

Gay parties and male sex workers in Nigeria

Kehinde Okanlawon and Ade Iretunde

Living as a male sex worker in Nigeria is a big challenge, since both same-sex activity and sex work are criminalised and socially condemned. In Nigeria, HIV affects men who have sex with men (MSM) four times as much as other men and condom use is low. Male sex workers are numerous, but their needs for prevention and treatment are under-researched and poorly addressed in national HIV programming. Knowing that health workers are often homophobic and discriminate against male sex workers discourages men from disclosing their sexual orientation or even visiting HIV-prevention and testing services.

While male sex workers and other MSM are seriously marginalised and socially excluded in Nigeria, they secretly organise parties which provide a source of hope. These parties are always interesting places to be, where some male sex workers dress like women and refer to themselves as Beyoncé, Shakira, Rihanna and other divas, while others freely dance and act like women. At these parties, men feel secure and comfortable to celebrate and express passions and gratifications about their sexuality, while they also network and meet new friends, potential sex partners and clients. There is a cordial relationship between male sex workers and other MSM at these parties, many referring to each other as *my sister*. One sex worker said *Gay parties help us forget our sorrows, depression, HIV and other problems, and we think about our future*.

Some sex workers also use these parties to reach out with HIV messages and services. Ade Iretunde was a male sex worker in South West Nigeria who was passionate about it. He would inform me about any party coming up so I could attend to talk about HIV issues and provide condoms and lubricants. Ade became a peer educator a few months before he died of an HIV-related illness and always expressed concerns about challenges he and other peers faced in accessing HIV services.

Ade invited me to a gay party organised by a sex-worker friend in Ibadan, a large city, in February 2012. Men came from cities across South West Nigeria. At this party, Ade and I recruited 28 men to talk with us after the party;

they averaged 26 years old. We asked about their experiences of stigma and discrimination from health workers and strategies they take to fight HIV.

How Health Workers Discriminate

Most participants reported they felt stigmatised after disclosing their sexual orientation and/or sex work status to health workers.

A doctor did an HIV test for me and told me I was positive. He then said we are the ones spreading HIV and that God will destroy us as He destroyed Sodom and Gomorrah.

A doctor was nice to me when I told her I'm a gay sex worker because I report STDs regularly. But when she finished treating me, she shouted Go and sin no more, if you come again with an STD, I won't attend to you. I'd rather travel to Ibadan to see doctors who treat me well.

I was humiliated in a hospital one day in front of doctors when I disclosed that I had tears from anal sex. They started laughing. I'd rather die than go there again.

A few mentioned being treated better by doctors in MSM-friendly centres in big cities like Ibadan and Lagos. Among those who still visit hospitals, most of our participants said they now refuse to disclose their sexual orientation and sex-work status.

I had an infection on my penis and went to hospital. When the doctor asked me how I got an STD, I lied and said I got it from unprotected sex with a woman. I couldn't say that I fucked a man for money. The doctor would send me away.

On the day I was told I had HIV, my doctor asked me about my sexual partners. I had to lie and say they are girls. I couldn't tell her I'm a gay sex worker and that I got HIV from a man.

These comments show how male sex workers internalise stigma. Since they do not tell the truth about their sexual activities, data collected by health workers from them may be interpreted to mean that the HIV epidemic is driven by heterosexual behaviour. At the same time, the needs of MSM, including male sex workers, are neglected.



Using Medications

While some male sex workers still visit health centres, many consult traditional healers who treat them better and do not discriminate against them if they have anal infections. Some of the men told us they put herbal mixtures of garlic and pawpaw leaves in their rectums before and after unprotected anal sex with clients to try to prevent HIV. Some say they take antibiotics before and after sex as well.

Most participants have heard of rectal microbicides produced by pharmaceutical companies and say they would be willing to pay up to seven times the price of a male condom for them if they became available commercially. The development of rectal microbicides without unpleasant side-effects could make a significant difference in the spread of HIV among male sex workers and other MSM.

Parties are safe spaces where male sex workers can be reached with gay-oriented HIV services. It is exciting that some male sex workers help themselves through organising parties where they request HIV services from social workers. MSM-friendly services are urgently needed in smaller towns and cities across South West Nigeria. Apart from Ade Iretunde, a number of other male sex workers in the Nigerian gay community have died of similar causes in the past year, revealing a population with urgent unmet health needs.

