Negotiating Identity: Identity Dynamics in the Context of Male Circumcision and

HIV/AIDS among Luo Youth in Kisumu, Kenya

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    Master of Arts, Anthropology (2000)

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Areas of Research Interest

- Adolescent sexual and reproductive health (SRH)

- Sexual and reproductive health of older populations

- HIV/AIDS

- Culture and cultural influences on population and reproductive health behavior

- Gender

Research Experience

2007	**Project Coordinator:** Using Relationship Calendars to Improve Sexual Behavior Data among Kenyan Couples.

        - A research project undertaken by researchers from Brown University, USA, McGill University, Canada and the African Population and Health Research Center (APHRC), Nairobi, Kenya.
        - This objective of the project was provide researchers with proven data collection methods to analyze and understand understand how relationship histories and couple dynamics affect the sexual risk behaviors and reproductive health of young women and men in Kisumu, Kenya. The study was done in a low-income urban setting where young women and their male partners are affected by high rates of unintended pregnancy and STIs, including HIV.

2006-2007   **Principal Investigator:** Dissertation Research titled: "Exploring Male Circumcision and the Spread of HIV/AIDS among the Youth in Kisumu, Kenya"

- Research funded through Compton Foundation and Hewlett Foundation Fellowships, administered by the PSTC, Brown University.

2001-2002 **Research Trainee:** African Population and Health Research Center, Nairobi, Kenya
- My role included writing grant applications, proposal writing, field staff recruitment, training and supervision, fieldwork, data management, data analysis, report writing and dissemination at community and policy levels. Research topic areas include reproductive health (including HIV/AIDS), fertility, migration, family planning, mortality, health and sexual behavior and poverty.

1999-2001 **Research Assistant:** African Population and Health Research Center (APHRC), Nairobi, Kenya
- My role was to carry out qualitative and quantitative fieldwork, recruit , train and supervise field staff, data entry and data management, write reports and disseminate results.

1995-1997 **Ethnographer:** HIV/AIDS Home Care Project, Moi University/Johns Hopkins University
- My role was to carry out fieldwork, liase with community members and leaders, transcribe, code and enter data.

Teaching and Other Appointments

2008 to date **Teaching Consultant:** The Harriet W. Sheridan Center for Teaching and Learning, Brown University.
- My role involves providing consultations for individual teaching, departmental micro-teachings, course development, presentation, and grant-writing, to faculty, post-doc fellows and graduate teaching assistants at Brown University.

2004-2009 **Teaching Assistant:** Brown University, Providence, RI, USA
- Anthropological Approaches to World Issues (Fall 2009)
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2004-2005 **Policy Communication Fellow:** Population Reference Bureau, Washington D.C.

Publications

Forthcoming Fitting In and Spreading Out: Ambiguities and Changing Imaginations of

Sexuality among the Luo in Kisumu. In "Old wineskins, new wine: Readings in sexuality in sub-Saharan Africa" Chimaraoke Izugbara, Chi-Chi Undie and Wanjiku Khamasi Eds. Nova Science Publishers, NY, NY, USA

2005   "The Impact of Poverty on Adolescent Pregnancy and Abortion in Nairobi, Kenya" Population Reference Bureau, Washington, D.C.

2003   Emerging Family Systems in Kenya. *International Encyclopedia of Marriage and Family Relationships.* Macmillan Reference, New York, USA

2001   "Reproductive Health Needs Assessment in Eight Selected Districts of Kenya" (Report by APHRC, which I participated in writing). APHRC and Ministry of Health, Nairobi, Kenya

2000   "Intra-Household Decision-Making on Health and Resource Allocation in Borgou, Benin" (Co-authors: P. Ngom, T. Gandaho, P. Klissou, Toussaint, Adjimon, M. Seye, E. Akouanou and L. Winter). APHRC, CEFORP and PROSAF, Nairobi, Kenya

Selected Presentations

2009   "Male Circumcision and the Female Question: Do Women Benefit in the Promotion of Male Circumcision for HIV/AIDS Prevention?" Paper presented at the Annual Meeting of the Population Association of America (PAA), Detroit, Michigan. April 30-May 2, 2009

____ Also presented at the International Seminar on Gender and Empowerment in the 21st Century in Africa. *Nairobi,* Kenya, August 24-26, 2009

2009   The Role of Male Circumcision in Sexual Networks and Sexual Behavior among Youth in Kisumu, Kenya. Paper presented at the International Conference of the Society for Medical Anthropology. "Medical Anthropology at the Intersections: Celebrating 50 Years of Inter-disciplinarity" Yale University, New Haven, Connecticut, September 24-27, 2009

____ Also presented in a Poster session at the XXVI IUSSP International Population Conference, Marrakech, Morocco. September 7- October 2, 2009

____ Also presented at the PSTC Colloquia Series, Population and Studies Training Center, Brown University, Providence, Rhode Island. September 24, 2009

2006   "The Role of Social Networks in the Aging Process of the Urban Poor in Nairobi" Paper presented at the 4th Wits/Brown/Colorado/APHRC (WBCA) Colloquium on Emerging Population Issues, Nairobi, Kenya. May 21-25,2006

2005	"Whose Baby is it Anyway? Perceptions of Parental Responsibility and their Effects on Fertility among Unmarried Luo Adolescents in Nairobi" Paper presented at the 4th Wits/Brown/Colorado/APHRC (WBCA) Colloquium on Emerging Population Issues, University of Colorado at Boulder, Boulder, Colorado. April 3-5, 2005
2004	"Factors Affecting Sexual Behavior among Luo Adolescents in Nairobi" Paper presented at the Population Association of America (PAA) Annual Meeting. Boston, Massachusetts, April 1-3, 2004

Invited Lectures

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2008	"Negotiating Identity: Exploring Male Circumcision and Sexual Behavior in the Lives of Young Luo in Kisumu, Kenya," Invited lecture for the Working Group on Anthropology and Population (WGAP) Seminar Series, Population Studies and Training Center, Brown University, Providence, Rhode Island. April 11, 2008
2008	"Qualitative Maneuvers: Dealing with Sensitive Information In Fieldwork," Invited lecture for the Qualitative Methods Working Group, Population Studies and Training Center, Brown University, Providence, Rhode Island. April 11, 2008

Service

2009	**Consultant**, Institutional Review Board (IRB), Brown University, Providence, Rhode Island
2008-2009	**Anthropology Department Liaison**, Sheridan Center for Teaching and Learning, *Brown* University
2004-2006	**Graduate Representative**, Population Studies and Training Center (PSTC), Brown University, Providence, Rhode Island
2004-2005	**Co-Organizer**, Working Group in Anthropology & Population Colloquium

Academic Fellowships and Honors

2004	Population Reference Bureau Policy Communication Fellowship
2002-2004	Mellon Foundation Graduate Student Fellowship.
2003-2005	Mellon Foundation Grant for pre-dissertation research.
2005-2006	Compton Foundation Dissertation Research Fellowship in Population.
2007-2009	Hewlett Foundation Dissertation Fellowship.

Professional Membership

2003 to date	American Anthropological Association (AAA*)*
2003 to date	Population Association of America (PAA)The Union for African Population Studies (UAPS)
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2008 to date	International Union for the Scientific Study of Population (IUSSP)
2006 to date	Society for Medical Anthropology (SMA)
2007 to date	The Union for African Population Studies (UAPS)

Competencies for Post-doctoral Position

- Experience doing research in Global/International health, especially in the Sexual and Reproductive field
- Experience working in communities in sub-Saharan Africa
- Training in policy research and communication
- Use of inter-disciplinary approaches to research
- Use of inter-disciplinary approaches to research
- Strong analysis and writing skills
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INTRODUCTION

SITUATING IDENTITY

In the summer of 2003, while conducting qualitative fieldwork in an exploratory study for an upcoming Research Methods course, I met 19 year-old Caleb in Korogocho. Korogocho is an informal settlement in Nairobi, Kenya, which is one of the numerous slums that, although they occupy only five percent of the land, are estimated to be home to sixty-five percent of the city's population. Here, the living standards are very low and residents are exposed to deplorable conditions and totally inadequate toilets and sanitary services, water supply, electricity and hospital facilities. Most of the houses are temporary structures made out of mud, wooden planks, cardboard, plastic paper and rusty iron sheets. Most of the population lives below the poverty line, and the residents sustain themselves through a range of activities, mostly in the informal sector, such as petty trading, security service, construction and domestic service.

My field guide and I walked the narrow paths of Korogocho in search of Caleb. We jumped over open trenches, and ducked unknown items being thrown our way by residents disposing of their trash but oblivious to our presence. We passed through a number of similar neighborhoods before we arrived in Kisumu Ndogo, where Caleb was keeping shop for his brother. Caleb had completed high school the previous year, and while he waited for a job opportunity or a chance for higher education, he was assisting his elder brother to manage his kiosk (small convenience store). We struck up a friendship from the first day, and during the summer period that I was in the field, I visited his shop and home several times.

During the visits we spoke freely, and he expressed his opinion on a number of issues including life in the slum, adolescence, sex and sexuality, and politics. When he

spoke about adolescence and sex, he often expressed concern about the fact that he could not get a girlfriend who was not from his own Luo ethnic group, and as a result, felt frustrated and restricted. Caleb believed that the main reason for his inability to connect with women from other ethnic groups was because they all viewed him as 'a child' because he was not circumcised. The cultural logic of many of the ethnic groups in Korogocho, defined circumcision as a rite of passage to adulthood, and in that logic, uncircumcised men, whatever their own cultural background, were not viewed as adults because they had not completed the rites involved in attaining that status. Caleb was disappointed that most of the members of the other communities in the area were unwilling to respect his culture, which strongly discouraged male circumcision. He grappled with the idea of getting circumcised so as to fit in with the 'modern' multicultural setting that he lived in. But he also wondered why members of other ethnic groups were not embracing what he termed as 'modernity' by respecting or accepting his cultural values.

Only after Caleb had explored the possibility of getting circumcised did he learn that his elder brother, Jared, whose shop he was tending, had had similar struggles with the issue before he eventually decided to be circumcised as an adult. The idea that circumcision could help to reduce the risk of HIV/AIDS and could also prevent some other sexually transmitted diseases had reinforced Jared's decision to be circumcised. Jared had heard 'rumors' from various sources that circumcision had these health benefits, and was using this information to encourage Caleb to get circumcised as well. Caleb resisted. Even though he believed he would be more accepted by other ethnic groups and also get health benefits with circumcision, he was concerned about what it would mean

for his identity as a Luo. What would his Luo counterparts think about his decision? Would it demean him in the eyes of other Luo? How would circumcision affect his sexuality? Why was it that he and his Luo counterparts in Korogocho were compelled to change their cultural practices, but there was no apparent pressure on the members of the other communities to change their attitude towards the Luo? Was circumcision the only way to deal with the challenges of disease and multiculturalism? During that summer, I heard many similar narratives from both young and older people, all seeming to call attention to the complex and nuanced nature of the issue of circumcision among the Luo.

Intrigued by my conversations that summer I decided to return to Kenya for my dissertation research. Using the Luo, a Nilotic ethnic group in Kenya, as a case study, my overall objective was to gain insight into the ways in which identities are constructed and represented, with special emphasis placed on cultural practices that shape social identity. In this dissertation, I seek to unravel the different narratives emerging from the introduction of male circumcision to the Luo, and from them to understand the social forces that characterize change in the community. These changes, as demonstrated in Caleb's and Jared's stories, are driven by different motives and pressures, sometimes pushing and pulling in different directions. This push and pull, and people's 'negotiation' of competing pressures, is the focus of this dissertation.

At the core of the negotiations are discussions of the issues surrounding Luo identity. Using data I collected on everyday activities and relations of Luo youth, I describe the intricacies of balancing and prioritizing various aspects of their lives as they try to project a particular image that is expected of them by fellow Luos as well as members of other communities. These expectations vary between people and are

sometimes contradictory; some remain the same over time and some change with changes in social conditions. As a result, young Luo experience constant pushes, pulls, and pressures to construct an identity that is informed by history and yet relevant in the prevailing social environment. To understand their situation one needs to understand what drives ethnicity in contemporary Kenya, and what social circumstances cultivate the need to have a deep consciousness of ethnic identity.

For the Luo I talked to, circumcision holds different meanings and plays different roles in relation to their identity. I illustrate these different meanings, by describing their answers to the questions posed by Jared and Caleb, and faced by the youth that I encountered in Kisumu Ndogo: What does it mean to be circumcised? How does it impact Luo identity? How do different groups of people perceive circumcision in the current context? The answers to these questions are found in the context of process of ethnic construction and particularly in the ways in which individuals and groups create and recreate their personal and collective histories, the membership boundaries of the group, and the content and meaning of ethnicity. The narratives I describe in this dissertation reflect these struggles, but in my analyses I go further to show the interrelation of seemingly incompatible notions and expectations. The debate in the literature on cultural and ethnic identity revolves around the notions of essentialism and social constructionism, both of which are seen to be in conflict. In this dissertation, the messiness of the daily struggles of Luo youth presents a picture in which these two notions coexist in such a way that the boundaries between them are blurred through changes in activities and perceptions, all based on history and existing social realities

To further illustrate the complexity of identity dynamics, I describe interactions

and conversations among members of the Luo Nomiya Church (NOMIYA), an African Independent Christian Church whose membership is dominated by Luo people. To them, circumcision is not new, since their church has advocated circumcision of their male members since 1907. Before the recent wave of interest in circumcision as a potential intervention against HIV infection, NOMIYA members had their own struggles with identity, given that they were practicing circumcision when their community did not support it. Given the different circumstances does circumcision take on a new meaning for NOMIYA members? Does the widespread adoption of circumcision change how other Luo perceive them? Do they feel vindicated for having circumcised even when the practice was not popular with fellow Luo?

With particular focus on the social reality of HIV/AIDS among the Luo, I examine the negotiations involved in matters of sex and sexuality. In the picture that emerges, male circumcision is both a preventive measure and an enabler for risky sexual activity. That circumcision makes Luo youth more acceptable to their peers and sexual partners from other communities allows them to expand their social and sexual networks, thus exposing them to greater risk of HIV/AIDS. I highlight the bargaining involved in employing circumcision to achieve social acceptability, and still reduce risk for HIV/AIDS. It involves changes in activities and perceptions about sex, sexuality, sexual partners and reproduction. This dissertation closely examines these changes in perception and activities, and how they impact gender relations. Particularly, I discuss the role of women in the daily negotiations regarding sex and sexuality, and the ways in which circumcision allows them to play a role in determining its uptake, and in effect, the direction of the HIV/AIDS epidemic. Furthermore, stories in this dissertation show the

relationship between sexuality and the larger scheme of cultural identity.

As part of my concentration on changing social realities, I view the drive to provide circumcision as itself being a social force that impacts the lives of the youth involved. Particularly, I examine the processes involved in the UNIM Project in Kisumu, an intervention designed to determine if circumcision reduces risk for HIV/AIDS. The close examination of UNIM is not meant as a criticism of the project, but as an inquiry into the ways in which science and society intersect. This intersection is demonstrated in the way scientific studies like UNIM take on unintended social roles in the study community. The social roles of a research project may have positive or negative impacts; what is important is to recognize these roles and to take them into account in forging optimum strategies to produce effective programs at community level. My examination of UNIM procedures also makes the case for including ethnographic methodology in community-based scientific studies.

Background

> "A painting used to hang in the ante-room of former President Kwame Nkrumah. The painting was enormous, and the main figure was Nkrumah himself, fighting, wrestling with the last chains of colonialism. The chains are yielding, there is thunder and lightning in the air, the earth is shaking. Out of all this, three small figures are fleeing, white men, pallid. One of them is the capitalist, he carries a briefcase. Another is the priest or missionary, he carries the Bible. The third, a lesser figure, carries a book entitled *African Political Systems:* he is the anthropologist …" (Galtung, 1967:13).

Africanist anthropology is historically associated with the colonization of Africa in ways that undermine the sub-discipline's claims of neutrality and objectivity. From its very early days, British anthropology liked to present itself as a science which could be

useful in colonial administration, probably because the colonial government and other colonial interest groups were the best sources of funding and logistical support, especially during the period before the discipline acquired recognition and Anthropology departments were established by the universities (Kuper, 1973). A number of scholars have examined the connections between anthropology and colonialism in Africa. In the literature, some scholars (e.g. Asad, 1973; James; 1973) cast the anthropologist in Africa as a reluctant imperialist, capable of openly criticizing colonial authority and policy, whereas others (e.g. Faris, 1973) argue that some anthropologists, like Nadel (1952), were willing co-conspirators in imposing theoretical as well as colonial order and control. Even more fundamentally, scholars such as Leclerc (1972) locate imperial ethnocentrism at the very core of anthropological method, refined by functionalism and transformed by relativism but never transcended or erased.

Yet, many anthropologists have argued against this position, especially with regard to work done in colonial Africa. According to Kuper (1973) many anthropologists engaged in research with 'native' communities but their advice was not sought by colonial administrations. Since pre-colonial anthropologists were concerned more about scholarly work oriented towards theorizing rather than practice, many colonial administrators were little interested in the information they gathered. Besides, the relationship between the colonial administration and the anthropologists was one of competition and not as agreeable as has often been described. The fact that anthropologists "went native" - interacted very closely with natives in ways that the colonial administrators, given their social position, would not - was not well received by colonial administrators, who viewed anthropologists as an impediment to colonial rule

(Richards, 1944).

Whichever way the contribution of anthropologists in the colonial endeavor may be perceived, there is consensus that Africanist anthropology carried a lot of weight in influencing the establishment of the discipline, as well as the socio-cultural perceptions of African peoples today. At the core of Africanist anthropology's contribution to colonialism and the discipline as a whole is the concept of 'tribe'. In anthropology, the notions of 'tribe' and 'tribalism' are understood as a form of human social organization based on a set of smaller groups (such as lineages and clans), having temporary or permanent political integration, and defined by traditions of common descent, language, culture and ideology. These concepts are best captured in the literature emanating from the Rhodes-Livingstone Institute, in which tribalism was understood as the attribute of tribes and of tribesmen who demonstrate loyalty and adherence to tribal ways of doing things. As enunciated by its second director (Gluckman 1955:1), the Institute "aim[ed] to analyze the organization of modem Central Africa and to show how selected urban and tribal communities live within it."

By the mid-19th century, as the notion of tribe was applied in describing the cultures encountered through European exploration and imperialism, many anthropologists and other scholars were using the term, as well as 'band', 'chiefdom', 'kingdom' and 'state', to denote particular stages in unilineal cultural evolution. In these descriptions, 'tribalism', which is based on kinship relations, was assumed to fade away with the progression of society from 'primitive' to complex and familial relations to give way to class relationships and superior kinship organization (Fox, 1971; Fried, 1967). It became clear, however, that the unidirectional progression of the tribe would not

materialize. As an anthropological term, the word '*tribe'* fell out of favor in the latter part of the 20th century. Some Anthropologists rejected the term itself, on the grounds that it could not be precisely defined. Others, such as African British-trained anthropologists (e.g. Kenyatta, 1938; Busia, 1950; Matthews, 1983) objected to the negative, pejorative as well as inaccurate connotations that the word acquired in the colonial context. The concepts of 'tribe' and 'tribalism' transitioned to 'detribalization', which focused on the degree to which people living in the rapidly growing urban centers were departing from their tribal way of life (Gluckman, 1940; 1943 Wilson 1941; Kuper, 1960). Eventually, 'tribe' was replaced with 'ethnic group' or 'ethnicity',[1] which is, in the simplest form, defined as a group of people with a common ancestry and language, a shared cultural and historical tradition, and an identifiable territory. *Ethnic group* is presumed to be a particularly appropriate term within the discussion of modernizing countries, where one's identity and rules of inheritance are based on more than extended kinship and place of origin.

Although 'tribe' and 'tribalism' are no longer used in discussions in Anthropology (except in the case of Native Americans), it is important to point out that in public discourse, as well as in scholarly circles on the African continent, tribalism is referenced, with different meanings, depending on the context. In its current use among Africans, tribalism refers to those behavior traits of groups of people in a multi-ethnic environment that generally threaten and endanger coexistence among persons from different ethnic groups. This usage has been applied since the post-colonial period (originally by the

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1 Other terms that are used as alternatives in this dissertation include 'ethnic group', 'ethnic identity', 'community affiliation', and 'tribe'. The use of 'community' here is in the same context as it is used in Kenya, to mean 'ethnic group' and does not necessarily imply residential, neighborhood, town, or city affiliation as commonly understood in other contexts.

nationalist movements in the various countries), to discourage the tendency to abuse

common opportunities and public goods (that is, those owned in common by various

ethnic groups and the nation) through preferential treatment for persons of one's own

ethnic grouping. Tribalism has also been used as a term of abuse, to object to activities of

individuals with divisive intentions that threaten the national agenda and favor a

specialized ethnic fragment of the nation. In this meaning, tribalism and tribalists are seen

as evil forces in Africa, against which institutional (governments, trade unions, student

organizations, and media organizations) as well as individual efforts should be made to

overcome. Ironically, this view of tribalism does not necessarily reject traditional ways of

doing things. As observed by Ekeh (1990), it seems like all the proponents of this idea

respect tradition, but they are opposed to the abuse of inter-ethnic public goods by those

in power.

Foundations of Ethnic Identity

For several decades, anthropology has participated in the general deconstruction

of "identity" as a stable object of scholarly inquiry. As I have briefly argued, the concepts

of 'ethnic identity' and 'ethnicity' evolved from the inadequacies of 'tribe' and tribalism'.

One of the problems of 'tribe' was the seeming inability to define it. Ethnic identity, on

the other hand, was presented as a clear-cut concept, where members of a social category

create a self-image by constructing a social category on the basis of identification and of

stereotyping both among themselves and among outsiders. However, numerous

sociological theorists have presented conflicting perspectives on its formation. The

primordial and the constructionist are two predominant theories that exist at the forefront

of the debate on ethnic identity formation (Barth, 1969; Bell, 1975; Ericksen, 1993) theories. The primordial approach to this phenomenon, as advanced by Van den Berghe (1987) originates in the fundamental works of Max Weber (1978) where he suggested the importance of blood ties for the members of ethnic groups.

Primordialism is the approach that sees ethnicity as premised on natural and emotional connections of ethnic members. The natural connection is seen by members to be a source of loyalty and a frame within which they identify. Primordial perspectives assume certain 'givens', which are seen to be essential and, therefore not subject to change. In this approach, essentialist 'givens' in ethnic identity are based upon blood relations, kinship and common ancestry, and some proponents of this theory have argued that ethnic identity is a function of strong emotional ties based upon common descent and the history of a group (da Silva, 1975; Shils, 1957; Scott, 1990).

Primordialism can be understood in two senses: the objective and the subjective. In the objective sense, primordial identity holds that human beings are connected to each other and their communities of origin by virtue of their blood ties. In this sense, blood relationship is believed to somehow bring out reciprocal feelings of trust and acceptance among group members. This type of attachments are typified in the experience of parents and their children, siblings, and other close blood relatives, and implies an unquestioned loyalty and devotion because of the intimacy of their blood ties. Therefore, in this sense, primordial identity is natural, automatic and expected. Further, this approach holds that ethnic groups are extensions of kinship units, based on kinship or clan ties in which cultural signs (language, religion, traditions) are selected precisely to mark this biological affinity. In this way the myths of common biological ancestry that are cited as a defining

feature of ethnic groups are to be understood as representing actual biological history. Critics of kinship primordialism (e.g. Smith, 1999) point to the apparent disconnect, and sometimes contradiction, between the mythical origins of given ethnic groups and the documented biological history of the groups.

Some scholars (e.g. Isaacs, 1975; Connor, 1994, Smith, 1986; 1991) have gone further to connect the naturalness of this kind of primordial attachment to the primal and essential human need to belong. This approach is referred to as essentialism, which holds that ethnicity is an *a priori* fact of human existence and that ethnicity precedes any human social interaction and is basically unchanged by it. This theory sees ethnic groups as natural, not just as historical. One of the main critiques of essentialist primordialism is that it fails to explain how and why nations and ethnic groups seemingly appear, disappear and often reappear through history. In addition, it fails to address the reality and consequences of migration, intermarriage, colonization and modern day multi-ethnic societies (Smith, 1999).

On the other hand, the subjective view of primordial identity stresses the perceived connectedness of members of a group. The application of this concept of primordialism beyond kinship was demonstrated by Geertz (1967; 1973), who showed that primordial attachments could also be observed in larger groups believed to share territorial space, religion, language and customs. He argues that humans in general attribute an overwhelming power to primordial human "givens" such as blood ties, language, territory, and cultural differences. In Geertz' opinion, ethnicity is not in itself primordial but humans naturally perceive it as such because it is embedded in their experience of the world. In this sense, the shared aspects are 'givens', and do not require

any kind of rationalization with regard to how they provide a basis for attachment with others sharing a background.

In contrast to the primordial perspective on ethnic identity, the instrumentalist or constructionist approach advocates that ethnicity is situational and processual. The interaction between groups produces cultural differences which become important in the creation of social boundaries. This approach to ethnic identity is usually associated with Norwegian anthropologist Fredrick Barth (1969), who stressed the importance of the dichotomy "us – them" in defining ethnic boundaries. Language, religion, rituals, myths and rituals are commonly referred as markers that identify ethnic boundaries. However, these markers are subject to change and thus, can be regarded as situational and circumstantial.

The notion that individuals craft their identity through social performances, and hence that their identity is not a fixed essence, fundamentally drives current research into gender and sexuality. The notion that collective identity emerges out of political struggle and compromise underlies contemporary studies of race, ethnicity and nationalism. The anti-essentialist mood of today's anthropology fits with wider currents in philosophy (e.g., critiques of the autonomous, self-sustaining subject within Western metaphysics as well as feminism and cultural studies (e.g., examination of the unconscious aspects of identity formation and the political resistance enabled by multiple and hybrid identities) (see Hall and Du Gay 1996, McRobbie 1994).

While it appears that the transition has been made from the notion of 'tribe' to 'ethnic group' or 'ethnic identity', it is clear that ethnicity has not escaped the initial problems of a lack of definition. My research among the Luo contributes to the

problematization of this issue, highlighting the different ways in which the same people perceive themselves, and the circumstances in which these definitions change. More importantly, this dissertation analyses the processes that people follow in their constant negotiation with themselves, their kin, their peers and other ethnic groups to determine the most suitable, relevant and beneficial group with which to identify and be identified.

Othering and Boundary Markers in Kenya

Implicit in the study of ethnicity or any social identity is the sense of defining an "other," as well as the ways in which the ethnic boundaries of a given identity are negotiated. It has become commonplace to argue that ethnic components such as a common language, religious and social traditions, a shared historical memory, and place of origin may all be important foundations of ethnic solidarity. Embedded in arguments over these components are ideas about the ways groups negotiate the physical and ethnic boundaries of this identity (Ericksen, 2002).

Most anthropologists now agree that contemporary African ethnicities are socially constructed phenomena that were drastically shaped by the colonial encounter. Earlier work has highlighted how foreign impositions radically altered African identities from the top down, by imposing foreign borders, altering local authority, and codifying and reworking cultural traditions. More specifically, colonization led to the permanent formation of ethnic identity through its failure to provide native populations with basic services such as education and other social services that are presumed to be the responsibility of the state. In much of the continent, apart from the enforcement of law and order, the colonial government had minimal involvement with local communities,

thus leaving the responsibilities of social welfare of individuals to be absorbed by their

kinship systems (Ekeh, 1990). The services for which people depended on their kinship

systems included provision of health, education, safety, and provision of burial rituals and

care for one's family after death. Dependence on kin for these services was as salient in

the towns as it was in the rural areas, though it took a different form in the towns where

the services were dispensed by clan-based or ethnic-based town associations of migrant

workers with common rural origins.

       Colonialism also contributed to the distinction of ethnic groups by organizing

administrative boundaries along what administrators assumed were already existing

ethnic or kinship lines. By appointing 'chiefs' and giving power to a few individuals, the

colonial governments made governing easy and created kinship entities for the natives

(Afigbo 1972; Suret-Canale, 1964). The translation of the Bible and other texts into local

languages helped to give permanence and legality to the existing boundaries between

neighboring ethno-linguistic groups (Abernethy, 1969).

       Half a century after the end of colonial government, ethnicity is still thriving in

Kenya. To whatever extent colonization played a role in establishing ethnic groups, there

is little evidence that it continues to influence ethnic dynamics in the country. Local

communities continue to find ways to distinguish themselves from others, without

creating an atmosphere which endangers co-existence in multicultural settings. That is

not to suggest that there is always cohesion between ethnic groups, as there have been

sporadic eruptions of violence in the country in the past, and most recently, in 2008 after

a disputed presidential election. But ideally, the ethnic distinctions many have sought to

make have the objective of recognizing difference and embracing diversity. So I return to

the questions posed at the beginning of this introduction - what is driving ethnicity in contemporary Kenya? What are the social circumstances that cultivate the need for people to have a deep consciousness for cultural identity. My objective in this dissertation is to examine the process through which communities negotiate their ethnic identities at both the individual and the community level.

The process by which ethnic identity is made to take precedence over other identities available to individuals has been documented for numerous ethnic groups in Africa. Circumcision plays a very important role in a majority of ethnic groups in Africa, serving as a boundary marker – setting the group apart from others – and as a gender identity marker (Heald, 1995; Murdock, 1959). In those contemporary African societies where male circumcision occurs, the operation is a mandatory one. Mazis (1993), writing on the social construct of masculinity, looks at male experience with pain as the embodiment of masculine identity. Foregoing this rite and the associated pain denies an individual the right to adult status. Among the Luo, the equivalent initiation rite involved the extraction of lower incisors for both adolescent girls and boys. This practice has declined over the years and now there are only a small proportion of Luo rural populations that still practice it (Ochola-Ayayo, 1976), thus creating a void in their rites of passage and ethnic identity. Studies show that 10 percent of Luo urban residents are now circumcised (Buve, 2000). It is especially intriguing that the Luo are adopting the one physical marker (or lack thereof) that separated them from other ethnic groups. This dissertation follows up on questions about the blurring of existing boundary lines through the adoption of circumcision, and how this affects group members' perceptions of their own identity, as well as their position in multicultural settings. Also, how do other

communities that have always had circumcision in their cultural repertoire perceive the young Luo's circumcised status?

Beyond the act of circumcision, there are other social changes that young Luo are undergoing. One of the social realities confronting Luo youth in this study is their urban context. A widespread academic opinion stresses increasing irrelevance, in the urban situation, of historic, rural and culturally derived forms of social organization - kinship, marriage, 'traditional' politics and ritual (Mitchell, 1956; Epstein, 1958; Gluckman, 1971). Initial researches by Mitchell and Epstein viewed urban ethnicity principally as an exclusively structural feature, not as a vehicle for cultural continuity between rural areas and towns. They stressed how at the city boundaries, elements of rural society and culture may be selectively admitted onto the urban scene, yet undergo such a dramatic transformation of form, organization and function that their urban manifestations must be understood by reference to the urban situation alone. Whereas Mitchell's later work (1969) developed the theory of urban ethnic categorization, Epstein (1978) abandoned his earlier position and elaborated the ways that the private urban domain of the household, kinship, and sexuality, was informed by cultural orientations from the migrants' distant rural homes.

For both sides of this debate it is clear that what is reproduced in urban settings is not a set of practices that distinctly belong to a particular ethnic group, but an amalgamation of practices that reflect the diversity of groups of the wider region. The rural-derived practices acquire historic cultural meaning in such a way as to complement contemporary phenomena such as the capitalist economy, globalization, urbanization, technology and religions, among others. People from the same ethnic groups may

experience these new phenomena in different ways, and, therefore adapt differently in the same urban scene. Those who are exposed to a wider variety and deeper intensity of these phenomena are likely to undergo more transformation than those with less exposure. In the dissertation, I explore the different ways in which young men and women adapt to their social situations, as well as how these social situations influence their adoption strategies. The main focus is to understand the type of young men who willingly choose to get circumcised, and the social circumstances that lead them to choose to participate in this new cultural practice.

Differences in the experience of the same phenomenon among members of the same group are exemplified in the experiences of Luo Nomiya Church (NOMIYA) members during colonialism. At the beginning of the 20th century, many parts of Kenya, as was the case for most of Africa, were grappling with ideas about resisting colonialism. It is in the process of coping with colonialism that some members of the Luo ethnic group are believed to have formed African Christian Churches, which addressed members' concerns about practicing Christianity, while maintaining their Luo traditional practices. NOMIYA was one of the earliest African/Indigenous Christian Churches.

The Luo Nomiya Church (NOMIYA) and Circumcision

The Luo Nomiya Church (NOMIYA) has its roots in the colonial era, with its foundation credited to one Yohana prophet Yohana Owalo. Owalo was a migrant laborer in Kisumu before proceeding to Mombasa to work for a court judge, Alexander Morrison. While in Mombasa, he had several visions and revelations that convinced him of God's call upon his life. The most spectacular one that completely transformed him came in

March, 1907 when he was taken to the 'first', 'second' and 'third' heaven by the Spirit. According to the NOMIYA reference book, Owalo saw various revelations in these heavens. He noted that the first heaven was a remarkable place where all races of the world were attracted but the angels Raphael and Gabriel secured the gates and only allowed in the Arabs, the Jews and the Luo because only they had prophetic representatives. However, attempts by the Europeans (including the Pope), the Goans and the Indian Bunyans were thwarted because they failed to meet the conditions. The second heaven housed numerous angels. In the third heaven he met the Godhead. God the father instructed Owalo to acknowledge that He was the only true God and beside Him there was no other. Since humanity had deviated into worshiping other gods, Owalo was to purify them in order to be acceptable in God's eyes. As shown in the NOMIYA Prayer book, God instructed him to "Go! Take a well-sharpened knife to circumcise all men. He who has an ear let him hear and adhere but leave the disobedient alone" (NOMIYA Prayer Book 1973; 118). Circumcision was meant as a sign of purification and eventual acceptability of human beings in God's eyes. In addition, it would be a sign of distinction between his followers and other Luo.

Owalo got circumcised just before joining the Church Mission Society School in Nairobi in 1908 to further his education. He attended several theological schools set up by Missionaries, but he was forced out of them when it was discovered that, for the most part, his beliefs were contrary to the tenets of Christianity as understood by the Missionaries. He started his own Mission, which he later (1914) named Nomiya Luo Mission. This was the first African Independent Church in Kenya; shortly after its founding several other African Christian churches emerged across the country.

