

**MASCULINITIES AND YOUNG MEN'S INVOLVEMENT IN SEXUAL AND  
REPRODUCTIVE HEALTH: THE CASE OF FAMILY HEALTH OPTIONS  
HOSPITAL, YOUTH PROGRAM IN ELDORET, KENYA**

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**Master of Arts, International Institute of Social Studies, 2012**

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## **ABSTRACT**

The thesis seeks to understand the different definitions attached to ideals of masculinities by male youth involved in Family Health Option Kenya (FHOK) youth intervention program. The study was conducted using in-depth individual interviews to explore how male youth engagement with FHOK programs tell us about their construction of masculinities, as they seek to promote their sexual and reproductive health. Findings reveal that the FHOK youth intervention program is redefining male youth's understandings and construction of masculinities, though their understandings were aspirational. Further, the findings reveal other societal institutions such as the family, the church, and traditional circumcision play a role in shaping male youth's construction of masculinities. Additionally, findings reveal that protest masculinities largely conceived by Connell (1995) as 'damaging' falls short of accounting for protest masculinities that are not seen as 'deviant' such as those practiced by male youth at FHOK, Eldoret.

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## **CHAPTER ONE: STUDY BACKGROUND**

### **1.0 Introduction**

This study, which comprises six chapters, presents findings that sought to answer the following four key questions: 1). What does the participation of male youth in Family Health Option Kenya (FHOK) programs tell us about their construction of masculinities in promotion of sexual and reproductive health?; 2). What is the relationship between sexual practices and ideals of manhood among youth in Eldoret?; 3). What are the cultural and institutional practices that influence masculinities in Kenya?; 4). How do young men in Eldoret define masculinity? The study was conducted at the FHOK, Eldoret youth intervention program using qualitative methods. Data were collected using in-depth interviews with the male youth.

### **1.1 Situating my interest in masculinities and sexual and reproductive health (SRH) among male youth in FHOK youth intervention program**

The intention to carry out this research was driven by my personal curiosity. Friends and relatives of mine had participated in the FHOK youth program, so I wondered how this experience had helped shape their understanding and definition of masculinity and its ideals. This, in turn, helped me formulate both personal and intellectual questions for this study. By interacting with my research participants about sexual and reproductive health (SRH) and masculinities, the confidence they exuded belied the common assumptions about monolithic male youth behaviour as deviant in terms of their sexual and reproductive health. There is a generalization that most male youth in Eldoret are perceived to engage in livelihoods seen as illicit, immoral, and anti-establishment, including engaging in drug

trafficking and abuse, promiscuity, and sexual violence (Nzioka, 2009). One of the male youth participant narratives confirmed this societal belief as I gathered my data, exemplified by Clifford's rhetorical question:

My question is, why are youth in our society treated and judged harshly? Many youth are dying....many are talented but no platform leading to bad company, poverty, lack of employment.

The root causes of negative societal beliefs about young men in Eldoret stem from the influence of neoliberal development approaches (Mate, 2014; Silberschmidt, 2003; Davies 2007). In the 1980s, Kenya introduced the International Monetary Fund/World Bank prescribed structural adjustment programmes (SAPs). These programs were aimed at propelling the economy to higher growth and making it more competitive in the global markets (Davies, 2007). As such, the International Monetary Fund/World Bank recommended the liberalization of the economy, privatization of state corporations, and cutting of state subsidies in areas such as education and health. However, these programmes brought severe economic hardship to its citizens and resulted to massive retrenchment of thousands of workers. It has been argued by a number of studies on SAPs and their impact on masculinities that some of the men, who were dependent on these jobs as breadwinners, otherwise considered as one of enduring markers of manhood, found themselves unable to perform these gender roles. To strengthen their sense of masculinities, these men found themselves engaging in risky sexual behaviour, including having multiple sexual partners and unprotected sex, which have been identified as some causes and spread of HIV/AIDS (Halperin et al. 2008; Silberschmidt, 2003).

In addition, on several occasions I had met Kimelenge, a 20-year-old biker who plied his trade in Eldoret, a sprawling commercial town renowned for being the hub of

investments made by Kenyan marathoners and short distance athletes. His friends referred to him as Kim. He lived with his colleague in a crowded and unplanned housing development area near the outskirts of the town called Ngomongo. In 2014, when he turned 16 years old, he dropped out of junior high school. Kim inherited a small piece of land from his father and used it as his source of sustenance. For some time, the farm proceeds enabled him to comfortably stock his grocery shop, and care for his aging parents, but not for long: by the middle of 2016, there was a rainfall drought and high humidity coupled with fungal blights on the corn that he farmed. By 2017, he could no longer rely on farming to cater for his now dwindling business and care for his parents. This compelled him to leave his parents in the village and seek better opportunities in Eldoret, 40 kilometers away from his rural home. He sold part of his grocery shop, bought a pre-owned Bajaj model motorbike, and started ferrying people within Eldoret. I first met Kim in 2017, when I rode pillion on his motorbike. In a journey that would involve travelling for five hours and two resting stops, I learned that he was involved in Family Health Options Kenya (FHOK) youth programs. Due to his busy schedule, Kim could only join his fellow youth on Wednesdays and Fridays for youth programs and workshops on sexual and reproductive health with other youth. As I continued to gather information on the everyday lives of male youth involved with FHOK youth programs, I realized the need for additional, high quality research on masculine practices that were not seen as ‘deviant’ and male youth involved in sexual and reproductive health. However, as fate would have it, about a year after meeting with Kim, I got an admission for a Master’s studies at the University of Lethbridge, where I decided to carry out my research on masculinities and sexual and reproductive health. To address the gaps in the literature, I developed a proposal to investigate masculinities and

male youth's involvement in FHOK youth sexual and reproductive health intervention programs. Therefore, undertaking this study is a search for how male youth are reconstructing masculinities, which are resisting the dominant hegemonic constructions of masculinities among male youth in my community in Eldoret.

## **1.2 Study Problem: Masculinities, Youth, and Sexual and Reproductive Health in Kenya**

Kenya is faced with a growing population with an annual growth rate of 3 per cent per annum.<sup>1</sup> According to the Kenya Demographic and Health Survey- KDHS (2008-2009) and the 2009 census, Kenya has a pyramid-shaped population with 63 per cent of the population being youth below 25 years. Likewise, 32 per cent of the population is between 10-24 years. Moreover, 41 per cent of women and 43 per cent of men of reproductive age are below 25 years of age. Similar to other developing countries, youth in Kenya face numerous health issues. Due to their large population, poverty, and inadequate access to healthcare, most youth do not get opportunities to acquire life skills that make them less susceptible to adverse health outcomes such as, sexually transmitted infections, unintended pregnancies, unsafe abortion, and drug use and abuse.<sup>2</sup> In a research conducted in 2011 by HIV Free Generation in Kenya found that the top three fears of youth were HIV/AIDS, unintended pregnancies, and unemployment.<sup>3</sup> Oronje et al (2013) pointed out that mortality

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<sup>1</sup>See Kenya National Bureau of Statistics <https://www.knbs.or.ke/2009-kenya-population-and-housing-census-analytical-reports/>

<sup>2</sup>See Masculinities and youth sexual and reproductive health in Kenya <file:///F:/MASCULINITIES%20NB/youth-sexual-reproductive-health-kenya-phase1.pdf>

<sup>3</sup>See Kenya National Bureau of Statistics <https://www.knbs.or.ke/2009-kenya-population-and-housing-census-analytical-reports/>

rates are high among youth, with unsafe abortion claiming an estimated 22,000 lives of young women each year. The uptake of contraception is low, varying between 10 to 50 per cent among married women. Early marriages and sexual and gender- based violence is also high among these youth. In a study by Kenya National AIDS and Sexually Transmitted Infections, the prevalence of sexually transmitted infections 12.6 per cent of female youth and 5.5 per cent of male youth aged 15 and 24 years are infected with syphilis (Kenya National AIDS and Sexually Transmitted Infection, 2007). While the HIV and STIs among female youth appears to be higher than that of their male counterparts, in the aforementioned study, HIV and STIs incidence rates among male youth increases between the ages 20 and 30 years of age (Kenya National AIDS and Sexually Transmitted Infection, 2007).

The high incidence of sexual and reproductive health-related problems among youth in Kenya has been blamed on destructive gender norms that discriminate against women and limit men's health-seeking behaviour (Peacock and Levack, 2004; Barker et al. 2010; Lenzi et al. 2019). These destructive gender norms are frequently demonstrated through prescribed practices for how men should conduct themselves and contribute to the performative construction of masculinities in a given social context (Odimegwu et al. 2013). These gender norms are reinforced through interactions with peers, families, religion, media and cultural practices, and structural adjustment programs which in turn influences the SRH of young men (Society for Adolescent Health and Medicine, 2018). For example, traditional 'coming of age' circumcision practiced by many communities in South, West, and East Africa plays a significant role in performative socialization of boys related to socially endorsed ways of being 'real men' (Odimegwu et al. 2013). Traditional

circumcision as a rite of passage emphasizes several normative ways of being a ‘real man’, including: the tolerance of pain, aggressiveness, invulnerability, and the lack of emotion (Gwata, 2009). Barker and Ricardo (2005) report that circumcision of young men between 15 and 20 years of age is practiced as a rite of passage to manhood among the Bakisu of Western Kenya through a month-long process that involves the entire village.

Young men are circumcised without anesthesia by other men (popularly known as ‘surgeons’) in their community who have been trained by other older men to carry out the procedure. After the procedure, the circumcised young men often spend a month in seclusion for healing. Once the initiates are healed, the ‘surgeon’ and the male members of the family speak to each initiate, encouraging them to have unprotected sex with a woman in the village, on condition that it is not the woman he intends to marry. Through this ritualized sex, the young man is said to rid himself of so called ‘evil and boyish spirits’. Elements of this ritual could normalize negative hegemonic masculine practices among these men, which may in turn elevate these young men’s risk of sexually transmitted diseases, including HIV/AIDS (Barker and Ricardo, 2005). Left undetected, and in the context of future unprotected sex, these men contribute to the spread of the virus, and if left untreated could lead to the death of these men. Even with the potentially negative consequences of these practices, traditional circumcision continue to be defended by some ethnic communities in Kenya, since it is seen as key to producing legitimate male subjects among the practicing ethnic communities. Male youth who do not subscribe to traditional circumcision face marginalisation, rejection and lack of respect from members of their communities (Fleming et al. 2017). Research studies by Wawire (2010) showed that men, who undergo medical circumcision, have emerged as ‘ideal men’ who are sometimes

showed off as embodying masculinity. Traditional circumcision practices among these communities therefore confer boys, who undergo these rituals, the status of being ‘real men’ or adults, whilst those who subscribe to medical circumcision or do not undergo the initiation processes are not considered as ‘real men’.

There have been calls by stakeholders in the sexual and reproductive fields to involve young men in gender role intervention programming to promote youth sexual and reproductive health in order to prevent the spread of HIV/AIDS, gender-based violence, and sexually transmitted infections. In the past, institutions such as hospitals working on SRH services have been used to foster young people’s access and uptake of sexual reproductive services (Zuurmond et al. 2012). One such hospital is the Family Health Options Kenya (FHOK), which offers youth programs on sexual and reproductive health. The youth program is an education project working with male youth based on assumption that young men’s behaviours are driven by their pursuit of normative masculine identities, which includes male youth’s ideas and aspirations about gender relations, including young men’s power, entitlement and related practices, herein referred to as masculinities. Thus, FHOK organizes interactive youth workshops where both male and female youth explore various subjects including how dominant notions of masculinities are related to sexual and reproductive challenges such as HIV/AIDS, abortion, gender-based violence, and inequality, with an emphasis on personal and group reflections.<sup>4</sup> Through the research for this thesis, I sought to explore the different understanding and ideals attached to the definition of masculinities by male youth who are currently involved in FHOK youth

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<sup>4</sup>See International Planned Parenthood Federation <https://www.ippf.org/about-us/member-associations/Kenya>



programs in Eldoret, Kenya. These programs seek to establish radical change in masculinities described by some as “democratizing gender relationships” or “pro-feminist masculinities” (Gibbs et al. 2018 p. 503). This means that such programs view masculinities as a set of practices that are modifiable in order to reduce rates of HIV/AIDS, STIs, and gender-based violence and inequalities.

Despite the existence of programmes focused on challenging masculinities, which are not health-enhancing, studies on male youth’s understanding of ideals of masculinities have received little attention. Research focus on male youth in Kenya has often stereotyped them as inherently problematic members of a monolithic male youth culture, that normalizes promiscuity, infidelity, excessive alcohol consumption, and violence; thereby, making them vulnerable to HIV/AIDS, STIs, and gender-based violence (Igonya and Moyer, 2013; Keller, 2017; Izugbara et al. 2018 ; Luke, 2006; Onyango et al. 2011; Nzioka, 2001). Examples of young men who break with these stereotypes are limited in SRH discourses (Njue et al. 2011; Obure et al. 2009; Silberschmidt, 2004). This is despite an increase in young men’s involvement in SRH programs locally (Svanemyr and Villa-Torres, 2014). Therefore, through this research, I sought to explore how the male youth in FHOK programs defined their masculinity. Barker and Ricardo (2005) pointed out that the reason male youth in Kenya are subscribing to masculinities that promote their sexual and reproductive health is driven by their response to personal change, social pressure associated with domestic needs such as responsibilities at home. Through this research, I also specifically aimed to develop a comprehensive understanding of how cultural and institutional practices influenced construction of masculinities among male youth in Eldoret.

The underpinning rationale for exploring the understanding and ideals attached to definition of masculinities by male youth involved in FHOK youth programs is its important role in determining the health of male youth themselves and that of their partners. Perceptions of youth masculinities are not only crucial in the creation of sexual and reproductive policies that will suit their needs, but also provide insights of addressing HIV/AIDS, STIs, and gender inequalities in Kenya and the ways in which they can be addressed (Izugbara, 2008). Echoing the same observations, Sharpe and Thompson (2005) state that unless male youth's own understanding of masculinities are understood and properly mainstreamed into interventions, efforts to combat HIV/AIDS and STIs will fail to deliver their expected impact. Additionally, by carrying out this research, researchers can gather useful insights into the belief system of male youth; therefore, providing crucial entry points for both understanding young people better and for extricating them from the sea of half-truths, myths and prejudices about sex and sexuality circulating among them (Whatley and Henken, 2001). Furthermore, exploring male perceptions of masculinities in Kenya will provide a pathway to address the reproductive needs of others, especially those of female youth (Izugbara, 2008). Knowledge surrounding male youth's perceptions of masculinities is of importance since it affects men's and women's relationships and intersects with other spheres of well-being such as, a county's population growth, sexually transmitted diseases, and gender inequalities (Mufune, 2009). The effectiveness of SRH interventions programs on young people is suspect when male youth's construction of masculinities is not considered. According to Inhorn and Wentzell (2011), women's empowerment without the engagement of young men is not likely to bring the desired outcomes. Male absence in women empowerment programs may lead to conflicts and

increase men's feeling of alienations. Wamoyi et al (2014) revealed that men who had involved themselves in SRH intervention programs were more likely to subscribe to masculinities that promoted their sexual and reproductive well-being and those of their families. It is therefore crucial to understand how young men construct masculinities in an effort to promote sexual and reproductive health in Kenya.

### **1.3 Study Objectives**

My aim in this research study was to explore the different understanding and ideals attached to definition of masculinities by male youth who are currently involved in FHOK youth programs in Eldoret, Kenya. With this aim in my mind, I intended to produce knowledge that can be used to deliver strategies for improving interventions directed towards sexual and reproductive health programs with male youth. In specific terms, the central research question is:

What does the participation of male youth in FHOK programs tell us about their construction of masculinities in the promotion of sexual and reproductive health?

Three sub-questions feed into this main question:

- a) What is the relationship between sexual practices and ideals of manhood among youth in Eldoret?
- b) What are the cultural and institutional practices that influence masculinities in Kenya?
- c) How do young men in Eldoret define masculinity?

#### **1.4 Family Health Options Kenya (FHOK)**

Family Health Options Kenya (FHOK) is a non-governmental organization (NGO) hospital started in 1957 and a Member Association (MA) of International Planned Parenthood Federation (IPPF) (Obure, 2009). Initially, the hospital was called the Family Planning Association of Kenya (FPAK) but later changed to the current name (FHOK) due to the need to reach out to the community with medical services apart from family planning. Youth programs were incorporated in 2000 under the funding of International Planned Parenthood Federation (IPPF). It has four youth centres in Nakuru, Kisumu, Nairobi, and Eldoret. FHOK employs both targeted and integrated approaches to provide youth-friendly services. The targeted approach refers to services which are designed and planned for youth alone and are offered in a setting that meet the youth needs. These services may be clinical, non-clinical, or a combination of both. The integrated approach refers to a situation where young people receive services along with the public while making special arrangements to ensure the services are more acceptable to them.

