

Narratives that Matter:

Community Led Research, Activist CBOs & Development Aid in Nairobi

LIFE as a Male SEX WORKER

Written by HOYMAS Edited by Edwin Kibui Rwigi

Foreword

This book is one of the outcomes of a collaborative research project entitled "Towards Inclusive Partnerships: The political role of Community Based Organisations (CBOs) and the Official Development Aid System (ODA) in Nairobi, Kenya." It brought together activists and scholars from the VU Amsterdam, HOYMAS, Ghetto Foundation and British Institute of East Africa. This research project uses what we call in academia, engaged scholarship. To sum it up briefly, engaged scholarship is research which works with those who the research concerns, unlike many other projects that are about a particular group. Engaged scholarship not only expects that through its methods it can make valuable theoretical contributions, difficult to obtain otherwise, but equally and perhaps at times even more important, it aims to make a difference for those groups and organizations involved in the research as well as have some broader social impact beyond the involved communities. One of the key principles on which it is grounded is that those who daily experience marginalization have a much better idea of what is needed, what stories need to be told than someone from outside. Thus, we combined our efforts in research. One way this was accomplished is through Community Based Research. It is through this method that members of the community are trained to do research, pose questions, get answers, dialogue and write it up. The results of this research process are found in this book.

This book is unique. It creates a space for two very different, but both marginalized and stigmatized groups to tell their stories: gay sex workers who are members of an activist Community Based Organization (CBO) HOYMAS and youth living and working in the slums of Mathare, who are members of the activist CBO Ghetto Foundation. Their stories are outcomes of a one-year research they conducted. While many of the readers of this book are familiar with the subjects, it is a rare opportunity to be able to read narratives told by those who live them daily. At the same time, the stories give insight into the community researchers' awareness of what needs to be changed in society and how their CBOs are working to do this. In this way, the book tells the story of the difference it makes to be part of an activist CBO.

Finally, the book narrates the daily struggles of the members and their organizations for acceptance as activist CBOs in the official development assistance system. Most organizations in the Global South are dependent on the ODA system to thrive. These organisations are however required to comply with stipulations and demands of the ODA system that on some occasions hinder some aspects of community work. Thus, these narratives are filled with vision and ideas, which can give the reader a lot to think about. To say it simply, this book is a compilation of narratives that matter and I am very proud and happy that I could be a part of this process.

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Introduction

The Official Development Aid (ODA) System increasingly includes Community Based Organisations as partners in development arrangements because they are widely considered critical for sustainable and successful global development responses, especially in the field of advocacy and social transformation, yet they are rarely studied as actors in their own right. Mostly, they are considered as part of broader development arrangements such as strategic partnerships.

Insufficient attention is paid to the power relationships constructed within the ODA system, e.g. between CBOs, I/NGOs (hereafter referred to as NGOs) and inter/national donors, and very little is known about how CBOs on the ground grasp and are influenced by such power relationships in their work. What's more, despite the activist origin and character of most CBOs, research on CBOs involvement in activism is far from extensive while this is a growing field in planned development. To fill these (academic) gaps, and help answer vital policy questions in relation to future funding of CBOs, our research project investigated how the different positions of two activist CBOs in the ODA system constrain and/or enable their potentials to contribute to economic and social justice and inclusive development.

The research specifically looked at:

- 1. how access to funding influences the issues CBOs prioritize and the ways they address them;
- 2. the ways in which CBOs participate and contribute to policy making with government institutions;
- 3. how involvement in different networks and alliances strengthen and/or weaken CBOs political roles;
- 4. how CBOs' daily practices of dealing with urgencies, decision-making, capacity building, outreach work, donor demands, etc. increase and/or impede their political roles and;
- 5. what CBOs members' experiences reveal about their relationship with and effectiveness of the CBO in empowering their members to manage and navigate injustices.

This research focused on two specific cases: a gay sex worker-led CBO (called HOYMAS) and a social justice CBO focusing predominantly on police violence and economic justice (Ghetto Foundation). Both CBOs operate from low-income neighbourhoods in Nairobi. The former is well established in the ODA system, whilst the latter has only recently accessed it but has a long history of community organizing outside this system. The two different positions within the ODA system and organizational histories allowed for a comparative analysis on their positioning and ensuing political processes, relationships and strategies; allowing us to observe from the ground the different practices, interventions and projects that are developed and implemented from their different positions.

We employed various qualitative methods to investigate the everyday dynamics and practices of the two CBOs, their interactions with the communities they aim to serve and represent, with other community-based organisations, and with other (more powerful) actors in the ODA system. Our methods included a 3-month literature review and 15 months of empirical research. The empirical part involved a wide variety of qualitative methods, which were employed by five academic – and 20 community researchers from both CBOs. The research activities in this

period ranged from the more obvious (i.e. participant observations, ethnographic fieldwork, interviews with stakeholders, network mapping and document analysis) to the more unique, namely **Community Led Research and Action (CLRA)** which led to the production of this book.

Altogether, the research was structured as an intensive collaboration between academics, community researchers, CBOs and their members, with constant learning loops between all involved to ensure that the research was conducted incrementally and collaboratively. As a result, the research outcomes provide knowledges that support policy makers working in the ODA system to rethink funding practices and improve the positions of CBOs. Simultaneously, the findings aim to strengthen the capacities of CBOs to improve their positions within and outside the ODA system. The research this book is based on was keen to particularly understand the everyday dynamics and practices of CBOs and the communities they are embedded in from the perspectives of members and residents.

Community Led Research and Action

CLRA is designed and conducted by community members, i.e. those whose lives are affected by the issues being studied. Hence, they lead in all phases of research and action for the purpose of producing useful results and achieve positive changes. Community members thus decide on their own priority issues, and by using community developed and/or approved research approaches they themselves amplify the voices and choices of the wider community throughout the research process and action. The overall aim is to achieve locally relevant and meaningful outcomes that ultimately lead to sustainable social change.

CLRA strives to be:

Community-driven – the community owns the entire process of research and action, from design to knowledge collaboration and action to evaluation and continuation, thus promoting community self-determination.

Action-oriented – the gathered knowledge is translated by community researchers into action during the process of research to engender positive social change and promote social equity.

Long-term – The research and action leave a legacy, both in terms of the utilization of research results into action (and as such durable change), as well as in future collaborations among participants.

Basic principles:

- Community members identify relevant research topics.
- Community members manage the resources of the research and action (financial, expertise, etc.)
- The research process recognizes and utilizes the expertise that community members have.
- The research process is driven by values, including: empowerment, supportive relationships, social change, learning as an on-going process and respect for diversity.
- The research process and results are accessible and understandable to the wider community (i.e. non-participating community members).
- The research process and results consider and adapt to the context in which the research is conducted.

The role of formally trained (academic) researchers in CRLA:

Support ~ researchers support community control of the research and action agenda through facilitating their active and reciprocal involvement in the research design, implementation and dissemination. The research process recognizes and addresses power imbalances between supporting researchers and the community researchers (the participating community members). The formally trained researchers actively abrogate these by 'assisting from behind.' Hence, they facilitate the process by aiding the community researchers to create, synthesize and mobilize knowledge, with the aim of democratizing knowledge creation and dissemination and inform inclusive action towards sustainable change.

Triangulation with additional research methods ~ Formally trained researchers add to the knowledge collaborations of CLRA by conducting interviews, formal participant observations and surveys to have different sets of data speak to each other and verify factual, discursive and everyday accounts.

Through CLRA community members identify and explore particular causes, enablers and narratives of a particular problem in their own specific contexts. This sets the stage for teams to co-construct actionable knowledge together and develop contextualized initiatives to counter the problem at hand and develop resilience mechanisms that are recognized, owned and sustained by the individuals and groups themselves, long after the project period ends.

Through CLRA, participating youths start grasping their own experiences and perceptions of 'others' and of 'selves' as part of broader (historical, political, social and economic) narrative frameworks. This is a key step in opening up and actively developing new thought frames that allows them to take up alternative social positions in society. The second step is underpinning these new thought patterns and positions through long-term action aimed at capital enhancement. This type of research encourages the participating researchers to translate new knowledge into targeted and sustainable action at the tacit, behavioural, relational and system levels. The combination of self-led research and action fosters a distributed form of personal and group leadership while promoting and consolidating relevant (social, cultural and economic) capital and strengthening their senses of belonging to their communities.

