

# **An Exploratory Study of the Social Contexts, Practices and Risks of Men Who Sell Sex in Southern and Eastern Africa**

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## Background to the research: contexts, aims and objectives

The aim of the research presented in this report was to explore the social contexts, life experiences, vulnerabilities and sexual risks experienced by men who sell sex in Southern and Eastern Africa, with a focus on five countries; Kenya, Namibia, South Africa, Uganda and Zimbabwe (an in particular with research activities in the Kenya and Namibia). As well as seeking to better understand differing and similar socio-cultural scenarios and personal life stories of male sex workers in these countries a key and specific aim was to improve terms for representation of male sex workers in relevant regional organizations, particular within the African Sex Workers Alliance (ASWA)<sup>2</sup> – members of which participated in and supported this research process. The findings of this research reaffirm the need for specific male sex worker representation within ASWA as well as the need for specific social support, health education and HIV prevention programmes for male sex workers in the region more widely.

Additionally, the needs of transgendered sex workers were also highlighted by the research process. These are not specifically developed in this report, as findings from this aspect of the research are currently being analyzed and developed in association with relevant collaborating organizations. Nonetheless a critical outcome of the research overall was to stress the need for renewed efforts to respect and develop gender sensitivity in health, social welfare and HIV prevention services for sex workers throughout the region and to include and consult with transgender people in such processes.

The aims of the research project presented here can be conceived in both *objective* and *subjective* terms. Objectively, as noted, a key set of aims was to find out more about the circumstances and experiences of men who sell sex in the countries represented in the study, with a view to promoting better representation in advocacy - improving HIV prevention actions and welfare more generally. This entailed exploring similar and different experiences among the cohort of male sex workers who took part in the research, as they represented different contexts within the African continent, and a cross-section of differing personal experiences. The similarities and differences explored included three distinct but overlapping areas:

- **Social contexts** - including geographical and special contexts of male sex work

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<sup>2</sup> The meeting was attended by the African Sex Worker Alliance Coordinator of ASWA – Kyomya Macklean

- **Sexual Practices** - including sexual activities, roles, identities, and internal and external responses to 'labels' for designating both men who have sex with men and male sex workers
- **Structural and personal risk factors** - included a range of themes relating to both personal and social responses to male sex work within the context of marginalization and human rights violations, HIV and AIDS, substance abuse, socio-political influences, family, culture-and taboo, religion, stigma/prejudice, internalized phobias, legislation, and human rights abuses

In exploring these areas the intention was to develop a profile of key concerns relevant to a better understanding of male sex work in the region. Specifically we sought to add to *qualitative* analysis of the social contexts of; health-seeking practices of men who sell sex; human rights scenarios; social and personal vulnerabilities; and HIV related risks among men who sell sex in specific settings in Kenya, Namibia, South Africa Uganda, Zimbabwe. Knowledge on these issues was sought for three principal applied purposes, which were to:

- **Determine** how male sex workers can be better included in sensitive and relevant HIV prevention and rights advocacy strategies, within their countries and the broader African context, as well as assessing barriers to care (including legal contexts)
- **Decide** on the feasibility of including representatives for African male and transgendered sex workers within the existing African Sex Worker Alliance (ASWA)
- **Develop** an initial set of priorities for future directions of prevention, research, and policy recommendations for male sex workers

In addressing the issues described we sought specific knowledge on male sex workers' life-stories, social vulnerabilities, socio-sexual practices and risks – which were shared and explored by research participants, drawing on their own experiences. However, it is important to note that in the context of the research the elicitation and discussion of this information relied on the viewpoints of key individuals. Of necessity then, whilst such views offered formative *country-relevant information*, they were accented toward *personal narrative accounts*. As such, whilst information is presented in this report indicating similarities and differences in the scenarios of male sex work in each represented country, we stress that these views are based on *particular viewpoints*, and cannot be taken as complete country analyses or assessments *per se*. Rather the views offered are *indicative* of differences and similarities across countries in the region and point to some key action areas for policy and practice development.

It is especially important to remember that in many cases men who have sex with men in Africa (both those who sell sex and those who do not) have often been excluded from policy and programming processes regarding HIV and AIDS, sexual health and so forth, most often because of prejudice and denial about the existence of such men in many countries, including within civil society and governmental bodies (International HIV/AIDS Alliance 2009). Whilst in some African countries gay-identified men have, over the last few years, become more visible and vocal in claiming legal and social rights (including rights to HIV prevention, treatment and care) the overall scenario in Africa is one in which the majority of men who have sex with men do not have their basic HIV prevention needs met (Nguyen 2005, Baral et al 2009). Moreover the needs, sexual risk practices, social vulnerabilities and HIV prevalence among men who have sex with men remains significantly under-researched and consequently poorly addressed in HIV prevention programming. A recent study conducted in Malawi, Namibia and Botswana, for example, found that men who have sex with men over the age of 25 were more like to be HIV positive and practice unprotected sex as compared to younger men in the study cohort. Moreover they were also more likely to engage in concurrent sexual relationships with men and women, significantly blurring any meaningful differentiation between homo- and heterosexual life-worlds and HIV epidemiologies (Baral et al 2009, 2008; Fipaza 2010).

Where studies on male sex work have taken place in Africa data have revealed an alarming paucity of adequate HIV knowledge and health care. Much of the limited research on male sex work in Africa to-date has taken place in Kenya, where recent research with male sex workers in Mombasa, for example, found that many young male sex workers did not consider themselves at risk from HIV and STIs. Moreover, they were often inclined to self-treat STIs because of prejudicial attitudes among health care providers (in case of presenting with anal STI symptoms, for example). Police were often similarly prejudiced or hostile in cases when male sex workers attempted to report sexual abuse or violence. Overall men selling sex in Mombasa were typically found to have significantly low self-esteem, and they particularly recommended that they needed improved counselling and psycho-social support.<sup>3</sup> Further, recent research has also stressed the growth in sex tourism in Mombasa, and that male sex workers also have (unprotected) sex with women clients, some of whom may be local<sup>4</sup>.

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<sup>3</sup> <http://www.irinnews.org/report.aspx?reportid=46341>

<sup>4</sup> <http://www.eafricanfocus.com/2010/04/25/bisexual-male-sex-workers-run-big-risks/>

Research in Pretoria, South Africa, has found that men who sell sex to other men were more likely to have anal sex with other men (41% as compared to 21% among men who have sex with men who do not sell sex). They were also far more likely to have female sex partner too, as compared to other men who have sex with men (45% compared to 19%) (RDS 2009). Overall, however, the data on male sex work in Africa are among the sparsest globally in terms of research on sexuality, health and HIV, and much remains to be undertaken in this area.

As noted, in addressing the issues described the research not only sought *objective* data about comparative contexts of male sex work, but also had a strongly *subjective* focus. This was so, not only because the views elicited in the workshop were based on the viewpoints of key *individuals* but was also in concert with new trends in the social scientific study of sex work (Lorway et al 2009). Much research on (male) sex work to-date, in Africa and elsewhere, has tended to focus on sex work as a means of survival, related to poverty and/or as a behaviour especially associated with sexual risk (and HIV transmission). Whilst in no way underestimating the importance of these issues, such emphases have tended to diminish understanding of the nuanced motivations and total 'life-worlds' of sex workers - especially the complex inter-relationship between sex workers' sexual subjectivities, their sex work practices and their attitudes toward HIV.

Focusing on these issues is especially important in research into the experiences of men who sell sex to other men, in which cases there is often a distinct and complex "interplay between self-realization, sexual desire, social interaction, and public health discourse" (Lorway et al 2009). Thus for example, male sex workers may often not experience a pronounced differentiation between commercial and non-commercial sexual activities, in cases where, for example, selling sex takes place in the context of social and sexual spaces where men who have sex with men socialise and spend time. A sense of self as a 'man who has sex with men' and as a 'male sex worker' may often be inter-penetrative, as the social scenes for the realization or enactment of male-to-male sexualities may blur with social and economic contexts of sex work. This is not to say that similar blurring of commercial sexual practices, desire and the practical contexts of sexual life may not also be the case for female sex workers. Nonetheless for men who sell sex the issues described have a particular relevance, especially in the African countries represented here where stigma toward men who have sex with men and men who sell sex is equally strong, and where social contexts for male-to-male sexual expression are limited.

