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Dynamics of Condom Use among Female Sex Workers in Mombasa, Kenya: Perspectives and Practices of Clients

By

Emmy Kageha Igonya^{a*} Grace Kimemia^a
Nencel, Lorraine^b

^aPopulation Dynamics and Reproductive Health Unit, African Population and Health Research Center

^bDepartment of Sociology, Vrije University, Amsterdam, The Netherlands

Corresponding author: Emmy Kageha Igonya, African Population and Research Health Center, APHRC Campus, Off Kirawa Road, Kitisuru, Nairobi. P.O Box 10787-00100, Nairobi, Kenya.

eigonya@aphrc.org or igonyae@gmail.com

Abstract

This paper sheds light on the various meanings appropriated to condom use in an economically precarious context. While studies on condom use are numerous, very few have paid attention to the meaning of condom use among clients of female sex workers. The paper is based on findings from an ethnographic study conducted with male clients of female sex workers and key informants in Mombasa in 2015- 2017. Drawing on the social-ecological model, the paper seeks to explore the perceptions and practices of clients of female sex workers on condom use fidelity. Condom use in this study was found to be shaped by multiple factors that go beyond mere HIV prevention. We argue that the logic behind condom use among clients of female sex workers is founded on economic and social precariousness. Their interaction with sex work and condom use is to fulfill their sexual needs while governing economic and moral obligations. In doing so, the intersectionality between participants' economic precariousness, sexual needs, masculinity, and laws were at the center of their decision making on condom use narratives. We conclude condom use is positioned as a governance tool against individual incomes, interpersonal relations, health safety, masculinity, and legal and societal obligations.

Key words: Kenya, condom use, sex work clients, obligations, economic precariousness, Mombasa

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Introduction

All of us here have families; we are all adults. Due to the harsh economy, some of us cannot afford to bring our wives and children here (Mombasa). They live in rural areas as we try to get money to support them. Some of us take too long to visit our families, it is expensive and yet we have sexual needs and we are aware of HIV. ... Important thing is the use of condoms. – Participant A, Informal discussion.

This observation was made during an informal discussion by a client of sex workers who were customers of the KK mnazi den, an illegal brew establishment in KK study site in Mombasa. The establishment is run by two female sex workers who were participants in this study. This article on clients' perspective of condom use is part of a larger study that focused on male and female sex workers¹ in Nairobi and Mombasa. It was during the conversations with these men that the interest in condom use among clients of sex workers emanated.

Over the years, condom use has been a critical measure in family planning, prevention of unintended pregnancies and protection against Sexually Transmitted Infections (STIs). In the era of HIV, condoms have been extensively promoted and distributed at no cost as a prevention strategy (Moreno et al., 2014; UNFPA, WHO & UNAIDS, 2015). Women are key targets of condom promotion use in Sub-Saharan Africa (Wamalwa et al., 2015; Mungála et al., 2006). However, studies indicate that men exercise great influence over the decision to use condoms and other contraceptive measures (Omidéyi et al., 2011).

There are many factors that influence men' use or disuse of condoms, as suggested by many studies. A study conducted in Uganda (Rutakumwa et al., 2015) suggests several factors contributing to men's preference for unprotected sex including but not limited to the use of alcohol, peer influence and living in a restrictive social environment. The latter reason suggests that living in a restrictive social environment not only made access to condoms harder but also made men engage in secretive sexual activities that impede condom use. Moreover, there are negative meanings and attitudes attached to condoms such as its ability to lessen sexual pleasure, reduce feelings of intimacy, as well as questions over its efficacy and fears concerning its ability to cause infertility. In addition, some religions discourage condom use (Mulumeoderhwa, 2018; Obbo, 1993; Schoepf, 1995). Analysis fault men more than women in undermining condom use due to gendered power dynamics and social norms (Blignaut et al., 2015; Tsai et al., 2013; Kim et al., 2008; Obbo, 1993; Omidéyi et. al., 2011; Broel et al., 2017; Voeten et al., 2007; Zhao et al., 2009). Thus, the reluctance to use condoms cannot be conceptualized as merely behavioral; it is deeply embedded in the gendered and sexual context of a particular society.

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Statement of the Problem

Condoms are effective in the prevention of HIV, unintended pregnancies, and use as a family planning method. There have been significant efforts in the promotion and supply of condoms. Despite this, their uptake remains low.

Data in Kenya reveals a remarkable scale up in the availability of condoms. However, low uptake and inconsistent use continue to be reported. Prevention of HIV and unintended pregnancies, exposure to correct information on condom use, casual relationships and maintaining HIV negative status encourage condom use (Ntshiqqa et al., 2018; Mavhandu-Mudzusi, 2016; Sennotte and Yeatman, 2016; Kapiga, 2003; Kenyon, 2010; Kanda & Mash, 2018). On the flipside; issues such as poverty, religious beliefs, power dynamics, cultural beliefs, sexual risky behavior, regularity and irregularity of sexual relations or partners, alcoholism, peer influence, misconceptions about condoms, HIV positive status, and restrictive social environment have not only made access to condoms harder but also made men engage in secretive sexual activities without protection.