CLRA and ethnographic research:

Ethnographic research is a qualitative method where researchers observe and/or interact with a study's participants in their real-life environment. This fully immersive, 'live and work' approach to ethnography is to get 'under the skin' of a problem (and all its associated issues) and thus achieve a comprehensive grasp of the problem as lived by people themselves.

In sensitive contexts, such as those marked by multiple marginalisation and criminalisation, traditional research methods such as surveys and semi-structured interviews are ineffective to unearth and grasp the 'unspoken'. Such methods often lead to socially desirable or acceptable answers. Consequently, research on local dynamics needs to focus on the behavioural rather than the discursive level if we wish to understand the subtleties and tacit knowledge and practices. In the case of community researchers, their insiders' perspective is considered crucial. Through this type of research, community researchers become aware of what they already know (i.e. their lived experiences and that of their peers) and use this as a basis for further knowledge creation, which then informs embodied action. Not only does this promote empowerment among the community researchers themselves, it also allows a profound grasp of highly complex phenomena. This type of ethnography (as conducted by community members) improves our understanding of the dynamics between individual and collective practices and broader social arrangements. In other words, ethnographic accounts allow us to transcend public debates and to focus instead on lived, embodied realities of current societal challenges,

such as inequality, urban violence and exclusion of minorities. Through a conscious presence in various spaces where peers gather, the community researchers (who are also their friends, neighbours, co-workers) are able to analyse unspoken practices.

Through Community Led Research & Action (CLRA) the project worked with members of our two partner CBOs, HOYMAS and Ghetto Foundation, as community researcher (CR) – 10 from each CBO. With CLRA the CRs build rich descriptive contexts of the two communities that the two CBOs work in. Through their research contribution in the CLRA process, the CRs show how CBOs connect to the everyday experiences and social emergencies of their communities in general and members in particular. Their findings as captured in this book describe the relationships between local development contexts and the CBO's activist roles.

While other participatory methods acknowledge the importance of community engagement, CLRA is unique in that it encourages CRs to take the lead at every step of the research and action process. It is both a method and tool encouraging individuals without a 'formal' research background to critically interrogate the nature of their reality. CLRA is a collaborative registry of voices articulating the lived experiences in the margins, which provides deep and personal accounts of social realities relevant to policy design interventions. This is in line with the Freirean tradition of 'problem-posing'. Through CLRA the project also sought to empower the two communities in knowledge generation for social change.

For a period of 5 months, the CRs collected both auto-ethnographic and ethnographic data. They kept personal journals where they recorded their reflections on everyday activities or experiences. They also recorded observations and conducted interviews in their communities. They thereafter shared and discussed their findings with each other at a weekly analysis session. From these analysis sessions the two teams highlighted themes emerging from their data. From these themes they would then propose new weekly research questions for further investigation. This was an iterative process, which cumulated into a large data set describing different aspects of community life through the eyes of community members. The two teams then embarked on a secondary cycle of data analyses in the three months that followed. The two teams chunked and coded their team's data set. Each CR then picked a unique theme emerging from these codes. In line with these code, the CRs further formulated propositions attempting to illustrate the relationships underpinning social phenomena in their community. These propositions guided their writing process. For this writing phase, essentially every CR was working with his or her team's collective data set giving another collaborative dimension to the writing up process. During this time, the CRs read their written research reports to each other in an exercise we called 'community peer review.' During these reading exercises, the CRs gave each other critical and constructive feedback in a process that both validated their findings and built on their writing. At the end of this last three months, the two teams produced 17-community research outputs, which have been put together in this volume for dissemination for a broad audience.

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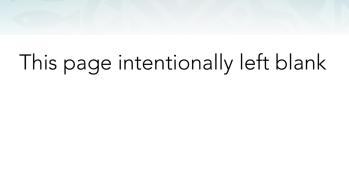
Edwin Kibui Rwigi - 24 June 2019, Nairobi Junior Project Researcher The British Institute in Eastern Africa This research was made possible through a grant received from the Dutch Research Council's Science for Global Development (NWO-WOTRO), The Hague, Netherlands. This research project, 'Towards inclusive partnerships: the political role of community based organizations and the official development aid system,' is part of the 'New roles of CSOs for inclusive development' programme of the INCLUDE Knowledge Platform on Inclusive Development Policies.





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1. Better Safe than Sorry: Data, Security and Government Policies on Key Populations

By Felix Otieno

"Have you ever heard about biometrics?" "Do you know how the biometric system works?" It is essential that we have the answers to these questions before we take a stand on whether key populations (KPs) should have their biometric identifiers registered with the government. According to UNAIDS¹ data sets there are about 130,000 sex workers and 13,000 Men who have sex with men (MSMs) in Kenya. The government, however, believes these figures are inaccurate estimations of the real population size of KPs in the country. Biometric registration involves the collection of KP bio-data such as fingerprints, iris scan and toe prints, and can be used to manage the multiple counting of KPs. Multiple counting is presumably a result of the independent management of data collected by the various drop-in centres (DiCEs), HIV testing centres (HTCs) and clinics serving the KP communities. KPs are known to seek services from several centres at any one time; this is for the most part a matter of convenience. During our weekly research discussions, a fellow community researcher said:

Each CBO runs independently and they own their data independently. So what is happening today is that someone goes there with a different name he tests positive, goes to HOYMAS, and tests positive – this is the same person using different names. You find that that one person has registered severally at different CBOs as three or even five people using different names. So the government is unable to make an accurate report on how many HIV positives we have...

In addition, MSMs and male sex workers (MSWs) tend to particularly register at different DiCEs and clinics with different aliases. They use aliases as a security strategy while navigating their way in society at large and interacting with others in the community. A community member attested to this by saying:

At one CBO I am Chris Mutuku*², at another I am Chris Yana*, at another I use another different name... They (CBOs) know we don't give out our IDs (national identity card numbers). And if I need an ID I go looking around for a random lost ID in the streets. I get away with it because people are never keen when examining the black and white profile picture on the card. I remember this time I went to Silver Springs Hotel to meet a client and then I was told I must produce my ID and I never wanted to give my real ID. So I told the receptionist that I had left my ID in town and would go back for it and would come back. As I was walking I picked an ID, which I presented at the hotel and that was all.

There is generally caution when sharing one's 'real' information to pretty much anyone, be it CBOs or government. Consequently, the government has found discrepancies in the data on the community it has audited from the different centres and CBOs. This has prompted the government through the National AIDS & STI Control Programme (NASCOP) to conduct the Integrated Biological and Behavioural Surveillance (IBBS) study. In countries such as Sri Lanka IBBS has been done to determine the trends and prevalence of HIV and other STIs among KPs. Now, NASCOP aims to collect data on KPs in Kenya by incorporating biometrics in the IBBS.

Under the umbrella of Key Population Consortium, civil society organizations (CSOs) and community-based organisations (CBOs) have, however, taken a stand, "Say No To Biometrics" in resisting biometric registration. MSMs and MSWs are still a criminalized population in Kenya.

¹ See: https://www.hhrjournal.org/2018/07/everyone-said-no-key-populations-and-biometrics-in-kenya/

^{2 *}These are pseudonyms used to anonymize participants in this research project

Homosexuality itself is considered a felony, which could land one in prison for 14 years as per Section 162 of the Kenyan penal code. It is for this very reason that the KP consortium, and the MSM and MSW community in particular, fear that biometric registration could threaten the security of KPs. The community feels that biometrics will infringe upon the fundamental rights of privacy and security of their members. Kenya has a somewhat an accommodative or 'tolerant' policy in respect to the human rights of the LGBTQI. As far as state is concerned, we are in a way left to our own devices. We are "a non-issue," as President Kenyatta once put it when interviewing with CNN's Christiane Amanpour. We are ignored if not left to our own devices, which is better than been actively persecuted by the state. It is important to note that at one point, Tanzania and Uganda had a similar attitude towards the LGBTQI community. This attitude shifted, however, and the current situation in the two countries is worrying; the state is persecuting LGBTQI people in Uganda and Tanzania. The current regime in Kenya might not have issues with KPs, we are however uncertain about what might transpire when there is a change of power. What if a new regime decides to target the LGBTQI community? Wont they not have all the resources at their disposal for a systematic operation if they had our bio-data? It is for this very reason that the community here in Kenya is cautious and vigilant about our security. During one of our discussions on this topic, the Deputy President's past homophobic utterances were highlighted. In light of 2022 succession politics in Kenya, we find biometric registration even more problematic.