The thesis that churches such as NOMIYA merely arose as a reaction formation to colonial oppression does not provide a complete picture of the happenings at the time. (Ndeda, Unknown Date). Certainly the link between colonial oppression and initial religious reactions is clear and has been studied by scholars (e.g. Lantenari 1963) but it is important to emphasize the types of problems that religious and secular authorities within a given group already handled and their susceptibility to and contacts with external groups. Much literature on Yohana Owalo shows political causes as basic to the emergence of NOMIYA. Lonsdale and Wipper suggest that Owalo utilized his movement as a vehicle for inter-clan rivalry, since he belonged to the clan traditionally opposed to the chiefly clan (Lonsdale 1963; 208; Wipper 1975: 157). Oginga Odinga says that the movement was a political protest and when Owalo was questioned by the District Commissioner in a public *baraza*, he said, "Leave me to preach. I am preaching to Africans not whites" (Odinga 1968: 68-69). B.A. Ogot describes Owalo as the first Christian rebel in Nyanza, who, on discovering the hypocrisy of "Westernism" decided to be a Christian but on his own terms (Ogot, 1973; 262). Whatever the case, the movement attracted a large number of both men and women and by the time of Owalo's sudden death in 1920, it had spread beyond Luoland and into white settler areas.

The popularity of the church was based on the fact that it was attuned to the traditional fears, needs and aspirations of the Luo people. Several cultural practices of the Luo disgusted the Europeans, especially Missionaries, and their attitude to the indigenous culture and religion was generally negative. They campaigned against certain religious practices, customs and institutions, for example polygamy and levirate marriage. To the missionaries the Luo practices of levirate marriage and polygyny were offensive to

Christian morals, so the baptism of polygamous men and their wives, and of children of such marriages, was not allowed. The issue of polygamy was delicate because it was an integral part of the local culture and people were bewildered with the idea that there would be anything wrong with it. Owalo's movement contributed significantly to countering this colonial negativity towards the Luo. That NOMIYA allowed such practices was attractive to many, but particularly to women in polygynous unions who feared rejection and disgrace as a result of being sent away by husbands who converted to Christianity and were allowed to keep only one wife. Even though members view circumcision as a practice in line with biblical teachings, some analysts view their adoption of circumcision as a strategy to undermine colonial ideologies that particularly despised male circumcision as a 'backward' practice (Ogot, 1973; Odinga, 1968)

While the idea of keeping their traditional practices attracted many adherents, the idea that they would be required to circumcise repelled a significant number of interested people. They opted for other African churches that had emerged in the area and the adherents of NOMIYA remained few but very dedicated. With time, they became isolated within the Luo community for their 'strange' belief in circumcision, and many members came to feel inferior. With the increase in interest in circumcision, this dissertation seeks to establish if there are changes to their position in the community. Do Luo people's perceptions about church members change? How do NOMIYA members perceive themselves in the larger Luo picture now? How is the church utilizing an already existing circumcision culture to bolster its image and inform its members of the other benefits of the practice?

Circumcision and HIV/AIDS

I have mentioned that circumcision has been found to reduce the risk of HIV transmission through sexual intercourse.. Before this fact was confirmed, male circumcision had been considered a high risk practice in the spread of HIV/AIDS, especially in the traditional context where a number of initiates undergo the ritual at the same time, sharing the same implements. In 1989, Priscilla Reining, an American anthropologist, drew up a map of the African cities suffering the highest HIV infection rates and superimposed upon it a map of those places where the predominant cultural practices were to circumcise or not to circumcise. The correlation was striking: HIV was spreading fastest in places where circumcision was not routinely performed (Reining, 1989). Similar observations were made by Caldwell and Caldwell (1996) when they noted that areas with large numbers of uncircumcised men were almost exactly the same as the regions with severe AIDS epidemic. In a 1998 review, Moses et al. found 26 studies that cited a correlation between levels of male circumcision and HIV infection. In cases where the association was not strongly linked, there were significant relative risks of seroconversion [2] for uncircumcised men. According to some studies, seroconversion for uncircumcised men ranges from 2.3 to 8.2, while that of circumcised men is approximately 0.5 (Halperin and Bailey, 1999). More recently, there has been a steady growth of evidence that male circumcision protects against HIV infection, as acknowledged in editorial commentaries and reviews in the major journals (e.g. Jha et.al, 2001; Cohen 2005a; 2005b; Chan, 2006; Check, 2007; Fauci, 2007; Flynn et. al., 2007;

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2   Seroconversion is defined as the development of detectable antibodies in the blood directed against an
    infectious agent. It normally takes some time for antibodies to develop after the initial exposure to the
    agent. Following seroconversion, a person tests positive in tests based on the presence of antibodies

Quinn, 2007; Weiss, 2007)

Although they did not provide evidence for a causal relationship, most of the studies cited above provided strong evidence that male circumcision was significantly associated with lower risk of HIV infection. The lack of evidence of a casual relationship between circumcision and lower risk for HIV/AIDS necessitated large clinical trials to confirm such an association. In the past few years, randomized controlled trials (RCTs) have been conducted in Kenya (Bailey et al., 2007), South Africa (Puren et al., 2002), and Uganda (Gray et al., 2002). Due to overwhelming evidence that male circumcision had a protective effect against HIV infection, all the studies were discontinued before their proposed end date (Roehr, 2007; Wakabi, 2007).

In Kenya, there are marked differences in HIV prevalence rates by province, with Nyanza province, the home of the Luo, exhibiting the highest rate (22 percent), compared with 15 percent for five of the seven provinces, and much less for the remaining two provinces (GoK - MDGR , 2003). An earlier study of the HIV/AIDS situation in Nyanza province estimated that Kisumu, the largest city in the region, has one of the highest infection rates (34.9 percent) in the country (Hagembe, 1998). It is also believed that at least 10 percent of the city's general population and about 25 percent of the sexually active men and women are infected with HIV. More than 20 percent of the patients at New Nyanza General Hospital (the largest in the region) are HIV seropositive (Richardson, 1996). The most recent Kenya Demographic and Health Survey (KDHS, 2003) results show a similar pattern - that while the overall prevalence rate for the country is 7 percent, Nyanza, has an overall prevalence of 15 percent. All other provinces

have levels between 4 percent and 6 percent. Looking at HIV prevalence levels by

circumcision status, in Nyanza Province, men who are uncircumcised are ten times more

likely to be HIV positive than men who are circumcised (KDHS, 2003).

In view of these indications, the Luo in Kisumu have been the focus of one of the

above-mentioned clinical trials, a collaboration between researchers from the University

of Nairobi, University of Manitoba and University of Illinois at Chicago, (commonly

known as the UNIM Project) - a randomized study investigating whether male

circumcision reduces the chances of HIV infection among adult males in Kisumu district.

At the time of my study, an unprecedented total of 2776 men aged 18-24 had enrolled as

participants in the UNIM Project. I selected the core participants (CPs) in my study from

participants in the UNIM Project.

By the end of 2007, the UNIM Project had provided scientific evidence that there

was 54 percent risk reduction in HIV/AIDS infection after study participants were

circumcised. Given the evidence of a strong link between male circumcision and lower

risk for HIV infection, the World Health Organization (WHO) and UNAIDS, among

other international health agencies, are now backing prevention strategies that promote

and provide circumcision for men in Kenya and other African countries that have non-

circumcising communities. The March, 28, 2007 WHO/UNIADS endorsement stated that

"the efficacy of male circumcision in reducing female to male HIV transmission has now

been proven beyond reasonable doubt. This is an important landmark in the history of

HIV prevention". It went on to recommend circumcision for men and boys. Infant

circumcision was also advocated because it is "less complicated and risky". It represents

a surgical 'vaccine' in the face of the dismal failure of two decades of research to develop

a conventional vaccine.

UNIM and the other studies are clinical trials whose focus has been to show the effect of circumcision on reducing risk for HIV/AIDS with emphasis on the role of the foreskin. The foreskin easily tears during intercourse leaving mini-abrasions and ulcerations through which the virus enters, leading to faster and easier infections over fewer sexual exposures. Mini-abrasions of the foreskin during intercourse are also the explanation for the fact that uncircumcised men are more likely to acquire certain other sexually transmitted diseases (STDs). This in turn creates a higher risk for HIV infection because of existing evidence that the presence of STDs promotes HIV infection.

In addition to the risk of the virus entering through foreskin tears, another likely role of the foreskin has been found in its cell composition. The foreskin is rich in specialized white blood cells (Langerhans) that act as a sentry for the human immune system. They trap viruses and, normally, alert the body's defense system, thereby helping to kill the invading infectious organisms. In the case of HIV, however, the trapped virus is not destroyed but binds onto specific receptors of Langerhans cells and is introduced into the body.

These clinical trials do not address the social circumstances that influence certain behaviors that are key to HIV/AIDS risk reduction. Given the significance of not practicing male circumcision for the Luo, I try to understand the factors that led to such high interest in the study on the part of young Luo men, and also in the practice of male circumcision among the general Luo population. Why has circumcision become a phenomenon of interest among young Luo men? In what ways is circumcision impacting young Luo men's interactions and relationships with members of other communities?

What is the impact on their relations with fellow Luo? How is the adoption of circumcision impacting young Luo's attitudes towards their own sexuality at the individual, as well as community level? Understanding these issues is key to understanding the role of social circumstances in health crises, and developing effective strategies in prevention efforts. I argue that any effective way to understand disease must also understand the social realities that exacerbate or reduce disease; there is need for analytical approaches that draw not only from clinical or biological sciences but also from social science theory. The linkages between biological events and social realities are key to successful translation of research into practice.

I also demonstrate that ethnographic data can be useful in translating basic research from the controlled, artificial and ideal conditions of the clinical trial to the unpredictable and uncontrolled settings of the community. The study demonstrates that while it is important to have internal validity in clinical trials, it is equally important to have external validity to translate scientific research findings to population-based practice. Ethnographic data about behavior outside the RCT and the nuances of men's motivations and reactions to circumcision can be useful in bridging research and practice. The questions I address include: How can research results translated into language that is accessible to target populations and sub-populations? What is the role of clinical trials in the communication process, and what is their influence on the uptake of interventions? With regard to intervention strategy, in which ways are results from clinical trials translated into interventions on a larger scale, beyond the secluded context within which trials occur? Is the study sample representative of the population? Not just in the sense of being random, but in the sense that conclusions about it can be generalized.

Trajectory

My interest in doing this study among the Luo in Kisumu developed from initial ideas gained during my years as an ethnographer in Vihiga district in western Kenya. In that capacity, I interacted with many members of the Luhyia community, and especially people who had HIV/AIDS and were unable to discuss it with their friends and relatives due to the stigma attached to the disease. It was clear to me that there was a lack of communication between parents and their children, which concerned me because many of the young people I spoke with resolved to get information about sex and sexuality from other sources, regardless of the sources' unreliability. They also sought treatment for sexually transmitted diseases from backstreet health practitioners because they were embarrassed and feared to be judged negatively by their friends and relatives. Working with these young people got me interested in research on sexuality and reproductive health. When I completed my Masters degree at the University of Nairobi, I worked as a research trainee at the African Population and Health Research Center (APHRC), Nairobi, from 1999 - 2002, where I gained experience conducting population and health-related research using both qualitative and quantitative techniques. The topics of my research included reproductive health (including HIV/AIDS), fertility, migration, family planning, mortality, health and sexual behavior, and poverty. This experience took me to research sites all over sub-Saharan Africa, but most of the work was in Kenya and I became familiar with my current research site and its population.

In the summer of 2003, I carried out exploratory research in Nairobi on sexuality and sexual behavior among Luo adolescents, aimed at collecting information for writing a well informed dissertation proposal, as well as gaining practical fieldwork and analysis

experience in advanced anthropological methodology. The study was in two locations,

Korogocho and Viwandani, both poor neighborhoods in the informal settlements of the

city, and also part of the Demographic Surveillance Areas (DSAs)[3] within the

demographic surveillance system (DSS) of APHRC. Part of the reason why I was in the

Nairobi slums was to follow up on previous research that I participated in as a member of

the research team at the APHRC. In that study, the team at APHRC carried out qualitative

fieldwork to understand the needs and coping strategies of slum residents in four informal

settlements in Nairobi. The results from the study were varied – identifying individual

needs for food, water, shelter, education, and employment, as well as community needs

for hospitals, schools and sanitation. Just as broadly coping strategies ranged from

individual efforts such as seeking for employment, begging on the streets and brewing

and selling illegal alcohol, to community, government and non-governmental

interventions such as building and equipping of schools and hospitals, constructing roads,

and occasionally starting drives to clean up the environment.

Nested within these overarching themes, were more specific needs that young

people faced, and specific strategies that they employed to cope with their social reality

of poverty and disease. Among the most mentioned health challenges for the youth was

HIV/AIDS. In the focus group discussions (FGDs), participants across the board were

concerned about the high number of young people who were getting infected with and

dying of, HIV/AIDS, and the growing number of HIV/AIDS orphans. In some of the

published papers from this study, Zulu, Ezeh and Dodoo (2002; 2003) show how, while

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3   A demographic surveillance area is a designated statistical location within the larger area that a
    Demographic Surveillance System (DSS) covers. The DSA is created as a physical unit to enable easier
    facilitation of fieldwork and analysis, and may be based on a range of things, including existing
    administrative boundaries and population.

young men were encouraged by family members to 'beg' and 'scavenge', young women were encouraged to initiate early sexual activity in order to provide sexual favors in exchange for money to supplement family income, and for food. In these situations, young women engaging in unprotected sex potentially earned more than those who used condoms. As such, adolescents were encouraged to engage in unprotected sex, which increased risk for HIV/AIDS.

Most of the FGD participants were of the view that the government and community-based organizations needed to intervene and create job opportunities for the youth in order to decrease transactional sex and exposure to HIV/AIDS through unprotected sex. It was not very common to find FGD participants who suggested coping strategies that involved the youth at the individual level. When I went back to the field in 2003, I found that young people were beginning to take responsibility with regard to sexual and reproductive health issues. I got interested in understanding their decision-making process, and the role that their social networks played in the process. There were interesting questions arising from the urban and multicultural context that Viwandani and Korogocho represented, especially for young people, who were grappling with balancing their traditional cultural values with their lived experience in a diverse community with increasingly different social circumstances. These circumstances seemed to challenge cultural norms because they made it necessary for the youth to make decisions that were significantly different from those norms. The intricate process of balancing traditional values and contemporary challenges was a fascinating aspect of life in the two informal settlements.

In Korogocho, the DSA where the APHRC study was taking place included a sub-

location known as Kisumu Ndogo, which when translated means 'little Kisumu' or 'small

Kisumu'. I preferred to do exploratory work in this area because I already had contacts

there, which would be advantageous because I had only four weeks for fieldwork that

summer. As the name suggests, Kisumu Ndogo was like a microcosm of the western

Kenya city of Kisumu, which, although is a multicultural urban area, it is predominantly

occupied by people from the Luo community. Most of the young people here were

immigrants from Nyanza province, seeking employment and education. For many,

Kisumu Ndogo felt like the 'natural' place to migrate to since because they knew or were

invited by a relative or an individual from the vicinity of their rural homes in Nyanza.

Also, Kisumu Ndogo was cheap and affordable for many, most of whom were either

unemployed or attending school.

It was in Kisumu Ndogo that I met Caleb and Jared, the young men I described

earlier. Their case was just one of eighteen that I encountered that summer, all   of which

suggested that Luo youth in this area were experiencing something new and different

from the other youth in the neighborhood. The attraction of living among people with

similar cultural backgrounds, yet in a multicultural setting; combined with poverty and

the necessity of living in a cheap and affordable place, all presented the youth with

numerous and diverse challenges and expectations in their everyday lives. In the words

of two of the youth, Obuya and Dickson, 18 and 19 years respectively, who talked to me

together:

> **Obuya:** Life is hard here. It is tough for all of us young people here. We are
> looking for jobs but there are none available, and many of us have no money to
> pay the fees to go back to school. It is about survival for us here... It is even
> difficult to have a social life. The poverty here does not allow you to have a
> girlfriend. You have to have money to be able to treat your girlfriend once in a
> while. That is not happening here.

Dickson: Actually, it is not just about having no money, it is also about who we are. You know here in Kisumu Ndogo, there are very many Luos, and we sort of know each other, either from the village or through relatives. So now, we have to go outside Kisumu Ndogo to find girls who may not be related to us to have a relationship with them. And out there, many girls are reluctant about being in a relationship with a Luo boy. They think we are all uncircumcised and therefore, not their type. It is hard to convince them in other ways, like show them good life [a good time], because we do not have money. So it is really complicated.

Obuya: That is true. Some think that because we are not circumcised, we have AIDS. But even with those problems, we still manage. We are survivors (laughter). (Obuya, 19yrs and Dickson, 18yrs, Kisumu Ndogo, Korogocho, Nairobi).

The next summer, I went back to follow up on the issues about identity and sexuality that had been highlighted by Obuya, Dickson, Jared, Caleb and other participants in Korogocho. This time, I chose to go to the city of Kisumu, where I would be able to study the issues on a larger scale than Kisumu Ndogo. Kisumu was the ideal place to do this pre-dissertation study because at the time, the UNIM Project was beginning to recruit participants for their study and they were advertising through different media about their study, and encouraging young people to participate. Through these advertisements, the idea of circumcision for the Luo was beginning to enter public discourse in Kisumu, and with it, various debates about its implications on the Luo culture and the direction of the HIV/AIDS epidemic. This is the social context within which I begun fieldwork for this dissertation in early 2006.

Research Site: Kisumu District

The physical context of Nyanza province in general and Kisumu district in particular, is well documented in various publications, from government documents to

journal articles and media sources. However, there is the challenge of keeping up with the constantly changing physical boundaries and migration patterns in the area. Owing to the continued need to decentralize administrative services in order to reach the larger population, the physical boundaries, which are based on administrative units, have changed significantly over the last twenty years. The districts, constituencies, divisions, locations, sub-locations and villages have changed so significantly that many people get confused about the status of their current administrative unit. While most of the sub-divisions are driven by the need to provide better services to the people, it is also known that these changes are politically driven, in which case, politicians actively lobby the government to draw new boundaries that would eventually benefit their political ambitions. As such, it is important to put the current state of the area in context in order to understand the activities operating within it.

Nyanza Province, situated in the south-western region of Kenya on the shores of Lake Victoria, is one of the eight government administrative units. A large part of the province is around the eastern   edge of Lake Victoria, whose boarders are shared with Uganda and Tanzania. The province derives its name from the Sukuma, a Bantu-speaking group living on the Tanzanian shores of Lake Victoria, to whom the word 'Nyanza' means a large mass of water. Nyanza is bordered by Western province in the north-west and Rift Valley province in the east.

According to the national census (1999), the province has a population of 4,392,196, within an area of 16,162km². Nyanza is the traditional home of the Luo, who are also the predominant ethnic group inhabiting the area. There are also Bantu-speaking groups such as the Kisii, Luhya and Kuria living in the province. Nyanza Province is

divided into twelve districts – Bondo, Gucha, Homa Bay, Kisii, Kisumu, Kuria, Migori, Nyamira, Nyando, Rachuonyo, Siaya and Suba. The capital of Nyanza Province is Kisumu.

[Map 1 HERE: Nyanza Province, Kenya]

History and Physical Aspects of Kisumu

Kisumu city derives its origins from an area that was known as a center where local communities gathered to exchange/ barter their surplus produce long before the colonialists arrived. "*Kusuma*" is a local term used to refer to barter trade. Kisumu grew into a modern trading station beginning in 1901 when Europeans and Asians were allocated land in order for them to settle and oversee the construction of the Kenya-Uganda railway. A number of commercial and domestic buildings were constructed after the construction of the railway began. These included the railway headquarters, prison and bazaars. The town retained its old name after an attempt to retain its new name given by the settlers failed.

Kisumu is now the third largest city in the country and serves as the district, as well as provincial administrative headquarters for Nyanza, and is the largest urban center in the western region of Kenya. It has developed from a railway station to a regional hub for economic, industrial, commercial, communication and administrative services. The city covers an approximate area of 417 Km2, of which approximately 300Km2 is under water (part of Lake Victoria extending towards the border with Uganda and Tanzania) and the rest is dry for most of the year. The city lies at an altitude of approximately

1259m above sea level, though some immediate neighboring districts such as Nandi are highlands. Topographically, the northern part of the district is hilly and some of the peaks reach as high as 1800m above sea level. The southern plains descend from the northern hills into flat plateaus lying between 1160m and 1220m above sea level. The southern plain is poorly drained and most of the area near the lake is often swampy and flooded during the rainy season. The major types of soil are red loam and black cotton soil. The well drained red loam soils form in the north east of the district while the less fertile, poorly drained black cotton soils occur in the low-lying south-east region.

The climate in Kisumu is tropical, with temperatures ranging from 18^0C-33^0C. The average high mean throughout the year is recorded at approximately 29^0C, while the low mean is 17.3^0C. The mean humidity is 70. The mean annual rainfall is 1300mm, most of which falls during two main rain seasons. The long rains come between March and May and the short rains are expected between November and December. The main rivers draining into the lake are Kibos, Nyamasaria, Luando and Lielango, Nyangori, Muguruk, Kisian and Awach, which have their sources in the hilly north of the district, and Nandi and Nyabondo hills.

Infrastructure

Kisumu is served by tarmac roads, some of which lead to cities in the neighboring countries of Uganda and Tanzania. The road network comprises of roads ranging from tarmac to gravel and dirt. Locally, the most common means of public transportation are the *matatu*[4] and *boda boda*[5] taxi. There are regular taxis, but they operate mostly within

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4 *Matatu* is a van or mini-bus type of vehicle that is privately owned (by individuals or companies) but is licensed to operate for public service.

the city center and its environs, and the airport. Handcarts are commonly used to transport goods within the city. Buses and trucks are used for long-distance journeys going through other towns/cities.

The railway network is relatively developed in Kisumu, compared to other towns in the country. The railways provides both passenger and cargo transportation locally, regionally and to neighboring cities in Uganda. Services connect Kisumu to Eldoret, Nakuru, Nairobi, Mombasa, as well as Jinja and Kampala in Uganda.

Kisumu has an airport that handles local and regional flights. There are four airlines operating through the airport, with approximately 10 commercial flights per day. Few cargo and courier flights, as well government-operated flights (military, police), also use the airport. There is also an inland port and container deport where local and international steamers dock. The use of boats in the fishing industry has contributed to the growth of beaches, landing bays and trading centers along the shores of Lake Victoria. There are now private yachting services along the Kisumu shoreline.

Population

According to the 1999 national census report (CBS, 1999), the population of Kisumu district is 504,359 and the population density is 828 per Sq. Km. The growth rate is recorded at 2.8 per year while the sex ratio is 1:1. Population density is higher in low-income areas such as Nyalenda and Manyatta, where 60 percent of the city's population

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5   *Boda Boda* (border-border) is a term used to refer to bicycle taxis, commonly found in major towns and rural settings in western Kenya. The term is also used to refer to the bicycle taxi rider. This kind of business began on the boarder of Kenya and Uganda, when demand for transportation across the 'no man's land' between the border posts of the two countries grew. The bicycle taxis made this easier because their passengers could cross the border without the paperwork and time involved when using motor vehicles. The taxi operators would shout out 'Boda (to) boda' in order to attract customers.

lives. The city of Kisumu had a population of 184,243 in 1999, but since the 1999 national census, the population has continued to increase and is now estimated at 500,000 by unconfirmed sources. According to the Library of Congress (2007), the Luo constitute 13 percent of the population in Kenya, third to the Kikuyu (22 percent) and the Luhya (14 percent). In Kisumu district, they are the predominant community, despite the metropolitan nature of the city.

Social and Economic Aspects

The main economic activities among the rural population in Kisumu district include small-scale mixed farming, large scale sugar cane farming and fishing. As a result of the area's poor soils, drought, and flooding tendencies, agriculture does not adequately support the people's economic needs. As a result, an increasing portion of the population is migrating to the urban areas, where there is a general lack of planning for the increasing population.

In Kisumu city, many residents get their livelihood through subsistence fishing and petty trading. Traders are scattered all over the city, where they carry their goods around and hawk to potential customers. However, most of the trading occurs at Kibuye Market, arguably the second largest open-air market in East and Central Africa. Goods sold at the market range from agricultural machinery and products to used clothes and school items. Young men also earn a living through *boda boda* business.

Agriculture is one of the most important economic activities in Kisumu district, especially in the rural areas. It is predominantly small-scale and meant for subsistence. However, some of the foodstuff is imported from neighboring districts. Livestock rearing

is also a key agricultural venture that is a predominantly male domain. Adult male family members own 73.3 percent of livestock in the district (Kisumu City Council, 2005). The major agricultural industries in Kisumu include grain and sugar milling factories, bakeries and confectioneries. Cotton mills and one brewing plant closed down due to a downward trend in the national economy. Other industries operating in the city include fish processing plants, foam mattresses and soft drink plants. However, the number and capacity of these industries have also been decreasing due to the slow economic growth in the western region of the country. Currently, there are four gazetted fish breeding sites, 13 beach-landing centers and more than 500 boats. The city has five fish processing factories and numerous small scale fishing and fish farming companies employing a significant proportion of city residents. The fish industry alone earns the city approximately 1.5 billion Kenya shillings per year.

Due to high unemployment levels (30 percent) and low incomes from agriculture and fish industry, levels of poverty in Kisumu are high. More than 50 percent of the working population is involved in the informal sector, which fetches an average of 3,000 – 4,000 shillings per month. Food poverty is at 53 percent in Kisumu, compared with Nairobi's eight and Mombasa's 39 percent (CBS, 1999). With regard to education, Kisumu city has more than 100 primary schools and 23 secondary schools. Maseno University is located just 20 Km away from the Central Business District (CBD) in Kisumu. Tertiary institutions such as Kisumu Polytechnic and Tom Mboya Labor College are also located in the city. The adult literacy rate is 48 percent. There is a slight gap between female and male school enrollment as well as attrition rates. According to the Kisumu City Council (2005), there were 49 percent females attending school compared

with 51 percent males, while 53 percent of females dropped out compared with 47

percent males. The same trend is observed for those who have never attended school – 52

percent for female and 48 percent for males.

Health Aspects

Being the Nyanza Province Headquarters, Kisumu hosts the Provincial and

District hospitals and other leading private hospitals such as the Aga Khan Hospital.

There is a lot of health-related research work by such institutions as the Centers for

Disease Control (CDC), Kenya Medical Research Institute (KEMRI), Walter Reed

Foundation, among others. Malaria accounts for the highest (32 percent) number of

outpatient morbidity in the area (State of the Environment Report, 2003). Respiratory

diseases, skin infections, ulcers, diarrhea and accidents are recorded as next tier sources

of morbidity for both children and adults. HIV/AIDS is not only a major problem for the

people of Kisumu, but in Kenya as a whole. However, there are marked differences in

HIV prevalence rates by province. Following earlier studies (e.g. Richardson, 1996;

Hagembe, 1998; GoK and UNDP, 2003) that showed a similar pattern, the most recent

Kenya Demographic and Health Survey (KDHS, 2003) results show that while the

overall prevalence rate for the country is 7 percent, Nyanza, the home province of the

Luo, has an overall prevalence of 15 percent. All other provinces have levels between 4

and 6 percent. Looking at HIV prevalence levels by circumcision status, in Nyanza

Province, men who are uncircumcised are ten times more likely to be HIV positive than

men who are circumcised (KDHS, 2003). Also, there is evidence that new infections are

occurring most among youth aged 18-24. The Provincial hospital (commonly referred to

as 'Russia', because it is believed that the money used to build the hospital was given by the Russian government during the Cold war period) is now offering ARV treatment to patients who volunteer for testing and treatment. Other health facilities supported by the government, private individuals and companies and Non-governmental organizations (NGOs) are also providing treatment.

The water supply system is underdeveloped and so many households rely on vendors for their supply. Due to poor water supply, a significant number of households in the peri-urban parts of the city mainly rely on rivers and boreholes, and pit latrines for fecal disposal. Housing facilities are scarce and unaffordable, and so many residents (60 percent) reside in informal settlements and peri-urban areas, which are typically congested and lacking in basic facilities such as water and proper sanitation.

The Chapters

I follow the introduction with an account of my research trajectory in chapter 1: *Methodology*. My dissertation research culminated from my job experience as a research assistant, and later, a research Trainee at the African Population and Research Center (APHRC), as well as a series of exploratory pre-dissertation fieldwork in Nairobi and Kisumu. I describe the events that led me to this research, and give details about the methods, including participant observation and in-depth interviewing, that I employed. In my description, I include the characteristics of study participants, study site and general population, recruitment procedures, research ethics and human protection processes, as well as the data analysis methods. I also describe the UNIM Project, the clinical trial on circumcision from which I recruited all my core participants.

In chapter 2 - *Ethnic Identity in Context: A Historical Construction of Luo Identity* - I trace the history of Luo identity using literature from different disciplines, including anthropology, history and religious studies. Many scholars examining contemporary ethnic identities in Africa identify their roots in the colonial era. In Kenya, as in most of Africa, ethnicity is viewed as a social phenomenon that was shaped by the colonial encounter. In addition to discussing the role played by tribalism/ethnicity in colonial Kenya and in the freedom movement, this chapter explores the historical development of Luo identity from the time of their migration from their former territory in Southern Sudan to their settlement along the shores of Lake Victoria. I examine the changes they adopted as they migrated. These changes, necessitated by their new environment and neighbors, include transitioning from a pastoralist economy to dependence on agriculture and fishing and changes in language and cultural practices. I continue to trace the evolution of the Luo through the colonial period which was particularly important in shaping the Luo as a community. With urbanization, labor migration increased and Luo youth increasingly left their rural homes along the shores of Lake Victoria to search for employment in regional and international towns. As a result, they joined ethnic-based welfare organizations such as the Luo Union that were seen as providing a broad-based cultural identity beyond the physical boundaries of Luoland. Many scholars have emphasized the role of these organizations in resisting colonial rule and mobilizing grassroots support for larger political organization; I discuss these unions and the role they have played in shaping changing notions of Luo cultural identity. Throughout my analysis of the historical and conceptual antecedents of contemporary Luo identity I attempt to show that there are continuities in Luo history and society, and that the

sociological and historical meanings of modern Luo identity emerge to the greatest

degree if traced to their roots before the community settled in its current location.

Chapter 3, *Being Luo in Modern Kenya,* shows how ethnic identity is not fixed

but continues to be negotiated and reinvented in the face of socio-cultural and economic

changes. It would seem appropriate to argue that cultural components such as a shared

language, religion, history, place of origin, kinship and locality are important aspects of

ethnicity. While this is true, there are emerging 'modern' issues that challenge the notion

of ethnic identity based on these factors. In this chapter, I show how young people are

coping with the different challenges of modernity to their identity and ethnicity. I discuss

the ways in which Luo youth perceive their Luo identity and how they see it as

corresponding to traditional perception of Luo identity. To many young people, being

Luo does not stop with kinship or speaking *Dholuo*. Rather, "being Luo" means being

able to relate to modern issues while maintaining their Luo identity as it is perceived in

traditional terms. I discuss the fundamental issue of conflict between traditional

communitarian notions and the modern ethic of individualism and demonstrate ways in

which Luo youth navigate the two systems without necessarily losing their identity in

either. Most of my study participants see the high prevalence of HIV/AIDS as a 'modern'

challenge, and they see the adoption of male circumcision, a cultural practice that is not

traditionally Luo, as a modern strategy for coping with this modern challenge.

Additionally, this chapter discusses the formation of Luo Nomiya Church

(NOMIYA) early in the 20th century, in part as a response to the strict rules of missionary

Christianity and also as resistance to colonialism. Even though Church members view

circumcision as a practice in line with biblical teachings, most analysts view their

adoption of circumcision as a strategy to undermine colonial ideologies that particularly despised male circumcision (as practiced in most ethnic groups in Kenya) and tooth extraction (among the Luo) as a 'backward' practices. The point I seek to demonstrate here is how the youth in this study and NOMIYA faithful are using a cultural solution to a modern situation to maintain their cultural identity.

In chapter 4, *Fitting In and Spreading Out: Social Networking, Sexuality and Circumcision,* I explore the notion of Luo identity in the modern context of cultural interaction. Kisumu is in Luo territory but its population is multi-ethnic, largely because the city is the provincial headquarters and the regional economic center. In this chapter I explain how Luo youth juggle the complex process of staying true to their Luo identity, while staying connected with people from other tribes. I discuss the social and sexual networks that are established, and how they are maintained in a multicultural context. This struggle is best exemplified in the ways they relate with their peers, relatives (parents, siblings, extended family and clan mates) sexual partners, and people from other ethnic groups. For Luo men not being circumcised has, for many years, been viewed as an identity marker, separating them from neighboring communities, as well as from the other communities in Kenya all of which, except the Turkana, practice circumcision. Young Luo men are increasingly getting circumcised, and essentially erasing one source of the 'otherness' that has defined them in the eyes of other ethnic groups. Adopting circumcision has impacted social networks in three ways: First, many young Luo men feel that getting circumcised allows them to have a closer connection with peers from other (circumcising) communities and enhances inter-community cohesion. Secondly, the general belief that circumcision enhances coital experience for both men and women has

influenced young Luo men to adopt circumcision with the hope of gaining popularity with women and expanding their sexual networks beyond their own community. Thirdly, there is more cross-gender discussion regarding sexuality. My evidence is that men are consulting their sexual partners before they make decisions about circumcision. In some cases the discussions are, in fact, initiated by the female partner. This is contrary to common belief that gender relations in patriarchal societies such as the Luo are biased against women, especially with regard to sexuality. I also provide evidence of cross-gender intergenerational communication regarding circumcision and sexuality. More young men hold discussions with or seek advice from their mothers before circumcision. This, too, is a shift from the traditional norms that only allowed discussion about sex and sexuality to occur between a male child and his grandfather (or an elderly person with similar stature in society).

Chapter 5, *Ethnography of a Trial,* discusses the UNIM Project and its role in the adoption of male circumcision. I consider how the study was carried out, its objectives and its impact on the perceptions and sexuality of participants, as well as the general Luo population. I discuss the use of such a study as depicting a microcosm of the Luo community, and the use of the results to recommend policy that applies to the entire community. I argue that participants in the study are an elite group – young, receptive to new ideas and education, respectful of medical advice and education, and eager to participate in cutting-edge scientific experiments – and may not be representative of the larger community. The regular HIV/AIDS tests, medical assessment, and STD treatment in the trial study are incentives that influence most participants to positively change sexual behavior for the period they are participating in the trial. This level of interaction

is neither feasible nor sustainable in the general population for an extended period of time, but its impact is clearly demonstrated the feeling among trial participants that they would find it difficult to continue 'on the straight and narrow' beyond the period of the clinical trial. Most were hesitant, if not unwilling, to circumcise their own children in the future.

