

Creating awareness on HIV Prevention, Gender Based Violence, Care and Support to Men in Kenya

Initiative of the Movement of Men against AIDS in Kenya

MMAAK

With Support from GSK/CONCERN/CAFOD/PEPFAR/GF



Presentation Outline

- What is the problem?
- How have we tackled it?
- What surprised us during implementation?
 - What we would NOT do again.
- The critical steps/tools/processes we would DEFINITELY do again.
- Some of our successes.
- The future.

The Problem

- Men in Kenya initially lacked comfortable environments for discussing sex and sexuality;
- To protect their masculinity, men had to bear HIV and AIDS in silence;
- Men have power - in the family, in society - but do not use it to address HIV and AIDS and other vices like GBV;
- Women are left alone to cope with the stigma and burden of HIV and AIDS in families.

MMAAK's Approach

- To Initiate a group of men working for each other;
- To give men space and skills to deal with issues related to root causes of HIV and AIDS;
- To involve men in HIV prevention care and support;
- To provide access to VCT, support and treatment;
- To campaign for and promote the involvement of men in HIV and AIDS activities, GBV/RH nationally, regionally and globally.

Established Programmes

- Weekly group therapy meetings for men;
- Home based care and visits by men;
- Individual counseling and referrals;
- Prevention of HIV and Parent to Child Transmission (PTC);
- Referrals for STIs and OIs;
- VCT and ART services through partners;
- Condom distribution through outlets; and,
- Information Resource Centers in 2 Cities.

A Group session with Men



Building Partnerships

MMAAK uses existing facilities where possible, in partnership with:

- Hospitals
- Churches
- Schools
- Employers
- The media
- Other NGOs and CBOs

Example: The workplace

Are great places to reach men e.g.

- Bicycle carriers (Boda Boda), Matatu operators, Handcart pushers, Fishermen, Wife Inheritors and Men living with HIV and AIDS.
- MMAAK conducts HIV workplace programmes, sets up referrals and provides space outside the workplace.
- Nearly 2000 members are enrolled.

Successes

- More and more men are accessing services at 10 MMAAK centers. To Date MMAAK serves more than 3050 Men both infected and affected.
- Most now consult their wives and discuss issues on HIV prevention, GBV, care and treatment;
- Men are now able to provide care and support to other men infected with HIV;
- Men are now in the fore front championing and advocating on issues that affect women and the Community;
- Men are able to accept and use available preventive measures.e.g Abstinence/Condom and Being Faithful to their spouses.

Fishermen and Women being sensitized along the Beaches of Lake Victoria



The critical steps/tools/processes we would DEFINITELY do again

- Adopt and use gender-specific interventions that address issues that affect men and women especially on issues of Inheritance;
- Support MLWH as role models to advocate for Men in HIV Prevention;GBV/RH
- TOT workshop on use of MMAAK's manual; and,
- Work with other partners in Prevention.

What surprised us during implementation

- The inability of men to comprehend that they could also support women in HIV Prevention and Care;
- That most men were ready to change their attitudes even when cultural practices prevailed;
- Influential men, those in authority, and opinion leaders were not interested in addressing HIV and AIDS and yet they were equally threatened by the scourge.

What MMAAK would NOT do again

- Creating a situation where the community depended so much on the organization;
- Assuming that change could be initiated within one sitting;
- Overlooking the crucial role of opinion leaders in shaping events within their communities.

MMAAK's Future

- Plan for and organize the first conference of men infected and affected by HIV and AIDS, in Kenya;
- Establishment of the Men Engage Network Kenya Chapter;
- Strengthen the movement within the Great Lakes Regions;
- Initiate more male support groups in Kenya



Thank you!