The second reason why we think biometrics is problematic is the lack of clarity on how biometric data collected from KPs, will be managed and kept secure. What guarantees do we have, as a community, that unauthorized person with agendas not in the interest of the community will not access the data? If in the last general elections the Independent Electoral and Boundaries Commission (IEBC) digital system was vulnerable to hacking and manipulation, what security guarantees does the NASCOP biometric system offer? We need a strong data system that will protect us. It is only tahrough this that we will be protected from persecutions. There is also the concern over inter-agency integration of data, which a respondent described as follows:

The biometric data that will be taken will be held by NASCOP, which is pretty much the government. As you know, the government in Kenya, there is always that exchange of government every five years so for now you may consider the government as supportive of key populations. But in the next five years things might change and when things change that data might be used to harm to us. As you know when applying for your identification card you fingerprints are taken to identify you. So, if they take the fingerprints of KPs too, they can easily compare them to the ones that they already have. They can deny you public services should they so desire. Services like obtaining a good conduct certificate, which is very important. One cannot get a job without a good conduct.

We would not want the data on our sexuality and medical records to be interlinked with our other biographical and identification data. The two data systems should be independent and separate from each other. But NASCOP is a government agency and the custodian of this data. We know all government departments are interlinked. So, what would stop a homophobic CID boss, who might be friends with the head of NASCOP, from accessing data on KPs? During an interview a respondent asked: "What if NASCOP shares our data with the CID or the police? What if these data is used to persecute us?"

Thirdly, I feel as though the use of biometrics just on KPs alone is a form of stigmatization of the community. It singles out the community. The rest of the public is not expected to register their biometrics to access healthcare services. This makes the community suspicious of the whole idea of biometrics.

NASCOP and National Aids Control Council (NACC) have always stood with the community in the fight against HIV/AIDS. We thank the government for the support it has accorded us so far. NASCOP however needs to meaningfully engage the community in this and other decisions. When we are involved in policy making in areas that concern us we will deliver better than when we are not involved. Every new start of a financial year, for example, NASCOP gives CBOs new (MSM/MSW registration) targets to meet. The process of coming up with these targets is not very clear to me but from what I know, CBOs are not involved in this process. I will use a recent example to support my point. Currently we are doing targeted outreaches. In these targeted outreaches we are supposed to reach 120 HIV positive people in three months. This implies that in each month we register 40 positive clients. These targets are not workable. In our normal outreaches we reach around five HIV positive people per month. We have tried using new tactics and strategies to ensure that we meet these targets but our efforts have hit a brick wall. The most positives we have tested in a month is seven. The targets that NASCOP (and donors) sometimes set are not realistic. The problem is that they view things from the office point of view and not field point of view. They also view things in ideal situations and not in realistic situations. I feel this is the same attitude NASCOP has when addressing the biometric registration issue. We appreciate the value of data. It is through data that we are able to evaluate ourselves. But we must also be cognizant of the security risk posed by biometric registrations. This issue should not drive a wedge between us. It is not too late to come up with a strategy that works for all the involved parties. In this situation dialogue between CBOs and NASCOP will help. This should be done with open mindedness. The opinions of all the involved parties must be taken seriously. As a researcher and also a member of the community I feel there are other IBBS methods that can be used instead of biometrics. These include referral systems and the capture-recapture method. These methods can eliminate multiple counting of individuals. We will always maintain, nothing about us without us.



Felix - A community member holding a "Yes to IBBS, No to Biometrics" sign



2. For Us, with Us: CBO Management, Accountability and Transparency

By Samson Otiso

During our research project accountability and transparency came up a couple of times when discussing the roles, responsibilities and mandates of CBOs serving our community. It was after these discussions that we decided as a team to further probe the matter from a community members perspective. We felt that this was an import research subject, which has direct impact on the lives of community members. CBOs and particularly those led by community members serve an integral role in the day-to-day life. They are safe spaces and nodes of community life, they not just centres for service delivery. In my understanding accountability means the obligation of an individual, or an organization has to justify its actions in respect to its responsibilities and mandate. Transparency on the other hand means being honest and open in regards to the activities or work of an individual or an organization.

We, however, faced two interesting challenges when interviewing community members on this topic. First, different community members affiliated to different CBOs were suspicious of our line of inquiry. Some thought we were investigating CBO malpractices, which was not the case. Many were hesitant to participate with some out rightly refusing to engage in the interview process even after reiterating our research objective: fostering greater inclusion in community led (and community friendly) CBOs. A respondent, for example, declined an interview by saying:

I am registered at Haki CBO*, and I won't tell you stuff about our place. Why are you asking questions about our organisation? I am registered here and also work here! This is my job, and you too have a job at your CBO. I don't know what to make of these questions? I don't know where you are taking my answers. I won't answer these questions!

Second, a number of respondents seemed to know very little about how CBOs are generally managed. These could comment only so much on accountability and transparency within CBOs. A respondent said: "How am I to know about matters concerning officers higher up, I am but a mere peer educator?" Community members who work at CBOs as, for example, peer educators, as many of us are, seemed to know the least about the internal mechanisms of CBOs. In spite of facing such kinds of hurdles in the field, we were nonetheless able to collect data from community members. When interviewing our respondents, we learned that, transparency and accountability were not necessarily associated with CBOs justifying and accounting their operations to the community. Many respondents believed transparency and accountability are things to do with 'pleasing donors'. I was also curious to know if this focus on donors affects how well CBOs are able to take note of emerging community needs. During an interview, a community member suggested that often CBOs are too caught up in serving and meeting the requirements of the government and especially the donors. He went on to say:

CBOs are not too keen on keeping their members in the loop of things. They need to be sharing their programmatic goals and publicly explaining programme results to the community. In this way the organisations can be accountable to the community. I would like to know the work plan of my CBO in order to be a witness to its success and failures. I feel CBOs neglect or compromise their founding missions as they are too caught up in government and donor programmes... I know work plans are structured and designed by government institutions and approved by government implementers who impose their policies, which serve us, a criminalized minority.



Samson Otiso - Community members dramatizing a CBO meeting

Community members linked this focus on government and donors to the kinds of programmes CBOs design and implement for the community. Donors were described as being "always interested in numbers" registered at the CBOs. The core vision of these donors was articulated as "fighting and eradicating AIDS." "They are not really focused on other issues such as the economic empowerment of the community," a community researcher said during our weekly research sessions. It is in this context that many respondents feel that transparency and accountability was about reporting CBO operations to donors rather than the community.

In an interview, a community member described transparency as a matter of mutual trustworthiness and loyalty between CBOs and the community. He further linked transparency to what he believes is the core mandate of every CBO serving the community: improving individuals wellbeing or "living conditions." This is what he said:

It is a ritualistic daydream to expect CBOs to serve the interest of the community if they are not transparent to the very same community... Remember, community members are and will always be the stakeholders of most importance. Management teams exist to serve the community. So the community comes first. I therefore believe that big decisions should be made through an inclusive and democratic process before implementation. Accountability is the keyword...

Among community members, the idea of "too much transparency," however, also came up. This idea was associated with widespread sentiments of suspicions and distrust regarding the money that comes with donor aid targeting the community. Not disclosing too much information was considered wise in order to minimise suspicion and distrust from the community. A community researcher noted that:

When you are open to the community, the community will look at your organization's funding as their money. This leads to unrealistic demands on how they think donor money should be spent... a certain degree of transparency could end up causing problems for the organization.