Against the background of these concerns the research reported on here consisted of two principal components, each designed to enhance knowledge of male sex workers within the region – from their points of men who themselves sell sex. The first research activity was a workshop that brought together key activists and advocates from among men who sell sex in Southern and Eastern Africa in order to find out more about the kinds of research and programme development actions needed in the area, and to assess the possibility for viable strategic plans and courses of action. In bringing together key individuals from the five representative countries, Kenya, Namibia, South Africa, Uganda and Zimbabwe the aim was to come up with a common regional assessment and action strategies for the development of rights-based and HIV prevention work with men who sell this in Africa (especially as regards taking forward the agenda for male sex workers within the ASWA framework)<sup>5</sup>. Beyond this aim, however, the workshop provided an important and unique forum within which male sex workers were able to share and reflect on their experiences, through a range of facilitated exercises. It was in this sense that the workshop brought a strong psycho-social dimension to the research, creating a space within which personal reflections of being a sex worker (among other life experiences and events) were shared, explored and contained.

The social and subjective contexts of male sex work (in Africa) are far from straightforward – and are not easy to characterise in any uniform or linear sense. Given this, the individual stories of male sex workers become especially important, as a means to learn how about such men live their lives, and make sense of their experiences, risk and vulnerabilities. During the workshop we worked closely with participants to facilitate sessions and discussion that explored differing aspects of male sex workers lives. In particular we focused on:

- **Stories of resilience and achievement** – with a view to countering associations between sex work and poverty we sought to explore some of the positive aspects of sex work for workshop participants
- **Subtexts and power** – beyond, and underlying stories of sex workers' achievements we also sought a nuanced understanding of difficulties sex workers face in realizing their desires, and how such problems often relate to complex social contexts of power and prejudice

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<sup>5</sup>The coordinator from ASWA was a participant in the workshop.

- **Sexual ‘life-worlds’** – we also explored the subjective and social context of people’s sexual lives, and the salience, or otherwise, of differentiating between sex *work*, and sexual *experience*

In exploring these issues through various exercises during the workshop we sought to examine ways in which focusing on an these concerns might be relevant to improving rights-oriented, HIV prevention and sexual health promotion work with male sex workers in Africa, from the viewpoint.

The workshop process was followed-up with in-country discussion groups, conducted in Kenya and Namibia. These covered similar themes and issues to the workshop held in South Africa, but the aim was to include a wider range of participants, and to gather more in-depth contextual detail regarding people’s accounts and world-views than could be achieved in a workshop alone.

## **A workshop for male sex workers: methodology, process and discussions**

The research workshop was held in Johannesburg 17 to 22 December 2010 and included fifteen participants, each of whom was a male sex worker from one of the participating countries (along with a specially invited transgendered sex workers from Uganda and Kyomya Macklean from ASWA). The workshop was facilitated by Gordon Isaacs and Eric Harper (SWEAT) and Paul Boyce (UNDP consultant).

### **Day 1.**

The workshop began with introductions, explanations of aims and objectives and with the establishing of ground-rules in terms of the ethics of confidentiality and disclosure. Workshop participants shared their personal expectations of the workshop, as well as sharing aspects of their personal situations and experiences – as a means to get to know one another. The workshop then proceed in respect of a series of participatory activities.

#### *Labels and definitions*

This exercise explored some of the different words and labels associated with male-to-male sex – especially including culturally specific language and the values attached to different words. The

aim was to explore the power of language in different social contexts – both popular and ‘programmatically’ terminologies (associated with HIV prevention work, for example).

Participants stressed that before being known as gay, sex workers, MSM, or any other such labels, they are human beings, and wish to be respected as such. At the same time participants recognised the political power that can come with being labelled a male sex worker – and for the majority recognition in these terms was important.

Participants also recognised the salience of different terminologies in different contexts. ‘MSM’ can be a valuable label when seeking funding, because the term is better recognised by funders. ‘Male sex worker’, or ‘MSW’, on the other hand, are less well understood terms, especially in the Africa context, where male sex work has been so poorly researched.

LGBTI<sup>6</sup> (and variants thereof) is another term with potential, since it is inclusive, and alludes to the allied politics that male sex workers often share with LGBTI subjects (and which they may not share with female sex workers, for example). Nonetheless, a common experience across the countries represented in the workshop was that male sex workers often felt excluded from LGBTI movements and social spaces, as they were stigmatised by LGBTI people. As such, male sex workers can find themselves between differing discourses and contexts of activism, social support and health intervention/HIV prevention.

Participants drew up a chart presented some of the positive and negative labels that are attached to them, as male sex workers:

Friends	Enemies
Moffies	UnAfrican
Isitabane	Prostitute: Unongongo
Pride/Proud	Jenture
Rainbow	Evil-Satanist
Bitch/Jalloose bokkie	Moffie
Queen	Rapists
Gold-diggers	Paedophiles
Khwithi	Fags
China (always looking for money)	
Rent boy	

<sup>6</sup> Lesbian, Gay, Bisexual, Transgender, Intersex

## *Mapping*

This exercise involved participants working in country groups to draw-up diagrammatic maps representing differing contexts of male sex work in their countries, including urban and rural sites, cross-border travel, shared and differing contexts with female sex workers and so forth. In Zimbabwe, for example, one of the contexts illustrated was a mining area where male sex workers work, but where there are no specific health or social interventions. In Namibia one issue focused on was the social context of truck drivers, many of whom have sex with both male and female sex workers, as well as their spouses. The movement of truck drivers across the country was especially emphasised. In Kenya the contexts of male sex work in Nairobi and Mombasa were illustrated, for example indicating some of the clients who could be met in different places. In Mombasa, for example, sex workers can aim to meet clients from specific social and ethnic groups, depending on where they are working.

In addition participants were also asked to draw a personal map – showing the story of a male sex worker and his movement across different social and geographical contexts over the course of his life and work. The aim of these exercises was to illustrate that whilst sex work may be mapped in terms of geographical and social locations sex workers stories are *not static*, and sex work cannot only be characterized by *fixed contextualization* – rather by movement and change in circumstances. These issues were well illustrated by stories of male sex workers, for example, who presented different identities in different contexts. Participants from Namibia, for example, told of how one well known male sex worker sells sex in port town, but on return to his home town he lives as a heterosexually married man.

## **Day 2.**

### *Personal stories - collages*

Participants had been asked to prepare personal stories as homework - stories that could represent their experiences as sex workers to the rest of the group. During the morning they were asked to represent these narratives by preparing collages, telling their personal stories of resilience and strength associated with sex work. The aim of the exercise was to use a creative medium for sharing, and to focus on resilient and positive aspects of sex workers experiences (countering prevailing negative associations with poverty, desperation and so forth). This emphasis was also appropriate for the level of sharing during day 2 of the workshop - accenting positive experiences and not overly burdening participants with expectations to share personally difficult experiences at this stage.

Participants presented their stories, using their collages pinned to the wall. Once all of the collages were presented participants were invited to place stickers on the different collages, indicating the words and associations that came to mind for each story. A few of the stories developed are given here in textual narrative forms, along with the words that were given in response to the stories:

**Story 1.** My mother was a teacher and sent me to private schools. At the age of 12, I was invited to play netball, not knowing the game was being recorded. My father saw me on TV, when he arrived at home my father ignored me. My father told my mother that he did not have time for a “moffie dog”. While my father was out I packed my bags and ran away from home.

I started sex work (and drinking) at 13. I continued with school until I matriculated at 18.

I joined the Rainbow Project to develop my leadership qualities and to work with the LGBT in Namibia. I am currently busy with my law degree.

*Words: Education; Awesome; Anger; Strong leader; Survival; Accommodation; Young brave heart; Wow!; Freedom*

**Story 2.** I am from Zimbabwe. I have a son. I have a diploma in Human Resources by qualification but I got deeply involved in politics in my country. I had been assaulted as a political activist and had to run away. I left Zimbabwe for South Africa. I worked as a waiter but the money was not enough to support myself and my son. A friend told me he was sleeping with men for money and it was easy cash. I struggled to imagine myself sleeping with another man.

He took me along to his clients; they bought him drinks and paid him well. He complained about me depending on him. One day I decided to try it for myself. I made sure I was drunk first and I slept with a man. He paid me well and I was so happy and excited I tried to plan what I was going to do with the money but it didn't last. So I had to go back. I got myself drunk and had sex for money again. I didn't think of myself as a sex worker at the time. I realized that it wasn't too bad and earned money this way to take care of my girlfriend and son.

I have joined SWEAT as a counsellor, Desmond Tutu Foundation, Health for Men.

*Words: Love; Money; Loss*

**Story 3.** I was born in Kenya, on the slopes of Mount Kenya. I was born in a family of 8, 5 boys and 3 girls. I realized I was gay long time ago. I was 8 years old when I realized I like boys.

