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Male sex workers' (in)visible risky bodies in international health development: now you see them, now you don't

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ABSTRACT

International health development discourse constructs and regulates male sex workers as risky bodies in need of interventions for HIV. Drawing on ethnographic research among male sex workers and interviews with development sector actors in Nairobi, Kenya, this paper shows how the identification of male sex workers as a high-risk group for HIV offers a singular conceptualisation of their bodies as risky and renders invisible broader everyday struggles for security and wellbeing. Within these everyday struggles, male sex workers experience bodily risk as they are exposed not only to HIV, but also to being outed or outing themselves as gay. Interview findings show that development actors recognise and are empathic to male sex workers' security risks but have limited opportunity to address these due to restrictive donor regimes. To contribute to enduring change and develop appropriate and effective programmes, it is important for donors to continue funding HIV activities in relation to male sex work, while broadening their understandings of risk.

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Introduction

As I sit in the 'lounge' of a male sex worker-led organisation in Nairobi, Chuna¹ walks in. He wears a hat, which is something I've never seen him wear before. We greet each other and I ask how he's doing. He says: 'I'm fine. But yesterday I was almost dead.' He removes his hat and shows me his skull, which is covered in plasters and encrusted with blood. Shocked by his head injuries, I ask him what happened. He tells me a group of boys in his neighbourhood came after him when he left his house: 'They attacked me, and shouted "You gay, you must die." Although, luckily, they couldn't kill me, they stabbed my head with their knives.' He tells me these guys knew he was gay, perhaps because of how he dresses and carries himself. (Author's fieldnotes, July 2019)

Chuna's story is not exceptional. Male sex workers in Nairobi live and work at the intersection of two major cultural taboos: sex work and homosexuality. In a society characterised by homophobia and 'whorephobia'², male sex workers regularly experience violence, including verbal assault and humiliation, physical attacks, rape and targeted killing. Many of them consider themselves at risk.

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This article focuses on the construction of male sex workers' bodies as 'risky' in international development discourse and practice. It explores the relationship between the way international health development practice constructs male sex workers' risk and sex workers' subjective experiences of risk. By taking a critical look at the framing of being 'at risk' in international development discourse, it examines the ways risk is constructed and legitimated, and by whom it is defined. The decision to focus on male sex workers' risk does not mean that male sex workers' lived realities are constituted only by risk. Rather, our aim is to show that while risk is central to contemporary international development practices, only certain risks of male sex workers are acknowledged and engaged with through funding. A singular focus on sexual health risk functions as a form of exclusion.

The identification of male sex workers as a high-risk group for HIV constructs a singular conceptualisation of their bodies as risky and renders invisible their everyday struggles for security and a general sense of wellbeing in which they experience and embody other types of risk, such as being outed or outing themselves as gay. These risks are dealt with primarily and to a certain extent successfully by sex worker-led organisations; however, they remain invisible within international development practice, in particular regarding the distribution of development funds.

One of the basic premises of this article is that in international health development practice, male sex workers are rarely considered a category in their own right. Rather, they are often targeted as having the same needs as men who have sex with men (e.g. Moyer and Igonya 2018). Due to the nature of their work – and multi-layered, structural forms of stigma and discrimination – male sex workers in Kenya are, however, exposed to risks and vulnerabilities beyond those faced by men who have sex with men more generally (Valente et al. 2020). Hence, we assert that a male sex worker embodies multiple risky bodies, including that of a sex worker and that of a gay man.

Casper and Moore (2009) explored how the statistical surveillance of human bodies in the twenty-first century has led to the over-exposure of certain bodies and the erasure of others. The idea of male sex workers having multiple bodies extends the authors' claim that not all bodies are equally visible and shows that both academia and contemporary society need to consider how people are constituted by multiple visible and invisible bodies. We use this analytic approach to show how visibility politics over-exposes a particular aspect of male sex workers' bodies in a way that diverts attention from other important issues related to the embodiment of risk.