In suggesting steps CBOs can take to be more transparent and accountable, a community member echoed other respondents by saying: "I would like the CBO I'm registered at to be holding an inclusive annual general meeting to highlight the achievements, challenges, and action plans of the organization." As a team of community researchers, we were also keen to think through ideas on how donors could engage organisations in such a way as to promote transparency and accountability in their operations. Several CBOs have adopted a management style that revolves around a hierarchy. One idea that stood out during the analysis process was a decentralized and horizontal style of management. It was noted that a hierarchical style of management vests so much power in few individuals, whereas the ideal is to empower everyone across board. We recommend that community led organisations should experiment with bottom-up approaches in their management. An example that is easily implementable could be electing a committee of community members to lead MSM CBOs. As a team we also advise that community led organisations should devise transparent and non-partisan mechanisms for mediating conflict and addressing grievances especially those between an MSM/W and the organisation.

In sum, accountability and transparency are important in sustaining respect and loyalty between the CBO organization and its constituents. Our research shows, while several community members were well aware of the importance of accountability and transparency between the donor and the CBO, CBO members would like the transparency between the organization and its members to grow even more. We hope this chapter can contribute to this goal.

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3. Sensitizing the Public

By Gabriel Mutua

"Are such experiences common in the community?" This was the question we were reflecting on during our Thursday research discussion after we learned that one of us had been physically assaulted in public the night prior in what appeared to be a homophobic attack. "Very common," said one of my colleagues who went on to narrate an incident that had recently occurred. Everyone around the circle had an experience to recount. "But mine happened in the Garden City Mall area," said Peter* when it was his turn to talk. "I was attending a KESWA advocacy workshop in that area," he continued. "I had met this person from Busia at the workshop. He had asked me to walk him around in the evening after the day's programme was over, he was not too familiar with the neighbourhood." Peter went on to describe what happened while they were walking:

We were talking while we strolled. We wanted to crossover to the other side of the highway to the Mall. His gender presentation was very feminine. You could see it in his gait and his gestures and hand expressions. You could not distinguish his voice from a woman's it was really high-pitched voice. Some street vendors along the street took notice of us. One of them stalked us a little listening in to our conversation. He then interjected asking me, "Are you Gay?" I ignored him. But I hastened my pace and told my colleague to walk a little faster. Some two other guys appear from nowhere. One threw a punch aimed at me but I luckily ducked it. Their attention was now on my colleague, they wanted to harm him. We crossed the highway running without paying attention to oncoming traffic. The guy from Busia was a little slow; I had to pull him behind me as we ran away. The attackers were chasing behind us trying to catch up with us but could not. We ran all the way to the Kasarani Stadium flyover. I saw a motorcycle fast approaching and I suspected they were still pursuing us. Luckily there was a Town bound matatu close by waiting for people to board. We got it and by the time the motorcycle was getting there the matatu had already taken off, luckily.

Homophobia and discrimination are regular experiences for many of us in the MSM/MSW community. We have experienced them from our families, public health care providers, law enforcement agents, the clergy and their flock, and the general public. Our research project sought to find out how CBOs meet the needs of our community. As a team of community researchers we were therefore keen to record the life stories of fellow MSM/MSW through interviewing and group discussions. The data we collected captured in detail issues that impact the daily lives of the community. During this process our findings from time to time showed how discrimination, homophobia and harmful stereotypes have affected our interactions with the wider society. "Sensitization is the only way through which you can kill myths and misconceptions about MSMs," as was suggested during an interview with a community member. Sensitization is the act of informing a person about a matter they might not know or are misinformed about, which could likely influence that person's attitudes on the matter. Sensitization is about trying to help someone to change his or her views or opinions on something. In our case, it aims to debunk myths and misconceptions about MSMs and the LGBTQI community in general. Often in showcases, homophobia and stigma can be linked to a person's stereotypes of LGBTQI people and their associated prejudices. Consequently sensitization is an imperative strategy when dealing with the community's rights to public services and freedoms as members of the society. Through sensitization activities we seek to achieve an enabling and conducive environment for the wellbeing of the community. Such an environment would allow for better access of basic services like healthcare, security and justice. This will further encourage the creation of open-minded spaces where we can articulate our issues without fear. Ultimately,

sensitization aims to foster the coexistence of the LGBTQI community with the larger general population.

CBOs play a big role in creating awareness around LGBTQI issues in the wider society. Many of these have developed several sensitization strategies after identifying gaps that need addressing. HOYMAS, for example, has been keen on making healthcare services accessible for MSMs and MSWs, and improving the community's relations with law enforcement. As such, HOYMAS has conducted sensitization activities that have targeted police officers and public healthcare service providers. Our entry tactic has been to first create a good working rapport with the target group. The CBO has regularly conducted clean up exercises at police stations and health centres. Huruma Police Station and Casino Health Centre are examples of our beneficiaries. In some other cases HOYMAS has invited police officer over to their offices for a community dialogue. During some police sensitization events HOYMAS has administered Pre and Post Test surveys. These surveys help us measure the level of knowledge our target audience have on LGBTQ issues before and after a sensitization activity. HOYMAS hopes that the data it collects with this tool will help develop a "key population human rights police sensitization manual."

Our research and interviews made us aware that we need to discuss more about sensitization strategies. During a research discussion a fellow community researcher spoke of how MSM/ MSWs are stigmatized at health centres even after "periodically and frequently" cleaning up these facilities as part of community sensitization activities. He imagined a healthcare provider asking, "Where are those homosexuals who clean for us, we need them?" Another colleague reported that a health facility in Ngara would actually "call us asking us to come and clean the facility for them should they feel it was too dirty." Thus this brings new questions to the foreground. Has cleaning as a form of sensitization, stopped being as effective as in the past? What other strategies can we design to complement or bring the sensitization process further? We all thought there is a need for a clear advocacy agenda when carrying out these activities. We felt that it was important to deliberately engage with our sensitization targets as a colleague suggested, "It's very good to talk to the person receiving the sensitization." "Because you need to change the perception that they have towards the community, but also the cleaning bit comes in handy also because it helps them see oh, these guys are helpful," he added. Another colleague also noted that we did better in these sensitization activities when our mission was clear to us and our engagement is bold and confident. He said:

I am usually happy when Mathenge, the HOYMAS director, comes because at the end of the day he talks about everything. In many other cases the advocacy in the activity is lost. It is as though people just show up to collect a per diem.

The creation of strategic relationships was also highlighted in this discussion and from my field interviews. A community member reported that having contacts in law enforcement and even bribing them need be, is important: "Identifying a community friendly or tolerant senior police officer and keeping them on a regular stipend was worthwhile." The respondent thought such connections would encourage police to "respond to security emergencies affecting the LGBTIQ community swiftly." The emphasis was that sensitization should aim not just any other police station or officer. It needs to be in line with community needs. Conducting sensitization with police stations in the Eastlands area, where "majority of us here live" and run outreach programmes, was considered more relevant. A field interview suggested the positive effects of doing so: "I am now able to do my outreach work comfortably, in areas where we felt unsafe before thanks to HOYMAS who have been doing extensive advocacy and sensitization."

I think stigma, discrimination and violence towards MSM/W have been reducing over time although more should be done. We need to employ more result-oriented strategies. The

society, to some extent, now understands the importance of the work we do and this has reduced homophobia and violence. We also need to target the media and religious groups. The media plays a key role in shaping public opinion. This emerged when we were discussing the closure of Men Against AIDS Youth Organisation (MAAYGO), a CBO based in Kisumu. It was reported that MAAYGO's donor, JHPIEGO, contracted the Standard Media Group (SMG) to do a documentary on the work of MAAYGO in promoting the use of Pre-Exposure Prophylaxis (PrEP) in Kisumu. This was meant to be part of monitoring and evaluation. MAAYGO unreservedly opened up to SMG journalists. The SMG reporters allegedly conducted their interviews and decided to run with a different story, which suggested that MAAYGO was promoting homosexuality in Kisumu County. The feature also gave the impression that the MSM community is the HIV/AIDS reservoir population in the county. It was reported that Kisumu residents have since turned against the organisation with its staff being public vilified and shamed. This matter was also taken up by the Kisumu County Assembly, which forced MAAYGO to cease its operations. Sensitization of media groups will help them understandand more accurately portray the MSM community. Religious leaders also need sensitization since they too tend to be very influential³ in society. However, based on their religious beliefs, men of cloth and the clergy spread hate and encourage intolerance towards the LGBTQI community. They claim such things as, "Gay men are into the occult," or that "God did not create people to be gay." According to a respondent, religious leaders affect the lives of MSM/MSW because they make their congregations intolerant to our community... this makes places of worship to unsafe spaces for us." I believe that religious leaders need to better understand the nature of sexuality and human rights. And for this reason we need to engage religious leaders extensively and sensitize them. We are, as a community researcher once put it, "beautifully and wonderfully made by God." Sensitization will help the church understand the community better and "treat them with respect and dignity because everyone has a right to life" and the right to worship.