Lastly, in the conclusion, *Negotiations,* I connect the issues discussed in preceding chapters to arrive at some conclusions about cultural identity, modernity and social networking among the Luo in Kisumu district. My first conclusion is that the typical narrative of progress and modernity, which often assumes a linear trajectory and a certain expected end, is not supported by evidence from Kisumu. Contrary to the commonly held thesis that modernity implies a shift from communitarian traditions to individualist ethics, I argue that the two need not be viewed as opposing notions, but rather, as coexisting phenomenon. Rather than invoke the often advanced evolutionary trajectory, it is important for us to understand that there are complex processes at play in the way that we approach identity and progress. It is the unscripted, untidy and unstructured processes operating between traditional and modern systems that truly tells the narrative of identity and modernity. To Luo youth, to be modern is to have the ability to navigate the two systems and to create an identity that allows them to fit into their community and yet demonstrate their individuality in the face of modern challenges. This study demonstrates the tenacity of Luo identity and should also dispel any notion of the 'backwardness' of the Luo in a 'modern Kenya'.

My second conclusion is that Luo youth view HIV/AIDS as a 'modern' challenge that requires a 'modern' approach. To these youth, male circumcision is important to slow

the spread of HIV/AIDS. Because circumcision allows for the expansion of social and

sexual networks, I examine its adoption as a double-edged sword in shaping the

HIV/AIDS epidemic.

CHAPTER ONE

METHODOLOGY

Study Context

Being in Kisumu at the time that I was, and doing research on ethnic identity and perspectives of social change was very timely in more ways than one. First, my research happened at the time when, as previously mentioned, there was a clinical trial (UNIM Project) going on in the city, to determine if there was an association between HIV/AIDS risk and circumcision (or lack thereof), and if there was indeed an association, whether the association was causal. The presence of this study in Kisumu had introduced emotional discussion at different levels about HIV/AIDS in the community, and circumcision and the Luo culture. The idea that circumcision, which was not part of the cultural repertoire, could reduce individual risk for HIV/AIDS was intriguing, and triggered interesting and varied reactions to UNIM, and to people and institutions that engaged in such discussion. The idea that circumcising Luo men was going against culture, and therefore diminishing the Luo identity, featured prominently in these debates.

For some, circumcision was a direct challenge to the very existence of the Luo community and identity. One of the institutions that was often discussed in this context was the Luo Nomiya Church (NOMIYA), which is an African Christian church whose members are predominantly Luo, but values male circumcision not only as a symbol of purity, but also as a command by God. Their practice of circumcision seemed to set them aside from the rest of the Luo, but in view of the new developments, there seemed to be renewed reactions to the Church by both its members, and other Luo community members. That UNIM and NOMIYA were, directly or indirectly, featuring in these

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debates made them an important part of the social milieu, and an important part of my own study. In the next section, I will give a detailed description of these two institutions, and how they relate to my own study.

Secondly, my study took place in the general election year, when there were fervent campaigns to elect a president, members of parliament and city/town mayors. The campaigns were often driven by ethnic politics, in which candidates often appealed to voters based on their ethnicity, or perceptions of what the ethnic groups stood to gain from the election of a particular candidate. Based on these ideas, there was a general sense of people wanting to belong to a particular group, or asserting their belongingness in response to the appeals of the political candidates. The issue of circumcision featured in these campaigns at the national level. One of the candidates for president, Raila Odinga, was from the Luo community, and some of his opponents chose to use his ethnicity to diminish his ability to lead. They argued that since he came from a community that did not traditionally circumcise (and by extension, he was not circumcised), he would not make a good leader because many of the other communities would see him as a 'child'. He would not qualify to lead based on the idea that he had not graduated to manhood in the eyes of non-Luo Kenyans. These kinds of arguments were discussed publicly, and brought to the fore not only the complexities of Kenyan politics, but also those of ethnic identities and cultural meanings and values attached to ritualistic practices such as circumcision.

Thirdly, at the time of my fieldwork, the United States was also entering the presidential campaign period and it was widely expected, both in the US and in Kenya, that the then Senator Barack Obama of Illinois would announce his candidacy. This

speculation was constant topic in many Kenyans discussions of politics, but particularly important for people in the Luo community. For many, Barack Obama was, by virtue of his father being Luo, a bona fide member of their community. So, the general feeling in the community was that of pride and support for his candidacy, even though he would be president of another country. As the possibility of this happening grew higher, there was a tendency for many Luo people to assert their Luo identity, by whatever definition they thought applied. In most of the discussions, the tendency was as much to (re)define Luo identity as it was an attempt to incorporate Mr. Obama as a legitimate community member, and justify their support for him.

From these social circumstances and the on-going discussions, it is clear that issues of identity, circumcision and HIV/AIDS were very important to the community. My study capitalized on these situations and discussions to explore these issues further. The UNIM Project was a major component of my study since it was not only an important part of the social milieu, but also provided the opportunity to identify young men who had interest in circumcision, and other members of the community who had encountered it, directly or indirectly. UNIM played a critical role in my fieldwork and data analysis at the end of the study.

The UNIM Project and Core Participants

My Core Participants (CPs) were drawn from an existing study - the UNIM Project, which was a collaborative project between the University of Nairobi, Kenya, Manitoba, Canada and University of Illinois, Chicago. It was an unblinded randomized trial with two arms: the treatment or circumcision arm, and the control or uncircumcised

arm. Study participants were recruited in a variety of ways. General information about the study was provided through local newspapers, radio, fliers and other media outlets. Also, several drama and musical groups in the Kisumu area were enlisted to inform young people of the opportunity for free voluntary HIV counseling and testing. Clinicians and nurses in the numerous public and private clinics in Kisumu were requested to refer their STD patients to Lumumba Health Center (the UNIM Project clinic and office) for HIV counseling and testing. Trained project peer recruiters would approach the leaders of local organizations to hold information sessions and discussions with the various local chapters to inform them of the UNIM study, its goals, and the availability of HIV counseling and testing. Some of these organizations include: the Central Body of Kisumu Bicycle Transporters, touts, car washers, fishery helpers, and mechanics' helpers (*jua kali*).

All the male participants for the project were sexually active (in the past twelve months)[1]. After voluntary counseling, HIV testing, an Hb test and a brief clinical exam to assess circumcision status, uncircumcised, seronegative men with Hb of 9.0 or greater were informed of their eligibility for the study and the protocol and procedures of the trial were explained briefly. They were given a copy of the consent form to take home to read and study. If they agreed, they were given an appointment to return for randomization and possible circumcision within one week of the screening visit.

On the second (randomization) visit, if the participant agreed to be in the study, the study was again explained to participants in detail and the counselor and each

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1 Sexual activity is defined as having penetrative vaginal sex within a year prior to and after joining the UNIM Project. By asking recruits specific questions about their sexuality and sexual activity, UNIM was able to vet participants to ensure they were indeed sexually active before they were enrolled as participants.

participant went through the consent form in detail. The participant was then block-randomized to either the treatment or control arm and circumcision was performed on those in the treatment group on the same day, or a few days after randomization. Circumcised men were counseled to refrain from sex for 30 days after surgery and counseled about risk of HIV infection through open wounds during the healing process. They were checked for complications and asked about their sexual activity three days, eight days and one month after the surgery. Men in both arms of the study were given HIV tests and counseled one month after joining the project, and again at three months. They returned to the clinic for check-up at 6 months, 12 months, 18 months and 24 months after randomization. During each visit, they were tested for HIV, tested and treated for STDs, and counseled about risky sexual behavior. Participants were also allowed to seek treatment for STDs and circumcision-related complications at any time during the 24 months of follow-up. Counseling on condom use and sexual risk reduction was provided by trained, experienced, native-speaking counselors. Unless circumcision was found to be unsafe, those in the control arm were offered circumcision at the end of the two-year follow-up period.

The UNIM clinic was located at Lumumba Health Center, in the heart of the city, less than one kilometer from the main bust stage. The clinic was one of three huge buildings in the compound, one being the government operated Lumumba Health Center, and the other housing an AIDS-related research project for the Kenya Medical Research Institute (KEMRI). Inside the clinic was a holding area with two receptionists whose main responsibility was to manage clients' schedules and liaise with researchers from other studies. There were several wooden benches in the waiting area, which had walls

painted with and cartoon-like figures with various messages about circumcision. There were separate offices for the project counselors, recruiters, managers, investigators and visiting researchers. There was also an operating room where circumcisions took place, a laboratory for storing samples and a data lab with several computers and other electronics.

Outside, there was an iron-covered shed furnished with benches, which acted as an additional waiting area and also a meeting place for participants and investigators to discuss the ethical aspects of the study. It is in this shed that I had my first meeting with each of my CPs and my two research assistants. During pre-dissertation research, I sought UNIM permission to attend their daily morning briefings to new or potential participants, as well as those returning for follow-up visits. At the end of each meeting, I was allowed to introduce myself and my study, and made it clear that mine was a different and independent project and had no connection to UNIM. I welcomed them to participate in my study and emphasized that their participation in my project would be voluntary and would not affect their membership in UNIM. I then waited in the shed for participants who would volunteer to speak with me after their UNIM appointment.

I gave more detail about my study with each volunteer, after which I arranged to meet interested participants in their homes, work places, recreational facilities, or anywhere else they would be comfortable to do an interview. It was during this time that I met my two research Assistants, Dan and Orwa. Orwa was a college student at the local polytechnic and Dan had just completed high school and was waiting to join college for further studies. They were very interested in knowing more about my study, and they were quick to grasp the fundamentals. They agreed to guide me around the city and

introduce me to their families and friends. They also introduced me to other UNIM

members that I was not able to meet because they did not have appointments during the

period that I was doing pre-dissertation research. They also helped me with the research,

especially on occasions when I could not communicate with interviewees because of

language barriers. I retained them as research assistants when I returned for dissertation

research six months later.

I used the same approach when I returned for this study because I got significant

interest during the exploratory period. There were twenty four CPs at the end of the

recruitment process, but I managed to retain only twenty. This age group is highly

mobile, and a few of the participants migrated to other towns and cities in search of

employment and further education. Such was the case with the four that I could not retain

in the study, as they left Kisumu in search of employment or to attend school, and I was

not able to reconnect with them on their brief returns to Kisumu. However, two of the

twenty who completed the study also left Kisumu for a prolonged period of time, but I

interacted with their families, friends and social network, even in their absence.

Whenever they were in Kisumu, I arranged to meet with them, conducted interviews and

interacted with them for the period of their visit. Often, they stayed for a week or more.

In one case, I arranged for regular meetings with the respondent wherever they had

migrated to.

When I first met him, Otieno was an eighteen year-old who had just completed

secondary school and had performed well in the exam. He had applied to join a college in

Nairobi to pursue a diploma in mass communication. He was very hopeful that he would

be accepted and he was hoping that he would be selected to the local branch of the

college. When the results came, he had been accepted, but had been invited to join the college branch in Nairobi. The desire and opportunity to further his education overrode the distance he needed to travel to attend college. He left for Nairobi three months after volunteering to participate in this study but was to return to Kisumu every three months for scheduled visits at the UNIM Project. I met with him each time he came to Kisumu, but I also arranged to meet with him each time I traveled to Nairobi. As such, I met a section of his social network in Nairobi, as well as in Kisumu.

All the CPs were Luo males, aged 18-24 at the time of recruitment. However, there was an exception to the age bracket. Due to the prolonged period of my study, four CPs turned 25 years while still participating in the study. The CPs were of diverse social and economic backgrounds. Most participants were self-employed, working as bicycle taxi operators (*boda boda)*, fishermen and petty traders. Some were employed as building constructors, security guards and peer educators in community-based organizations (CBOs). A few participants were unemployed, while some were students at college and high school levels.

They were all sexually active[2] and residing in Kisumu at the time of recruitment. The CPs were all HIV seronegative[3] and were either circumcised or not, depending on whether they were in the control or treatment group at UNIM. At the start of the study, 14 of the CPs were circumcised, while 6 were uncircumcised. By the end of the study, three respondents had completed their participation at the UNIM Project, and all opted to be

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2 Since UNIM had vetted the participants to confirm that they were sexually active, I took it as a given that all the CPs in my study, by virtue of their participation in the UNIM Project, were sexually active, but I also asked them a few questions to reconfirm.
3 It was not part of this study to determine the HIV serostatus of participants, but by virtue of their continued participation in the UNIM Project, where they were periodically tested (and expelled if their serostatus turned positive), it was safe for me to assume that their status remained negative.

circumcised at the end. It was important to have both circumcised and uncircumcised men for me to have contrasting understanding of the perceptions and experiences associated with male circumcision.

Social Networks

Through initial interviews with the twenty CPs from UNIM, I started to identify their social networks, including sexual partners, peers, parents, teachers, religious/community leaders and health workers. From the first day in the shed at UNIM, I made it clear to the participants that I would be interested in interacting with them throughout the duration of the study, which also meant that I would most likely interact with their friends, family, community, among other people that made up their social network. Most of the participants were agreeable to this reality, except for two CPs who were skeptical about the possibility that I would meet their parents because they (parents) were not aware of their participation in UNIM. I will discuss one case in detail in the section titled *Research and Ethics Challenges*.

I was interested in learning about the CPs personal and social relations, so I posed to them questions relating to their social networks. Their responses often gave me ideas about the most influential people in their lives in general, and regarding sexuality and identity in particular. Using information from the interviews, and continuous interaction with them, I was able to decide on which social network member to include in my study. Usually, this happened two or three months after meeting with the IR, and if the selection I made was acceptable to the IR, I proceeded to contact the person and invite them to join my study. I did not experience much difficulty recruiting members of the social network

since all of them knew me through previous interactions. However, it took longer to get the consent of sexual partners, who sometimes had to be convinced by the CP to participate. In some cases, I had to have the first meeting in the presence of the CP, but afterwards, they were willing and free to talk to me independently. Given the sensitivity of the issues under discussion, I did all the interviews that involved sexual partners, and mothers or mother figures.

While the CPs were aged 18-24, the social network included anybody above 18 years of age, (the age range was 18-78) and from various ethnic groups. I preferred residents of Kisumu only, but there were participants that lived in other districts. Most such cases were parents/grandparents, who lived in their rural homes, but frequently visited their sons in the city, and had a great influence on them. For the men, their circumcision status did not affect their participation, but as I continued to interact with them, I sought their opinions about the phenomenon. In most cases, they volunteered information about their own circumcision status. In total, there were 35 male and female members of the social network. Of these, 12, all of whom were women, were CPs' sexual partners; 10 parents (3 men and 7 women); 10 peers (7 men and 3 women); 3 community and religious leaders (2 men and 1 woman).

The most difficult experiences with the social network involved the older men, who spoke very little English or Swahili and very advanced Dholuo. Given my limited knowledge of Dholuo, it was difficult for us to communicate properly, and I had to rely on the research assistants. More difficult was the limited opportunity to interact with them on a regular basis, since, as mentioned above, most of them lived in the rural areas and only visited their sons in the city when it was necessary. I sometimes took trips to the

rural homes to be able to interview them, or participate in a family occasion. The easiest group to interact with was the peers, who were in some cases, members of UNIM. It was not unusual for me to be invited to attend a function by one IR, only to meet several other CPs and several social network participants at the same function. In addition, they were generally very free with me, and invited me to many of their functions, including soccer games, rap/music competitions, music concerts, clean-up drives and church services.

Luo Nomiya Church (NOMIYA) Members

My first encounter with NOMIYA members was in Korogocho, during my exploratory pre-dissertation fieldwork. I had an appointment with a respondent in Kisumu Ndogo, but he was not home when I went to see him. Instead, I found his mother who was nursing an infant boy. She informed me that the respondent had gone to church the previous night and had not come back because there was a circumcision ceremony which he was attending. She explained that the respondent was not getting circumcised, since, like his infant brother, he was circumcised as a child. The church required that, and because the family had been members of the church for a long time, they had circumcised all their male children as infants in a church ceremony.

When I finally spoke with the respondent two days later, he confirmed his mother's story about the church and circumcision. He also explained that he attended all church ceremonies, like circumcision, because he wanted to be a church leader in the future. More interesting, he indicated that circumcision was not limited to infants in the church. Older men were encouraged to get circumcised, and that there were a number of 'grown men' that were circumcised in the ceremony that he attended two days earlier. He

explained that while circumcision is encouraged during infancy, some members, most of whom join the church well past their infancy, remained uncircumcised as adults. He declined to invite me to attend any such ceremony on the account that I had to be a church member. Besides, there is usually just one or two ceremonies in a year since there was not a big membership to demand more ceremonies. He suggested that I was more likely to catch such a ceremony in Kisumu, which has more churches and a bigger membership than Nairobi. He could not give me any contacts in the church in Kisumu, but he gave me addresses and some key dates on the church calendar.

In Kisumu, I made my first contact with NOMIYA at UNIM. When first speaking with the Project Coordinator of UNIM, she mentioned that the project had actively courted members of the church to participate, since by virtue of their religion, they were inclined to accept participation. She said there were a significant number already participating, but declined to identify them for me for ethical and confidentiality reasons. As such, when I introduced my own study to UNIM participants who were potential CPs, I also asked about their religion. Most NOMIYA members would acknowledge their religion, though I found out later that two of my CPs were members but had not acknowledged that in the beginning (I will discuss this in detail in chapter 4). Four out of ten of the NOMIYA members that I interviewed at UNIM agreed to participate in my study.

Sido was the first NOMIYA member that I met in Kisumu. During the first interview at UNIM to introduce my study, he said that he was a member of NOMIYA. He was 19 years old student at a local high school. He was a day-scholar, although the school also had boarding facilities. He would have loved to be a boarder, but his parents could

not afford boarding fees. He thought that if he was a boarder, he would perform better in class because he would have more time to concentrate on his studies. He had repeated form two because he did not perform very well the previous year, and his parents and teachers recommended that he rewind the grade. His parents were NOMIYA members, and his father was the Bishop of the local branch. He agreed to introduce me to his family at a later date.

Bishop Olita was a 63 year-old man, who worked as a primary school teacher until he retired at 55, when he was selected as the Bishop of his diocese in Kisumu. Prior to that, he served as a senior elder and advisor for the youth. He had only one wife, even though the church allowed its leaders up to four wives. They were married for thirty five years. His wife, Mama Sido, owned a stall at the municipal fish market, where she sold fish and produce at retail rates. She had owned the stall for the past twenty years. They had other children, who were all working away from Kisumu. They all had a post-high school education and had reliable jobs.

Bishop Olita's family profile is certainly not representative of church adherents. My first visit to the church was a couple of months after I met the Olita's, and they invited me to accompany them to Sunday service. The service was mostly attended by women and children, and most of the men in attendance seemed to have a leadership role of some sort. The only woman I saw participate in a leadership post was the one who led the hymns. There were very few young men and women, who, for the most part, stayed outside and socialized among themselves while the service progressed. I learned later that they stayed outside to afford the older men and women a place to sit in the congested space. All the older men and women were dressed in long gowns in various brilliant

colors. The youth did not seem to have a particular dress code, except, I noticed, that all the girls wore long dresses/skirts. Away from church, it seemed like the dress code was not strictly adhered to, probably because there was not an easy way to enforce it. Some members wore their colorful gowns/dresses, but others did not. I did not see any member of the Olita family dressed in these gowns, except to attend Sunday service.

Most of the NOMIYA members in this church lived in the church neighborhood, which was generally a poor area in which most of the houses had rusty iron roofs, earth walls and floors, no running water and no indoor plumbing. It was common to see a pit latrine and open trenches for drainage outside every couple of houses. The church building was made from the same material as most of the houses in the area, except for the wall, which was made of brick, and the floor, which was made of cement. The cement on the floor was chipping, and there were noticeable potholes between pews and the space between the two rows of pews. The main road leading to the area was tarmacked, though with lots of potholes, but the rest were dirt roads that were not properly maintained. In the rainy season, the roads were difficult to navigate, and the neighborhood was generally muddy. Most of the young members that I spoke with were casual laborers in the *'jua kali'* (informal) sector, working as coffin-makers, *boda boda,* shop assistants, domestic servants, masons and fishermen/women. Very few had an education beyond secondary school.

In addition to Sunday service, I interacted with members on other occasions, such as weddings and 'bless the child' ceremonies. During the fieldwork period, there were two circumcision ceremonies held at a location outside the city. The location was designated for this ceremony since it isolated in the hills, and the property has a river running

through, for the cleansing ritual. Only members were allowed at the ceremony, but the

Bishop allowed my research assistants to attend, after they provided proof that they were

circumcised. They had to show their circumcision certificates from UNIM. Women

members were allowed to participate in certain aspects of the ceremony, most of which

involved cooking and serving food. They were not allowed near the 'candidates' because

of the inherent impurity that women are presumed to possess. As such, they could not

witness the men/boys getting circumcised, nor could they participate in the rituals

happening immediately after circumcision. The 'candidates' were often taken care of by

designated male church members, until they were released back to their families the next

day. As much I did not participate in this ceremony, I was able to reconstruct the events

from my research assistants' detailed notes, and accounts from church members who have

participated in the ceremonies. I also got a lot of vital information from Bishop Olita and

his wife.

Interview Procedures and Participation

The main tool of data collection was in-depth interviewing. My research

Assistants and I conducted in-depth interviews with study participants throughout the

study period. Generally, the procedure was for me to visit the UNIM Project clinic and

introduce myself and my study to all UNIM clients who volunteered to speak with me.

During this 30-40 minutes introduction, I explained my study in detail, including the

topic, the duration of the study, the inclusion of the participants' social network, my

continued presence in the community and participation the community's social activities.

I also explained to the participants that their participation would be voluntary and that

their consent would be sought before interviewing people in their social networks. This introductory interview provided sufficient information to potential CPs for them to decide whether they would participate in my study. It also enabled me to get contact information from potential CPs and set up appointments in locations they preferred. Since I interacted with all participants all year round, the interview process with each one of them was continuous, depending on the need for more information. I conducted at least three formal indepth interviews with all the participants in the study.

The first interview was basically a means to introduce myself and the project, clearly explaining the issues that I was interested in pursuing, the consent procedure, the design of the study and the role of the participant. Also, discussions with each participant touched on general questions regarding the community, ethnic group and societal values and norms. Using a field or interview guide, I also got background information about the participant and his/her social network. Such information included their names, age, education level, occupation, marital status, area of residence, ethnic group to which they belong, religious affiliation and general information about their experiences growing up. The questions were not asked in any particular order, instead, I posed the first question and let their responses flow with the conversation. I probed further only when participants did not provide the information I sought as the interview went along. At the end of the first interview, I often made an appointment for the next interview, or just a visit with the participant's family and social network.

As we continued to interact and build rapport and trust, subsequent interviews were more specific to the individual's perceptions, beliefs and behaviors. The second interview was a little more personal, focusing mainly on male circumcision and cultural

identity. The issues explored included reasons for choosing to be circumcised. Here I probed for health concerns such as hygiene, sexually transmitted diseases and HIV/AIDS, sexual satisfaction, peer pressure, health incentives from UNIM Project, religious concerns and opportunity to contribute to science. We also discussed their experiences through the circumcision process, and the people that knew about or influenced their decision to get circumcised. We discussed about future generations and the possibility of them (participants) circumcising their own sons. Also, we explored other actions that young Luo people undertake instead of circumcision. With regard to identity, discussions focused on participants' experiences before and after circumcision. I probed for their experiences and interactions with peers, relatives, religious and community leaders, people from other ethnic groups and sexual partners. Did their 'circumcised' identity make them more or less Luo?

The third and subsequent interviews focused on sexual behavior, where I sought information regarding participants' perceptions about HIV/AIDS and if they felt protected from HIV/AIDS after circumcision. I also sought to know if their sexual behavior had changed after circumcision or after joining the UNIM Project. I probed on sexual partners, condom use, sexual performance, coital frequency, among other issues. I asked about their possible behavior after their participation in the UNIM Project. I should note that not all the interviews followed this particular order since some respondents would begin to discuss some issues before they were scheduled for discussion. I always allowed the participant to discuss what they were comfortable with, and followed up with the rest of the issues in subsequent interviews.

The field guide for the social network followed the same pattern as that for CPs,

but emphasis was placed on the role of the member of the social network in the decisions made by CPs. In some instances, questions were asked in general terms and not in particular reference to the CPs. Also, hypothetical scenarios were created to elicit responses from members of the social network in cases where they were unaware of the CPs decisions. For example, some parents were unaware that their sons were circumcised or participating in the UNIM Project and so I asked these parents to discuss the issues hypothetically.

All interviews were done in private and at a venue most comfortable for, and selected by, the participant. They were conducted either in English, Swahili or Dholuo. However, as mentioned earlier, my knowledge of Dholuo was limited, and that may have affected the way I performed some interviews with people who have limited knowledge of Swahili or English. Given this limitation, I relied on the Orwa and Dan to conduct the interviews. I preferred to be there when they conducted the interviews, but in some cases, like that of some older men, the respondents preferred to only talk to the research assistants. Also, Orwa and Dan were very effective in collecting data from male participants who may have been concerned about discussing personal experiences with a female researcher.

The interview process with each participant was continuous, depending on the need to follow up on questions they may have raised in previous interviews, or for clarification. Interviews were tape-recorded, and transcription and typing done as fieldwork continued. Due to the personal nature of information sought in the study, I guaranteed that the information provided would only be used for purposes of this study. I sought participants' consent to record the conversations, which could only be accessed by

me and my two research assistants who helped to transcribe and type. The taped interviews were stored electronically, with encrypted protection to ensure that they were well protected. All identifying information in the transcripts, such as names and place of residence, have been replaced with code names (if provided by respondent) or pseudonyms that only I can understand enough to link them to the respondent's real identity. In this dissertation, the results of the study are presented with code names and not the real identities of individual participants.

In addition to interviews, I got information just being around the participants and participating in their daily activities. For the most part, I was viewed as a member of the social network of my respondents, but on occasions such funerals and weddings, I was viewed and treated as a visitor in the home. As mentioned earlier, I was not allowed to participate in circumcision ceremonies at NOMIYA. On some occasions, like youth rallies about reproductive health and HIV/AIDS, I assumed the role of mentor/advisor, in which I spoke to the youth about prevention of HIV/AIDS and pregnancy. I was also invited by a member of the social network, who was a teacher at a CPs high school, to be a mentor and fund raiser for the Orphans and Vulnerable Children (OVC) club at the school. Most of the students in the club were HIV/AIDS orphans, and the particular teacher was the patron. The club met fortnightly to discuss their experiences and encourage each other to perform well at school. I was able to connect club members to a school in Providence, RI, with whose students they exchanged letters and pictures, and shared experiences. The students in Providence sent gifts on occasions such as Christmas. This experience gave me a sense of the social problems that people in the community were experiencing, especially those involving children. This experience allowed me to

interact with the students, most of whom were under 18 years old, without violating

ethics rules about minors. But more importantly, I forged friendships with the students,

most of who still communicate with me to update me on their progress, or to seek advice

and encouragement with regard to education.

Data Analysis

Collection, processing, analysis and reporting of qualitative data are closely

intertwined, and not (as is the case with quantitative data) distinct successive steps. I

started to analyze my data as they came in while I was in the field. It was often necessary

to go back to the field notes and verify information, collect additional data when

available data appeared unclear and got feedback from participants and others concerned.

I started both to write and code the data in ways that are nothing more than

descriptive summaries of what participants were saying and doing as I continued with

fieldwork. Inevitably, the descriptions involved some level of interpretation, which

required me to remove myself from the kinds of descriptions and interpretations that

people would use in the field, community and other settings that I was investigating, to a

categorization and analytic understanding that began to explain why the situation was as

it was with my study participants. I took a couple of days off work every couple of weeks

to read the transcripts and pick up broad themes that were emerging from the discussions

and observations. At this point I resolved to follow up on some of the issues arising,

depending on the frequency and importance attached to them by the participants. One of

the major issues that I was compelled to pursue was the connection between male

circumcision, identity and modernization. In my research proposal, the concept of

modernity was not a major subject for investigation, but as fieldwork progressed, it was clear that a lot of the health and identity challenges faced by participants were often viewed in the context of modernity.

After fieldwork, I embarked on looking for more themes and categories with more depth than I had while in the field. I borrowed heavily from Seidel's (1998) model that consists of three basic parts: Noticing, Collecting, and Thinking - about issues under investigation. These parts are interlinked and cyclical. Noticing interesting things in the data and assigning 'codes' to them, based on topic or theme, served to break the data into fragments. Codes which have been applied to the data then act as sorting and collection devices. I identified passages of text and applied labels to them to imply a certain thematic idea. I did this using the computer qualitative program, NVIVO, which essentially helped me to organize my work in such a way that I could retrieve and gather together all the text and other data that were associated with some thematic idea.

As observed by Seidel and Kelle (1995), coding enabled me to view my data as "objective, transparent representations of facts" and also as tools that enabled further investigation and discovery. At one level, I used my coding system as collection points for significant data. At another level, the code labels themselves were acting as markers or pointers to the way I rationalized what was happening. At yet another level, codes enabled me to continue to make discoveries about deeper realities in the data that were referenced by the codes. In developing the codes, I used the noticing process to capture emerging themes from the data.

Research and Ethics Challenges

As required of all Brown University researchers working with human subjects, I presented my protocol to the Brown Institutional Review Board (IRB) during a full board review, two weeks before I left for the field. I got many questions about the ethics of the study, most of which were about what measures I had put in place to protect the privacy of my participants. It was a huge challenge to protect the participants, given the design of the study, which made it inevitable for people in the same social network to know of each other's participation in the study. The logical answer to these questions was to include consent statements for the CP to agree to the participation of certain members of his social network, and the social network also provided consent to participate. There is no question about the logic and the practicability of this approach, and its effectiveness was evident when I was conducting the research. However, it raised some concern about the quality of my data, especially regarding the social network. There were times when I felt strongly that a particular member of the social network would be the perfect person to be included in the study, but the CP would deny consent to include the person.

As is the case with all the CPs, Bill volunteered to participate in my study, and he did not object to the idea that I would be interacting with his family and friends. However, when it came time to start to officially include his social network in the study, he was skeptical about the inclusion of certain members. He was particularly adamant to include his father, whom I thought, based on his accounts, would be the best person to include in the study. Bill was a student at a local polytechnic, where he encountered colleagues who were interested in joining UNIM. In addition, there was a vigorous campaign by UNIM to recruit young men from the polytechnic, in which they circulated

literature and deployed recruiters to the campus. Eventually, Bill joined UNIM and got circumcised.

He lived on campus in Kisumu, but his father lived at their rural home, about 50 kilometers away. He went home every school holiday, and his father made a point to see him every time he was in Kisumu. He considered his father his mentor as well as friend. In view of this, it was surprising when he declined to include him in the study. I found out later that he had not discussed his participation with UNIM with his parents, nor had he informed them he had been circumcised. He was aware that they would object to the idea of circumcision, so he opted not to seek their advice on the occasion. He did not want either parent included in the study because then, they would learn of his decision. Despite my assurance that I would not discuss his status with his father, Bill declined to provide consent to involve his father in the study. While the alternative choice of participant fit right into the study, Bill's father would have provided a different perspective on the issues. Though such cases were uncommon, the fact that they arose made me reflect on how the study design may have impacted the study.

That is not to say that all the members of the social network knew everything about the CP. In fact, in similar scenarios like that of Bill, there were fathers who did not know that the CPs' were circumcised, or interested in circumcision. Despite this, the CPs agreed to include their fathers in the study. The challenge was to ensure that confidentiality was upheld, and that both the CP and the member of the social network were protected. In these cases, we sought their opinions by creating scenarios and using hypothetical questions to get their opinion about the issues.

In broader terms, it was important to protect all participants against the risk of

criminal or civil liability, or damage to their financial standing, employability, insurability, reputation or stigma. As such, all participants were given the option to refuse without penalty to answer any questions that they were asked during interviews. They could also opt out of the study at any time. Also, the interview guides were translated into both Swahili and Luo and pilot tested to ensure that questions were asked in a sensitive and acceptable manner. In no case did a participant opt out of the study for these reasons, but there were cases where participants moved out of Kisumu or to a new residence without alerting me or the research assistants. This presented a different challenge to minimize loss to follow-up. In these cases, as mentioned earlier, I managed, after difficult efforts to locate them, to continue communicating and meet with them at any opportunity. I often linked up with the two participants that moved to Nairobi whenever I was there, and always met with them every time they were in Kisumu. I also continued to interact with their families, even in their absence. Despite all this, it was apparent to me that the study could have gained more from having the participants within the study area throughout the period of fieldwork.

One of the questions that the IRB asked was how I, a woman, was going to collect such sensitive information from men. One member actually asked if I was going to ask the men to show me their penises to prove that they were circumcised! As absurd as the idea sounds, it crossed my mind. However, as part of ensuring sound ethics during fieldwork, and the fact that the idea was not at all practical, I relied on my research assistants to collect sensitive information that any man in the study was unable to discuss with me. I trained Dan and Orwa about the study, fieldwork and the basic ethical principles of respect for persons, beneficence and justice, that underlie the conduct of

biomedical and behavioral research involving human subjects. Training was based on the

Brown University human research protections education program, using CITI training

material, which I downloaded from the CITI website. Despite all the training, and the

natural ability of Dan and Orwa to make friends and cultivate trust, I felt strongly that I

could have got more or different information from those situations that they were

required to represent me. Often, I asked them to follow up on certain issues when I was

either dissatisfied with the information, or unclear on the issues. These cases were few,

for I found that most young men were free and willing to discuss all the issues that I

raised with them.

CHAPTER 2

ETHNIC IDENTITY IN CONTEXT: A HISTORICAL CONSTRUCTION OF THE

LUO IDENTITY

Introduction

As seen in the introductory chapter, many scholars examining the concept of

ethnic identity in Africa identify the roots of contemporary ethnic identities in the

colonial era. In Kenya, as in most of Africa, ethnicity is generally viewed as a socially

constructed phenomenon that was shaped by the colonial encounter. This came through

colonial mappings of physical boundaries and calculated influences on local cultural

norms and practices. Although most scholars have examined it from a political sense of

'tribalism,' there is evidence for acknowledging a long history of Luo identification. In

addition to discussing the role played by tribalism/ethnicity in colonial Kenya and the

freedom movement, this chapter explores the historical development of the Luo identity

from their migration from their original home in Southern Sudan to their settlement along

the shores of Lake Victoria. I examine the changes they underwent as they migrated.

These changes, necessitated by their new environment and neighbors, include

transitioning from a pastoralist community to dependence on agriculture and fishing, and

changes in language and cultural practices. I continue to trace the evolution of the Luo

through the colonial period as this period was particularly important in shaping the Luo

as a community. Due to urbanization, labor migration increased and Luo youth

increasingly left their rural homes along the shores of Lake Victoria to search for

employment in regional and international towns. As a result, they joined community and

welfare organizations (e.g. The Luo Union) that were seen as providing a broad-based

cultural identity beyond the physical boundaries of Luoland. In addition to the emphasis by many scholars on the role of these organizations in resisting colonial rule and mobilizing grassroots support for larger political organization, I discuss these unions and the role they have played in shaping changing notions of Luo cultural identity.

