or mostly masculine and feminine, respectively. Gender nonconforming individuals include males that answered that they mostly or strongly present in public as feminine, females that answered that they mostly present in public as masculine, and males and females that answered that they present in public as neither feminine or masculine, or as a mixture of feminine and masculine. Missing values for household income have been imputed using sequential regression multiple imputation. ***p-value < 0.01, **p-value < 0.05, *p-value < 0.10.

A note on the interpretation of table A.3

The results of panel B of table A.3 below are based on multinomial logit models, with the base (reference) category reported as "*Base*". Specifically, we report relative risk ratios and marginal effects (assuming average values for all other controls in the model). The relative risk ratios (RR) are obtained by exponentiating the multinomial logit coefficients, with the standard interpretation being that for a unit change in the predictor variable (in this case, SOGE group), the relative risk ratio of outcome *m* relative to the base group is expected to change by a factor of the respective parameter estimate, all else held constant. For example, the RR for a 'switch' from heterosexual GC to heterosexual GNC for being employed relative to not participating in the paid labor force, given that the other variables in the model are held constant, is 0.73. This implies that the relative risk of a heterosexual GNC individual being employed relative to not participating in the paid labor force versus the relative risk for a heterosexual GC individual is 0.73 more likely; that is, heterosexual GNC persons are expected to more likely to not be participating in the paid labor force.

Table A.3. Estimates of differences in socio-economic outcomes across sexual orientation and gender expression (SOGE) groups using multivariate and multinomial logistic regression modeling

DEPENDENT VARIABLE	HETERO-SEXUAL GC	HETEROSEXUAL GNC		LGB GC		LGB GNC	
A: Multivariate Least Squares Regression		Coef.		Coef.		Coef.	
Years of education		-0.23**		0.53*		-0.50	
B: Multinomial Logistic Regression	ME	ME	*RR*	ME	*RR*	ME	*RR*
Participation							
Employed	0.29	0.23**	0.73***	0.14***	0.47**	0.26	0.61
Unemployed, looking for work	0.33	0.35	0.97	0.47**	1.39	0.20	0.42*
Other unpaid participation	0.38	0.41	Base	0.39	Base	0.54*	Base
Employment type							
Full-time employment	0.73	0.78	Base	0.58	Base	0.25***	Base
Part-time/ casual employment	0.26	0.20	0.74*	0.35	1.69	0.63**	7.11***
"Self-employment" (other)	0.02	0.02	1.19	0.08	6.51**	0.13	24.37***
Other unpaid participation							
Unemployed, not looking for work	0.18	0.20	1.14	0.08*	0.87	0.02***	0.11
Caring for dependents	0.03	0.04	1.19	0.52***	30.95***	0.05	1.31
Student/ pensioner	0.75	0.72	Base	0.38***	Base	0.88	Base
Skills level of occupation							
Skilled	0.21	0.15*	Base	0.10	Base	0.04***	Base
Semi-skilled	0.32	0.29	1.28	0.30	1.93	0.39	6.91**
Low-/ unskilled	0.34	0.38	1.64**	0.26	1.64	0.41	6.91*
Never had a job/ unreported	0.13	0.19	2.06***	0.34	5.41**	0.17	7.26*
Self-reported class							
Lower class	0.38	0.40	1.19	0.29	0.42**	0.30	2.51
Working class	0.27	0.22**	0.94	0.21	0.43*	0.24	2.80
Middle class	0.31	0.35	1.28	0.43*	0.75	0.45	4.57*
Upper-middle/ upper class	0.04	0.03	Base	0.07	Base	0.01*	Base

DEPENDENT VARIABLE	HETERO-SEXUAL GC	HETEROSEXUAL GNC		LGB GC		LGB GNC	
A: Multivariate Least Squares Regression		Coef.		Coef.		Coef.	
Years of education		-0.23**		0.53*		-0.50	
B: Multinomial Logistic Regression	ME	ME	*RR*	ME	*RR*	ME	*RR*
Household income (monthly)							
<R1,000 (<US$75)	0.09	0.11	Base	0.08	Base	0.23*	Base
R1,001–R1,500 (US$75–$110)	0.10	0.15**	1.22	0.08	1.21	0.04	0.56
R1,501–R2,000 (US$110–$150)	0.13	0.15	0.92	0.26**	2.09*	0.11	0.33*
R2,001–R3,000 (US$150–$225)	0.20	0.16	0.65***	0.07***	0.37*	0.25	0.49
R3,001–R5,000 (US$225–$375)	0.17	0.17	0.79*	0.09*	0.57	0.08	0.18**
R5,001–R10,000 (US$375–$750)	0.23	0.19	0.63***	0.26	1.14	0.19	0.31*
R10,001–R20,000 (US$750–$1,500)	0.06	0.05	0.63***	0.15**	2.50***	0.06	0.37
R20,001–R30,000 (US$1,500–$2,250)	0.02	0.01	0.66*	0.01	0.30	0.03	0.64
R30,001+ (US$2,250+)	0.00	0.00	0.41***	0.00	0.76	0.00	0.09**
LSM							
Low	0.00	0.00	1.66***	0.00	0.41	0.00	0.00
Medium	0.62	0.66	1.18*	0.49	0.57**	0.62	0.99
High	0.38	0.34	Base	0.51	Base	0.38	Base

Note: All regression models control for respondent sex, age, race, marital/ relationship status, and location of household. RR = relative risk ratio. ME = marginal effect (with all control variables set to their mean value); R.R. = relative risk ratio. ***p<0.01, **p<0.05, *p<0.10.

Table A.4. 2011 Census demographic and socioeconomic characteristics of legally and de facto married couples by race and couple type (same-sex couples [SSC] and different-sex couples [DSC]) (N = 954 418)

	BLACK (N = 638 984)						WHITE (N = 166 789)						COLORED (N = 105 841)					
	ALL		DSC (N = 631 475)		SSC (N = 7 509)		ALL		DSC (N = 164 604)		SSC (N = 2 185)		ALL		DSC (N = 105 017)		SSC (N = 824)	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Demographics and household composition																		
Sex																		
Male	319,452	50.3	315 983	50.4	3,469	46.7	83 949	50.5	82,660	50.3	1,289	59.2	52,080	49.4	51,628	49.3	452	55.7
Female	319,532	49.7	315 492	49.6	4,040	53.3	82 840	49.6	81,944	49.7	896	40.8	53,761	50.7	53,389	50.7	372	44.3
Age category																		
< 35	206,083	33.5	202,841	33.4	3,242	44.4	32,168	20.1	31,586	20.0	582	27.5	26,027	24.9	25,767	24.8	260	31.7
35 – 44	172,223	26.9	171,038	27.0	1,185	15.8	39,746	23.6	39,264	23.6	482	21.6	31,382	29.6	31,236	29.7	146	17.5
45 - 54	122,866	18.7	121,820	18.8	1,046	13.6	33,390	19.8	33,000	19.9	390	17.5	25,324	23.9	25,188	23.9	136	16.6
55 - 64	73,650	11.3	72,755	11.3	895	11.7	28,253	16.8	27,938	16.8	315	14.3	13,339	12.6	13,195	12.6	144	17.3
65 +	48,201	7.2	47,245	7.1	956	12.2	26,801	16.0	26,454	15.9	347	16.0	6,686	6.1	6,587	6.0	99	12.3
Language spoken																		
Home language																		
English	21,295	3.4	20,955	3.3	340	4.6	61,445	36.0	60,593	35.9	852	38.2	24,573	22.4	24,339	22.4	234	27.8
Afrikaans	12,648	2.0	12,522	2.1	126	1.7	100,625	61.2	99,366	61.3	1,259	58.3	78 380	74.8	77,816	74.9	564	68.9
isiXhosa	120,449	18.7	118,931	18.7	1,518	20.0	372	0.2	368	0.2	4	0.2	512	0.5	506	0.5	6	0.7
isiZulu	151,204	24.2	149,131	24.1	2,073	28.1	331	0.2	322	0.2	9	0.4	385	0.4	381	0.4	4	0.4
Sepedi	72,836	11.2	72,055	11.2	781	10.2	132	0.1	127	0.1	5	0.2	86	0.1	86	0.1	0	0.0
Sesotho	73,938	11.3	73,289	11.4	649	8.5	564	0.3	556	0.3	8	0.4	509	0.5	507	0.5	2	0.2
Setswana	68,049	10.8	67,358	10.8	691	9.2	603	0.4	595	0.4	8	0.5	787	0.8	782	0.8	5	0.9
Second language																		
English	195,187	30.7	192,902	30.7	2,285	30.7	91,339	55.5	90,180	55.5	1,159	53.6	53,707	50.0	53,294	50.0	413	49.8
Afrikaans	167,642	26.3	165,988	26.3	1,654	22.2	43,708	25.7	43,067	25.6	641	28.9	24,531	22.6	24,325	22.6	206	24.8
Other	276,155	43.0	272,585	43.0	3,570	47.2	31,742	18.9	31,357	18.9	385	17.6	27,603	27.4	27,398	27.4	205	25.5
Area type																		
Urban	416,405	64.8	411,976	64.9	4,429	58.9	155,807	91.3	153,729	91.3	2,078	93.5	97,158	88.3	96,379	88.2	779	92.6
Traditional	195,942	29.6	193,169	29.6	2,773	35.8	408	0.2	401	0.2	7	0.3	500	0.4	497	0.4	3	0.4
Farms	26,604	5.6	26,305	5.6	299	5.2	10,564	8.5	10,464	8.5	100	6.2	8,175	11.3	8,137	11.3	38	6.6

	BLACK (N = 638 984)						WHITE (N = 166 789)						COLORED (N = 105 841)					
	ALL		DSC (N = 631 475)		SSC (N = 7 509)		ALL		DSC (N = 164 604)		SSC (N = 2 185)		ALL		DSC (N = 105 017)		SSC (N = 824)	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Province																		
Western Cape	36,808	5.9	36,466	5.9	342	4.7	34,674	20.6	34,157	20.5	517	23.4	66,244	64.2	65,760	64.3	484	60.2
Eastern Cape	71,811	11.1	70,753	11.0	1,058	13.9	12,531	6.9	12,422	6.9	109	4.5	12,431	11.1	12,318	11.1	113	13.0
Northern Cape	8,926	1.5	8,844	1.5	82	1.1	3,142	1.9	3,108	1.9	34	1.6	9,852	8.9	9,791	8.9	61	7.2
Free State	46,498	7.0	46,082	7.0	416	5.3	9,737	5.3	9,627	5.3	110	4.5	1,966	1.7	1,954	1.7	12	1.3
Kwazulu-Natal	97,685	16.0	96,177	15.9	1,508	20.8	16,201	9.4	16,020	9.4	181	8.0	3,177	2.9	3,147	2.9	30	3.5
North West	52,705	8.4	52,181	8.5	524	7.0	8,086	5.7	7,987	5.7	99	5.1	1,347	1.4	1,340	1.4	7	1.2
Gauteng	196,084	30.3	194,021	30.4	2,063	27.1	68,360	40.2	67,369	40.2	991	44.9	10,027	8.9	9,915	8.9	112	13.1
Mpumalanga	55,923	8.8	55,299	8.8	624	8.4	8,994	6.9	8,896	6.9	98	5.8	534	0.7	534	0.7	0	0.0
Limpopo	72,511	11.1	71,627	11.1	884	11.5	5,054	3.1	5,008	3.1	46	2.1	255	0.2	254	0.2	1	0.1
Household size																		
2 or fewer people	120 140	19.2	118 015	19.0	2 125	28.8	68 164	40.9	66,730	40.6	1,434	66.0	14,244	13.6	14,010	13.5	234	28.2
3-4 people	254 829	40.1	252 691	40.2	2 138	28.2	76 716	46.0	76,088	46.2	628	28.5	46,896	44.3	46,594	44.4	302	36.7
5-8 people	225 835	34.9	223 313	34.8	2 522	33.3	21 578	13.0	21,458	13.1	120	5.4	40,495	38.2	40,275	38.3	220	26.8
9 people +	38 180	5.9	37 456	5.8	724	9.7	331	0.2	328	0.2	3	0.1	4,206	3.9	4,138	3.9	68	8.4
Number of children in household																		
None	176,967	27.9	173,916	27.7	3,051	41.0	102,718	61.4	100,851	61.1	1,867	85.5	31,485	29.7	31,082	29.5	403	48.5
1	174,225	27.3	172,739	27.4	1,486	19.6	29,704	17.8	29,503	18.0	201	9.1	29,386	27.8	29,205	27.8	181	22.3
2 - 3	226,711	35.3	224,693	35.4	2,018	26.7	33,126	20.0	33,018	20.2	108	4.9	38,616	36.5	38,422	36.6	194	23.4
4 +	61,081	9.5	60,127	9.4	954	12.8	1,241	0.8	1,232	0.8	9	0.4	6,354	6.0	6,308	6.0	46	5.8
Socioeconomic Status																		
Educational attainment																		
< Secondary	209,227	32.7	206,417	32.6	2,810	37.0	5,029	3.0	4,953	3.0	76	3.7	27,418	27.2	27,181	27.2	237	29.4
Some secondary	219,816	34.4	217,212	34.4	2,604	34.8	30,408	18.3	30,070	18.3	338	15.6	44,135	41.4	43,826	41.4	309	37.6
Complete secondary	147,011	23.1	145,430	23.1	1,581	21.4	65,510	39.4	64,692	39.5	818	37.5	24,589	22.6	24,405	22.6	184	21.9
Tertiary	62,930	9.8	62,416	9.9	514	6.8	65,842	39.3	64,889	39.2	953	43.1	9,699	8.9	9,605	8.8	94	11.1