Gabriel - A clean up excercise at a local police station

³ The religious establishment emerged as a powerful force pushing back against the decriminalization of homosexuality in Kenya leading up to the 24 May 2019 high court ruling. The high court upheld articles 162 and 165 of the penal code, which criminalize homosexuality.



4. Mental Health among Urban Sexual Minorities

By Kay Eric

I was deep in Nyeri County on the western slope of the Mt. Kenya. Many of us in the community were attending the funeral of a community leader's relative. Birds were chirping in the tall eucalyptus trees along the road from Nyeri town. We drove along making our way to Gachatha town past the thighs of Tetu hills. It is a beautiful part of the country with pleasant flora and fauna. The scenery got me thinking of my home back in Kigezi in western Uganda and growing up in my grandfather's home. It all reminded me of my lost childhood, of how my family rejected me. The memories overwhelmed me and my eyes welled up with tears. My puberty was delayed and this made my teenage life particularly difficult. This brought quite a bit of tension in my father's house. I remember at around this time feeling that I really did not have a future to live for; I had no expectations of life. I have always been effeminate from as far back as when I was a child. My mother was ridiculed in my village for it. They said to her that I was weak in my manners, that I could not handle life and responsibilities of a man. And for this reason, I was never to marry into their families. I was never the person for their daughters. Bullying has been part of my whole life. I had a hard time dealing with rejection and isolation. I became a sexworker to meet my needs. I outwardly tried to look well put together but I was in deep pain, I was dying on the inside. Back in 2001 I had trouble sleeping, could barely pay attention and was always fearful. I needed relief from the pain, shame, and the bullying. With time substance abuse became my go to remedy during this time. I drank a lot. I struggled with thoughts of self-harm, and in 2013 I even attempted suicide in Lake Victoria.

From experience, I know that sexual minorities face a lot of stigma. Trans*people, particularly Trans*women, have it especially rough. Unfortunately, Trans* stigma is also prevalent within the LGBTIQ community; we (Trans*women) are a minority within a minority. We have been described as being 'confused' or having psychological issues, and have been accused of creating insecurity for other members of the sexual minority community. No one is offering any help in spite of the traumas that we (and others in the wider community) go through.

Sadly, there is a stigma associated with mental health problems. Mental health is a taboo topic that only recently gets the societal attention it deserves. So as a sexual minority coping with mental health issues we are doubly stigmatized. The findings of our research showed that many gay men and male sex workers, and transgender and gender non-conforming (TGNC) people struggle with psychological problems. Most of these problems are related to the homophobia these groups have experienced and continue to experience in their lives. Some of such traumatic experiences include violence such as rape, physical assaults, verbal abuse, family rejection, and forced homelessness. MSMs and TGNC people, however, do not have adequate access to mental healthcare services. Stigma and criminalization of homosexuality also affects how MSMs access psychosocial support themselves. One respondent explained: "It's impossible to find any relief with a counsellor as you are afraid of freely expressing yourself. In talking about your real challenges, you might just expose your sexual orientation." Due to lack of psychosocial support, our research shows, many community members also turn to alcohol and drugs to overcome stress. A respondent explained: "One would rather stay silent or join his peers over drinks to relieve himself from stress."

The findings of this research reveal that psychosocial support is a great and unmet need in the community. During our data analysis session, a community researcher realized that:

Most of the organizations working with key population generally focus on reproductive health. There is little or no attention given to sexual abuse and psychological counselling.

Nobody is taking mental health issues seriously because most people think that we the gay community have a lot of money to spend on drinks. Yet we are suffering. Not drinking for fun but we have stress. So, most of these organizations take it as a minor thing or a lifestyle thing, but it is not.

HIV testing and counselling (HTC) services is the closest thing to psychosocial support that a number of CBOs have been providing. These programmes, however, tend to target behavioural change instead of the causes of the behaviours of concern. This approach in counselling services is designed to especially help with HIV management, which includes prevention, care and treatment services. These HTC counsellors are unable to sufficiently provide mental health services for two reasons: Firstly, there aren't enough HTC counsellors. During an interview, a counsellor said: "I receive more than twenty clients per day; some of them require more attention and I can't handle a person for more than twenty minutes." Secondly, these HTC counsellors are trained in HIV testing and counselling, not in psychology. While collecting data on this topic, a fellow community research reported the following: "I asked a counsellor based at one of the CBOs about psychosocial support. The counsellor honestly explained that her work is only related to HIV testing services."

Some organisations have attempted to design and implement mental health programmes for MSM/MSWs. During a research session, a fellow community researcher described his experience at one of such CBOs offering psychosocial support as follows:

SWOP provides these services. There was this time an officer based at some NGO in Nairobi had assaulted me. I was crying I just went straight to SWOP where I talked to a counsellor and cried as much I could. I left there feeling clean and healthy. At SWOP you can be counselled without it being about reproductive health... that is the difference with SWOP. At SWOP when you arrive at their reception and say, "I am here for counselling," you are directed to a counsellor right away. They have experienced counsellors who are familiar with MSM and MSW issues. More organizations should offer similar services.

Our research findings show, however, that CBOs face several challenges in their efforts to implement these kinds of programmes. Firstly, there is little funding going into mental health programmes. Secondly, psychosocial support services require trained professionals – specialists in mental healthcare of which there are only limited available. Additionally, a counsellor working with the community has to be well informed on the unique dynamics of the LGBTQI community and specific needs of the different clusters constituting the community.

Different clusters within the LGBTQI community have different mental health challenges. For example, the psychosocial support that Trans* folks require is different from that of MSWs as we found from our respondents. A Trans*woman described one experience she believes disproportionately affects Trans* people:

I have been accused of posing a security risk to other MSMs. I'm extremely effeminate. I am often isolated in public because everyone is afraid of homophobic attacks that I could attract.

In another interview a sex worker highlighted the risks involved and resulting trauma in sex work. The sex worker said:

I recently met a client on social media. We had been chatting for almost three weeks when we decided to meet up at his place. As soon as I got there, he locked the door and asked me to take off my clothes. Another man who was already in the house emerged into the room. I became terrified and threatened to scream but it was all in vain. These two strange men raped me!

Because of Kenya's penal code, which criminalizes⁴ both sex work and homosexuality many of such cases of violence are hardly ever reported to law enforcement. This breeds a culture that enables the abuse of sex workers and LGBTQI people, and regrettably collective trauma. This kind of story and the circumstances that bring it about are sadly not unusual for many in the community who have been in sex work. The above respondent continued to briefly narrate how he got into sex work in Nairobi:

I was thrown out of my family's home as soon as they discovered my sexual orientation. I had no education, no technical skills, or any reliable friend. That's how I ended up doing sex work for a living.

We observed that there is a need for increased awareness on mental health among sexual and gender minorities. As such, we propose that CBOs and other stakeholders like government and donors working with the community pay keen attention to the matter. I believe investing in psychosocial support is a worthwhile venture. It can complement efforts in HTC programmes, and most importantly improve the general welfare of community members. We would hence recommend that every CBO offering HTC services should hire trained community psychologists or collaborate with public hospitals for psychosocial support services. Group therapy/support programmes could also be set up. For these, community members could be mobilized for group sessions with a counsellor. This will create opportunity for peer-to-peer support and also help counsellors to identify individuals who might need one-on-one sessions. During a group discussion, it was also recommended that CBOs should consider using their peer educators for psychosocial support outreaches.