FHOK was established to increase youth awareness surrounding their sexual and reproductive health, and to empower them to make informed choices and decisions regarding their sexual and reproductive health and act on them. The youth centre also offers outreach programs to institutions including, colleges, churches, and the local community. FHOK also provides youth-friendly voluntary counseling and testing services (VCTs) and adolescent sexual and reproductive health services. The centre serves youth between the ages of 18 and 30 years recruited through peer-peer advertising and youth member directed outreach programs. The 19 to 24 years-old are resource persons, while those aged 25 to 28

years are youth mentors. As stated earlier, FHOK is mainly funded by IPPF, so I find it prudent to discuss its operationalization in subsequent paragraphs.

International Planned Parenthood Federation (IPPF) is a global institution that advocates for sexual reproductive health rights for all. IPPF works with communities and individuals on matters relating to SRH. The IPPF sexual reproductive health programs for youth often entails emphasis on sexual and reproductive health. IPPF acknowledges that this can only happen when sexual reproductive rights are recognized and guaranteed, hence its global mandate. According to IPPF, translating youth's sexual health into practice goes beyond raising awareness among young people to include working with the duty bearers including policymakers, educators, and health providers to entrench these rights while offering their services (IPPF, 2015).

IPPF engages in youth programs in Kenya that include provision of education on sexual reproductive health. Its 'sexual education' programs are required to be free from stereotypes, be gender sensitive, and to be presented in an objective and critical manner. The information gained from these forums ensure that the participants can make decisions in a free and informed manner. This includes information related to safe abortion and motherhood. Further, these programs ensure that there is enough diagnosis and treatment of sexually transmitted diseases such as HIV/AIDS. In addition, IPPF has also been in the forefront in campaigning against women's violence in order to improve their sexual and reproductive health.<sup>5</sup>

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<sup>5</sup>See International Planned Parenthood Federation  
[www.ippf.org/en/Resources/Statements/IPPF+Charter+on+Sexual+and+Reproductive+Rights.htm](http://www.ippf.org/en/Resources/Statements/IPPF+Charter+on+Sexual+and+Reproductive+Rights.htm)

## **1.5 Outline of the Thesis**

This thesis is organized into six chapters. Chapter two delves into the literature review and discusses the historical context of masculinities in Kenya by looking at the pre-colonial, colonial, and post-colonial Kenyan masculinities. The chapter also discusses the impact of structural adjustment programs (SAPs) on Kenya's health care system and its relationship to International Planned Parenthood Federation (IPPF). Chapter three discusses the theoretical framework of the study, critical studies surrounding men and masculinities, and the theory of masculinities. Chapter four discusses my methods and methodology including my feminist approach to researching masculinities, my research positionality and experience in the field, research design, recruitment strategy, ethical considerations, and data analysis. Chapter five discusses the research findings and Chapter six discusses the, summary, conclusion, and recommendation.

## **CHAPTER TWO: LITERATURE REVIEW**

### **2.0 Introduction**

At the heart of my research is the idea that masculinity is socially constructed (Connell and Messerschmidt, 2005) and that it is produced contextually by everyday life. In this chapter, I review relevant and related literature surrounding the construction of masculinities. In the current literature, there exist gaps in scholarly knowledge about male youth's involvement in sexual and reproductive health intervention programs, and their effect on masculinities. We also know little about Kenyan male youth's understanding and construction of masculinities. While I seek to add knowledge in this area, I also review existing studies surrounding the important issues that this research study addresses. This includes literature on the construction of masculinities and the influence of masculinities on sexual and reproductive health in Kenya. The goal of reviewing these studies was to bring to the fore existing debates in the literature, as well as to highlight the gaps that this study seeks to fill. This chapter also discusses the historical context of gender identities in Kenya during the pre-colonial, colonial, and post-colonial period.

### **2.1 Social Construction of Masculinities in Kenya**

Research on the social construction of masculinities in Kenya exists in the form of media analysis, literary representations of 'manliness', historical investigation of tribal masculinities, and the impact of social-economic and political change on masculinities and gender norms. Media and literary research in Kenya have relied on popular music, books, films, television shows such as *The XYZ*, and drama to describe constructions of

masculinities. For example, focusing on a body of literary texts produced in Nairobi between 1960 and 1990, Granqvist (2006) argued that the new masculinities being witnessed were a result of the impacts of colonialism, and post-colonialism on traditional Kenyan masculinities.

The social construction of masculinities is also depicted in Odhiambo's (2007) analysis of fictionalized post-colonial masculinities in Kenya. He argues that Kenya's political independence brought freedoms and liberties that had never been imagined before by majority of Kenyan natives. These freedoms brought with them changes in relationships between men and women. The takeover of political leadership in the aftermath of colonialism by Kenyan men led to the continuation of the masculinization of public and domestic spheres. Odhiambo (2007) argues that the role of Kenyan men in the struggle and acquisition of independence led to male perception that they were conquerors of colonial establishments; a mentality that led to men projecting their sexuality and virility in dominating women.

Research studies show that while traditional male circumcision, being married, having one's own home, and ownership of property such as land and livestock were important features around which masculinity was constructed in many traditional Kenyan communities, these features are undergoing rapid changes as a result of globalization and urbanization. Kenyatta (2011) pointed out that the transition from boyhood to manhood among the Kikuyu communities, for example, were marked through circumcision rituals that sought to toughen boys into warriors. Blommaert (2010) also revealed that building a house among the Luo communities in western Kenya symbolized transition to manhood.



Hodgson's (2003) analysis of the changing masculinities among the Maasai of Kenya revealed that the pursuit of being an *Ilmurrān* (warrior) was, until recently, viewed as a masculine identity among the Maasai men. From an early age, boys were taught to take risks and endure hardships as they were socialized into 'real men'. Once circumcised, the young men were tasked with protecting settlements and livestock against raids and wild animals and serving as messengers for elder men. Maasai men, who did not live up to this masculine identities, were traditionally referred to as *Ormeek*. *Ormeek* was a derogatory name for the Maasai men, who sought to be anything other than the 'authentic' Maasai. Contrary to the traditional Maasai, *Ormeek* went to school, or became Christians, wore modern clothes, and lived in urban areas. However, with the shifting socio-political and economic context, *Ormeek* men have become the most esteemed form of masculinity among the Maasai.

Meiu's (2009) study on Samburu men in Kenya attests to how indigenous masculinities are being reconfigured in the face of flourishing economic growth in the tourism sector. During this period, many young Samburu men ventured into the coastal towns of Mombasa and Malindi in search of jobs and to sell their artefacts. Many of these young men ended up developing sexual relationships with foreign tourists, consequently leading to accumulation of wealth and forming new social groups within their home communities. Meiu (2009) illustrate how the Samburu embodied newer versions of masculinities fashioned in relation to local warrior masculinity and globalization.

Mojola (2014) researched intimate relationships between widowed Luo women and poor young men, which emerged in the wake of a devastating economic crisis period and the HIV pandemic in western Kenya. This revealed how co-optation of widow

inheritance practices in the context of an overwhelming number of widows and rising poverty resulted in widows becoming ‘providing women’, who took on the responsibility of men in this community and positioned these poor young men as the ‘kept men’. However, rather than being feminized by being kept or provided for, the ‘kept’ young men leveraged other ways to prove their masculinity and engage in a performance that was consistent with Luo masculine ideals. The ‘kept’ men used the widowed female partner’s money as a material base with which to prove their masculinity to younger women.

In this study, I add the understanding of youth masculinities in Kenya by specifically focusing on male youth involved in FHOK’s youth sexual and reproductive health intervention program. My aim was to explore the different understanding and ideals attached to the definition of masculinities by male youth who are currently involved in FHOK youth programs in Eldoret, Kenya.

## **2.2 Masculinities and Sexual Reproductive Health in Kenya**

Existing literature on masculinities and health often focuses on how masculinities impact the sexual and reproductive health of men, and those of others in society. A major gap filled by my research relates to how male youth participating in FHOK programs talk about their construction of masculinities, and how they frame their understanding in the context of promoting sexual and reproductive health. Masculinity may promote health through its association with higher income and employment. Doyal (2001) points out that at a glance, being a man may seem straightforwardly health-promoting since it offers privileged access to a range of resources associated with social determinants of health. However, a critical examination reveals a more complex scenario. Though versions of hegemonic masculinity may differ between communities, the maintenance of heterosexual

male identity usually requires men to take of risks that are perilous to their well-being. For instance, the traditional role of men as providers has placed many at greater risk of dying prematurely from occupational accidents. Courtenay (2000), observes that social expectations associate masculinity with a performance of being hard, carefree, unemotional, and being a risk taker, which may encourage men to engage in unsafe behaviours such as speeding, smoking, and drug abuse. Research studies by Mahalik et al (2007) revealed that traditional masculine practices are a risk factor for ill health among men. In their study, carried out in Australia, men who subscribed to traditional masculinity reported more risky behaviours, while retaining few health enhancing ones. U.S study by Courtenay (2009) also demonstrated that men of all ages were more likely than women to engage in over thirty behaviours that led to increased risk of diseases, injury, and death. He attributes these disparities to male health-related beliefs and behaviours on construction of masculinities. Courtenay's observations also resonate with O'Brien et al's (2005) study in Scotland, which pointed out that men were reluctant to seek help due to beliefs and attitudes about masculinities and often ignored symptoms of ill-health.

In Kenya, research on masculinity and health grew widely in the face of increased calls for male involvement in the prevention of the spread of HIV/AIDS. Research studies in Kenya have associated the construction of masculinity to the control of women's bodies, men's reluctance to let women use contraceptives, poor sexual and reproductive health, and the lack of women's utilization of reproductive services (Luke, 2006; Onyango et al. 2011). For instance, studies have revealed that men failed to accompany their partners to pre-natal and post-natal care services because they considered such arenas as feminizing. Onyango et al (2011) pointed out in their study that men, being seen in perceived women

spaces was considered ‘unmanly’. A study carried out by Nzioka (2001) among male youth in Kenya revealed that despite youth’s awareness of the importance of condoms in the prevention of unwanted pregnancies and sexual transmitted infections, male youth still exhibited high risk behaviour. Nzioka attributed this to youth’s belief that having treatable sexually transmitted infections and impregnating a girl were markers of masculinity, and a means to boast of one’s sexual prowess to their peers. Construction of masculinity in relation to health outcomes have also been covered by Njue et al (2011) and Silberschmidt (2004). As the studies discussed above reveal, research on masculinity and its implications on health has previously failed to explore young men’s involvement in sexual and reproductive health intervention programs and their own understanding and construction of ideal masculinities in the context of these programs. Therefore, my study is positioned well to address this knowledge gap.

## **2.3 Historical Context of Gender Identities in Kenya**

**2.3.1 Pre-colonial period (Pre-1800s).** The pre-colonial period forms the genesis of masculinities with the male figure being socially recognized as holding important roles including initiation, union of marriages, and other rituals in the society. During the pre-colonial period, age played a vital role in the social fabric. Ocobock (2016) states that age determined the social, political, and economic relationship among the communities. The society organized itself around age with distinct roles and responsibilities. As one aged, they passed through cultural rituals such as initiation and marriages, giving them more rights and obligations. Elder men were tasked with ensuring cultural norms of the society were followed by the next generation. Such norms created sense of order and perceptions of masculinities (Ocobock, 2016). Among the Luo community in Western Kenya, the

father determined when the young man was mature enough to have his own hut. Young men were supposed to seek permission to be allowed to marry. The father would consult the male relative and get a bride price to the women's relatives for the young man to marry and establish a household (Mojola, 2014).

Despite the active link between masculinities and age in the pre-colonial period, being recognized as a man was not achieved through physical maturation but through a set of approved behaviours for an 'adult male' (Gilmore, 1990). It was a common feature in most Kenyan communities that certain masculinities must be achieved by acting and behaving in a specific way before one's age group (Gilmore, 1990). Achieving manhood was contingent on being judged by other men and women on behaviours and actions considered responsible. Barker and Ricardo (2005) posited that there was a sense of being observed as a young man, as if someone was measuring the culturally salient version of being a man. Both men and women perceived that they were being constantly assessed as to whether they measured up to clear age-specific expectations of roles. Male circumcision, marriage, maintenance of one's home, and having a herd of cattle, mainly acquired through rustling, were the key features around which masculinity was constructed in many indigenous cultures in Kenya (Izugbara, 2015). For instance, among the Agikuyu, the transition from boyhood to manhood was marked through circumcision, which was believed to toughen boys into warriors. Among the Luo community, which did not practice male circumcision because they believed it was a defilement of manliness, building a hut signified one's attainment of manhood. Adult Luo men who did not build a hut were not accorded respect. Hodgson (2003) adds that among the Maasai of Kenya, the pursuit of pastoralism and cultural authenticity was considered ideal masculinity. From an early age,

Maasai boys were taught to take risks and endure hardship, hunger, and circumcision as they were hardened into 'real men'. Newly initiated boys were tasked with protecting the homestead (Manyatta) from perceived enemies and wild animals. Young men raided neighbouring communities, adding to their pride and prestige.

Men were the supreme authority and heads of their homes in most Kenyan ethnic communities. In the Agikuyu community, the man was the owner of the land and home, while the women were the custodians (Mugo, 1982; Muriuki, 1974). This meant that all the decisions had to come from the man regarding ownership and transfer of property. Even during birth of a child, a boy was given more attention than a girl, as it was perceived that the boy child would lead to a continuation of the family lineage. Being born a male was associated with gender privilege in that when boys grew up to be men they were granted access to position, power, and resources on preferential basis to women. Notions of masculinities were introduced at an early age where boys were taught to be strong and not show their feelings. This kind of socialization made men feel justified in subordinating women and girls.

Masculinities were associated with economic independence. Mojola (2014) argues that men were supposed to marry a wife or acquire wives through bride price, establish a household, and provide land to them and children for subsistence farming. For instance, following the Agikuyu traditions, transition to adulthood in the 19<sup>th</sup> century was achieved through cultural processes such as, undergoing initiation, belonging to an age grade group, and establishing a homestead (including land). These were the key cultural processes of attaining adult status. These social institutions dictated the transition of youth to responsible adulthood and instilled values of responsible manhood. In the Luo community,

these traditions implied that a man had authority over his wife (wives) and his male children until they established their households on land given to them by their fathers.

**2.3.2 Colonial period (1800-1964).** Over time, masculinities evolved and re-modeled through historical processes such as colonization, which drew men of different cultures in Kenya together into the existing notions of masculinities. Dominant forms of masculinities, associated with European capitalism, were achieved through cash crop production and wage employment that targeted men, thus giving them cash in increasingly monetized/capitalist economies. For most communities in Kenya, the colonial period provided an opportunity to circumvent the traditional routes to adulthood. Mojola (2014) points out that young Luo men would migrate to cities, where they would work and gain education, which enabled them to earn income to set up their independent households without relying on the male elders. Ocobock (2016) states that colonialism opened new spaces for the young men beyond the rural households or elder surveillance. The new wealth and knowledge they acquired helped them to re-imagine their masculinities and age. In the process, age and masculinities, as defined by traditions, were reconfigured as the young men transitioned to wage employment and cities to earn an income. Further, Ocobock (2016) argues that migration and wage labour gave young men new sources of wealth and allowed them to operate at a safe distance to question the authority of the elders.

Age mattered for the young migrants in the British colonial state in Kenya. As a settler colony, young men were needed to ensure the profitability of the multinational firms that grew coffee, sisal, and tea. As such, these firms went looking for able-bodied men as they expanded their territories in Kenya. These men were appointed as clerks, soldiers, postmen, domestic servants or interpreters to meet the demand of an ever-expanding cash

crop market. Ocobock (2016) illustrates that fathers continued to help their sons, by accumulating money and livestock that could be used to improve their sons masculine standing during initiation, marriage, and bride price payments. The young men who migrated to the cities continued to work as well to build financial strength. Saving earnings from wage employment was a sign of maturity from the perspectives of age-mates and the elders.

It is important to note that women were excluded from the wage labour market during this period. The widespread exclusion of women from wage employment during the colonial period contributed to women's dependence on their husbands, or male kin, despite the fact women were sometimes engaged in economic activities within or outside the home (Jaji, 2009). Despite the re-construction of masculinity during the colonial period, colonial masculinities blended with traditional masculinities to perpetuate male superiority over women. According to Lindsay and Miescher (2003), this was enhanced by the conversion of young men into Christianity, which encouraged a monogamous marriage in which the man was the head of the household and the breadwinner of the family.