About the authors

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尼日利亚的同性恋聚会及男性性工作者

Kehinde Okanlawon 和 Ade Iretunde

作为一名男性性工作者，在尼日利亚生活面临很大的挑战。因为同性活动和性工作者均被刑事化，并且还受到社会的谴责。在尼日利亚，男男性行为者面临的艾滋病风险是一般男性的四倍，而且安全套使用率很低。尽管男性性工作者是个很大的人群，但人们对这一群体的艾滋病预防和治疗需求仍不太明了，也没有能够在国家艾滋病项目中有针对性地解决。要知道，医护人员常常是恐同的，他们歧视男性性工作者，导致男男性行为者不愿意透露自己的性取向，甚至不愿意获得艾滋病预防和检测服务。

尽管受到社会排斥和被严重地边缘化，尼日利亚的男性性工作者和男男性行为者秘密地组织聚会，为同伴提供支持与希望。这些聚会通常非常有趣，一些男性性工作者会打扮成女人，称自己是碧昂斯或蕾哈娜，还有人像女人一样自由自在地跳舞。在这些聚会中，人们对自己的性别和身份感到安全和舒适，同时他们也能相互联系，认识新朋友，寻找潜在的性伙伴和顾客。在这些聚会中，男性性工作者和男男性行为者之间有很亲密的关系，很多人称对方为姐妹。一名性工作者说，同性恋聚会帮助我们忘记痛苦、哀伤、艾滋病和其他问题，我们能相互扶持。

一些性工作者也通过这些聚会来介绍艾滋病信息和提供服务。Ade是尼日利亚西南部的一名男性性工作者，他对艾滋

病防治工作抱有很高的热情。他会告诉我什么时候有聚会，然后我可以参加并介绍艾滋病知识，提供安全套和润滑剂。Ade经常提到男同性人群获得艾滋病服务所面临的障碍。在死于艾滋病并发症的几个月前，Ade成为了一名同伴教育员。

2012年2月，一个在伊巴丹的性工作朋友组织了一次聚会，Ade邀请我去参加。伊巴丹是一个很大的城市。参加这次聚会的人来自尼日利亚西南部。在这个聚会中，Ade和我招募了28名男性在聚会结束后和我们谈话。他们的平均年龄为26岁。我们主要询问医护人员歧视的情况，以及如何预防艾滋病。

来自医护人员的歧视

大多数被访者称，他们向医护人员透露自己的性取向和/或性工作者身份之后，受到了医护人员的歧视。

一个医生给我进行了艾滋病检测，然后他说我是艾滋病阳性。他说，我们是传播艾滋病毒的人，上帝会摧毁我们，就像上帝摧毁索多玛和蛾摩拉（这是两座对同性性行为持开放态度的城市）一样。”

“有一次，我告诉一名医生我是同性恋，我还是性工作者。她听的时候对我还是很友好的。但是当我做完检查，她就对我吼道：滚，不要再犯罪！如果你下次再来的时候还有性病，我就不会再给你治。我宁愿跑远一点到伊巴丹去看医生，那里的工作人员对我们还友好一点。”

“我曾经被医生羞辱。当时我去看病，我告诉医生我在肛交的时候很痛，都掉泪了。这些医生笑我。我宁愿死也不去那了。”

有几个被访者提到，在一些大城市的男同诊所，如伊巴丹和拉各斯，医生对他们的态度要好些。大部分人不愿意去医院看病，而剩下的小部分愿意去医院的人，则称他们不会透露他们的性取向和性工作者身份。

“有次我的阴茎感染了。我去医院看。医生问我怎么会得性病？我就撒谎，说因为我和女人做，但没有采取保护措施。我不能告诉他我为了赚钱去搞男人。”



“我感染了艾滋病毒，医生询问我性伴的情况。我必须说谎，我说我的女朋友可能有问题。我不能告诉她我是个男同性恋，还是一个性工作者，我从另一个男人身上感染了艾滋病毒。”

这些个案表明，男性性工作者把污名内化了。由于他们不愿意透露性取向和性活动，因此医护人员获得了错误的信息，并且会错误地认为艾滋病疫情是由异性传播所致。与此同时，男男性行为者的需求，包括男性性工作者的需求，都被忽视了。

药物的使用

尽管有少数人会去诊所看病，但很多人则选择传统疗法。因为这些治疗师对他们态度更好，不会歧视他们。一些被访者告诉我们，他们在性交前后把用大蒜和木瓜叶制成的草药涂在直肠上，以预防艾滋病。还有一些人说在性交前后服用抗生素。

大多数被访者都听说过医药公司发明的直肠杀菌剂，如果市场上这样的产品，他们愿意支付比男用安全套高7倍的价格来购买。因此，直肠杀菌剂的生产和应用，将会有效地预防男性性工作者和男男性行为者的艾滋病传播。

这些聚会是很好的艾滋病防治场所，能够覆盖到平时隐藏很深的男性性工作者人群。一些男性性工作者组织这样的聚会来帮助自己的同伴，为他们提供有针对性的艾滋病服务，我们深受鼓舞。在尼日利亚的西南部，急需这些针对男男性行为者的友好服务。除了Ade，男男社区也有其他人死于艾滋病，这表明这一人群的健康服务需求尚未得到满足。

关于作者

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