Male clients of female sex workers are major stakeholders in the push for condom use. Yet they are neglected in interventions targeting increased condom usage and with the focus primarily being on sex workers. Studies have portrayed men as a hindrance and uncooperative towards the use of condoms. The negotiation for proper use of condoms is left in the hands of female sex workers. For this reason, many studies continue to be focused on. While there are some studies on why men do not use condoms, the focus on their motivation to use condoms and most particularly with sex workers is virtually missing in the literature. This article aims fill this gap. Factors that influence use and nonuse of condoms among clients of female sex workers in Mombasa remains under-researched and not well understood. This present paper therefore explores male clients' fidelity to use condoms with female sex workers.

Review of Related Literature

In HIV prevention interventions, sex workers are highly targeted for condom use. Studies conducted among female sex workers (FSWs) show condom use is lower among regular clients compared to irregular clients (Castañeda et al., 1996; Ngugi et al., 2012; Ray et al., 2001; Scorgie, 2013; Voeten et al., 2007; Wang et al., 2007; Zhao et al., 2009; Vandenhoudt et al., 2013; Ulibarri et al., 2012). As in the literature regarding men's reluctance to use condoms, the literature on sex workers indicates a multitude of social and economic factors that contribute to their nonuse of condoms. These include but are not limited to feelings of love, intimacy and romance, alcohol use, the desire to marry and have children with the client, sexual violence and fear of losing financial support (Wirtz et al., 2015; Abelson et al., 2019; Castañeda et al., 1996; Bukenya et al. 2013; Ngugi et al., 2012; Obbo, 1993).

Furthermore, studies on sex work portray clients of female sex workers (FSWs) often as the hindrance to condom use (Tsai et al., 2013; Shannon & Csete, 2010; Odek et al., 2009; Kim et al., 2008; Sherman et al., 2006). It highlights power relations between the female sex worker (FSW) and the client as well as misconceptions pertaining to sexual pleasure as decisive in client's non-use of condoms (de la Torre et al. 2010; Tsai et al., 2013; Odek et al., 2009; Kim et al., 2008; Sherman et al, 2006). Clients of FSWs are shown as oppressors, exploiters and disinterested (Shannon & Csete, 2010; Sherman et al, 2006; Brents & Hausbeck, 2005) - generally taking advantage of sex workers to obtain condom-less sex. Research shows that FSWs' negotiating power is undermined by the high payment offered by their clients for condom-less sex (Tsai et al., 2013; de la Torre, et

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al. 2010; Odek et al., 2009; Kim et al., 2008; Sherman et al, 2006). In sum, the clients of FSWs are depicted as irresponsible and abusive of their power when it comes to their willingness to use condoms (Shannon & Csete, 2010).

Condom use has been promoted and widely distributed in Kenya for decades. First, as a family planning method, second, as an STI prevention technology, and third as dual protection simultaneously protecting against sexual transmitted infections and unwanted pregnancies. The promotion of condom use accelerated in the HIV era (Mungála et al., 2006; National AIDS Control Council [NACC], 2001; National AIDS and STD Control Program [NASCOP], 2001). Various approaches have been used in the promotion and distribution of condoms from advertisements in the media, social marketing and stocking public health facilities with condoms. Free condoms are distributed through the public health care system and made available in entertainment establishments such as hotels, brothels and guesthouses. In addition, civil society organizations working on interventions in family planning and HIV prevention also engage in condom distribution (International Business Times, 2013; NASCOP 2014). Condoms are also sold in shops or convenience stores and supermarkets. While there is an increase in the number of condoms distributed, condom uptake remains low in Kenya (Kenya National Bureau of statistics [KNBS], 2015).

HIV interventions in Kenya and elsewhere have targeted sex workers in the promotion of condom use with their clients (Scorgie et al., 2013; Okal et al., 2009; Geibel et al., 2008; Foss et al, 2007; Broel et al., 2017). There have been investments and innovations to improve this free condom distribution in peer education programs and at sex work hotspots such as guesthouses and brothels (Geibel et al., 2012). Despite the resources, challenges of low condom uptake continue to be documented (Scorgie et al., 2013; Open Society, 2012; Rigillo 2009; Ngugi et al, 2012).