Male sex workers' risky bodies

Male sex workers comprise a diverse population internationally and within countries (Baral et al. 2015). Whereas early research on male sex work tended to conceptualise male sex workers in terms of social risk, treating them as pathological social deviants and vectors of infectious diseases (Bimbi 2007), contemporary scholars provide a wider social lens to the lived realities of male sex workers (e.g. Aggleton and Parker 2014; Minichiello, Scott and Callander 2013; Huynh et al. 2019). However, on the African continent most studies continue to focus on male sex workers' biological and sexual risk

factors (Muraguri et al. 2015) in response to high HIV rates, although a few have studied social and political factors influencing male sex work and male sex workers' sexual subjectivities (e.g. Boyce and Isaacs 2014). The strong epidemiological focus in the academic literature obstructs a broader conceptualisation of male sex workers' bodily risk that includes but is not limited to their experiences of violence. Another tendency in the health literature is the absence of studies on male sex workers as an independent category. male sex workers are often included as a subset of gay men and other men who have sex with men, as a subgroup of predominantly female sex workers, or as an aggregate category that also includes transgender women (Raine 2019).

In developing this argument, it is not our intention to underestimate the importance of male sex workers' sexual health risk nor the studies that have been conducted on this. However, Lorway et al. (2009) have rightfully called for an unsettling of dominant public health perspectives that view male sex work only in terms of behavioural risk. The few studies that do address male sex workers and risk connect risk to socio-cultural representations of gender and sexuality (Scott et al. 2005), showing how male sex workers' vulnerability to violence arises because of the affront they pose to hegemonic masculinity, through their appearance and/or behaviour (Javaid 2020). This paper seeks to advance academic understanding of the gender dimensions of the risk associated with male sex work by showing how male sex workers' embodiment of risk is shaped by stigma, discrimination and violence. It unsettles mainstream public health perspectives by enhancing the visibility of male sex workers' bodily risk in the Kenyan and broader African contexts.

Social and political context

In Kenya, male sex work is particularly visible in cities such as Nairobi and Mombasa. Although no reliable statistics are available, studies have documented high HIV prevalence (Muraguri et al. 2015), experiences of violence (Valente et al. 2020) and barriers to health care and social justice (KESWA 2018) among this population. The Kenyan socio-political context produces various intersecting forms of exclusion and stigmatisation for male sex workers through legislation, municipal bylaws, policies and cultural practices (van Klinken 2018). This marginalised position means that many male sex workers live and work in secrecy, ensuring their work goes unnoticed by the public eye. Most male sex workers conduct sex work at night, particularly at places such as bars, clubs and sex dens that are classified as safe for male sex workers, and that are well known among these men and their clients but hard to identify by outsiders. Many are dependent on mobile phones to make appointments with regular clients and use Grindr or other social media dating sites, which further increases their invisibility.

While Kenyan legislation and popular discourse excludes male sex workers, in recent years sex worker organisations have gained a prominent place in state programmes focused on HIV (Mkandawire 2010). Paradoxically, despite their partially criminal legal status, the Kenyan Ministry of Health works with key population-driven interventions, permitting them to focus on HIV-related work with populations such as men who have sex with men and sex workers, without condoning these practices (van

Stapele, Nencel, and Sabelis 2018). Driven by the desire to achieve epidemic control, the Kenyan government, donors and international NGOs include sex worker-led organisations in development partnerships and undertake work to prevent and curb the infection, focusing on the 95-95-95 targets³. However, beyond the realm of HIV, sex workers find it difficult to engage with development institutions, and Kenyan state and structural violence prevails (Česnulytė 2017). Moreover, the current national approach fails to act on the evidence that male sex workers' experiences of risk more often arise in the contexts of sex work, gender and sexuality than HIV. And while there is ample evidence that the criminalisation of sex work and homosexuality works against public health and human rights (Platt et al. 2018), HIV prevention approaches in Kenya fail to explicitly address the role that criminalisation plays in feeding stigma and have done little to reduce the violence this produces (Hagopian et al. 2017).