I remember years ago when I went to Mombasa. I was staying in a hotel and spoiling myself. One day I ran out of money. I went to the streets met some gays and they introduced me to sex work. I also met a friend. She and I became very close. She found out she was HIV positive. When she was sick, she asked me to take care of her son. I began the legal adoption process which took 3 years to successfully complete. Now I have a son I love very much. Her mother passed away.

I fell in love and started a life with my lover. He bought me a nice beautiful house that cost millions.

I moved to Nairobi and carried on with sex work there. I went to church, I got 'saved'. Even though I was 'saved' and highly involved in church as a choir leader, I carried on working discreetly with members of the church. I started having pastors as clients and now I only work with pastors and high profile clients like professors.

I dream of starting a home for children of HIV positive parents. So far I have founded a clinic for sex workers HOYMAS to help young men with HIV/AIDS and STI. I am a peer educator at Sex Workers Outreach Programme (SWOP). I serve on the committee of MARP, Most At Risk Population."

*Words: Power; Hope and resilience; Really good person; Kindness and streetwise; Achievement; Motivation, Awesome; Betrayal; Power; Aspiration*

The stories of resilience presented here were further explored, with participants being invited to associate different colours with the stories - as a means to explore the emotional impact (with colour as a means to visualize this). The strength and power of the stories was appreciated by everyone at the workshop - the survival skills evinced by the stories were seen as those skills that characterized people as strong leaders.

*Subtexts and missing stories*

Against the background of the stories of resilience, participants were asked to think of other stories, of other male sex workers - those who may have been less resilient (those who, for

example, would not find themselves at the workshop). People were asked to note down the words/emotions that came to mind when reflecting on these stories. Working as a whole group the workshop participants grouped these words together under the following themes:

GROUP 1	GROUP 2	GROUP 3	GROUP 4
Tragedy and Stigma	Abuse	Addictions	HIV/AIDS
Tragedy	Violence	Addictions	HIV/AIDS
Desperation	Domestic Violence	Alcohol	STD
Death	Abuse	Drugs	Pain
Stigma	Sexual Abuse		Discrimination
Suicide	Anger		
Depression	Harassment		
Rape			
Failure			

The reflection on these words and associated emotions brought about a significantly 'heavier' mood among the workshop participants and facilitators - emphasizing a more complex scenario regarding the situations of sex workers, and the problems that many have to overcome. Moreover, in as much as the words given above were taken to characterize the experiences of less resilient sex workers facilitators also reflected that maybe the negative and more painful themes and feelings given also represented a subtext to the resilient stories of sex workers lives. In as much as some sex workers may survive well, and may become advocates for others, they may also live through a range of complex and painful experiences, which may be on-going and enduring - with profound and lasting effects.

These exercises were especially effective in beginning to build up a nuanced account of sex workers' lives and life-worlds, not just as dichotomous stories of survival or pain/poverty/abuse, but as complex human stories, with complex legacies in terms of people's sexual subjectivities and vulnerabilities.

#### *Sex work as work*

Based on the view of sex work that was taking shape during the workshop - as characterized by opportunities and strengths as well as more problematic emotional and social issues, in this

exercise participants were asked to present reflections on how they might promote sex work as a career. Imagining that they were being asked to make a presentation at a college employment fair, participants came up with the following as some of the key advantages to a career in sex work:

- Freedom, money and work by yourself.
- Easy cash,
- Sex workers are human beings
- Learn responsibility
- Build self esteem
- Quick cash, fast money
- Independent
- Freelance
- Exposure
- Own boss
- Many leadership programs
- Networks
- Serve community

Given this list of qualities, a further group discussion explored blurred boundaries that sometimes made it hard to differentiate sex work from ones sexual and emotional life. Many of the participants, for example, had had strong emotional relationships with clients, that had become romantic and enduring, in which cases boundaries between work, love and other emotions were diffuse. Moreover, for many male sex workers the scenes of their social lives as men who have sex with men were common with those in which they sought sexual partners. This was seen as a component of the attractiveness of sex work as a profession, but was also a challenging area. The group explored comparisons with other professions, such as nursing.

Similarities between nursing (as an example of a profession) and sex work were noted, especially as regards some of the intimate aspects of the labour involved in both areas of work - working closely with people's bodies, for instance. A key difference was the absence of legislation around appropriate working practices - with nursing being far more circumscribed by codes of professional ethics as compared to sex work. In many ways participants saw the absence of legislation pertaining to sex work as a good thing, especially when taking into account the consequences of legalising sex work in some social contexts - with surveillance and registration acting as a means to control sex workers. Nonetheless, participants were also encouraged to

reflect on some of the consequences of freedom and blurred social and sexual boundaries - especially in the context of male sex work. If seeking rights as sex workers for example, how might activists assert and claim such rights if a majority of male sex workers do not especially identify themselves as being within a sex work *profession*, or clearly conceptualize what they do as work *per se*. To some extent, as noted, these issues are somewhat different in the context of male as compared to female sex work, where historically unionisation among male sex workers has been much weaker (perhaps especially in Africa).

JOB/PROFESSION	WORK	LABOUR	LEGISLATION
Nurse	Hospital	Physical effort, e.g. PC	Unions
Skill	Medication		Protection and Penalty for improper conduct
Qualification	Injection		
Experience	Tests		
	Check ups		
Sex worker			
Skill	Indoors, agencies, own house	On the move	None but agencies, pimps and registration bureaus have contracts with participants
Qualification	Streets	Migration/moveme nt	
Experience	Sex	Negotiate sex	
	Companionship		
	Save marriages		
	therapy		

### *SWOT analysis*

Taking these issues into account, the group worked together to draw up a SWOT analysis, representing some of the Strengths, Weaknesses, Opportunities and Threats pertaining sex work, and the potential for stronger advocacy among male sex workers:

STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
Self esteem	Authorities e.g. police	Signed treatise i.e. agreements between countries	Fun and play i.e. too much fun and play creates the risk of not being able to negotiate
Less police abuse	Theft	Dialogue for decriminalization with government	Exploitation
Allows for intimacy where there wouldn't	Take advantage of clients – black mail	Research	Refusal to use condoms
Wisdom	Deliberate infection	Share information	Clients
Streetwise	Alcohol	Networking	Churches and leaders
Presentable	Substance abuse	Coalition with other sex workers, to unite, change the legislation = mobilize	Political groups
Determination	Rape		Female sex workers
Assertive – negotiate	Refuse condoms		Police
Embraces diversity of clients	Fun and play		
Market self in a respectable way	Not united		
Trust i.e. less fear of not being paid			
Physical strength			
Double life			
Fun and play			

This analysis brought together some of the themes and issues that had been developed over the first days of the workshop. Varying experiences and contexts both enabling and problematic for sex work(ers) were noted, and in some instances the same aspects of experience were understood as positive and negative attributes. Fun and play, for example, were both a strength for sex workers (a positive asset in the work) but also a weakness and threat, in that some participants felt that an over-emphasis on fun among some male sex workers stopped them taking sexual health and HIV seriously and was also detrimental in terms of effective organizing and activism. Similarly, coalition with other sex workers was perceived as an opportunity, yet female sex workers were also characterised as a potential threat, in that in some contexts male and female sex workers could compete over clients, or be prejudiced toward one another - distracting from the potential for common activism, organizing and advocacy. The balance of judgement on these issues within the group reflected the subtle view of sex workers experience that was developed during the workshop, and some of the complex issues that need to be further explored in research and addressed in rights and HIV prevention work.

### **Day 3.**

#### *Social contexts, practises and risks*

Day 3 began by breaking into three groups, one each to explore cross-country similarities in terms of the social contexts, practices and risks that characterise male sex work. As noted above, the aim was not to come up with definitive situational assessments of each country, but to offer some indicative ideas so as to begin building-up a profile of commonalities and in-country specificities pertaining to sex work in the region.

In terms of *sexual practises* there were minor discrepancies between countries social contexts and significant commonalities. In discussion we explored typical client profiles, sexual transactions and activities, and the issue of condoms, and male sex. Money was central to this discussion, as well as levels of favouritism (between worker and client), client abuse (such as knowingly infecting a male sex worker with HIV) and how male sex workers might act as brokers for clients (with requests ranging from bringing drugs to the parties, to recruiting younger men for the client). Also client requests ranged from fantasy, role play, homo-hetero-eroticism, to fetish and fantasy, and power. There is also a trend for sex workers to use other sex workers (both male and female), for recreational and romantic purposes. Some have primary partners, who may or may not be sex workers, and a different form of intimate bonding occurs in such cases.