Robust research on condom use focuses on women’s perspectives and experiences. Women are positioned as the ones who have the most to lose and in need of condoms for protection (Lapinskei-LaFaive & Simpson, 2004), and therefore hold the responsibility of condom use with their male partners. This view has led to underrepresentation of male partners in the literature. We postulate study participants, who are clients of female sex workers, have concerns and needs, and recognize the value of condoms, which they logically make use of; and that, participants logic is about how gender and sexual notions are institutionalized and influence men’s choice to use condoms. Our paper conceptualizes condoms as a governance tool for mitigating the participants’ vulnerabilities. We embrace governance tool as a decision-making scheme in cushioning economic control, navigating trust, and sexual and gender-based violence verses masculinity and women empowerment through sex work and condom use. In doing so, through a social ecological model (Bronfenbrenner, 1977), we consider the interaction of individual, interpersonal, societal and public policy factors to expound on how clients of sex workers’ make decisions and practices around condom use. This frame allows the exploration of a range of factors beyond fear of HIV infection that inform men’s decision making on choice of condom use.

Methodology

Study Setting and Location

The data presented was collected in Mombasa city from May 2015 to February 2017. Mombasa, the second city in Kenya is situated at the coastal region. It is a tourist city and attracts a sizeable migrant population from mainland Nairobi for economic opportunities. It is also known as *Mombasa Raha* (translated as Mombasa a city of leisure or pleasure. The city has a sizeable

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number of female sex workers operating in over 100 sex work hotspots. (Geibel et al., 2007; Odek et al, 2009).

The study was conducted at KK hotspot, located in North Cost of Mombasa County. KK is one of the many sex work hotspots in Mombasa. It is an overcrowded low-resource setting. It is a very busy area with many petty businesses, woodwork workshops, eleven guesthouses, numerous sex dens, green lodges (fields and under trees) and has the highest number of unlicensed brew dens (popularly known as *mnazi* dens) – more than 10. Guesthouses and sex dens operate twenty-four hours a day, seven days a week. Sex work is a business that runs day and night but peaks from 6pm to midnight. KK, was purposively selected as a study site, taking into consideration several factors including accessibility, and availability of participants and the numerous possibilities to encounter women working as sex workers. In addition, a five-minute short time sex transaction attracts a standardized charge between KES 150 (\$1.5) and KES 200 (\$2) in guesthouses and less than KES 100 (1 \$) in sex dens. Guesthouses charged KES 50 for five-minute use of room.

During conversations at the KK *mnazi* den [KK *mnazi* den is a pseudonym for a den where discussions took place within KK hotspot] where the first author's interest in conducting a study among clients of sex workers began. The den which was run by two FSWs who participated for two years in the larger research project on economic empowerment, was located in the home of one of them. Every Wednesday first author and her field assistant visited this home between 9 am to 3pm. During these visits the researcher and field assistant became acquainted with eleven of the dens' clients and talked about their lives in Mombasa as migrants from Nairobi. These conversations sparked our interest in wanting to know more about clients' perceptions of condoms and condom use practices.

Data Collection

The research used a qualitative approach that allows for the exploration of phenomena within their contexts from the perspective of the participants (Barnard, McCosker & Gerber, 1999). Multiple methods were used.: 1) four focus group discussions (FGD), solicited information on perceptions and practices around condom use with clients' of FSWs; 2) six key informant interviews with four proprietors and staff of guesthouses and two community leaders. Key informant interviews with proprietors and staff of guesthouses focused on condom distribution and their relationship to FSWs while with community leaders on their general perceptions and understanding of sex work in Mombasa, and especially KK.; 3)three informal discussions with eleven of KK *mnazi* den customers who openly discussed and emphasized the importance of sex work and condom use in their sexual lives.; 4) participant observation to observe condom distribution in four FSW guesthouses. During participant observations we held conversations with female sex workers. Interviews, discussions and conversations were conducted in Kiswahili language.

Data Management and Analysis

Field notes and research journals were used to document observations on condom distribution, informal discussions and conversations. At the end of every session, the first author and field assistant transcribed and reconciled notes. From these notes emergent themes provided the initial coding framework that was used to organize and categorize the data (Sutton & Austin, 2015). All tape-recorded interviews and discussions were transcribed verbatim, and translated to English. A thematic approach was used in data analysis (Bryman, 2012; Broun, Clarke & Rance, 2014; Braun & Clarke, 2006). The coding framework was interactively developed further by the researcher and a research assistant classifying the data into themes that evolved from transcripts. Using this

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framework, all data was manually coded by the researcher and a research assistant. Pseudonyms have been used for anonymity of study participants.

Ethical Approval

The study was approved by Kenyatta National Hospital / University of Nairobi Ethics Committee, Kenya. All participants provided written informed consent for participation and to the inclusion of data pertaining themselves. Discussions and interviews were conducted in safe and confidential venues. Pseudonyms have been applied to ensure confidentiality.