Conflicts during the colonial period brought new versions of masculinities. For example, independence movements brought about the 'new versions' of highly respected 'struggle masculinities' for those who led independence movements and valued nationalism. The Agikuyu fighters, and the Mau Mau fought to prevent the British colonialists from acquiring their fertile lands. In the Rift Valley, the Kipsigis young men fought the settlers from acquiring their land. The same was true with the Luo from the Nyanza region. However, 'struggle masculinities' as a component of the masculine identity, is no longer celebrated (Broqua and Doquet 2013).



**2.3.3 Post-colonial period (1963-to date).** Masculinities in the post-colonial period have been defined by several factors including urbanization, globalization, political upheaval, and the lack of functioning institutions in sub-Saharan African countries. Post-colonial masculinities refer to the indigenous versions of manhood, which were shaped by ethnic and tribal practices that blended with the newer versions of Euro-colonial masculinities shaped by religion and Western influence (Barker and Ricardo, 2005). Odhiambo (2007) concurs with this perspective by stating that what contributes to post-colonial masculinity is the ‘residual’ of the traditional masculinity, combined with those masculinities derived from globalization, colonization, and Western cultures. Studies have found that most young men lose affiliation with their rural roots when they migrate to urban areas. For instance, Mieu (2009) pointed out that with the growth of tourism sector in Kenya in the 1980s, numerous Samburu men migrated to the coastal towns of Mombasa and Malindi seeking material gain, and to participate in the socio-economy of tourism. Many of these Samburu men ended up engaging in sexual relationships with white women, and sometimes with men, for money leading to a rapid accumulation of wealth, and the formation of a new social group within their home communities. Furthermore, these men embodied newer versions of masculinities, fashioned in relation to the local warrior masculinity, desire, tourism, the appeal of exoticism, and globalization. Cities also tend to expose men to a gender-equitable version of manhood, but at the same time, it can cause these men to question stereotypes they have formed of men from other cultures (Silberschmidt, 2004). Notwithstanding, cities force people from different ethnic and tribal backgrounds to mix and as a result, change the perceptions and stereotypes they may have about each other’s background (Sommers, 2003).

Christianity played a significant role in redefining masculinities in Kenya. The British colonial rulers established missionary churches all over Kenya where they instilled beliefs and values related to Christianity. Young men were taught what it meant to be a man, and the importance of monogamous relationships. Therefore, this definition of masculinities was enhanced by the interpretations of masculinities within the context of both traditions and masculinities that emerged from Christian faith, education, wage employment, and colonization. The growth of Christianity in most Kenyan communities led to modifications in roles played by men and women, which contradicted the role played by men and women in the traditional setting. Maina (2014) points out that in the pre-colonial era, and part of the colonial era, men performed all spiritual roles on behalf of the family and community. In contrast, in the Christian family, both men and women are responsible for the spiritual well-being of the family. Children were taught from their early years how to pray, and women were also responsible for their spiritual health.

Post-colonial institutional policies also continue to affect young men's adoption of various masculinities, as global institutions are funding intervention programs aiming at changing gender norms. For instance, one would ask to what extent institutions like International Planned Parenthood Federation (IPPF) that is funding FHOK youth programs perpetuate a colonial and colonizing agenda that stereotypes Kenyan masculinities as dangerous. Oronje (2013) observes that the sexual practices of young men in sub-Saharan Africa became a concern of global institutions in the context of HIV/AIDS prevention, and sexual and reproductive debates and policies. These concerns as Oronje points out can be traced to the 1994 International Conference on Population and Development (ICPD) held in Cairo, Egypt. The ICPD sought to increase global and national attention to the

unrelenting increase in maternal mortality, youth sexual and reproductive health, gender-based violence and the low rates of contraceptives, among other issues. However, youth sexual and reproductive health were among the most contested issues in Cairo and the subsequent conferences of the UN. Youth activist and feminist advocates demanded for the introduction of sex education and youth access to sexual and reproductive health services. They also advocated for youth involvement in policy and decision making on sexual and reproductive health issues such as HIV/AIDS (Oronje, 2013). The agenda for youth sexual and reproductive health has been taken up by international institutions like IPPF.

The global response to sub-Saharan African sexual and reproductive health issues particularly on HIV/AIDS is largely shaped by the sexualization of African masculinities (Davids et al. 2001). David et al. (2001) note that the original HIV/AIDS agenda, which was dominated by medical perspectives that sought to understand the different epidemiology of HIV in sub-Saharan Africa and Europe, established that HIV/AIDS rates in sub-Saharan Africa were higher compared to Europe. This finding, as Gausset (2001) observes, was attributed to the sexual promiscuity among African men and cultural practices that led to domination of women as the main contributing factors to the spread of HIV/AIDS. However, Gausset (2001) adds that these explanatory factors for high HIV cases in sub-Saharan Africa, were biased since the findings did not factor in the local meanings of these practices. Furthermore, Gausset points out that findings also did not factor in the non or less 'risky' cultural behaviours that were being practiced. Hence, these findings led to biased view of African masculinities as different and inferior compared European masculinities. As a result of these views, the West and African masculinities

were separated on the basis of modern and traditional practices. However, this representation was not a neutral observation but involved colonial subjugation in which the superiority of the Western cultures of modernity became the norm. As Gausset (2001, p. 512 ) illustrates:

AIDS prevention campaign tell people that they should be monogamous, stop inheriting widows, stop practicing dry sex, witchcraft, etc., without reflecting upon both the ethics and feasibility of such changes. In the West, one respects different cultural and sexual behaviours and one tries to make them safer without fighting against them; in Africa, one adopts the opposite attitude and one tries to eradicate what are identified as ‘cultural barriers’ to AIDS prevention.

Riding on the narrative of politics of development and modernization (Stillwaggon, 2003) the eradication of HIV/AIDS by various international institutions such as IPPF in this case, turned into a fight of modernizing African masculinities. The next section discusses the impact of structural adjustment programs (SAPs) on health care and its relationship with masculinities in Kenya.

#### **2.4 Structural Adjustment Programs (SAPs) - The impact on Kenya’s Health Care System and Masculinities**

Kenya gained self-rule in 1964 at a time of high global expansion and stability. According to Swamy (1994), the first decade after independence was characterized by economic prosperity and high growth prospects. For instance, economic development saw an increase in gross domestic product (GDP) by 6.6 per cent. There was an increase in enrolment and expansions of primary, secondary, and tertiary educational institutions. Between 1963 and 1983, school admissions increased, and the number of students rose from 30,100 to 493,700. During the same period, life expectancy improved from 44 years

to 69 years, and the mortality rate decreased from 219 deaths per 1000 live births in 1962 to 68 deaths per 1000 in 1983 (Rono, 2002). While the first two decades demonstrated the country's economic strength, subsequent decades were occasioned by severe external and internal challenges that led to an increase in the cost of living. The economic situation was made worse by: the global recession that saw fluctuation in prices for the country's major exports, including coffee and tea; drought and famine; the collapse of East African community trade ties; high population growth; low levels of technology; land fragmentation; diseases; and ignorance in education (Rono, 2002). Decreases in gross domestic product per capita were followed by declining standards of living and food shortages. To deal with these economic challenges, Rono (2002) reports that the country implemented the structural adjustment programs (SAPs) initiated by the World Bank (WB) and International Monetary Fund (IMF). SAPs included a range of macroeconomic policies introduced by the World Bank and the International Monetary Fund to debtor countries. These policies were aimed at increasing economic efficiency and strengthening the Kenyan economy in the context of the fluctuating global financial market (Rono, 2002). SAPs sought to re-develop the economy and ensure a free-market-oriented prosperity in Kenya as a means of strengthening the local economy and making the it more efficient and productive.

SAPs aimed to reduce fiscal and external imbalances and revive growth. Their implementation targeted several areas, including financial sector policy reforms; the liberalization of prices and marketing systems; international trade regulation reforms; privatization of some parastatals; government budget rationalization; and civil service reforms (Central Bureau of Statistics, 1993). Since 1980, these elements of SAPs have been

integrated into the Kenyan economy in varying degrees. Since the central role of the SAPs was to ensure growth, the processes also encouraged market liberalization, development of the private sector, and market competition. The critical ingredients of SAPs included an economic model of private ownership, an outward-oriented development plan, and the development of competitive markets. This assumed that developing a free and competitive market and opening the pricing systems were necessary for economic efficiencies.

SAPs were intended to spur economic growth in the long run. However, in the short term, one of the areas that suffered from the impact of SAPs has been the social aspect of human development. This includes a lack of social services, especially among vulnerable groups, families, and individuals regarding health. Statistics show that \$30 million (USD) was allocated to Kenya under SAPs (Central Bureau of Statistics, 1993). According to Rono (2002), the overall health care system of the citizens did not benefit from these funds. The underlying issue was that the country did not have autonomy in allocating these funds because SAPs were operated under strict externally regulated conditions imposed by the IMF and WB (Mwega and Ndulu, 1994). The Kenyan government had no control surrounding the disbursement of these funds obtained under SAPs, and rigid regulations made it difficult for the Kenyan government to allocate money to high priority areas like health. Consequently, important areas of Kenyan social development, including health services, were deprived of the funds they needed.

Some have argued that the Kenyan economy improved in the wake of SAPs implementation. For instance, Mohan et al (2000) argued that there was a 5 to 7 per cent increase in the Kenyan economic growth between the years 1980-1990, and a 2.4 per cent increase in the per capita income. Areas which saw accelerated growth included service

industries and agriculture, with national inflation decreasing at 6 per cent per annum. Despite these positive indicators, other scholars argue that these indicators speak to large scale patterns of social interactions, while failing to recognize the effects SAPs had at the individual level, especially among vulnerable populations (Swadener et al. 2008). For instance, after implementation of SAPs programs, 300,000 employees from the public sector and 50,000 employees from state-owned companies lost their jobs due to retrenchment between 1980 and 1990. To compound the problem, recruitment in the public sector was also frozen as it was one of the pre-conditions for loans by the WB and IMF. Subsequently, unemployment became widespread and poverty levels increased over this period, while the standard of living decreased. SAPs led to introduction of user fees in public health institutions that were once being funded by the state. To the poor, such fees were unaffordable and consequently their access to health care was compromised. Due to the inability of government to fund health care, non-governmental organisation (NGOs), such as the IPPF, stepped in to fund local organisation, such as FHOK, to provide health care with an emphasis in sexual and reproductive health.

In her analysis of post-SAPs effects on masculinities in Kenya and Tanzania, Silberschmidt (2004) found that men who lost their jobs, and subsequently their masculine role as breadwinners, resorted to more violent or self-destructive means of expressing masculinity, including engaging in risky sexual behaviour i.e. having multiple sexual partners, dominance and control of women, and sexual and gender-based violence. These have also been identified as some causes of the spread of HIV/AIDS.

## **Chapter Summary**

This chapter began by reviewing existing literature on the social construction of masculinities and its influence on men's health in Kenya. It also discussed the historical influences undergirding Kenyan masculinities during the pre-colonial, colonial, and post-colonial periods. While Kenyan masculinities have shifted over time, the enduring features of hegemonic masculinities in Kenya continue to be shaped by traditional patriarchal structures of social organization in families and society at large. The chapter also discussed how structural adjustment programs (SAPs) undermined the socioeconomic status of households, including the dominant masculine role of men as breadwinners for their homes. The introduction of user fees in hospitals further led to the exclusion of populations that could not afford to pay to access health services, thereby leading to the establishment of non-governmental organizations such as FHOK under the funding of IPPF to help provide these services. The next chapter discusses the conceptual and theoretical framework in which this study is grounded.



## **CHAPTER THREE: CONCEPTUAL AND THEORETICAL FRAMEWORK**

### **3.0 Introduction**

This chapter discusses the theory of masculinities, drawing on Connell and Messerschmidt's (2005) concept of changing hegemonic masculinities, and their influence in shaping the field of masculinities. In particular, this study draws on their articulations of hegemonic, complicit, and sub-ordinated masculinities to explore young men's perceptions of masculinities in relation to sexual and reproductive health. Other scholars have proposed the need to look at African masculinities in the context of historical processes of colonial conquest, post-colonial realities, and the current globalization processes that continue to shape its meaning (Mfecane, 2018; Silberschmidt, 2001). Thus, in theorizing African masculinities one should consider Africa's historical past and present by contextualizing its lived experiences in pre-colonial, colonial and post-colonial era. The dynamism of masculinities is important in analyzing and understanding the masculinities articulated by male youth attending the FHOK sexual and reproductive health program intervention program.

Furthermore, as this study focuses on masculinities in sub-Saharan Africa, it is imperative to note that Africa is not a homogeneous continent. Understanding Africa and its people requires a review of the specific traits of its past, its history, its landscape, its material and imagined places, and its people (Zezeza, 2005). In other words, Africa is made up of diverse people, separated by different cultures, boundaries, and past historical trajectories. As such, there is no single masculinity in sub-Saharan Africa, nor single

masculinity within Kenya, or among those engaged with FHOK programs. There are multiple African masculinities shaped by various contextual factors, including structural factors such as colonialism, Christianity and globalization.

### **3.1 Critical Studies on Men and Masculinities**

At the centre of what constitute masculinities is the fact that not all men have the same amount or type of power, the same opportunities, or the same life trajectories. This implies that there are multiple masculinities existing at any given point in time and place (Connell, 2005). According to Connell and Messerschmidt (2005, p. 832), hegemony refers to “ascendancy achieved through culture, institutions and persuasions”. Hegemonic forms of masculinities are sustained through the sub-ordination of other masculinities in order to create a hierarchical relationship within the gender binary and across it. Subsumed within hegemonic masculinities are complicit masculinities, which capture performative aspects of masculinity, which comply with aspects of hegemonic ideals. Complicit masculinities do not challenge hegemonic masculinities; therefore, they subscribe to the basic expectations of ‘ideal’ masculinities. Men engaged in subordinate masculinities are not really considered men according to hegemonic ideals of being a man, because they are perceived as not living up to societal expectations of what it is to be a man

Mullins (2006) observes that central to hegemonic masculinity is the continuous legitimation and perpetuation of gender definitions, which requires the subordination of women to men and the subordination of non-hegemonic masculinities. According to Cheng (2008), hegemonic masculinities are often considered normative, yet they remain fluid and are legitimated through practices, beliefs, and discourses in the society. Thus, men find themselves pressured to continually display a masculine persona as expected by the society

(Connell and Messerschmidt, 2005; Connell, 2005). Nevertheless, Kimmel and Connell (2000) observe that hegemonic masculinities are illusions and are at a continuous risk of being exposed. As such, they argue that the presence of dominant forms of masculinities in any society are meant to avert emasculation.

This theory informs and contextualizes my research findings on youth and masculinities at FHOK. However, the theory of hegemonic masculinity alone is inadequate to explain masculinities among the male youth at FHOK in Eldoret. Hearn (2004) critiques this concept arguing that the theory of hegemonic masculinities presents a narrow perspective of the lives of men. The concept fails to acknowledge the role of agency in engaging in subordinated masculinities, such as some of the masculinities of male youth at FHOK. I will therefore analyze male youth's understanding of masculinities as they participate at FHOK youth sexual and reproductive health intervention program.

Furthermore, Miescher (2005) refutes the concept of hegemonic masculinities as being inadequate since the theory does not account for the impact of institutional processes such as colonial conquest and modernity that altered indigenous forms of masculinities and continues to shape them in various settings. For instance, while the spread of religion and colonialism influenced Kenyan indigenous masculinities, it is important to note that it did not lead to a total collapse of traditional masculinities, but it rather led to hybridity between hegemonic indigenous masculinities and the modern notions of hegemonic masculinities (Hollander, 2014). Indeed, masculinities scholars in Africa have noted that hegemonic masculinities maintained a distinct African feature, often captured in terms such as the 'Big man'. Nonetheless, the markers of who the 'Big man' is have changed over time (Hollander, 2014). They are no longer muscular hunters or warriors, but rather defined in

terms of material possession, education level, or the political power they hold. For instance, they drive luxurious cars, hold prestigious political office and careers, and may live in palatial homes. Hollander (2014) points out that the main features of hegemonic masculinities which constitute the 'Big man' are still intact to this day. Therefore, it is important to ground my studies by also including African masculinities as historicized through pre-colonial, colonial, and post-colonial period. The next section discusses the pre-colonial, colonial, and post-colonial African masculinities.

### **3.1.1 Pre-colonial African masculinities**

In pre-colonial Africa, gender roles were learned, and duties placed on each gender with respect to the rites and practices passed down by generations in each ethnic community. For example, in some societies the search for food i.e. hunting and gathering could be principally a male obligation, while in others it was a woman's preoccupation (Onyioha and Nwagbara, 2009). Women, for example, had the duty of organizing the family and by extension, the society. However, a common pattern in the fabric of most pre-colonial African societies was the culture of reverence and sub-ordination of the African women to their male partners (Igboin, 2011; Schwartz-Bart, 2001). Yet, pre-colonial African culture was largely defined by a diversity of religious stimuli, marked by belief in the supernatural (Igboin, 2011). These beliefs defined African gender, identities, and cultural leanings, while also ascribing moral rubrics for the society in the form of folklore, proverbs, taboos, and other beliefs (Magesa, 1997). The positioning of 'the self' or any identity in African socio-ethical thought processes is more of a chain of interdependence and interconnectedness of individuals within the community. However, the over-amplification

of societal determinism over the individual has been tied to lack of recognition of self-hood, which impacts negatively on development targets (Kochalumchuvattil, 2010).