In terms of *social contexts*, similarities and differences were reflected along the lines of interpretation of words and meanings, gender differences (for male and female sex workers), the acute discrimination towards transgendered sex workers and inter-community hostility. The social context is also influenced by socio-political factors, human rights movements, and contradictory realities in each country. In South Africa, for example, it was noted that whilst there are laws that to some extent promote the rights of LGBTI peoples, these are only partially effective in terms of diminishing prejudice, and particularly they do little to protect or change attitudes toward male sex workers. Other countries reported pernicious political and religious contexts. Participants from Zimbabwe, for example, recounted experiencing direct hostility from the Anglican Church. This was similarly so in Kenya, although participants noted that they had experienced more direct prejudice from people of Islamic as opposed to Christian faith. Some xenophobic thinking was also picked up in each country, especially regarding migrant sex workers, who experience prejudice from various sections of society, including from other sex workers.

In terms of *risk factors*, all countries with the exception of South Africa, pointed to HIV and AIDS as the omnipresent risk, whilst South African participants identified substance abuse as the largest threat for sex workers. This perhaps reflects more pronounced HIV and AIDS awareness campaigns in South Africa, whereas drug use in sex work has been a less explicit public health concern. All countries reported the law and prejudicial attitudes of health care providers and police as specific risk factors, compounding social disenfranchisement and HIV vulnerability among male sex workers.

#### *Sharing and classifying stories*

Bringing together some of the overarching themes and issues of the workshop, this exercise aimed to explore and inter-relate some of the structural and personal factors that come together in sex workers' experiences (and social and sexual vulnerabilities). Each participant was asked to share a story of a personal experience, the listeners discussed each story in pairs, to agree on a classification and give the reasons for classifying the story under the following 6 categories. Each pair posted their classification onto a chart in the centre of the room using post-it notes - the notes designating words or phrases relating to their choice of category:

CATEGORIES	
HR Violation / Stigma	Power
Secrets	Intimacy
Other	Fantasy

The aim was not to settle on a definitive category for each story, but by assigning a category to promote discussion about the intersectional factors relevant to understanding and analysis of sex work. For example, it had already been noted in the group that one of the key attributes of sex workers (both male and female) is that they often carry clients secrets, in that the sex work transaction itself may be a secret but also in that clients may shares secrets about their lives with sex workers that they do not tell to others. This can also create certain kinds of intimacy in sex work, beyond the intimacy or otherwise of sexual acts, and also pertains to power (in holding secrets the sex worker may hold a certain kind of power, although in many ways the client may determine the parameters of what is shared and concealed in the sex work relationship). These complexities were explored in the exercise with the aim of developing approaches to male sex work that move beyond prevailing associations with poverty and survival, placing such issues within a mutually social and psychological understanding. Three of the stories and their classifications are given here.

**Story 1.** In 2009, I went to a park in Nairobi that had a lot of homeless male sex workers. They would sweep the park during the day for money and use the money at night to pay for a bath, shelter, drinks etc. At times they steal from clients to survive. I enquired from them if they have condoms and they informed me that they do not use them.

I met one man who told me how he was not paid the night before by a client. The client also verbally abused him. He seemed traumatized and I offered to take him to a clinic for counselling. While at the clinic we took an HIV test and he found out he was HIV positive. We went to a government hospital. The nurses just stood in front of everyone and shouted out loud to the people waiting for assistance: “If you have HIV, go to room 9, TB room 12, STD room 8”. Everyone left at that moment.

Nurses often call each other when they find out about being a male sex worker saying: “we have never had such a case” or “come look at what his type of STD, we have never had it at this hospital before”

This story was predominantly characterised under the category of 'stigma' with the following phrases and words:

“Stigma, psychological discrimination and what others think of me”

“Human rights violation as everyone is entitled to health care services.”

“The male sex workers probably feared their clients finding out that their status if they were to be spotted going to the room of HIV positive people.

The category of 'other' was also used:

“Fear of healthcare providers”

“Ignorance”

“Homelessness”

**Story 2.** After a meeting at work with sex workers, I was cleaning the office when a sex worker from the workshop knocked and asked to talk to me. He said he preferred to talk at his house which was nearby. We had sex and I gladly paid because it was worth it.

The next day the sex worker went to the office to borrow money from me. The same evening he returned to pay. I expected money but we had sex to repay me.

This story was predominantly categorised under the heading of 'power':

“Sex worker used his power to negotiate”

“A bit of manipulation but the way it was told suggests it did not matter.”

“Good context, there was desire and it was electric. It worked well for both parties. But power could have been misused; the sex worker could have gone to the police and opened a rape case.”

“I have used that strategy, a client underpaid me and I called the police on him to open a case of rape, so I can relate.”

**Story 3.** I have introduced a few people to sex work. One of them was a 22 year old boy, Josh\*. I recommended clients to him and told clients about him. Josh was bright, outspoken, and attractive. We became good friends and a close relationship. He was one of my best friends.

A client, I knew well, Peter\*, wanted a companion. Peter was an old guy but I recommended Josh and they got together. They established a serious relationship.

Last year November Josh and I attended a LGBTI conference. The conference had two courses that we had an option of completing, one on HIV and the other on LGBTI. Josh and I decided to complete both courses. After a week on the HIV course, the facilitators disclosed their status and told us we had to take HIV tests and disclose our status as well. I was not comfortable with the fact that they had made it a requirement to successfully complete the course because it is a private decision that each individual has to make whether to disclose or not.

I stayed on the workshops but kept thinking about it. I decided I was not going to take the test. As a result I had to leave the conference; Josh decided to do the same. I was told that after Josh and I left, the others, everyone at the conference left. And the facilitators were not happy about the outcome.

Sometime thereafter my sister told me that Josh was sick. I was surprised because I had not spoken to Josh for a while but I thought we were close enough to talk to each other about it. At that time I was very sick too. I did not know what was wrong with me, I asked my mother to take me to the hospital because I thought I was dying. The doctors had discovered that I had a really bad fever.

I thought about Josh and decided to visit him at his house. When I saw Josh, I could not believe what I saw. He had a gorgeous physique and it was all gone. He had found out that I was sick too and he would not talk about his health. He kept asking me if I was fine. He was so concerned about me when all I had was a cold and he was in a really bad state. Every time I asked him if he was fine he would dismiss it and claim he is fine.

Later when I was at training, I received a message that Josh was in taken to the hospital. To his last moment, he didn't tell anyone that he was HIV positive. To go for testing he had to be accompanied by a supportive person otherwise the clinics would not allow it, I

found out that at one point, Josh had sought help from my sister to go for testing but it never happened.

I found out thereafter that Peter always refused to use a condom, so intentionally infected Josh.

The memories of leaving the HIV course, introducing Josh to Peter, Josh refusing to talk to me about it still on my mind.

(\*for reasons of confidentiality real names are not used here)

This story provoked strong emotional reactions, and was multiply categorized across 'stigma', 'power', 'secrets' and 'other', with the following as some of main emotions and associations evoked:

“Human rights violation”

“Double stigma”

“Surviving secrets”

“Remorse”

“Lack of information”

“Sadness, guilt, loss”

“Betrayal”

“Guilt”

“Didn’t have someone to trust”

“Myth: sleeping with virgins to cure HIV or STD’s, common in Africa and Europe”

Overall this exercise significantly added to the 'portrait' of male sex workers (in Africa) that was developed in the workshop overall. Male sex workers' experiences cannot be easily classified, or characterised in a linear sense through associations with poverty, survival sex and HIV. Whilst all these issues are important to an understanding of male sex workers experiences and vulnerabilities, the workshop significantly added to a more complex and nuanced analysis of male sex workers lives. In particular the workshop moved analysis of sex workers lives and experiences away from classification into terms of cultural labels or accounts of risk practices

toward a more personal, psycho-socially oriented view of sex workers' life-worlds. Male sex workers not only sell sex but are involved in complex relationships of power and intimacy with their clients and stakeholders such as health care providers and police. Male sex workers may be the bearers of secrets, which can empower them, but also limit their capacity (if sex workers reveal secrets about their clients they will likely lose their clients). Male sex workers may also be clients in some circumstances. Some reported that they would procure the services of another sex worker. This is quite common with male sex workers who do not identify as gay, and their encounter with female sex workers, reinforce their "gender construct" as heterosexual. Other male sex workers have reported buying sex from either a man or a woman to complete their sense of personal sexual frustration that they may have experienced whilst with their clients, whilst others reported that it gave them a different sense of power: they were paying for a service, and could demand a sexual approach and activity that dovetailed with their desire at that given point in time.