Findings

Participants

Thirty - five clients of FSWs participated in four FGDs. Majority of them (n=28) had wives living in the rural areas; and 4 lived with their wives in Mombasa. Eleven more participants contributed in three informal KK Mnazi den discussions. All participants had lived in KK for 3 years or more and were regular clients to FSWs. All were migrant workers from the mainland who came to Mombasa to improve their economic situation. All except four were casual workers. However, the opportunities they hoped for were taking longer to come than they imagined and while waiting for these desired prospects, they took up jobs as public transport conductors - averagely making KES 500 (2 \$) per day. They lived in precarious conditions: seven of them were homeless. The KK den was a home to them. Their lives revolved around the den; they slept and stayed here. During the dry season they slept on the ground under the shade of a mango tree, while a few hired mattresses for KES 30 (equivalent 0.3 \$) per night, and slept in the plastic structure. Those who could not afford the mattresses slept on the ground. They used a clothing line under the Mango tree as their wardrobe. These men started work as early as 5am, and by 10am they took a break, when they came back to the den for an illegal brew. Two hundred and fifty (250) milliliters of the brew costs KES 10 (equivalent US\$0.1). Occasionally, they would pool their resources together with other customers and prepare food and eat communally. Their wives and children lived in Nairobi and upcountry.

Condom Distribution in KK

Guesthouse proprietors and staff are central in condom distribution to sex workers and their clients. They work with the International Centre for Reproductive Health (ICRH) - Kenya, to ensure free condoms are available in guesthouses. The condoms are supplied by ICRH- K peer educators. These are then distributed to sex workers and their clients upon payment for a guesthouse room. Free condoms are also distributed to the community members upon request.

Both female sex workers and their clients were in favor of this initiative. For FSWs having condoms distributed by guesthouses protected them from being found with condoms during police crackdowns on sex work. Condoms have been used in Kenya as an exhibit in court to incriminate sex workers (Open society Foundations, 2012). Others commended the availability of condoms at the guesthouses as a way of concealing their work from family members, - children, and from husbands- for those who were married. Many reported that they did not want their children to know they were sex workers for fear of their reaction, and therefore preferred not to have condoms on them. In the context of economic precariousness, free condoms were appreciated and motivated condom use:

Having condoms in the guesthouses is really helpful. When you are given a condom in the presence of a client, it makes it easy to talk about it. Our clients are happy about it. Some of them, especially those who are married, don't carry condoms; they fear their wives may

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question the motive... Also some of us sex workers have children, and we don't want our children to know that we do this work. For instance, I'm a single mother of three children, the firstborn is 19 years. I don't want them to know that I'm a sex worker... for this reason, I don't want condoms in my house. ...guest-houses are really helping by making condoms available. - Participant B, Informal discussion.

Similarly, clients of sex workers appreciated the distribution of condoms through guesthouses. Guesthouses assured them of availability of free condoms. Some of the participants not living with their wives noted that they collect condoms from guesthouses and keep them for unplanned sexual exchanges especially with home-based sex workers:

The guesthouses have condoms all the time. When you are given a condom as you get in to the guesthouse, you appreciate that you have protection. It is now up to you to choose to use it or not...the lady cannot tell you that she doesn't have a condom... you are given and you see it. – Participant C, Informal discussion.

While committed to condom use, participants intimated that availability and access to condoms did not guarantee condom use. According to participants, it would be difficult for sex workers who do not want to use condoms to suggest they do not have condoms.

In addition to concealing their involvement with sex workers, the male clients intimated that access and fidelity to condom use make them feel protected from diseases, while fulfilling their sexual needs.

(...) When you go for sex with a female sex worker, you know she is not with you alone... she is with many men. You not only see it but you experience it. So you know she is not safe... even if you know her you cannot just take chances not to use condoms because I don't think she is using condoms with everyone. For me providing condoms is the best thing that the guesthouses do for us. I have to use a condom to protect myself. You don't trust her because you don't know those men she has been with. Since I know she is with many men I feel safer when I'm with her because of condoms.... The dangerous women are those who are not sex workers; they may be single and they pose as if they are safe because they are not sex workers, and they can easily trick you into not using condoms... you don't know about their sex life... Those I don't deal with them. I have a wife and a child to protect. – Participant A, Informal discussion.

The first aspect of condom use is prevention of HIV. The nature of their work makes it obvious to participants that sex workers have many sexual relations. The main goal of seeking the services of sex workers was to release pent-up sexual urges without facing any unwanted consequences. Unwanted outcomes, in this case, are sexually transmitted diseases including HIV, and unintended responsibilities that may occur from non-condom. Condom use and avoidance of 'dangerous women', therefore, provided a sense of security the participants were looking for. Dangerous women are those relations that would challenge condom use and would put them at risk of contracting HIV.