	BLACK (N = 638 984)						WHITE (N = 166 789)						COLORED (N = 105 841)					
	ALL		DSC (N = 631 475)		SSC (N = 7 509)		ALL		DSC (N = 164 604)		SSC (N = 2 185)		ALL		DSC (N = 105 017)		SSC (N = 824)	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Employment status																		
Employed	285,580	45.3	283,110	45.4	2,470	33.6	108,278	65.0	106,813	65.0	1,465	66.9	58 377	55.9	57 998	55.9	379	46.3
Unemployed	103,889	16.2	102,773	16.3	1,116	15.0	4,299	2.6	4,239	2.6	60	2.9	10 043	9.2	9 966	9.2	77	9.3
Discouraged work seeker	32,723	5.1	32,380	5.1	343	4.6	861	0.5	853	0.5	8	0.4	2 742	2.5	2 725	2.6	17	2.0
Not economically active	167,518	26.0	165,052	25.9	2,466	32.7	26,453	15.9	26,151	15.9	302	13.7	27 870	26.2	27 625	26.1	245	29.4
Occupation sector																		
Formal sector	208,349	73.3	206,532	73.3	1,817	73.2	93,698	83.7	92,433	83.7	1,265	84.2	46,939	80.6	46,636	80.6	303	80.0
Informal sector	38,198	13.8	37,846	13.8	352	14.5	8,578	7.9	8,486	7.9	92	6.3	6,613	12.0	6,577	12.0	36	10.2
Private household	36,130	12.9	35,828	12.9	302	12.3	9,220	8.4	9,078	8.4	142	9.5	4,297	7.5	4,261	7.5	36	9.8
Occupation level																		
Skilled	60,981	20.9	60,510	20.9	471	18.4	50,801	43.9	50,010	43.9	791	51.3	15,794	26.5	15,665	26.4	129	33.1
Semi-skilled	122,695	42.4	121,633	42.4	1,062	41.8	45,640	40.0	45,081	40.0	559	36.8	25,517	42.9	25,368	42.9	149	38.6
Low-/unskilled	105,438	36.8	104,435	36.7	1,003	39.8	18,144	16.1	17,964	16.2	180	12.0	17,723	30.7	17,615	30.7	108	28.4
Household income (all sources: labor, social grants, investments etc).																		
<R4 800	24,681	3.9	24,373	3.9	308	4.1	406	0.2	402	0.2	4	0.2	1,891	1.6	1,876	1.6	15	1.6
R4 801 – R9 600	46,752	7.3	46,207	7.3	545	7.3	940	0.6	928	0.6	12	0.5	4,454	3.9	4,426	3.9	28	2.9
R9 601 – R19 200	84,607	13.4	83,440	13.4	1 167	15.6	2,342	1.4	2,301	1.4	41	1.7	10,844	9.9	10,729	9.9	115	12.2
R 19 201 – R38 400	160,785	25.2	158,934	25.2	1 851	24.7	7,003	4.1	6,885	4.1	118	5.2	23,444	21.6	23,243	21.6	201	21.3
R38 401 – R76 800	115,175	18.0	113,874	18.0	1 301	17.4	13,302	7.8	13,095	7.8	208	9.1	23,761	21.6	23,548	21.6	213	22.5
R76 801 – R153 600	68,140	10.6	67,473	10.6	667	8.9	26,624	15.6	26,304	15.6	320	13.5	19,295	17.0	19,145	17.0	150	15.5
R153 601 – R307 200	44,372	6.9	43,901	6.9	471	6.3	42,711	25.0	42,161	25.0	550	23.3	15,142	13.2	15,016	13.2	126	13.1
R307 201 – R614 400	27,891	4.4	27,698	4.4	193	2.6	44,791	26.0	44,175	26.0	616	25.9	9,226	8.0	9,157	8.0	69	7.1
R614 401 +	12,669	2.0	12,583	2.0	86	1.1	33,640	19.4	33,154	19.4	486	20.6	3,560	3.1	3,522	3.1	3.9	2.3

	BLACK (N = 638 984)						WHITE (N = 166 789)						COLORED (N = 105 841)					
	ALL		DSC (N = 631 475)		SSC (N = 7 509)		ALL		DSC (N = 164 604)		SSC (N = 2 185)		ALL		DSC (N = 105 017)		SSC (N = 824)	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Per capita poverty rates																		
Food poverty line	160,414	24.8	158,092	24.7	2,322	28.8	2,004	1.1	1,978	1.2	26	1.1	14,031	12.6	13,885	12.5	146	15.3
Lower bound poverty line	220,131	34.0	217,029	33.9	3,102	38.4	2,705	1.6	2,666	1.6	39	1.7	20,717	18.6	20,512	18.5	205	21.5
Upper bound poverty line	321,546	49.6	317,048	49.5	4,498	55.7	5,305	3.1	5,225	3.1	80	3.4	35,362	31.7	35,051	31.7	311	32.6
Dwelling tenure																		
Own	353,257	54.4	348,989	54.4	4,268	56.3	115,187	68.4	113,830	68.5	1,357	61.7	63,575	58.3	63,061	58.3	514	61.5
Rent	134,009	21.4	132,507	21.5	1,502	20.3	44,955	27.3	44,227	27.2	728	33.5	26,072	24.6	25,841	24.6	231	28.2
Rent-free	151,718	24.1	149,979	24.1	1,739	23.4	6,647	4.3	6,547	4.3	100	4.8	16,194	17.1	16,115	17.2	79	10.3

Note: All n are unweighted counts. Percentages are weighted and reflect column percentages within groups and may not sum to 100 due to rounding. Only households in which a single, married couple is identified are included in this table. DSC refers to different-sex couples, whilst SSC refers to same-sex couples.

Table A.5. Weighted regression results of income gaps across SOGE groups

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
DEPENDENT VARIABLE:	MONTHLY PERSONAL INCOME				MONTHLY PERSONAL INCOME			
Sample:	Full time employed	Part time/ casual employed	Full time employed	Part time/ casual employed	All employed			
Heterosexual GC	-	-	-	-	-	-	-	-
Heterosexual GC * female							-0.38*** (0.06)	-0.37*** (0.05)
Heterosexual GNC	-0.09 (0.09)	0.01 (0.15)	0.00 (0.08)	-0.04 (0.13)	-0.07 (0.08)	-0.01 (0.07)	-0.27** (0.13)	-0.16 (0.13)
Heterosexual GNC * female							0.32** (0.16)	0.22 (0.15)
LGB	-0.17 (0.25)	1.08*** (0.33)	0.17 (0.21)	0.53** (0.23)	0.42 (0.28)	0.16 (0.19)	-0.22 (0.20)	-0.17 (0.19)
LGB * female							1.44*** (0.37)	(0.31)
Part time/ casual/ other					-0.73*** (0.07)	-0.58*** (0.06)	-0.76*** (0.06)	-0.58*** (0.06)
Observations	1,335	460	1,335	460	1,795	1,795	1,795	1,795
LR χ^2	262.11***	174.50***	785.20***	592.63***	724.05***	1580.64***	744.18***	1606.73***
Additional controls:								
Level of education	x	x	x	x	x	x	x	x
Age	x	x	x	x	x	x	x	x
Occupation			x	x		x		x
Metro area			x	x		x		x
Race			x	x		x	x	x
Employment status					x	x	x	x

Note: GC = gender conforming, GNC = gender nonconforming, LF = labor force. Robust standard errors shown in parentheses.

ENDNOTES

[1] Central Intelligence Agency. (2018, September 5). *The World Factbook - South Africa*. Washington, DC: Central Intelligence Agency. Retrieved from: https://www.cia.gov/library/publications/the-world-factbook/geos/sf.html

[2] Central Intelligence Agency. (2018, September 5). *The World Factbook - South Africa*. Washington, DC: Central Intelligence Agency. Retrieved from: https://www.cia.gov/library/publications/the-world-factbook/geos/sf.html

[3] Statistics South Africa. (2012). *Census 2011: Census in Brief* (03-01-41). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/census/census_2011/census_products/Census_2011_Census_in_brief.pdf

[4] Central Intelligence Agency. (2018, September 5). *The World Factbook - South Africa*. Washington, DC: Central Intelligence Agency. Retrieved from: https://www.cia.gov/library/publications/the-world-factbook/geos/sf.html

[5] Author's own analysis of 2011 Census. Unemployment rates were calculated relative to the labor force.

[6] The Other Foundation. *Progressive Prudes.* Johannesburg: South Africa, 2016, 37, 53. < http://theotherfoundation.org/progressive-prudes/> . Accessed May 2018.

[7] OUT LGBT Well-being. (2016). *Hate Crimes Against Lesbian, Gay, Bisexual and Transgender (LGBT) People in South Africa, 2016*. Pretoria, South Africa: OUT LGBT Well-being. Retrieved from: http://www.out.org.za/index.php/library/reports?download=30:hate-crimes-against-lgbt-people-in-south-africa-2016

[8] Solar, O., & Irwin, A. (2007, April). A Conceptual Framework for Action on the Social Determinants of Health: Discussion paper for the Commission on Social Determinants of Health. Geneva, Switzerland: Policy Cluster, WHO. Retrieved from: https://www.who.int/social_determinants/resources/csdh_framework_action_05_07.pdf

[9] Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. Psychological Bulletin, 129(5), 674-697. doi:10.1037/0033-2909.129.5.674

[10] Hatzenbuehler, M. L. (2016). Structural stigma: Research evidence and implications for psychological science. American Psychologist, 71(8), 742-751. doi:10.1037/amp0000068

[11] Williams, D. R., & Mohammed, S. A. (2013). Racism and Health I: Pathways and Scientific Evidence. American Behavioral Scientist, 57(8), 1152-1173. doi:10.1177/0002764213487340. Retrieved from: https://doi.org/10.1177/0002764213487340

[12] Joe, S., Stein, D.J., Seedat, S., Herman, A., & Williams, D.R. Non-fatal suicidal behavior among South Africans: Results from the South Africa Stress and Health Study. *Social Psychiatry and Psychiatric Epidemiology*. 2008; 43(6):454-461.