## **In-country work: Discussion groups in Kenya and Namibia**

Developing out of the Johannesburg workshop follow-on research discussion groups were held with male sex workers, in-country. For logistic and financial reasons these were held in two of the participating countries, Kenya and Namibia. Work in each of these contexts was facilitated by Paul Boyce and Gordon Isaacs respectively, along with John Maina and Clifford Duncan (in Nairobi and Mombasa) and Gordon Isaacs, with Nelson Goagoseb and Abel Shinana in Namibia. Discussions were based on, but extended the themes and issues explored with the research methodology described above, although again for logistic and financial reasons discussion groups took place over shorter periods of time.

### **Kenya**

31<sup>st</sup> March – 7<sup>th</sup> April, 2011: Nairobi and Mombasa

Venues: Public park in Nairobi (open air – shaded area under a tree); Office of LGBT/Sex workers CBO in Mombasa

25 participants: Because of the lifestyles of participants it was decided that the most appropriate approach to focused groups would be to conduct a group for between 4-6 sex workers per day during the visit to Kenya. Three groups were conducted in Nairobi and two in Mombasa, each group lasting for approximately two hours, with informal feedback and discussion in addition.

Group identity: Participants had varied identities, which are difficult to quantify definitively. The majority self-identified as gay men. Four participants identified as transgendered. One respondent self-identified as bisexual.

Average age: 24 years

Languages: English and Swahili.

Facilitators: Dr Paul Boyce (Nairobi and Mombasa), Mr John Maina (Nairobi), Mr Clifford Duncan (Mombasa)

*Note:*

Each group was, in its own way, affecting and moving for participants and facilitators alike. Participants were generally known to one another, and this facilitated sharing, notwithstanding secrets and confidences that would not have been shared (and which to some extent would not have been appropriate). Participants were engaged and reflexive throughout the discussions and the themes and topics each seemed to resonate with participants' experience. With consent, all group discussions were recorded. Each participant signed a brief consent form and the boundaries of consent were explained, along with the ethical responsibilities of the researchers.

*Introduction*

At the start of each meeting the nature and purpose of the research/discussion groups was discussed, and it was explained that they had grown out of a previous workshop that had taken place in Johannesburg (in which John Maina and Clifford Duncan had been participants). The research was explained as both seeking to find out more about the lives of male and transgendered sex workers, from their point of view, and also as an initial stage in what is planned as a longer term strategy to develop new research conducted for and by sex workers in Africa. The research was also presented as seeking to inform and improve representation of male and transgendered sex workers in regional bodies, such as ASWA, and also within national HIV prevention and rights-based actions.

The focused group was based on seven focused questions – each one having an underlying hypothesis [research assumption]: All questions were read to the group, re-explained, and dealt with individually. No question/statement was rated in terms of importance or linear priority:

### **Question One:**

“How did you get into sex work?” [ Research assumption]: exploring similarities and differences in personal stories, part of a narrative of life experience, any sense of exploitation, recruitment, and family background/socio-economic variables as contributing factors]

The overarching theme, common to almost all participants, was that sex work was initiated and bound-up with self-realisation and familial rejection in respect of same-sex sexuality. Most participants spoke of coming to understand themselves as ‘gay’ (and this was often the word used in English) in their late teenage years and that this catalysed a move away from the natal family – either through explicit rejection or as a matter of choice (although choice in circumstances of restraint). Some participants maintained familial linkages, with visits home. Indeed, for some, heterosexual marriages were maintained, although wives and children typically lived in other, regional towns. For other participants relations with any sense of family, per se, were completely severed.

In all these complex circumstances sex work had been taken up as a means of survival (in absence of any other means to earn a living). However, sex work was also a vital practice within which participants explored and came to understand and live their sexualities. Sex work was rarely described as being entered into as a means to earn a living only, but also as a form of self-expression and as a context within which understanding of self as ‘gay’ (or as same-sex desiring) were explored and consolidated. In this sense sex work comprised a way to ‘be oneself’ at a profound level, and indeed was often expressed as inseparable from a sense of oneself as sexual in any terms.

### **Question Two:**

“What has sex work brought into your life?” [ Research Assumption] positive experiences, negative experiences, sub-texts of understanding sex work as work. Romanticizing sex work on the one hand and internalized sex work phobia on the other: exploring for contradictions (especially in respect of group influence –pressure to conform and individual differences).

Respondents had mixed feelings and experiences. Given the complexity of reasons for entering sex work in the first place, sex work inevitably brought complex consequences into people lives. Earning money was a significant and obvious factor, but the relationship to money earned in sex work was reported as far from straightforward. Money reportedly came and went quickly. In part this was because sex work costs money – buying clothes, buying drinks in bars etc. in order look

attractive and to 'hang-out' in places where clients might be met. Moreover, respondents did not always feel good about the money they earned during sex work, and so spending it on oneself (clothes, having a good time etc.) acted a strong antidote to any sense of debasement, humiliation, shame or pain accumulated in sex work. In addition, these complex relationships to money earned were also closely synergized with self-realization and expression as gay, transgendered or same-sex attracted, such that self-presentation as a sex worker and as gay man/person of transgender were generally, and perhaps inevitable, inseparable in people's experience.

Given the commercialisation of gay and of transgendered spaces (particular bars in Nairobi or Mombasa for example) self expression through consumption are an intimately interconnected facet of life as a sex worker and as a same-sex or transgendered sexual subject. Sex work was regarded as a positive and negative life attribute in this context, as something that allowed a certain kind of freedom, but which could also be a burden. For the majority of respondents sex work kept them 'ticking-over financially' – they earned enough money to live on, pay rent, drink get-by etc. but on the whole that was it. Few respondents reported having any savings, most reported periods of financial insecurity, when clients were scarce for example, and when paying rent was not possible. Given this, sex work brought significant insecurity into the lives of participants – many were worried about the future. Some were acutely conscious that sex work is an age limited profession – certainly by late 20's early 30's clients become harder to find for many. This is especially so because the majority of male sex work in Kenya (as perhaps elsewhere in Africa) is oriented around the consumption of youthful, sexually passive boys/men/people of transgender. Models of the macho, older male sex worker are present but not as culturally prevalent in terms of sex work between men. A key attribute of sex work, then, was anxiety about what happens after sex work – what to do on exiting the profession, with no savings, and lack of recognised work skills and experience.

### **Question3:**

What are the differences (experiences and feelings) of selling sex, and having sex non-commercially [research assumption: Is there a clear differentiation, or is there a blurring of boundaries?]

This question provoked mixed responses. For some there was a clear differentiation. Sex for commercial reasons may not have much or anything to do with personal desire, but sex with a partner of choice is about sexual satisfaction, love or passion etc. Yet, in as much as this

differentiation held true, ambiguity in intentions and feelings was also common. For some, clients might actually be sexually desirable, or they may perform other affective roles in terms of ongoing financial and emotional support. Indeed this role was something that some clients sought, especially long-term clients. In these contexts respondents reported distinct blurring in terms of intimate expectations and consequences, in term of both their own and clients' feelings.

The internet was a site where there was a blurring between sex work and non-sex work connections. Some respondents cruised on sites such as Gaydar and Planet-Romeo with mixed intentions, looking for boyfriends and looking for clients simultaneously. When meeting men on the internet discussions tended to be longer (over a number of days) and more personal than when meeting clients on the street or in bars. Again, intentions could be blurred, and it was felt that given sites such as Gaydar and Planet-Romeo are as much about gay dating as about commercial sex the intentions of potential clients could be hard to interpret. This in itself was a broader attribute of sex work. Even when meeting clients in bars respondents spoke of expressing their intentions in ways that could be ambiguous, as they did want to put potential clients off by declaring themselves as a sex worker *per se* (which could be off-putting for some). Moreover, a night out with man met in a bar could be ambiguously commercial, involving having drinks bought, a meal etc. but no other explicitly commercial transaction. Sex worker and client roles are not always clear and dichotomous. Sex workers also buy sex. Some respondents spoke of spending money earned during sex work to pay for sex with other sex workers whom they desired. This was especially important given having sex so often with un-desired partners.

In contexts of both sex work and non-commercial sex a sense of intimate yearning and discontent was a common experience. Whilst some respondents had long-term (male) partners these was a minority and most were single. Looking for boyfriends in gay social, cruising and commercial milieux is similar to looking for clients – and intentions may be blurred. In part, given a socio-cultural context where same-sex sexualities are illegal and stigmatised (although certainly more tolerated in Kenya than they used to be) same-sex relationship are especially difficult to sustain, whilst anyway patterns of male same-sex sexuality and relatedness are typically predicated on high rates of partner change, in many countries and contexts. Even where same-sex sexualities are not illegal same-sex sexualities are still stigmatized, and stigma is internalized – all of which prevail against social acceptability and so forth. This is similar to stigmas faced in sex work and in this sense the psycho-social dynamic that is experienced, and the kinds of issues that are worked through in the context of commercial and non-commercial relationships and sexual practices are similar – transient intimacies, a need or yearning for

security (emotional or financial) and the short-term securing of emotional and/or financial gain in and through sex, with aspirations and fantasies regarding long-term relationships and security often thwarted or sabotaged. These themes and feelings were palpable in all discussions during the research, and point to an especially complex set of circumstances that need to be addressed in future work on male (and transgendered) sexuality and sex work in Kenya (and elsewhere).