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“It is business.... no other commitments”

The second aspect of fidelity to condom use concerns the delimitation of sex work to a business transaction. Participants noted they endeavored to maintain relationships with sex workers “*strictly as a business transaction*”. Their economic situation did not permit them for any extra financial responsibility or affective emotional relationships that would transform the sexual transactions into a long term economic responsibility, especially if children were to be involved. In all the discussions reference was made to the acts and laws of Kenya as factors supporting their use of condoms, particularly the child act and, marriage act of Kenya which outlines responsibilities of both parents and financial commitments were often mentioned. The men went to great lengths explaining how their fidelity to condom use was in part a result of the child act which would tie them to financial obligations if a sex worker conceived their child. They further observed that women, especially sex workers are empowered by various organizations on laws that protect their interests. Where children are involved, FSWs use the courts to commit men to parental (financial) obligations:

In the evening there are so many sex workers everywhere on the streets. You walk on the streets, get one (a female sex worker), pay for the room, she is given a piece of tissue and a condom, get into the room, do sex quickly... it is very quick...in a matter of minutes, you are done. Then pay and leave. There is no time to know the person you have sex with, not even their name. We are in Mombasa to look for money, we have families, and cannot take on other financial responsibilities. You are here to release the sex urge. These ladies are in for money and I am in for sex pleasure... It is business, no other commitments. Others are in to get men for long term financial support, or are looking for men to marry... and these women are empowered by the organizations that target them with interventions. They are aware of the laws that are in their favor and can use them very well to get a man commit to them financially. – Participant 1- FGD.

The example illustrates participants’ ability to recognize the interaction of non-condom use and the laws of Kenya, and how women are taking advantage of the laws for long term financial support from men. The discourse of financial needs of FSWs provoked reflections on their commitment to family financial responsibilities. They recognized responsibilities to families to be an expensive affair. They had concerns about women using children as financial security. They discussed the tricks women use into having children with clients for financial security or in fulfilling their marriage aspirations:

Here we have so many single mothers targeting men to financially support them and their children, and the only way to get a man to commit to them is by getting pregnant. Most of them have turned to prostitution as the last option to get money to raise their children. But if given an option, they would opt out of sex work. As for me, I already have a family and I don’t want another one because life is very expensive. I really appreciate sex work ... it saves us from so much. - Participant D, Informal discussion.

They debated on various intentions of sex workers that were different from participants. Thus, while to participants sex work relations was a business transaction, to FSWs it could imply much more including long term financial support or a pathway to marriage:

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This is a trap, they know if they get pregnant then they will turn to you to provide for the child. Which means you provide money for food, clothing, house and school fees.... That is too many responsibilities and you have your own family.... Where do you get the money for all these responsibilities? Nowadays you can also be reported to the children's department, which compels you to pay a certain amount of money. We buy sex from sex workers because we don't want responsibilities. The only way to keep off such responsibilities is to make sure you use condoms, also you wear it yourself because we have those women who will tear it and say it is an accident. – Participant 2- FGD.

Clients of sex workers were after a business transaction. They were vigilant on condom use. While recognizing their commitment to condom use, they also described how some clients choose not to use condoms while others easily fall into the trap of not using a condom:

We have another one who is pregnant and is trying to find the man. Some men want sex without condoms, but some are convinced by these women to have sex with them without condoms. Such men don't know what the women are up to. So we have men with an agenda, and these women also have their agenda. But for me, I cannot. Sex without condoms can lead to feelings of intimacy, and that is a trap into getting them pregnant. – Participant 3- FGD.

In other words, preventing feelings of intimacy, condoms does contribute to making purchase of sex a business transaction, thus participants noted how, through condom use, they put controls around such transactions. Further, they discussed the desires of FSWs to get out of sex work, get married, or just have a long- term relationship for financial support. In four FGDs, they shared instances where condoms were not used, which they blamed on the women's tricks to trap clients for marriage or financial commitment. According to these study participants, sex workers are quite aware of the child act, which they use for long term financial support:

I cannot have a child with a sex worker. We have heard cases where women claim condoms break, which is not true. They (FSWs) burst condoms to trap clients. I am always very careful....I don't let sex workers put on a condom for me, I do it myself. These women know having a child with a client means financial support, if you do not support them they take you to children's court. They have been taught by the organizations that target them. Unfortunately these organizations only target them, and not us the clients. We also have a story to tell. ...There are few who succeed but for others the men run away. – Participant E, Informal discussion.

In explaining their preference for sex workers, they did not accept any tricks by sex workers on non-condom use, and they did not accept suggestions such as condom break. While participants frequently participated in buying sex, they avoided being considered regular clients to FSWs. Regular clients implied having sexual transactions with one or particular few FSWs, which could change the business transaction nature of sex work relations.

I have never had the intention of becoming a regular client to a sex worker. I am frequent there but rotate from one sex worker to another. When you become regular it can turn out to be *Mpango wa Kando*. (...) I do not need it because it brings a heavy financial commitment

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even more than what you commit to your family. We like these women (FSWs) but our relationship ends with my payment for sex transaction. – Participant 4- FGD.