One of the main criticisms that led to the abandonment of the notion of 'tribe' was that its conceptualization assumed an ahistorical approach, in which tribal groups were characterized as backward, because they did not have documented accounts of their history. Commonly, tribes were understood only in the context in which they were found by European explorers, missionaries and colonial administrators. The discontinuity misrepresented the different ethnic groups and failed to show the transition of the groups and their interactions with each other over periods past. In view of this criticism, a re-examination of the conceptual foundations of the discipline of Anthropology was done, African scholars from different disciplines ranging from History to Religion, were involved in the study of the social realities of African peoples' past.

In this chapter, I attempt to bring to life the social realities of the Luo people from a historical angle. By reviewing literature about the group's history from over a century ago, I show how kinship behaviors and inter-ethnic interactions and integrations in past periods continue to be relevant in current perceptions of ethnic and kinship relations. Luo people have been deemed to be 'backward' by other ethnic groups in Kenya, mostly because of the perception that they are rigid adherents to a set of cultural values and practices that have no relevance in contemporary society. While it is true that many pre-colonial and colonial accounts of African peoples portrayed them as 'backward', in Kenya, the Luo's cultural values and practices were particularly portrayed negatively by

missionaries, explorers, colonialists and anthropologists. It is on the basis of these accounts that the perception of rigidity and backwardness for the Luo persists in Kenya. The historical journey unveiled in this chapter links the contemporary Luo to their past, by showing the progression of the Luo identity over time, through different social, economic and environmental circumstances, dispels the notion that they are resistant to change.

The Construction of Ethnic Identity in Africa

The academic knowledge of Luo people is often in the form of anthropological and historical texts that are obtained through oral narrative. Documentation of the Luo began with the early explorers, missionaries and colonial administrators, most of whom were informed by the 'Hamitic hypothesis', that significantly influenced academic and lay people's understanding of the Luo people and their place in East African ethnicity. The 'Hamitic hypothesis' is a concept that emerged from the period of philological research and 'arm chair' theorizing, using texts collected and translated by missionaries, travelers and colonial administrators in Africa. It is also during this period that sociological analytical approaches were developed, seeking to focus on 'native' terms and, in the process, classify African languages and peoples according to relatedness. For example, according to Thornton, (1983):

> "the term Bantu had even further reaching historical effects, both intellectual and political, since it came to designate, ambiguously, an imagined 'race', a conjectured common history, a family of languages, a zeitgeist or worldview, a 'stage of civilization', or a culture" (Thornton 1983: 512).

This type of classification extends to include, among other groups, the Cushites

and the Nilotes. While the categorization of these groups emerged from a rigorous study of African languages, some other categories entered into the scholarly discourse on Africa based purely on European speculation. Thus the nineteenth century explorer Speke (1863) is said to have originated the idea that the bearers of culture and civilization to Africa were light skinned Hamitic invaders from Christian Ethiopia. The 'Hamitic hypothesis', which was linked to the Biblical myth of the dispersal of the 12 tribes out from Israel, provided Europeans with a set of ideas that enabled them to 'explain' the physical and cultural differences they encountered in the region (Wolf 1994). In exploring early European scholarship, Campbell (2006) cites the example of the 'Abacwezi', who were a light-skinned group of people that bore the royal lineage in Central African mythology. It is unclear how these mythic characters turned into real persons, but according to Berger (1980), one of the main contributors to their personification was a British administrator called Harry Johnson. Johnson argued that the light-skinned Abacwezi were in fact 'alien rulers from the north' who were the source of African knowledge of plant domestication, iron smelting, music, etc. (Berger: pg 68)

Further examination of European writing and discourse among newly educated Africans shows the ways in which the Hamitic hypothesis, even though devoid of a factual basis, was used to demonstrate power relations between coexisting ethnic groups, and to justify European dominance (MacGaffey 1978). For example, Berger (1980) shows how in the 1950s, Ugandan African elite used the Hamitic hypothesis to present themselves as heirs/representatives of the superior European outsiders in order to enhance their own claims and the status of their kingdom.

Nowhere has the effect of the use of the Hamitic hypothesis been as manifest as

the widespread ethnic violence and subsequent genocide in Rwanda in 1994. Colonial

administrators in Central Africa developed an especially pernicious, racialist version of

the Hamitic hypothesis to differentiate between African 'races' and to justify colonial

forms of governance. To quote De Waal (1994:3)

> ". . . European conquerors . . . seized upon the occupational categorization,
> imbuing it with a hierarchical racial classification. The Tutsi minority were
> identified as a Hamitic aristocracy, who ruled a state with such sophistication that
> they could only have originated from a place geographically, culturally and above
> all, racially nearer Europe" (DeWaal 1994: 3)

Through the issuance of ethno-racial identity cards, the idea of the Hamitic

hypothesis spread beyond the colonial administration sphere and got internalized by

native Rwandese people. Tutsi extremists made use of their version of the hypothesis to

claim intellectual superiority, while Hutu extremists employed theirs to insist upon the

foreign origins of Tutsi, and the authenticity of Hutu. No matter which side used the

Hamitic hypothesis, however unwittingly, it reproduced a colonial pattern that

essentialized ethnic difference, justified political domination by a single group, and

nurtured a profound thirst for redress and vengeance on the part of the disadvantaged

group (Taylor, 1999). This racial schema persisted after Rwandese independence, and

contributed to widespread ethnic violence and the 1994 genocide.

As was the case in Central Africa, colonial administrators used the Hamitic

hypothesis to conquer and establish colonial rule in Kenya. Based on labels for groups of

tribes with linguistic and cultural affinities, the Luo, Dinka and Nuer were categorized as

Nilotic/Nilo-Hamitic (adduced from comparisons of names used for different body parts

for the three tribes). However, in the 1950's, there was growing disagreement with

principle behind the Hamitic hypothesis. Crazzolara, a priest supported by the Istituto

Missioni Africane, stated:

> ". . . I do not agree with the school of ethnology which prefers to use artificial and, in my opinion, meaningless terms such as 'Nilotic', 'Nilo-Hamitic', 'Sudanic' etc. as labels for groups of tribes with linguistic and cultural affinities. Here . . . we are dealing with clearly distinct racial political communities, and it is both more accurate and more convenient to use the group names by which they have been known to one another for centuries, that is to say 'Lwoo', 'Lango', and 'Madi'" (Crazzolara 1961: 141).

In raising questions about the validity of the Hamitic hypothesis and the concept of 'race', Crazzolara and other scholars in the mid 20th century succeeded in redirecting the focus on culture, and conceptually replacing 'race' with tribe, and most recently, ethnicity. Latter anthropologists such as Southall (1970) and Lentz (1995) have also criticized attempts to delimit clearly bounded social groups such as race, ethnic groups and tribes. The idea that culture was something that was produced and passed on by distinct and socially bounded groups led to the need for a historical examination of distinct ethnic groups. The historical approach attracted scholars from different disciplines, mainly history and anthropology, who used a methodology for comparative research based upon the analysis of oral tradition. Despite their acknowledgment that memory contained in oral testimony is affected by the passage of time, Crazzolara and his successors in history and anthropology saw the idea of collecting and analyzing oral testimony as an important tool to unlock history.

As much as the Hamitic hypothesis has been rightly discredited since the colonial period, I felt the need to revisit it in this dissertation because of its impact on the way that ethnicity was conceived at the time, and continues to be perceived today. In the case of the Luo, they continue to be classified as 'Nilotes', a category that spun out of the a linguistic analytical frame that was directly informed by the hypothesis. By talking to

many Luo, it was clear that they did not understand the origins of the category, but they

associated it with the Nile river, which is where the historical record indicates as their

origin.

The study of the Luo

> ". . it is not possible to reconstruct the histories of the Northern, Central, and Southern Luo groups separately, it is not possible to trace the history of all the Luo peoples to the first man, Luo. This is because oral traditions are concerned not so much with the ultimate and historical origins, but with the foundation and maintenance of existing institutions. Crazzolara's attempt to trace the history of the Luo people as far back as A.D. 1000 is thus a futile exercise" (Okot p'Bitek, 1971: 3).

As mentioned above, the use of oral tradition to examine culture and history was

widely criticized because of the high possibility that such information was based on

memory, which was itself subject to distortion with the passage of time, as well as

passage of information from one person to another, or generation to generation. Indeed,

according to scholars such as Ugandan Okot p'Bitek (1971), it is not only the issue of

recollecting the past that limits the use of oral tradition, but also the use of mythology in

generalizing. He argues that all myths 'are about the foundation of existing institutions

and political groups.' Despite this criticism, analyzing oral tradition was the most

common method of examining culture and the historical development of distinct ethnic

groups in the middle of the 20th century (Vansina, 1965). In anthropology, Evans-

Pritchard was the first professionally trained anthropologist to study the Luo in the 1930s.

He did his study in the area around the Kavirondo Gulf, currently Winam Gulf, in

western Kenya. His fieldwork lasted about 6 weeks, after which he had to leave due to

illness. His principal purpose was to survey the political structure of the Luo whom he

believed to be closely related to other Nilotic peoples such as the Nuer and the Dinka. Evans-Pritchards described in detail the Luo people, their area, culture and social structure (1965a, b). He has been criticized for the limited period he stayed in the field, and the lack of language proficiency to efficiently conduct interviews. Also, due to language barriers, he only managed to interview an elite group of Luos, mainly Christian converts.

Southall (1953) also conducted fieldwork among the Luo (Alur) of Western Uganda. In his work, he argued that the Alur were intermediate between the acephalous Luo of Kenya – to whom they were related by history, migration, language and culture – and the centralized political states of Bunyoro and Buganda. His objective was to describe and analyze the process by which the Alur had come to dominate other peoples without the use of force. In effect, he contributed to the conceptualization of the segmentary political system.

Okot p'Bitek, a British-trained Ugandan anthropologist was one of the first native anthropologists to study the Luo and publish primarily for African audiences. His *Religion of the Central Luo* (1971) argued against nineteenth century European theories, and in particular the Hamitic theory which, he believed, devalued the contribution of Africans to the history and culture of the Great Lakes. Okot also sought to refute the work of Christian missionaries, who he argued had mistranslated Luo into English in order to convert Luo people to Christianity. In many ways, Okot's work differed significantly from previous works such as that of Evans-Pritchard and Southall, since he presented it as a rebuttal to European theories such as the Hamitic hypothesis. In terms of methodology, he put less focus on participant observation and emphasized the use of

myth, song, ritual and poetry to establish theories of religion. Also, Okot was Acholi, an ethnic group closely related with the Luo, which enabled him to eliminate the language problems that previous anthropologists experienced. For example, while Evans-Pritchard interviewed his Luo informants through an interpreter and Southall gained basic competence in Dholuo midway through his fieldwork, Okot's competence is clear through his demonstrated use of vernacular concepts, though he does not explicitly declare his knowledge of Luo.

Historians took a different approach from that taken by anthropologists to study the Luo. Their main concern was with ensuring that all historical research was based on 'facts' – taken to mean documentary records. Like in most African communities, the Luo used oral tradition as their source and medium of sharing information from generation to generation. This meant that in the absence of documentary records, it was essentially thought to be impossible to have a historical analysis, except by relying on European sources, archives, the work of missionaries and administrators, or fieldwork (Evans 1997). An example of such work is Oliver's (1963) work, which focuses on Uganda and Luo history. His account is mostly based on secondary sources - the accounts of missionaries, historians, anthropologists, and 'literate Africans' and colonial district books. He relies on genealogical evidence based on clan names to explain the survival of groups coexisting or incorporated by the Luo.

Based on the work of Vansina (1965), a new type of historical analysis developed based on the 'voices' of the Africans being studied. In East Africa, this type of historical analysis was initiated by Bethwell Ogot, a Kenyan Luo, who, in his H*istory of the Southern Luo* (1967) distanced his research from work that blurred the distinction

between collecting and analyzing oral tradition. He considered the work of such people as

Crazzolara as lacking context and therefore, difficult to interpret and misrepresenting the

record. He also criticized anthropologists for approaching the subject with preconceived

theories and analyzing those aspects of oral traditions which relate to their theoretical

models, especially myths, legends and genealogies. Ogot, like Crazzolara and some

anthropologists, assumed the existence of clearly bounded and socially discrete 'clans'

that were believed to exist through time as culture-bearing units. In this way, clans were

linked with the concept of 'generation' enabling a chronology to be calculated for Luo

migration. He has been criticized for relying on information gathered from the elders,

who were assumed to be the custodians of cultural knowledge, thereby lending academic

support to elite male views which were subsequently recorded as undisputed 'facts'.

Most recently, there have been studies done in Luoland to address the question of

Luo identity. For example, Cohen and Odhiambo's (1989) *Siaya, The Historical*

Anthropology of an African Landscape takes up the challenge of providing a voice for the

Luo by contrasting the views of anthropologists (who are said to see the Luo as an

exemplar of a segmentary patrilineal society) with those of historians and differently

positioned Luo who are represented as active social agents involved in producing their

own culture and history. Though the contrast overly simplifies disciplinary difference, it

provides an interesting segue into differing discourses about what it means to be a Luo.

For example, separate chapters address the issue of social and geographic boundaries; the

meaning of 'Siaya' as a homeland (for run-away fathers, migrants, and the elite); the

problem of 'land hunger' (for the urban rich vs. the rural poor); and the paradox faced by

rural widows whose efforts to gain control over their lives are frustrated by men.

While the reviews above point to differences in approach to the historical study of the Luo, the past 40 years have witnessed a convergence between anthropology and history. Both disciplines undertake extensive and detailed fieldwork, relying, at different degrees, on local language and local 'voices' in their studies (Faubion 1993). Some scholars (e.g. Krech, 1991) have argued that the convergence is based on shared theoretical approaches, and the growth of interdisciplinary collaborations that have essentially 'blurred' the theoretical and disciplinary boundaries. While others (e.g. Campbell, 2006) focus on methodological issues that are concerned with linguistic competence in fieldwork, linking theory, method and data, and the interpretation and presentation of findings to reflect local meanings. I concur with Campbell when he states that:

> "...in view of the many limitations of academic research and of the myths that it has helped promulgate, we need to recognize that our claims to authority – in terms of our ability to represent other cultures and/or to capture and define an authentic African 'voice' – are limited. These limitations should be explicitly acknowledged in our accounts by discussing problems of research method, language competence, etc. and by stressing how comparative study is important (e.g. to understand shared culture, and that 'historical' accounts are constructed) so that lay readers are not left with the impression that research is only or even primarily about discovering cultural difference" (2006:14).

It must be kept in mind that the information used to construct Luo historiography is primarily collected from oral traditions that are preferred by historians. These oral traditions mainly give the story of the people's migration, settlement, external relations and interaction, as well as internal development of the society. There is another type of oral traditions that relates to origins of societies, and they are often expressed in the form of myths and legends, and are generally very difficult to interpret. In this chapter, I shall

attempt to use both of these approaches to gain an understanding of the evolution of Luo identity through the years. I believe that myths and legends in this case are of historical significance because they enable the researcher to understand the underlying principles and ideologies of what constitutes *Luoness,* just as it is important to use information about migration, settlement and interaction to understand the internal development of the Luo over the years. As such, I will explore records in different fields, including history, literature and anthropology, to examine the development of Luo society, and anchor their notions of identity within ideological and historical contexts. To do this successfully, it is important to understand the nature and characteristics of the cradleland of the Nilotes, the motivation for their migration, the nature of adaptations which they have undergone during their movements, and the mutual influences coming from their interaction with different groups that they encountered during these movements.

Historicizing the Luo Identity

The Southern Luo are people of "Nilotic" origin. The Nilotes occur in three major categories: the Northern, Central and Southern Nilotes. The Northern Nilotes consist of the Dinka, Nuer, Shilluk, Anuak, together with their offshoots such as the Pari, Luo of Wau, Bor and Atwot), while the Central Nilotes consist of the Acholi, Palwo/Paluo, Lango and Alur; and the Southern Nilotes consist of the Luo and Padhola. Linguistically and culturally, these groups can be divided into two main groups: The Nuer-Dinka Nilotes and the Luo-speaking Nilotes. The Luo-speaking Nilotes can further be grouped into two categories: 1. The Shilluk, Acholi, Anuak, Palwo and Lango 2. The Alur, Padhola and the Kenyan Luo. This latter group is not only similar and mutually

intelligible language, but they have also undergone certain morphological changes that are not evident in the other Nilotic groups. The term 'Nilotic', however, is not found in the linguistic vocabulary of the Eastern Sudanic languages, which are believed to be closely related with Dholuo language. Some of the names such as 'Shilluk', 'Acholi', 'Alur' or 'Nilotic' were coined by European travelers and Christian missionaries, based on the logic of the Hamitic hypothesis. Latter scholars such as Crazzolara (1951), Butt (1952) and Lindblom (1927; 1949) followed the travelers' and missionaries' notion of the Hamitic hypothesis and categorization of the Luo as Nilotes, and in some cases, as 'Nilo-Hamites'. Some names were also created by their neighbors, and they remained permanently attached to some of the Luo national groups. In many cases, Luo people rejected these names as they did not hold meaning to them. A good example is the Paluo group in Uganda, who do not call themselves 'Chope', a name given to them by their neighbors, the Banyoro, with whom they continue to share a good relationship through the years. Ocholla-Ayayo (1976) argues that Luo people saw the need to stress their identity as Luos as they migrated south and settled in areas where they encountered groups that greatly differed from them linguistically and culturally. They stressed that they were '*Joluo*' and not 'Nitlotic' people.

The Nilotes usually refer to themselves as '*Jonam',* which directly translates as "the people of lakes and rivers". The name by which the Luo of Kenya are known is, perhaps, the oldest name of the people that are often referred to as 'Nilotic' people. It is the name of the language that is spoken by groups in the Sudan, Ethiopia, Congo, Uganda, Kenya and Tanzania. The Luo-speaking people trace their dialects to the language that the Southern Luo use as their national name, which unites not only the

Southern Luos, but also their ancient kin in the cradleland in the north.

The word 'Luo' takes several meanings but it is most understood to be a reference to the Southern Luo people (particularly the Kenyan Luo). It may also refer to the Luo language or to the people generally referred to as Nilotes. The original words were a variation of 'Luo' (e.g *Luwo, Lupo, Luw*), which means 'to speak', 'to follow', or 'to to come after'. The term '*Lupo*' also means fishing and '*Luo rech'* means 'follow fish'. From the linguistic evidence, it appears that '*Joluo*' comes from the term '*Jolupo*', which means 'fishermen', or 'people of the river or lake'. This is the term that the 'Nilotes' seems to imply since it is used to refer to all peoples who previously lived along the Nile valley. Presently, some Luo groups do not live close to the fishing ground and therefore, no longer regarded as fishermen, but they are still Luo-speaking people. Also, the term *'Luw Dhok',* which means 'come after cattle' is an important reference, especially that historical traces (which is discussed later in the chapter) show that the Luo were cattle keepers at a certain period in their history.

The history of the Luo southward migrations has been studied systematically by several scholars, but the most referenced is Ogot, whose book *History of the Southern Luo,* is viewed as a pioneering study in the documentation of Luo oral tradition and history. According to Luo oral tradition, before their original migration, their homeland a place called *'Dhowath',* or sometimes referred to as '*Wi-Pach',* which was somewhere in eastern Bahr el Ghazal or Gezira, the "island" of fertile land between the Blue and White Niles south of Khartoum. In this place, they were all still together as one Nilotic unit. It is not clear when the Nilotes evolved into a distinct group, but most authorities (e.g. McMichael, 1922) suggest that it was around 1000 AD that this group lived in the Bahar-

El Ghazal area. Due to population pressure, among other external factors, the Nilotes

began to expand beyond the Bahar-El-Ghazal, and the first groups to move were the

Dinka and Nuer, whose evidence shows that they moved not too far from their original

home. Their oral traditions indicate that they have the same ancestor, so they are believed

to have split from the larger Nilotic group as one unit. However, there is no information

as to when and why they split further into Nuer and Dinka (Evans-Pritchard, 1933).

Left on the original land were the Luo-speaking people, who were under the

leadership of three brothers: Dimo, or Odimo was the leader of the Luo, Gilo, who was

the leader of the Anuak, and Nyikang'o or Nyikang, who was the leader of the Shilluk.

They then dispersed. Although the reasons for their dispersion are not explicit, it has been

often attributed to acts of man and nature. It has been speculated that there were tensions

between rebellious sons seeking their independence from their father; fraternal disputes

among brothers, droughts, which frequently drove the Luo in search of new grass for

their cattle; and pressure from the Ja'aliyyin Arabs making their way from upper Egypt to

the Blue Nile. But the most common oral tradition of the cause of their dispersion was a

quarrel among the three of the brothers, Nyikang', Dimo and Gilo (Evans-Pritchard,

1940).

"The great quarrel" is believed to have been sparked by a loss of beads by the

child of one of the brothers, who then accused the child of one of the other brothers for

the theft. These beads were particularly significant because of the symbolism they held

for the owner. In Luo tradition, marriage is arranged according to seniority at birth, so the

eldest son is usually expected to marry before any of his siblings. The boy would be

betrothed to a girl of the parents' choice, and the 'couple' perform an oathing ceremony

(*otoya*) in which they would exchange beads to symbolize their unity and devotion to one another. The ceremony involves slaughtering a goat brought by the boy's parents, cutting the goat's ear and tying it around the neck of the boy/girl. Also, a bead is tied around the girl's or boy's neck. Later, the ear is removed and the bead remains to symbolize this commitment. It is within this context that one child swallowed a bead belonging to a child from another family. The child whose bead had been swallowed insisted to have it returned, and his/her family supported his/her demand. To retrieve the bead essentially meant that the child who had swallowed it had to die. Disagreement arose between the two families, as well as other families that supported or resisted the idea of retrieving the bead.

At this point, the families split and migrated in different directions, under their respective leaders. When the Luo began to move southward from the Gezira remains unclear. Historical linguistic analysis infers that these migrations took place sometime in the twelfth or thirteenth centuries, but long before the Dinka followed the Luo into the southern Sudan. By the fourteenth century oral traditions firmly place the Luo in the vicinity of Rumbek in the Bahr al-Ghazal. In the fifteenth century the Luo began to move again, more rapidly than in past centuries. Dimo and his followers departed to the south and west to settle eventually in the vicinity of Wau, an area on the shores of the White Nile, where they encountered the Dinka, under the leadership of Dengdit. Dengdit and his people received them well, and named the '*Jur*', which means stranger. Some moved further to Lipul Hill where they founded and settled in Pugeri, Bura, Puchwa, Wiatuo and Angulumere villages. Some proceeded southwards. It seems that those who moved further south later formed different Luo communities in Uganda, Kenya and beyond.

The second group was led by Nyikang'. His numbers now diminished, Nyikang' moved his people slowly north and east, absorbing many non-Luo people along the way, undoubtedly to strengthen his little band. Dale, son and successor to Nyikang', ultimately settled along the White Nile, and thereafter the Shilluk, as they were called, dominated the White Nile until the mid-nineteenth century.

The third group, led by Gilo also disengaged themselves from the main body, migrating north and east to the Sobat River, where some remained, the main body continuing upstream to settle at the base of the Ethiopian escarpment in the valleys of the Baro, Pibor, and Akobo rivers. They are known today as the Anuak. Some eight or ten generations ago, in the seventeenth century, a splinter group moved south from Anuakland to Lafon Hill where they were called the Pari, while a second clan, the Pajook penetrated further south into Acholi territory in northern Uganda. Led by Gau, a third splinter group in Gilo's band appears to have meandered northwestward from Lake No into southern Kordofan, a more arid region they called Ker-Kwong. Since it was customary for each of these Luo groups to absorb others during their migrations, it is not surprising that Gau married Kwong, a non-Luo, who gave birth to Gaa, who as Land Chief acquired the title of "Chief of the Leopard Skin" and the most dominate leader of those we know now as Nuer.

The initial numbers of Luo migrating southwards were small and the pace of their migration was over such a long period (300 years) that it could be most accurately measured by generations rather than decades. Ogot eschews a search for absolute dates in favor of a 'relative' chronology defined as the estimated length of a generation. According to his definition, a generation is the time that elapses between the birth of a

man and his first surviving child. Based on interviews, Ogot calculated a 'generation' as 26.5 years, which enabled him to date Luo migration to western Kenya back 16 generations (to AD 1490–1517 plus or minus 52 years and concluded that migration was still occurring during the arrival of Europeans. In this manner, Ogot sought to put historical research on a scientific basis.

According to Ogot's historical records, the Luo migrants led by Dimo or Odimo further split into different groups as they migrated further into Uganda, Kenya and Tanzania. They include the Acholi, Alur, Paluo, Padhola, among others. The Luo currently living in the Western part of Kenya came from these four major groups. The oldest and biggest group, the *Joka-Jok,* broke off the Acholi, another group, *Jok-Owiny*, from the Alur and the third group, *Jok-Omollo,* broke off from the Padhola. The fourth group is a heterogeneous group comprised of members hived off the Baganda, Basoga, Paluo and Gusii, among others. The *Abasuba*, as the fourth group is known, consider themselves as completely separate from the Luo. It is important to note that all these groups from which the current Kenyan Luo emerged are all in Uganda. While they were all all initial followers of Dimo, some of them were absorbed from the Shilluk, Nuer, Dinka and Anuak, as they migrated south. In the next section, I will discuss the settlement of the *Joka-Jok,* which is the largest and earliest Luo group to settle in Nyanza.

The Kenyan Luo

Strictly speaking, the identity of the Kenyan Luo as we know them, was established only after they began to settle in Nyanza. There is evidence that prior to that, there was no single group called *Jo-Luo*. However, oral tradition among the Luo has it

that they all originated from a common ancestor, and variable mythical figures such as Luo, Podho and Ramogi, among others, are indiscriminately associated with different clan genealogies. These narratives made some early scholars such as Evans-Pritchard, Southall (1952) and Wilson (1954) conclude that Luo people all descended from a common ancestor. For example, Evans-Pritchards' states that:

> "All the Luo clans ultimately trace their descent from the same mythological name of Podho and Ramogi, so that it would be possible to place them all on a single chart of descent." Pg 31.

Ogot (1967) disagrees with the idea floated by Evans-Pritchard, Southall (1952) and Wilson (1954) that Luo people descended from a common ancestor, an argument which he bases on the fact that most of the ancestral names cited in genealogical narratives are mythical figures. For example the *Jok* in Nilotic dialect means God or Spirit, and so when *Jo-luo* declare that Jok is their eponymous figure, they are likely acknowledging their divine origins or beliefs. In an article entitled "Anthropological Studies in Kavirondo and Nandi", Hobley (1903) discusses another version of the origin of the Luo, in which he talks to elders from three different clans. Although their accounts vary a bit, the information the elders provide suggest that the Luo descended from Podho, who is believed to have descended from the heavens at Ramogi (which is located in Northern Uganda). He died there, and his son named Ramogi migrated and settled at Ramogi Hill in Nyanza, Kenya. In these narratives, Podho is often associated with the introduction of Luo traditional food crops such as millet, sesame and cassava, and also cattle, fowl, and even fire. While these narratives are mythical and the figures non-existent, it does not mean that they have no historical relevance for the Luo. In fact, there

is some historical truth to some parts of the narratives. For example, Hobley and Crazzollara are in fact convinced that the Southern part of Agoro region in Uganda was at onetime known as Ramogi. Podho with food and mainstay activities is, to my interpretation, an attempt for the community to justify their lifestyle in a way that is divine.

The settlement of the Luo in Nyanza has often been characterized as a conquest by a unified group of twelve clans that fought a series of fierce battles to take over land from the former inhabitants (Ayany, 1952). On the contrary, Ogot writes that the Luo migrated into their current region in two waves and that the process was "diversified, irregular and disorganized". In fact, he shows that each of the sub-groups, which later evolved into sub-tribes, acted independently, sometimes against each other in order to gain land for settlement.

The first wave consisting of the group *Joka-Jok*, was the largest and most significant in the study of Luo history. The study of the history of the *Joka-Jok* represents not only the initial Luo migration into Central Nyanza, but also marks the initial move of the Luo into South Nyanza, where they later spread further South into Tanzania. While Joka-Jok claim to be direct descendants of Ramogi, the founder of the Luo permanent settlement in Ramogi Hill in Nyanza, they are comprised of different clans/leaders living in different parts of Nyanza. Chwanya was regarded as the leader of the main clans (e.g. *Kanyamwa, Karungu, Kadem and Kabwoch)* but all the members were descendants of Jok, who was the son of Ramogi, the legendary figure cited in oral narratives. From the area around Ramogi hill, they began expanding to eastwards and southwards to areas such as Alego, Sakwa, Asembo and Uyoma. It seems that the migration and settlement in

this region was slow and peaceful, since there is no reference to war or violent encounter with the communities that inhabited the area. On the one hand, there is suggestion that it was during this period that began the revolution of Luo lifestyle, transitioning from a semi-nomadic to agricultural economy, and their characterization as a stateless society to a chieftainship. On the other hand, scholars such as Ogot argue that this period was viewed as a temporary stop by the settlers since they did not categorically conquer or impose their way of life on the natives. Nevertheless, it is at this period that each of the groups formed the core of their future sub-tribes, though the consciousness of belonging to one group, the Luo, was not formed yet.

The second wave of settlement was forged by the Jok-Owiny, led by Owiny, and Jok-Omollo, led by Omollo, who expanded and settled in Central Nyanza. There were other groups that cannot be clearly put into certain lineages, especially because during migration, Luo groups mixed and intermarried with Bantu and other Nilotic groups along the way. It is clear that during their settlement in Nyanza, the Luo rarely exterminated the original inhabitants, instead, they absorbed the groups into their fold. For example, the Jok-Owiny conquered and assimilated native groups such as the Bagwe, who are believed to have been absorbed by Owiny's group, and referred to their new rulers as '*Rapuoth',* meaning 'the royal clan'. The pattern of settlement shows that land was owned on the basis of lineage, depending on the clan or lineage that conquered and dominated. This pattern where genealogy is closely linked with spatial occupancy continues to determine land ownership and distribution among contemporary Luo. The pattern of settlement for the Luo tells the story of a migrant community that, on the one hand, changed their landscape, and on the other, the environment gradually changed their

economic and cultural mode of living. This is exemplified in their gradual adaptation of land cultivation, animal husbandry and fishing, and a permanent settlement in an area where they identified as home. In the next section of this chapter, I will discuss the relationship between these three means of subsistence and how they changed the community's attitude towards land, and cultivated a sense of belonging for the Luo.

Luo, Land and the Concept of Home

During their migration across the Gulf (currently Winam Gulf), the Luo encountered the Gusii, Lango, Luhyia, Maasai and Nandi tribes, all of whom they fought and mixed with in the process. They finally settled in the area bordering Lake Nyanza (currently Lake Victoria) and extending into Tanzania. The settled groups were agriculturalists as well as pastoralists. Their closeness to the lake allowed them to begin fishing, in addition to agriculture and pastoralism, and allowed them to supplement their diet of grain and milk, with fish.

From the naming pattern, we can determine periods of mobility and periods of settlement. For example, according to Ochola-Ayayo (1976), at the time of their arrival in South and Central Nyanza, the groups used '*Jo'* as a prefix denoting their ancestry – e.g *Jok'*Owiny, *Jok'*Omollo, *Jo*Paluo, etc. '*Jo'* is prefix that means "people of", then followed by the name of the leader of the migrating group. In more settled situations, the prefix '*Ka'* is used before the name of the leader of the group. '*Ka'* means "land of", and then followed by the name of the leader of the group. This suggests that the group is claiming ownership of certain territories under the leadership of the person whose name the group bears. This particular shift in attitude towards land is very significant in understanding the

gradual change within the Luo society. Their preferred name of *'Jonam'* or "the people of the lakes and rivers", suggests that their migration and settlement patterns were significantly influenced by their original habitat, which was essentially on the shores of the Nile, where rainfall occurred only once a year and flooded the Nile, its tributaries and the land along the shores. During this period, they moved away from the shores onto the vast spaces of land, much of which was not suitable for cultivation, and the climate and surroundings necessitated periodic shifts to more suitable habitat at the time. Unlike the European or Chinese peasant, whose lifestyle is always depicted as dependent on land resources, which in time of scarcity, forced him/her to settle in permanent habitats, the Luo did not have a particular attachment to land. Until they settled in Nyanza, they did not feel the need to be tied to a piece of land or the compulsion towards its intensive cultivation or maintenance of its fertility. These semi-pastoralists could often move from one place to another where they could find fertile soil and greener pastures for their cattle, which was the source of their economic power and social status. An example is given by Ogot who points out that there is an obvious absence of mystic categories, such as 'Goddess of fertility', ' Earth cult' or the connection between Mother earth and the man who cultivates it, which are always found in the ideology of many peasant communities. The Luo values land as a place to build his homestead, and the ideal location would be on a slope that descends towards a valley with a river or stream. According to Ogot (1967), a man would even move away from land on which his father's grave lay to land miles away, so long as the new piece of land was more fertile and safe to accommodate his head of cattle.

From the geographical migration southwards, this traditional attitude towards land

gradually changed. Initially, it seems that the Kenyan and Tanzania Luo were moving into areas that somehow resemble their original cradleland in the Sudan – flat and hot. Unlike the Bantu communities that they encountered during their migration, whose economy was based on a forest environment, and therefore preferred to occupy highland and high rainfall areas where they could practice crop production, the Luo preferred to settle in the short grassland or Savannah woodland areas, suited for a mixed economy of crop production and pastoral activities (Hobley, 1902). The Kenyan Luo clearly avoided settling in highland areas such as Nandi hills, Kisii hills and Kericho region when they first arrived in western Kenya. However, this settlement pattern began to change for two primary reasons: First, they migrated into forested areas, where agricultural economy was more suitable. Gradually, they began to cultivate land alongside their traditional mainstay of livestock keeping. The shift led to less movement in search of pasture for their livestock and a semi-permanent settlement in their new homes. Ogot states that during this period, "Most of the Kenya Luo, for example, who were traditionally much more attached to their flocks than to their fields, are now much more attached to their fields and some are even prepared to do without their flocks." (Pg. 39).

Secondly, the increasing number of Luo people settling in forest areas alongside original communities produced a scarcity of land. As such, some Luo people opted to move to high rainfall areas such as Gem, North Ugenya and Kisumu. Here, they adapted a mixed economy system that was different from their neighboring Luhyia (Bantu), as well as Luo people in the grasslands. The shortage of land altered their attitude towards land use and ownership. Further, the freezing of the boundaries by British created an economic problem for the Luo, who were accustomed to living a semi-pastoralist

lifestyle, moving from one place to another in search of pasture for their animals (Butt, 1952). As mentioned earlier, the Kenyan Luo emerged from Luo-speaking groups in Uganda and settled in Nyanza, Kenya. Nyanza Province has historical as well as geographical importance in examining the links between Kenya and Uganda. Although politically and administratively Nyanza belongs to Kenya rather than Uganda, all the links among present-day communities are with Uganda rather than with the rest of Kenya. The modern history of Nyanza may be described as a deliberate attempt by colonial administrators to estrange this region and these communities from their counterparts in Uganda. Since this superficial boundary was curved out in 1902, the Luo in Kenya feel that they share more with Kenyan Bantu groups such as Luhyia and Gusii, than they do with their kin in Uganda (Ogot, 1967).