Methods

This paper draws on findings from nine months ethnographic research conducted in Nairobi in 2018-19.⁴ The research utilised a wide variety of qualitative methods and was conducted in partnership with HOYMAS (Healthy Options for Young Men living with Aids/STIs). HOYMAS⁵ is a sex worker-led organisation established in 2009 as a support group for men living with HIV. It is committed to improving the living and working conditions of male sex workers, primarily in Nairobi, and reaches around 5000 men each year. HOYMAS is one of the sex worker-led organisations included in Kenya's national HIV prevention approach of supporting and testing male sex workers for HIV and making antiretroviral (ARV) medications available to those who test positive. As part of this work, HOYMAS runs a health clinic, organises health outreach, and distributes condoms, lubricants and various medications including pre-exposure prophylaxis (PrEP) for HIV. The organisation also provides its members with a safe space to meet and social support. The members are predominantly young, lower-class, uneducated and poor. Because of their same sex attraction and practices, many have been rejected by their families of birth and experience difficulty finding jobs and housing. Members negotiate these urban insecurities through engagement in sex work and participation in international NGO meetings and training, for which they receive a monetary reward; others run side businesses, such as selling clothes or khat (van Stapele 2020). Most members engage in sex with other men, but not all members identify as gay. There are also a few members who identify as transgender (women).

Our access to HOYMAS was the outcome of previous research collaborations and long-term engagement with this group. Research activities primarily consisted of participant observation and 'deep hanging out' (Geertz 1998) with a core group of 30 men at the organisation's drop-in centre. The first author was present at meetings between HOYMAS' staff and donors, partner NGOs and government representatives, joined them in their HIV outreach activities, and participated in community meetings and other activities. She also took part in 20 community-led research⁶ sessions (see HOYMAS 2019). Outside the organisation, she met up with some of the men socially, either to eat or go out dancing in one of Nairobi's underground gay clubs. Participant observation was complemented by semi-structured in-depth interviews with 18

members and 30 additional relevant stakeholders, including sex work activists, representatives of funding agencies and partner international NGOs. Interviews followed standardised topic guides and were conducted in English. The first author keeps in touch with participants through WhatsApp and follows the organisation and the Kenyan sex worker movement through Facebook. This allows her to continue fieldwork in an online space (Postill and Pink 2012). This study was reviewed and approved by the Institutional Review Board of the Vrije Universiteit Amsterdam.

Data obtained through ethnographic research was enriched through the first author's participation in another research project concerning the prevalence of violence among sex workers in Kenya conducted by one of the funding organisations. This included 30 in-depth interviews and 20 focus group discussions with female, male and transgender sex workers. These interviews and discussions were conducted by a Kenyan researcher who followed a standardised topic guide and interview schedule developed in collaboration with Kenyan sex worker-led organisations. Topics included sex work characteristics, experiences of and reporting of violence, and risk-mitigation strategies (Aidsfonds - STI AIDS Netherlands). The Kenyatta National Hospital-University of Nairobi Ethics Research Committee approved the study protocol and study materials for this study. The first author was responsible for data analysis and writing up the results. Some of the data from this parallel project are used in this paper with permission.

Following Casper and Moore (2009), an ethnographically grounded 'ocular ethic' (Casper and Moore 2009, 14) was used to overcome a static analysis of embodiment. An ocular ethic refers to the researcher's ethical responsibility to represent and identify bodies unseen or less exposed to the public eye, a required step for research aimed at contributing to social justice. We used this method to identify the mechanisms of state power embodied in such practices and subjects, and focused on the interactive and iterative processes by which the seen and unseen were constructed, highlighting the consequences of this attention or lack thereof. In order to use and apply an ocular ethic, all recorded interviews were transcribed verbatim. Codebook development, coding and data analysis were undertaken by the first author. The codebook was developed inductively from the data, and deductively based on the questions included in the interview guides and the conceptual framework of visible and invisible bodies. Data were thematically analysed, after which we reviewed, reorganised and discussed the results, allowing us to further analyse the ways on which male sex workers' risky bodies were constructed.

Findings

The visible risky body: HIV and male sex workers

HOYMAS programmes are focused on health and, being part of several international development partnerships, its staff spend a lot of time in meetings discussing strategies to further improve the sexual health of their community, whilst outreach workers and peer educators test and treat as many men as possible on a regular basis. According to NACC (2016), in 2010 HIV prevalence among men who have sex with men in Kenya stood at 18.2%.⁷ Despite high HIV rates among men who have sex with men in the country, HOYMAS self-collected data show that the rate of HIV among HOYMAS members has dropped significantly over time, from 7% in 2015 to 2.7% in

2018. The overall HIV prevalence among men served by HOYMAS decreased from 18 per cent in 2010 to 10 per cent in 2019 (personal communication, January 2020), suggesting the use of an effective HIV prevention approach. These positive programme outcomes align with evidence from other countries regarding sex worker-led collectives' ability to reduce STI and HIV infection rates (e.g. Reza-Paul et al. 2019).