Participants adopted a strategy of avoiding engaging with the same sex worker on a regular basis. They fear financial commitments and any engagement that would result in financial commitments such as developing feelings of intimacy, love, or romance.

Discussions regular clients gravitated towards other transactional relations, which they avoided due to demands for financial responsibility and perceived health risks. Such discussion provoked debates on *Mpango wa Kando* relationships versus sex work. *Mpango wa kando*, is a loosely structured nonmarital relationship that embodies long-term commitments, intimacy, love, and trust, and it is an expensive affair (Luke, 2010). It, enticed discussions revealing how condom was central in controllability of their financial responsibilities, and why sex work worked for them than *Mpango wa Kando*:

Madam (researcher) I am telling you it is better to stick to sex workers, *Mpango wa Kando* ni ‘haramu’ (side relationship is illegal). They take all your money... they demand for house rent, beauty products, food, expensive phones, clothes, some of those things you cannot afford. And if you have children with them it’s worse because they want to live in expensive houses, take the children to expensive schools..... They even demand for a share of property, and if they are recognized by law there is a marriage law that entitled to that share of property. We have seen men who came to Mombasa, and have abandoned their families because *Mpango wa Kando* takes all the money. – Participant 5- FGD.

The example helps demonstrate the expensive nature of *Mpango wa Kando*. The discourse of inability to engage *Mpango wa Kando* and its signal to go beyond economic means of clients of FSWs was of great concern. Clients of female sex workers feared high financial demands that cannot be supported by their economic precarious existence. ‘Sex workers are the best as long as you use condoms, you will have your sexual needs met, you pay and that is the end of the story.’ noted Participant F- informal discussion. They did some serious thinking around the laws of Kenya in protecting women’s economic demands while men are ripped off by women. Throughout these discussions, the clients shared their knowledge of marriage and property laws (the Matrimonial Property Act) of Kenya. They recognized the protection accorded to women by such laws, and voiced their fear of relationships or how women who were knowledgeable of these laws exploited them:

During death of the man partner or separation *Mpango wa Kando* women show up with children and make financial or material demands. They involve lawyers who use the child act... and maybe the real wife does not know about his husband relationship with *Mpango wa Kando* – Participant- 6 FGD.

The biggest challenges participants raised about *Mpango wa kando* was health risks, and financial demands, and strategies employed to get the financial support. More broadly, they generally avoided relations that challenge condom use, economic ability, and therefore condom use was held in high regard.

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Safety and Trust

Men in KK den discussions acknowledged the practicality of condom use in maintaining trust in monogamous relations:

I did not come to Mombasa to die or be infected with HIV. I came here HIV negative and I have to go back to Nairobi HIV negative. I know sex work is safe with condoms. The dangerous women are those who are not sex workers like *Mpango wa Kando*. You are not with them all the time.... You don't know if there is someone else yet there is possibility of trust and nonuse of condoms. It is easy to get infected. With sex workers, it is safer because it is clear they enlist multiple clients... I have to use condoms all the time to protect myself and my marriage. – Participant- F, Informal discussion

Participants demonstrated multiple benefits of condom use. Fidelity to condom use was not only for protecting their health but is hugely important to protect their marriages. The men understood female sex workers to be a health risk affair, and were aware of it. They expressed concerns about other non-marital relations such as *Mpango wa Kando* relationships that may challenge condom use and put them and their wives at risk. Similar sentiments were expressed in the FGDs revealing the value of condom use in protecting marriages and families from HIV infection while relieving pent-up sexual desires:

You have to use a condom to protect yourself and your family. There is a sex worker I occasionally bought sex from.... one day she told me not to use a condom. I thought it was a trap. I insisted on using a condom. After a short time, she got very sick and lost a lot of weight. I suspect she was HIV positive. You can imagine if I accepted into her trap not to use a condom. As a client, I make sure I use a condom. - Participant 7- FGD.

Participants were aware of the health dangers of non-condom use. Their strategy of fidelity to condom use was threatened by suggestions of non-condom use by FSWs, to which they hold the power to resist. However, they only embraced condoms in non-marital relations. Participant 7- FGD is one of the few participants who lived with his wife in KK. He was one of those who could not introduce condoms in his marriage. Condoms according to clients of sex workers, is more acceptable in marriages for family planning but not for STIs prevention unless in HIV positive cases. Condom use in sex work was reported to conceal infidelity in clients' marriages. "Women trust men who does not bring sexual diseases and children out of wedlock", said participant- G. Absence of sexually transmitted diseases in marriages, according to participants, is a sure sign of faithfulness and trust.