[13] Wells, H. (2004). *Levels of Empowerment among Lesbian, Gay, Bisexual and Transgender [LGBT] People in Kwa-Zulu Natal, South Africa*. Pretoria, South Africa: Research initiative of the Joint Working Group conducted by OUT LGBT Well-being in collaboration with the UNISA Centre for Applied Psychology. Retrieved from: https://www.out.org.za/index.php/library/reports?download=11:kzn-gl-empowerment-report

[14] Wells, H., & Polders, L. (2004). *Levels of Empowerment among Lesbian, Gay, Bisexual and Transgender [LGBT] People in Gauteng, South Africa*. Pretoria, South Africa: Research initiative of the Joint Working Group conducted by OUT LGBT Well-being in collaboration with the UNISA Centre for Applied Psychology. Retrieved from: https://www.k4health.org/sites/default/files/Research_empowerment_of_lgbti_gauteng.pdf

[15] Sandfort, T.G., Baumann, L.R., Matebeni, Z., Reddy, V., & Southey-Swartz, I. "Forced sexual experiences as risk factor for self-reported HIV infection among southern African lesbian and bisexual women". *PLoS One*; (2013) 8(1): e53552.

[16] Poteat, T., et al. "HIV prevalence and behavioral and psychosocial factors among transgender women and cisgender men who have sex with men in 8 African countries: A cross-sectional analysis". 14(11) (2017).

[17] OUT LGBT Well-being. (2016). *Hate Crimes Against Lesbian, Gay, Bisexual and Transgender (LGBT) People in South Africa, 2016*. Pretoria, South Africa: OUT LGBT Well-being. Retrieved from: http://www.out.org.za/index.php/library/reports?download=30:hate-crimes-against-lgbt-people-in-south-africa-2016

[18] Sandfort, T.G., Baumann, L.R., Matebeni, Z., Reddy, V., & Southey-Swartz, I. "Forced sexual experiences as risk factor for self-reported HIV infection among southern African lesbian and bisexual women". *PLoS One*; (2013) 8(1): e53552.

[19] Kaminer, D., Grimsrud, A., Myer, L., Stein, D., & Williams, D. "Risk for posttraumatic stress disorder associated with different forms of interpersonal violence in South Africa". *Social Science & Medicine*; 67(10) (2008): 1589-1595.

[20] Ubuntu is a Bantu conceptualization of humanity summarizes as "I am because we are." It highlights care as a relational approach to

social relations and strikes a balance between individual and collective responsibility.

[21] The Centre for Applied Psychology of the University of South Africa, The Consortium for Refugees and Migrants in South Africa, Durban Lesbian and Gay Community Health Centre, Forum for the Empowerment of Women, Gay and Lesbian Memory in Action, Gay and Lesbian Network, . . . South African Jewish Board of Deputies. (2012). *Violent Hate Crime in South Africa*. South Africa: Universal Periodic Review. Retrieved from: https://www.upr-info.org/sites/default/files/document/south_africa/session_13_-_may_2012/js6uprzaf-s132012jointsubmission6e.pdf

[22] Adapted from Sibanda-Moyo, N., Khonje, E., & Brobbey, M. K. (2017). *Violence Against Women in South Africa: A Country in Crisis*. Johannesburg, South Africa: Centre for the Study of Violence and Reconciliation. Retrieved from: http://www.csvr.org.za/publications/latest-publications/2735-violence-against-women-in-sa

[23] The Centre for Applied Psychology of the University of South Africa, The Consortium for Refugees and Migrants in South Africa, Durban Lesbian and Gay Community Health Centre, Forum for the Empowerment of Women, Gay and Lesbian Memory in Action, Gay and Lesbian Network, . . . South African Jewish Board of Deputies. (2012). *Violent Hate Crime in South Africa*. South Africa: Universal Periodic Review. Retrieved from: https://www.upr-info.org/sites/default/files/document/south_africa/session_13_-_may_2012/js6uprzaf-s132012jointsubmission6e.pdf

[24] Collison, C. (2017, July 19). Home affairs minister rejects call to amend discriminatory same-sex law. Mail & Guardian. Retrieved from https://mg.co.za/article/2017-07-18-home-affairs-minister-rejects-call-to-amend-discriminatory-same-sex-law

[25] Presence, C. (2018, December 6). Parliament passes bill changing same-sex marriage law. Politics. Retrieved from https://www.iol.co.za/news/politics/parliament-passes-bill-changing-same-sex-marriage-law-18411102

[26] Müller, A. (2017). Scrambling for access: availability, accessibility, acceptability and quality of healthcare for lesbian, gay, bisexual and transgender people in South Africa. *BMC International Health and Human Rights*, *17*(1), 16. doi:10.1186/s12914-017-0124-4

[27] Department of Basic Education. (2016). Department of Basic Education Revised Five-Year Strategic Plan 2015/16-2019/20. Pretoria, South Africa: Department of Basic Education. Retrieved from: https://www.gov.za/sites/default/files/DBE_%20Strategic%20_Plan%20_March%202016_.pdf

[28] Department of Justice and Constitutional Development. (2017). Strategic Plan 2017-2020. Pretoria, South Africa: Department of Justice and Constitutional Development. Retrieved from: http://www.justice.gov.za/MTSF/mtsf.pdf

[29] Department of Social Development. (2015). Department of Social Development Strategic Plan 2015-2020 (RP97/2015). Pretoria, South Africa: Department of Social Development. Retrieved from: http://www.dsd.gov.za/index2.php?option=com_docman&task=doc_view&gid=598&Itemid=3

[30] Human Sciences Research Council. (2015). Human Sciences Research Council Strategic Plan 2016/2017 - 2020/2021. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://www.hsrc.ac.za/uploads/pageContent/7126/Strat%20Plan%2020162.pdf

[31] Department of Justice and Constitutional Development. (2016). National Action Plan to Combat Racism, Racial Discrimination, Xenophobia and Related Intolerance 2016 – 2021 (Draft for public consultation). Pretoria, South Africa: Department of Justice and Constitutional Development. Retrieved from: http://www.justice.gov.za/docs/other-docs/NAP/NAP-A4-PublicConsultationBook.pdf

[32] National Planning Commission. (2012). National Development Plan 2030: Our future - make it work. Pretoria, South Africa: National Planning Commission. Retrieved from: https://www.gov.za/issues/national-development-plan-2030

[33] Programme of Action. (2018, March 20). Programme of Action: Progress Report to March 20, 2018. Pretoria, South Africa: Department of Planning, Monitoring and Evaluation. Retrieved from: https://www.poa.gov.za/Documents/Programme%20of%20Action%20Progress%20report%20to%20March%202018.pdf

[34] Department of Justice and Constitutional Development. (2014). National Intervention Strategy for Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Sector. Pretoria, South Africa: Department of Justice and Constitutional Development. Retrieved from: https://www.gov.za/sites/default/files/2014_doj_national_intervention_strategy_lgbti_sector.pdf

[35] South African National AIDS Council. (2017). National Strategic Plan for HIV, TB and STIs 2017-2022. Pretoria, South Africa: South African National AIDS Council. Retrieved from: http://sanac.org.za/wp-content/uploads/2017/05/NSP_FullDocument_FINAL.pdf

[36] Phaswana-Mafuya, N., Chirinda, W., Maseko, B., & Yah, C. (2014, July 21). Overview of the South African Men's Health Monitoring Study (SAMHMS). Presented at the SAHARA/CDC Meeting, Port Elizabeth, South Africa. Retrieved from http://repository.hsrc.ac.za/bitstream/handle/20.500.11910/2269/8344.pdf

[37] Dlamini, N. (2018, January 11). SA HIV study on transgender women launched. South African National AIDS Council. Retrieved from http://sanac.org.za/2018/01/11/sa-hiv-study-on-transgender-women-launched/

[38] South African Human Rights Commission. (2018, January 31). South African Human Rights Commission Revised Strategic Plan for the Fiscal Years 2015-2020. Braamfontein, South Africa: South African Human Rights Commission. Retrieved from: https://www.sahrc.org.za/home/21/files/Final%20SAHRC%20Revised%20Strategic%20Plan%202015%20-%202020.pdf

[39] South African National AIDS Council. (2017). South African National LGBTI HIV Plan, 2017-2022. Pretoria, South Africa: South African National AIDS Council. Retrieved from: http://sanac.org.za/wp-content/uploads/2017/06/LGBTI-HIV-Plan-Final.pdf

[40] Commission for Gender Equality. (2014). Commission for Gender Equality Five-year Strategic Plan 1 April 2013 - 31 March 2018. Johannesburg, South Africa: Commission for Gender Equality. Retrieved from: http://www.cge.org.za/wp-content/uploads/2014/05/CGE-STRATEGIC-PLAN.pdf

[41] Department of Health. (2015). Department of Health Strategic Plan 2015-2020 (RP75). Pretoria, South Africa: Department of Health. Retrieved from: http://www.nationalplanningcycles.org/sites/default/files/planning_cycle_repository/south_africa/ndoh-strategicplan2015-2020.pdf

[42] Department of Labour. (2017). Department of Labour Revised Strategic Plan 2015-2020 (RP105/2017). Pretoria, South Africa: Department of Labour. Retrieved from: http://www.labour.gov.za/DOL/downloads/documents/annual-reports/department-of-labour-strategic-plan/2015-2020/strategicplan20152020_.pdf

[43] Statistics South Africa. (2015). Statistics South Africa Strategic Plan 2015/2016 – 2019/2020 (RP123/2015). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/strategy_plan/strategy_plan_2015.pdf

[44] The National Department of Health. (2018). Standard Treatment Guidelines and Essential Medicines List for South Africa: Primary Health Care Level, 2018 Edition. Pretoria, South Africa: The National Department of Health. Retrieved from: http://www.health.gov.za/index.php/component/phocadownload/category/285-phc?download=2896:primary-health-care-level-2018-v-1

[45] Department of Health. (2017). National Adolescent & Youth Health Policy 2017. Pretoria, South Africa: Department of Health. Retrieved from: http://www.health.gov.za/index.php/shortcodes/2015-03-29-10-42-47/2015-04-30-08-18-10/2015-04-30-08-25-54?download=2366:adolescent-and-youth-policy-4th-sept

[46] Department of Planning, Monitoring & Evaluation. (2017, May 11). Socio-Economic Impact Assessment System (SEIAS) Final Impact Assessment (Phase 2): White Paper on National Health Insurance. Pretoria, South Africa: Department of Planning, Monitoring & Evaluation. Retrieved from: http://www.health.gov.za/index.php/nhi?download=2263:impact-assessment-nhi-white-paper

[47] Statistics South Africa. (2010). Census 2011 Questionnaire A (Households). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/censuses/2011/Census%202011%20Questionnaire%20A.pdf

[48] Statistics South Africa. (2014). Census 2011 Persons (10% sample) Revised 2015 (person!10pct!sample!v3). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2Fperson%2110pct%21sample%21v3&mode=documentation&top=yes

[49] Statistics South Africa. (2016). Community Survey 2016 Metadata. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/CS2016/Community%20Survey%202016%20Metadata.pdf

[50] Statistics South Africa. (2007). Community Survey 2007 Metadata. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/CS2007/Community%20Survey%202007%20Metadata.pdf

[51] Statistics South Africa. (2016). Community Survey 2016 (Person Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2016Person&mode=documentation&top=yes

[52] Statistics South Africa. (2016). Community Survey 2016 (Household Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2016Household&mode=documentation&top=yes

[53] Statistics South Africa. (2008). Community Survey 2007 (Population Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2007%21persons&mode=documentation&top=yes

[54] Statistics South Africa. (2008). Community Survey 2007 (Household Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2007%21housing&mode=documentation&top=yes

[55] Statistics South Africa. (2017). General Household Survey 2017 Questionnaire. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/GHS/General%20Household%20Survey%20(Revised%202017)/2017/General%20Household%20Survey%202017%20questionnaire.pdf