#### **Question4:**

“Where do you feel most at home?” [Research Assumption] To explore a sense of belonging, connectedness, and support. Is there a stereotype of “atomising” a sex worker, and can kinship and other social connections form part of the sex workers’ world?

Despite the prevailing narrative of family rejection, there were still some participants who lived with their natal families. Whether they felt at home there was another question. For many respondents, wherever they lived, a sense of belonging or a ‘being at home’ was difficult to achieve, given stigma etc. on grounds of both sexuality and sex work. Respondents reported feeling at home with fellow male and transgendered sex workers, and sometimes with other LGBTI people – as a kinship of choice and commonality (although fellow LGBTI people could also reject them on the basis of their sex work and social status). Being ‘at home’ with other sex workers was manifest, for example, in the way they would look out for one another when working on the street etc. This relationship of care was also extend to and from female sex workers, although in some contexts there was strong rivalry and mistrust between female, male and transgendered sex workers.

Maintaining a home could also be complex. The majority of respondents rented lodgings – typically small rooms in poorer neighbourhoods. Gossip among neighbours could be an issue in case of bringing boyfriends or clients home (and indeed may avoided bringing clients to their homes for this reason). Quite a high number of respondents reported that they moved often - frequently to escape escalating gossip and neighbourhood hostility, or in cases of not be able to pay the rent.

This was not the case of all though. Some maintained good relations with neighbours, being polite, congenial etc. Home, when it was available (as one’s own rented room or elsewhere) was also reported as a haven, the place one returns to after a night out at work – one has made it home safe after an evening of exposure, and potential risk on the streets, in the bars and in client’s rooms, cars etc.

Overall feelings about home were especially salient. Given multiple experiences of rejection, alienation, illegality (in terms of sexuality/sex work) risk and vulnerability in respondents' lives, a sense of homelessness, of 'not belonging in the world' other than as a marginal (perhaps expendable) player were pronounced and tangible amongst respondents in both Nairobi and Mombasa. This has been an important finding of the research overall and warrants significant further investigation, especially in terms of HIV prevention research and intervention as pertaining to subjective and social contexts of risk, self-care and so forth.

### **Question 5**

"How do you understand your sexuality? With what 'label' do you identify?" [Are sexualities understood out of 'categorized typologies': how does identity, gender role and fantasy impact on sexual identity?]

Many respondents identified with the word 'gay'. This was the prevailing term, normalized with positive associations. Other words such as 'shoga' (Swahili slang – indicating feminine man) had negative associations and were common insults in the streets in some contexts, but could also be appropriated and used (subversively and playfully) among sex workers themselves.

Similarly 'sex worker' was a term that most respondents were familiar with – speaking of themselves in such terms. Again the term had positive and negative associations, implying a sense of unionisation or collective experience, but also a marked and stigmatised identity.

### **Question 6:**

"What are your views on the 'changing legal, social cultural contexts of homosexuality, and MSM in Africa –in general, and then specifically in Kenya: [Research Assumption]" To unpack/explore experiences of foreign sex work concerns, the impact of African thinking on homosexuality as a systemic influence on gender and sexuality, minorities, including MSM/transgendered, and human rights abuse.

Kenya is witnessing nascent, even pronounced social transformation. In cities such as Nairobi and Mombasa social spaces for gay and other men who have sex men are increasingly apparent, with a number of bars tolerating and to some extent accepting LGBTI clientele. These changes reflect a wider momentum of change in Kenya, where recent and concerted governmental policies aimed at promoting economic growth and liberalization are contributing toward changes in social attitudes and new cultures of individualism, as a younger generation seeks new social mobility and personal choice in working, and self expression in consumption. This has tended to

promote a new global outlook. An emerging, if uneven, tolerance of LGBTI communities and rights are a facet of this social change in some urban areas. It is notable, for example, that the prime minister of Kenya recently made a statement calling for the arrest of gay couples in the country. Interestingly he was later compelled to retract this statement, as an outcome of civil society activism, including from the LGBTI community. This reflects the socio-cultural context of LGBTI issues in Kenya, where political and social attitudes reveal strong homophobic prejudice, whilst new and emerging social attitudes are acquiring increasing legitimacy. Respondents were aware of these changes - especially living in Nairobi and Mombasa where new attitudes are most tangible.

Nonetheless, Kenya experiences an enduring culture of homophobia. Same-sex sexualities are heavily stigmatized and LGBTI people are often subject to abuse and harassment. Police officers are among the perpetrators of such violence, or in case of other perpetrators police are typically reluctant to support and protect victims of homophobic crime. Similarly in health care settings, people of same-sex sexuality often face discrimination, and for example gay men and other men who have sex with men will typically encounter hostility and discrimination if reporting anal STD symptoms, despite new Ministry of Health guidelines on male-to-male sexualities, sex work, health and HIV. This occurs in the context of an especially high rate of new HIV infections among men who have sex with men in Kenya – reportedly fifteen percent of all new HIV infections in 2010. Transgendered people are also especially vulnerable and there are no health guidelines especially addressing their needs, such that as yet little is known about their health and social vulnerabilities, including those that arise in sex work.

Against the background of these issues respondents reported ambiguous feeling about their circumstances. Many felt that, outside of South Africa, Kenya was probably the safest country in the region in terms of being a man who has sex with men, person of transgender and sex worker – certainly in cities such as Mombasa and Nairobi. Any yet, stigma, harassment and violence were common, especially when selling sex. A number of respondents had been arrested and some had spent up to six months in prison for sex work (selling sex is not criminalised per se in Kenya but living off the proceeds of sex work is illegal). Respondents were also aware of the volatile moral climate elsewhere in Africa, and with Uganda a bordering country the recent murder of David Kato (a same-sex sexual rights activist) and the recent efforts to pass an anti-homosexuality bill in the Ugandan parliament such concerns could feel especially close. The socio-moral position of homosexuality in Africa contributes toward a sense of social anxiety and danger, even in contexts where in much of day-to-day life in Nairobi and Mombasa most respondents also reported

feeling relatively free (having found some degree of freedom in sex work). These attitudes reflect a very complex set of circumstances, which especially impact in the lives of respondents, and which also require significant further research in respect of rights-based work on sexuality, HIV and health in Africa.

### **Question7:**

“What makes you vulnerable, and what makes you safe “(thoughts, places, people and behaviour)

[Research Assumption: sense of risk taking behaviour, wellbeing, and resilience, accessing health services, and link between risks and HIV]

For many respondents sex work made them feel both vulnerable and safe. Selling sex was a way to purchase some freedom and autonomy, and yet was also risky and dangerous. Clients could be violent and aggressive for example. In case of violence, or otherwise, there are many scenarios in sex work that promote vulnerability and risk taking. Many respondents reported unsafe sex during sex work, either by choice (at the clients insistence), by force, or in case of inhibition/lack of self-control in scenarios of excessive alcohol or drug consumption. Indeed, drinking to excess was commonly reported among many respondents, as a part of the ‘scene’ within which they worked and socialised and as something that made sex work tolerable. Other risk included significant police harassment and violence, which was often sexualized (as rape/forced sex) – and typically unsafe (no condom use).

Risk, was in many ways reported as an intrinsic part of sex work, in that there was always uncertainty in terms of what may happen in a sex work encounter. The work is especially intimate and exposing - rife with potential for physical violence and so forth. To some extent these risks had become common-place for respondents and they were inured to their effects. In other ways these risks were felt keenly and constantly (and hence use of drink and drugs etc).

This ‘risky world’ of sex work (as characterised) was also a haven, however – a place *to belong*, to find connection, and conversely, to feel safe. Sex working, for the respondents, was typified as a way of ‘being themselves’ of finding social connections and support with other sex workers – and of realising ones sexuality. A sense of *social alienation* and *self-realisation* were reported as symbiotic and this was manifest in complex attitudes and experiences of risk and safety among respondents. Safety and risk are not polarised variables in the lives of the sex workers interviewed in this study, but constant and close companions. This is especially important in

terms of HIV prevention and in interventions aiming to promote safer sex work – pointing to the need for stronger psycho-social ways of understanding and responding to the vulnerabilities and needs of (male and transgendered) sex workers, which address their total life and subjective experience.