### **3.1.2 Colonial African masculinities**

Ethnographic studies of African societies and Western knowledge about Africa during this period were constructed in terms of binary dichotomies of hierarchy, where one was not only separate and different but also above and better than the other person; this demarcation was considered as a natural order of a social outlook (Signe, 2004). The effects of colonialism had and continues to exert a profound impact on present and future developments on Africa. Colonialism was a highly gendered affair (Morrell and Swart, 2005). The idea of having a man as the sole provider of the family is thought to be a colonial concept that was accomplished through rural-urban labour migration and cash crop production which targeted men (Dominic and Anastacia, 2018). Women were left behind to take care of the families as men took on the roles of breadwinner (Dominic and Anastacia, 2018). Similar to the pre-colonial period, colonialism represented a further continuation of gender inequality, although now informed by western ideas of masculinity and femininity. To further illustrate this, Hunter (1973, p. 94) observed that “since the era of colonialism, women have been placed on the lower rungs of the proverbial ladder by the dominant forces of capitalism, and now globalization, which emphasizes this need for power, superiority and compartmentalization of roles and responsibilities with different values attached to them”.

The impacts of colonialism on African masculinities are seen in many African cultures. For instance, in their discussion of *Men in the Third World: Postcolonial Perspectives on Masculinity*, Morrell and Swart (2005) note that the post-colonial context

is, by definition, a background that necessitates or calls out for progress or development with respect to some widely accepted standards. The post-colonial encounters that Africa faces are marked by a widening gap in growth levels between Africa and other continents (Morrell and Swart, 2005; Lang et al. 2000). Despite all attempts, there is yet no improvement in economic status with the level of poverty crippling individual countries in sub-Saharan Africa.

### **3.1.3 Post-colonial African Masculinities**

By the mid 1980's programs were developed that embraced the role of gender in development, by championing the role of women in reproduction and recognizing their critical role in advancing African economies (Lazarus, 1998). Modern lifestyles are crafted on dependence upon earnings from work in the form of employment. But times and economic conditions are changing across the globe (Morrell and Swart, 2005; Lang, et al., 2000). It has been noted that cyclic economic patterns marked by poor Gross Domestic Product (GDP) growth and performance indices globally have led to an upsurge in job cuts, thus frustrating the economic empowerment programs (Hyslop, 1991). With globalization and technological advances, men who are employed or have regular incomes have higher social and economic status (Dover, 2001). However, post-colonial economic slumps and attendant social factors have changed the lifestyle contexts for African men (Morrell and Swart, 2005). It is observed that African men are less committed to kinship bonds than they were in the pre-colonial times, as most of them have migrated in urban areas in search for economic opportunities, which has continued to be elusive. Mager (1998) posits that they generally avoid taking charge of some traditional roles and are seen to have lost status by society. Nonetheless, the lack of jobs presents men with a possibility to explore their gender

identities and apply these insights to their lifestyles (Lang et al. 2000). Davies (2007) observes that since the 1980s many African countries introduced the structural adjustment programs under the World Bank/International Monetary Fund (WB/IMF) to restore their economies. These programs advocated for the liberalization of economies through privatization of state corporations, and the cutting of state subsidies (Davies, 2007). However, the liberalization of these economies is seen as one of the causes of hardships faced by people in African countries (Dominic and Anastacia, 2018). Studying the consequences of the neoliberal policies, Gibbs (2014, p. 41) notes that “the last two decades of economic decline in Africa have drawn attention to the crisis of masculinities, to ‘failed men’ unable to build kinship networks and to ‘violent men’ who damage social networks whilst competing for scarce resources”.

The growth of Christianity in most of the African societies illustrates the modifications in the roles played by men and women, which contradict the role played by men and women in the traditional setting. Vilakazi (1962) asserts that during the pre-colonial, and part of the colonial era, men performed all spiritual roles on behalf of the family and community. In contrast, in the Christian family, both men and women, are responsible for the spiritual well-being of the family. Children are taught from early on how to pray, and women are also responsible for their spiritual health. Nonetheless, this did not come without resistance. The traditional heads had negative perceptions of Christianity as it challenged their kinship. For traditional homes that converted to Christianity, roles between genders changed and was concerned with equitable distributions of responsibilities (Vilakazi, 1962). However, men were expected to be the head and providers of their families. Post-colonial institutional policies also continue to

affect young men's adoption of various masculinities as intervention programs aiming at changing gender norms are being funded by global institutions. For instance, one would ask to what extent institutions like the International Planned Parenthood Federation (IPPF) that is funding FHOK youth programs perpetuate a colonial and colonizing agenda that stereotypes African masculinities as dangerous (van Klinken, 2015).

In sum, I agree with Connell who posits that masculinities are outcomes of societal institutions, historical processes, institutional and cultural practices (Connell, 2005). As such, the changes in masculinities through the experiences of pre-colonial, colonial and post-colonial African states will shed light on perceptions and ideals of masculinities held by male youth at FHOK sexual and reproductive health youth intervention programs.

### **3.2 Theoretical/Conceptual Framework**

With the focus shifting to men's role in gender dynamics in SRH, the concept of masculinity has emerged as a key theoretical component. Connell and Messerschmidt (2005) argues that in any context there exist more than one hegemonic masculinity, which, while often not fully occupied as a position, are the masculinity/masculinities widely seen as the generally aspired-to versions and against which all other masculinities are structured. It is therefore argued that even in one context, several masculinities co-exist, placing men in a dynamic gender order of contesting, and constructing masculinity/masculinities that typifies one as a man (Connell and Messerschmidt, 2005). Although there are still some theoretical debates about the concept of masculinity, it is understood as socially constructed (Connell, 2005). Social construction in this case emphasizes that the features that characterizes one as a man are attached to social and symbolic meanings rooted in social structures. Therefore, this creates an opening to investigate how masculinity is constructed



in relation to cultural practices and institutions. The understanding of the theory of hegemonic masculinity is important for this research study. This is because hegemonic masculinity does not operate from the top, where some dominant groups enact them while others become marginalized, rather different local groups in this case the male youth, can perceive, challenge and sometimes reject the ideal type of dominant hegemonic masculinities to form protest masculinities.

### **3.2.1 Protest masculinities**

Although there exists limited literature on protest masculinities, the concept is significant to my work. Protest masculinities are gendered identities that protest against ideal types of hegemonic masculinities existing in a place (Walker, 2006). Connell (1995) coined the concept of protest masculinity by building on the works of Alfred Adler. The concept was developed by Connell after conducting interviews among a number of socially marginalized men in Australia. Connell sees protest masculinities as overamplified claims to manhood arising from exclusion from hegemonic system of masculinity existing in certain contexts, such as being financially stable, being physically strong or acquiring a certain social status. However, due to the inability of some men to attain the socially desired dominant masculine identity, they resort to exaggerated masculine practices like getting involved in violence, risk taking, extreme exercises and activities. Protest masculinity is therefore a result of deep feelings of powerlessness and insecurity. Connell (1995 p. 111) likens protest masculinity to “a tense, freaky façade, making a claims to power where there are no real resource of power”. It is comprised of high levels of aggressive behaviour, destructiveness, crime, and drug abuse. Thus, I would argue that protest masculinities arise as masculinities that reject hegemonic masculinities prevailing in a particular context.

However, Connell's definition of protest masculinities seems to be damaging. Walker (2006) sees this definition of protest masculinity as incomplete for it conceives it as destructive as it fails to incorporate masculine practices of young men who engage in protest masculinities that are not seen as deviant. For instance, I would say that the male youth in this study in Eldoret are involved in a form of protest masculinity because they are embracing masculinities that contradict prevailing masculinities among male youth in this community. For instance, by getting involved in FHOK intervention program, they become aware that the dominant ways of being a 'real man' in the community, such as engaging in sexual promiscuity, being physically strong, and invulnerable to pain is a form of 'destructive hegemonic masculinities'. I therefore ground my research on protest masculinities that are not 'destructive' by focusing on male youth's enactment of masculinities that promote gender equities and sexual and reproductive health of themselves and those of others.

### **Chapter Summary**

This chapter discussed the concept and the theoretical framework in which this study is grounded. The chapter discussed Connell and Messerschmidt (2005) concept of changing masculinities. It also discussed African masculinities through historical analysis of masculinities in pre-colonial, colonial and post-colonial periods. The chapter concluded by discussing Connell's (1995) concept of protest masculinities. Although Connell conceived of protest masculinity as 'destructive', this study build on this concept to highlight protest masculinities that are not 'deviant'. The next chapter looks into the research methods and methodology used in this study. The chapter discusses

epistemological reflection, research design, ethical consideration, data analysis, and my research positionality.

## **CHAPTER FOUR: RESEARCH METHODS AND METHODOLOGY**

### **4.0 Introduction**

This chapter discusses the methods I used in carrying out my research. The chapter begins by reflecting on the epistemological basis and evidence-gathering approach. The chapter also discusses the research design, recruitment strategy, ethical considerations, data analysis and positionality, and data collection experience. My reflections on the limitations and strength of the study and possible methodological directions for future studies are also discussed.

### **4.1 Epistemological Reflections**

Epistemology interrogates the nature, meaning and scope of knowledge (Krauss, 2005). The key questions epistemology seeks to answer include: What is knowledge?; What is knowable?; What do we know?; and How do we know what we know? (Krauss, 2005). Central to my research is the idea that masculinity is a socially constructed part of the daily life of individuals, and socially produced depending on the context one occupies. I am interested in the different understanding and ideals attached to definition of masculinities by male youth, who are currently involved in FHOK youth programs. Epistemologically, the answers to my research study belong and resides in the male youth involved in FHOK programs. Given the focus on masculinity as a social construction by societies and deriving this understanding from the meaning people give to their actions as men, qualitative research methods offered me a means for accessing the key information and knowledge that I was seeking. I considered in-depth interviews as appropriate tools that allowed me to deeply understand the reality of the lives of the male youth. However,

I was also cognizant that reality was not fixed and that the information I collected may be interpreted differently from this study.

#### **4.2 Research Design**

The study employed qualitative research using in-depth interviews to collect data. Qualitative methods were used because of their ability to give the best insight into how young men presented themselves as gendered beings (Schrock and Schwalbe, 2009). I chose to use qualitative methods in this study because of its strength in appreciating subjectivities, accepting multiple perspectives and realities, recognizing the power of research on both participants and me (O'Leary, 2010). Qualitative methods offered me the opportunity to examine social complexities in order to truly explore and understand the interactions, processes and belief systems that are part of the individuals, institutions, and cultural groups (O'Leary, 2010). I believe participants' meanings and experiences can only be understood based on the way they communicate. The description of what participants shared was analyzed to give meaning and illuminate practices and actions concerning their understanding of masculinities. In addition, I found out that qualitative methods were ideal for my research as I was researching on male youth whose masculine experiences were ordinarily invisible.

I collected data using semi-structured interviews with a total of 14 male youth in the program. Semi-structured questioning involved the use of flexible structure, where I had the opportunity to start with a defined questioning plan after which I shifted my questioning to follow the natural flow of conversation. I chose semi-structured interviews because of their flexibility in enabling me to probe answers, while also giving the interviewee the opportunity of adding or withdrawing responses (O'Leary 2010). I also

recorded non-verbal responses such as tone, which gave me greater insight into the respondents' true opinion and beliefs. I conducted the interviews at FHOK youth program compound. I carried out some of the interviews at the FHOK Youth Hall, but when the Youth Hall was not ideal because of interference from non-participants and other events, alternative places were used. The change of rooms was mainly occasioned by the dance practices that were held in the Youth Hall in the afternoon. These 14 interviews involved a one-on-one session that lasted an average of an hour and were all audio-recorded. Before setting out to the field, I planned to have two sessions, one as an initial interview, and the other as a follow-up interview just in case a participant wanted to make any clarification or add more information on the already collected data. But none of the participants wanted to participate in a follow-up interview.

#### **4.3 Recruitment Strategy**

Purposive sampling is “a technique in which cases are selected by the researcher based upon individual’s knowledge of the topic, as well as their ability and willingness to participate” (Oliver 2014, p. 32). This method is chosen because of the need to understand the views, opinions and needs of selected individuals related to their understanding of masculinities. Thus, to get the number of respondents required for in-depth interviews, I placed a recruitment poster on the Youth Hall notice board. My initial plan was to use the youth social media page, but it turned out they did not have a social media platform. As such, I relied on the notice board. The poster aimed to invite male youth, who were willing to voluntarily participate in the research study in mid-December 2018. The reason for rolling out the recruitment posters was to get an adequate sample frame and a large enough sample size to select respondents that fit the characteristics needed for the study on

understanding the ideals of masculinities among men engaging with FHOK programming. After getting the name of respondents, I employed purposive sampling of the respondents based on the following inclusion criteria. The participants were to be: (a) male youth between the ages of 18 to 24. (b) be in school, or out of school. (c) be involved in FHOK programs. (d) be able to communicate in English. The use of English was chosen because it is one of the Kenya's official languages and the language of instruction in all institutions.

#### **4.4 Ethical Considerations**

Ethics as a discipline is concerned with a broader value system of our society that involves a consensual agreement of what is considered wrong or right (Shamoo and Dunigan, 2000). In 1947, the Nuremberg Code, was formulated by American judges following the horrific human experimentation by the Nazi doctors during the Second World War, emphasizing the need for protection of the rights of participants (Speziale and Carpenter, 2007). Nationally, Canadian institutions vet the ethics of proposed and ongoing research through Human Research Committees (2010), whose mandate is to ensure that ethical principles and standards respecting the personal welfare and rights of participants have been recognized and accommodated. Similar to research ethics boards across the country, the University of Lethbridge's Human Subjects Research Committee assessed the ethical principles of this study based on the Tri-council Policy Statement for Ethical Conduct for Research Involving Humans - TCPS 2 (2018). In accordance with University of Lethbridge requirements, I obtained a written approval to carry out my research among the male youth from the FHOK Youth Program Officer in Eldoret, before engaging in any recruitment or data collection.

Researchers are often perceived to be powerful compared to research participants. As a result, Warin (2011) advocates for ethical balance, which calls for recognition and resolution of ethical dilemmas to maintain trust while conducting research among young people. As a researcher, I strived to balance the benefits and risks of study participation so that respondents did not slip too far to the side of risks (Warin, 2011). For instance, to maintain the privacy of the respondents, the study used pseudonyms. Similarly, before the start of the study, I invited each selected participant for a preliminary meeting with the aim of explaining the purpose of my study, answer any questions that arose, and address any concerns of the participants. It was then that I gave them the consent form and ensured that their decision to participate in the study was fully informed. Fourteen participants agreed to be audio-recorded and have notes taken during the interview. I also sought on-going consent throughout the data collection period to ensure each participant was still willing to participate in the interview and understood further the implication of participation in the study (Warin, 2011).

To maintain my interaction with participants once I had completed all the interviews, I gave them my email address and mobile phone contacts. The email and phone numbers were also given to participants, who were interested in receiving an executive summary of the findings. I also gave them my supervisor's contacts. Additionally, I met the youth program officer to thank him, and leave him with my contact details. As a way of giving back to the community, I agreed to attend a youth workshop that was discussing issues of sexual relationships and sexual health. During this workshop, the program officer asked me to talk to the youth about my experiences related to sexual reproductive health, and the challenges that youth faced during my time. I was raised in the rural parts of Eldoret;



therefore, intervention programs such FHOK were not available. Additionally, discussing sexual and reproductive health matters was only meant for married women, and was not a men's issue. I therefore found that the FHOK's role in reaching out to the male youth was key in promoting the sexual health of the youth.

During the workshop, the male youth were asked if, "if they got married, would they participate in house chores?" Contrary to the in-depth interviews, some participants still saw domestic chores as a woman's responsibility, while a man's duty was to provide for the family. However, it is important to note that this answer was given in the presence of other men, which may have left some of these men feeling pressured to answer according to the hegemonic norms in the community.

