The purpose of the study was to investigate physical activities for the level of functional independence amongst the elderly Kenyans in selected homes for the aged in Nairobi Province. The unit of measurement used is called a Metabolic Equivalent (MET), used to assess the intensities of physical activity patterns of the elderly. The results were expressed as a mean value of the METs in each of the physical activity categories. ADLs were measured by the Modified Barthel Index, scored on the basis of self-reporting by the subject to establish the Functional Independence Measure (FIM). This measure was used to establish the independence level of the elderly in performing ADLs and Mobility. Both, male and female elderly > 60 years residing in three homes for the aged, registered and affiliated to HelpAge Kenya in Nairobi Province were used in the study. A total of 144 out of 150 elderly residents were investigated in the study. The descriptive survey design employed a semi-structured interview and a number of standardized instruments. Instruments included the Modified Barthel Index and Physical Activity Log Book used to record FIM of ADLs and MET intensities of physical activities respectively. The accrued data on METs and FIM were subjected to statistical analysis using Statistical Package of Social Sciences (SPSS). One way Analysis of Variance and Pearson's Product Moment Correlation coefficient index at significance level of 0.01 were used to test the research hypotheses. Post Hoc analysis was conducted using the Scheffe Confidence Interval to locate inter-group differences. The data were presented in tables and pie-charts. Major findings of the study were: There was a significant relationship between the MET intensities of physical activities and functional independence in ADLs and Mobility of the elderly; there was a significant difference between the three homes of the aged and physical activities; and there was a significant difference between the three homes and FIM. The study recommended that there is an imperative need for: development of more trained gerontological professionals in exercise and recreational programs of the elderly by educational institutions; diversification of physical activity and recreational programs of the elderly in homes for the aged by the administrators, and regular fitness testing and evaluation for the elderly residents by the administrators to know their progression in attainment of fitness goals.