Eric Kay - Community Researchers dramatizing mental health struggles

⁴ The Kenyan Penal Code does not directly criminalize sex work. It, however, manages to criminalize sex work by outlawing earning from prostitution



5. Finding Acceptance and Belonging as a Gay Man Living Positively

By Mark Chege

I have a younger sister, she's married with kids and there was a time she used to leave me with her kids. They are boys. One day I heard her talking to our mother. They know I am gay. She said, "Mum, do you know I leave my kids with Chege for him to watch them, what if he abuses them?" It really hurt hearing her make such a statement. That was like fifteen years ago. I have never talked to her again to this very day. Back when my family discovered that I am gay, I fled home. I came to Nairobi where a friend living in Kibera took me in. For about three years, I lost all contact with the people back home. I later came to learn that my mother had been searching for me at the time of the 2007 elections. I thought I should go back home. They received me back home, but did not fully accept me. A disconnect still remains. Whenever I plan to make a visit home, I make sure I get there when I am very high. That is the only way I can handle their disapproving attitudes. I hardly stay there for more than two days. Two Decembers ago, for example, I paid my family a visit but left on the very same day. I did not stay long enough to have lunch, and I did not even say goodbye to anyone. I just had to come back to Nairobi. Sometimes I go for months without getting in touch with any one from home.

I was born into a religious Kikuyu family living in the countryside. It has required a lot of courage to come out to my family. As far as I can tell I am the only gay person my family has come in contact with. I do not think my nephews for example, who I love to bits, know anyone else that is gay. So, for me, I have taken it as personal mission to show them a gay person can be a good and kind person, just like any other trusted friend. It is unfortunate that my parents disowned me after they learned about my orientation. I do not blame them. I blame their ignorance. I remember telling my mum, "You may think that accepting your son is gay is difficult for you. But can you imagine how hard it is for me to actually look in the mirror and say to my self, 'This is who I am?'"

I suppose my family also knows my HIV status. My uncle must have told them. My uncle and I used to be very close. I remember confiding in him that day I bumped into him somewhere in Hurlingham. I trusted him. I told him I was HIV positive only for him to tell it all to my elder sister. She then rang me saying, "Chege, do you mean to grief mother with worry to the point of death?" I tried to make up a story, "Listen," I told her, "I was very drunk and broke. I needed to borrow some money from Uncle, so I gave him whatever ridiculous story I thought would work." The next time I was visiting with my mother, she called in three of her close women friends. They attempted an intervention of some sort. They tried to counsel me on the challenges I was facing in life. They spoke about children and starting a family. It all got unbearable after half an hour of sitting there. I just had to leave. I can no longer spend significant time with my family. I remember, a while back, receiving the news that my cousin had passed away. We were close growing up. He was my age mate and had a beautiful family. I did not and still do not have one of my own. I did not really participate in making his burial arrangements. But I was sure to attend the funeral back in the village. I felt so out of place. All my cousins and siblings were present. They had flocked the funeral with their families. I did not pay some of them any attention. They have stigmatized me because of my sexual orientation. I do not know how, but it now gets to me seeing my siblings with their husbands, wives and children at family events. I get stressed. The MSM community is now my family.

I have had days where seeing my neighbours readying their kids for school in the morning disturbs my peace of mind. On such days I get to ask myself an endless string of questions, which leave me feeling sad and stressed. Sometimes I drink alcohol to forget about my stress.

I would like to change how I consume alcohol. This is the one big change I would like to make towards a positive life, but then again, as a sex-worker I also need to get high and be bold enough to approach potential clients. Nowadays I drink on an almost daily basis. I have had days, especially weekends, when I have money where I have gone straight to the pub as soon as I woke up. I have been at the pub as early as 8:00 AM and by 1:00 PM I am blacked out. There have been times where I have felt my drinking is getting out of hand and I am losing my grip on life. But it is so hard to guit drinking. You see, there is somewhat a drinking culture in the MSM and MSW community. Weekends are just the craziest. You should see MSMs and MSWs at my CBO on Fridays. Everyone is frantic and busy looking for a weekend plan. Calls are made to lovers and clients and dates are planned. By 9:00 PM many of us are club hopping, this is especially the case with sex workers looking for clients. Many in the community are struggling to make ends meet much as there are those who seem to be doing really well in life. Now for these in the majority, they wake up Saturday morning hungover, tired and broke to the point of not affording a decent meal that day. Quite a number of us in the community are homeless. As you are walking down the streets of downtown on Saturday morning you get to bump into them. Some sleep in Jeevanjee Gardens and Uhuru Park. Their reasons include not being able to afford rent or being disowned by family on account of one's sexual orientation. This reminds me of a friend who was at one point in his life forced into homelessness. He used to work at a restaurant in Nairobi Town. His boss learned that he was gay and fired him from his job. After he left the job the manager called my friend's older brother, they were friends. He then outed him to the brother. The news went round the family. At the time my friend was staying with his cousin. He had to move out and found himself homeless and got into sex work, drugs and alcohol. He unfortunately contracted HIV in the process. As much as I would like to avoid pubs and clubs, these are the very places where my friends are. I wish I could better plan my days out, this way I can better manage both my drinking and my money. All the same, I still go out. There was this night I had brought back a 'funga', a one-night-stand. He, however, rejected my advances while at the house. He said he was unwell, I could tell he was lying. I woke up the following morning feeling so mad at him. He prepared breakfast, but I did not have any of it. I stomped out and went straight to the pub to 'toa lock' treat my hangover by drinking some more. I came back to the house very drunk and found him preparing lunch. We got into a fight over the events of the previous night. I threw him out of the house. The following morning I woke up feeling very lonely and confused. I could not help but think about what had happened the previous two days. I kept questioning myself about it. I wept a lot. So I thought I should get high again.

Being rejected by loved ones takes a heavy toll on one's sense of pride and meaning. Rejection can lead to self-stigma as one is always reminded that they do not belong or that they are broken. Then there is this guilt that hangs over one's head. One feels as though they are standing at the edge of society, at the boundary of a full life, but they are not allowed in. Many of us in the community grapple with these kinds of thoughts and struggles. For me, it has been a long and on-going journey towards self-acceptance. I have had good seasons and not so good seasons along the way. But it does help to know that I am not in it all by myself. I feel part of a community.

6. Reflections on finding, belonging to and guarding your Community

By Monaja

It was on the 17th of June last year. I was planning to go to a friend's birthday party. The party was to start at 9:00 p.m. While at the party I met some of my old friends from high school. The host of the party was turning 22. We sang for him and shared a birthday cake. At that point the music had been turned down. He then told us we would never see him again after that night. No one made much fuss about what he was on about. The music was turned back on again. He then excused himself saying that he wanted some privacy. So he locked himself behind a door. After some time we realized our host had been gone for a long while. We knocked on his door but he was not opening it. We had to break into the room and there we found that he had hanged himself. He had written a letter addressed to us. The letter was about how his family had rejected him. He felt that he had no option but to take his life. We called the police and they took his body away.

I have not come out to my family. I am living a secret life. Absolutely no one in my family knows. Not my father, not my sister and not my brothers. I am trying my best to keep it that way. I know them. They generally do not like gay people. They say mean things about them when talking about homosexuality. Should they know the truth I fear they will reject me. The thought of this makes me very anxious. I am forced to live like a prisoner because I am trying to guard my secret. In spite of all of this I have found a safe space at HOYMAS, a place to freely socialize with other people like me, "a gay friendly space" as a fellow community member described it. This keeps me grounded. I have made friends here. I have also met people with different stories and from different cultures. I have found a community here. My community. But what does it really mean to belong to a community? What does it really mean to belong to this community?

There was this time when we found a stranger in our research meeting room. No one knew who he was. "Does he belong to the community?" asked a fellow community researcher. "I have never seen him before," another colleague answered. "Neither have I... He does not belong to the community," another community researcher added. It was from this interaction that we as a team reflected on the question, "What makes an MSM a community member?" We were keen to understand what is meant by the idea of a "community member." From our discussion we appreciated that the word community could be understood in different contexts. But for all of us, at a very basic level, it had something to do with identifying, feeling or identifying others as gueer. Queer is a word that has slipped into MSM vocabulary that broadly describes sexual and gender minority identities. In another sense being a community member also implies one is actively present in gueer spaces such as hotspots and MSM/W CBOs. During our research discussions we not only appreciated the role MSM/MSW CBOs play in creating community safe spaces but also in anchoring friendships and interactions between community members. So at another level we also appreciated the idea of community through CBO association: "Each CBO has its own cohorts of clients, which constitute a community." We therefore also reflected on the question, "When are you part of the HOYMAS community?"