#### **4.5 Data Analysis**

Data for this study were analysed thematically, a method that involves identifying and interpreting patterns across the interview transcripts (Braun and Clarke, 2006). I used an inductive approach to the thematic analysis in which I developed themes that were data driven. My main aim was to explore the different understanding and ideals attached to the definition of masculinities by the male youth involved in FHOK youth SRH programs. As suggested by Braun and Clarke (2006), I read and re-read the data transcripts several times, and then I did coding and analysis that entailed a six-step process: a) becoming familiar with the data by reading and re-reading participants' transcripts, b) generating initial codes by organizing data into meaningful and systematic manner, c) searching for preliminary themes, d) reviewing, modifying and developing the preliminary themes. e) defining themes to identify what each theme entails, and f) writing up of the findings.

Analysis of these data began once I had completed the verbatim transcription of field interviews. I went through each transcript several times to become familiarised with the statements and themes that were key to the research topic. In accord with Braun and Clarke (2006), I checked back to the field notes to establish narratives and sentences that would lead to creation of themes. The central theme identified was, “I Now Know- Redefining Masculinities” while the sub-themes identified were, pathways to awareness, friendship, connection and growth, searching for role models, aspiring for equality and respect, and facilitators of masculinities.

Data were managed using Nvivo12 software program. The NVivo program aided in organizing, coding, and analysis of data. I settled on NVivo due to what Kirby et al. (2006) refers to as its ease and fastness when one has voluminous amount of transcribed data. NVivo also lets the researcher code all participants transcripts to compare them with each other and import documents from *MS Word*. Coding using NVivo involved several steps. Firstly, I imported file documents from *MS Word*, secondly; I created nodes from the transcripts, thirdly; I came up with codes and themes, fourthly; I examined the relationship among the generated themes; and lastly, I analysed the codes with the initial definition attached to individual codes.

#### **4.6 Positionality and Data Collection Experience**

The ideas and interpretations in this research study are not entirely value free. My ideas and interpretations have been influenced by my socialization and life experiences. I lived in Eldoret town, I was born and raised in the outskirts of the town. I therefore feel that these dynamics may have influenced my views and understanding of the lives of my research participants, who were born and raised in urban settings. I also have a

longstanding experience of working with female youth in urban informal settings in the areas of sexual and reproductive health, key populations, orphan and vulnerable children (OVCs), and women in Kenya and abroad as part of my job responsibilities. Thus, these aspects undeniably had some influence with the male youth I studied, and on my interpretation of the findings in various ways. These dynamics also affected the ways I negotiated my access to the male youth and staff at FHOK. In some instances, the differences were both opportunities and challenges. For example, being familiar with the location gave me an easier entry to FHOK. It may have also led to the male youth to be more receptive and cooperative during the recruiting process. My belonging to this place also increased their and my level of comfort and assisted in developing rapport.

I also created contact with the program officer while working with another organization in Eldoret and have relatives and friends who have worked with FHOK. It is through them that I learned how to obtain access to this organization to carry out my research. My ability to speak in Swahili, English, Kalenjin, and Sheng (a mixture of Swahili and English), that the youth were conversant in, helped in conducting of in-depth interviews. Sometimes before I commenced the interviews, the male youth engaged me on different issues including how I survived in a foreign country in terms of weather, culture, food, gay marriages,<sup>6</sup> and the system of education. The youth also asked my views on social issues such as gender identities, gender equality, and abortion. I was asked about the meaning of LGBTQI, whether abortion should be carried in situations of rape, and whether

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<sup>6</sup> The issues raised by the male youth on gay marriages may have stemmed from the role played by FHOK in hosting an organization that aims to champion gay rights in Kenya in their compound. Identifying with other gender and sexualities in Kenya is a criminal offence. Abortion is only permitted in cases where a specialist deems the life of the mother is in danger.

circumcision was also a transition to manhood in Canada. These questions posed by the youth helped me to reflect on my own understanding of social realities then and now.

Indeed, before long, the participants and the security guys manning the gate started referring me to that lady from Miguna Miguna's country. Miguna Miguna is a Kenyan citizen by birth, but he holds permanent political asylum in Canada. In 2017, Miguna Miguna went back to Kenya to run for a gubernatorial seat for Nairobi County as an independent candidate. Though Miguna Miguna lost, he started opposing the ruling party on the grounds that they had rigged elections, this is even after the court ruled in favour of the party that later formed the government. Miguna Miguna's agitations infuriated the government and it was then that his Kenyan passport was confiscated, and he was deported back to Canada.<sup>7</sup> In other instances, it was the worth of my research that was discussed, with participants, and those who knew what I was doing, asking how my research was going to help, or if it had any impact on the funding the program was receiving from international donors. The question about the significance of the research to the youth or FHOK is something I envisaged while drafting my ethics form. Before the start of the data collection, I held a meeting with the participants that aimed at explaining the purpose and benefit of the research study. However, the question of importance and benefits of the research often came up, and I had to restate again the importance and benefit of the study in contributing to scholarship on masculinities in Kenya.

My challenge in the field was derived from my pursuit of education abroad. Pursuing education abroad is still viewed as prestigious in Kenya and may sometimes affect the power relations between the researcher and participants, particularly in this case where

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<sup>7</sup> See Miguna Miguna deportation <https://www.nation.co.ke/news/Why-Miguna-was-deported-from-Nairobi/1056-4294534-fqt52b/index.html><sup>7</sup>

my participants were drawn from male youth, who were still pursuing their undergraduate degrees in Kenyan universities. Thus, I attempted to minimize power differentials to the best of my ability. For example, I treated the participants as equal partners. When it came to the decision about where to carry out the in-depth interviews, I would ask them to decide by themselves when and where they felt comfortable to hold the interviews. Nevertheless, I sometimes asked them to choose a place that had minimum interruptions from any disturbances, such as noise and traffic.

Since I am no longer considered to be a youth, this may have also affected how our interactions unfolded. This is because culturally in Kenya, the oldest in a group, or if one is deemed as having a higher status (e.g. higher education), is accorded some authority because it is assumed, she/he knows more or has more experience than those in the group. This may have cast me as someone, who was an expert in the field. To minimise the possible effect on these assumptions on the interview data, I informed participants of the importance of sharing their experiences of masculinities. While Lee (1997) points out that conducting research as a female among male participants one is likely to be sexually seduced by the male participants, I did not encounter any sexual advances from the male youth; instead the participants related well with me. This is largely due to the participants knowledge of my status as a married woman.

Overall, my study fills a key knowledge gap about male youth's understanding of masculinities. I carried a qualitative research using in-depth interviews to collect data. I chose to utilize qualitative data because it permits rich descriptions of study participants. However, the study was only conducted among male youth in FHOK, Eldoret and therefore I do not know how same matters addressed here could compare with the rest of Kenya.

## CHAPTER FIVE: STUDY FINDINGS AND ANALYSIS

### 5.0 Introduction

This study sought to explore the different understandings and ideals attached to definition of masculinities by male youth who are currently involved in FHOK youth programs in Eldoret, Kenya. To find answers, I explored one main question; “What does the participation of male youth in FHOK programs tell us about their construction of masculinities in promotion of sexual and reproductive health?” This chapter discusses the study’s findings and the socio-demographic profile of participants. The socio-demographics are presented in a tabular form that entails, the pseudonyms of participants, their ages, who they live with, their religious background, their level of education, and how long they have been members of FHOK youth intervention program. The findings are presented in themes derived based on the process of thematic analysis articulated by Braun and Clarke (2006), as discussed in Chapter Four. The final central theme, and sub-themes were generated after codes were collated in categories and later themes. The central theme identified was **“I now know”- Redefining masculinities** while the sub-themes identified are: 1) Pathways to awareness; 2) Friendship, connection and growth; 3) Searching for role models; 4) Aspiring for equality and respect; and 5) Architects of masculinities. I sequentially present the central theme and sub-themes developed with illustrative data in this chapter.

### 5.1 Socio-demographics of Participants

In Table 1 below, I present the socio-demographic profiles of participants whose understanding of masculinities form the core of this thesis. The profiles demonstrate their diverse identities as they participate in FHOK. According to their ages, three participants

were 24 years, one participant was 23 years old, two participants were 21 years old, five participants were 20 years old, and three participants were 19 years old. In terms of who they lived with, seven participants stated that they lived with their parents, four participants lived alone, two participants lived with their mother, and one participant lived with his father. On educational background, ten participants stated that they were in tertiary institutions, and four had just finished secondary school. Fourteen participants stated that they had were Christians, and they actively participated in Church activities. Six participants stated that they had been involved with the FHOK program for 2 years, six participants had been members for 1 year, one participant had been in the program for more than 5 years, and one participant had been in the program for 3 years.

Table 1

*Socio-demographics of participants*

Name	Age (years)	Living with who	Education	Religious affiliation	How long they have been in FHOK
Daniel	20	Father	Secondary	Christian	2 years
Bryo	19	Parents	Secondary	Christian	1
Isaya	20	Parents	Tertiary	Christian	1
Mathayo	24	Alone	Tertiary	Christian	More than 5
Lwanda	20	Parents	Tertiary	Christian	1
Clifford	20	Parents	Tertiary	Christian	2
Dalton	21	Mother	Tertiary	Christian	1
Gideon	24	Alone	Tertiary	Christian	3
Paulo	23	Alone	Tertiary	Christian	2
James	24	Alone	Secondary	Christian	1
Kereri	19	Mother	Secondary	Christian	1
Phylly	20	Parents	Tertiary	Christian	2
Kimani	19	Parents	Tertiary	Christian	2

Roji	21	Parents	Tertiary	Christian	2
Jonah	24	Parents	Tertiary	Christian	Less than 1 year

## 5.2 Central Theme: “I now know”- Redefining Masculinities

In light of my quest to find out if male youth involvement in FHOK programs had influenced their understanding of masculinities, participants were asked the question, “Has participating in FHOK youth program affected your understanding of masculinity?” Participants responses revealed that twelve of them agreed they had internalized new perceptions on gender roles that they did not have before engaging in the program. Thus, the central theme, *I now know- redefining masculinities* speaks about participants’ before and after definitions and understanding of masculinities. The participants responses are discussed under the sub-themes, ‘I now know...’, and ‘taking charge’. However, it should also be noted that two respondents said that FHOK had no impact on their perception of masculinity, and these diverging views were captured in the element ‘different perspectives’.

### 5.2.1 “I now know...”

Interviews with participants revealed that through FHOK’s approach to exploring masculinities, the male youth had internalized non-violent versions of manhood. Five participants pointed out that they had now knew that the use of violence was not manly. For instance, Kimani recognized that it was inappropriate to use violence against a female partner. He said;

Before I joined FHOK, I knew beating up your partner was part of being a man. I also believed it is a sign of love and care to your partner. But now I have learned it



is not. There is even more love and peace between us because my partner is no longer fearful of my reactions.

Isaya acknowledged that through sessions organized by FHOK, he had learned how to be a 'real man' who should not beat his partner. Paulo pointed out that FHOK had taught him how to treat female colleagues as equals. He further added that he now knew how some perceptions of masculinities are negatively impacting SRH issues including the consequences of not using condoms for protection. Bryo, on the other hand, said that:

Yes. Initially before I came to be involved with FHOK, I knew that after circumcision a man has a say but after joining, I was taught how to be considerate with females.

Paulo also stated that before he joined FHOK, he thought being a 'real man' meant beating a partner as a sign of showing love but after getting involved in FHOK he has learned that it is not manly, and it is an archaic practice. Mathayo added that:

FHOK helped me a lot, my way of thinking about women has change. Before I joined FHOK, I used to be very violent towards my partner but now that has changed. We resolve our issues peacefully.

Lwanda explained that while he had learned that a man is not supposed to hit a woman, he had been able to distinguish the role of a 'real man' in urban areas to be different from being a 'real man' in rural areas. He stated:

To be honest with you, by participating in FHOK I now can do household chores with my girlfriend. I can even hang our clothes outside to dry without fear of what others will said... I have learned that it is not only a woman's responsibility. In urban areas, men and women can perform the same responsibilities but not in rural areas. In the rural home people will think you are bewitched.

Daniel stated that he has learned that he does not have to have multiple sexual relationships to feel that he was a 'real man'. Being a real man in this case meant the adoption of prevailing dominant masculine ideals of being a man that other youth in his social circle

embraced. Daniel's narration revealed that the notion of having many girlfriends was a sign of being a man. He stated that he used to feel inadequate as a man when he saw his friends having multiple sexual relationships. I probed his thoughts further by asking how he felt after finding out other ways of being 'a real man'. He replied that he felt that he is a man like any other, and added that, he no longer felt envious of his friends' lifestyles since he perceived himself to be a 'real man' too.

Philly used to associate masculinity with having unprotected sex and fathering a child as a sign of sexual prowess. However, he no longer feels this applies to his understanding of masculinity due to his experiences with FHOK. He stated that impregnating a girl is not a sign of being a 'real man'. Instead, he has learned to use condoms as a form of contraception and prevention of HIV/AIDs. The association of identity and masculinities with sexual prowess may have numerous implications for sexual and reproductive health, such as the spread of sexually transmitted infections or diseases such as HIV/AIDs.

### **5.2.2 Taking charge**

The sub-theme 'taking charge' relates to young men's learning that a 'real man' is responsible due to their involvement in FHOK. Two participants revealed that they were now responsible that before joining FHOK. Jonah pointed out that, he had learned that a 'real man' should be responsible. Kimani added,

Being a man is not all about having sex with several women. As a man, one must be responsible. Before you act as a man, weigh the pros and cons of doing something.

Kereri, on the other had stated that FHOK had helped him know that a 'real man' should protect himself from sexually transmitted infection to also protect their partner.

### 5.2.3 Different perspectives

Different perspectives represent responses of participants who felt that FHOK youth intervention program had no impact on their views of masculinities. This is because they had internalized the ways of being a 'real man' from their family. Three participants felt that FHOK programs had not affected their perceptions of masculinity. James stated that he knew how to be a man before he joined FHOK, that a man should be disciplined and respect ladies/female friends. Dalton said that he already knew a 'real man' should work to get money for his family. Philly agreed that FHOK had to some extent changed his views on gender role perceptions, but he still believed that 'real men' were heads of households and decision makers as taught by his family.

Findings revealed that prior beliefs on masculinities are expressed in terms of views such as engaging in intimate partner violence, having multiple relationships, and having unprotected sex as markers of being a 'real man'. However, upon joining FHOK workshops, the male youth were able to question these notions and highlight the fact that these beliefs on masculinities were problematic. Participants pointed out that they now were aware that intimate partner violence, having unprotected sex, and having multiple partners as, not markers of 'a real man'. An important point in understanding definition of masculinities by the male youth in this study is the notion of hegemonic masculinities. To Connell and Messerschmidt (2005 p. 832), "hegemonic masculinities refer to a type of manhood that only a few men can actually achieve while others position themselves to it". It is achieved through cultural complicity and social acceptance in a specific social context. This includes notions such as men being expected to be the heads of household, breadwinners, strong, and are heterosexual.

The findings of my study suggest that the norms of being a 'real man' outlined above by Connell and Messerschmidt (2005) are prevalent in Kenya. Participants described the views of having multiple sexual partners, using violence against a partner, display of strength as to what constituted a 'real man'. However, upon joining FHOK, findings reveal that participants were now aware that intimate partner violence, having unprotected sex, being strong, and having multiple partners are not markers of a 'real man.' These findings support Connell's (2005) observation that masculinities are not essentially fixed but they are dynamic and changing. Connell (1995) terms the shift in male youth definition of masculinities as protest masculinities. According to Connell (1995), protest masculinities are compensatory notions of masculinities that occur when some men are unable to achieve the locally valued versions of traditional hegemonic masculinities in a place. Connell (1995) sees protest masculinities as masculinities which cannot be based on the privileges of hegemonic masculinities but needs to rework the themes of male superiority to improve one's standing. It is also important to note that protest masculinities can be hegemonic and can be continuously be sustained as a collective practice in a social place such as FHOK. Findings of this research among male youth in Eldoret seems to demonstrate forms of protest masculinities. For instance, after joining FHOK the male youth were enacting other forms of masculinities that contradicted the prevailing forms of hegemonic masculinities among male youth in Eldoret. For instance, the male youth after involving in FHOK programs, they were now engaging in protective sex or embracing masculinities that involved joined decision-making with their partners which made them to believe that they were also 'real men'. However, the newly acquired masculine norms contradict the prevailing masculinities among male youth in these settings. From the

narratives the male youth revealed that having multiple sexual partners were signs of sexual prowess, being wealthy, being physically strong, and being unemotional, and were the dominant norms of being a 'real man' among their peers in Eldoret .