Early Political Organization

Regarding political organization, it appears that there was an evolutionary political system in which chieftainship and territorial groupings were becoming dominant over groupings based on kinship relations. Political unity was determined by who settled in a particular conquered territory, and a territory could be occupied by diverse clans or lineages, some of which were unrelated and occupying their own settlement. They were politically bounded by their shared territorial boundaries. Contemporary administrative boundaries are based on these territorial boundaries set up during the second wave of settlement in Nyanza. Evans-Pritchard and Southall have denied this evolutionary political system among the Luo, and instead emphasized kinship as the core of political organization. The two have been criticized for misinterpreting and misrepresenting their

findings. Evans-Pritchard has been criticized for using information that he gathered over a period of only two weeks, and therefore, lacking in depth and accuracy to lead to the conclusions that he reached. Southall has been criticized for having done his work among the Karachuonyo, a sub-group of the Luo in which most members were from a particular clan, or related to members of that clan by marriage, making it effectively a political unit of related members. This case is not typical of Luo political organization, and therefore, it is misleading for Southall to suggest that all Luo political systems are based on kinship. In reality, political organization varied from clan to clan or sub-tribe to sub-tribe, as Wilson (1965), a social anthropologist shows in his study of communities in Gem, Alego and Kano. His study shows that while some sub-tribes had decentralized loosely organized political units, some had a developed form of centralized political organization.

Scholars who focused on the role of kinship in the political organization of the Luo suggest that at this time, there existed no larger Luo group. Instead, people identified themselves with their clan leader, in a concept they termed 'clan consciousness.' According to the District Commissioner in Nyanza in 1933, the colonial administration regarded 'clan consciousness' as a trend that was often evident in everyday life, through disputes and dispute solutions, leadership positions, physical boundaries and even in positions of service. The administrator further says that the clan divisions were so deep that they interfered with proper government administration as expressed in his quote below:

> " . . Even the missionaries complained that clan feeling made their work extremely difficult in that it was impossible to send a teacher to a school unless he happened to be of the same clan as the people in the locality of the school."
> (Kenya National Archive 1933a)

Southall's and Evans-Pritchards' work seems to agree with the District Commissioner's example in suggesting that Luo people before the 1940s did not regard themselves primarily as Luo. Rather, they identified with their particular clans and leaders, and pledged their loyalties and membership to their clans. According to these scholars, colonial administrators and Christian missionaries, 'clan consciousness' was so deeply entrenched among the Luo that all political organization was organized along similar lines.

Most of Evans-Pritchad's and Southall's critics (e.g. Whisson, 1964; Ogot, 1957) agree that the Luo lived under a form of patriarchy, under which clans and relations from the patrikin dominated leadership roles. However, they argue that these scholars failed to emphasize the existence and role of chieftainship in political organization. The tradition of chieftainship was such that a chief was succeeded by his son, or a very close male agnate who would subsequently be regarded as his son. Such situations often occurred when one clan rose to dominance in a given territory without antagonizing the subordinate clans into smaller factions. In some cases, chieftainships were formed around a figure, usually a fierce warrior or renowned magician (*Ruoth)*, who emerged as a leader during migration and conquest. In these cases, the unifying factor was their common enmity against neighboring sub-tribes, which led them to coalesce around one leader to solve their problems and protect themselves against a common enemy (Whisson, 1964; Ogot, 1957). As suggested by Carotenuto (2006) many Luo-speaking people at this time identified themselves with local area labels that suggested that their group membership was based on location rather than kinship. For example, a person from Gem would say they were *JaGem* and a person from Alego would say they were *Jalego,* rather than

profess their kinship or clan membership. Both Evans-Pritchard and Southall mention this in their work but they opted to emphasize the significance of kinship and fail to acknowledge the importance of chieftainship in the clans that they studied.

However, for the same internal reasons alluded to by Whisson and Ogot - migration, warfare, conquest and assimilation of non-Luo communities -, the system evolved into a different type of organization within marked territories. This involved the gradual discard of semi-nomadic lifestyle and adoption sedentary life on the tribe's marked land. At the same time, there were external factors such as war with non-Luo groups (Bantus and Nilo-Hamites), during which they conquered and assimilated their enemies to form the largest Nilotic group in Kenya and contributed to changes in means of production. It is estimated that the influence of internal and external factors was evident by 1900, though the external factors were most visible in the second half of the 19th century (Ogot, 1957). One of the biggest external influences at this time was the arrival of colonial administrators and the declaration of Kenya as a British electorate. The patterns of large-scale migration were abruptly stopped by the introduction of boundaries and administrative locations based on existing territorial boundaries created along clan lines or chiefdoms. As such, the Luo's movement beyond these boundaries was restricted, resulting in permanent settlement for most of the sub-tribes in Nyanza. The settlement process was complete at the end of the 19th when the Luo eventually settled in non-traditional higher altitude areas such as Kisumu, Gem, Ugenya and Seme. This period represents a momentous period in Luo history when the community changed from their semi-nomadic way of life to a settled, more sedentary style.

It is also during this period that the different Luo sub-tribes and the neighboring

Bantu groups were grouped together by colonialists under the umbrella of the Kavirondo. This identity was given to them by virtue of their location in the Kavirondo Gulf (now Nyanza province.) The Kavirondo were further divided into Nilotic Kavirondo (Dholuo-speaking people) and Bantu Kavirondo (Bantu-speaking people). Among the Bantu-speaking Kavirondo were the Gusii and the Luhyia. The Concept of Luo as a distinct group was not developed but, besides language, the Nilotic Kavirondo and Bantu Kavirondo differed in many ways. I have already talked about the difference in terms of economic mainstay – Luo-speaking people were mostly cattle raisers and semi-nomadic, while Bantu-speaking people were cultivators and lived in permanent settlements. In terms of cultural practices, one of the key differences was in their rites of passage. While both groups valued bravery and warrior skills among their men, their methods of inducting young men into adulthood and warrior class differed. The Bantu Kavirondo used circumcision as a rite of passage while the Nilotic Kavirondo traditional initiation practices involved the extraction of lower incisors for both girls and boys. This traditional physical marker for entry into adulthood is no longer practiced to any significant extent, except in two small islands in Lake Victoria, in the heart of Luoland (Ocholla-Ayayo, 1976). Interestingly, these groups did not identify themselves as Nilotic Kavirondo or Bantu Kavirondo. Instead, they maintained their identity based on their clans, sub-tribes and locations. The Kavirondo identity was only used for official administration by the colonial administrators and Christian missionaries.

        In general, Africans did not passively accept colonial imposition, but responded according to the social change that was sweeping across the continent. Colonialists and other local actors combined to form realignments between ethnic groups and foster an

expansion of locally based identities. In many cases, these newly formed alliances evolved into the larger linguistic and ethnic groupings that we see today. In Kenya during the colonial period, through processes such as labor migration and changing client-patron relationships, combined with wider political developments, larger and more unified ethnic identities emerged than had existed before (Abwunza, 1993; Willis, 1993). In the same vein, the arrival of British colonialists ushered in a new era for the Luo as a unit. While circumstances restricted their movement to designated physical boundaries and locations, the Luo did not lose their migratory tendencies and they slowly continued to move further south to South Nyanza and into Tanzania. Their migratory tendencies in recent times are best exemplified in their movement to towns and cities in the region and beyond. Due to urbanization, labor migration increased and Luo youth increasingly left their rural homes along the shores of Lake Victoria to search for employment in regional and international towns. In the next section, I will discuss how they expanded their landscape beyond the physical boundaries of Luoland to include boundedness that is defined by cultural boundaries. I will also discuss the role that social organizations and welfare groups played in resisting colonial rule and providing a broad-based cultural identity for Dholuo-speaking emigrants.

The Making of the Luo Identity

In Kenya, as elsewhere on the continent, the roots of contemporary ethnic identities lie in the era before independence. As seen previously in this chapter, there is a body of work that highlights how foreign impositions, in the form of colonialism, radically altered African identities across the board, through imposing superficial foreign

borders, altering local authority, and codifying and reworking cultural traditions, values and beliefs. Many of these studies have been from a political perspective, and also from a conceptual perspective of tribal associations as savage and uncivilized. Also in this body of literature, it is commonplace to find the argument that ethnic solidarity is upheld by virtue of shared history and traditions, and common language and religion. Often, the role of social morality and civic virtue has been ignored in defining the boundaries and membership or citizenship within an ethnic group.

The mass labor migrations to cities and small towns during the colonial period in East Africa were integral to the economic survival of African people. Beginning in the early twentieth century, through policies of taxation and coercion, tens of thousands of workers left western Kenya. They served as dockworkers in Mombasa and Dar-es-Salaam, railway employees in Nairobi and Kampala, and agricultural laborers on tea, coffee, and sisal plantations throughout East Africa (Cooper, 1987; Stichter, 1982: Kitching, 1980). This process intensified in the 1940s and 1950s, and by the end of colonial rule, the Dholuo-speaking labor diaspora stretched well beyond the boundaries of Kenya. While this mass migration of young men was integral to their families' economic survival, it presented new challenges with regard to the existence of their ethnic group beyond Nyanza. As a way of coping with the distance from their homes and relatives, migrant young men joined together to form social welfare groups and associations. Initially, these groups consisted of members from the same clan or location of their homes in Nyanza. Also, they tended to live in the same area as fellows from their clans or home areas. For example, the area of Kaloleni in Nairobi was a predominantly Luo neighborhood, with most residents living in sub-sections based on lineage. As the

population in these areas grew, the number of welfare organizations increased. For example, Parkin (1978) observed that there were more than eighty seven clan/lineage-based welfare organizations in Kaloleni by early 1960. With time, larger organizations emerged, mostly comprising of members of different clans converging to form a basis for a larger collective identity based on location of origin.

As the Luo migrant population grew in different towns in Kenya, Uganda and Tanzania, there was a need to consolidate the groups into one umbrella group "to build a sense of unity, common purpose and achievement" (Odinga, 1967:71). The idea of the Luo Union is believed to have been born in Nairobi during the early 1920s, but records of existence seem to start in colonial records in the 1930s and even at this time, it seemed like an ad hoc organization whose activities, as well as those of other organizations in the region at the time, did not suggest that it was a well conceived social unit with a common focus or goal for the members. Only in latter records (after 1945) did the association, led by a group of well (Christian Mission) educated community members such as Oginga Odinga, Walter Odede, and Achieng Oneko, that the association seemed to develop a regional focus whose objective was to unite small clan- and location-based associations and provide social welfare services to community members. Luo Union branches were prominent in most of the major urban centers of East Africa, where Luo neighborhoods came to be called Kisumu N*dogo* "little Kisumu", which invoked a sense of pride in the urban symbol of their homeland. The Union sponsored social events and football clubs, and offered burial and educational assistance to members. Officially, the Luo Union was defined as non-political and since it stayed within the colonially defined ethnic category, it gained some support from the colonial government (Kenya National Archive, 1944-

1948). The colonial government was insecure about the native African moving to town environments away from the supervision and controlling forces of their elders. This, they feared, would provide the natives with expanded social space and 'detribalize' them to the extent that they would operate outside of the influence of their tribal elders, and of the control of colonial administrators. So the promise of welfare organizations to regulate the social lives of native immigrants in towns gained colonial administrators' support as the best counter for detribalization (Kenya National Archive, 1944-1948). It is also during this period that the different Luo sub-tribes are thought to have begun to be conscious of their distinct identity as one group – the Luo.

As the population of Luo people outside Nyanza province continued to grow, the Union continued to increase its membership and in 1953, Oginga Odinga was elected as the cultural leader (*Ker),* a position which was created to serve social and cultural functions of the community. In Ogutu's (2004) word, the *Ker* was the 'defender of Luo norms and values' and not to be involved in politics. Such was the strictness with which the position was regarded that when Odinga wanted to join politics, he resigned his position as the *Ker.* That is not to say that members of the Union were not apolitical. In fact, Odinga the politician enjoyed most of his support from Union members, who continued to support him throughout his career. This support showed the Union's ability to command grassroots support, and this was more evident when Union members were associated with opposition politics.

Much existing work on social-welfare and other voluntary organizations throughout Africa has highlighted their political role in anticolonial struggles and effectively emphasized their mobilization of grassroots support for wider political

movements (Cohen and Odhiambo 1989; Lonsdale 1970; Maxon 1986; Parkin 1969, 1978; Smock 1971; Tamarkin 1973, Ogot 1999). Those that have discussed the Luo Union and other ethnically based welfare organizations have largely underemphasized the role these organizations played in shaping changing notions of cultural identity beyond the political sphere. In his article, *Cultivating Identity in Colonial and Postcolonial Kenya,* Carotenuto (2006) used the idea of 'ethnic morality' to emphasize the role that welfare associations play in ethnic identity in Africa. His argument is in line with that made by Ndegwa (1997) and Orvis (2001), who argue that by their virtue of fulfilling their responsibilities in bringing economic, social and political development to their members, welfare associations can be regarded as custodians of culture, and an important source of cultural legitimacy. The Luo Union, Carotenuto reasons, influenced Luo cultural identity in their new expanded landscape:

> "As Union members and officials spread out from the western Kenyan homeland in the early twentieth century, they detected social decay and immorality in the social changes they experienced. They attempted to consolidate cultural control and shape what Lonsdale has termed "moral ethnicity" (1992, 1994).... As an umbrella organization of diverse Dholuo-speaking people, Luo Union members and officials across East Africa asserted a conservative authoritarian control over the moral boundaries and responsibilities of being Luo" (Pg. 55-56)

The Luo Union, as other welfare unions, is credited with cultivating the national or diasporal identity of the Luo in two ways. First, the union fostered new social networks and established a mechanism of cultural control by promoting social events, like football matches, cultural dances, vernacular literacy and education for the youth, among other activities (Dahya 1963; Parkin 1969). In terms of 'ethnic morality', the Luo union feared that as members moved from their homeland and far away from the control of elders, they were at risk of moral pollution from city life, and so they needed an

institution to give moral and cultural guidance. The social activities that the union sponsored and the networks that it fostered discouraged perceived immoral behavior. The Union has been criticized for applying unequal measure of control of moral behavior. Most of the activities of the 'moral police' were aimed at controlling the behavior of women, who were perceived to be engaging in prostitution, poor dress code and drinking alcohol in towns. In some cases, women were beaten and deported back to the villages by Luo Union members who suspected that the women were misbehaving. Scholars like Carotenuto (2006) suggest that sexual morality was merely a tool by Luo Union members to curtail urban women's agency to keep young women under the control of male elders and ultimately maintain the Luo cultural patriarchal system.

Secondly, the union linked the growing Luo diaspora into one national unit representing the Luo community. The union solidified this new identity by frequently engaging members in debates about definitions of the evolving Luo identity and the limitations of the group across the East African region, which kept all members continually involved, and fostered a sense of ownership as well as belonging. Both of these achievements are understood to have provided a forum for expressions of political solidarity, as well as debates about the social and cultural responsibilities of the wider Luo people.

After independence, the Luo Union, as well as other welfare associations in Kenya, continued to thrive, but in addition to sponsoring cultural festivals and sports activities, their focus assumed a political direction. Fearing the potential of these associations to threaten his presidency, President Daniel Arap Moi in 1980 announced the dissolution of all ethnic-based associations, arguing that they were in conflict with his

vision of national unity (Ogot and Ochieng, 1995). The Luo Union was disbanded shortly

afterwards, though it continued to sponsor football clubs such as *Gor Mahia* and Re-

Union. With the advent of multiparty politics in the early 1990s, the Luo union was

revived and renamed the Luo Council of Elders, this time with its headquarters in

Kisumu (Ogutu, 2004). The Council has continued to carry out its objectives of

maintaining ethnic morality and identity, in addition to preserving Luo cultural

monuments such as Kit Mikayi and Ramogi Hill, and sometimes defended controversial

cultural practices such as wife-inheritance (Ogutu, 2001). In most recent times, the

council has come under the spotlight in the debates concerning the introduction of male

circumcision, which they have continued to resist and advice community members to

resist in an effort to preserve Luo culture.

Conclusion

The historical journey of the Luo as shown in this chapter has passed through

various physical and social interactions, all of which have impacted the way the live and

view themselves and others. It is clear that kinship behaviors and inter-ethnic interactions

and integrations in past periods continue to be relevant in current perceptions of ethnic

and kinship relations. Their history shows that contrary to the belief that Luo people are

rigid adherents to their traditional cultural practices, and less inclined to adopt new

practices, the Luo are indeed very dynamic. The way in which they have been portrayed

by pre-colonial and colonial accounts as 'backward' is inaccurate. The historical journey

unveiled in this chapter links the contemporary Luo to their past, and shows the

progression of the Luo identity over time, through different social, economic and

environmental circumstances and dispels the notion that they are resistant to change. It

also shows us the deep connections that Luo people still hold for their roots, and the

relevance of these connections to their current perceptions of identity.

CHAPTER 3

BEING LUO IN MODERN KENYA

Introduction

Tracing the history of an ethnic group, like I have done with the Luo in the previous chapter, provides a background of the group and the evolution and dynamism of the group. This is not to say that understanding the historical evolution of an ethnic group necessarily explains a group's current cultural beliefs, values and practices. In the words of Barth (1969), "...when one traces the history of an ethnic group through time, one is not simultaneously tracing the history of "a culture": the elements of the present culture of that group have not sprung from the particular set that constituted the group's culture at a previous time" (Barth 1969:38). Ethnic identity is not fixed but continues to be negotiated and reinvented in the face of existing social, cultural, economic challenges. It would seem appropriate to argue that cultural components such as a shared language, religion, history, place of origin, kinship and locality are important aspects of ethnicity, as proponents of essentialist approaches to identity believe (Geertz, 1973). However, while this is true, there are emerging 'modern' issues that challenge the notion of ethnic identity based on the above-mentioned factors. As seen in the previous chapter, different social and environmental situations forced the Luo to change some of their cultural values and practices – migrate from their ancestral land, change their lifestyle, interact with other communities – while maintaining their identity as a people.

Similar challenges are facing contemporary Luo people in western Kenya. According to one of the Luo Elders participating in this study, HIV/AIDS is one of the most salient contemporary issues for the Luo community. In addition to individual

suffering, poor quality of life for both the infected and the affected, and high mortality resulting from HIV/AIDS, community members fear that the high prevalence of HIV/AIDS among people of reproductive age threatens the continuation of the lineage and the existence of the community. These concerns have prompted many in the community to evaluate their lifestyles, at the individual and community level, and to find ways to improve their lifestyle in order to adapt to the problems they continue to face. As part of coping with the contemporary challenges, the Luo have had to reconsider some of their cultural values and practices, as well as consider new ways to adapt. For the most part, these discussions are often held by community Elders and leaders, who are assumed to be the gatekeepers of the culture. Rarely have young people directly engaged in such discussions, but the threat of HIV/AIDS has facilitated a shift in the participation of young people in discussions about cultural values and practices. The uptake of circumcision among the youth is one example of young people participating in the decision-making process with regard to cultural values and practices.

As shown by the discussion in previous chapters, male circumcision is not a culturally supported practice among the Luo, and the lack of circumcision has served as an identity marker for the male community members, setting them apart from most other communities in Kenya. However, over the years, there has been growing evidence that the number of Luo men getting circumcised has steadily increased, and in most recent years, the interest in the practice has soared, especially among young men. During the pre-dissertation exploratory study, I met and spoke with many youth from the Luo community in Korogocho. In the middle of my interview with one respondent, we heard commotion outside, with people singing, chanting, and dancing through the narrow

pathways between the rows of shelters in the crowded neighborhood. We ran out to see

what the commotion was about and were confronted by a crowd of people waving

branches, placards and anything they could get hold of. Leading the group was a young

man, probably thirteen or fourteen years old. The barefoot young man had two cow bells

attached to his wrists using sisal rope, which was then covered with a piece of cloth to

protect his wrists from the rough sisal rope. He wore an old pair of shorts, but no top.

Beads of sweat donned his shirtless torso as he rythmically hit the cowbells together and

led the crowd in singing and dancing across the slum. The crowd consisted of both men

and women of all ages.

> "Those are Luhyias[1]," Simon, my 18-year-old male respondent told me. "They do
> this every other August. It is their circumcision ceremony. It used to be that they
> do this only in the village but these days they have extended this ritual to the city.
> Especially here in the *'Kijiji'* (a term meaning village, but used by slum residents
> to refer to their neighborhood). We see or hear of one such ceremony maybe three
> times a week... but I hear that these celebrations are more frequent in Luhyia
> neighborhoods of this *Kijiji*. (Simon, 18 years, Male, Korogocho)

I understood what he meant by this, since I am Luhyia and have been exposed and

even been party to such ceremonies in my home district of Kakamega. What I did not

understand was why this ceremony was taking place in Kisumu Ndogo, a predominantly

Luo neighborhood. In addition, it seemed odd that the ceremony was taking place in the

city, since generally people from the Luhyia community often preferred to go to their

rural homes to perform initiation ceremonies. One of the main reasons that I had often

been given for performing these types of ceremonies in the village is to provide the

opportunity for most relatives and friends to participate and provide guidance in

accordance with tradition. Obviously, the city environment was perceived to be inhabited

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1   The Luhyia are an ethnic group from western Kenya, close to the border with Uganda in the west and
     bordering the Luo in the East.

by young migrants who were believed to have limited knowledge of the rituals, meanings and values associated with the ceremonies. As such, they are not expected to effectively transfer these important aspects to the initiates. Simon continued to explain to me that many city residents were overwhelmed by the time and financial expenses incurred on travel and elaborate celebrations in the village. Instead, many now preferred to invite one or two elders from the village to participate in an abridged version of the ceremony in the city. He also explained that it was very likely that the young initiate who had just passed by was of mixed heritage ('half-Luo'), and chose to get circumcised even though it went against Luo cultural practices. He cited examples known to him of such young men, whom he called 'practical' because they adopted whichever cultural practices that they deemed beneficial to them from either side of their heritage.

The idea that Simon was praising these young men who were clearly acting against their cultural traditions prompted my interest in understanding the kinds of inter-ethnic relations and interactions that drove these young men to make decisions that would normally be deemed controversial. To further complicate the matter, Simon disclosed to me that he too was circumcised, and he was not even of mixed heritage. He attributed his decision to be circumcised to his membership in a predominantly Luo Church, known as NOMIYA. Some of the people in his neighborhood in Kisumu Ndogo were NOMIYA members. According to him, the Church required him to be circumcised in order for him to attain full membership and benefit from participating in all church activities. When he was six years old, his parents did not hesitate to take him to be circumcised for him to attain full membership in the church. As a full member, the entire cost of his primary school education would be covered by the Church, among other things. Although Simon

did not participate in the decision to be circumcised, his attitude towards young men who chose this path drew my attention to the complexity of identity issues that young Luo people faced. On the one hand, they had culturally prescribed ways in which to act, yet they were faced with circumstances that required them to make choices to the contrary. For these young men, questions about who they are and what they represent are undeniable. But most importantly, how do they reconcile their perceptions of who they are and the social realities that confront them in their daily lives?

In this chapter, I explore a model of identity that characterizes ethnicity as fluid, dynamic and situational. This process stresses identity as a social construction, where cultural boundaries, identities and practices are produced through the process of social interaction within and outside the group. In the view of identity presented here, it is clear that the social interactions are partly based on a perception of biological connection. In this model, emphasis is put on the group members' ability to make creative choices, both at group and individual level, as they navigate the process of defining themselves and others. With regard to situational challenges, I explore the idea that modernity, in its social and physical presentations, creates tension in the way young people perceive their identity, and challenge the duality of traditional communality and modern individualism. In exploring this, I also shed light on alternative ways in which young people overcome these tensions, and challenge the neat, unidirectional and evolutionary model that has often been advanced in discussions of modernity. First, I discuss the essentialist approach to ethnic/cultural identity, in which I discuss the fundamental collective sameness of members of the Luo community and the expectation that their collective consciousness would lead them to act in solidarity or collective action. Secondly, I explore the forces

underlying certain unconventional actions by community members, which are fundamentally contrary to Luo value system, tradition and practice. In the face of what study participants refer to as 'modern challenges', is the practice of male circumcision defiance or strategy? Thirdly, the chapter addresses the question of traditionalism and modernization, in which the issue of traditional collective and individual approaches to community concerns is continually debated, and new and amalgamated approaches are created, both for the short-term benefit of the individual, and the long-term sustenance of the community. Fourthly, I discuss the different and simultaneous identities that emerge in the context of a changing social environment and an old religious institution, NOMIYA, whose members have long been viewed as outsiders because of their practices, including male circumcision.

You Are Who You Are

> "You are who you are. You may deny it until the sun comes down, but if you are Luo, you are Luo. There is nothing you can do about it (Oketch, Male participant, Kisumu)."

As I have discussed elsewhere in the dissertation, how the Luo emerged as a distinct ethnic group back in what is believed to be their home of origin in the south of Sudan. As they migrated further south, they broke into smaller groups and settled in clusters in Uganda, Kenya and northern Tanzania. Even though they assumed different names as they conquered native groups and settled in different areas, they continued to identify with the larger Luo community and continued to live in ways that were culturally ascribed by their imagined Luo community. I use the term 'imagined' here to emphasize the fact the Luo as a distinct group no longer existed at this point, due to the dispersions

and sometimes, assimilation of members of the group with other groups along their migratory path. And even almost a century after the time they are believed to have left southern Sudan, they still feel connected to each other and identify as Luo people.

When I was carrying out exploratory research in Korogocho, I was scheduled to meet with Omosh, one of my study participants, at his father's house, from where he was to invite me to meet some of his friends, with whom he played soccer in a field just outside the slum, every evening. He was not home at the scheduled time, so I waited for an hour, and in the meantime, chatted with his mother. She said her son had gone to search for a place where he could watch television, to catch up with the terrible news about a prominent Luo person's death. She was not clear on the identity of the person, but was saddened that a promising leader in the community had died. Eventually, Omosh returned and said that he was not going to play football, but instead, he was going to join some of his friends and learn more about the terrible news of the demise of the community leader. On our way to meet with his friends, I asked if the dead community leader was a local person and he was surprised at my question. He answered:

> "Have you not watched television today? That is the story of the day. John Garang' died today in a plane accident. He is the vice President of Sudan. This is international news! It is all over tv... We had so much faith in him... he is one of the most prominent Luo politicians right now and we were very proud of him. But now he is dead, and we are back to square one!" (Omosh, 18yrs, Nairobi).

To put this conversation in perspective, at the time of his death, John Garang was the First Vice President of Sudan, a position which he gained through a peace treaty between Sudan and Southern Sudan. Through the Sudan People's Liberation Army (SPLA), a rebel group led by Garang, the people Southern Sudan had been involved in

civil war with Sudan, but a peace agreement was negotiated in January 2005 to allow for power-sharing and possibly, cessation for the South after six years. Garang was sworn in as vice president on July 9, 2005 and died on July, 30 2005. He was a member of the Dinka ethnic group, born and raised in the upper Nile region of Sudan (currently Jonglei State). It is this general region that the Luo of Kenya claim their origins, and the Dinka are understood to be part of the larger Luo community.

At the football pitch, there was a very somber atmosphere. Nobody was interested in playing football. Instead, we all huddled around a radio brought by one of the team members and listened to the news and analyses about Mr. Garang's death and the situation in Southern Sudan. There were also some older men who joined the group, and the discussion about the assassination continued long after the newscast was over. The next day, it was announced that Salva Kiir, also from the Dinka group, would take over as the First Vice President and the leader of the SPLA, and the mood around the football pitch was much improved. Omosh and his friends were cheerful again, and expressed hope that Mr. Kiir would continue the work that was started by Garang', representing the community at the highest level in the region. They were optimistic that Kiir would provide the Luo in Kenya the hope and encouragement they needed to advance their community politically.

This conversation reveals deep-seated connection that many young Luo have with their cultural roots, and their knowledge of the community's history, and hope for the future. The conversation with Omosh was frequently replayed with many different young participants in Kisumu, in which conversations they spoke of their 'natural' and 'emotional' connectedness with all the Luo people in the world. In most cases, they

proclaimed that they could not change who they were, since being Luo was their heritage, as seen in my conversation with one respondent, Oketch, below:

> R: "I am a Luo. If you are looking for a pure Luo person, then you have found me (laughter). Now seriously, along my lineage, I think we are all from the Luo community. If there is any intermarriage with other communities, then am not aware of it. And am not saying that those with one parent from another community are not Luo. They are all Luo... If your father is Luo, then you are one of us. You are our brother, sister, cousin, mother, grandfather, uncle... everything... I used to see some boys in school who tried to pretend that they were not Luo, and we always laughed at them. They eventually got to a point where they just had to accept [who they are]."
>
> Q: Why did you laugh at them?
>
> R: Because it was just stupid for them to think that nobody would know that they were Luo. Their names were obviously Luo names, and their physique was also unmistakable. It was just stupid and I think they realized that after some time.
>
> Q: So why did they not want to be identified as Luo?
>
> R: Those are just young and stupid kids who were raised in the city and they thought that associating themselves with their community makes them look 'shady'. They always think that being a city person and distancing yourself from rural folk would make them less sophisticated and less moder. And so they deny everything that could tie them to rural areas... There were also those who did not deny that they were Luo, but they pretended not to know and speak the language [*Dholuo*]. Those same people, when I see them on campus, today they are speaking the deepest version of *Dholuo* right now (laughter). Just because now, it seems fashionable for young people to speak their mother-tongue, given that most of the slang spoken in universities and other post-secondary education institutions contains many words and phrases coined from different local languages. It is very fashionable now."

An example of the 'deniers' that Oketch referred to was Shadrack, who was born and raised in Nairobi, but went to a boys boarding secondary school in Nyanza. When he participated in my study, he was in his third year at Kisumu Polytechnic, studying electric engineering and working part time at a local electronics store. He joined the UNIM Project in his first year in college, and was selected into the control group. He eventually

got circumcised at the end of his participation in the study, which was a year before he participated in this study as a social network participant. Except for school breaks, approximately three months in a year, when he went to Nairobi to visit with his family, it was Shadrack's seventh consecutive year living in Kisumu. Before then, he had never been to Kisumu, despite it being his original home, and where his grandparents and other extended family members lived. He could hardly speak Dholuo when he first joined secondary school, and that presented a challenge for with regard to making friends. Many of his schoolmates were from the local community, and they liked to speak Dholuo in informal settings. They read his incompetence in Dholuo as antisocial, and his way of projecting himself as different, superior and modern. Some even thought he was consciously denying his heritage just to portray himself as a modern person. Not surprisingly, they avoided him altogether. His only friends were fellow Luo students who came from Nairobi, or boys from other ethnic groups.

However, according to Shadrack, he (and many others that were brought up in similar circumstances) did not deny his heritage, as viewed by his schoolmates. He saw himself as continuing to live the way he did back in the city where everybody spoke Swahili or English. Due to their different and diverse cultural backgrounds, all his friends, schoolmates and neighbors in Nairobi preferred to communicate in English or Swahili, since these are the official national languages which are understood by majority of the population. He understood why his demeanor may have seemed pretentious to his schoolmates from the rural areas, but, he argued, language was not the only thing that defined his 'Luoness.'

> "It's true, I did not speak Luo at the time, but that is just because I did not know the language. But I learned fast and now am very fluent. Also, that did not make

me any less Luo. You see, just the idea that my parents sent me to a school in the rural areas shows that we identified with the Luo and they wanted me to connect with my roots. So I learned the language and made many friends. I also connected with my grandparents and we have a very special relationship... My grandparents did not think that I was pretending not to speak [Dho]Luo, or that I was any less their child because I could not speak Luo. To them, and even most of my friends in the city, I was Luo. My family is Luo. My grandparents are Luo. Nobody can deny their family ties, and that is why my grandparents embraced me. In fact, they [grandparents] started to learn Swahili and some English words so they could communicate with me. Just the same way I was also learning Luo so as to communicate with them. And their struggling to learn Swahili or English did not make them any less Luo than they already were. (Shadrack, 22yrs, Kisumu).

In their stories, Omosh, Shadrack and Oketch acknowledge their Luo identity through kinship ties, which may seem to be lending credence to primordial perspectives in identity discourse. In actuality, they are showing the importance of primordial ideas and perceptions in the social construction of identity. Primordial theories assume certain 'givens', which are seen to be essential and, therefore not subject to change. In this approach, essentialist 'givens' in ethnic identity are based upon blood relations, kinship and common ancestry, and some of the proponents of this theory have argued that ethnic identity is a function of strong emotional ties based upon common descent and the history of a group (da Silva, 1975; Scott, 1990). In the objective sense, primordial identity holds that human beings are connected to each other and their communities of origin by virtue of their blood ties. In this sense, blood relationship is believed to somehow bring out reciprocal feelings of trust and acceptance among group members. This type of attachments are typified in the experience of parents and their children, siblings, and other close blood relatives, and implies an unquestioned loyalty and devotion because of the intimacy of their blood ties. Therefore, in this sense, primordial identity is natural, automatic and expected.

Constantly, the idea that blood ties play a key role in a person's identity was brought up in discussions about the Luo identity. For all the participants, there was an immense sense of pride in identifying as Luo by blood. The perceptions of participants in this study also lend credence to the idea that ethnic communities are extensions of kinship units, basically being derived by kinship or clan ties. There is an implicit understanding that anybody whose father is Luo, is considered Luo, and therefore, their community responsibility extends beyond their immediate family. It is not surprising, therefore, that Omosh and his friends felt particularly close to the slain Southern Sudanese leader by virtue of their clan connectedness, spread across many generations and over a long period of time. While some viewed language as the important cultural sign of Luoness, Omosh and his friends stressed the importance of acceptance and belonging on the basis of history and biology. In their view, cultural signs such as language, religion and traditions can be shared in order to strengthen the bond between community members, but should not be viewed as essential for group membership. In fact, some theorists (e.g. Geertz, 1973) give this idea support by arguing that cultural signs such as language, religion and tradition are created after the groups is constituted, to show precisely the biological affinity of the group. In this way the myths of common biological ancestry that are cited as a defining feature of ethnic communities are to be understood as representing actual biological history.