[56] Statistics South Africa. (2018). General Household Survey 2017 Statistical Release (P0318). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/publications/P0318/P03182017.pdf

[57] Statistics South Africa. (2017). General Household Survey 2017 (House File). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FGHS-2017-HOUSE&mode=documentation&top=yes

[58] Statistics South Africa. (2017). General Household Survey 2017 (Person File). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FGHS-2017-PERSON&mode=documentation&top=yes

[59] Statistics South Africa. (2017). Living Conditions Survey 2014-2015 Questionnaire. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/LCS/2014_2015/Living%20Conditions%20Survey%20Questionnaire.pdf

[60] Statistics South Africa. (2017). Living Conditions Survey 2014-2015 Study Description. Pretoria, South Africa: Statistics South Africa. Retrieved from: https://www.datafirst.uct.ac.za/dataportal/index.php/catalog/608/study-description

[61] Statistics South Africa. (2018). Quarterly Labour Force Survey - Quarter 2: 2018 (P0211). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/publications/P0211/P02112ndQuarter2018.pdf

[62] Statistics South Africa. (2018). Quarterly Labour Force Survey (2nd Quarter 2018). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FQLFS-2018-02&mode=documentation&top=yes

[63] Shisana, O., Labadarios, D., T.Rehle, L.Simbayi, K.Zuma, A.Dhansay, … SANHANES-1 Team. (2014). The South African National Health and Nutrition Examination Survey, 2012: SANHANES-1: the health and nutritional status of the nation. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://www.hsrc.ac.za/uploads/pageNews/72/SANHANES-launch%20edition%20(online%20version).pdf

[64] Shisana, O., Ramlagan, S., Rehle, T., Mbelle, N., Simbayi, L., Zuma, K., . . . Wabiri, N. (2014). South African National HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town, South Africa: HSRC Press. Retrieved from: http://www.hsrc.ac.za/en/research-data/ktree-doc/15031

[65] Zuma, K., Moyo, S., Simbayi, L., Ramlagan, S., & Dietrich, C. (2018, July 24). South African National HIV Prevalence, Incidence, Behaviour and Communication Survey, 2017. Presented at the IAS Conference, Amsterdam, Netherlands. Retrieved from https://programme.aids2018.org/PAGMaterial/PPT/6053_0/Full%20SABSSM5%20Presentation%20at%20HSRC%20Satellite%20on%2024%20July%202018.pptx

[66] Human Sciences Research Council. (2007). South African Social Attitudes Survey Questionnaire 1: October 2007. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: https://www.datafirst.uct.ac.za/dataportal/index.php/catalog/487/download/6486

[67] Human Sciences Research Council. (2015). South African Social Attitudes Survey Questionnaire 1: October/November 2015. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://curation.hsrc.ac.za/index.php?module=pagesetter&func=viewpub&tid=128&pid=3139&projectid=SASAS&datasetno=42&collection=SASAS%202015&datasetid=SASAS%202015%20Q1

[68] Human Sciences Research Council. (2016). South African Social Attitudes Survey Questionnaire 1: January/March 2017. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://curation.hsrc.ac.za/index.php?module=pagesetter&func=viewpub&tid=128&pid=3394&projectid=SASAS&datasetno=46&collection=SASAS%202016&datasetid=SASAS%202016%20Q1

[69] Human Sciences Research Council. (2015). South African Social Attitudes Survey (SASAS) 2015: Questionnaire 1 - All provinces. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://dx.doi.org/doi:10.14749/1476436497

[70] Human Sciences Research Council. (2016). South African Social Attitudes Survey (SASAS) 2016: Questionnaire 1 - All provinces. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://dx.doi.org/doi:10.14749/1505213190

[71] Statistics South Africa. (2015). Survey of Activities of Young People (2015). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FSAYP-2015&mode=documentation&top=yes

[72] Statistics South Africa. (2011). Survey of Activities of Young People 2010 (re-weighted). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FSAYP-2010-reweighted&mode=documentation&top=yes

[73] Statistics South Africa. (2016). Victims of Crime Survey 2015/16 Questionnaire. Pretoria, South Africa: Statistics South Africa. Retrieved from:http://nesstar.statssa.gov.za:8282/metadata/surveys/VOCS/2015_2016/Victims%20of%20Crime%20Survey%20questionnaire.pdf

[74] Statistics South Africa. (2017). Victims of Crime Survey 2016/17 Questionnaire. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/VOCS/2016_2017/Victims%20of%20Crime%20Survey%20questionnaire.pdf

[75] Statistics South Africa. (2017). Victims of Crime Survey 2016/17 Statistical Release (P0341). Pretoria, South Africa: Statistics South Africa. Retrieved from: https://www.statssa.gov.za/publications/P0341/P03412016.pdf

[76] Reddy, S., James, S., Sewpaul, R., Koopman, F., Funani, N., Sifunda, S., . . . Omardien, R. (2010). Umthente Uhlaba Usamila - The 2nd South African National Youth Risk Behaviour Survey 2008. Cape Town, South Africa: South African Medical Research Council. Retrieved from: https://granthaskin.files.wordpress.com/2012/06/youth-risk-behaviour-survey-2008_final_report.pdf

[77]http://nesstar.statssa.gov.za:8282/webview/index.jsp?catalog=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfCatalog%2FISIbalo&submode=catalog&mode=documentation&top=yes

[78] The Constitution of the Republic of South Africa as adopted on May 8, 1996 and Amended on October 11, 1996 by the Constitutional Assembly. Republic of South Africa and the Department of Justice and Constitutional Development. *Bill of Rights.* < https://bit.ly/1T8z-vWP> accessed November 2018.

[79] The Constitution of the Republic of South Africa as adopted on May 8, 1996 and Amended on October 11, 1996 by the Constitutional Assembly. Republic of South Africa and the Department of Justice and Constitutional Development. *Bill of Rights.* < https://bit.ly/1T8z-vWP> accessed November 2018.

[80] See UN Sustainable Development Goals <https://www.un.org/sustainabledevelopment/development-agenda/> accessed May 2018.

[81] Pacetti, Emily G. "The Five Characteristics of an Inclusive Economy: Getting Beyond the Equity Growth Dichotomy." *The Rockefeller Foundation*, < *https://www.rockefellerfoundation.org/blog/five-characteristics-inclusive-economy-getting-beyond-equity-growth-dichotomy/*> Accessed may 2018.

[82] Badgett Lee, M.V., et al. " LGBT Exclusion in Indonesia and its Economic Effects." *The Williams Institute*, 2017 < https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Exclusion-in-Indonesia-and-Its-Economic-Effects-March-2017.pdf>

[83] Badgett Lee, M.V. "The Economic Cost of Stigma and the Exclusion of LGBT People: A Case Study of India." *The World Bank*, 2014, p. 48-9. < http://documents.worldbank.org/curated/en/527261468035379692/The-economic-cost-of-stigma-and-the-exclusion-of-LGBT-people-a-case-study-of-India>.

[84] *African Charter on Human and People's Rights* See article 28, 29(2,8-9). < http://www.humanrights.se/wp-content/uploads/2012/01/African-Charter-on-Human-and-Peoples-Rights.pdf>. Accessed May 2018.

[85] Ubuntu is a Bantu conceptualization of humanity summarizes as "I am because we are." It highlights care as a relational approach to social relations and strikes a balance between individual and collective responsibility. Flippin, William E. Jr. "Ubuntu: Applying African Philosophy in Building Community." *Huffpost* 5 February 2012, <https://bit.ly/2z5bIBK>, accessed November 2018.

[86] Sigamoney, V., & Marc Epprecht. "Meanings of Homosexuality, Same-Sex Sexuality, and Africanness in Two South African Townships: An Evidence-Based Approach for Rethinking Same-Sex Prejudice." *African Studies Review* Vol. 56 Issue 02 (September 2013): 83-107. Also see Lwando, Scott. "South African Needs to find a New Way to Talk About Being Gay." *The Guardian* 27 January 2015. < https://www.theguardian.com/world/2015/jan/27/-sp-south-africa-gay-lesbian-bisexual-lgbti-language-isixhosa> accessed May 2018.

[87] Solar, O., & Irwin, A. (2007, April). A Conceptual Framework for Action on the Social Determinants of Health: Discussion paper for the Commission on Social Determinants of Health. Geneva, Switzerland: Policy Cluster, WHO. Retrieved from: https://www.who.int/social_determinants/resources/csdh_framework_action_05_07.pdf

[88] Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. Psychological Bulletin, 129(5), 674-697. doi:10.1037/0033-2909.129.5.674

[89] Hatzenbuehler, M. L. (2016). Structural stigma: Research evidence and implications for psychological science. American Psychologist, 71(8), 742-751. doi:10.1037/amp0000068

[90] Williams, D. R., & Mohammed, S. A. (2013). Racism and Health I: Pathways and Scientific Evidence. American Behavioral Scientist, 57(8), 1152-1173. doi:10.1177/0002764213487340. Retrieved from: https://doi.org/10.1177/0002764213487340

[91] Epprecht, Marc. "Sex in the Archives: Same-Sex Relationships in Pre-Colonial Times." *Human Sciences Research Council*, < *http://www.hsrc.ac.za/en/review/hsrc-review-march-2013/sex-in-the-archives-same-sex-relationships-in-pre-colonial-times*> accessed August 2018. Also see Busangokwakhe, Dlamini. "Homosexuality in the African Context." *Agenda* No. 67 (2006): 128-136.

[92] Nkunzi Nkabinde & Ruth Morgan. "'This has happened since ancient times…it's something that you are born with': ancestral wives among same-sex sangomas in South Africa." *Agenda* vol. 20, no. 67 (2017): 9-19.

[93] Epprecht, Marc. "The 'Unsaying' of Indigenous Homosexualities in Zimbabwe: Mapping a Blindspot in an African Masculinity."*Journal of Southern African Studies* Vol. 24, issue 4 (1998): 631-651.

[94] Nkunzi Nkabinde & Ruth Morgan. "'This has happened since ancient times…it's something that you are born with': ancestral wives among same-sex sangomas in South Africa." *Agenda* vol. 20, no. 67 (2017): 9-19.

[95] Epprecht, Marc. "The 'Unsaying' of Indigenous Homosexualities in Zimbabwe: Mapping a Blindspot in an African Masculinity."*Journal of Southern African Studies* Vol. 24, issue 4 (1998): 631-651.

[96] Nkunzi Nkabinde & Ruth Morgan. "'This has happened since ancient times…it's something that you are born with': ancestral wives among same-sex sangomas in South Africa." *Agenda* vol. 20, no. 67 (2017): 9-19.

[97] Vincent, L. (2009). Polygamy in the Recognition of Customary Marriages Act. Agenda: Empowering Women for Gender Equity(82), 58-65. Retrieved from: http://www.jstor.org/stable/41321368

[98] Stolie, Cheryl. " 'He Uses My Body': Female Traditional Healers, Male Ancestors and Transgender in South Africa." *African Identities* Vol. 9, issue 2 (2011):149-162.

[99] Ru(de), H. "Historical Perspective on the Recognition of Same-Sex Unions in South Africa." *Fundamina* [online]. Vol. 19, no. 2 (2013): 221-250 at 224. < http://www.scielo.org.za/pdf/funda/v19n2/03.pdf> accessed June 2018.

[100] See < http://overcomingapartheid.msu.edu/people.php?id=65-251-7A> accessed November 2018.

[101] South African History Online. *Prohibition of Mixed Marriage Act no. 55 of 1949*. https://www.sahistory.org.za/archive/prohibition-of-mixed-marriages-act%2C-act-no-55-of-1949, accessed November 2018.

[102] http://www.justice.gov.za/legislation/acts/1957-023.pdf see Section 132, 4 (a), accessed June 2018

[103] South African History Online. "South African Defense Force (SADF)." < https://www.sahistory.org.za/article/south-african-defence-force-sadf> accessed November 2018.