The organisation's success rate makes the staff feel proud and increasingly in control of the biomedical dimensions of HIV. Members' attitudes towards their own risk reflect this same notion of control. During interviews, participants acknowledged HIV-related risk but simultaneously dismissed it. When asked whether he felt at risk of contracting HIV, Idi said:

'Not really, because nowadays we have protection. We have people who use PrEP, we have people who use ARVs [antiretroviral medication] and when you are on PrEP and use condoms, you'll be fine.'

Idi's words reflect a commonly held belief among male sex workers in this study that condoms and PrEP and other medications provide them with tools to protect themselves, hence, to control their risk of contracting and transmitting HIV. This may also explain why, when the first author asked Jorge whether he felt at risk, he answered:

'Yes. But with the introduction of PrEP, I'm assured of living negatively and able to still enjoy sex.'

HOYMAS promotes the uptake of PrEP among its members by providing PrEP education and awareness events, as well as support groups aimed at improved retention, and distributes the medications through its own health clinic. The quotations from Idi and Jorge suggest that HOYMAS's community-led PrEP strategy reduces members' perceptions of HIV-related risk and also contributes to sexual pleasure, as Jorge's quotation illustrates. This matches findings from other studies showing that PrEP uptake has been high in Kenyan clinics catering specifically for men who have sex with men (Irungu and Baeten 2020).

Invisible risky bodies: Male sex workers' experiences of violence and living with insecurities and threats

HOYMAS's ability to provide the necessary elements for male sex workers to control HIV-related risk through funded programmes is counter-balanced by staff members' voiced concerns about their inability, due to a lack of funding, to provide services that address male sex workers' issues beyond sexual health. As one staff member stated:

'Most of the attention and resources are focused on HIV, and the problem that we have with such funders is that HIV is all about test, test, test, and the next phase is retention, retention, retention, and after that ... nothing.'

Of particular concern are male sex workers' experiences of violence. Violence is central to sex workers' lives and part of their everyday realities. Although there are no official statistics, every quarter HOYMAS hears of at least 120 cases of members who have been attacked and experienced physical injuries. Many men told us that they live in a constant state of fear and anxiety due to the insults, rejection and exclusion they experience, which has a profound impact on their mental health (see also HOYMAS 2019).

Male sex workers' risk of experiencing violence increases when they are outed as gay, or visibly appear to identify as a sex worker and gay. During interviews, men often expressed their awareness of being doubly at risk and conceptualised risk from both positions simultaneously. Additionally, male sex workers' perceptions of risk were context- and place-bounded. The organisation, for example, provides a safe space in which external rules do not apply and men feel free to mingle with others on their own terms. Within this space they feel comfortable using their bodies as vehicles to display their identity and express their thoughts and feelings without fear of being ridiculed or excluded. Beyond this physical space, however, the embodiment of homosexuality and not being able to pass as heterosexual is perceived as evoking risk (Reygan and Lynette 2014).

Several members told us of the risk they experienced in the Nairobi ghettos⁸ where they worked (both in sex work and peer education for the organisation) and where some of them live. In these settings, traditional patriarchal masculinity practices (breadwinner-ship, heterosexuality and dominance over women) are celebrated (Izugbara 2015). Dominant cultural perspectives imagine male sex workers as dirty, morally corrupt and effeminate (van Stapele 2020), which strongly influences male sex workers' perceptions of self and treatment by others. In their narratives, men shared how their sexuality or rumours about it caused their families to reject them, their bosses to fire them and their landlords to kick them out. Collin explained how these dominant views fuel homophobic attacks:

'In the slums, things are different. Not like over here, these guys know that this is a gay organisation and are just, like, 'that's cool'. But when you come to the less privileged side, you find guys who are less educated and not open to such ideas and you find guys being attacked.'