While there was a general sense of pride in the Luo identity among participants, there also seemed to be a sense of resignation to the idea that their identity is predetermined by their blood connections. As shown in the Oketch's at the start of this section, there is a feeling that the Luo identity is assigned at birth, and members are not

afforded choices in defining themselves. There were such phrases used to describe the finality of identity as 'you can't deny it', 'it is who you are', 'that is how [who] you were born', 'there is nothing you can do' 'it is automatic', which all indicated a lack of choice in one's ethnic identity. Also, it emerged from the participants' narratives that they believed that , in addition to the belief that ethnic identity was predetermined, it was also inescapable. The idea was that one had to belong to an ethnic group at any given time was clear, as shown below in my exchange with by a 53 year-old mother (Mama Keith) to one of the initial participants in the study:

> R: I am not Luo. I am Luhyia, from Busia. But we are very close neighbors and some of our customs are similar. That is why it was so easy for me to fit in this family. But as much as I am Luhyia, my children are Luo. Their father, and their grandfather, and their great grandfather are Luo. They [children] are, therefore Luo. That is who they are. If they said they were not Luo, then whom would they say they are? You have to belong to a people, or else you will be like you were never born. Nobody recognizes you. It is like you don't exist.
>
> Q: What do you mean that you won't exist?
>
> R: You won't exist. You have to relate with other people and that means you have to be able to be identified with them or by them. Even animals know which animals are their friends and which ones are their enemies. That is how they survive. So, human beings do the same thing. You get protection and support from your own. That is how we live.
>
> Q: So, you said that you identify as Luhyia, why not Luo?
> R: I identify as Luhyia because that is who I am. The Luhyia know me as one of their own, and the Luo here, even if they know am family, they also know me as Luhyia. So that is how am known here. They call me 'Nya-Busia', which means 'girl from Busia.' That means they identify me by my home of origin – Busia. And the Luhyia in Busia identify me as one of their own. So I am Luhyia.

The logic espoused by Mama Keith, and other participants not quoted above, on the one hand, may seem to lend support to the more extreme views of objective primordialism, where some scholars (e.g. Isaacs, 1975; Smith, 1986; 1991; Connor, 1994)

have connected the naturalness of blood ties to the primal and essential human need to belong. This essentialist approach holds that ethnicity is an *a priori* fact of human existence and that ethnicity precedes any human social interaction and is basically unchanged by it. This theory sees ethnic groups as natural, not just as historical.

On the other hand, Mama Keith also alludes to the subjectivity of primordial identity, in which primordialism is applied beyond kinship, to include territorial connectedness. The application of this concept of primordialism beyond kinship was demonstrated by Geertz (1967; 1971), who showed that primordial attachments could also be observed in larger groups believed to share territorial space, religion, language and customs. He argues that humans in general attribute an overwhelming power to primordial human "givens" such as blood ties, language, territory, and cultural differences. One of the main critiques of essentialism/primordialism (e.g. Smith, 1999) point to the apparent disconnect, and sometimes contradiction, between the mythical origins of given ethnic groups and the documented biological history of the groups. But in Geertz' opinion, which is also demonstrated by the participants in this study, ethnicity is not in itself primordial, but humans naturally perceive it as such because it is embedded in their experience of the world. In this sense, the shared aspects are 'givens', and do not require any kind of rationalization with regard to how they provide a basis for attachment with others sharing a background.

As I have presented it above, it may seem that the primordial emphasis that the participants in this study have on ethnicity supports the primordialist perspective of ethnicity. What emerges here is really that they have certain ideas about the importance of primordialism in their everyday lives. In reality, there is no evidence that all Luo people

are related by blood, but they have historical and mythical accounts that suggest this relationship. However, having no proof of blood ties does not deter them from relating in the manner that they deem appropriate. These shared ideas about primordial connections enable them to perform many social functions at the individual and community levels. They provide them with a sense of community and support for each other, and sets them apart from other communities. And the shared feeling of blood ties is so embedded in their daily lives that they now perceive it as true.

You Are Who You Feel

> "They stole our chance of the presidency when they killed Garang' [the South Sudanese First VP from the Dinka community]. They killed him. But I know we are going to have the first Luo president in this country next year [2007], and after that, we will also rule in America. It is very possible. And it will happen." (Dan, male, 23 yrs, Kisumu).

Geertz' idea of shared 'givens' and shared experiences, though primordial in approach, suggests a level of subjectivity in the way ethnicity is understood. The idea of shared origins and life experiences was commonly discussed and incidents that demonstrate connectedness through both shared experience and 'givens' were not uncommon. In August of 2006, six months into my fieldwork in Kisumu, a lot of the conversations I had with participants in my study almost always centered on the anticipated visit of the US Senator, whose profile was recounted on national television and radio every day, for more than a month before his arrival. There was widespread excitement about his visit to Kenya among all Kenyans, but the visit was particularly special for the Luo community. The special visitor was their 'son', 'J*ar Kogello*' [son of

Kogello]. This particular 'Jar Kogello' happened to be an American citizen and the only black member of the US Senate. He was not born in Kogello, but in Hawaii to a white American mother and a Kenyan father. This was not his first visit to Kenya or Kogello, but it was his first as a US senator. It was special. I did not personally go to Kogello, but my research assistant, Dan, attended the celebrations and recorded the event in detail. The dirt road from Kisumu to 'his home' in Nyang'oma Kogello, a village about sixty miles north-west of Kisumu was upgraded, and the roadside was cleared of grass and bush. There was an air of festivity, even before the 'homecoming' of their beloved son. Waiting at his father's farm, his extended family, some who had come from as far as Uganda. While some relatives were known, others were vaguely related, but it did not matter as they sang, chanted and waved the US flag on his arrival. To many, the climax of the visit came when Senator Obama spoke – in Dholuo:

"Jar Kogello, Ero kamano! [People of Kogello, thank you!]"

The crowd roared back with excitement, laughter, cheers and chants. In his speech to well-wishers, he expressed a deep sense of solidarity with the community and the Kenyan people. He said his father's remarkable life is the story of what is possible when a community comes together to support its children. Community members cheered throughout his speech, thanked him at the end of the visit and continued to celebrate long after the Senator had left.

Back in Kisumu city, there were groups of young men, wearing T-shirts with Senator Obama's name and picture, singing and dancing through the streets, awaiting his arrival. I was at the venue of the mobile clinic where Senator Obama and his wife Michelle went to do an HIV/AIDS test, to demonstrate the importance of voluntary

testing and encourage people of Nyanza to do the same. The crowds outside the clinic

surged forward, just to have a glimpse of him and to hear him speak. And when he left, a

crowd of youths surrounded his car, still singing and chanting, and some ran along the

motorcade until they could not keep up any longer. After the streets cleared, Sam, my

research assistant could not hold back his excitement. Dan, my research assistant,

returned from Kogello that evening. The excitement and pride in the way he carried

himself was obvious on this occasion. He talked about how the Luo people were brilliant

and exceptional, and how he had great hope for success for the community. In addition to

the statement at the beginning of this section, he had this to say about Senator Obama:

> "We are very proud of him. All Kenyans love him and are very proud of him. But
> is more special for us Luo people. He is one of us. He has the same blood as me,
> as all those people you saw out there today. I was so proud to be a part of this
> celebration. When he is successful, we are all successful." (Dan, male, 23 yrs,
> Kisumu).

Dan's sentiments were echoed all around Kisumu, by men and women, young and

old. When we got into a discussion with Sam's mother later that evening, she too was

beaming with joy. She did not attend the celebrations, but she watched it all on television.

She agreed with her son that Obama made them all proud, and that he would go on and

run for president of the United States of America. I asked why she was so confident that

he would run, and she answered:

> **R**: But that is why he came here today. We all know that he came here to seek the
> community's blessing. And we are glad to bless him. You know, when a young
> man comes home and visits his father's grave, there is a message he is sending the
> ancestors. He wanted their blessings, and we are happy to provide that. We feel
> that he is very respectful, to think of us in this way... To acknowledge the
> community as important in his life. He is a good son. He represents us well and
> we wish him all the best.

Q: Are you a member of his family?

R: Not really. He is from Kogello in Siaya and we are from South Nyanza. Although they say that his family originally migrated to Siaya from South Nyanza, so we might be related and I just do not know it. But even if I am not directly related to him, he is still my son, because he is Luo. All these young Luo children are my children. Everybody my age will tell you that. They are all our children.

Q: But he is American. He has not really grown up here and he does not know the ways of the Luo. So how is he really one of you?

R: As I said, he came here for blessings. That is acknowledgement that he is one of us. He also spoke in *Dholuo!* Did you not hear him? He believes in us and we believe in him It does not matter that he is American or that he has grown up away from us. When it comes to the things that count, he is our son. (Mama Dan, Female, 65 yrs, Kisumu).

The zealousness with which residents of Kisumu displayed their oneness and connectedness during Obama's visit was striking. More striking was the rationale behind the collective display of support and pride for a 'son' that they had completely no tangible connection with. There was very little shared in their lives. He was born and raised thousands of miles away, was of a different nationality and religion, and spoke a different language. However, none of these facts seemed to deter their feeling of connectedness. According to them, they were connected in all the ways that mattered – their [perceived] blood ties (origins) and their common understanding and interpretation of life events. They argued that it was only because of his shared understanding with the community of the deep meaning and symbolism of his visit that he zealously participated in the celebrations, during which he implicitly disclosed his political ambitions and sought their blessings on the occasion. He did not need to grow up in their midst for them to know him as one of their own.

Looking at the existing body of literature in anthropology, the work of Barth (1969) and Weber (1978) has been instrumental in defining personal and social identity, in which view, they stress the social, non-biological bases of attachment, but they do not completely reject the subjective role of race, origin and language. They draw attention to the importance of interpretation and symbolic meaning in the individual's social organization of his or her life. In this model, there may be really a given descent, but it does not have to be a matter of fact. It may be actually existing or putative. In other words, feelings of intense intimacy and belonging do not have to be mediated by blood. They can be socially constructed as in the case of the perceived kinship and connectedness of the participants to the Obamas. It excites in adherents the same passion and devotion found among blood relatives. The subjective sense of primordial identity was first proposed in the work of Weber, who, in his seminal work, *Economy and Society* (1978) - originally published in 1922 , describes ethnic identity as a subjective belief: "We shall call `ethnic groups' those human groups that entertain a subjective belief in their common descent because of similarities of physical type or of customs or both, or because of memories of colonization and migration; this belief must be important for the propagation of group formation; conversely, it does not matter whether or not an objective blood relationship exists. It is true for this case, that as much as there is a claim of blood ties, most of the energy surrounding the connectedness to the Obamas is driven by a subjective belief in shared community.

Unlike in Weber's thesis, it is not clear if the belief in shared community did or did not create the group, or if the group created the belief in order to facilitate their connectedness. However, it is clear that the belief on the oneness of the community is

politically motivated, with the understanding that the monopoly of power would benefit

the community as a whole. While my objective was not particularly about Luo politics,

the topic always emerged in our conversations, especially among young people. In the

quotes below, participants related why they were excited about Obama's success:

> "I think if he runs and wins, and is the president of America, we will benefit here. People will look at Luo people differently. He will show the world that Luo people are serious and they need to be taken seriously. Not just here in Kenya, but the whole world." (Adelide, female, 22, Social network, Kisumu).

> "It would be great if he became president. It will be a good thing for Kenya and the Luo. Look, just his visit alone has put us on the map. There are so many cameras and tv people from all over the world here today. And the roads have been repaired in this area for his visit. It is a good thing for all of us" (Sammy, male, 19, Kisumu).

> "We will get jobs. That is all I would like him to do for the youth here. Even now, as a Senator, he can persuade our government to do certain things that we have been begging for for a long time. Like repair the roads and give people small loans to start businesses. Very many of us here are trained, but we do not have jobs. If he becomes president in America, we certainly stand to gain." (Oush, male, 20yrs, Kisumu).

> "We are proud of him. His position will encourage all the young people in this country, and in this community to go to school. You cannot get that far without education. That is the message I think his position sends to the youth. Of course, he may not give them jobs directly, we understand that. He would be the president of America, not Kenya. So he cannot do direct things like providing jobs for Luo youth here. He answers to the American people. But it would encourage the youth here, especially when they see that the father of this great man came from a place just like theirs. They would have no excuses not to be successful." (Oroko, Male, Village Elder, 65 yrs, Kisumu).

As it is seen in the narratives above, participants in this study show that, in

addition to the naturalist – blood/kinship relations and the gregariousness of human

beings - belief of the basis of group attachments, social and ethnic identity is also a

socially constructed concept. In this case, identity is both biological (at least based on the

perception of common ancestry) and social; flexible and not fixed, and it is demonstrated that no matter how artificially organized the community is, there is inspiration in the belief that there is a shared common ethnicity. The central feature of what is demonstrated in Kisumu is personal or social feeling and perception. There may be objective kinship among group members, but, as in the case of Weber (1978) and Schermerhorn (1978), there is also evidence of subjective belief in common descent. In the end, it seems like it may not matter whether or not the blood ties are real or imagined, but what drives the connectedness is a common consciousness and belief in the experience of life. The idea that both primordialist and social constructionist conceptualizations of themselves and others presents a model where people continually switch between the two approaches, as well as continually negotiate and renegotiate their positions in a given group. In the next section, I show how the youth in Kisumu are perpetually negotiating and renegotiating ethnic boundaries, and how the dynamism of ethnic identity encourages creativity on the basis of prevailing social situations.

You Are What You Do: Boundary Markers and Layering Identity

"Luo is a lifestyle." (Oti, Male, 23, Kisumu)

Manyatta, a populous administrative location in Kisumu, is characterized by features that are perceived to be both urban and rural. Historically, this area was on the outskirts of the city and the population was predominantly rural, with relatively large pieces of land on which owners grew crops and raised livestock. But as Kisumu continued to expand, and demand for land increased, many residents of Manyatta sub-

divided their ancestral land into smaller pieces and sold them to urban immigrants, while

still maintaining part of their traditional homesteads and lifestyles. It is not uncommon to

find a spacious traditional homestead surrounded by small 'plots' with small structures

that may be permanent or, in most cases, temporary and dilapidated. In the process of

sub-division, some of the 'plots' were sold to rich buyers who built relatively big and

permanent houses, with indoor plumbing and running water. It is in this area that I had

my first interview with Ronaldo, (nicknamed after the famous Brazilian footballer

because of his superior football skills), whom I first met during one of his follow-up

visits at the UNIM clinic. It was his third visit, during which he was routinely tested for

HIV and STDs, and counseled. He was running back to his soccer practice session with a

local team, so he agreed to meet with me at a later date, outside his brother Bonnie's

convenience store in Manyatta.

While waiting for Ronaldo at Bonnie's shop, I noticed that most clients coming to

the shop were Gusii,[2] and preferred to speak with Bonnie in Kisii. He spoke Kisii with

ease, and also easily switched to Dholuo whenever the occasional Luo client came in.

When I began to speak with Ronaldo later, I was concerned that he might, in fact, be non-

Luo, and therefore, not eligible to participate in my study. He reassured me that he was

indeed Luo, but his brother was both Luo and Gusii. He explained:

> "He [Bonnie] is my step brother, but here we don't differentiate. We are all
> brothers and we call each other brother. Our mother was married to Bonnie's
> father before she married my father. Bonnie's father was Gusii. My father is Luo,
> so am Luo, but I also speak Kisii as fluently as Bonnie does. Bonnie is also Luo,
> just as much as he is Kisii." (Ronaldo, male, 19 yrs, Kisumu).

Ronaldo and Bonnie narrated to me their life stories, some of which has also been

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2   Bantu ethnic group in Nyanza Province, bordering the Luo in the East. They speak Kikisii language.

narrated to them, since they were too young to remember some of the defining moments in their family. Their mother, a Luo, was born and raised in Manyatta, but moved to Kisii town, forty miles away from Kisumu, as a domestic employee when she was about 14 years old. She lived in her employer's house for two years but was sent away after it was discovered that she was pregnant with her employer's child. The embarrassment as a result of the premarital pregnancy could not allow her to go back home to Manyatta, so she rented a room at a market near the town and started to buy and sell produce to make a living. When Bonnie was born, his biological father, citing a lack of steady and sufficient income, and proper care by the mother, took him away and sent him to his rural home in Kisii, where he was brought up by his Kisii grandparents. His grandparents provided him with all the parental care that he needed, since his father rarely went to the village, and his step-mother was generally uninterested in his welfare. His biological mother was not allowed frequent visits to see him, except when he was sick. When he was ten, his grandparents died and, according to him, he felt 'orphaned', since the grandparents had practically been his parents. His father wanted him to live with the rest of the family in Kisii town, but his step-mother was unwilling to accept him into the family. He decided to join his biological mother, who was by then married, with two children – Ronaldo and Maria. Their father was Luo, and, therefore, they too were Luo.

Adjusting to the new family and lifestyle was difficult for Bonnie, especially since he had been raised as a Gusii and lived amongst Gusii people. According to him, he 'was now a Luo, and lived like a Luo'. Most of the neighbors and family friends were Luo, and since he rarely communicated with his biological father and friends from his grandparents' rural home, he gradually lost contact with that part of his life. Asked what it

meant for him to be Luo rather than Gusii, Bonnie explained:

> "I think it's because I was now associating with Luo people and had a Luo family. My young mind adjusted very easily. There were some shocking things but I got used to them... The first time I saw Ronaldo without clothes I was very confused. You see, he was not circumcised and I had never seen an uncircumcised person before. All my friends and relatives in Kisii were circumcised. I thought there was something wrong with him [laughing]. But it was funny because he was also shocked at my circumcised status, and he thought there was something wrong with me [laughing]... Eventually, our mother explained to us that there was nothing wrong with either one of us. That we both looked different but it was normal for either of us. She explained that I was circumcised because my father was Gusii and Ronaldo was not circumcised because his father was Luo. But it did not matter because we were both her children. So eventually, we got used to how different we both looked. But in every other way, I saw myself as a Luo, just like my brother and sister." (Bonnie, male, 22 yrs, Kisumu).

When Bonnie joined high school in a predominantly Luo school, his long-held belief that he was Luo was questioned by his schoolmates. He joined a school system where students shared private amenities such as toilets, bathrooms and locker rooms, an environment which provided little in terms of personal space and privacy. Many of his classmates came to know that he was circumcised and different from most of them, and so they began to ask questions about his identity. According to him, since he joined his Luo family, that moment was the first time that he had to think about who he really was. To his classmates, he was indeed Luo, explaining that he had the choice, and so he underwent circumcision as a personal decision. He never brought up his Gusii background because he had not been in touch with that part of his ancestry for a long time and he felt somewhat disconnected. Although his classmates did not necessarily discriminate against him, he was well aware that they perceived him differently, and it seemed not to matter that he thought of himself as a Luo. And so, he started to think differently about who he was. Was he Luo or was he Gusii? What did it mean for him to

be either Luo or Gusii? Did circumcision make him any less Luo than he ought to be? Or any more Gusii than he really felt? Why could he not be both Luo and Gusii?

The questions that Bonnie wrestled with are representative of a situation in which many find themselves. Bonnie's case is very similar to many young men and women that I encountered during my fieldwork in Kisumu. Many were grappling with consequences of a changing social, cultural, health and economic environment, issues of identity, and especially so because of the growth of the multicultural environment through urbanization, migration and technological advancement in communication. In the case of Bonnie, he chose to be both Gusii and Luo, in which case he alternated his identity depending on the people he was associating with at that particular time. Here is his explanation in the following exchange:

> **R**: The fact that I was circumcised was not going to change. So I had to deal with it. My own family did not care about my circumcision. To them, I was family – Luo – and that was perfect for me. But outside the family, there were always questions. And that was hard to deal with. But I found a way. I decided that I would be Kisii when dealing with Kisii people, and Luo when dealing with Luo people... It works perfectly, because you also have to think about the people you are talking to... Like at the shop, most of my customers are Kisii, so they all know me as Kisii. Actually, I think they come to the shop because they want to buy from their fellow Kisii.. Even the Luos here know that the shop belongs to a Kisii. Only few Luos come to the shop.
>
> **Q**: How do you deal with your circumcision status when you are identifying with Luos?
>
> **R**: When I was in school, it was hard, because we shared showers and they could see me. That is when it was hard to relate with people from either community. But now, I do not share amenities with people except with my family. So I don't have to explain anything, unless it suits me disclose that am circumcised.
>
> **Q**: What do you mean by that?
>
> **R**: There are people you can see have difficulty being friends with an uncircumcised person. Especially women. So, when I see that it is someone like that, I tell them that I am Luo, but I am circumcised. You can always see them

relax after hearing that. So when it works for me, I disclose it, and when it won't be any advantage to me, I don't talk about it. (Bonnie, male, 21 yrs, Kisumu).

The case of Bonnie is a demonstration of cultural hybridity, where an individual has at his/her disposal choices with regard to their identity. While cultural hybridity is not unique to Bonnie, or other Luo young men faced with similar circumstances, it is an obscure position to be in. On the one hand, Bonnie's cultural hybridity provides him a platform to demonstrate his resistance and protest against the expectations of one ethnic group. On the other hand, it is a space which he can use to show tolerance, cosmopolitanism and multiculturalism. In this sense, he is in a position in which he is neither here nor there, and the advantages may just be as much as the disadvantages.

Unlike Bonnie, Ronaldo had little difficulty relating with fellow Luo. His problems concerned his peers, some of whom were non-Luo. They sometimes referred to him as a 'child' because he was uncircumcised. And women from these communities were discouraged from befriending him. He was always envious of his brother Bonnie, who seemed to navigate these barriers very easily. He wanted to get circumcised but was unsure of his father's reaction to the idea, so he did not undertake it until he was able to join UNIM, where the procedure was free. He consulted with Bonnie, who encouraged him to join UNIM and have the procedure done. Even at the time of this study, his parents were not aware that he had been circumcised. According to him, preventing HIV/AIDS was important, but equally important was the opportunity to fit in with his friends.

Traditional' Religion and Modern Challenges (NOMIYA)

As aforementioned, I got interested in investigating the issue of circumcision among the Luo when I was doing pre-dissertation research in Nairobi. During this exploratory period, I saw a number of circumcision ceremonies happening in Kisumu Ndogo, Korogocho, and in most of the cases, the young men getting circumcised were either of mixed heritage or belonged to the Luo Nomiya Church (NOMIYA).

I encountered a number of NOMIYA church members at UNIM, owing to the fact that UNIM had targeted them during recruitment on the basis of their already established interest in circumcision. One of the participants was Sido, whose father, Bishop, was in charge of NOMIYA's Kisumu Diocese. Sido was in Form four (equivalent of 12th grade) at one of the secondary schools in the area, and was in the circumcision arm of the UNIM project. I asked him why he had taken up circumcision so late (19 years), yet his father was a senior member of the church. His answer is shown in my exchange with him below:

> **R**: My father has been a member of the church for a long time, but most of that time he was just a mere member with no position of power. So he did not see the urgency of circumcising me at a tender age. He joined the church when I was maybe 5 years old [past the mandatory circumcision age of 8 days] as indicated in their reference book] and my mother was reluctant to have me circumcised then. Besides, it was expensive to do the ceremony so we put it off.
>
> **Q**: So why did your father not push for you to be circumcised then?
>
> **R**: Because the issue of circumcision becomes most important when one is older and they are seeking to be fully baptized and want to take up a position of leadership in the church. That is when you are really required to be circumcised. There was no such need for me, so we did not push it.
>
> **Q**: So, why did you decide to do it now?
>
> **R**: Initially, I did not want to be known to be a member of the church. It was embarrassing. We are thought of as being backward, strange, practicing strange

things that are not very Christian-like. The discrimination has been most by other Christian churches, but also Luos who are not in the Church discriminate against us. So I did not disclose to my friends or schoolmates that I was a member of the church. But after it became clear that people are now interested in circumcision, I was very proud to be a member of the church. The only problem is that I was not circumcised, so I went ahead and joined UNIM... We [NOMIYA] feel like we have been right about this all along. It was unfair for people to treat us like we were backward. Now we are the ones setting the trend! (Sido, male, 19yrs, Kisumu).

It was interesting that NOMIYA members were considered backward by their fellow Luo, for their practice of circumcision, but they did not hold the same view for members of other communities that circumcise. For Sido, the emergence of HIV/AIDS, a modern disease that had not plagued the community until twenty years ago, and the idea that circumcision is likely to have a role in its prevention, has vindicated them. It was ironic that the very practice that was always seen as 'backward' was now considered a possible prevention method for HIV/AIDS. Additionally, circumcision in itself was seen as a sign of 'modernity', 'progress' and 'urbanite', none of which were associated with NOMIYA for a long time. As much as they are not the terms now used to describe NOMIYA, at least members of the community are now beginning to be open-minded about the church.

Most of the members that I spoke with expressed similar sentiments with Sido – that they felt vindicated for their practice of circumcision. As much as they felt discriminated against, they never felt inferior to the rest of the Luo community. On the contrary, they viewed themselves as Luos, just a different kind of Luo. They formed an identity within the Luo identity, which they would revert to when it suited them. For the most part, they would only identify as church members in the circles of other Luos, but they did not need such specificity when associating with people from other communities.

To non-Luo people, the distinction was unnecessary. However, after they realized the apparent preference for circumcised Luo men in non-Luo communities, and the possibility that circumcision may help prevent HIV/AIDS, many members begun to acknowledge their NOMIYA membership.

Clearly, members of NOMIYA demonstrate that ethnic boundaries, and thus identities, are constructed by both the individual and group, as well as by outside agents and organizations. This pattern is not unique to NOMIYA members. Similar accounts can be found in patterns of ethnic identification in many U.S. ethnic communities. For instance, Cornell (1988) and McBeth (1989) discuss various levels of identity available to Native Americans: subtribal (clan, lineage, traditional), tribal (ethnographic or linguistic, reservation-based, official), regional (Oklahoma, California, Alaska, Plains), supra- tribal or pan-Indian (Native American, Indian, American Indian). Which of these identities a native individual employs in social interaction depends partly on where and with whom the interaction occurs. Thus, an American Indian might be a "mixed-blood" on the reservation, from "Pine Ridge" when speaking to someone from another reservation, a "Sioux" or "Lakota" when responding to the U.S. census, and "Native American" when interacting with non-Indians.

Pedraza (1992), Padilla (1985, 1986), and Gimenez, Lopez, and Munoz (1992) note a similar layering of Latino or Hispanic ethnic identity, again reflecting both internal and external defining processes. The chosen ethnic identity is determined by the individual's perception of its meaning to different audiences, its salience in different social contexts, and its utility in different settings.

Espiritu (1992) also observes a layering of Asian-American identity. While the

larger "Asian" pan-ethnic identity represents one level of identification, especially vis-a-vis non- Asians, national origin (e.g., Japanese, Chinese, Vietnamese) remains an important basis of identification and organization both vis-a-vis other Asians as well as in the larger society. Like Padilla (1985, 1986), Espiritu (1992) finds that individuals choose from an array of pan-ethnic and nationality-based identities, depending on the perceived strategic utility and symbolic appropriateness of the identities in different settings and audiences.

The layering phenomenon generally demonstrates that navigating social identity is as much a personal choice as it is a structural one. It shows that the choices people make are influenced by the societal structures that are in place, and whichever decisions individuals arrive at, it is likely will be situated within and constrained by existing social structures. In one of the earliest and most elaborate descriptions of social groups and belonging, Emile Durkheim analyses the origins of social attachments and group formation. In *The Division of Labor in the Society*, (1984) he describes a system in which group sentiments take privilege over individual thought, and discusses the notion of 'collective consciousness' as as the guiding principle underlying social identity. By Durkheim's definition, the notion of identity is guided by the primary idea that all people in a group are brought together through a similarity or sameness, which then leads them to individually conform to certain group values. This similarity is seen to be rooted in the collective consciousness of group members and leads them to act in ways that often promote group cohesion, as well as distinction from 'the other'.

In making their group identity distinct and different from 'the other', members are led into a position of total identification with the group and insecurity outside the group.

In this context, individualism is suppressed and group solidarity and cohesion are emphasized. According to Durkheim, the solidarity that is borne of sameness is most pronounced at a time which the 'collective' is the paramount consciousness, in which case, one's individuality is minimal. NOMIYA members and the youth in this study seem to have synthesized their approach to life and redefined their ideas about individuality, community and identity.

Traditional Communitarianism and Modern Ethic Individualism

The seeming contradiction between what NOMIYA circumcision practices and the contemporary HIV/AIDS related circumcision practices represented, and what Luo traditional practices entail, raises the interesting question: How can people behave in ways which disregard ethnic boundaries while at the same time claim an ethnic identity? Gans (1979), through his theory of 'symbolic ethnicity' – when members of a ethnic group consume and use ethnic symbols for the purpose of being identified with the particular group but do not necessarily participate in the ongoing culture - , has argued that young people tend to be receptive to new ideas and practices because it is socially more rewarding than 'paying obeisance to an old culture that had little meaning for them mainly to please their parents' and grandparents' (Gans, 1979: 579). Bakalian (1993) has taken Gan's theory of 'symbolic ethnicity' further by proposing that the process of assimilation and integration is dynamic and reversible. In her description of Armenian immigrants in the United States, she shows how Armenianness changes in form and function over time, and describes 'symbolic Armenianness' as being 'voluntary, rational and situational', as compared to traditional Armenianness, which she described as

'ascribed, unconscious and compulsive' (1993: 6). In her work, she explores the departure of latter generation Armenians' from traditional value systems, behavior and lifestyle. The questions she raises are similar to what Luo youth in Kisumu are experiencing with regard to behavior and lifestyle.

Similarly in Kisumu, the view that participants in the UNIM Project were trendsetters, as proclaimed by Sido in an earlier quote, was recounted many times during my interactions with the participants. According to them, they felt 'very special' to be part of this experimental project because the knowledge obtained from the study would be beneficial for the Luo community. As much as the effectiveness of circumcision in preventing HIV/AIDS had not been proved, they felt that they were participating in ground-breaking research and regardless of the end result, they would always feel that they were part of something 'special. In any case, most of them used their membership in UNIM as a badge of honor of sorts, especially when interacting with their peers. It often evoked jealousy among fellow Luo who were uncircumcised, as they felt that they were lagging behind in this 'development'.

However, in as much as they felt proud to have made personal decisions to go against their community's practices, many of the circumcised men I spoke with strongly felt that their actions were for their individual benefit, as they were for the community. They were of the understanding that the Luo had the highest HIV/AIDS in the country, and therefore, any help the community could get to reverse the trend would be welcome. In this case, their individual steps would translate into community-level results, and over time, the community would be able to reduce the rates of HIV/AIDS. In the end, going against one cultural practice in order to sustain the community was a 'special' thing to do.

In any case, the fact that many thought of them as being 'special' was indication that the community appreciated their choices, even if they went against traditional values and practices. In this way, these young men expected other young men to emulate them because they were perceived as progressive, and better than the rest. They compared themselves with members of their group and concluded that circumcision was a positive and distinctive thing with which to identify (e.g. Tajfel, 1978; 1982). Since it was viewed as an indicator of upward direction, the young men chose to engage in it for purposes of achieving and maintaining the perceived positive social status, while at the same time, maintain their affiliation to the Luo in the guise of promoting the group's well-being.

Conclusion

Circumcision in this study is a simple act in form, but very complex in substance. In this one act, there is clear demonstration malleability, fluidity, imprecision, multivocality because of the variability of meanings among those who adopt it. It demonstrates the complexity of identity as a phenomenon and modernization as a process. The ways in which identity is perceived among participants in this study shows that it is not simply homogenous, and cannot be placed in neat and distinct categories, the way supporters of primordialism and constructionist approach it. It can be both. Like the complexities involved with the adoption of circumcision, the narratives of participants in this study highlight the unstable, multiple, fluctuating, and fragmented nature of the contemporary "self."

As shown in this study, identity is a dialectical process involving internal and external opinions and processes, as well as the individual's self-identification and

outsiders' ethnic designations -what you think your ethnicity is, versus what they think your ethnicity is. The location and meaning of particular ethnic boundaries are continuously negotiated, revised, and revitalized, both by ethnic group members themselves, as well as by outside observers. Since ethnicity changes situationally, the individual carries a portfolio of ethnic identities that are more or less salient in various situations and vis-a-vis various audiences. As audiences change, the socially-defined array of ethnic choices open to the individual changes. This produces a "layering" or multiplicity of ethnic identities which combines with the ascriptive character of ethnicity to reveal the negotiated, problematic nature of ethnic identity.

While the construction of ethnic boundaries is very much a saga of structure and external forces shaping ethnic options, the construction of identity is also a tale of human agency and internal group processes of cultural preservation, renewal, and innovation. This study shows that emphasizing structural constraints over personal agency would be inaccurate, just as much as emphasizing the notion that ethnicity is simply a personal choice runs the risk of emphasizing agency at the expense of structure. In fact, ethnic identity is both optional and mandatory, as individual choices are circumscribed by the ethnic categories available at a particular time and place. Theoretically, this broadly employs the use of Boudieu's (1977) approach to structuralism and constructivism, that contrary to the way the two approaches are viewed in the literature – as in conflict – the youth in Kisumu demonstrate that the two approaches in the study of identity can co-exist. It shows that human experience cannot be studied without taking into account both how individuals are situated within and constrained by social structures, and how those individuals manipulate and reconstruct their own understanding of their world and give

their life meaning. The youth in this study have synthesized their approach to life and

redefined their ideas about individuality, community and identity.

CHAPTER FOUR

FITTING IN AND SPREADING OUT: AMBIGUITIES AND CHANGING IMAGINATIONS OF SEXUALITY

Introduction

Each society, depending on its basic and varied social structures and cultural repertoire, evolves practices and norms, as well as supportive religious doctrines, moral codes, laws, social customs and family organization, to maintain desired expectations in behavior, including sexual behavior. Theories of sexuality have often shown sexual behavior of both men and women to be strictly guided and regulated by culturally acceptable values and norms. In this chapter, I use Holland et al.'s (1990, p. 339) definition which describes sexuality as "... not only sexual practices, but also what people know and believe about sex, particularly what they think is natural, proper and desirable. Sexuality also includes people's sexual identities in all their cultural and historical variety. This assumes that while sexuality cannot be divorced from the body, it is also socially constructed. "

The HIV/AIDS pandemic has proven to be a major catalyst for sexuality research. The reliance on sexuality research for understanding HIV transmission and prevention has highlighted some of the inadequacies of existing research and methodologies. For instance, epidemiological methods of conceptualizing and quantifying sexuality do not allow for an understanding of the meanings associated with it. Research attention has increasingly shifted from sexual behavior, in and of itself, to the cultural settings within which it takes place and to the cultural rules which organize it. Special emphasis has been given to analyzing the indigenous cultural categories and systems of classifications that

structure and define sexual experience in different social and cultural contexts (Parker and Eaton, 1998; Savage and Tchombe, 1994).

In the case of sub-Saharan Africa, Caldwell and his collaborators have produced several papers that outline a model of 'African sexuality', with the aim of comparing the 'African system of sexuality' and what they refer to as 'Eurasian' (Caldwell and Caldwell, 1987; Caldwell et al.; 1989; 1991). The African system, to them, is distinctly different from the Eurasian one. While the Eurasian system lays emphasis on the inheritance of fixed resources, and subsequently the control of marriage and female sexual behavior, the African system is centered on lineage organization, reproduction and descent at the expense of chastity and morality. In this way, the 'African sexuality' system does not place aspects of sexual behavior at the center of its moral and social systems. In their thesis, African societies surround sex with little guilt and do not link it to morality and religion, thus seeming permissive, especially with regard to female premarital or extramarital sex (Caldwell et al., 1989).