[104] Kaplan, Robert. "Treatment of Homosexuality During Apartheid." *British Medical Journal* Vol. 329, no. 7480 (2014):1415-1416. < https://bit.ly/2JUiBcA> accessed June 2018.

[105] Kaplan, Robert. "Treatment of Homosexuality During Apartheid." *British Medical Journal* Vol. 329, no. 7480 (2014):1415-1416. < https://bit.ly/2JUiBcA> accessed June 2018.

[106] Kaplan, Robert. "The aversion Project Psychiatric abuses in South African Defense Force During the Apartheid Era." < https://bit.ly/2th3a > accessed June 2018.

[107] McGreal, Chris. "Gays Tell of Mutilation by Apartheid Army." *The Guardian* 28 July 2000 < https://www.theguardian.com/world/2000/jul/29/chrismcgreal>. Accessed June 2018.

[108] Schaap, Rudy. *State of Emergency: An Exploration of Attitudes Toward Homosexuality in the SADF, 1869-1994*. Master of Arts Thesis in History at the Stellenbosh University, 2011, 31. < http://scholar.sun.ac.za/handle/10019.1/6631> accessed June 2018.

[109] Heribert, Adam and Kogila Moodley. "A Brief History of South Africa and Apartheid." In *Seeking Mandela: Peacemaking Between Israelis and Palestinians.* Philadelphia: Temple University Press, 2005, 47-58.

[110] Bowleg, Lisa. "The Problem with the Phrase *Women and Minorities*: Intersectionality and Important Theoretical Framework for Public Health." *American Journal of Public* Health Vol. 102, no. 7 (2012): 1267-73. doi: 10.2105/AJPH.2012.300750.

[111] Ru(de), H. "Historical Perspective on the Recognition of Same-Sex Unions in South Africa." *Fundamina* [online]. Vol. 19, no. 2 (2013): 221-250 at 227. < http://www.scielo.org.za/pdf/funda/v19n2/03.pdf> accessed June 2018.

[112] Idem, at 228 also for further discussion about the process of including gays and lesbians as a natural group deserving protection against discrimination.

[113] Theron, Liesl. "Anti-Gay Violence and Discrimination: The Need for Legislation Against Anti-Gay Hate Crimes in the Sociopolitically Changing South Africa." *Acta Criminologica* Vol. 7, no. 3 (1994): 107 -114, at107-198.

[114] Theron, Liesl. "Anti-Gay Violence and Discrimination: The Need for Legislation Against Anti-Gay Hate Crimes in the Sociopolitically Changing South Africa." *Acta Criminologica* Vol. 7, no. 3 (1994): 107 -114, at107-198, at 112-113.

[115] The Republic of South Africa and the Department of Justice and Constitutional Development. Civil Union Act of 2006. Regulation Gazette Vol. 497, no. 29441 of 17 November 2006. <https://www.gov.za/sites/www.gov.za/files/a17-06_1.pdf> accessed November 2018.

[116] Ru (de), H. "Historical Perspective on the Recognition of Same-Sex Unions in South Africa." Fundamina [online]. Vol. 19, no. 2 (2013): 221-250. < http://www.scielo.org.za/pdf/funda/v19n2/03.pdf> accessed June 2018.

[117] Cameron, Edwin and Mark Gevisser. Editors. *Defiant Desire: Gay and Lesbian Lives in South Africa.* New York: Routledge, 1995.

[118] See *Prevention and Combating of Hate Crimes and Hate Speech Bill*, < http://www.justice.gov.za/legislation/hcbill/B9-2018-HateCrimes-Bill.pdf>, accessed June 2018.

[119] Kgomotso, Ramotsho. "Prevention and Combatting of Hate Crimes and Hate Speech Bill Approved." 1 May 2018 < https://bit.ly/2AXP-ZNy> accessed June 2018.

[120] Prevention and Combating of Hate Crimes and Hate Speech Bill. 2018. Retrieved from: http://www.justice.gov.za/legislation/hcbill/B9-2018-HateCrimesBill.pdf

[121] Oswin, Natalie. "Producing Homonormavitty in Neoliberal South Africa: Recognition, Redistribution, and the Equality Project." *Signs* Vol. 32, no. 3 (Spring 2007): 649-669.

[122] Theron, Liesl. Ibid., 108.

[123] The Republic of South Africa and the Department of Justice and Constitutional Development. *Bill of Rights.* <http://www.justice.gov.za/legislation/constitution/SAConstitution-web-eng-02.pdf> accessed November 2018.

[124] The Republic of South Africa Government Gazette. *Employment Equity Act.* 19 October 1998. Vol. 400, No. 19370. <http://www.labour.gov.za/DOL/downloads/legislation/acts/employment-equity/eegazette2015.pdf> accessed November 2018. Also see *Labor Relations Act*, World Intellectual Property Organization, < http://www.wipo.int/wipolex/en/text.jsp?file_id=309028> accessed November 2018.

[125] The Republic of South Africa Government Gazette. *Rental Housing Act.* 9 December 1999. Vol. 414, No. 20726. Chapter 3(4)1, page 5. < https://www.gov.za/documents/rental-housing-act> accessed November 2018.

[126] The Republic of South Africa Government Gazette. The Medical Scheme Act of 1998 no. 131 of 1998. < https://www.gov.za/sites/default/files/a131-98.pdf> accessed November 2018, pages 1 and 13.

[127] Southern Africa Litigation Centre. (2016). *Laws and Policies Affecting Transgender Persons in Southern Africa.* Johannesburg, South Africa: Southern Africa Litigation Centre. Retrieved from http://www.southernafricalitigationcentre.org/2016/09/24/laws-and-policies-affecting-transgender-persons-in-southern-africa/

[128] https://www.gov.za/sites/www.gov.za/files/a17-06_1.pdf

[129] http://www.mambaonline.com/images/Same%20sex%20civil%20marriage%20list%20of%20offices%20and%20names%20of%20off_1.pdf

[130] Badgett, M. V. L. (2010). The Economic Value of Marriage for Same-Sex Couples. *Drake Law Review, 58*, 1081-1115. Retrieved from: https://williamsinstitute.law.ucla.edu/wp-content/uploads/Badgett-EconomicValueSSCouples-Oct-2010.pdf

[131] The Republic of South Africa Government Gazette. *Alteration of Sex Description and Sex Status Act, no. 49, 2003.* Vol. 465, No. 26148, 15 March 2014. < https://www.gov.za/sites/default/files/a49-03.pdf> accessed November 2018, see § 2(1)

[132] Deyi, B., Kheswa, S., Theron, L., Mudarikwa, M., May, C., & Rubin, M. (2015). Briefing Paper - Alteration of Sex Description and Sex Status Act, No. 49 of 2003. Cape Town, South Africa: Legal Resources Centre and Gender Dynamix. Retrieved from https://genderdynamix.org.za/wp-content/uploads/LRC-act49-2015-web.pdf

[133] However, officials at the Department of Home Affairs sometimes apply the Act incorrectly and turn away applicants who have not had surgery. Applicants sometimes have to wait for over two years to get a response. Southern Africa Litigation Centre. (2016). *Laws and Policies Affecting Transgender Persons in Southern Africa*. Johannesburg, South Africa: Southern Africa Litigation Centre. Retrieved from http://www.southernafricalitigationcentre.org/2016/09/24/laws-and-policies-affecting-transgender-persons-in-southern-africa/

[134] The Yogyakarta Principles, < http://yogyakartaprinciples.org/principles-en/yp10/>, accessed November 2018.

[135] Credit to Winston Luhur at the Williams Institute for assembling the table with input from from Joshua Sehoole and Lihle Ngcobozi at Iranti, as well as to OutRight International and Southern Africa Litigation Centre for their prior publications on this matter.

[136] The Constitution of the Republic of South Africa, 1996. Retrieved from http://www.justice.gov.za/legislation/constitution/SAConstitution-web-eng.pdf

[137] Kruuse, H. (2014). Conscientious Objection to Performing Same-Sex Marriage in South Africa. International Journal Of Law, Policy And The Family, 28(2), 150-176. doi: 10.1093/lawfam/ebu001

[138] http://www.justice.gov.za/legislation/acts/2000-004.pdf

[139] Southern Africa Litigation Centre. (2016). Laws and Policies Affecting Transgender Persons in Southern Africa. Johannesburg, South Africa: Southern Africa Litigation Centre. Retrieved from http://www.southernafricalitigationcentre.org/2016/09/24/laws-and-policies-affecting-transgender-persons-in-southern-africa/

[140] http://www.iranti-org.co.za/content/Africa_by_country/South_Africa/2017/Nare-Mphela-transgender-limpopo.html

[141] The Constitution of the Republic of South Africa, 1996. Retrieved from http://www.justice.gov.za/legislation/constitution/SAConstitution-web-eng.pdf

[142] https://www.saps.gov.za/resource_centre/acts/downloads/sexual_offences/sexual_offences_act32_2007_eng.pdf

[143] http://www.saflii.org/za/cases/ZACC/1998/15.html

[144] Southern Africa Litigation Centre. (2016). *Laws and Policies Affecting Transgender Persons in Southern Africa.* Johannesburg, South Africa: Southern Africa Litigation Centre. Retrieved from http://www.southernafricalitigationcentre.org/2016/09/24/laws-and-policies-affecting-transgender-persons-in-southern-africa/

[145] https://www.gov.za/sites/www.gov.za/files/a17-06_1.pdf

[146] http://www.mambaonline.com/images/Same%20sex%20civil%20marriage%20list%20of%20offices%20and%20names%20of%20off_1.pdf

[147] http://www.justice.gov.za/legislation/acts/1998-116.pdf

[148] http://www.saflii.org.za/za/cases/ZACC/2005/19.html

[149] http://www.saflii.org/za/cases/ZACC/2005/2.html

[150] http://www.saflii.org/za/cases/ZACC/2002/20.html

[151] http://www.saflii.org/za/cases/ZACC/2003/3.html

[152] http://www.saflii.org/za/cases/ZACC/2006/20.html

[153] OutRight Action International. (2016). A Survey of Laws Impacting the Human Rights of LGBT Persons in Selected Southern African Countries. New York, NY: OutRight Action International. Retrieved from https://www.outrightinternational.org/content/survey-laws-impacting-human-rights-lgbt-person-selected-southern-african-countries

[154] http://www.justice.gov.za/legislation/acts/2005-038%20childrensact.pdf

[155] http://www.saflii.org/za/cases/ZACC/2002/20.html

[156] http://www.saflii.org/za/cases/ZACC/2002/20.html

[157] http://www.saflii.org/za/cases/ZACC/2003/3.html

[158] http://www.saflii.org/za/cases/ZACC/2003/3.html

[159] OutRight Action International. (2016). A Survey of Laws Impacting the Human Rights of LGBT Persons in Selected Southern African Countries. New York, NY: OutRight Action International. Retrieved from https://www.outrightinternational.org/content/survey-laws-impacting-human-rights-lgbt-person-selected-southern-african-countries

[160] http://www.labour.gov.za/DOL/legislation/acts/labour-relations/read-online/document.2008-05-29.3405704626

[161] http://www.labour.gov.za/DOL/legislation/acts/employment-equity/employment-equity-act

[162] http://www.saflii.org/za/cases/ZALC/2009/164.html

[163] http://www.saflii.org/za/cases/ZALC/2010/117.html

[164] The Constitution of the Republic of South Africa, 1996. Retrieved from http://www.justice.gov.za/legislation/constitution/SAConstitution-web-eng.pdf

[165] http://www1.chr.up.ac.za/undp/domestic/docs/legislation_52.pdf

[166] The Constitution of the Republic of South Africa, 1996. Retrieved from http://www.justice.gov.za/legislation/constitution/SAConstitution-web-eng.pdf

[167] https://www.westerncape.gov.za/Text/2005/10/a50-99.pdf

[168] http://www.justice.gov.za/legislation/acts/2000-004.pdf

[169] http://www.labour.gov.za/DOL/legislation/acts/employment-equity/employment-equity-act