Condoms are only used with FSWs or relationships outside marriages but the marriage partner should not know about it. They observed that introducing condoms infers mistrust or infidelity. The mere mention or possession of a condom is deemed as a breach of trust in the relationship. The guesthouses providing condoms offer relief to married male clients and more so ensure harmony within the marriage institution.

My wife talking to me about condom use will mean that she doesn't trust me or she is having an affair. In fact since I live with my wife, I am happy the guesthouses supply condoms which we use. I don't carry any condoms on me. If she found condoms in my pockets she will be angry, and I will feel guilty and in defending myself, it can cause problems in our marriage. But as long as I use (condoms) secretly for sexual pleasure and

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go home clean, I am ok, I don't have to beg my wife for sex. If she says no, I keep quiet and be at peace. – Participant 8- FGD.

Condom use with sex workers in building trust in marriage came through strongly, and is underpinned by undesirable outcomes of non-condom use. However, broadly, the ability to introduce condom use in marriages was lacking, and therefore was shrouded in secrecy. It was further mentioned that being found with condoms was linked to having extramarital affairs that might be used as evidence in a divorce case. Participant- 9 FGD said:

What would one be doing with condoms, if they are not using them? It is difficult to explain because if you say that you want to use them for protection you will still be accused of having an affair. So, it is logical and sensible to use condoms in guesthouses and not take them home (Participant- 9 FGD.

Participants living with their wives agreed to this and noted that they would not trust their wives if they found them with condoms, and they would not want their wives to find condoms on them even if they had good intent.

The supply of condoms in the guesthouses was reported to lead to an increase in trust among married clients and those in long term relationships. Not only did the condoms protect them from sexually transmitted diseases, but they also concealed their indiscretions.

Men's Loss of Control: Sex Work and Condom Use as a Moral Governance Tool

Clients of sex workers described how condom use is a tool for controlling sexual and gender-based violence. Condom use allowed for release of pent-up of sexual desires which participants reported helped in preventing them from perpetrating sexual and gender based violence. Sexual and gender-based violence is rooted in normalization of enduring men's power over women including sexuality and relationships in patriarchal communities (Mfecane, 2012; Connell. 1995). While not all sexual urge leads to sexual violence, however, sex was one of the things that the men felt is a right and should not be denied in marriages and long term relationships. For them, however, sex work provided an alternative.

Married clients of FSWs cited the sexual offences act and penal code as restraining them from demanding for their right and disciplining their wives, thereby undermining their masculinity and power/control over their wives' bodies. "We are no longer in control. The women are so empowered by interventions and the laws. It restricts our power over our wives," noted Participant 10- FGD. They took note of recent women campaigns in Kenya such as 'my body my choice' campaign, which threatens men's authority over their wives' bodies with regards to meeting their sexual needs to their desirability.

They posited that women empowerment campaigns have resulted in the 'loss of men's control over their wives' sexuality. The men said they are unable to demand, force or beat their wives for sex for fear of legal repercussions. Therefore, they suggested condom use and sex work as a significant governance tool in the management of SGBV. Specifically, using condoms allows them to secretly meet their sexual needs and reduce their urges, therefore control their fierce demands for sex or raping their wives. Condom use in sex work mediated observing good morals, thus men perform as expected by their wives, respecting their bodily autonomy and refraining from SGBV. Therefore, while there was lose on control of women bodies, the men reported

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reconfiguration of dual notions of masculinity that brings out ‘*positive masculinity*’ (Englar-Carlson & Kiselica, 2013) - good men who respect and support his wives’ wishes and aspirations:

Nowadays women have become very stubborn. They have been empowered by the laws that are protecting them. You get home and ask for conjugal rights and you are told ‘my body, my choice’. If you force, she accuses you of rape - an offense in Kenyan laws. For me, sex work comes in handy... When I notice it is not well at home with my wife, I quietly pass through the guesthouse, pay for sex, then go home and have my peace... I have to be careful not to be discovered... - Participant 11- FGD.

I’m married, I respect my wife a lot ... but I seek sex services elsewhere because she only limits me to certain days of the week. This helps me take care of my marriage. - Participant 12- FGD.

We have married men with families but you find them at guesthouses looking for sex services. It all results from being mistreated by their wives. These women rights have destabilized families. You can imagine I have gone to work the whole day then I come home and my wife denies me sex, why should I not go to vitandani? - Participant 13 - FGD

We have empowered women and weakened men... the women who work are very powerful; they are no longer submissive as it was before. To avoid trouble with them, I visit sex workers. - Participant 14- FGD.

The excerpts illustrate participants’ concerns about their marriages and respect of their wives, concerns with women empowerment and limitations, and participant’s aspirations and key dynamics that challenge their control over the wives’ bodies, and the power of condom use. While women’s rights demasculinize men, condom use enabled men to seek sexual pleasure from sex workers, thus reducing confrontations or acts of sexual and gender-based violence by men and caring for their wives, and, in so doing, it gives men a positive perception of masculinity. The moral dimension of being a good husband involves prevention of sexually transmitted diseases, being trustworthy, and respecting wives’ autonomy.