While the concept of 'African sexuality' is debatable (see Ahlberg, 1994) there is clear ethnographic evidence that African societies do not condone sexual permissiveness. There is indication that Eastern African communities are preoccupied with controlling sexuality so that all issues surrounding sex, and the self-control that is required in that regard, demonstrate social and moral behavior. These, based on anthropological evidence from Eastern Africa, are often enforced through the observance of taboos that are largely based on the perceived notions of 'respect'(Ocholla-Ayayo, 1976; Heald, 1995), 'shame'(Ocholla-Ayayo, 1976), 'secrecy'(Kisekka, 1973) and 'sacredness'(Chege, 1993; Heald, 1995). These notions ultimately impose restrictions on social, as well as sexual

networking.

As seen in the preceding chapter, individual behavior and action is guided by

ethical, moralistic and customary factors. An individual decides on how to act in respect

to available principles, general attitudes and whether that action is approved by many or

some part of the society. Thus, they act within the value scale that has been outlined by

society. However, this is not to say that these values, attitudes and norms remain

unchanged through time, and in some cases, such references to the past by both

informants and ethnographers are romanticized and idealized statements.[1] While in the

last chapter I examined the ways that HIV illuminates the contradictions and complexities

of simultaneously being Luo and being modern, in this chapter, I explore how these men's

imaginations of sexuality and social networks bridge these two larger domains. I explore

the notion of Luo sexuality in the context of cultural interaction. As much as Kisumu is in

Luo territory, its population is multi-ethnic, largely owing to the city's standing as the

provincial headquarters and the regional economic center. I discuss the social and sexual

networks that are established, and how they are maintained in a multicultural context.

This struggle is best exemplified in the ways they relate with their peers, relatives

(parents, siblings, extended family and clan mates) sexual partners, and people from other

ethnic groups. The lack of circumcision for Luo men has, for many years, been viewed as

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1   In describing some of the Luo cultural values and beliefs, and concepts such as sacredness, honor, secrecy and respect, I may sometimes portray an idealism that suggests total conformity to the rules and regulations within this value system. In actual fact, society anticipated non-conformity. For the Luo, non-conformity to rules and regulations stipulated by society was punishable in many forms, but most commonly executed through physical and psychological disciplinary action (Ocholla-Ayayo, 1982; 1976). Generally, disciplinary action for children was psychological, composed of praise for good behavior and reprimand for misbehavior. In some cases, children until the age when they were expected to leave the *siwidhi* or *simba,* were smacked by their mothers when they misbehaved. Punishment was not limited to children alone. Non-conforming adults were subjected to physical suffering (disease) as a result of curses, and even death. Also, punishment took the form of humiliation by way of *huwege* – the concept of composing and publicly singing about an individual's wayward behavior. The most common *huwege* themes involved sexuality and sexual behavior.

an identity marker, separating them from neighboring communities, as well as other communities in Kenya. Young Luo men are increasingly getting circumcised, and essentially erasing the 'otherness' that has defined them to other ethnic groups. In what ways is the adoption of circumcision impacting their interactions and relationships with members of other communities? What is the impact on relations with fellow Luo community members? How does circumcision impact young Luo people's attitude towards their own sexuality at the individual, as well as community level?

As shown in the literature, the notions of 'sacredness', 'secrecy', 'shame', 'respect' and honor' have been used in most East African communities as a framework within which sexuality is understood (Ocholla-Ayayo, 1976; Heald, 1995; Kisekka, 1973; Chege, 1993). It is within this framework that members of the Luo community are expected to demonstrate social and moral behavior, especially with regard to sexuality. Given this, the sexuality notions are explored in this dissertation, through a focus on themes ranging from socialization, cross-gender and intercommunity interactions, to attitudes/values towards sex and sexuality, and sexual experience. Also, using the notions of sacredness, honor, respect and shame, I discuss the involvement of women in matters of sexuality, especially in the context of HIV/AIDS. This is particularly important because of the overwhelming evidence that women are especially vulnerable to HIV/AIDS and in some cases, make up the higher percentage of infection rates in communities. Vulnerabilities are based on biological and physiological make-up, as well as social and economic vulnerabilities that are perpetuated by cultural sensibilities (Weiss et al., 2000; de Bruyn et al., 1995; Heise and Elias, 1995; UNAIDS, 1999) and power imbalances (Maman et al., 1999; Heise, Ellsberg, and Gottemoeller, 1999).

In this case the issues are even more pertinent, given that there is no evidence suggesting benefits of male circumcision for women. In the studies to show the effectiveness of circumcision in HIV/AIDS prevention (including UNIM), there has not been any physiological or epidemiological evidence to show similar benefits for women. The one RCT in Uganda (Gray et al., 2002) also tested previous observational findings (eg. Gray et al., 2000) suggesting that circumcision may additionally protect the women partners of HIV-infected men. The RCT was discontinued for futility, when an interim analysis found that HIV incidence was not statistically different for women whose HIV-infected partners were randomized to undergo circumcision compared with those whose partners remained uncircumcised. In addition, ethical questions were raised as to the continuation of the study when it was found that men participating in the study resumed sexual activity too soon after circumcision, in which case, their wounds were entirely healed, and risked exposing their sexual partners to other infections that may arise from their condition.

Currently, no other trials of circumcision in HIV infected men are known to be underway. The only other cases in which women have been studied in relation to male circumcision are in the context of assessing the feasibility of introducing circumcision as a prevention strategy against HIV/AIDS (Bailey et al., 2002). In the feasibility study by Bailey et al. (2002), women mention that they might prefer circumcised men because of what they perceive to be improvement in sexual pleasure and men's personal hygiene, leading to suggestions that interest in circumcision in young men in Africa is driven by women's growing desire to have circumcised sexual partners. Even in these studies, there is no evidence that women are in any way involved in the decision-making process

regarding circumcision, leading many involved in promoting women empowerment, but particularly the sexual and reproductive wellbeing of women , to raise questions about the benefits of this approach for women. In this chapter, I illuminate ways in which women contribute to the debates and activities regarding male circumcision, and position themselves to benefit through the social processes that occur around circumcision.

Sacredness

As described in the methods section, the UNIM Project participants were all sexually active prior to joining the trial. Thus, all the core participants in my study, married and unmarried, were sexually active. I asked them about their motivation to be involved in sexual activity, and one of the most cited motivations was 'love'. Caesar was a twenty year-old when he joined my study and was then involved with his second ever girlfriend, Nancy. Caesar and Nancy had been in the relationship for two years and had been sexually involved for slightly over a year. In one of the conversations I had with him, I asked him about his first sexual experience and he said that he was motivated by love. He loved his first girlfriend very much, but their relationship ended when she had a sexual relationship with another man. He attributed this to the fact that the man was 'working class' (employed) while he was a 'mere student'. The man had a tangible way of demonstrating his love for his first girlfriend, and so he was able to win her love away from Caesar. Caesar's words below expand on his sentiments on sex and love:

> "The man was working with Railways [Corporation] and was earning some good money. I was a mere student. I had no money at all, except for pocket money from my parents, which was itself not enough for my own needs. There was no competition there, her choice was very simple. The man paid for her sister's hospital bills, among other things. He also helped her get a job at a rich Indian's bakery in town. I loved her, but she didn't see my love.... But when I think about it now, maybe I could have shown her [love] by having sex with her [laughing]. Seriously, I think love is about action and you need to show it. That is important

for the relationship." (Caeser, 20 yrs, male, Kisumu).

As the conversation progressed, he narrated how he got sexually involved with his current girlfriend, Nancy. When they started their relationship, they did not discuss sex, but as time wore on, they got closer and began to talk about their love for each other. Caesar was sure that Nancy loved him, but he did not want their relationship to end like his previous one. So, when the opportunity to have a private moment with Nancy evolved into an opportunity to have sex (he was taking care of his brother's apartment while his brother was away working), it was an 'easy' decision for him. Nancy did not object. In his opinion, their love grew stronger since their first sexual encounter.

After his first sexual experience, Caesar was very excited and decided to tell a few of his friends about it. His peers had shared such personal information with him before, so he was not embarrassed to share this information with them. But he was very surprised when the discussion turned into a counseling session, with his friends advising him about how to make the experience even better for both him and his girlfriend. One of them, who was not a member of the Luo community, shared with the group that circumcision improved sexual experience for both men and women. Caesar got curious, and sought more information about circumcision from his friend who works at the General hospital in Kisumu. His friend referred him to the UNIM Project, where he eventually joined the trial.

The notion of sacredness in anthropological studies has been defined in the context of reproduction. According to Heald (1995) and Chege (1993), the sexual act among the Luo, as is the case with other East African communities, was regarded as 'sacred' because of its unbreakable linkage with reproduction. In this sense, sex was

regarded as an act of creation, which ideally was mysterious and rich in cosmic power. It was a channel through which individual and community life were renewed, and an act believed to be able to create pollution and at the same time purify. Therefore, the one act of sex possessed goodness and danger, depending on the circumstances under which it was performed (Chege, 1993; Heald, 1995). As such, the sexual act was only sanctioned within a marriage union, since it was in such a union that procreation was expected to occur, and the lineage, continued. It is important to note that while the idea of sex as a sacred act was widely believed in the community, it was not easy to enforce regulations pertaining to sex and marriage, given the private nature of the sexual act. Therefore, society was aware of instances of unsanctioned sexual encounters among community members in extra- and pre-marital contexts, for reasons including pleasure and opportunity to gain sexual experience (Ocholla-Ayayo, 1982; Ahlberg, 1994). Usually, this behavior was condemned by a small number of friends and relatives who knew of it, but sometimes the discussion was elevated to a council of elders when there were such public consequences as pregnancy and marriage dissolution.

In addition to seeking pleasure and experience, the notion of love, as currently perceived, seems to contradict the Luo traditional notion of sacredness. Whereas sex was traditionally performed for purposes of procreation, the youth now see it as act of love performed to strengthen the bond of friendship between a couple in courtship. Sex serves to assuage their fears and insecurities in their relationships, as well as deflect competition from their partners' prospective love interests.

While the literature suggests that the pressure to engage in sex to demonstrate love is felt among women (Wittenberg et al., 2007; Amuyunzu-Nyamongo, 2005),

Caesar's experience here demonstrates similar pressure for young men. His story shows the prevailing perception among young men in Kisumu that sex is an important aspect in successful courtship. The idea of love and romance transcends the mere feeling of attraction, admiration or affection. Love may be demonstrated in many ways, but the sexual act is a physical symbol of the love that a couple shares.

Caesar's case also exemplifies a general perception among core participants, and a large part of the social network participants, that circumcision improved coital performance for both men and women. This notion was often instilled by their peers from other communities, as well as by circumcised peers from the Luo community. Out of curiosity, many of the participants chose to get circumcised in order to have better sexual experiences. Asked if this perception translated to reality after they were circumcised, all the circumcised participants agreed that their sexual experiences had improved, and that their sexual partners were also of the same opinion. All of the sexual partners I spoke with corroborated their partners' sentiments that sex was more pleasurable after their partners were circumcised. Interestingly, many participants could not explain the exact aspect of their sexual experience that had improved, except for using such general terms as 'bigger appetite', 'better', 'sensational' 'more energetic', 'longer duration', 'more sweetness', 'more sensitive' and 'less painful.' A few of the participants mentioned that their experience was enhanced due to easier use of the condom. Whereas they experienced pain using the condom before, it was easier to wear and the sex was less painful after circumcision. The mechanism through which this was achieved was not clear, but the explanations seemed to point to the decrease in tears, abrasions, ulcerations and injuries that are often associated with the foreskin during sexual intercourse.

Existing literature does not emphasize quality of sex or pleasure as an important aspect of sexuality for most ethnic groups, mostly because of the emphasis on the superiority of men in most sexual relationships and the alleged oppression of women in decision-making in Africa. Sexuality, where it has featured as part of social science inquiry has tended to do so in a context of development discourse that has focused almost exclusively on the experience of women. The "universal female subordination" hypothesis has formed the theoretical basis for important scholarly work and feminist activism (Ortner, 1974; Lamphere and Rosaldo, 1974). As some of the cases in this study show, the quality of sex is, in fact, important for both men and women and both actively seek to enhance their sexual experience. For the young people in this study, good quality sex/pleasure enhances courtship and secures relationships in their highly-competitive and love-driven world of courtship. In the words of one core participant:

> "If we have good sex, then she will have no reason to go looking for another man. I will satisfy her the way she wants. You see, that is a way of making sure that people do not have more sexual partners because they are satisfied in their relationship. I think that the risk of AIDS will be lower" (Male Core Participant, 25, Kisumu).

The youth in this study seem to be cognizant of the traditional perception of sex as sacred, but also demonstrate a higher level of acceptability for alternative notions such as pleasure and love than traditionally known. Part of their justification for incorporating these new notions in their understanding of sexuality is the idea that, similar to the perception of sacredness and reproduction, sexual encounters in the context of pleasure and love provide stability and continuity in relationships, and in a way, sustain a level of purity by reducing the number of sexual partners and risk for HIV/AIDS.

Shame and (Dis)Honor

Miriam was one of the young women in the social networks who had premarital children, both of whom were fathered by different men. She was the sister of James, one of my core participants, who initially did not mention Miriam as one of the influential people in his life. Every time I went to his home to meet with him, he would be out playing soccer or visiting with one of his friends. In most cases, he was late for appointments and sometimes just did not show up. I spent most of the time waiting for him and chatting with his sister, Miriam. We developed a good rapport and she was very forthcoming with information about general issues regarding her neighborhood and friends. James knew of our friendship and when I asked for his permission to include her in his social network, he agreed.

Miriam was a twenty seven year-old unmarried mother of two at the time of the study. She had her first child at eighteen, the year in which she was to take her final high school examination. As a result, she dropped out of school with the intention of returning after childbirth, but her parents were so disappointed by her pregnancy that they declined to pay for her to return to school. She remembered her mother's (Mama Miriam) reaction when she found out about the pregnancy:

> "It was bad! Bad! Bad! Bad! Mama told me to leave the house before my father could find out because he was going to kill me! She said I had shamed her and the whole family. She was crying and cursing that she had brought up a prostitute! How was she going to defend herself from accusations that she was a bad mother?! She was screaming, wailing and throwing her hands in the air, at the same time throwing my clothes in my suitcase and urging me to leave. She looked like she was possessed. I left and went to stay with my paternal grandmother in the village." (Miriam, 27 yrs, Female, Social Network, Kisumu).

Asked if she was ashamed of her pregnancy when it happened, Miriam said she

did not realize the seriousness of her pregnancy until her mother asked her to leave their home. At first, she thought her mother's wails and screams were an overreaction, since she had seen many girls with premarital children living successful lives. But when she left the house, she realized how difficult it would be to explain her circumstances to her grandparents, uncles and cousins in the village. She was unsure of their acceptance after her 'shameful' behavior. She was relieved not to have to break the news to her father and siblings, since her mother had taken that responsibility. In the village, her grandparents were disappointed, primarily because she had to drop out of school and had no job to enable her to provide for her baby. They gently asked her about the man responsible for the pregnancy and pledged their assistance in getting him to support her once the baby was born. The man denied responsibility for the child, and the family chose not to pursue the matter any further. At the time of the interview, the child in question was nine, and still living with Miriam's grandmother in the village. Her grandmother referred to him as her own child.

Miriam's second child was three years old, and living with her and her parents in the city. At the time of the study, Miriam was currently engaged to be married to the child's father, who worked as a police officer in the hardship-prone North Eastern province. She was then operating a successful tailoring business that provided financial support for both her children and her family, with additional support from her fiancé. Asked how her parents reacted to her second pregnancy, she acknowledged that they were disappointed, but not nearly as much as they were during the first pregnancy. She attributed their comparatively positive reaction to the fact that she had a steady relationship with the man responsible for the second pregnancy, as well as to her financial

ability to support the child. Her father did not object to living with her and the child. Their relatively positive attitude towards her situation encouraged her to consider living with her first child, too, but she hesitated to bring him to the city because once she got married, the child would have to go back to his grandmother in the village. Her fiancé's family was not receptive to the idea of raising a child that did not 'belong' to their family. Even though she did not live with the older child, she continued to provide financial support for him and her grandparents, who were willing to bring him up. In fact, she sometimes joked that her grandmother often said that the little boy was her 'job' because she 'earned' a monthly 'salary' from Miriam to support the child.

Miriam and her family exemplify ideals of sexual propriety consistent with what has been termed an "honor and shame" complex (Pitt-Rivers, 1965). This paradigm occupied a large part of Luo perceptions toward sexuality in general, and adolescent sexuality in particular. A woman's status and honor were directly linked to her sexual purity, or her shame linked to her sexual impurity. In this paradigm, once a woman engages in sexual activity, she is either a wife or a prostitute. A chaste woman at marriage is viewed with high esteem and her family is proud and honored on the occasion. Honor and shame mark the convergence of the private and public experience of sexuality, where the sexual act happens privately between two people, yet the consequences are not only subject to public scrutiny, but are also shared by other members of the society. For the Luo, shame and dishonor with regard to sexuality are often associated with premarital pregnancy, incestuous relationships and pregnancy, marital infertility, sexually transmitted diseases and *chira* – disease believed to be caused by a curse due to misbehavior.

Traditionally, Luo cultural norms regulate premarital sex and age at first marriage, and an elaborate series of prohibitions determines not only acceptable type of sexual partners, but also the time and place where sex can take place. Prestige and value attached to any virgin bride demonstrates the value accorded to virginity (Topan, 1995, Ocholla-Ayayo, 1982). The absence of the hymen at marriage is a shame that remains a stigma to the girl throughout her life, and is often a cause for abuse and disrespect by both the husband and the woman's co-wives (Ocholla-Ayayo, 1982). Miriam and her family's expectation of shame and dishonor as a result of her misbehavior and resultant pregnancy, was in accordance with societal expectations when confronted with such a situation. Just like Miriam, many women in the younger generation understand the importance and symbolism of chastity, but fail to live up to this expectation. For example, reports show that the onset of sexual activity in Kenya has progressively arrived at a younger age, and at least half of the young people surveyed in studies in sub-Saharan countries had sex before they were eighteen years old (PRB, 2001). This, coupled with high levels of teenage birth rates, unintended pregnancies (PRB, 2001), and abortions (WHO, 2001), shows that young people are increasingly failing to live within boundaries prescribed by their traditional culture. Instead, as exemplified by Miriam and other young Luo men and women in this study, they are interpreting these sexuality regulations in a way that is less about symbolism and more about pragmatism. Miriam's comments about experiencing less pressure from her family and friends with her second pregnancy are telling. They suggest an interpretation that is less puritan with regard to premarital chastity, and based on certain individuals' abilities to deal with the consequences. Miriam and her family were somewhat accepting of her second pregnancy because, unlike with

the first pregnancy, she had completed school and had a steady financial benefit from her tailoring business. Her financial stability was important for providing financial support for her two sons and other members of her family. That seemed to lessen the perception of irresponsibility and lack of self-control on her part, since she had demonstrated her maturity and responsibility in taking care of the needs of the family. Also, her second premarital pregnancy was better received because the child's father had accepted responsibility, and was ready to marry her.

Shame is highly ambiguous. On the one hand it is linked with disgust, pity and morality as mental forces impede the course of the sexual instinct and restrain it "within the limits that are regarded as normal"(56). On the other hand, it is precisely these restrictions - shame, disgust, pity and morality - which have to be confronted and overcome in order to enter into the domain of a sexual life. The socialization process for adolescent Luo women demonstrates similar ambiguity with the notions of shame and honor. According to anthropological accounts (Ocholla-Ayayo, 1976; Evans-Pritchard, 1949), social learning was always conducted within an institutional environment. The process of socialization began with the child being born and raised in a family environment, where he/she was greatly influenced by his/her parents (but mostly by the mother) and older siblings, and always within the prescribed guidelines of the society. Between ten and fourteen years, the teaching process was assumed by the *jaduong' Dala* or head of the village, without specific attention to gender differences. At this time, they underwent *Nak*, an important tradition of extracting lower incisors to signify initiation into adulthood. After fourteen years, the girls were separated from the boys and their education was continued at the *Pim*'s place (*Pim* is a menopausal woman – often the

grandmother – but sometimes any elderly woman in the village could assume that duty, and would still be referred to as 'grandmother' by the girls, by virtue of her age and not kinship relation) or *Siwidhi*, until they were ready to get married. In the *Siwidhi*, the *Pim* taught them marriage rules, sexual education in the context of marriage, including birth control, what to expect during pregnancy and birth, medical rules, forbidden acts and ways of behavior that may attract curses, respect, and general entertainment through story-telling, song and dance. Young married women visiting their parents went to sleep in the s*iwidhi* to get more advice and share their experiences with the unmarried girls.

Given the strong emphasis on premarital chastity, it may seem like young Luo women were restricted in their interactions with their male counterparts. On the contrary, the literature indicates that Luo youth had rights and freedom to experiment on many issues, including sexuality. A Luo girl was free to have as many boyfriends as she pleased, so long as they were not from the same village, or that both girl and boy were not from the same clan or sub-tribe (Ocholla-Ayayo, 1976; Evans-Pritchard, 1949). Boys were free to invite and entertain their girlfriends in their *simba* (male dormitory)*,* and it was believed that such visits served to provide practical knowledge about sexuality for both adolescent males and females. For example, it was during such visits that girls were able to apply their knowledge about how to protect themselves from actual penetration during sex. It was important to learn to prevent actual penetration because the girls were expected to prove that they were virgins at the time of marriage. Also, they needed to pass the test to prove their capability for self-control. The boys were expected to learn how to perform their conjugal duties well and not shame their parents and relatives. In my view, this titillating sexual game provides a much bigger challenge to adherence to

prescribed sexual conduct, given the freedoms and great opportunities, such as the liberal visits to the *simba*, than does a 'zero-tolerance' environment, where youth are not allowed such liberties. Therefore, with closer scrutiny, maintaining the outwardly liberal atmosphere traditionally surrounding Luo adolescent sexuality is more challenging than it seems.

On the one hand, the young women are exposed to endless tests by allowing them to interact very closely with young men to a point just short of sexual intercourse. Their ability to demonstrate restraint in this circumstance is virtuous, but they are expected to overcome that virtue in marriage situations because then, sexual activity is acceptable. The contrast between the reception of the news of Miriam's first and second premarital pregnancies suggests a lack of clarity regarding expectations. It demonstrates the ambiguity that surrounds the concepts of shame and honor, and the shift in what constitutes normal circumstances. In the first instance, the family was disappointed and threw her out of the family home in the city. In the second circumstance, they created normalcy out of and legitimized the situation, because the circumstances, even without cultural backing, warranted acceptability due to the practical nature of their reality. Miriam's case leaves us with the question about what constitutes normalcy and who makes the rules in contemporary society. The participants in this study often cited traditional regulations of society as their guideline, but also often emphasized the importance of putting contemporary practicability into perspective in the final judgment. While the information obtained for this study suggests that different people might employ a different approach for each situation, they always draw on the traditional ideals as their reference point. The mere variation of the interpretation of these ideals shows that this is

a matter that requires further investigation.

It has been suggested by some studies (e.g. Freud 2000) that the overwhelming sense of 'shame' or 'disgust' that is inculcated in individuals during periods when sex is prohibited, eventually impedes sexual desire under what are deemed normal circumstances. Interestingly, I did not meet a single person in my study who felt that the need to be chaste before marriage overwhelmed them to the extent that they had difficulty exploring their sexual instincts in culturally acceptable circumstances such as marriage. Even after her disastrous experience with her first premarital pregnancy, Miriam had no problem engaging in and enjoying sex with her next boyfriend, with whom she had her second premarital child. This contradicts Freud's thesis that with continued pressure to be chaste, sexual desire becomes impossible to realize.

Mama Miriam was embarrassed by her daughter's first premarital pregnancy, and was concerned about the daughter's as well as her own honor and respectability within her conjugal sphere. Her reaction is most likely informed by the socialization process in the Luo community, where responsibility for the girl child is primarily assumed by the mother. In view of the close interaction of young unmarried women with the elderly women of the family/community, the behavior of the young was largely deemed as a reflection of the rest of the womenfolk in the family. It is not surprising, therefore, that Mama Miriam was concerned about her own reputation and family honor. As she said in one of our conversations:

> "The badly behaved child always belongs to the mother and the well behaved one is the father's child! That is how people see it here. When your husband wants to make a point about a badly-behaved child, he will say, 'Your child has done this, and your child has done that', but when the child is doing well, he will always be proud and say, 'That is my child.'" (Mama Miriam, 58 yrs, Female, Social

network, Kisumu).

Sharing in the consequences of premarital sexual activities stems from the shared responsibility of socialization for family members. It reflects the ability of the parents/elderly relatives to guard and guide their children in culturally acceptable ways. 'Unchastity' at marriage is very undesirable and shameful for the woman and her family, for it reflects on the relatives' inability to take care of their child, and the seeming lack of self-control on the part of the young woman. The ambiguities presented in the perception of honor and shame are clear in the manner in which young women's mothers are not expected to have direct conversations about sexuality, yet, they are held responsible for the consequences of violating the regulations. It is also interesting that young men are expected to have sexual experience at the time of marriage, yet they are not allowed to have premarital sexual intercourse with the young women that they are allowed to interact with.

Honor for Men

While the issue of chastity is central in the notions of shame and honor for women, the male honor in the Luo community is concerned with discipline, bravery, and keeping 'male secrets.' Young men were secluded and educated on these issues by an elderly man selected by the community.

At the same time as the girls were isolated in the *siwidi,* the boys, on the other hand, were taken to the *simba* (male dormitory) to join other senior boys, where they underwent training not only regarding discipline, bravery, keeping 'male secrets', but also in issues to do with courtship. The most significant education was given at the *Duol*, a hut

situated near the village gate, by the *jaduong' Dala*. Outstanding students, in terms of bravery and courage, received awards which included decoration and elevation of social position. Those who were not decorated were despised and 'could not speak at a social gathering' (Ocholla-Ayayo, 1976 Pp 64).

In my study with young men in Kisumu, I found that the concept of bravery was paramount in their evaluation of 'manhood', but most of them said that they did not encounter circumstances in which their bravery could be measured. While in traditional settings, young men were sent to war in order to demonstrate their bravery, men in contemporary society do not face these circumstances. However, as I continued to interact with these young men, I found that they had their own equivalents of battlegrounds, which had little to do with physical strength or willingness to die for the larger society. James, Miriam's brother, joined the UNIM project in 2005 after he learnt of the probable preventive nature of circumcision against HIV/AIDS. At first, he feared the pain he would have to undergo during the procedure, and the immediate weeks after circumcision. One of his friends from the neighboring Luhyia community had narrated to him the pain he had undergone when he was circumcised traditionally. The ceremony took place very early on a cold morning without the benefit of anesthesia or other sophisticated medical aids. The circumciser used a 'knife' to perform the thirty-second operation, and did not stay around to dress his wound because he was racing off to circumcise someone else in the next village. His father and uncles dressed his wounds and provided for his needs for weeks after the procedure. He was in such pain that he avoided eating liquid food in order to decrease the frequency of urination. His father found this out and started to force him to eat. According to his friend, it was the worst

pain he had ever experienced. Another friend told him of cases he knew where the procedure was not performed well and 'the privates rotted and fell off.' Such stories may have been true, or just exaggerations by his friends to embellish accounts of their own bravery in undergoing the procedure. Nevertheless, they created fear in James and, several times, he postponed his decision to get circumcised. On the other hand, he got reassurances from other circumcised friends, who told him that the pain was minimal and temporary, especially if done in a hospital setting. Additionally, UNIM Project counselors reassured him of high safety standards during the procedure and frequent follow-ups during healing to detect problems and advise on post-surgical care.

When he got circumcised, James felt that he had demonstrated bravery and had met the threshold to be a man in the sense that it was understood by his peer group, even though he did not necessarily agree that being uncircumcised made him a lesser man than his circumcised peers. As much as his non-Luo peers understood that circumcision was not a cultural threshold for adulthood or manhood for him, they often made him feel like he did not measure up in some way. Getting circumcised earned him respect and honor among his peers, and an unquestionable status of manhood.

In many communities that practice circumcision, it is an initiation ritual that symbolizes graduation to adulthood. In many respects, circumcision implies that men are now capable of all the activities and responsibilities that are expected of adults in their respective communities. The lack thereof suggests that the individual concerned is not recognized as an adult, and is perceived as incapable of carrying out adult responsibilities. Such responsibilities include marriage, family and leadership, among others. Like James, all core participants disagreed with the commonly held perception by

members of non-Luo communities that uncircumcised people are 'still children.' They generally did not regard themselves as any less grown up than their counterparts in circumcising communities. However, they wanted to be circumcised in order to be viewed as grown and capable men, and not be excluded from certain activities by their peers from non-Luo communities. At the same time, they did not regard themselves as any more grown up than their uncircumcised counterparts from the Luo community. In other words, nothing changed with regard to their personhood, apart from their counterparts' positive attitude and inclusiveness towards them.

The idea of manhood for James and other core participants did not end in the public sphere of friends and peers. Many of them felt that they needed to prove their maturity with other 'manly' responsibilities such as sexual prowess. As discussed in the case of Caesar above, sexual performance provides a sense of confidence and maturity for the young men, and demonstrates to their sexual partners and probable wives that they are capable of fulfilling their conjugal responsibilities.

During recruitment into the UNIM Project, participants were given information about the study objectives, duration, expectations, benefits and risks. Determining whether circumcision held preventive benefits against HIV/AIDS was the main and most emphasized objective. Thus, many respondents were aware that the study was a trial, and did not guarantee their protection against HIV/AIDS. But for most of them, the idea that circumcision could reduce the risk of HIV/AIDS was far-fetched and ridiculous. They argued that if circumcision could reduce the risk of HIV/AIDS, there would be far fewer infections among communities that traditionally circumcise. Most of the participants could not understand the scientific explanations provided by the UNIM study regarding

the role of the foreskin's cell composition in HIV/prevention, but, from practical

experience, they were aware that the presence of the foreskin made it difficult to maintain

good hygiene. As such, they felt that if the preventive effect of circumcision was not

proven, they would at least benefit with regard to improving personal hygiene. James'

words exemplify some of the responses by core participants:

> "I don't believe it [circumcision] works [to prevent HIV/ADS]. I was told that it is [a] 50-50 [chance] before I joined UNIM but I still don't believe it at all. There are so many people who are dying of AIDS among the Luhyia, and they have all been circumcised. So you see, it does not work.... I even know that my friend's brother, who is Luhyia and is circumcised, is infected [with HIV]. Maybe there is something else hidden about circumcision that we don't know, but as far as I know, people who are circumcised still get sick." (James, Male, Core Participant, 20 yrs, Kisumu).

Even as doubtful as he was about the effects of circumcision on the risk for

HIV/AIDS, James still joined the study. His hope was that the study would eventually

prove the preventive nature of circumcision, and he would be at an advantage. The idea

of contributing to science was particularly appealing to him, as it was to other core

participants, who viewed themselves as trailblazers in their community, as his and

another participant's quotes below show:

> "We were told that it is the first time they are trying to find out if circumcision prevents AIDS. It is the first time it is being tried. It is interesting and I think it is good to participate. Nobody has done it before, so we will say we were the first. We will see what happens...." (James, Male Core Participant, 20, Kisumu).

> "I know it is 50-50. Nobody knows for sure that it [circumcision] will prevent AIDS. But I wanted to be there, so I didn't care. I came for the screening and was praying that they did not reject me. I know that there are some people who were rejected. I just wanted to participate." (Cyrus, Male Core Participant, 19 yrs, Kisumu).

Being among the first to take part in such a study was very exciting for James, because he believed that his participation was not only going to help UNIM or him, but the Luo community as a whole. His reasoning was that HIV/AIDS was attacking the community and there was an urgent need to combat it by all means possible. Other participants talked about their uptake of circumcision and HIV/AIDS in such war-like terms as 'the war against AIDS', 'we have to beat AIDS', 'we have to win this war', 'it is the responsibility of the youth to save this community'. It seems that the youth in this study were defining a new battlefront to demonstrate their bravery and adult responsibility towards their community. Bravery is required to undergo the painful procedure, but it was particularly important for them to be able to undertake an action that was not culturally pursued by the community. For them, not knowing how some members of their community would react to their 'circumcised' status made the challenge harder and the results more rewarding.

After the trial was stopped in December 2006, due to overwhelming evidence that circumcision indeed had a positive effect on the risk for HIV/AIDS, I went back to chat with James to find out his thoughts on the results. He was very excited, as his words below show:

> "I know, that is such good news, though I still do not understand it. But I'm very proud to be in the group that helped to produce this information. I will tell people in generations to come - my children and their children - that I was part of that study. I think that this information is very important in fighting AIDS and I am glad that I was a part of its production... I still have my doubts about how it works, but if science has proved it, then I agree with it... I do not know how it will help me because I know that even now that I'm circumcised, I'm still at risk. If I sleep around and don't use a condom, I will get AIDS. But if the results of the UNIM Project help other Luo people, I'm happy that I participated." (James, Male, Core Participant, 20 yrs, Kisumu).

Clearly, James was skeptical about the results of the study but he felt very honored to be part of it, especially as the results were deemed to be effective for his community. It seems that the new battleground is intellectual and scientific, requiring mental toughness rather than the traditional warfare that revolved around physical strength. The youth in this study understand that their honor depended on their ability to help the community to overcome obstacles such as HIV/AIDS. It is very interesting that these young men were skeptical about the effectiveness of circumcision on HIV/AIDS risk at the individual level, but were positive about the community-level effect. Even after the results showed a positive effect, they still thought of the benefits in terms of the community and not as individuals. It is interesting that when they were asked if they would circumcise their own children in the future, most of them were negative, arguing that they would like their children to be able to make their own decisions because, what happened after circumcision was dependent on an individual's ability to 'take care of himself.' According to them, it would be a falsehood to impress upon their children that circumcision would insulate them against HIV/AIDS.

Respect

The notion of 'respect' in the context of Luo perceptions of sexuality provides for means through which standards of self-esteem, self-restraint and respectability are set, thereby guiding and restricting sexuality within culturally ascribed boundaries. In this way, respect is closely linked with secrecy and sacredness, since respectability is observed within and between a certain culturally defined group of people. In this study, the young people who formed the core group of participants seemed very well aware of

some boundaries within which they could express their sexuality.