[170] The Constitution of the Republic of South Africa, 1996. Retrieved from http://www.justice.gov.za/legislation/constitution/SAConstitution-web-eng.pdf

[171] https://www.gov.za/sites/www.gov.za/files/a130-98_0.pdf

[172] http://www.saflii.org/za/cases/ZACC/1999/17.html

[173] OutRight Action International. (2016). A Survey of Laws Impacting the Human Rights of LGBT Persons in Selected Southern African Countries. New York, NY: OutRight Action International. Retrieved from https://www.outrightinternational.org/content/survey-laws-impacting-human-rights-lgbt-person-selected-southern-african-countries

[174] http://www.dod.mil.za/documents/WhitePaperonDef/whitepaper%20on%20defence1996.pdf

[175] https://www.gov.za/documents/alteration-sex-description-and-sex-status-act

[176] Deyi, B., Kheswa, S., Theron, L., Mudarikwa, M., May, C., & Rubin, M. (2015). Briefing Paper - Alteration of Sex Description and Sex Status Act, No. 49 of 2003. Cape Town, South Africa: Legal Resources Centre and Gender Dynamix. Retrieved from https://genderdynamix.org.za/wp-content/uploads/LRC-act49-2015-web.pdf

[177] However, officials at the Department of Home Affairs sometimes apply the Act incorrectly and turn away applicants who have not had surgery. Applicants sometimes have to wait for over two years to get a response. Southern Africa Litigation Centre. (2016). *Laws and Policies Affecting Transgender Persons in Southern Africa*. Johannesburg, South Africa: Southern Africa Litigation Centre. Retrieved from http://www.southernafricalitigationcentre.org/2016/09/24/laws-and-policies-affecting-transgender-persons-in-southern-africa/

[178] http://www.saflii.org/za/cases/ZAWCHC/2017/90.pdf

[179] *Atkins v Datacentrix (Pty) Ltd* (2009) JS02/07 (ZALC) at para. 19 (S. Afr.), http://www.saflii.org/za/cases/ZALC/2009/164.pdf.

[180] Ehlers v. Bohler Uddeholm Africa (2010) JS296/09 (ZALC) at para. 35 (S. Afr.), http://www.saflii.org/za/cases/ZALC/2010/117.pdf.

[181] The Republic of South Africa and the Department of Justice and Constitutional Development. *Bill of Rights. Promotion of Equality and Prevention of Unfair Discrimination Act, Act No. 4 of 2000.* < http://www.justice.gov.za/legislation/acts/2000-004.pdf> accessed November 2018.

[182] *Lallu v Van Staden* Roodepoort Equality Court, Case No 3 of 2011; SAPA, *Transsexual Triumphs Over Abusive Neighbor*, IOL.COM (Oct. 13, 2012), https://www.iol.co.za/news/transsexual-triumphs-over-abusive-neighbour-1402341#.UHnPRFI_eJ8.

[183] Luiz DeBarros, *SA Finally Ends Gay Blood Donation Ban*, MAMBA (May 20, 2014), http://www.mambaonline.com/2014/05/20/sas-gay-blood-donation-ban-finally-ends/.

[184] *Id.*

[185] OUTRIGHT ACTION INTERNATIONAL, A SURVEY OF LAWS IMPACTING THE HUMAN RIGHTS OF LESBIAN, GAY, BISEXUAL AND TRANSGENDER PERSONS IN SELECTED SOUTHERN AFRICAN COUNTRIES 15 (2016),

https://www.outrightinternational.org/content/survey-laws-impacting-human-rights-lgbt-person-selected-southern-african-countries

[186] GOVERNMENT OF SOUTH AFRICA, WHITE PAPER ON NATIONAL DEFENCE FOR THE REPUBLIC OF SOUTH AFRICA: DEFENCE IN A DEMOCRACY (1996), http://www.dod.mil.za/documents/WhitePaperonDef/whitepaper%20on%20defence1996.pdf

[187] Mabuza, Ernest. "Marriage ruling is a Big Victory for Transgender Rights." *Times Live* 07 September 2017, < https://www.timeslive.co.za/news/south-africa/2017-09-07-big-victory-for-transgender-rights/> accessed August 2018. Also see Collison, Carl. "Court Ruling a Victory for Married Transgender People." *Mail & Guardian* 03 September 2017 < https://mg.co.za/article/2017-09-13-00-court-ruling-a-victory-for-married-transgender-people> accessed August 2018.

[188] The Republic of South Africa's Constitution. < https://www.gov.za/documents/constitution/constitution-republic-south-africa-1996-1> accessed November 2018.

[189] https://www.gov.za/documents/constitution/constitution-republic-south-africa-1996-1

[190] Flores, A.R. and Park, A. (2018). *Polarized Progress: Social Acceptance of LGBT People in 141 Countries, 1981 to 2014*. Los Angeles, CA: The Williams Institute.

[191] The survey had 37,653 respondents and ran from March 2 to May 1, 2013. 815 individuals were interviewed face-to face in various national languages suing a multi-stage cluster sample stratified by metropolitan area, province and urbanity. Margins of error ± 4.6 percentage points.

Pew Research Center. *The Global Divide on Homosexuality.* 4 June 2013, 17.

[192] Pew Research Center *Global Views on Morality.* <http://www.pewglobal.org/2014/04/15/global-morality/country/south-africa/ > accessed June 2018.

[193] The Other Foundation. *Progressive Prudes.* Johannesburg: South Africa, 2016, 37, 53. < http://theotherfoundation.org/progressive-prudes/> . Accessed May 2018.

[194] Ipsos Public Affairs and the Williams Institute. *Global Attitudes Toward Transgender People*, 2018

<https://www.ipsos.com/sites/default/files/ct/news/documents/2018-01/ipsos_report-transgender_global_data-2018.pdf >. Accessed June 2018<https://www.ipsos.com/sites/default/files/ct/news/documents/2018-01/ipsos_report-transgender_global_data-2018.pdf >. Accessed June 2018

[195] Ipsos Public Affairs and the Williams Institute. *Global Attitudes Toward Transgender People*, 2018

<https://www.ipsos.com/sites/default/files/ct/news/documents/2018-01/ipsos_report-transgender_global_data-2018.pdf >. Accessed June 2018<https://www.ipsos.com/sites/default/files/ct/news/documents/2018-01/ipsos_report-transgender_global_data-2018.pdf >. Accessed June 2018

[196] Festy, P. "Numbering Same-Sex Couples in Censuses and Population Registers". *Demographic Research* Vol. 17, (2007): 339-368.

[197] This study was limited by the chosen sampling methodology; specifically, the survey was conducted online via smartphones, tablets and or laptops, devices which many South Africans have limited or no access to, and only conducted in English. Furthermore, the OUT report sample excludes heterosexual individuals self-classifying as transgender, genderqueer, or other gender-variant.

[198] Furthermore, the collected samples were not stratified on sexual orientation and gender identity; therefore, it is possible that the data does not fully capture the diversity of this group.

[199] Adults are defined as individuals of working age (16 years and older), whilst children are defined as individuals 15 years or younger.

[200] In instances where questions on sexuality have been phrased in terms of 'attraction' or 'behavior as opposed to 'identity', the response rates have tended be significantly higher,

[201] Gender conforming adults are males self-describing as dressing and acting masculine in public and females self-describing as dressing and acting feminine in public

[202] And assuming that individuals that did not respond to the questions on sexual orientation and gender identity are a random sub-sample.

[203] Statistics South Africa. "Mid-year population estimates". (2017). Available online at https://www.statssa.gov.za/publications/P0302/P03022017.pdf

[204] In the case of the Community Survey, with the absence of spouse person identifiers, we utilized each person's relationship to the household head to derive suitable couple matches. Approximately 98 percent of married (and co-residing) couples were identified as a match between the household head and their spouse/partner, with the remaining 2 percent represented by other partnerships; e.g. son/daughter and son-/daughter-in-law, parent and parent-in-law. Similarly, 98 percent of married couples in the 2011 Census were observed to be household heads and their respective spouse/partner. We therefore feel quite confident in our Community Survey matches.

[205] Instances were found in the 2011 Census where two married women and one married man reported to reside in the same household, with the man and one of the women reported to both be married to the second woman. It is our opinion that many of these households may represent a miscoding of the underlying marital matches. Therefore, all individual and households representing more complex relationship constellations were excluded.

[206] See for example: Foucalt, M. "*History of Sexuality*". Vol. 1. (1978). New York: Pantheon; Gagnon, J. & Simon, W. "*Sexual conduct: The social sources of human sexuality*". (1973) Chicago, Illinois: University of Chicago Press.

[207] The National Survey of Family Growth, for example, found that revisions to the categories of sexual orientation to include "straight" and "homosexual" saw non-response rates drop from 6.2% to 1.6% (Kim, H., Fredriksen-Goldsen, K.I. "Nonresponse to a Question on Self-Identified Sexual Orientation in a Public Health Survey and Its Relationship to Race and Ethnicity". *American Journal of Public Health*; 103(1) (2013): 67-69).

[208] Zea, M.C., Reisen, C.A. & Diaz, R.M. "Methodological Issues in Research on Sexual Behavior with Latino Gay and Bisexual Men". *Ameri-*

can Journal of Community Psychology; 31(4) (2003): 281-291.

[209] Closer inspection of the "other" category describing employment activities suggests that these individuals are mostly employed in informal sector self-employment; for example, construction/ building and services (e.g. tuck shop, Zulu beer).

[210] We take note that the unemployment rates reflected here are significantly higher than the official rates. The SASAS questionnaire did not capture labor force participation in the same manner as the official labor force survey; specifically, unemployed labor was not asked whether or not they actively searched for work during the last 7 days. Therefore, the unemployed reflected here are more likely to be representative of the group that would be defined as the "broadly" unemployed.

[211] It needs to be noted, however, that 27% of respondents did not report their household income, either due to uncertainty or unwillingness. Sequential regression multiple imputation was therefore employed to impute missing and unreported income data using an approach similar to that of Yu (2012).

[212] Based on household income bracket midpoints; unreported household income data was imputed using interval regression and observable household characteristics.

[213] Unfortunately, the OUT LGBT Well-Being and Love Not Hate Campaign study did not enquire about marital or relationship status of respondents, so we do not have another estimate to compare this proportion to.

[214] This is not altogether surprising given that the questions leading up to this question were about race relations in South Africa, and therefore respondents may have been primed to think about race over gender and sexual orientation.

[215] Wells, H. & Polders, L. "Levels of Empowerment among Lesbian, Gay, Bisexual and Transgender [LGBT] People in Gauteng, South Africa". Research initiative of the Joint Working Group conducted by OUT LGBT Well-being in collaboration with the UNISA Centre for Applied Psychology, (2004).

[216] OUT LGBT Well-being. (2016). *Hate Crimes Against Lesbian, Gay, Bisexual and Transgender (LGBT) People in South Africa, 2016*. Pretoria, South Africa: OUT LGBT Well-being. Retrieved from: http://www.out.org.za/index.php/library/reports?download=30:hate-crimes-against-lgbt-people-in-south-africa-2016

[217] OUT LGBT Well-being. (2016). *Hate Crimes Against Lesbian, Gay, Bisexual and Transgender (LGBT) People in South Africa, 2016*. Pretoria, South Africa: OUT LGBT Well-being. Retrieved from: http://www.out.org.za/index.php/library/reports?download=30:hate-crimes-against-lgbt-people-in-south-africa-2016

[218] Sandfort, T.G., Baumann, L.R., Matebeni, Z., Reddy, V., & Southey-Swartz, I. "Forced sexual experiences as risk factor for self-reported HIV infection among southern African lesbian and bisexual women". *PLoS One*; (2013) 8(1): e53552.

[219] Kaminer, D., Grimsrud, A., Myer, L., Stein, D., & Williams, D. "Risk for posttraumatic stress disorder associated with different forms of interpersonal violence in South Africa". *Social Science & Medicine*; 67(10) (2008): 1589-1595.