'These guys' that Collin refers to here are the mechanics and other men working in vehicle repair shops close to the HOYMAS office. He feels they are more accepting of them as male sex workers than people in the ghettos are. Many male sex workers strategically manage bodily expression in order to hide their sex worker identity and 'pass' as cisgender. They appropriate heterosexual masculine attitudes and behaviour when outside the organisation. For some, this leads to a dual identity in which they literally switch their appearance within and outside the walls of the organisation. For example, upon arrival at the office, Stella – who identified as transgender – exchanged her flat shoes for high heels, puts earrings in and dons a scarf. Before going out for lunch, she changed back into men's clothes. Similarly, when the first author interviewed Collin at the office, he said:

'The way I act over here isn't the same way I'll act once I'm out there. When I step outside, I just have to put on a mask. I'll be, like, "I'm a man".'

Both of these examples show how managing homophobia is normalised among male sex workers, who self-censor their bodies through embodying hegemonic masculinity when needed. Male sex workers regulate their bodies in public space to mitigate the risk of experiencing violence.

Self-chosen (in)visibility

It became clear that some male sex workers dissociate from others in order to maintain this chosen invisibility. Interlocutors described men who wear make-up, who are

'free in their dressing' and who walk 'girlishly' as too feminine and are thus partly to blame for the inflicted violence. When asked what triggers violence towards male sex workers, one of them said:

'There are men who dress funnily; their dressing is, like, scanty. Maybe they put on make-up. They walk like ladies and very feminine talking, walking and all sorts of things.'

The way in which some male sex workers talked about other sex workers as being too feminine points to a differentiation of choices in terms of embodying gender identity. Men considered it dangerous to be seen in public with people considered 'too feminine' and preferred to keep their distance from these bodies to avoid putting themselves at risk through association. For instance, Dani said:

'I avoid people like that because when you're walking with them in the community people react and the two of you might be at risk.'

Men's disapproval of others who choose to be too effeminate provides insight into the relationship between sexuality and the gendered body. The decision to embody hegemonic masculinity in certain contexts and their experience of violence and feelings of being at risk are the outcomes of this relationship. However, experiences of violence because they are men who do sex work and, thus, do not live up to the norms of hegemonic masculinity, are not the same as experiences of violence because of sexual identity. And it is this gendered component of male sex worker identity which often goes unnoticed in discussion of risky bodies.

Interestingly, while a significant number of the men we spoke to said they preferred to remain invisible and silent about their same sex practices, several men deliberately choose to present themselves to the outside world as being gay and a male sex worker. For instance, Ochieng primarily identifies as a man, but, as he explained, 'when I feel feminine' he wears makeup and earrings and 'cross-dresses at night'. Because of his appearance, he frequently experienced verbal abuse at the market or at the *matatu* bus stops. During and after the fieldwork, Ochieng was beaten up several times by street gangs who stole his money and belongings while making homophobic remarks. He saw these incidents as assaults on his gender identity because it brought into question hegemonic norms of masculinity. While he adjusted his appearance to avoid looking too feminine in certain areas of town, he nonetheless exercised his right to dress as he likes, even though he risked violence or harassment. When asked about this, he said:

'It's risky but at one point you have to take risk since you feel like you want to be who you are. Because you keep on waiting for the right time and place to put them [earrings] on and it never comes so you just have to risk it for you to be happy. Although at one point you might end up in tears instead of being happy.'

Desiring full visibility

HOYMAS strong programmatic focus on HIV is an outcome of funders' restrictions regarding the allocation of funds. This causes frustration to staff members and unintentionally contributes to silencing the other dimensions of members' subjectivity that were associated with, or outcomes of, the other forms of bodily risk they experience. During community-led research sessions, male sex workers referred to mental health

issues resulting from homophobic attacks, economic hardship and, in some cases, addiction as embodied concerns they are not able to take care of (HOYMAS 2019). Some researchers critically reflected on funding agencies' approach to sex workers. As Njorge put it in a Facebook post:

'Can the community get more services on mental health [in] more of the support groups? Condoms and lubes we can buy; you have empowered us enough. Now get to know our story our sad moments the violence we have faced and how it has affected us, how trying to make a living get a job a house has been the struggle and how we cope. That's what we need.' (Facebook post Njorge, August 2019).

The underlying message here hints at the need to address other areas of concern that will contribute to male sex workers' inclusion in society, advance future goals and improve daily lived realities. This idea echoes the opinion of other sex worker activists in Kenya who during interviews pointed to the need for more comprehensive interventions aimed at changing the social, economic and political factors determining risk for and vulnerability for HIV. As Manzi said:

'Now, most [of what] they are doing is health services, but you see the sex worker has been beaten, has been raped, so still the HIV prevalence wouldn't really go down ... They are talking about how to reach 95-95-95 but this sex worker is still being violated, still being raped, still being beaten.'