Findings reveal that while participants had internalized other ways of defining and understanding masculinities, one participant in the interview pointed out that whatever he had learned was not applicable when he visited his rural home. For instance, he stated that he could engage in 'women's work' when he was in town but not in his rural home because he feared that people would think he had been 'bewitched'. This display of gendered behaviour, as the findings reveal reinforced gender stereotypes. The inability to do household chores in his rural home for fear of being 'bewitched' also represents a contestation of hegemonic masculinities. In Kenya, Wharton (2004) points out that the display of the gendered behaviour strengthened female and male stereotypes where the females are expected to do domestic chores while men are not. Peacock and Levack (2004) observe that societal disapproval of alternative gender norms may make it difficult for participants to sustain new versions of masculinities. This indicates that community mobilization initiative may be a vital way that FHOK programs may be sustained. It is also important to note that such interventions do not occur in a vacuum and therefore for them to be sustained, they have to be implemented while considering the wider social structures that influence masculinities.

### **5.3 Sub-theme 1: Pathways to Awareness**

Pathways to awareness is a sub-theme that speaks about the reasons why the male youth chose to attend FHOK. Participants responses to the question, "Why did you join FHOK sexual and reproductive health intervention program?" reveals that the male youth

in the study had different reasons for getting involved in FHOK's sexual and reproductive health intervention program. Reasons for participating in FHOK included counselling services, dance lessons, peer influence, and curiosity around HIV/AIDS and sex. Each of these reasons are discussed below.

### **5.3.1 Counselling services**

Twelve participants stated that they were attracted by FHOK's free counselling services on HIV/AIDS. For example, Philly pointed out that, "I joined FHOK because of the youth friendly services on SRH offered by FHOK, for instance Voluntary Counselling and Testing services (VCT's) on HIV". Clifford stated that he joined in order to "share ideas as a youth and because FHOK offers free Voluntary Counselling and Testing Services" (VCTs). Mathayo added that, "I joined to know my HIV status through the VCT service offered by FHOK, this is after my close friend got infected with HIV in prison".

### **5.3.2 Dance lessons**

Ten participants stated that they were mainly attracted by the dance programming that FHOK offered, which they believed nurtured their dancing skills and allowed them to meet other youth interested in dancing. For instance, Paulo stated that he was attracted by activities offered by FHOK, including dancing. Byro put it simply: "I was attracted by their dance group". James added, "I wanted to interact with other youth. For dance lessons and because of other programs offered by FHOK".

### **5.3.3 Curiosity around HIV/AIDS and sex**

Four participants mentioned curiosity about sexual health and HIV/AIDS as the driving force of becoming members of FHOK. Daniel, for example, stated that he wanted to know about SRH, and to learn more about sex, drug use, and abuse. Lwanda, on the other hand, pointed out that he wanted to be empowered by learning life skills, such as relating to opposite sex. Kereri wanted to know more about family planning. Jonah also pointed out: “to learn more on SRH. To build my self-esteem. To know when to say Yes or No and to mean it”. While there was a strong desire for some male youth to know more on SRH, some did not specifically state this. For instance, Gideon stated, “I joined out of curiosity after learning about FHOK programs”.

### **5.3.4 Peer group influence**

Participants’ narrations suggested that being members of FHOK did not imply they had a desire to understand masculinities. Instead participants became involved through their peers who were already in the program. For instance, Roji stated that he found himself in the program after his close friend started attending FHOK workshops. Paulo added, “I always got bored once my friends left for FHOK, one day I asked for permission to accompany them. That’s how I came to be a member actually”.

The reasons why participants chose to join FHOK youth intervention program have not been previously investigated to a great extent in Kenya. Therefore, I was unable to find literature specifically discussing these factors, and this section is mainly a discussion of my own findings. The main motivation for joining FHOK, as stated by the respondents was for dance lessons. Others were drawn to the program to know more about sexual and reproductive health. Still others joined the program because of free counselling

services and peer group influences. Other participants voluntarily joined FHOK to learn more about SRH and masculinities after hearing about FHOK programs in some youth outreach programs during one of the school holidays. Participants may have also been attracted to FHOK programs due to the availability of free counselling services that only targeted youth in the community. Furthermore, findings reveal that the youth were first attracted by the dance lessons that were being offered by FHOK. The use of dance lessons by FHOK would be a possible router to reach more youth in the community to participate in more youth programs on sexual and reproductive health. Understanding why the participants were interested in attending FHOK youth workshops can provide some guidance on the areas where FHOK intervention program can focus on in order to expand their reach in the future. This would be an important aspect to bear in mind considering the fact that it is the participants who are likely to spread the messages they get from FHOK to the community.

#### **5.4 Sub-Theme 2: Friendship, Connection, and Growth**

Narratives of participants revealed that they had benefited from FHOK programs. Respondents pointed out they had gained knowledge on SRH, benefitted from the use of free VCTs and counselling services, and made more friends who had similar interest as them through networking and socialization. Others had acquired life skills and were able to access information related to youth opportunities offered by the county government of Uasin Gishu, Eldoret. Respondents reported many benefits of participating at FHOK youth intervention program, which are summarized by the theme elements of, gaining life skills, enhanced self-esteem, gained knowledge/information on SRH, getting opportunities, and having supportive friends and networking.



#### **5.4.1 Life-skills**

Acquiring important life-skills was identified by participants as one of the benefits of attending FHOK. For instance, Gideon told me that through FHOK, he was now able to support other youth in the community psychologically and be able to help them know their HIV status, and other related challenges like family planning. Philly, on the other hand, acknowledged that the provision of free dance spaces by FHOK had made him improve his dancing skills. Bryo pointed out that, “FHOK taught me mentorship skills and how to handle other youth.”

#### **5.4.2 Enhanced self-esteem**

Among the male youth I interviewed, development of self-esteem was reported as one of the benefits that accrued from participating in FHOK youth programs. Philly, for instance, elaborated how he had benefitted from participating in outreach programs that boosted his self-esteem and confidence. Philly reported that the outreach programs sometimes gave members of the FHOK youth program opportunities to address other youth on SRH or entertain guests. Kimani echoed Philly’s sentiments by stating that he had learned new things. For example, he credits FHOK for helping him improve his self-esteem and, as a result, was no longer shy. Jonah added that he had gained more knowledge on sexual relations, and his self-esteem had been boosted because he could confidently express himself. He added,

Eee..since I joined FHOK I have changed a lot with my friends. I no longer follow them without thinking first if it right. I am more principled, and I can say a firm No or Yes without any fear

### **5.4.3 Gained knowledge /information on SRH**

The participants indicated that FHOK youth SRH intervention program was one of the prominent youth organization in Eldoret. As such, activities, programs, or available opportunities for youth from the national and county government were sometimes relayed through FHOK youth intervention program notice boards. Isaya, for instance, stated that,

I get free access to SRH information. I was trained on programs that were empowering. For instance, VCT. FHOK also help by informing us on youth programs that the county government is offering and how to access them.

Seven participants revealed that through FHOK they had gained knowledge on SRH and its related diseases/infections like HIV/AIDS. They also mentioned that they had gained knowledge on HIV testing, care and treatment. For example, Paulo had this to say: “I have known how to protect myself from STI’s. For instance, HIV/AIDs, syphilis, gonorrhea. I know signs of STIs, and I can seek treatment if I am sick.”

Two respondents stated that they had learned how to abstain, use condoms for protection, and the signs of pregnancy. James pointed out that through FHOK he had “known how to treat a partner/girlfriend in a relationship”. Gideon described a shift from a male-dominated decision making related to when and how sex should be initiated:

At FHOK I have learned to negotiate for safe sex with my girlfriend. I also tend to listen to her. For instance, when she says she does not want it, I respect her decision.

### **5.4.4 Opportunities**

Two participants mentioned that they had benefitted from opportunities that were being offered by FHOK. Daniel pointed out that he got involved in the distribution of condoms to his fellow youth who were attending post-secondary institutions. Mathayo revealed that

through his membership with FHOK youth intervention program, he engaged in social work activities by visiting youth centers in Eldoret.

#### **5.4.5 Supportive friends and networking**

Although few participants knew each other prior to joining FHOK, they felt like they had developed strong networks during the activities and workshops they attended. James stated that he had the opportunity to meet more friends and therefore expanded his social networks. Clifford stated:

It is at FHOK that I got to meet other youth who we share the same views as mine. I am more open to my fellow members than my friends or family members who do not understand why I attend such workshops.

Being surrounded by like-minded friends provided respondents with ‘safe spaces’ in which to explore issues they felt less confident about discussing in other platforms. For example, Paulo pointed out; “In the workshops, I freely share my opinion with no fear of being judged...I think FHOK offers a good place than those in the community”.

Supporting this notion, Bryo explained that FHOK workshops provided a platform on which emotional matters could be expressed without fear. Bryo stated that as a man he is expected not to cry even when he is in pain. But, at FHOK, he feels he can be emotional without being judged. Thus, FHOK became a site where the male youth were able to express emotions, which contradicted notions of masculinities in Kenya that demand that men should not display their emotions.

Kereri added that the support he received from his peers in the program was different to the support he received from other people in his life, who did not favour his membership of FHOK. Kereri stated:

My friends are supportive at the same time not supportive. They think I am wasting my time. They also wonder what I am getting from FHOK that I do not know.

Daniel, on the other hand, stated that “my family and friends find it hard to understand my participation at FHOK as a volunteer with no pay. They see it as a waste of time”. Participants struggled to win support from their families or friends who were critical of their involvement unless they were being paid FHOK.

The impact of the intervention program on participants is an aspect that has received little attention in the literature on masculinities (Dworkin et al. 2013). Hence, understanding how FHOK youth intervention made an impact on participants is an important gap in literature. In this study, I found out that respondents had benefitted by gaining important life skills, received more knowledge on SRH, and some met with new supportive friends who they were free to share their thoughts without fears of being judged. Still others had enhanced their self-esteem by participating in outreach programs. Participants had also established supportive friendships and networks. Barker (2003) observes that re-socialization is more likely to be successful if participants are supported by others who have similar goals. This factor seems to have been reinforced by the findings in this study. Participants mentioned the presence of supportive friends as one of the benefit of being at FHOK. This indicates that participants felt that the program created a conducive space that they were able to share and discuss issues or problems they faced in the community. Families of participant’s and some of their friends not in the program were reported to be relatively unsupportive, with some participants being told that they were wasting their time since they were not getting paid. Having unsupportive family or friends may occur because these young men’s participation in FHOK programing was challenging

traditional hegemonic and neoliberal models of Kenyan masculinity that placed value only on activities associated with financial advancement and display of wealth as discussed in Chapter Two.

### **5.5 Sub-Theme 3: Searching for Role Models**

Searching for role models describes the search for people, who were supportive of their masculinities, or the availability of other men who they looked up to because they possessed the same qualities they aspired to as ‘real men’. While the presence of supportive friends and networking was an aspect mentioned by most participants, the question of who their role models were took two forms: the presence of roles models that were related to reshaping their masculinities; and the absence of relevant roles models in their lives. Twelve participants spoke of not having role models, while two participants pointed out that they had role models. The sub-theme ‘searching for role models’ speaks to male youths desire for roles models, especially when there was absence of role models in their lives. The sub-theme is illustrated through two thematic elements: ‘presence of role models’ and ‘absence of role models’.

#### **5.5.1 Presence of role models**

Gideon stated that his role models were his father and Uhuru Kenyatta, the current Kenyan president. He added that both men were steady men, wise, and were good examples of being a ‘real man.’ Mathayo on the other hand pointed out that his role model was his pastor. He stated that: “I like the way he handle things in the church. He encourages youth and open minded on issues concerning sex and manhood. I can say he is brave also”.

### 5.5.2 Absence of role models

The absence of male role models was something that participants felt strongly about. Twelve participants pointed out that they came into contact with men who fulfilled stereotypes associated with masculinities that were not advocated by FHOK youth intervention program. For example, Lwanda stated that: “My father is an alcoholic and sometimes he fought with anybody who tried to talk him out of it. He sometimes beats my mum if he finds she is not yet at home”. Kereri added that:

My father and mother separated when I was still young because they always fought about money and how to split the money they generated from the business they co-owned.

Dalton who lives with his mother stated that:

My mother is a single mum and we live far away from my uncles. I do not have any male person I can pinpoint as a role model in my life.

The impact of role models is a matter which has often been noted in the discourses surrounding masculinities. Barker (2003) observes that the presence of male role models is an important aspect that can improve the effectiveness of masculinities-focused interventions like FHOK. However, Carrington et al. (2008) critique this observation by stating that having role models does not necessarily lead to the desired outcomes. This critique arose from a study that focused on the impact of male schoolteachers on male youth. Findings of my research revealed that twelve of the male youth did not have role models to identify with. They mentioned lack of role models in their families and community. The absence of role models among male youth has been identified to have negative impacts on their lives. Jewkes et al. (2009) in their study point out that young men raised without fathers were more likely to report having raped a woman compared to those

who grew up with their fathers. The two participants who had role models in their lives found it easy to enact other version of masculinities. It therefore seems that having supportive role model led to male youth to easily enact other forms of masculinities.

#### **5.6 Sub-Theme 4: Aspiring for Equality and Respect**

Aspiring for equality and respect addresses the research question, “Do you think there have been changes in relationship between you and female relations after participating in the program?” Respondents pointed out that they now involved their female relations in decision-making, and they were now faithful to their female partners. These changes are discussed under the thematic elements of ‘decision-making’ and ‘faithfulness’.

##### **5.6.1 Shared Decision-making**

Six participants identified that their relationships with females had improved, particularly when it came to matters concerning decision-making on SRH. Since they got involved in the FHOK program, the youth acknowledged that they had internalized new perceptions related to women input in sexual matters; however, involvement of female partners in decisions related to other areas was also occasionally addressed. For instance, Lwanda said that he valued his female partner’s ideas and decisions when it comes to sexual matters. Paulo stated: “Yes. I cannot have unprotected sex with my girlfriend. I now treat her as an equal in decision making in relationships. I am now honest with them”. Kimani said that: “Yes. I view women better than before. For instance, they are not sex objects. I respect them. I share with females/girlfriends and reason out issues together”.

Kereri pointed out that;

I used to think that my girlfriend must listen unquestionably to me. But my girlfriend says I have change because, I now must get her opinion before I do

anything. Like making an investment or even when I want to go out with my friends.

Gideon described a shift from a male dominated decision making in his views on when to have sex. However, from his narration it seems this shift was only granted sometimes. He stated: At FHOK I have learned to negotiate for safe sex with my girlfriend. I also tend to listen to her. For instance, when she says she does not want it, I respect her decision”.

### **5.6.2 Faithfulness**

Being faithful to your partner was considered a characteristic of being a ‘real man’.

From participants narratives, there seemed to be an expectation on male youth to have multiple sexual relationships. Three respondents pointed out that they were now faithful to their partners. Lwanda, for instance, said that: “yes my relationship had changed... I am now faithful”. Isaya added that: “Yes. My relationship with women before was about sex. I have learned to be faithful and have one partner”.

Daniel stated that he has learned that he does not have to engage in multiple sexual relationships to feel that he was a ‘real man’. He stated that he used to feel inadequate as a man when he saw his friends having multiple sexual relationships. I probed these thoughts further by asking how he felt after finding out other ways of being a ‘real man’. He replied that he felt that he is a man like any other and added that he no longer felt envious of his friends’ lifestyles, since he perceived himself to be a man too.

Philly used to associate masculinity with having unprotected sex and fathering a child as a sign of sexual prowess; however, he no longer felt this applied to his understanding of masculinity. He stated that impregnating a girl is not a sign of being a ‘real man’. Instead, he has learned to use condoms as a form of contraception and



prevention of HIV/AIDs. The association of masculinities with sexual prowess and identity has numerous implications for sexual and reproductive health, such as the spread of sexually transmitted infections or diseases such as HIV/AIDs. Thus, FHOK becomes a platform in which the male youth were able to unlearn such views.

This study reveals that through FHOK, the male youth had learned to be faithful to their partners and to involve them in decision making. These findings are similar to Barker's (2003) study who observed that involvement of young men in intervention programs led to male youth increased empathy, reduced conflict and positive reflections by participants about how they treated their female partners. Similarly, Pulerwitz et al. (2004) in their study point out that young men in intervention programs reported decrease in sexual transmitted infections due to their increase in use of condoms and being faithful to their sexual partners.

## **5.7 Sub-theme 5: Architects of Masculinities**

Architects of masculinities describe the institutional and social situations in which masculinities were promoted. It answers the research question "What are the institutional and other situations in which masculinities are promoted?" I therefore present other platforms in which the ideals of masculinities are promoted, including: the family, the church, and male circumcision that contribute to shaping ideals of masculinities.

### **5.7.1 Family**

Participants were raised to be physically strong, thus making it hard for them to show emotions or pain. Participants were also expected to handle pain without expressing any sign of it. Eight participants noted that their family expected them to be physically strong and not to show emotions. For instance, Daniel pointed out that he was taught to be strong

as a man, and that he was not supposed to be emotional as a boy. Roji added that, “my family was influential in growing, my parents taught me that boys should not cry”. Bryo reinforced these sentiments by stating that: “I was taught that men should not give up in life...I mean a man should be strong no matter what”.