[220] Spaull, Nicholas, and Janeli Kotze. "Starting behind and staying behind in South Africa: The case of insurmountable learning deficits in mathematics." *International Journal of Educational Development*; 41 (2015): 13-24.

[221] Wells, H. & Polders, L. "Levels of Empowerment among Lesbian, Gay, Bisexual and Transgender [LGBT] People in Gauteng, South Africa". Research initiative of the Joint Working Group conducted by OUT LGBT Well-being in collaboration with the UNISA Centre for Applied Psychology, (2004).

[222] Nell, M. & Shapiro, J. "Out of the Box: Queer Youth in South Africa Today". Case study commissioned by The Atlantic Philanthropies, (2011).

[223] See, for example, Cochran, Mays & Sullivan, 2003; de Graaf at al., 2006; King et al., 2008; Mays & Cochran, 2001; McCabe, Bostwick, Hughes, West, & Boyd, 2010.

[224] Mathy R. M. Suicidality and sexual orientation in five continents: Asia, Australia, Europe, North America, and South America. *International Journal of Sexuality and Gender Studies*. 7(23) (2002):215–225.

[225] Joe, S., Stein, D.J., Seedat, S., Herman, A., & Williams, D.R. Non-fatal suicidal behavior among South Africans: Results from the South Africa Stress and Health Study. *Social Psychiatry and Psychiatric Epidemiology*. 2008; 43(6):454-461.

[226] Nock, Matthew K., et al. "Cross-national prevalence and risk factors for suicidal ideation, plans and attempts." *The British Journal of Psychiatry*, 192(2) (2008): 98-105.

[227] Theuninck, A.C. "The Traumatic Impact of Minority Stressors on Males Self-Identified as Homosexual or Bisexual". Master's Dissertation, University of the Witwatersrand, Johannesburg, (2000).

[228] Wells, H. (2004). *Levels of Empowerment among Lesbian, Gay, Bisexual and Transgender [LGBT] People in Kwa-Zulu Natal, South Africa*.

Pretoria, South Africa: Research initiative of the Joint Working Group conducted by OUT LGBT Well-being in collaboration with the UNISA Centre for Applied Psychology. Retrieved from: https://www.out.org.za/index.php/library/reports?download=11:kzn-gl-empowerment-report

[229] Wells, H., & Polders, L. (2004). *Levels of Empowerment among Lesbian, Gay, Bisexual and Transgender [LGBT] People in Gauteng, South Africa*. Pretoria, South Africa: Research initiative of the Joint Working Group conducted by OUT LGBT Well-being in collaboration with the UNISA Centre for Applied Psychology. Retrieved from: https://www.k4health.org/sites/default/files/Research_empowerment_of_lgbti_gauteng.pdf

[230] Olley, B.O., Seedat, S., Nei, D.G., et al. "Predictors of major depression in recently diagnosed patients with HIV/AIDS in South Africa". *AIDS Patient Car STDs*;18 (2004):481-487; Govender, R.D., & Schlebusch, L. "Hopelessness, depression and suicidal ideation in HIV-positive persons". *South African Journal of Pyschiatry*;18(1) (2012):17-21; Schlebusch, L., & Govender, R.D. "Age, gender and suicidal ideation following voluntary HIV counseling and testing". *International Journal of Environmental Research and Public Health*; 9(2012):521-530.

[231] Catalan, J., Harding, R., Sibley, E., et al. "HIV infection and mental health: Suicidal behaviour – systematic review". *Psychology, Health and Medicine*;16(5) (2011):588-611

[232] Sandfort, T.G., Baumann, L.R., Matebeni, Z., Reddy, V., & Southey-Swartz, I. "Forced sexual experiences as risk factor for self-reported HIV infection among southern African lesbian and bisexual women". *PLoS One*; (2013) 8(1): e53552.

[233] Duby, Z., Nkosi, B., Scheibe, A., Brown, B., & Bekker, L. G. "Southern African Journal of HIV Medicine". 19(1) (2018)

[234] Poteat, T., et al. "HIV prevalence and behavioral and psychosocial factors among transgender women and cisgender men who have sex with men in 8 African countries: A cross-sectional analysis". 14(11) (2017).

[235] GenderDynamix. "*Sexual and Reproductive Health for Transgender and Gender Non-Conforming People: Guidelines for Health Care Workers in Primary Care*". (2013)

[236] Drydakis, N. "*Sexual orientation and labor market outcomes*". IZA World of Labor. (2014): 111.

[237] Fric, K. "Access to the labor market for gays and lesbians: Research review". *Journal of Gay & Lesbian Social Services*; 29(4) (2017): 319-361.

[238] England, P. & Farkas, G. "*Households, employment, and gender: A social, economics, and demographic view*"'. New York, NY: Aldine de Gruyter. (1986).

[239] Badgett, M.V.L. & Frank, J. "*Sexual Orientation Discrimination: An International Perspective*". New York: Rouledge. (2007)

[240]Prince, J.P. "Influences on the career development of gay men". *The Career Development Quarterly*; 44(2) (1995): 168-177.

[241] Drydakis, N. "Bullying at school and labour market outcomes". *International Journal of Manpower*; 35(8) (2014): 1185-1211.

[242] Becker, G.S. "*The economics of discrimination*". (1971) (2nd ed.). Chicago: The University of Chicago Press.

[243] Arrow, K.J. "The theory of discrimination". In O. Ashenfelter & A. Ress (Eds.), *Discrimination in labor markets* (pp.3-33) (1973). Princeton: Princeton University Press.

[244] Crandall, C.S. & Eshleman, A. "A justification-suppression model of the expression and experience of prejudice". *Psychological Bulletin*; 44(2) (2003): 414.

[245] Similar to Yu (2012), SRMI was run five times on the income category, and included the variables race, gender, area of location, age, level of educational attainment, broad occupation category, employment status, household size, and number of children in the household. The average of the five imputed personal and household income category values were then taken as the final imputed income category.

[246] Specifically, an inverse hyperbolic sine transformation, , was applied.

[247] Note that we have grouped LGB individuals into one category in order to improve precision of the estimates; the size of the income gap estimated for the LGB GC and LGB GNC individuals (within male and female groups) are not statistically significantly different from each other, but the small sample size of wage employed LGB GNC persons does result in large standard errors around the estimate.

[248] Personal incomes (also expressed in brackets) are similarly imputed using sequential regression multiple imputation, and the same controls are included in the interval regressions.

[249] Controls include education, age, race, area of location and relationship status. Interactions between respondent sex and SOGE category were included, but did not return statistically significant results.

[250] Ahmed, A.M., Andersson, L., & Hammarstedt, M. "Are gay men and lesbians discriminated against in the hiring process?" *Southern*

Economic Journal; 79(3) (2013): 565-585.

[251] This is equivalent to the median wage of R4,333 earned by males employed full-time in the formal sector in 2015/2016 according to the Quarterly Labour Force Survey.

[252] Note that this proportion is smaller than what was identified for the whole adult population, given the lower rates of paid labor force participation and employment amongst LGBT and gender nonconforming heterosexual individuals.

[253] Badgett Lee, M.V. "The Economic Cost of Stigma and the Exclusion of LGBT People: A Case Study of India." *The World Bank*, 2014, 7.

[254] South African Police Service. "*Crime situation in South Africa: 1 April 2015 - 31 March 2016*". (2016).

[255] Cichello, Paul and Michael Rogan. "Informal sector employment and poverty reduction in South Africa: Identifying the Contribution of 'Informal' Sources of income on Aggregate Poverty Measures." *REDI3x3* Working Paper 34, March 2017, 3.

[256] Verick, Sher. "The Impact of Globalization on the Informal Sector in Africa." <http://conference.iza.org/conference_files/worldb2006/verick_s872.pdf> accessed August 2018.

[257] Cichello, Paul and Michael Rogan. 2017, citing Statistics South Africa 2015.

[258] Cichello, Paul and Michael Rogan. 2017, citing Statistics South Africa 2015.

[259] Motala, Shirin. "Organizing in the Informal Economy: A Case Study of Street Trading in South Africa." SEED Working Paper No. 36. Geneva: International Labor Office, 2002.

[260] Perry, Guillermo E. et al., *Informality Exit and Exclusion*. Washington D.C.: World Bank, 2007, 1.

[261] Ubuntu is a Bantu conceptualization of humanity summarizes as "I am because we are." It highlights care as a relational approach to social relations and strikes a balance between individual and collective responsibility.

[262] The Centre for Applied Psychology of the University of South Africa, The Consortium for Refugees and Migrants in South Africa, Durban Lesbian and Gay Community Health Centre, Forum for the Empowerment of Women, Gay and Lesbian Memory in Action, Gay and Lesbian Network, . . . South African Jewish Board of Deputies. (2012). *Violent Hate Crime in South Africa*. South Africa: Universal Periodic Review. Retrieved from: https://www.upr-info.org/sites/default/files/document/south_africa/session_13_-_may_2012/js6uprzaf-s132012jointsubmission6e.pdf

[263] Adapted from Sibanda-Moyo, N., Khonje, E., & Brobbey, M. K. (2017). *Violence Against Women in South Africa: A Country in Crisis*. Johannesburg, South Africa: Centre for the Study of Violence and Reconciliation. Retrieved from: http://www.csvr.org.za/publications/latest-publications/2735-violence-against-women-in-sa

[264] The Centre for Applied Psychology of the University of South Africa, The Consortium for Refugees and Migrants in South Africa, Durban Lesbian and Gay Community Health Centre, Forum for the Empowerment of Women, Gay and Lesbian Memory in Action, Gay and Lesbian Network, . . . South African Jewish Board of Deputies. (2012). *Violent Hate Crime in South Africa*. South Africa: Universal Periodic Review. Retrieved from: https://www.upr-info.org/sites/default/files/document/south_africa/session_13_-_may_2012/js6uprzaf-s132012jointsubmission6e.pdf

[265] Collison, C. (2017, July 19). Home affairs minister rejects call to amend discriminatory same-sex law. Mail & Guardian. Retrieved from https://mg.co.za/article/2017-07-18-home-affairs-minister-rejects-call-to-amend-discriminatory-same-sex-law

[266] Presence, C. (2018, December 6). Parliament passes bill changing same-sex marriage law. Politics. Retrieved from https://www.iol.co.za/news/politics/parliament-passes-bill-changing-same-sex-marriage-law-18411102

[267] Müller, A. (2017). Scrambling for access: availability, accessibility, acceptability and quality of healthcare for lesbian, gay, bisexual and transgender people in South Africa. *BMC International Health and Human Rights*, *17*(1), 16. doi:10.1186/s12914-017-0124-4

[268] Department of Basic Education. (2016). *Department of Basic Education Revised Five-Year Strategic Plan 2015/16-2019/20*. Pretoria, South Africa: Department of Basic Education. Retrieved from: https://www.gov.za/sites/default/files/DBE_%20Strategic%20_Plan%20_March%202016_.pdf

[269] Department of Justice and Constitutional Development. (2017). *Strategic Plan 2017-2020*. Pretoria, South Africa: Department of Justice and Constitutional Development. Retrieved from: http://www.justice.gov.za/MTSF/mtsf.pdf

[270] Department of Social Development. (2015). *Department of Social Development Strategic Plan 2015-2020* (RP97/2015). Pretoria, South Africa: Department of Social Development. Retrieved from: http://www.dsd.gov.za/index2.php?option=com_docman&task=doc_view&gid=598&Itemid=3

[271] Human Sciences Research Council. (2015). *Human Sciences Research Council Strategic Plan 2016/2017 - 2020/2021*. Pretoria, South Af-

rica: Human Sciences Research Council. Retrieved from: http://www.hsrc.ac.za/uploads/pageContent/7126/Strat%20Plan%2020162.pdf