Limited opportunities to address male sex workers' full embodied experiences

During interview, development partners – including representatives of funding agencies, international NGOs and the Kenyan government – working directly with sex worker-led organisations showed awareness of the often-violent realities of male sex workers' lives. Many were empathic and expressed their willingness to help improve sex workers' marginalised positions and showed commitment in terms of providing some sort of protection. This was exemplified by a Kenyan government representative who explained how she advocated among her colleagues for support for safe spaces and engagement with health clinics to mitigate stigmatisation of and discrimination against male sex workers. However, despite willingness to improve sex workers' lives, many partners confronted structural restrictions. International NGO staff explained that their inability to address male sex worker' needs beyond sexual health was the result of restrictions imposed by the target-driven donor regime they were accountable to:

'They [headquarters] have set out goals and strategies towards epidemic control and everything we do is guided in that context. We work within the context that we are given, and then we try to be creative about making sure – to the extent that we can – to take into account the more structural issues that are not necessarily at the level of priority.' (Director of Global Programme for an international development agency)

Being aware of the violent context in which male sex workers live, interviewees told us that they try to navigate HIV funding streams to address human rights violations against male sex workers as best they could. In practice, this often resulted in providing small grants for activities that were considered to also benefit epidemiological goals and were thus fundable:

'If we are able to invest more in things like violence prevention and response, ultimately more people will be interested in coming forward to access HIV testing services and other, you know, HIV-related services.' (Technical director of Global Programme for an international development agency)

Thus, funding agencies working within the biomedical approach might occasionally provide small amounts of money to strengthen the organisation's anti-violence response; however, this was only permissible when conceptualised as a prerequisite for effective HIV programming. In practice, this had led to several occasions to actions that subjected male sex workers to greater risk. For example, during a partnership meeting, representatives of one funding agency pressured the organisation to keep a register at the reception in which the personal details of each member entering the building were noted. This information, it was said, would support the funding agency's record-keeping regarding the number of male sex workers using the drop-in centre, enabling it to distribute funds accordingly. Staff members were reluctant to share this sensitive information, however, because they did not know how it would be used and knew the security risks for members who were outed. Moreover, the measure threatened HOYMAS functioning as a safe and anonymous space for its members.

To bring about structural change for male sex workers, the HOYMAS management team expressed the need for long-term training to help staff and members develop more comprehensive violence response approaches. Additionally, staff emphasised the need to tackle the criminalisation of sex work and homosexuality, which was considered one of the root causes of violence against male sex workers (Platt et al. 2018). In respect to criminalisation, almost all the development actors we interviewed made it clear that efforts to change criminalising and discriminatory laws affecting sex workers were not within their programmatic mandate. Even when they were empathic to male sex workers' experiences of violence, HOYMAS' advocacy work was often referred to as 'aggressive' and 'hard-core'. Interviewees indicated that these changes were the responsibility of the Kenyan government. Additionally, in specific cases, due to Northern funders' policies with respect to prostitution, their hands were tied with respect to how strongly they could support sex workers' rights.⁹

At the time of the research, HOYMAS had one partner international NGO that operated as an exception to the rule. While this NGO had a strong thematic focus on HIV, it funded HOYMAS to develop comprehensive responses to violence. It also supported HOYMAS to collect evidence on human rights violations and use this for lobbying and advocacy activities. This particular NGO's more comprehensive approach to HIV helped visibilise the plurality of risks male sex workers faced and encouraged the adoption of a more holistic approach.

HOYMAS' response to the challenge of violence

HOYMAS is deeply engaged with the challenge of violence against male sex workers. With and without support, the organisation employs paralegal workers, implements security training for its members, hosts a 24-hour hotline, runs a rescue centre for victims of violence and is a member of an extensive support network that includes other sex worker-led organisations and a small number of supportive police officers. Most

on-the-ground violence response work is carried out in staff members' own time and is paid for by the paralegal workers themselves. Another way in which agency is enacted is through political participation: male sex workers use their physical bodies to take part in protests and demonstrations and perform at public events and appear in national and international media to increase the visibility of the male sex work in Nairobi and Kenya. In this way and by publicly coming out as male sex workers, members draw attention to the violation of human rights and demand protection in order to create what they call 'a supportive environment' for male sex workers.