This was also extended to seeking medical treatment. Paulo stated:

There is this time I had headaches, my mum got me painkillers and asked me to be strong. It was only when I started vomiting that she now realized that I was very sick.

Alongside the expectation of men to be strong, six respondents frequently spoke of how a ‘real man’ is expected to be financially stable to adequately provide for his family. Participants often pointed out that financial capacity to provide clearly distinguished ‘a real man’ from other men. However, these narratives were aspirational since the participants were not yet married and did not necessarily have a source of income. Paulo stated that at home he was taught that a ‘real man’ should work hard and provide for his family. Mathayo added that:

in the family,...I was taught as a man I should provide for my family. You are told, if no money then you are finished, mmm just like my father is doing but most of the things you are born into, you find yourself being part without question.

Two participants mentioned that in their family, marriage was emphasized as an attribute of ‘a real man’. However, marriage was framed as an undertaking that was achieved once they felt they were financially stable to provide for their family. For instance, Dalton said that “I was told to be financially stable before I got married”. The expectation of a man to be financially stable is one of the dominant components of hegemonic masculinities in Kenya. Related to the expectation of being financially stable is the expectation of a ‘real man’ to display the markers of wealth; this is something that participants noted as

emphasized by their family. For instance, Isaya sums up what he is taught in the family by stating that:

how can you marry when you do not have a house to live at least you are expected to have invested or at least have assets like a car. The family expect you to give something for dowry or the girl you are marrying has to see that you have something...when you don't have they will be like; you are not yet man enough.

But it was also noted that the expectation of financial stability was problematic in a country in which youth unemployment was so high. Lwanda pointed out:

I know of my friends who finished college long time ago. They are still struggling to make ends meet. Tell me how you expect them to be financially stable before they get married.

The narratives of participants revealed that the family taught them that a 'real man' has to be financially stable. Additionally, participants revealed that those men who were considered economically weak faced denigration from their families and the community. Morrell (2006) in his study observed that in many parts of African, a man draws respect, power and control if he is financially stable or wealthy in terms of assets owned. In these cases, the person is viewed as the head of the household. Consistent with this study, participants agreed that a man's responsibility was to provide financially as this upholds one's masculinity. However, being financially stable was also linked to marriage. That is, getting married was undertaken once a man's financial stability was guaranteed. However, based on participants explanations, they felt that being financially stable was unachievable with the current situation of high rates of unemployment among the youth in Kenya. Vuluku et al. (2013) echoes these findings by pointing out that such a view is faced with challenges due to widespread unemployment of young men between the ages of 20- 24

years as a result of the continued effects of structural adjustment programs imposed by World Bank (WB) and International Monetary Fund (IMF).

From the findings of this research study in Eldoret, the male youth are socialized by their families within the larger framework of masculinities that transcend the boundaries of their communities. Globally, men continue to define themselves, and be defined in terms of being financially stable, being the breadwinners, being married, being physical strong, being invulnerable, and being head of households (Amuyunzu-Nyamongo et al. 2006; Silberschmidt, 2004; Meyer 2013; Coughlin and Wade, 2012). Coughlin and Wade (2012) observe that while men in Western societies such as the U.S became less restricted in ways to express their masculinity, the expectations that they were going to be breadwinners did not change. Instead they still felt that if they were going to get married and have children, they were expected to be able to provide for their partners and children. Thus, the male youth notions of 'real men' as breadwinners and head of household in this study are not entirely unique to Kenyan young men instead they transcends borders. Conceivably, the variations may lie in practices, norms, and values that the male youth may rely to achieve locally valued masculine identities of men as breadwinners behind a backdrop of high unemployment rates among youth in Kenya. Furthermore, as discussed in Chapter Two, the breadwinner and head of the household as a masculine role was introduced during colonial times due to the advent of wage labour, and it has been an enduring dominant marker of masculinity in Kenya since then (Ocobock, 2016). The introduction of this masculine identity and the continued belief as a maker of 'real manliness' as this study reveals thus attest to the fluidity of masculinities as illustrated by Connell and Messerschmidt (2005).

### 5.7.2 Church

In the Church, the male youth were encouraged to take up leadership and provider roles in their families. In an interview with Mathayo he mentioned how from the interpretation of the bible that a 'real man' should play the key role of the provider, while a woman is to simply support when needed. Mathayo stated:

A man should be honest, wise, humble and a provider for his family. There is nowhere in the bible that a woman should provide. If she wants to chip in, it is ok, but it is not a must. A woman should be submissive to her husband while a man should show love to her man. This is because if a man can love, he can give and stand. A man should possess a spirit of character...that is, mature in spirit. Once a man is mature, he will acquire faith, kindness, love, gift of discernment and ability to judge.

Philly who attends Excellence Ministries Church and belongs to David's Company Forum, a men's group run by the same Church, pointed out that same sex relationships in his church is seen as an ungodly. He said that;

In our church, we are taught that same sex relationships are ungodly. It is an abomination and it is not an African tradition. Men don't marry men.

David's Company, as Philly mentioned, aims to build and establish men to function as effective fathers and leaders in their generation. It reaches out to all men regardless of age, race, creed, and profession. He says that the name David is adopted from the biblical David, who they believe demonstrates good qualities of manhood and fatherhood that should be emulated by all men. As he matures, he says he is striving too to be like David. While James who attends a different Church also stated that same sex relations in their Church was prohibited and if found, one was prayed for by the pastors. James stated: "Yes, same sex relations are not allowed in our Church. Those 'people' (implying people who identify with same sex relationships) are prayed for by our pastors".

Similar views were given by Daniel who pointed out that members of LGBTQI were seen as sinners, and therefore needed to be delivered through prayers. He said: “In my Church if you are gay, you will be referred to pastors to pray and deliver you from that sin and if it’s not possible you are expelled from the Church”.

Isaya also narrated that:

At the Church I attend, I am a member of David’s Company, an all-men group. In group we are taught how to be a man in future, protect and support your family. That a man should have one wife and a man should be faithful, a man should not drink, a man should be a good example in the society.

Two respondents who attended the same Church believed that to be a ‘real man’ meant that one had to abstain from sex until they are married. Kereri stated:

Our Church Pastor tells us that being a ‘real man’ one must abstain till marriage. That Jesus Christ condemns immorality and therefore no sex before I get married.

James who regularly attends Church stated that he was taught the ways of being a ‘real man’ entailed practicing fidelity in marriage. He said, “In our Church, married youth are asked to be faithful and loving towards their spouses”.

The role of religion, that is, the Christian Church in this study in Eldoret, its leaders, beliefs and practices is key in shaping the processes of constructing and challenging masculinities in Kenya. In the wake of HIV/AIDs and gender violence scholars on religion have called on African churches “to rethink their mission towards men” and to question “conventional forms of masculinity” (Chitando, 2007 p. 40). In their opinion, religious complacency to patriarchy is problematic in the face of HIV/AIDs and gender violence (van Klinken, 2011).

Kenya is considered a very religious country. This is according to a 2009 Kenya Census report that showed that 94 percent of respondents belonged to a religion. Among its different religious affiliations, Christians make up 78 per cent of the population, Muslims 10 per cent, African Traditional Religions 10 percent, and other religions 2 per cent. As such, the Christian Church is a major stakeholder in SRH policy-making and wields strong support from the grassroots to the political echelons. Additionally, religious groups provide more than a third of health care services, hence it has a direct channel to influence SRH service provision for various groups of populations (Oronje, 2013).

Githii (2008) observed that the Christian Church has strong influences on attitudes towards people of same-sex relationships and has been in the forefront in condemning and prohibiting any legislation involving decriminalization of same-sex relations, citing it as immoral and not sanctioned in biblical texts. The Church's strong opposition can be seen in reports in Daily newspapers in 2010 and in 2012 in Mombasa, where the Church leaders attacked a gay couple on suspicion of planning to wed (Daily Nation, 2010).<sup>8</sup> The couple were rescued by the police, however they were in turn arrested because same sex relationships are a criminal offence in Kenya. In 2012, participants at a LGBTQI meeting in Mombasa were attacked by members of a Church, only to be rescued by the police.<sup>9</sup> Furthermore, in 2010, an appeal by the Minister for Gender in October 2010 to accept LGBTQI persons drew heavy criticism from the religious leaders who called for the sacking of the Minister.

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<sup>8</sup>See Daily Nation 2010 <https://humanrightshouse.org/articles/mob-attacks-gay-wedding-party/>

<sup>9</sup>See All Africa <https://allafrica.com/stories/201202240097.html>

Church leader's opposition to the existence of sexual diversity in Kenya is strengthened by the influence of U.S Christian Right's position on same-sex relationships. In a study by Kaoma (2009), the U.S Christian Right is said to be taking advantage of the strong presence of Christianity in Kenya to influence local cultural attitudes and legislation on decriminalization of same-sex relationships. The condemnation of same-sex relationships by the Church leads to unintended consequences to sexual minorities access to sexual and reproductive health, such as HIV/AIDs related care. Ryan and Sam (2011) point out that the fear of violence has forced gay people to lead lives of extreme secrecy leading to their enhanced vulnerability to HIV infections.

Participants in this study stated that the Church taught them that a 'real man' is someone who practiced abstinence until marriage or was faithful once married. Similar to this findings, Agorde (2007) notes a proliferation of a new public culture among Churches in Ghana which emphasize that a 'real man' is someone who is socially devoted to Church activities, prayers, and family. These expectations often may lead to expectations that 'real men' should be financially stable, family-oriented, spiritually mature, and providers of their homes as the male youth narratives revealed. Parsitau (2009) observes that Christian Churches in Kenya have always taught youth to practice abstinence and fidelity in marriage as ideal forms of masculinities, and as an ideal sexual practice. Although the Church had presented abstinence as the ideal sexual practice among unmarried people, sexual abstinence received more attention under the U.S. George W. Bush administration which donated US \$ 15 billion under the Presidents Emergency Plan for AIDS Relief (PEPFAR) (Browning, 2009). Kenya was one of the beneficiaries of PEPFAR, and this program allocated 20 per cent of its funding for prevention programs, which lead to the adoption of



the “Abstinence, Be faithful, and use Condoms” message, popularly referred to as the ABC method. To acquire the funding, Parsitau (2009) states that the programs were required to support the ABC method, which also resonated well with the moral ideals of the Church. The stand of the Church on abstinence has drawn criticism on the grounds that abstinence-only teaching confines HIV/AIDS to issues of sex, therefore ignoring the complexities of sexuality, socio-economic and political situations that lead to the spread of HIV virus among youth (Van Klinken, 2012). Furthermore, it is important to note that the ABC method was not wholeheartedly accepted by all Churches. The Catholic Church opposed the use of condoms,<sup>10</sup> while the Anglican Church only recently allowed the use of condoms in cases where there was a discordant couple. Despite these critiques, this study among male youth in Eldoret reveals that the Church has remained steadfast in its position and has continued to emphasize masculinities that echo with its moral teachings.

### **5.7.3 Circumcision**

The participants narrated that traditional circumcision occurs outside the confines of modern medical facilities, and under the authority of traditional experts. To most communities, traditional circumcision is a test of bravery, and a time for initiates to learn how to be ‘real men’. The practice is believed to transform boys to be ‘real men’ with sanctions awaiting those who do not comply to the dictates and demands of the practice. Those who fail to honour the practice are treated with scorn and disrespect and they are not given the same status as other men who successfully underwent the ritual. Thus, transition

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<sup>10</sup> See Kenya Nation newspapers <https://www.nation.co.ke/lifestyle/lifestyle/Controversial-condom-advert-sparks-debate-in-the-Church/1214-1850056-g7t2p9/index.html>

from being a boy to a 'real man' is only made possible by undergoing traditional circumcision as the following narrative reveals. Kereri stated that:

In my rural home, traditional circumcision is still practiced. It is done by appointed elders and it is done very early in the morning by the river in public, so as to show you are now a real man

Furthermore, Kereri says that, as a sign of unity between the initiates, one knife is used during the procedure. Additionally, having undergone the procedure, these young men are now qualified to engage in sex. Kereri says that during this period, they are told to engage in sex to test whether they were fully healed and functional. He pointed out: "Once we are healed, we are encouraged to sleep with sexual partners to see whether we are fully functional". Kereri's narration reveals how traditional male circumcision exacerbates the spread of infections and sexually transmitted diseases. The use of one knife and the encouragement to engage in sex to test if they were healed increases their chances of spreading sexually transmitted diseases. Traditional circumcision is a compulsory procedure for one to be regarded as a 'real man'.

While it is difficult to generalize about the various traditional circumcision rites that take place in Kenya, traditional circumcision is widely practiced in Kenya. There are 42 ethnic communities in Kenya and out of this number, forty ethnic communities still practice circumcision culturally as a rite of passage from being a boy to a 'real man' (Njoroge, 2014). This study in Eldoret reveals that circumcision was mainly carried out during the long school holidays of December, so as to allow for complete healing of the wound, and conferral of instructions on being a 'real man'.

This study among the male youth in Eldoret also revealed that those who did not undergo traditional circumcision were looked down upon, and they do not acquire the

status of being seen as ‘real men’. To most communities, traditional circumcision is a test of bravery, and a time for initiates to learn how to be ‘real men’. The practice is believed to transform boys to ‘real man’ with sanctions awaiting those who do not comply with the dictates and demands of the practice. Such as social scorn and disrespect. Punishment for those who fail the dictates of traditional circumcision is a way to assert dominance and to subjugate subordinate masculinities (Maughan-Brown et al. 2011). Thus, rather than face the stigma of not undergoing traditional circumcision, initiates prefer to endure the pain (Njoroge, 2014) like the male youth in this study.

Male circumcision in Kenya as discussed in Chapter One is an important rite of passage. During traditional circumcision rituals, manhood and adulthood as well as the expectations of masculinities are conferred to the next generation in most ethnic communities in Kenya often between the ages of 12 to 22 years. Traditional circumcision rituals have been in practice since the pre-colonial period in Kenya. For instance, among the Agikuyu of Kenya, transition to adulthood in the 19<sup>th</sup> century was achieved through the processes of undergoing traditional initiation as the key cultural process of attaining adult status (Mojola, 2014). During traditional circumcision period men are taught to be brave and superior to women, particularly when it comes to decision making (Njoroge, 2014). Some of these aspects of socialization reinforces patriarchy and masculine hegemony even today. Although there is a campaign advocating for medical circumcision in Kenya, traditional circumcision is still widely practiced as demonstrated by the experiences of the male youth in this study.

The findings in this chapter reveal that the roles of traditional circumcision contradicts with what FHOK teaches on masculinities. For instance, the encouragement of

newly traditionally circumcised male youth to have unprotected sex with women to test if they are healed, contradicts with FHOK's teachings of 'real men' as those who use condoms for protections. This therefore implies that there are different masculinities locally at work at the same time which provide alternative options among youth to pursue. Additionally, Davids et al. (2011) observes that in such settings there is no one locally standardized masculinity that rules, but a multiplicity and diverse forms of masculinities that are fluid and ambiguous, and that have global as well as local mix. This are the existing norms that could be leading to enactment of protest masculinities by the male youth at FHOK youth sexual and reproductive health program.

The findings of this study reveals that Churches, the family, and traditional circumcision socialized the male youth into behaving along particular masculine ideals. For instance, in the family the male youth were encouraged to be physically strong, unemotional, and to strive to be wealthy and providers of their families as markers of a 'real man'. The Church taught the male youth that 'real men' were those who practiced heterosexuality, abstinence, and provided for their families. Ability to undergo traditional circumcision was seen as being a 'real man'. Those who opted for medical circumcision were often scorned and disrespected. Thus, the Church, the family and traditional circumcision advocated masculine ideals and values that male youth saw as normative in their communities.

## **CHAPTER SIX: SUMMARY, CONCLUSION AND RECOMMENDATIONS**

### **6.1 Summary**

This research is among few to explore practices of masculinities among male youth in sexual and reproductive health programs in Kenya. In a time when youth masculinities are rapidly being reshaped, I sought to understand the ways in which male youth in FHOK sexual and reproductive health intervention program in Eldoret were constructing and defining masculinities. My focus is crucial since it is conducted in a backdrop of generalization in literature that male youth in Kenya are perceived to engage in deviant behaviours, such as sexual promiscuity and sexual violence in the community (Nzioka, 2009). Scholarships reveals that some violence enacted by male youth, may be an attempt to compensate for their self-perception of masculine insufficiency (Silberschmidt, 2003; Peacock and Levack, 2004; Barker et al. 2010). However, my findings reveal that not all male youth follow this route in order to compensate for their inability to adopt to the prevailing hegemonic masculinities. In my research study in Eldoret, some male youth, who were involved in FHOK sexual and reproductive health programs, were redefining masculinities and even taking on non-traditional roles that contradicted the prevailing dominant masculinities that were largely seen as anti-establishment by the community. For instance, this study in Eldoret shows a shift in the male youth's understanding of masculinities from that of male domination in decision making, to involvement of their intimate partners. This involvement of male youth in contradicting masculine norms is what Connell (1995) terms as protest masculinities.