## **Namibia**

18<sup>th</sup> March, 2011: Windhoek

Venue: UN: Public park (open air – shaded area next to small river.)

14 participants: Group identity: 12 gay male sex workers, two transgendered sex workers (gay), one MSM.

Average age: 24 years

Language: English.

Facilitator: Dr Gordon Isaacs

This group was the follow-up from the previous day's session, where Life Story, Labels, and Identity, Geographical and personal mapping were explored. The afternoon session had unpacked the Social context, Sexual practises and Risks faced by Male and transgendered sex workers. This was an in-depth situational analysis –conducted by two sex workers who had undergone the first intervention/research in Johannesburg: A training the trainer process was adopted. The facilitator participated as an additional resource, and assisted with the workshop agenda, content and recording.

All participants agreed to the focused group session and brief one on one session with some of the participants was conducted informally at the request of certain members. This was necessary, as some participants wished to disclose some detail they believed was personal. This data is captured in the report that follows.

*Note:*

The mood and culture of this group was highly participative, interactive and cohesive. No splitting was observed, and some members acted as natural gatekeepers, and assisted with control. Humour seemed to be a catalyst for discussions, and levels of trust were apparent .There was no silence, and no member was silenced or left out. The group took over two hours, and

fifteen minutes was reserved for termination, feedback, and reflections. Four members had brief one-on-one sessions.

### *Introduction*

The nature and purpose of the group was discussed, linking it to the previous session, and explaining the significance of this group, as well as group expectations. Furthermore, the group was encouraged to keep contact with the Namibian leaders for follow-up. They were also told that the findings of this research effort will be made available to them via the Red Umbrella Project. A draft of the first research has been lodged with Red Umbrella.

The focused group was based on seven focused questions<sup>7</sup> – each one having an underlying hypothesis [research assumption]: All questions were read to the group, re-explained, and dealt with individually. No question/statement was rated in terms of importance or linear priority:

#### **Question One:**

“How did you get into sex work?” [ Research assumption]: exploring similarities and differences in personal stories, part of a narrative of life experience, any sense of exploitation, recruitment, and family background/socio-economic variables as contributing factors]

The majority of the respondents used the phrase “introduced” into sex work: on unpacking this it was clear that the introduction was by an older person, in many instances a male or female sex worker –and those introductions were initiated in the context of clubs, bars and shebeens. Some spoke about financial/transactional reward as the vehicle for on-going sex work, and one transgendered sex worker spoke about early sexual experiences ( pre-pubescent), where a form of barter took place ( sex for home necessities). One respondent mentioned family chaos – and running away from home took him into the streets, where he quickly “learned the trade”. (Despite probing, no mention was made of coercion, trafficking and recruitment).

#### **Question Two:**

“What has sex work brought into your life?” [ Research Assumption] positive experiences, negative experiences, sub-texts of understanding sex work as work. Romanticizing sex work on

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<sup>7</sup> The same format for questions was followed in both Namibia and Kenya, although the research processes differed somewhat, due to time and funding. More groups were conducted in Kenya, with fewer participants in each group as compared to the work in Namibia where fewer groups were conducted, but with larger numbers in each.

the one hand and internalized sex work phobia on the other: exploring for contradictions (especially in respect of group influence –pressure to conform and individual differences).

The collective response was financial gain. However, the central theme seemed to reflect on the following:

- Freedom
- A sense of *belonging* to a specific sub-culture [on further exploration it was clear that for this cluster of respondents, they claimed an “identity”: we “are moffie sex workers”, where “moffie”, for them was a clear non-discriminatory way of being received by society, on the one hand, and as gay sex workers on the other.
- Independence
- Education: This was explained in the context that some of them had used the money gained from sex work employment to further schooling. This raised an important question around the age of starting sex work. With the exception of two participants, the others had experienced selling sex before reaching 18 years.

### **Question3:**

What are the differences (experiences and feelings) of selling sex, and having sex non-commercially [research assumption: Is there a clear differentiation, or is there a blurring of boundaries?]

The majority of the respondents felt that there was a vast difference for them in respect of their clients, and intimate connections with significant others. They raised the question of emotional connectedness coupled with physical attraction as the primary reason. An interesting sub-theme to emerge was that of time and transience. Many clients are anonymous, and superficial bonding occurs, and the lack of space and privacy prevents emotional unfolding with clients.

Most respondents who claimed to have concurrent primary partners, whilst doing sex work revealed non-disclosure concerns about sex work, and for most, it was hidden from their partner. There have been experiences of domestic abuse when the partner had found out. This attests to the point below, whereby the sex worker is reluctant to bring in a condom to the relationship for fear of rejection and/or violence.

Some spoke about specific sexual acts with clients that significantly differ when they bond with sexual partners out of the context of commercial transactions- the words “trust”, “intimacy”, “attraction”, and sexual styles: e.g. penetration, and kissing were significant. However with some

clients, depending on monetary gain, a condom might not be used. Many of the respondents were able to articulate (with some probing), that sexual intimacy with a partner and condom use is difficult, as their sex work identity is hidden, and there is an assumption from the partner that the sex worker is safe: In addition the sex worker is reluctant to introduce protected sex into the relationship for reasons described. : This entire question alerted the researcher to vulnerabilities in respect of protected sex, sexual relationships, intimacy, trust, and relationship violence. Living with secrets formed part of the ethos of this section.

#### **Question4:**

“Where do you feel most at home?” [Research Assumption] To explore a sense of belonging, connectedness, and support. Is there a stereotype of “atomising” a sex worker, and can kinship and other social connections form part of the sex workers’ world?

There seemed to be an inclusion and exclusion theme emerging. There is a strong connection to the sex work fraternity -- male, female and transgendered, (this is where they felt most at home), and an exclusion from mainstream stream society. This was clearly witnessed when the researcher did an outreach excursion into the pub/bar/tavern areas: Male and female and transgendered sex workers had had specific indoor venues, where cross- socialising occurred, and client contacts made.

There was a collective sense they felt like outsiders within the socio-cultural context of their life space. However, some had significant relationships with a family member, and felt included in this context. They were invited to parties, and other social gatherings – primarily because they were gay, and not necessarily because they were sex workers. Very few attended formal Church services. The social context revolved around meeting friends, drinking, and business. There is a strong allegiance to ethnic identity, but little sense of extended family kinship.

#### **Question5:**

“How do you understand your sexuality? With what label do you identify?” [Are sexualities understood out of ‘categorized typologies’: how does identity, gender role and fantasy impact on sexual identity?

Interestingly the group (with the exception of one male sex worker) including the transgendered sex workers identified themselves as gay: preferred term: “Moffie”. Thereafter they were gay male sex workers, or male sex workers. The term 'MSM' for them means a heterosexual man who has sex with another man for money/favour OR is bisexual.

### **Question 6:**

“ What are your views on the ‘changing legal, social cultural contexts of homosexuality, and MSM in Africa –in general, and then specifically in Namibia: [Research Assumption] To unpack/explore experiences of foreign sex work concerns, the impact of African thinking on homosexuality as a systemic influence on gender and sexuality, minorities ,including MSM/transgendered, and human rights abuse.

The group expressed a sense of hope, particularly around their close experience of the South African constitution –with reference to sexual orientation, and the Bill of Human Rights. However they felt concerned about male (and female) sex workers who have fled countries because of human rights abuse. Trafficking, homelessness, and xenophobia seem to be on the increase. Constant threats of deportation exist, and they believe it will take a long time for the African continent to accept male-to-male sexualities and sex work. In Namibia, despite the fact that no articulated legislation exists concerning same-sex sexualities (there are sodomy laws), they believe the oppression and abuse directed towards them is institutional driven, and not community driven (policy makers, politicians, and police.

There is easier access for them to public spaces, more tolerance from some quarters of civil society, and an incremental visibility of gay doctors, nurses and teachers –who do not mask their identity.

Health facilities are still discriminatory, and gender insensitive.

### **Question7:**

“What makes you vulnerable, and what makes you safe “(thoughts, places, people and behaviour)

[Research Assumption: sense of risk taking behaviour, wellbeing, and resilience, accessing health services, and link between risks and HIV]

The following risks were identified (vulnerable):

- Health –HIV –linked to condoms and absence of water based lubricant: With no water-based lubricant, as well as more money offered for unprotected sex, they believed they were at high risk for HIV infection, STI's and Hepatitis.
- Increase in drug-substance abuse, where drug of choice is crack cocaine, and alcohol abuse,

- Violence towards them by clients, especially around non-payment or poor service delivery
- Domestic violence between sexual/intimate partners is high. One sex worker was stabbed in the face.
- Police arrest (double stigma –sodomy and sex worker): No legal channels afforded them for charges, - rape by police.
- Client exploitation is high on agenda, including and receiving threats of physical violence.
- Homelessness is emerging as a problem.