The flip side of visibility politics however is that it produces risk. Calling attention to yourself often leads to more mistreatment, worsening the problem while also being part of the solution. This increased persecution was particularly evident during, and especially after, the Repeal 162 process, which took place in May 2019 and challenged sections of the Penal Code that criminalise same-sex sexual activities. HOYMAS was one of the petitioners in this case through which LGBT organisations aimed to decriminalise homosexuality in the country. The process resulted in the increased visibility of sexual minorities in public spaces: activists appeared in the national and international media, including in newspapers and on television. After losing the court case, the backlash was immediate and the organisation registered a record number of hate crimes and homophobic attacks on its members. One of HOYMAS's directors said that he saw a clear relationship between the violence inflicted on the LGBT community and the negative ruling, which communicated the message that the community has no rights.

Conclusion

Male sex workers constitute multiple risky bodies, including a visible body at risk of HIV, and invisible risky bodies linked to being gay and being a sex worker. The strong focus on risk in this article however should not be taken to imply that male sex workers' whole lives are constituted of different types of risk. Rather, our decision to focus on male sex workers' risk relates to development practices that acknowledge and make visible a singular risk (i.e. HIV) whilst ignoring others. Using an ocular ethic (Casper and Moore 2009), we identified bodily risks that go well beyond HIV, particularly with respect to threat and danger. Our approach makes these bodies visible to the public eye and, hopefully, the development aid community.

The findings here suggest that key actors working in international health development may need to re-evaluate their conceptualisation of risk. Among HOYMAS' members, the rate of HIV infection has reduced and sex workers feel increasingly in control of the risk. However, due to widespread homophobia and whorephobia, male sex workers remain at risk. These other risks are largely invisible in international development discourse and the distribution of development funding, and sex worker communities have to deal with these securities on their own. Although development actors recognise male sex workers' security risks, their efforts are largely confined to incorporating stand-alone anti-violence, anti-stigma and anti-discrimination activities into their HIV policies and programmes due to restrictions imposed by donor policies and funding regimes.

Through the use of an ocular ethical lens we identified a marked absence of gender analysis in development funding and practices. Violence, insecurity and risk as described above

are the outcomes of expectations associated with hegemonic masculinity. Currently, male sex workers' experiences are not conceptualised as gender-based violence. To contribute to change and develop effective development approaches, it is important for donors to continue funding HIV activities in relation to male sex work, while broadening their definitions of risk. An effective ways of doing this is for funders to participate in more meaningful engagement and dialogues with sex worker-led organisations (see, for example, Nencel 2017; Cornish et al. 2012). Doing so, will ultimately contribute to the development of approaches that transcend a singular focus on HIV, making sex workers' multiple risky bodies visible and responded to through development funding and practice.

Notes

1. All names are pseudonyms.
2. Whorephobia is the social fear and hatred of sex workers.
3. Namely that by 2030, 95% of HIV positive individuals will know their status, 95% of those will be receiving antiretroviral therapy and 95% of those will achieve viral suppression (see also UNAIDS 2014).
4. This study was undertaken as part of a research project entitled Towards Inclusive Partnerships: The Political Role of Community Based Organisations (CBOs) and the Official Development Aid (ODA) system in Nairobi, Kenya between December 2015–October 2019, supported by NWO–WOTRO (Science for Global Development Funds), The Hague, the Netherlands.
5. HOYMAS has no objection to the use of its name and approved the final version of this article.
6. This is a community-led research method 'for the purpose of producing useful results and achieving positive changes in order to achieve locally relevant and meaningful outcomes that ultimately lead to sustainable social change' (HOYMAS 2019).
7. Interlocuters shared frustration about this data being outdated and not reflective of the successful outcomes of the HIV prevention activities engaged in.
8. The term 'ghetto' is preferred by many in Nairobi over 'slum' or 'informal settlement'.
9. For instance, the US President's Emergency Plan for AIDS Relief (PEPFAR) its anti-prostitution clause requires recipients to adopt an organisational policy opposing prostitution.

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