[272] Department of Justice and Constitutional Development. (2016). *National Action Plan to Combat Racism, Racial Discrimination, Xenophobia and Related Intolerance 2016 – 2021* (Draft for public consultation). Pretoria, South Africa: Department of Justice and Constitutional Development. Retrieved from: http://www.justice.gov.za/docs/other-docs/NAP/NAP-A4-PublicConsultationBook.pdf

[273] National Planning Commission. (2012). *National Development Plan 2030: Our future - make it work*. Pretoria, South Africa: National Planning Commission. Retrieved from: https://www.gov.za/issues/national-development-plan-2030

[274] Programme of Action. (2018, March 20). *Programme of Action: Progress Report to March 20, 2018*. Pretoria, South Africa: Department of Planning, Monitoring and Evaluation. Retrieved from: https://www.poa.gov.za/Documents/Programme%20of%20Action%20Progress%20report%20to%20March%202018.pdf

[275] Department of Justice and Constitutional Development. (2014). *National Intervention Strategy for Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Sector*. Pretoria, South Africa: Department of Justice and Constitutional Development. Retrieved from: https://www.gov.za/sites/default/files/2014_doj_national_intervention_strategy_lgbti_sector.pdf

[276] South African National AIDS Council. (2017). *National Strategic Plan for HIV, TB and STIs 2017-2022*. Pretoria, South Africa: South African National AIDS Council. Retrieved from: http://sanac.org.za/wp-content/uploads/2017/05/NSP_FullDocument_FINAL.pdf

[277] Phaswana-Mafuya, N., Chirinda, W., Maseko, B., & Yah, C. (2014, July 21). *Overview of the South African Men's Health Monitoring Study (SAMHMS).* Presented at the SAHARA/CDC Meeting, Port Elizabeth, South Africa. Retrieved from http://repository.hsrc.ac.za/bitstream/handle/20.500.11910/2269/8344.pdf

[278] Dlamini, N. (2018, January 11). SA HIV study on transgender women launched. *South African National AIDS Council*. Retrieved from http://sanac.org.za/2018/01/11/sa-hiv-study-on-transgender-women-launched/

[279] South African Human Rights Commission. (2018, January 31). *South African Human Rights Commission Revised Strategic Plan for the Fiscal Years 2015-2020*. Braamfontein, South Africa: South African Human Rights Commission. Retrieved from: https://www.sahrc.org.za/home/21/files/Final%20SAHRC%20Revised%20Strategic%20Plan%202015%20-%202020.pdf

[280] South African National AIDS Council. (2017). *South African National LGBTI HIV Plan, 2017-2022*. Pretoria, South Africa: South African National AIDS Council. Retrieved from: http://sanac.org.za/wp-content/uploads/2017/06/LGBTI-HIV-Plan-Final.pdf

[281] Commission for Gender Equality. (2014). *Commission for Gender Equality Five-year Strategic Plan 1 April 2013 - 31 March 2018*. Johannesburg, South Africa: Commission for Gender Equality. Retrieved from: http://www.cge.org.za/wp-content/uploads/2014/05/CGE-STRATEGIC-PLAN.pdf

[282] Department of Health. (2015). *Department of Health Strategic Plan 2015-2020* (RP75). Pretoria, South Africa: Department of Health. Retrieved from: http://www.nationalplanningcycles.org/sites/default/files/planning_cycle_repository/south_africa/ndoh-strategicplan2015-2020.pdf

[283] Department of Labour. (2017). *Department of Labour Revised Strategic Plan 2015-2020* (RP105/2017). Pretoria, South Africa: Department of Labour. Retrieved from: http://www.labour.gov.za/DOL/downloads/documents/annual-reports/department-of-labour-strategic-plan/2015-2020/strategicplan20152020_.pdf

[284] Statistics South Africa. (2015). *Statistics South Africa Strategic Plan 2015/2016 – 2019/2020* (RP123/2015). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/strategy_plan/strategy_plan_2015.pdf

[285] The National Department of Health. (2018). *Standard Treatment Guidelines and Essential Medicines List for South Africa: Primary Health Care Level, 2018 Edition*. Pretoria, South Africa: The National Department of Health. Retrieved from: http://www.health.gov.za/index.php/component/phocadownload/category/285-phc?download=2896:primary-health-care-level-2018-v-1

[286] Department of Health. (2017). *National Adolescent & Youth Health Policy 2017*. Pretoria, South Africa: Department of Health. Retrieved from: http://www.health.gov.za/index.php/shortcodes/2015-03-29-10-42-47/2015-04-30-08-18-10/2015-04-30-08-25-54?download=2366:adolescent-and-youth-policy-4th-sept

[287] Department of Planning, Monitoring & Evaluation. (2017, May 11). *Socio-Economic Impact Assessment System (SEIAS) Final Impact Assessment (Phase 2): White Paper on National Health Insurance.* Pretoria, South Africa: Department of Planning, Monitoring & Evaluation. Retrieved from: http://www.health.gov.za/index.php/nhi?download=2263:impact-assessment-nhi-white-paper

[288] Statistics South Africa. (2010). *Census 2011 Questionnaire A (Households).* Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/censuses/2011/Census%202011%20Questionnaire%20A.pdf

[289] Statistics South Africa. (2014). Census 2011 Persons (10% sample) Revised 2015 (person!10pct!sample!v3). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A

%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2Fperson%2110pct%21sample%21v3&mode=documentation&top=yes

[290] Statistics South Africa. (2016). *Community Survey 2016 Metadata*. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/CS2016/Community%20Survey%202016%20Metadata.pdf

[291] Statistics South Africa. (2007). *Community Survey 2007 Metadata*. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/CS2007/Community%20Survey%202007%20Metadata.pdf

[292] Statistics South Africa. (2016). Community Survey 2016 (Person Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2016Person&mode=documentation&top=yes

[293] Statistics South Africa. (2016). Community Survey 2016 (Household Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2016Household&mode=documentation&top=yes

[294] Statistics South Africa. (2008). Community Survey 2007 (Population Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2007%21persons&mode=documentation&top=yes

[295] Statistics South Africa. (2008). Community Survey 2007 (Household Information). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FCS2007%21housing&mode=documentation&top=yes

[296] Statistics South Africa. (2017). *General Household Survey 2017 Questionnaire*. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/GHS/General%20Household%20Survey%20(Revised%202017)/2017/General%20Household%20Survey%202017%20questionnaire.pdf

[297] Statistics South Africa. (2018). *General Household Survey 2017 Statistical Release* (P0318). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/publications/P0318/P03182017.pdf

[298] Statistics South Africa. (2017). *General Household Survey 2017* (House File). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FGHS-2017-HOUSE&mode=documentation&top=yes

[299] Statistics South Africa. (2017). *General Household Survey 2017* (Person File). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FGHS-2017-PERSON&mode=documentation&top=yes

= Statistics South Africa. (2017). *Living Conditions Survey 2014-2015 Questionnaire*. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/LCS/2014_2015/Living%20Conditions%20Survey%20Questionnaire.pdf

[301] Statistics South Africa. (2017). *Living Conditions Survey 2014-2015 Study Description*. Pretoria, South Africa: Statistics South Africa. Retrieved from: https://www.datafirst.uct.ac.za/dataportal/index.php/catalog/608/study-description

[302] Statistics South Africa. (2018). *Quarterly Labour Force Survey - Quarter 2: 2018* (P0211). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://www.statssa.gov.za/publications/P0211/P02112ndQuarter2018.pdf

[303] Statistics South Africa. (2018). *Quarterly Labour Force Survey (2nd Quarter 2018)*. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FQLFS-2018-02&mode=documentation&top=yes

[304] Shisana, O., Labadarios, D., T.Rehle, L.Simbayi, K.Zuma, A.Dhansay, . . . SANHANES-1 Team. (2014). *The South African National Health and Nutrition Examination Survey, 2012: SANHANES-1: the health and nutritional status of the nation*. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://www.hsrc.ac.za/uploads/pageNews/72/SANHANES-launch%20edition%20(online%20version).pdf

[305] Shisana, O., Ramlagan, S., Rehle, T., Mbelle, N., Simbayi, L., Zuma, K., . . . Wabiri, N. (2014). *South African National HIV Prevalence, Incidence and Behaviour Survey, 2012*. Cape Town, South Africa: HSRC Press. Retrieved from: http://www.hsrc.ac.za/en/research-data/ktree-doc/15031

[306] Zuma, K., Moyo, S., Simbayi, L., Ramlagan, S., & Dietrich, C. (2018, July 24). *South African National HIV Prevalence, Incidence, Behaviour and Communication Survey, 2017*. Presented at the IAS Conference, Amsterdam, Netherlands. Retrieved from https://programme.aids2018.org/PAGMaterial/PPT/6053_0/Full%20SABSSM5%20Presentation%20at%20HSRC%20Satellite%20on%2024%20July%202018.pptx

[307] Human Sciences Research Council. (2007). *South African Social Attitudes Survey Questionnaire 1: October 2007*. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: https://www.datafirst.uct.ac.za/dataportal/index.php/catalog/487/download/6486

[308] Human Sciences Research Council. (2015). South African Social Attitudes Survey (SASAS) 2015: Questionnaire 1 - All provinces. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://dx.doi.org/doi:10.14749/1476436497

[309] Human Sciences Research Council. (2016). South African Social Attitudes Survey (SASAS) 2016: Questionnaire 1 - All provinces. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://dx.doi.org/doi:10.14749/1505213190

[310] Human Sciences Research Council. (2015). *South African Social Attitudes Survey Questionnaire 1: October/November 2015*. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://curation.hsrc.ac.za/index.php?module=pagesetter&func=viewpub&tid=128&pid=3139&projectid=SASAS&datasetno=42&collection=SASAS%202015&datasetid=SASAS%202015%20Q1

[311] Human Sciences Research Council. (2016). South African Social Attitudes Survey Questionnaire 1: January/March 2017. Pretoria, South Africa: Human Sciences Research Council. Retrieved from: http://curation.hsrc.ac.za/index.php?module=pagesetter&func=viewpub&tid=128&pid=3394&projectid=SASAS&datasetno=46&collection=SASAS%202016&datasetid=SASAS%202016%20Q1

[312] Statistics South Africa. (2015). Survey of Activities of Young People (2015). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FSAYP-2015&mode=documentation&top=yes

[313] Statistics South Africa. (2011). Survey of Activities of Young People 2010 (re-weighted). Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/webview/index.jsp?v=2&submode=abstract&study=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfStudy%2FSAYP-2010-reweighted&mode=documentation&top=yes

[314] Statistics South Africa. (2016). Victims of Crime Survey 2015/16 Questionnaire. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/VOCS/2015_2016/Victims%20of%20Crime%20Survey%20questionnaire.pdf

[315] Statistics South Africa. (2017). Victims of Crime Survey 2016/17 Questionnaire. Pretoria, South Africa: Statistics South Africa. Retrieved from: http://nesstar.statssa.gov.za:8282/metadata/surveys/VOCS/2016_2017/Victims%20of%20Crime%20Survey%20questionnaire.pdf

[316]Statistics South Africa. (2017). Victims of Crime Survey 2016/17 Statistical Release (P0341). Pretoria, South Africa: Statistics South Africa. Retrieved from: https://www.statssa.gov.za/publications/P0341/P03412016.pdf

[317] Reddy, S., James, S., Sewpaul, R., Koopman, F., Funani, N., Sifunda, S., . . . Omardien, R. (2010). Umthente Uhlaba Usamila - The 2nd South African National Youth Risk Behaviour Survey 2008. Cape Town, South Africa: South African Medical Research Council. Retrieved from: https://granthaskin.files.wordpress.com/2012/06/youth-risk-behaviour-survey-2008_final_report.pdf

[318]http://nesstar.statssa.gov.za:8282/webview/index.jsp?catalog=https%3A%2F%2F10.131.145.161%3A443%2Fobj%2FfCatalog%2FISIbalo&submode=catalog&mode=documentation&top=yes