Safe spaces for them correspond to their: collective identity” of “family of choice” - the sub-culture of sex work, and the bars, clubs, venues, etc. where they feel safe and have a sense of agency.

## Conclusion

The data presented in this report combine to build-up a complex and nuanced account of the lives and life-worlds of male sex workers in the Southern and Eastern Africa region. A strength of the methodology adopted in the study (both in the formative workshop and in the follow-up activities) was a focus on sex workers' narratives amidst the creation of discursive spaces wherein intimate and personal views of male sex work could be shared. This added analytical depth to explorations of social vulnerability, sexual subjectivity, 'belonging', risk and so forth.

The research consciously countered approaches to the study of sex work that focus on the classification of 'types' of sex worker or sex work, or which focus on the categorization and quantification of sexual risk practices. Whilst such research can certainly engender useful information, we were also concerned that in terms of analysis of sexualities and sex work as lived day-to-day practices such studies typically offer only a partial or limited perspective. In basing our research and analysis within first-order accounts of sex workers' lives we have sought to ground the research with a strong, experiential epistemology, which is also personally and emotionally sensitive. Personal developmental milestones [family background], language, vernacular, cultural and tribal affiliations, including inner city and peri-urban influences - and migrant sex work populations -have created mini-sub-cultures that often contain specific mores, codes of behaviour, class divisions and gender rivalry . This anthropological diversity must be addressed -sensitive to the needs, aspirations and participation of all concerned. This in turn can

offer important insights into sex workers life experiences in a manner that can offer new and significant pathways for addressing social vulnerability, rights, risks, HIV prevention and health.

### **Recommendations:**

- More experiential and qualitative research should be undertaken. Far too much research has concentrated on epidemiology, and the human face of male sex work within the diaspora of sex work has been neglected. Personal narratives provide testimony and subjective content unpacks crucial information that could inform policy, health and ultimately legislation. A clear example from this research was the seminal difference in certain risk factors articulated by the respondents -with a range of responses including substance abuse, childhood factors, abuse, and gender identity struggles.
- Because of stigma, marginalization and powerlessness, there is a compelling need to develop a male sex work coalition in Africa. In the first instance to raise socio-political awareness within civil society and legislators, and secondly to give a voice for male and transgendered sex workers in a manner that dispels myth and deconstructs so called male sex work homogeneity
- With the advent of male sex work forums, such as the newly developed 'Sisonke' male sex work group in Cape Town - ASWA might readily embrace male and transgendered sex work into its coalition strategies, namely to promote human rights, counteract gender based violence and strive towards legal reform.
- Male sex work is often mistaken as an adjunct of homosexuality, and male sex work traverses the boundaries of hetero and homo- normative polarities and meanings. Male sex work must be included in the debate of African prejudice towards homosexuality and men who have sex with men.

With a more visible and coherent male sex work initiative linked to an African coalition - such as Sisonke/ASWA - human sexuality, can be placed in a context which is substantially more powerful when engaging with moral codes that fundamentally obfuscate the reality on the ground.

## References and Bibliography (suggested further reading):

Baral, S., Frangiscos Sifakis, et al (2007) elevated Risk for HIV Infection among Men who Have Sex with Men in Low -and Middle-Income Countries 2000-2006: A Systemic Review: PLoS Med 4 (12): e339

Baral S., Trapence G et al (2009) HIV Prevalence, Risks for HIV infection, and human Rights among Men who Have Sex with Men ( MSM) in Malawi, Namibia, and Botswana : PloS ONE 4 (3): e4997

Boyce, P., Huang Soo Lee, M., Jenkins, C., Mohamed, S., Overs, C., Paiva, V., Reid, E., Tan, M. & Aggleton, P. (2007) Putting sexuality (back) in HIV/AIDS: issues, themes and practice. Global Public Health. 2 (1)

Boyce, P. (2007) 'Conceiving kothis': men who have sex with men in India and the cultural subject of HIV prevention. Medical Anthropology. 26. (2)

Caceres, C. F. (2008) Sexual diversity, social inclusion and HIV/AIDS: AIDS, 22 p S45 -S55

Elias, J. and E et al (1998) Prostitution: On Whores, Hustlers, and Johns: Prometheus Books: New York

Epprecht, M. (2008) Heterosexual Africa? The History of an Idea from the Age of Exploration to the Age of AIDS: Ohio University Press: Ohio

Fipaza, Z. (2010) Population -based estimates of MSM Male sex workers in South Africa: seminar: Prostitution in South Africa -Developing a Research Agenda. South African Medical Research Council: Population Council

Geibel, S. and van der Elst, E. M. et al (2007) ' Are you on the market?': A capture -recapture enumeration of men who sell sex to men in and around Mombasa, Kenya: AIDS 21: 1349-1534

Geibel, S. Luchters, S. et al ( 2008) Factors Associated With Self-reported Unprotected Anal Sex Among Male Sex Workers in Mombasa, Kenya: Sexually Transmitted Diseases 35 (8): 746-752

Go, V. F , Srikrishnan, Aylur et al ( 2004) High HIV Prevalence and Risk Behaviours in men Who Have Sex With Men in Chennai, India: JAIDS Journal of Acquired Immune Deficiency Syndromes Vol 35 (3): 314 -319

Gould, C. (2008) Selling Sex in Cape Town. Sex work and Human Trafficking in a South African City. Institute for Security Studies, Pretoria

van Griensven, F. (2007) Men who have sex with men and their HIV epidemics in Africa: AIDS 21: 1361-1362

Isaacs, G and McKendrick, B (1992) Male Homosexuality in South Africa. Identity Formation, Culture and Crisis. Oxford University Press: Cape Town

Kirk Fiereck (2003) Epidemiological disjunctures: a review of same-sex sexuality and HIV research in sub-Saharan Africa: In: Same-Sex Sexuality. HIV, AIDS and Gender in South Africa. [Eds. Reddy, V et al. [www.hsrapress.ac.za](http://www.hsrapress.ac.za)]

Lorway, R., Reza-Paul, S, and Pasha, A. (2009) On Becoming a Male Sex Worker in Mysore: Sexual Subjectivity, "Empowerment," and Community-based HIV Prevention Research: Medical Anthropology Quarterly, 23 (2): 142-160

Magnani, R., Sabin, Ki., et al (2009) Review of sampling of hard-to-reach and hidden populations for HIV surveillance: AIDS 2005 19 (suppl2): S67-s72

Nguyen, V.-K., (2005) Uses and Pleasures: Sexual Modernity, HIV/AIDS, and Confessional Technologies in a West African Metropolis: In: Sex in Development: Science, Sexuality, and Morality in Global Perspective [Eds. Vicanne Adams and Stacy Leigh Pigg] Duke University Press: Durham

Okal, J., Luchters, Stanley, et al (2009) Social context, sexual risk perceptions and stigma: HIV vulnerability among male sex workers in Mombasa, Kenya: Culture, Health & Sexuality, 9999:1

Open Society Institute:( May,2008) Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa [*Executive Summary*], Sexual Health and Rights Project, Open Society Initiative for Southern Africa

Richter, M. ( 2008) Sex Work & HIV/AIDS in South Africa. ARASA: Workshop on sexual and reproductive health. Steve Biko Centre for Bioethics. Wits University

Sarandrea, J. (2009) Drug Use, Sex Work and Social Support in a sample of MSM's [http://www.allacademic.com/meta/p379484\\_index.html](http://www.allacademic.com/meta/p379484_index.html)

Sanders, E. J. (2007) HIV -1 infection in high risk men who have sex with men in Mombasa, Kenya: AIDS Volume 21 (8) p 2513-2520

Smith A., Muhaari, A. et al ( date unknown) Female Clients and Partners of MSM Sex Workers in Mombasa, Kenya - 17<sup>th</sup> conference on Retroviruses and opportunistic Infections. <http://www.retroconference.org/2010/Abstracts/38709.htm> ( sourced 10/11/2010)

Toole, M. M., Coghlan, B. et al (2006) Understanding male sexual behaviour in planning HIV prevention programmes: lessons from Laos, a low prevalence country: *Sex. Transm. Infect.* April 82(3): 135-138.

Tucker, A. (2009) *Queer Visibilities: Space, Identity and Interaction in Cape Town*: Wiley - Blackwell: United Kingdom