Discussion

Sex and condoms are critical aspects of clients of female sex workers’ lives. The findings suggest condoms were an important part of sex work transactions, and that clients of sex workers were interested in condom use. Our results concur with Omideyi et al., (2011) findings that show men here clients of FSWs- have a considerable influence on condom use. Men are not passive in condom use, they are making decisions to use or not use condoms. However, the findings suggest limitations in men’s influence on condom use in marital or cohabiting relationships.

Studies show a positive association of availability of condoms and condom use (Foss et al., 2003; Rutakumwa et al., 2015; Sandøy et al., 2012). Observations of condom distribution and key informant interviews allowed us to validate the availability of condoms in guesthouses. Availability of condoms and the distribution through guesthouses is an important factor in the participants’ confidence and decision making around fidelity to condom use. It allows for sexual pleasure while concealing infidelity in marital relationships. The findings support the thesis that availability of condoms has a positive influence on its use.

The reasons behind condom use span beyond prevention of HIV to building trust and cushioning their moral and financial obligations. Our findings concur with researchers

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(Mulumeoderhwa, 2018; Obbo, 1993; Schoepf, 1995) who postulate that meanings and attitudes attached to condoms can encourage or discourage its use. Our study findings show how clients of sex workers appropriate meanings and make strategic choices based on perceived monetary, health, moral and legal implications of condom use and nonuse. They point to an intentional goal of clients to keep sex labor purely a business transaction; therefore avoiding anything that will lead to long term commitments such as ‘*Mpango wa Kando*’, which is an expensive affair with far reaching implications on families of these men (Luke, 2010), and in particular where condom use is absent. Fulfilling their sexual needs becomes the only motivation to have sex outside of marriage

Economic vulnerability of most participants is the main reason a good number of them turned to sex work and condom use. Safety was found in sex work and condom use. Condom use becomes a significant tool to govern insecure finances. Participants worked within their means to meet their sexual desires. Short-time sex work transaction in KK was affordable. The narratives of clients from our study also reports that nonuse of condoms by FSWs with other clients (Abelson et al., 2019; Castañeda et al., 1996; Ngugi et al., 2012; Obbo, 1993; Ray et al., 2001; Wirtz, et al., 2015), is certainly in order to interpret the situation as one in which clients’ mistrust sex workers as exploiters and financial manipulators. Despite the scams devised by the sex workers, they are preferred to other sexual relations.

Power inequalities rooted in patriarchy privileges drive SGBV. Kenya has put in place policies and laws- that respond and prevent GBV, in addition to commitments to international and regional human rights frameworks on prevention of GBV. Kenya’s national policies and laws that respond to and prevent SGBV include the sexual offences act, protection against domestic violence act, the marriage act, the matrimonial property act and the penal code. Women’s empowerment and knowledge of their rights seem to threaten masculinity, in particular ‘loss of patriarchal control or power and authority’ over their wives’ bodies. Economic precariousness has resulted in study participants constructing a narrative of their vulnerability that is blamed on women’s empowerment, and laws confining them potentiality in performing their masculinity. They saw the two sides of the empowerment of women. On the one hand, they felt the loss of control affecting their perceptions of masculinity. On the other hand, they recognize the positive dimension attributing notions of positive masculinity (Ribeiro, Paúl & Nogueira, 2007; Englar- Carlson & Kiselica, 2013), as a (potential) strategy to confront women (their wives) aspirations and empowerment. How this would work interesting to dedicate further research.

Conclusion

The data in this study positions clients of female sex workers as important stakeholders in discussions on condom use. Clients embrace condom use as a governance tool to facilitate sexual pleasure while cushioning against undesirable outcomes. While the choice of condom use seems to be logically informed and implemented, and individual economies are at the center of condom use, it is unwise to affirm with confidence that policies and laws of Kenya are the defining factors in clients of FSWs fidelity to condom use. Promotion of condom use requires an understanding of the nature of the needs and wants of different demographics of clients of FSWs. This focus allows new questions to be considered in condom use and promotion of condom use, including who has the responsibility in making decisions on condom use and nonuse, and how individual (clients and FSWs) needs and priorities can enhance understandings of condom use and nonuse.

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Study Limitation

The limitation of this study is the focus on clients of sex workers in economic precarious situation. More research is needed with men from middle and upper socioeconomic demographics. Research is also needed with men who have experiences with long term nonmarital relationships on issues raised by study participants.

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Participants

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Disclosure Statement

The authors have no conflict of interest.

Data Availability Statement

Data associated with this paper is stored in the computer of the first author, and as per the ethics approval, data is only shared among the researchers/authors.

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