Literature on masculinities reveals that masculinities are performed or enacted differently and contextually in communities (Connell, 2005; Connell and Messerschmidt, 2005). My findings in Eldoret provide evidence of the existence of multiple masculine identities among the male youths largely influenced by different socializing institutions such as the Church, family, and cultural institutions, the practice of traditional circumcision. Though the masculine hegemony of breadwinnerhood was aspirational, my findings revealed that the male youth in Eldoret clung to it doggedly. Similar to many parts of the world, breadwinnerhood is the prevailing dominant hegemonic version of masculinity. Being the breadwinner, as the findings reveal, qualified one to be the head of the household and hence the ability to make claim in masculinity. As such, the male youth were operating within a larger patriarchal definition of who a 'real man' is. It is also important to note that men as breadwinners as a masculine role was introduced by the colonialist due to the advent of wage labour in Kenya (Ocobock, 2016).

This study in Eldoret also reveal that far from being a neutral entity, FHOK workshops reflected and reproduced gender norms and inequalities prevailing in the community by reinforcing gender binaries in their workshops. For example, the separation of male youth from female youth during workshop discussions. In the workshops, conversations among participants also revolved around heterosexuality. Usually, the male youth referred to their girlfriends maintaining the notion that heterosexuality was the norm. Therefore, this confirms that while specific behaviours appears to be influenced by FHOK youth programs, there is less of a shift regarding the norms of hegemonic masculinities which stipulates male heterosexuality as the norm. During the workshop, the male youth were asked if they got married, would they participate in house chores. Contrary to the in-

depth interviews, some of participants still saw domestic chores as a woman's responsibility, while a man's duty was to provide for the family.

The study findings reveal that having supportive friends offered 'safe spaces' that participants freely expressed themselves with no fear of being judged. However, the family and community structures did not acknowledge and respond positively to changing gender norms, leading to continued gender inequalities. The study illustrated significant challenges facing the young men from their community and peers when they attempted to practice other forms of masculinities. The participants feared the sanctions associated with going against the dominant established forms of masculinities, such as, being labeled as being bewitched. As such, the participants ended suppressing the newly internalized forms of masculinities. Hence, these pressures to conform to the prevailing gender norms need to be understood in order to tackle the larger issue of gender equity.

Findings reveal that the main motivation for joining FHOK's youth intervention program was for dance lessons. Others were drawn to the program to know more about sexual and reproductive health. Still others joined the program because of free counselling services and peer group influences. Other participants voluntarily joined FHOK to learn more about SRH and masculinities after hearing about FHOK programs in some youth outreach programs during one of the school holidays. Participants may have been attracted to FHOK programs due to the availability of free counselling services that only targeted youth in the community. Furthermore, findings reveal that the youth were first attracted by the dance lessons that were being offered by FHOK. The use of dance lessons by FHOK would be a possible router to reach more youth in the community to participate in more youth programs on sexual and reproductive health. Understanding why the participants

were interested in attending FHOK youth workshops can provide some guidance on the areas where FHOK intervention program can focus on in order to expand their reach in the future. This would be an important aspect to bear in mind considering the fact that it is the participants who are likely to spread the messages they get from FHOK to the community.

## **6.2 Conclusion**

The motivation to conduct this research as discussed in Chapter One was largely driven by personal curiosity to find out how male youth engaged in FHOK sexual and reproductive health intervention programs were reconstructing their masculinities. This curiosity arose after meeting with family and friends who espoused masculinities that were contradicting to the prevailing hegemonic masculinities among other youth that were largely seen as anti-establishment. Armed with these thoughts, I resolved to explore the different understanding attached to definition of masculinities by male youth who were involved in FHOK youth programs in Eldoret, Kenya. With this aim in my mind, I intended to produce knowledge that could be used to deliver strategies for improving interventions directed towards sexual and reproductive health programs with male youth. In an attempt to find answers to these questions, I conducted a qualitative research in 2018 through to January 2019. I recruited fourteen male youth and I gathered data through in-depth interviews and observation at FHOK youth sexual and reproductive health intervention program. I later employed Braun and Clarke (2006) thematic analysis of data to establish themes related to my research. The findings and analysis of this research are presented in Chapter Five. The findings highlighted the various ways the male youth were reconstructing masculinities. For instance, apart from the ways of being a ‘real man’ taught by FHOK, other institutions such as the family, the Church and traditional circumcision



were socializing the male youth on how they defined masculinities. It is important also to note that the socialization these institutions imparted on the youth were contradicting those promoted by FHOK. These findings illustrate the multiplicity and fluidity of masculinities existing locally in a place. The findings also illustrate enactment of protest masculinities by the male youth who were involved in FHOK.

### **6.3 Recommendations**

Scholarship on masculinities and youth in Kenya is important in providing an evidence base for sexual and reproductive health policies and intervention programs. As such, within the limits of this research study, I have attempted to bring in issues that add to these growing discourses on Kenyan male youth and masculinities. A central issue in my argument is the need for a shift away from universalization of Kenyan masculinities from a negative point of view to a more context specific analysis of young men who are redefining masculinities. The study also reveals that intervention programs offer potential sites for problematizing hegemonic masculinities. However, there is a need for interventions programs to work with other institutions such as, the church, the family and cultural institutions to bring fundamental and large-scale change in perception of masculinities that promote gender inequalities.

FHOK intervention programs provide spaces which facilitate discussion of masculinities and their relationship to SRH challenges such as HIV/AIDS and intimate partner violence. However, the absence of community involvement leads to short term changes in behaviour. The study also notes that FHOK maintained a gender dichotomy in its workshop discussions. The separation of the youth into groups of those who identify as male and females reveals FHOK mirrored the wider structures in the community, leading

to reproduction of the prevailing dominant forms of femininities and masculinities. Furthermore, the existence of gender binaries also reveals that FHOK did not acknowledge other gender identities and sexualities, despite education on sexualities being one of the objectives of the youth program. As such, there is need for intervention programs on masculinities to be neutral entities. The research examined male youth understanding of masculinities as intervened upon by FHOK at individual and small group level through workshops. While such a perspective is important given that FHOK recognizes that “masculinities as configurations of practice that are accomplished in social action Connell and Messerschmidt (2005 p. 836)”, the study did not have the opportunity to observe the male youth actions in their communities once the workshops ended, or once they discontinued their membership with FHOK. There is therefore need for a research to establish the influence of the intervention program on actual practice once membership by the male youth is discontinued.

### **6.2.1 Limitations**

Since the research was conducted in an intervention program in an urban setting in Eldoret that examined how male youth were redefining masculinities and leading to improvement in their sexual and reproductive well-being. Thus, the findings of the study may not be generalizable to other contexts. The study would have been enriched by inclusion of data from other participants, such as the female youth, and parents of both male and the female youth to understand their role in reinforcing or questioning dominant views of hegemonic masculinities. Overall, the research concludes that looking at how young men are enacting masculinities has potential to bring change in SRH if patriarchal structures that influence masculinities are addressed.

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## APPENDICES

### APPENDIX 1: PERMISSION LETTER TO CONDUCT RESEARCH



**FAMILY HEALTH OPTIONS KENYA**

Family Health Plaza  
Mai Mahiu Rd., Nairobi West  
P.O. Box 30581-00100  
Tel: + 254 - 20 - 603923/7, + 254 - 20 - 604296/7  
Mobile: + 254 - 722-203871 / 734-600186  
Fax: + 254 - 20 - 603928  
NAIROBI - KENYA  
E-mail: info@fhok.org website: www.fhok.org

A Member of  
 International  
Planned Parenthood  
Federation  
Africa Regional Office

Programme Manager Youth

To,

Office of Research Ethics,  
University of Lethbridge,  
Phone; 403-329-2747,  
Email; [research.services@uleth.ca](mailto:research.services@uleth.ca).”

12/10/2018

**RE: PERMISSION FOR JACKLYNE CHERUYIOT TO CONDUCT RESEARCH AT FHOK, ELDORET**

I hereby wish to confirm that Jacklyne Chepkemei Cheruiyot, a master’s student in Women and Gender Studies at the University of Lethbridge has been granted permission to conduct her research study on Masculinities and Young men involvement in Sexual Reproductive Health [SRH] of at our youth program starting in December 2018 to January 2019, this will be done through our facility (Family Care Medical Centre and Maternity) in Eldoret at the youth centre.

We hope to give Jacklyne all support she requires. Thanks.

Sincerely,

*for Steve Biko*

Steve Biko.  
Youth Programme Officer,  
[sbiko@fhok.org](mailto:sbiko@fhok.org) / [owagabikosteve@gmail.com](mailto:owagabikosteve@gmail.com)  
0722346132

Family Care Medical Centre  
P.O. Box 947 - 30100  
ELDORET  
TEL: 053 2062592

*Your Health, Our Concern*

## **APPENDIX 2: INTERVIEW GUIDE QUESTIONS**

### **In-depth Interview Discussion Guide**

Hello! My name is Jacklyne Cheruiyot, a master's student in Women and Gender Studies at the University of Lethbridge, Canada. I am conducting a study on Masculinities and sexual reproductive health (SRH) in Eldoret. I am interested in learning about your understanding of masculinities. I would be grateful if you could spare some time to answer some questions. The information obtained will be used for academic purposes only and will be treated with confidentiality. You are also free to decline to participate in the interview. I have here the consent form that outlines your rights in the research process, and I will discuss these with you now.

(Do you have any questions at this point?).

Thanks! Let us get started. Please feel free to talk openly. You can stop me at any time and whenever you need a break. You can also switch off the recorder if you do not wish your responses to be recorded.

(The audio recorder is now on)

### **Demographic Profile**

- 1) Can you kindly tell me about yourself?
  - a) What is your age?
  - b) How long have you lived in Eldoret?
  - c) Where were you born?
  - d) Whom do you live with now in Eldoret?
    - Alone
    - Parents
    - Partner
    - Wife

- e) Educational background: What is your highest educational achievement? Where did you obtain this education?
- Primary
  - Secondary
  - Tertiary
- f) Occupation
- Are you employed? Self-employed? Unemployed?
- g) Religious affiliation: Do you consider yourself a member of this faith community?
- Christian
  - Muslim
  - Other

**Participation in FHOK (Probe)**

- a. When did you join FHOK?
- b. Why did you join FHOK?
- c. How did you come to join the program?
- d. What are the benefits of joining FHOK youth program?

**Understanding of masculinity in FHOK**

- a) Has participating in FHOK youth program affected your understanding of being a man?
- b) Do you think there have been any changes in relationship between you and female relations after participating in this program? If yes how? Please explain.
- c) What do your male friends say about your involvement in FHOK programs?

**What are the institutional and other situations in which specific masculinities are promoted?**

- a) As a young boy, what were the values of being a man that were instilled by your family? Who are your role models and why?

- a) What are you taught about being a man at the church/mosque/school you attend?

**How has migrating from rural to urban areas influenced male youth understanding of masculinities in Eldoret?**

- a) When did you move to Eldoret?
- b) What were the reason(s) you moved to Eldoret?
- c) Are there any changes on your understanding of being a man after you moved to Eldoret?

**Is there any issue you would like to talk about that we have not discussed?**

Thank you for attending today's interview. I will be contacting you again for a follow-up interview for any clarifications you may want to raise or any information you may want to add or withdraw. At this second interview, I will confirm with you about the final transcript of this interview and how it will be used in my research report.

## APPENDIX 3: RECRUITMENT POSTER



### **PARTICIPANTS NEEDED FOR RESEARCH IN MASCULINITIES AND SEXUAL REPRODUCTIVE HEALTH**

We are looking for volunteers to take part in a study of Masculinities and young men involvement in sexual reproductive health programs in Family Health Option Hospital (FHOK), Eldoret

This research will require your participation in a one-on-one interview at a time and location of mutual agreement. During this time, you will be interviewed about your views on male youth and involvement in sexual reproductive health programs. The interview will be audio-recorded with your permission. If you do not wish to be audio-recorded, the research assistant will take written notes during the interview with your permission.

Your participation would involve 2 sessions;  
each session will be about 90 minutes long.

Participation is anonymous and confidential.

For more information about this study, or to volunteer for this study,  
please contact:

*Jacklyne Chepkemei Cheruiyot*  
*Masters of Arts student at University of Lethbridge*  
Phone: 0790 164 386

Email: [jacklynechepkemei@gmail.com](mailto:jacklynechepkemei@gmail.com) or [jacklyne.cheruiyot@uleth.ca](mailto:jacklyne.cheruiyot@uleth.ca)

**This study has been reviewed for ethical acceptability and approved by the  
University of Lethbridge Human Subject Research Committee.**

Call Academic Researcher 0790 164 386 Or Email: <a href="mailto:jacklynechepkemei@gmail.com">jacklynechepkemei@gmail.com</a>
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Call Academic Researcher 0790 164 386 Or Email: <a href="mailto:jacklynechepkemei@gmail.com">jacklynechepkemei@gmail.com</a>

**APPENDIX 4: AUDIO RECORDING CONSENT FORM**



**MASCULINITIES AND YOUNG MEN INVOLVEMENT IN  
SEXUAL REPRODUCTIVE HEALTH IN FAMILY  
HEALTH HOSPITAL OPTIONS, KENYA (FHOK)**

Dear Participant:

You are being invited to participate in a research study on masculinities and young men involvement in sexual reproductive health. The purpose of my research is to bring to fore alternative forms of masculinities among male youth involved in sexual reproductive health advocacy programs. The information collected from this study will be presented in a Master’s thesis; in addition, I plan to publish the findings in a journal (no personal identification will be disclosed).

This research will require your participation in a one-on-one interview at a time and location of mutual agreement. During this time, you will be interviewed about your views on youth and involvement in sexual reproductive health programs. The interview will be audio-recorded with your permission. If you do not wish to be audio-recorded, I will take written notes during the interview with your permission. Your participation will involve 2 sessions; each session will be about 90 minutes long.

There are no direct benefits to you from participating in this study; however, you will be contributing to a better understanding of the youth and enactment of alternative masculinities.

There are no anticipated risks or discomforts related to this research. Your participation in this research is completely voluntary. Your continued participation should be as informed as your initial consent, so you should feel free to ask for clarification or new information throughout your participation. You may choose to not answer any question, or you may withdraw from the study at any time for any reason. If you do this, all information from you will be destroyed.

Several steps will be taken to protect your anonymity and confidentiality. The people who will have access to the listing your real names will be the principle investigator, my immediate supervisor at the University of Lethbridge, and the research assistant. The research assistant will be required to sign a consent form stating that he will uphold confidentiality of all participants.

The written notes during the data collections will be typed into my laptop which is only accessible through a password only known to me.

A recorder will be given to the research assistant to record all the interviews that participants have consented to. All the recorded narratives will be uploaded to my laptop, my email, and Google drive that is only accessible through a password only known to the principle investigator. The original narratives on the recorder will be deleted after the data collection is complete, while those uploaded in my laptop, email, and Google drive will be deleted after five years.

Once back at the University, all original notes taken, and the signed consent forms will be kept in my office desk which is under lock and key. The transcription of data will be data by the principle investigator. The data and the transcribed interviews will be destroyed after five years. The thesis and any other presentations will not contain any mention of your name and pseudonyms will be used for any quotations used.

I hope to publish the findings in a journal. At no time, however, will your name be used, or any identifying information revealed unless you have given consent. If you wish to receive a summary of the results from this study, you may contact me at [jacklyne.cheruiyot@uleth.ca](mailto:jacklyne.cheruiyot@uleth.ca).

You may also contact my supervisor, Dr. Glenda Bonifacio, at 403 380 1897. Questions regarding your rights as a participant in this research may be addressed to the Office of Research Ethics, University of Lethbridge (Phone: 403-329-2747 or Email: [research.services@uleth.ca](mailto:research.services@uleth.ca)).

This research project has been reviewed for ethical acceptability and approved by the University of Lethbridge Human Subject Research Committee. Thank you for your consideration.

I agree to the audio-recording of the interview.

I agree quotations to be used with pseudonyms.

\_\_\_\_\_ (Printed Name of Participant)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

I have read (or have been read) the above information regarding this research study on masculinities and young men involvement in sexual reproductive health and consent to participate in this study.

\_\_\_\_\_ (Printed Name of Participant)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)



\_\_\_\_\_ (Printed Name of Researcher)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

[Researcher Name]

[Researcher Title]

[University of Lethbridge]

[Researcher Phone]

[Researcher Email]

A copy of this consent form has been given to you to keep for your records and reference.