What does it take to belong to the HOYMAS community? A fellow community researcher suggested that an MSM/MSW becomes a HOYMAS community member when "he has registered with the CBO and the clinic opens a file for him." Someone else was of a different opinion saying, "We are first members of the lesbian, gay, bisexual, transgender, queer and intersex (LGBTQI) community. If you are a sexual minority you are a HOYMAS member by

default, you don't have to open a file." But even so, some of us felt that for one to be admitted to our wider MSM/MSW network one had to prove themselves. "If people are not committed to our cause they must be thrown out," this was according to another community researcher. And so a colleague asked, "What do you mean by not committed?" From this we realized the different mechanisms we have used to evaluate or ascertain the membership of new people in our spaces. A community researcher suggested: "It's upon us to take them through an interview of some sort for us to know if they are real MSMs who have come for services here. We also judge them by the way they appear, are they suspicious looking?" "Yeah, it happened to me the second time I came here," confirmed another colleague. "When I came here in 2017, I think it was January, people asked me these exact questions," the colleague added.

With all the discrimination and trauma many of us have gone through it is absolutely important for us to protect and guard our community spaces. There have been reports in the past where outsiders infiltrated our community spaces. One of my colleagues was particularly convinced that non-community members should not be allowed to enjoy the benefits of the HOYMAS clinic: "In some rare occasion you will find people who are not part of the community masquerading to be part of us, wanting to access services here. These pose a security threat to us." It is from this 'vetting' angle that we also came to again appreciate the role our clinic plays in screening for community membership. One of us said:

There is a form that you have to fill out at the clinic, which asks questions about who you are. What follows is a vetting process conducted by peers at the clinic. They are professionals who are able to tell if one is masquerading or is a community member. I will give my own example. When enrolling here I was asked, "do you have sex with men." I of course said yes. In some scenarios you will find that somebody has come to the clinic and the same question throws them off, "No! That's not my thing. Mimi si shoga, I am not gay." This person is then directed to the paralegals for further assistance. HOYMAS services are for community members only.

After my friend had taken his life I could not help but wonder to myself if he really belong to a community? I do not have answer to this and many other questions. But I have since come to appreciate what I have here at HOYMAS. I know how it is like not knowing where I belong. I consciously and constantly have to bear the weight of my secret. It is only in community spaces that I find relief from this load. Recognizing the need for both formal and informal security measure in community spaces, I am convinced that we need to do more to make our spaces accessible to queer people out there who are figuring their way out. For many of us the friendships we have made in the community are the only families we have. I would like to urge organisations, especially community led CBO to never underestimate the value of investing in gay friendly safe spaces. It is around these spaces that a community forms and many of us find belonging in our queerness.

7. How Can the MSW be Economically Empowered?

By Phelix 'Mama G' Kasanda

Sex workers continue to face multiple risks including social marginalisation, violence and poor health. These overlapping and mutually reinforcing risk factors affect the quality of life and the working conditions of sex workers. Furthermore, sex workers – like many other people working in informal economies – have limited access to employment benefits and privileges such as access to financial services, medical insurance covers, and pensions. This further compromises their ability to manage and plan their finances and futures, including career development. Economic empowerment can therefore be an important strategy to improve sex workers' living and working conditions. By increasing economic options sex workers can achieve greater financial security for themselves and their dependents. Improving economic options also helps sex workers to reduce the likelihood of having to accept clients' requests for unprotected sex and it limits the likelihood of sex workers being put in situations that inhibit their ability to negotiate with clients and heighten the risk of violence or abuse. An MSW with a supplementary income is more likely to refuse difficult clients who for example do not wish to use condoms or who are aggressive, which is a very empowered position.

Many economic empowerment programmes targeting MSWs have, however, been unsuccessful. This is especially the case with programmes designed and implemented by non-community members. These tend to primarily focus on rehabilitating sex workers. Such programmes are designed in such a way as to encourage or pressure sex workers to stop sex work. These programmes do this by attempting to provide avenues for alternative employment options that promise reduced risk and vulnerability. Participation in many of such programmes is on the condition that the beneficiaries leave sex work immediately. These programmes often incorrectly assume that sex workers want to be rehabilitated or are willing – or are able – to leave sex work immediately. However, economic empowerment programmes initiated by community members are also not faring any better. I think many programmes fail because they are not given the attention they deserve. As a community member said: "HIV/AIDS and STIs, has been our everyday song for a while now," thereby suggesting there is little space to focus on other community issues.

I think that our organisations need to now dedicate their efforts to economic empowerment. Stakeholders should first identify the gaps and challenges facing the MSW community before coming up with economic empowerment programmes. Only with an appreciation of the strengths and weaknesses faced in the community can they then design appropriate initiatives. It is from this point that I would like to share my reflections on programme designed based on the lived experiences of many in the community.

I feel that many initiators of economic empowerment programmes do not fully appreciate the motivations and experiences of individuals in sex work. I am a community activist championing for both LGBTQI and MSW rights in Kenya. Fundamentally, sex workers are empowered when their rights are upheld, and stigma, discrimination are addressed, and sex work is recognised as work. I believe the economic empowerment of sex workers is tied to the decriminalisation of sex work. I believe that no meaningful gains will be made in addressing prejudices against sex workers until sex work is recognised as work. It is for this reason that I believe that all economic empowerment programmes targeting us should be informed by an advocacy agenda which is aware of the stigma and discrimination sex workers face. Having said this, I believe sex workers are in the trade to earn a living and meet their needs. Sex worker are therefore economically empowered when they can earn enough income to support themselves and their dependents. This income can be from both sex work and non-sex work. Often you will find MSMs in

employment (often at KP organisations) complementing their salaries with earning they make from sex work.

Cases of blackmail will be fewer when the community is empowered, as many in the community will be busy chasing their dreams. Many of us have good ideas and we just need guidance and mentoring to realize our dreams. It is however difficult for many of us who have been sustaining our lives through sex work to try out new economic ventures, which we often do not have the skills or experience in. Working in a somewhat informal economy, income tends to be irregular, and so we also tend to live day by day. Money is often spent as easily as it is made. Many of us therefore also need to learn personal financial management skills.

During fieldwork a respondent, Kageni*, a homeless sex worker described how he manages his money, "Whenever I make money it does not stay in my pocket... I can not explain how that happens." He added, "I get little money which I use for food and pleasure... I am now somehow sleeping on the streets of Nairobi." As far as his own economic empowerment is considered, he said:

I need to learn how to save and budget for my money... My wish is to start a catering business but I have no capital. If I could access a loan I would do it and be paying back the loan over some time.

In another interview, I met Shadrack* an MSW in his mid 20s who is also a business owner. He runs a gay massage parlour in down town Nairobi. He leads a very discrete life and does not interact much with KP organisations. When I asked him to share his thoughts on how the MSM/MSW community could be economically empowered he suggested the following:

MSWs working in KP organizations should get paid through banks instead of hand delivery. This will help them interact with banks, which will help them to save money and even access loans. MSWs should form small groups, which will enable them to save and set up some small business, which they can manage during their free time because sometimes it is so challenging when someone is sick and cannot manage to go the hotspot to look for clients... Sex work is work like any other work. MSWs should therefore be trained on how to negotiate with their clients when it comes to payment so that they can get well paid and save some for their income for the future. SEX WORK IS WORK. All we need is more skills and security to get economically empowered.

During the research project it also emerged that some of us would desire to be formally employed or even start our own businesses, but that many are set back by their illiteracy. During a weekly research session, we appreciated that many community members have not had a proper education. It would seem many MSMs discontinued their education as soon as they were discovered to be gay: "Some of us have trouble even signing our names. We all at least know an MSM who cannot spell a simple name like John." Another community member said: "Many in the community only have a basic education." For this reason, MSMs tend to be unemployable for high-skilled jobs. The respondent went on to say, "Many of those among us who are keen to further our education unfortunately cannot finance it..." Thus, when thinking of economic empowerment programmes it is necessary to go beyond giving financing incentives or improving financial literacy. These are important aspects too. But our research shows above that there are other contextual factors that need to be taken into account when designing economic empowerment programmes, and more particularly economic empowerment programmes that will be successful. We believe there is more to economic empowerment than just rolling out income generating activities for community members.



Mama G - A Community Researcher running a shop



8. Blackmail in the MSM/MSW Community

By Brian Onyango

On Friday the 6th of April a friend who stays in Embu, which is a little over two hours from Nairobi, called me inviting me to pay him a visit. He also sent me bus fare to my M-Pesa. And so I left my work place and went straight to town to book a shuttle to Embu. I arrived there at around 8:00 PM. He picked me up at the bus station and took me to a club for some drinks. He told me he needed the company of a friend. The club was dull, so we hopped to another club. After spending hours drinking, we left for his place. When we got there he propositioned me for sex but I refused. He then threatened to ruin my name. He threw me out of the house at midnight after we argued and quarrelled about it for some time. He gave me Kshs 500 (about \$5) for my fare back to Nairobi. Luckily, I got back in Nairobi safely.

Over the years community members have become more and more the targets of extortion and blackmail. In almost every case the perpetrator demands money or some favour in return for not publicly shaming MSM/MSWs by particularly outing them. Many of our respondents reported having been blackmailed or knew someone who had. During our research project I was keen to understand why so many community members had been targets of blackmailers. Blackmailers often leverage on the illegality and stigma associated to being an MSM to manipulate their victims. During our research discussions opinions were divided about who are the main perpetrators of blackmail. It would also seem that there are some in the community participating in extortion as a community member narrated in the above interview excerpt. By and large we believe non-community members are masquerading as MSM or MSW to blackmail unsuspecting victims. In an interview a respondent described these as "people who have infiltrated our community pretending to be our friends but take advantage of your situation to gain things and maybe in the process tarnish your name."

From the data we collected and analysed, there are two main factors that make community members easy targets for blackmailers: many outsiders think community members are wealthy, and homosexuality is both tabooed and criminalized in Kenya. During a research discussion it was said, "most people think that we in the gay community have a lot of money to spend on drinks." "There is this notion that MSMs have extravagant spending habits," another fellow community researcher added. He continued to say: "It may seem that we lead extravagant lifestyles because we go out a lot. You will see me out with Maurice* today, tomorrow we are out again, so you might think that we have a lot of money..." This perception has unfortunately made community members extortion targets. The reality, sadly, is that many of us do not have the money we are imagined to have, "just drinking because we have extra money to spare." The partying and drinking culture is only symptomatic of the great psychosocial needs in the wider community.

It was also reported that in some even more unfortunate cases some among us are blackmailing fellow community members. Community members that resort to this are often living in extreme economic vulnerability. On condition of anonymity, a respondent said, "blackmailing becomes like work... it helps to sustain oneself." "Most of us are jobless and live from hand to mouth, we have no income, no nothing," another respondent said. This respondent went on to add, "Sometimes circumstances force us to engage in blackmail." It often starts as a one off thing, which then becomes a "behaviour they get used to." There are people who also think blackmailing occurs because organisations have nurtured a 'dependency syndrome' that encourages poor attitudes to work, which contribute to this economic vulnerability.

The community's attitudes to work came up while discussing economic vulnerability and exploitation with my colleagues. In this discussion some of my colleagues said that many MSMs and MSWs lead self-indulgent and extravagant lifestyles, which they often cannot afford, "MSMs are only interested in luxury, are lazy and are not industrious." MSMs are said to aspire to certain kinds of lives but are unwilling to work for them, "you want to drive a vehicle but you have never been to a driving school!" It was also said that for many of such, blackmail becomes a real strategy for guick and easy money to support 'MSM lifestyles'. This claim was however disputed during our research discussion session. This was described as an unfair generalization. The consensus, however, suggested that "most" MSMs are not inclined to pursue careers and hold down a regular job. Another community researcher suggested that this lack of drive could be attributed to stigma and lack of support structures for MSMs. Consequently many MSMs are unable to adequately and sustainably fend for themselves, and thereby employ 'quick money' survival strategies. This too was described as a community lifestyle, a 'survival lifestyle.' Many in the community make worthwhile money in sex work. Unfortunately quite a number of MSWs do not see the need to plan for life after sex work when they are much older. Pride and peer pressure were highlighted as reasons that discourage MSMs in sex work from considering complementing or alternative sources of income while in their 'prime'. Sex work was furthermore described as a high-risk profession that needs to be navigated with extreme vigilance for both the sex worker and the client. The emergence of MSM websites and apps like Planet Romeo and Grindr, Hornet, Badoo, Twitter, Facebook, and so on has created new platforms for sex trade. This has also exposed many MSWs to people with bad intentions. Desperation for money and economic vulnerability have led many MSWs in harm's way when interacting with potential clients. It was suggested that it is in such situations that MSWs get robbed, blackmailed or physically assaulted. In some cases negotiations in pricing sex-work could resort to extortion.

I believe CBOs have an important role to play in curbing cases of blackmail and extortion targeting community members. As a team we can commend the steps HOYMAS and other CBOs have taken in dealing with this matter. A colleague, for example, thought the advocacy team at HOYMAS was trying the much it could manage:

There is evidence that our paralegal team is doing a good job, definitely they will never be perfect, but they are doing well. They have managed to get some perpetrators arrested. These people were also publicly named and shamed on social media for the entire community to see.

I believe that blackmailing can only be adequately addressed by dealing with society's stigma around homosexuality, which will also allow better and diverse economic prospects for community members. All the same, I would like to commend the efforts some CBOs have made to improve the security of community members. In the past HOYMAS has for example hosted security trainings through its advocacy team. Through these we have been sensitized on issues to do with blackmail. Many in the community still do not know how to handle blackmail situations before or after they have happened. In an interview a respondent attested to this by describing a blackmail ordeal his friend had gone through. He said: "my friend was blackmailed but he didn't know where he could go to report the incident." Another recommendation I have for CBOs is the setting up of a toll free number or a secure website where one can easily report an incident for investigation and action. Individuals too have a role to play in fighting blackmail in the community.



Afterword

This book has been written to bring out pertinent issues that affect two marginalized communities in Nairobi - male sex workers and youths living in informal settlements. These CBOs occupy different positions in the international aid chain, with HOYMAS being integrated in the official development assistance (ODA) system, whilst Ghetto Foundation, for the most part, operating outside of it. These positions have interesting implications on how the two CBOs work with and in the communities. It is hoped that this book will guide and motivate local and international donors as they review their operational guidelines. The findings and analyses in this book are a result of a bottom-up research approach that sought to understand the aid chain and the issues that these communities find relevant and value, and to find out how these issues relate to these organizations. Moreover, in the book, community members discuss issues that they consider important to them, which are generally excluded from donor funding. The bottom-up approach allowed them to give narratives of matters that affect them directly including how different players within and outside their communities take advantage of their vulnerabilities (e.g. police, organisations, health centres, youth programmes etc). Further, the narrations include self-reflections as well as what the community researchers see as solutions to challenges they face.

Several contrasting values between the two communities are evident in the community researchers' presentations. Members of Ghetto Foundation for example tend to articulate their lived experiences in structural categories; understanding life's challenges as consequences of systemic forces. HOYMAS members on the other hand give intimate and personal accounts of life as gay men and sex workers in Nairobi seeking to maximize their personal freedoms and rights. The two teams also share some similarities in their presentations. Most notable is the feeling that their communities exist in the margins of society. Both teams also appreciate the role of their CBOs within an ecosystem of development actors ranging from the state to NGOs, (inter)national donors and other CBOs. CBOs are at the very bottom of every aid and development configuration as local implementers. In many projects CBOs are taken to be local liaisons and implementers. This comes out where community members feel tokenized since decisions are made regarding their wellbeing without any meaningful consultation. In HOYMAS for example, they feel that programmes are designed to respond to donor priorities and not to those of the community. While most attention is directed toward HIV/AIDS management little to no attention is paid to the many struggles that the community consider essential, especially mental health, stigma, discrimination and marginalization. This book therefore, is the voice of the affected, vital for the ODA situational analysis, and is important in strengthening advocacy on issues that are important to the two communities.

Dr. Freda Nkirote M'mbogori 24 June 2019, Nairobi

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