Maurice was introduced to the UNIM project by one of the project recruiters, who often visited target areas such as tertiary school institutions where a large number of young men, 18-24, could be found. Maurice was a 2nd year student at Kisumu Polytechnic, where he was training as a car mechanic. He also owned two bicycles which he had rented out for *boda boda* business. Sometimes, he rode one of the bicycles himself to earn some extra money. When not with his friends at the polytechnic, he often went to the *boda boda* stage to catch up with other friends. When I met him at UNIM, it was his third follow-up visit after circumcision. He had healed well and had resumed 'normal life'. 'Normal life' was a term I often encountered when speaking to many core participants. By 'normal' they meant that they had resumed sexual activity, which was prohibited until a month after circumcision, or until they were examined at the UNIM clinic and declared healthy enough to participate in sexual activity again. For Maurice, life immediately after circumcision was not normal, not only in the context of sexual activity, but also in terms of performing regular day to day activities such as walking long distances or engaging in physically draining activities, such as riding his *boda boda* bicycle. Due to this incapacitation, he moved out of his polytechnic hostel to his parents' home, where his mother cared for him until he was well enough to resume light physical activity. Moving back home meant that Maurice had to explain to his mother about his condition. Given that he had not discussed circumcision with her or any other member of the family, it was an uncomfortable conversation when he had to explain why he needed his mother's help at this point, as he says in the quote below:

> "I spoke with my mother all the time when I was recovering [from circumcision surgery]. She had to know about my situation because she is the one who was

taking care of me – feeding me, washing my clothes. It was embarrassing but in the end it was good for us." (Maurice, Core Participant, 19 yrs, Kisumu)

His mother was initially unsympathetic, and chided him about him doing 'uncultural' things without consulting anyone. But she was supportive and caring, and eventually receptive and respectful of his decision. According to Maurice, the HIV/AIDS risk reduction argument was what convinced her that circumcision was beneficial to her son, and the Luo community in general. She said she had seen so many young people die of AIDS that she was open to new ideas that would improve the situation. I asked Maurice's mother how she felt discussing circumcision with her son and she agreed with her son's statement that the discussion was uncomfortable, but she appreciated the fact that she was able to share with him in his private decisions. To her, Maurice had demonstrated his trust and respect for her opinion. She reciprocated the gesture by honoring his request not to tell his father about his decision to be circumcised.

It was interesting that even though he was forced to share the news about his circumcision with his mother, Maurice appreciated that it was his mother and not his father. He said he preferred discussing it with his mother because she was more 'understanding' and less rigid, and would understand the reasons why he had made the decision to be circumcised. He often pointed out that his father was very strict, rigid, and for the most part, unapproachable. He gave an example of his experience when he was suspended from high school because he was, allegedly, caught with a bottle of alcohol. The school management did not investigate the issue properly, and they, unfortunately, suspended him and asked him to bring his parents to school for further discussions. His father was furious, and did not bother to listen to Maurice's explanation that the school management had made a mistake. He got a thorough beating from his father, who later

refused to attend the counseling sessions that had been suggested by the school because he was ashamed of his son. His mother accepted to go with him to the sessions, in which he was cleared of any wrong-doing after the real culprit was found. With regard to discussing circumcision with his father, he said, "Father would certainly never understand my decision.... This is bigger and would be more embarrassing than getting caught with a bottle of whiskey, which turned out to be untrue! I can't imagine what he would do – maybe throw me out of the home! [Laughing]." Maurice hoped that he would be able to discuss his new status with his father when circumcision became widespread and more acceptable among the Luo.

Anthropological studies have shown that, as commonly conceptualized in other African communities, 'respect' among the Luo is a broad concept that occurs not simply between the young and the old, or the leaders and the constituents, or the male and the female. It is hierarchical for all members of the society, even the dead, and directly calls for positions of prestige and honor, as conferred to certain members by virtue of their age, birth order, seniority, social position and function in society (Ocholla-Ayayo, 1976). Relationships are mapped out in such a way that the required 'respect' is strictly observed. For example, intergenerational discussions of sex can only take place between grandparents (or people of similar age) and grandchildren, as opposed to between parents and their children or between siblings (Heald, 1995). Also, these discussions cannot take place between people of different sexes. This is in view of the distinct interests and roles that different generations are expected to adhere to, in respect of sexual roles and prerogatives (Heald, 1995; Ocholla-Ayayo, 1976).

The examples of Maurice and his mother show us that there is a divergence from

the traditional characterization of relationships and notions of respect accorded in different types of relationships. Issues of sexuality are now discussed across generations and gender, not necessarily as a show of disregard for 'respect' laws, but as a response to existing tensions between the sexes and generations. Speaking to fathers in the social networks of core participants, I got the impression that most of them viewed their sons as easily influenced by 'the world' and incapable of making sound decisions about life. The lack of trust between fathers and sons is likely rooted in the perception that men are the custodians of culture and tradition in the home, which makes it difficult for the young men to introduce new ideas into their cultural repertoire. It is particularly hard for the young men because they are expected to inherit that responsibility from their fathers, and take charge in the preservation of Luo culture.

On the other hand, this case shows that mothers are viewed not only as trusting, but also as trustworthy. They are thought to be open-minded and receptive to new ideas. This perception encourages young men to discuss different issues with their mothers, not because they expect to have their way, but because they expect to get a fair hearing and constructive criticism from such discussions.

One of the main objectives of my study was to find out why young Luo men in Kisumu were interested in the UNIM Project. In 2003, I had a conversation with some male friends from the Luo community during which I told them about the UNIM Project and its objectives. They were very skeptical about the study's ability to attract enough participants since Luo people were generally not interested in adopting cultural practices that have no value for them. Furthermore, circumcision involves an 'intimate' and 'sacred' part of the anatomy, and is essentially irreversible. I heard this repeated many times, by

different people, whenever the topic arose. When the project began in 2004, I followed up with one of the Principal Investigators and he was very positive about the response. In fact, the turnout was so huge that the Project was having some difficulty dismissing interested people who, for different reasons, were not eligible for the study. Certainly, these participants were interested in getting circumcised, but it was not clear what drove them to choose to participate in a culturally 'valueless' and physically 'irreversible' practice.

Asked why they joined the UNIM Project, all core participants, as expected, said they were interested in getting circumcised. However, further probing and follow-up interviews revealed deeper factors that drove the unexpected positive response to the idea. For many, the desire to be socially acceptable was most important in their final decision to get circumcised. While this was a common desire, it was most pronounced among young men who lived in multi-cultural settings, and especially in urban areas. For example, George was born and raised in rural Kisumu, where all his friends and neighbors were Luo. He grew up in an environment where, he said, everybody looked like him. He played and bathed in the river with his friends without any self-consciousness with regard to being nude. When he entered a boys' high school in the central part of Kenya, he became aware of his circumcision status because almost all the students in the school were circumcised. It was most uncomfortable taking showers in the common shower rooms, and soon, he became a target for school bullies. The school authorities intervened once in a while, but that was only to stop physical abuse. Social stigma persisted, even beyond the school boundaries. Girls in neighboring girls' schools were made aware of his status and they would not associate with him in the ways that

they did with the other boys. He stayed in the school until he graduated, but resolved to

get circumcised to avoid further stigmatization. When the opportunity to join UNIM

arose, it was an easy decision to participate in the trial study, and he encouraged his

younger brother, who was due to enter high school the next year, to participate as well.

Here is part of our conversation on this subject:

> Respondent:"In fact, my brother Luka is also participating. He was circumcised a
> year ago. I told him what happened to me in school and that it was important for
> him to think about it, since he is also going to join [high school] next year. The
> experience I had, I don't think anyone needs to go through that. ... I finished high
> school but I don't know the kind of people I am going to meet as I continue in life.
> I don't want to feel the way I did in high school."
> Interviewer: "But now you are back in Kisumu, where many people are not
> circumcised. How do you feel about the fact that you are now circumcised?"
> Respondent: Now I feel different, just like I did in school, but it is a positive type
> of difference. Most of my friends who know that I'm now circumcised do not
> judge me. In fact, they ask me questions about my experience because they are
> also considering [circumcision]. Now they are the ones who want to be like me!"

I asked George what he thought of his new circumcised status and he simply said

"respected." Respect, or the lack thereof, was an issue that many of the core participants

raised every time conversations steered towards social networks and relationships. They

felt that their circumcised peers regarded them with a lack of respect that was related to

their uncircumcised status, and that in spite of all their accomplishments, they would not

earn the kind of respect and acceptance they desired without being circumcised. For

George, circumcision enabled him to broaden his social network and increased his

acceptability value beyond his Luo community. Interestingly, the unique status of young

men who got circumcised did not cause stigmatization by their Luo counterparts. Instead,

many felt that their status as trend setters enhanced their respectability among fellow Luo

youth, and increased their appeal to young Luo women.

George was excited about fitting in with his expanded network after circumcision,

but he was less prepared for the reception he received beyond the male peer group.

According to him, he only shared the information that he was a participant in the UNIM

Project with a few people, but was very surprised when many people (age mates) in his

neighborhood began to ask him questions about circumcision. More women were

interested in associating with him at different levels, including sexual relations. He said

that many women were intrigued and curious about his circumcision status and wanted to

have sexual relations with him for the experience, and also to 'compare' the experience

with uncircumcised men. While many of his colleagues in the UNIM Project considered

circumcision largely because of the prospect of appealing to a larger and more diverse

group of female folk, George's decision was primarily driven by the idea that he would

earn respect that transcended cultural boundaries in all aspects. The aspect of increasing

his ties with women was only part of the larger picture. However, he was glad when he

got involved in a 'serious' relationship as a result of his decision, as his quote below

indicates:

> "I had never had a real girlfriend from any other community until I got
> circumcised. That's because they saw me as a child and did not want to be my
> girlfriend. There was one Kikuyu girl who liked me very much but could not
> continue with the relationship. She said her parents and relatives would not be
> happy with the relationship. My girlfriend now is Kisii. I'm not sure if she would
> have minded that I was not circumcised, but I have heard her speak with a lot of
> pride regarding my circumcision status. So I think if I was not circumcised, it
> would have been a problem for her." (George, Core Participant, Kisumu)

Perceptions of inclusion and exclusion were not just associated with male peers,

but also involved perceptions held by women. As shown by George's words above,

women, too, were concerned about people's perceptions of their association with

uncircumcised men. For many, their concerns regarded stigmatization by their family,

relatives and community members, who view uncircumcised men as 'children' because of

the symbolic meaning of transition to adulthood that is associated with circumcision. As such, some women from non-Luo communities were unwilling to have social and sexual relationships with uncircumcised men.

The concerns about stigmatization were also expressed by women under different circumstances. Penina is the mother of one of the core participants and was one of the female parents who were aware of their sons' circumcision. She was from the neighboring Luhyia community, where circumcision is practiced to initiate young men into adulthood. She said that on many occasions, she had been ridiculed by her relatives for marrying an uncircumcised [Luo] man. Even though the remarks were often light-hearted, Penina felt targeted and needed to defend herself and her family. She had never discussed circumcision with her husband because she understood that it was not a cultural practice for him. Neither had she discussed it with her four sons, until one of them sought advice from her prior to joining the UNIM Project. Her son felt more at ease talking to her because she was from a circumcising community, and would therefore understand some of his concerns. According to her, she had witnessed other children, including her own relatives' children, ridicule her sons when they played together, and so she did not hesitate to encourage her son to get circumcised to avoid such awkward situations in the future. Even though she felt that it would benefit her son socially, she knew she, too, would gain some respect from her relatives if they learned of the development.

While Penina's case demonstrates exclusion for uncircumcised men, it also shows inclusion in another sense. Due to her son's interest in circumcision, she found herself included in the consultations and discussions regarding his decision. Under normal circumstances, he did not discuss matters of sexuality with either of his parents. It was

common to find that core participants consulted with their mothers and sexual partners, before deciding to get circumcised, but rarely with their fathers.

Secrecy

When I began fieldwork, I was required to inform government and other administration officials in the study location about my study, and provide them with a copy of my research permit. During one of my introductory visits to one of the village elders in Kisumu, I found the Elder presiding over a domestic dispute between members of two families. The woman had left her matrimonial home due to disagreements with her husband, and did not want to return until the dispute was resolved by the Elder's office. Even though the session (commonly referred to as *baraza*) seemed to be open to the public, out of respect for the council and the families involved, I chose to sit under a tree far from the meeting. After the meeting, the Elder invited me into his office, a mud-walled room extending out of the main house belonging to a local women's group leader. I explained that I did not join the *baraza* because of the sensitivity of the subject under discussion. He laughed, and said I would not have understood much of the discussion, even if I had sat through the entire session. He elaborated by giving me a narrative of one of his experiences presiding over such disputes: Three years before the time of our conversation, two families had come in with a dispute in which the wife had left her matrimonial home and would not go back. Her husband's family sought to have the dispute settled by the Elder's office, and, according to the Elder, this is roughly how part of the conversation played out:

Husband's Great Uncle: .....We are here to settle this problem so that we can

take our daughter back home, where she belongs. She has been away from her home for too long.

Wife's Great Uncle: We do understand that you paid bride price and so you are her family now. But we believe that your son needs to do his duties as well, in order for her to feel like she is family, and for the marriage to continue.

Husband's Great Uncle: To the best of my knowledge, my son has been a good husband. I have not heard any complaints from my daughter-in-law until she left our home. I don't think there is a big problem that cannot be resolved.

Wife's Great Aunt: My daughter tells me a different story. She says she cooks food every day, but her husband does not eat any of it. How can she be judged as a wife, if her cooking is not appreciated by her husband? She is now frustrated about all this, because she, too, gets hungry, and now she wants the elders to decide.

Husband: I don't disagree that she cooks, but I think she does not cook well. I have tried to persevere with it [her cooking] but it gets to a point where you decide to stop eating altogether.

Wife's Great Aunt: I don't understand how she could not be cooking well. I know that we have taught her well.

Husband: It is not only the cooking – the environment in which she cooks is not clean at all. It is difficult to eat food from such a dirty kitchen. Even the grass outside the kitchen house has not been cut in a very long time. I can hardly find my way into the kitchen house to eat!

At this point I was laughing hysterically at the narrative, and the Elder stopped talking and looked at me. He acknowledged that he had underestimated my ability to interpret coded language, especially because I was not Luo. He assumed that it would be difficult for me to put the dialog in the right context. I asked him why the dialog had to be coded and secretive when the occasion was in fact public and open to outsiders. He said the secretive language was necessary in order to communicate only to a certain audience. It really was a polite way of excluding people who, for whatever reason, should not be involved in the discussion. I asked him how the case ended, and he said the woman's great aunt took responsibility and promised to 'teach' her niece ways to improve her 'cooking' and 'maintain hygiene in the kitchen area and beyond'. She agreed to go back to her matrimonial home, and the couple has not been back to the Elder's court again.

As the example above shows, issues concerning sexuality are deeply personal and intimate, and socio-cultural restrictions preclude an open dialog on them. Secrecy ensures prohibition of sexual displays, discussions about sex, and nudity in public (Chege, 1993; Kisseka, 1973; Heald, 1995). Not only is sex not an issue of open discussion, but even in the sanctioned union of marriage, it cannot be referred to directly. For example, the desire for sex can be expressed only indirectly through the use of polite and vague phrases like asking for or offering 'food' (Kisseka, 1973), or offering to 'cook', or asking for food to be 'cooked' for you. Among the Luo, discretion and secrecy are major components of sexuality. In fact, when reference is made to one's matrimonial home or community, it is always "the place where she is 'cooking'" or has "cooked", and this is not necessarily in the sense of the literal meaning of the term 'cooking'. Even though she did not do her research among the Luo, Fieldman-Savelberg's (1999) book, *Plundered Kitchens, Empty Wombs: Threatened Reproduction and Identity in the Cameroon Grasslands* convincingly explores issues of infertility using symbolic and analogous references to 'food' – such as food not cooking well, or sticking to the side of the pot - to explain infertility. It is a good demonstration of the need to maintain secrecy for a sensitive sexuality issue such as infertility.

Secrecy with regard to sexuality is not limited to marriage unions alone. For many young, unmarried participants in my study, matters of sexuality were considered private, and information flow in that regard was privileged. During this study, I asked the core participants about the process involved in making the decision to join UNIM. The process varied, but it was clear that the prevailing process involved discussion or consultation about circumcision before the final decision was made. The case of 22 year-old Oaga

was particularly interesting because for the five weeks that I had been talking with UNIM participants, I had not met one who came to the clinic accompanied by anyone other than their male friends, who were, in most cases, also participants in the project. I met Oaga at the UNIM clinic in the early days of my study, when he came in for one of his follow-up visits. He was interested in participating in my study, but could not stay very long to chat with me at the time. He had to escort his girlfriend to a job interview downtown in an hour. Just then, a woman appeared behind him, smiling, and extended her hand to greet me. Her name was Rose. I let them both leave for their appointment, but made an appointment to meet with Oaga at a later date.

Three days later, I met with him after work, in a restaurant. He was an electrician (though not formally trained) with a local electric store downtown. The first of six children, Oaga grew up with his siblings and shared in their experiences at home and through school in Kisumu. They were very close. In high school, he made friends from different communities and was still in contact with most of them, three years later. He met Rose a year before he joined UNIM, and they had become so close that they shared 'everything'. They were cohabiting in a bedsitter in Kisumu, but kept a close relationship with their respective families. I was eager to discuss with him his unique position of having a supportive girlfriend in such personal matters as circumcision. According to him, it was Rose who initiated the idea of circumcision. One day, she brought home a flyer with details about UNIM and 'accidentally' left it on the coffee table. He read it, but did not take any action. After three days, she gathered the courage to discuss it with him, citing benefits in the area of hygiene and lower risk for HIV/AIDS, as his quote below indicates:

> "My girlfriend is Luo, but she is the one who started by asking if I had heard about UNIM. Her brother-in-law is a recruiter for that project so she had heard some things about the benefits of circumcision. She brought me the information leaflets which her brother-in-law was distributing, and that is when I started to think seriously about joining the project."

At first, he was embarrassed because he had never thought that his uncircumcised status was a concern to her, but he thought of the courage she had to gather to discuss her opinions, and promised to consider it.   The day he was circumcised, she was there to take him home, and she cared for him until he was completely healed and ready to resume 'normal life'. She felt as invested in this decision as he did, and that made their relationship stronger. Nobody else, including his 'very close' siblings and parents, was involved in this decision. Asked why his siblings and parents were excluded from the decision-making process, he simply said:

> "Some things are not meant to be discussed by some people. That is just how it is. I cannot discuss that with my two sisters or mother. I could have talked about it with my father and brothers, but it happened very fast. Besides, I'm older now and I do not need to share all my private matters with my family... Most of my friends know this because we talk about these things a lot. Some are also participating in the project, so it is not a secret [from them]. But my family was not at all involved and they do not know that I got circumcised. I prefer it that way because it is only for me and the person I share my bedroom with [girlfriend] to know about."

Oaga's case seemed unique at the beginning of the study, but as fieldwork proceeded, it was clear that a significant number of core participants' sexual partners were aware of their boyfriends' participation in UNIM. They may not have been as supportive as Rose, but they played a certain role in the decision-making process mainly through dialog. While Oaga's case demonstrates willingness for young men to involve their sexual partners in sexuality dialog, it also demonstrates the importance of secrecy with regard to sexuality among the Luo, as well as other communities in Africa. While the secrets

discussed here are individual, they illuminate a collective system of secret knowledge, implemented through circumcision. This is not to suggest that those who chose or were involved in decisions about circumcision were initiated in a secret society of sorts, as suggested by Herdt's (1999; 2003) theorizing of systems of secrecy. Rather, that the consumption of such knowledge is limited to a certain group of people who are deemed to have stakes in the issues believed to be important to their particular social realm. These people include peers, girlfriends, family friends and community leaders. To Oaga, it was important for his sexual partner and peers to know about his circumcision status because they shared an understanding about the meanings behind the practice.

The case of these young men's perception of secrecy differs significantly from Herdt's understanding of the concept. Using the New Guinea example, Herdt (1999; 2003) postulates that secrecy takes two dimensions of reality, one is the 'public reality', which involves representations and performances on the stage of society, the high stakes of political and economic roles, and all the other things that we believe to be important to the social realm. In addition to this reality, in New Guinea societies, and probably in many others as well, the secret society was intended, among those initiated into it, to provide an alternative reality to use in competition with or contestation of the public realm. The creation of the second reality is influenced by the anticipation of warfare. Warfare, in the historical and the material environment of the Sambia and many of the other people in New Guinea, created absolute conditions of survival that meant people could never really trust those outside their own village.

But because of the necessity of social reproduction, which meant that women would be brought in from other villages in order to ensure that incest would not occur, women

were being brought from hostile, essentially enemy villages to marry into a local patriarchal group. In a small village, these women were tantamount to being enemies. When they came in, then, they became a proxy for that enemy group. Thus, was created a double symbolic representation—of enemy as a political group, which is the "men over there," and "enemy as *Woman,"* who is "inside the group" and potentially disloyal and disruptive.

Contrary to Herdts' perspective, Oaga and Rose exemplify a type of secrecy that is inclusive of a group that was normally viewed as the enemy. It is essentially a pragmatic approach to understanding sexuality, especially with regard to HIV/AIDS. The pandemic is viewed as a common enemy that affects both men and women, and any successful approach would require both players. Female sexual partners in this case are viewed as partners, rather than enemies.

Conclusion

Anthropological theories of sexuality have often shown sexual behavior of both men and women to be strictly guided and regulated by culturally acceptable values and norms. Traditionally, the Luo transmitted group values and ideals from individual to individual through communicative techniques such as language, signs, proverbs, idioms, gestures, stories, riddles, and observation. In recent decades, probably due to modernization and urbanization, secondary techniques of learning such as formal education (reading and writing) and the media have gained prominence. As evidence in this chapter shows, the process of learning with regard to sexuality is taking a new approach for the youth in Kisumu. Learning is increasingly involving individuals that have previously been excluded in the process. As much as some aspects of this new

approach are not unique to the Luo, they are different from those that are traditionally and culturally ascribed. The adoption of male circumcision is itself new, but also, it has affected ways in which young Luo people view their own sexuality as individuals, and also, as a community.

According to Luo cultural repertoire, there is a direct relationship between sexuality and reproduction. In other words, sex is an act aimed at procreation and only within marriage. This, therefore, indicates that pre-marital sex is socially unacceptable in traditional contexts. Nevertheless, study participants are engaging in sexual activity before marriage. In this study, sexual activity appears to lie outside the range of influence of the marriage institution. Study participants were engaging in sexual activity before marriage, which is contrary to traditional societal expectations and values about virginity. The 'sacredness' associated with sexual intercourse seems to be less important for the young people, whose references to their use of condoms show that their priority is to protect themselves from disease and pregnancy, rather than protecting their virginity. There is indication of virginity being reimagined in ways that would have traditionally been unacceptable, but seem more acceptable under current social circumstances. As already mentioned, it seems that the need to prevent sexually transmitted diseases, including HIV/AIDS, and premarital pregnancy is gaining importance for many unchaste young people, and the idea of honor is being seen in the context of these two aspects. The parents too, especially mothers, who are perceived to be receptive of and encourage the idea of circumcision for their sons, are not only concerned about their honor and that that of their children, but also the social and health situations of their sons.

The narratives in this study show that young men and women are strategically

using circumcision to expand their social and sexual network. They are creating and sustaining social connections among peers and sexual partners; within and beyond Luo ethnic boundaries; between sexes; and across generations. The causality of these events is not unidirectional, and it demonstrates the complexities involved in ethnic identity dynamics. For the Luo, the need to fit in clearly existed before circumcision began in the community, but it can also be said to have been caused by the existence of circumcision in other communities. In other words, with regard to social and sexual networks, circumcision (or lack thereof) was the 'problem' and at the same time, the 'solution'. But more interesting is the process involved in the process of inclusion and exclusion. Young men striving to fit in with their peers in other ethnic groups, yet maintaining their associations among the Luo. Women expanding their networks to include the 'circumcised' Luo, and older women getting involved in areas in which they would traditionally bear no responsibility.

This process also reveals women's agency in matters of sexuality and circumcision, and casts a new light on the questions that have recently been raised about the lack of benefits from circumcision for women. It shows a social angle to circumcision, that actually provides a platform for continued dialogue between men and women, and youth and their mothers, about HIV/AIDS. Discussing about sexuality and sexual behavior has been shown to be vital in behavior change advocacy, and prevention of HIV/AIDS.

It is apparent that young men and women in Kisumu are redefining sexuality by adopting male circumcision. However, they are also raising questions about the role of male circumcision in reducing the risk of HIV/AIDS. The participants in this study show

that the impact of male circumcision on the epidemic could be double-edged. On the one hand, the expansion of sexual networks and the perception that circumcision enhances sexual experience may lead to risky sexual behavior, while on the other, the belief that male circumcision alone does not prevent HIV infection may lead to safer sex practices. This ambiguity suggests that there is need for further research to understand these issues before rolling out circumcision on a large scale.

CHAPTER FIVE

THE ETHNOGRAPHY OF A TRIAL

Introduction

In this chapter, I discuss the UNIM Project and its role in the adoption of male circumcision. The issues include how the study was carried out, its objectives and its impact on the perceptions and sexuality of participants, as well as the general Luo population. I discuss the use of such a study as a likely microcosm of the Luo community, and the use of the results to recommend policy that applies to the entire community. I argue that participants in the study are an elite group in the community – young, receptive to new ideas and education, adherent to medical advice and education, and eager to participate in cutting-edge scientific experiments – and are not representative of the community. The regular HIV/AIDS tests, medical assessment, and STD treatment in the trial study are incentives that influence most participants to positively change sexual behavior for the period they are participating in the trial. This approach is neither feasible nor sustainable in the general population for an extended period of time, and its weakness is clearly demonstrated by some sentiments among trial participants that they would find it difficult to continue 'on the straight and narrow' beyond the period of the clinical trial. Most were unsure, if not unwilling, to circumcise their own children in the future.

Background

In the realm of public health, the process of moving research findings from the academy to the real world is defined as 'translation research', which basically identifies evidence-based practices in basic and applied research and attempts to maximize their

benefits in non-research settings in as little time as possible (NIMH). According to Frank et al., (2002), translation research spans a continuum from basic science to development of new treatment, to clinical trials and finally, to practice. Applied researchers and implementers of intervention programs draw from a network of knowledge which is created and merged during the translation research process. Evidence-based practices that have emerged from new or modified treatments that are informed by research have often shown success in applied research. In the final stage on the continuum, translation research occurs when evidence-based practices are used in clinical trial to ascertain their effectiveness in various populations and circumstances (Frank et al., 2002).

Using research results to the benefits of lives in the larger population is not a new idea. In social sciences, findings from large surveys, both longitudinal and cross-sectional, have been most adopted for translation research because of their generalizability and replicability (Frank et al., 2002). Random clinical trials (RCTs), which offer little in terms of generalizabilty, but are relied upon for replicability, have also been used in translation research. While replicability is a major selling point for RCTs, it is also a point of contention with regard to translation in a scaled-up, non-laboratory, non-controlled contexts that involve actors with varying backgrounds and projections. This is because many quality-of-evidence ratings used to evaluate RCTs emphasize internal validity – the effectiveness of a given treatment or intervention under the conditions of the study design. These conditions include the study population, sampling procedure, step-by step procedures followed in the study, among others. In most RCTs, little or no attention is paid to external validity – the effectiveness of the treatment or intervention beyond the study settings and contexts (Green, 2001). Qualitative

research, particularly ethnographic research, has also been criticized for its inability to replicate, and provide evidence that can be used to generalize and translate research findings and interventions to larger populations. There have been suggestions to the effect that knowledge produced by empirical research has a limited impact on the decision-making process of researchers, funders, implementers of interventions. The disconnection between research and practice creates a disparity between treatments that are selected for intervention and those that are eventually selected to be applied to a larger population. Such situations often lead to questions of efficacy and effectiveness beyond the empirical study (Frank et al., 2002).

In reviewing the literature, it is important to ensure that there is internal validity of the data that are used in an RCT, for without it, one cannot be sure of the efficacy of the intervention or treatment. It is also clear that there is increasing recognition of gaps between research and practice, which has led researchers, policymakers, practitioners, and government officials to call for research that is not only applicable in research settings, but also relevant for practice and policy in the general population, and across a wide range of real-world settings and situations (Task Force on Community Preventive Services, 2005; Green, 2001; Green and Glasgow, 2006; Bero et al., 2001; Clancy, 2004; Gerberding, 2005; Hanney et al., 2006; Stryer, et al., 2005; Zerhouni, 2003). Some researchers, policy makers and implementers are concerned about the effectiveness of RCTs for their particular settings, which are often efficacious in settings and circumstances that are different from their own. And others question whether treatments or interventions that are effective within certain practices or communities can be generalized or applied in different and broad range of settings. Given these concerns,

there is a call for studies that consider both internal and external validity in their design, in order to inform real-world decision-making across a larger population, as well as a broad range of situations and contexts (e.g. Green and Glasgow, 2006; Mittman, 2004; Tunis et al., 2003).

Using the UNIM case, this chapter discusses translation research, from research among a select group of young men, to practice in a large population of varying age, cultures, social and economic wellbeing. As seen earlier in this dissertation, the proposal to conduct an RCT among the Luo was met with skepticism by many in the medical community in Kenya, mainly because of the long-standing belief that the Luo exhibit the most 'rigid' cultural perceptions, values and practices in the country. It was, therefore, surprising to see the overwhelming interest that the trial attracted among uncircumcised men in Kisumu. The seeds of these ideas were sowed by the speculative and anectodal evidence that circumcision was a factor in reducing risk for HIV/AIDS, while some was caused by different individual and community perceptions of benefits of circumcision, as discussed earlier in this dissertation. In as much as the evidence was generally speculative and anectodal, most of it was based on empirical observations by different researchers across different fields (Reining, 1989; Caldwell and Caldwell, 1996). These messages were not approved by the Ministry of Health or other agencies involved in the field of HIV/AIDS, but nevertheless, they generated interest and discussion among members of both circumcising and non-circumcising ethnic groups in the country. While the discussions provided different senses of risk for both groups, they were enough to get people beyond these ethnic groups interested in engaging in clinical trials that would determine a causal relationship between circumcision and HIV/AIDS. In this chapter, I

map out how such messages move from the research realm into public discourse, and back into the research realm of RCTs. The questions I address include: How are research results translated into language that is accessible to target populations and sub-populations? What is the role of clinical trials in the messaging process, and what is their influence on the uptake of interventions? With regard to intervention strategy, in which ways are results from clinical trials translated into interventions on a larger scale, beyond the secluded context within which trials occur? Are interventions based on clinical trials representative of the entire population or sub-population?

Through the use of ethnographic data that I collected from some participants in the UNIM Project, I address the disparities that may occur during the process of translating empirical findings of the RCT to apply them to the larger Luo community. I illustrate this by exploring the aspects of efficacy, scope/reach, duration and cost-effectiveness, all of which, with regard to circumcision, have been observed to be superior when compared with other interventions such as ARV treatment and behavior change, in the management of HIV/AIDS (Kahn, et al., 2006).

In addition, this chapter shows how ethnographic data can be useful in translating basic research from the controlled, artificial and ideal conditions of the clinical trial to the unpredictable and uncontrolled settings of the community. The discussion highlights how ethnographic data, which provide observation of behavior outside the RCT and produce detailed nuances and mechanisms of male circumcision can be useful in bridging research and practice.

Translating Efficacy

Eight months into my fieldwork in Kisumu, the UNIM Project was discontinued, based on preliminary results showing overwhelming evidence that male circumcision reduced risk for HIV/AIDS among young men in the study. These results were not surprising, since previously, ecological studies had shown that countries where males are circumcised, and generally at an early age, are less affected than others by the HIV epidemic. These studies argued for the likelihood of a durable protective effect (Moses et al., 1990), and in some cases, claimed that the protective effect of male circumcision was biologically plausible (Szabo and Short, 2000). Also, a year before the UNIM Project ended, a similar RCT in Orange Farm, South Africa had been discontinued because of preliminary results indicating a risk reduction of 60 percent (Auvert et al., 2005). So, while the results from the Kisumu trial were not shockingly new, they reconfirmed what seemed like a trend in these trials, giving additional biological evidence of the plausibility of male circumcision in the reduction of risk for HIV/AIDS, and provided scientists and other people concerned with HIV/AIDS renewed energy and hope for a new direction in the fight against HIV/AIDS. Most prevention strategies among adults in sub-Saharan Africa focus on altering key HIV risk behaviors and treatment of sexually transmitted infections (STIs), but often lack confirmatory evidence of reduced HIV incidence. The most effective interventions, such as sex worker programs, apply only to limited groups (Marshall et al., 2004; Stover et al. 2006). Effective vaccines remain elusive and are unlikely to be ready for many years (Newman et al., 2004; Levy, 2001). Thus, indisputable evidence of the efficacy of male circumcision as a new biologically based intervention that provides partial but durable protection, and not dependent on sustained

behavioral change, is seen as the best approach yet to provide the scientific community their best opportunity yet to make a significant contribution. The World Health Organization (WHO) and UNAIDS, among other international health agencies, are now backing prevention strategies that promote and provide circumcision for men in Kenya, and other African countries that have non-circumcising communities. The March, 28, 2007 WHO/UNIADS endorsement stated that "the efficacy of male circumcision in reducing female to male HIV transmission has now been proven beyond reasonable doubt. This is an important landmark in the history of HIV prevention". It went on to recommend circumcision for men and boys. Infant circumcision was also advocated because it is 'less complicated and risky". It represents a surgical 'vaccine' in the face of the dismal failure of two decades of research to develop a conventional vaccine.

UNIM Efficacy

a) Recruitment and Sampling

Generalization of HIV prevention effectiveness and cost-effectiveness research is a universal concern, particularly because the effectiveness of prevention strategy in one geographic setting may not apply in a setting with different beliefs and behaviors. Kahn et al., (2006) have argued that male circumcision's protective effect, based on biological rather than behavioral change, is more valid to generalize to other settings than are most HIV prevention strategies. The suggestion that male circumcision, based on its biological efficacy established through RCTs is a reliable approach to reducing HIV risk is indeed true, but its generalizability may be doubtful, given the controlled context in which RCTs are carried out. The UNIM study was reviewed by different experts at different levels and

Institutional Review Boards (IRBs) in three different countries (Kenya, Canada, USA) and was approved for its rigor, scientific soundness and ethical standards. In this project, a lot of effort was employed in recruiting the right participants in the community. Study participants were recruited in a variety of ways, the most general one being to provide general information about the study through local newspapers, radio, fliers and other media outlets. Also, the study enlisted a number of drama and musical groups in Kisumu to inform young people about the project and the opportunity for free voluntary HIV counseling and testing. Clinicians and nurses in most public/government and private clinics in Kisumu were also requested to refer their STD patients to Lumumba Health Centre (which housed UNIM) for HIV counseling and testing. These clinics provided a rich source of numerous high-risk young men as potential participants for the trial. Trained project peer recruiters approached the leadership of local community-based organizations to hold information sessions and discussions with the various local chapters to inform them of the study, its goals, and the availability of HIV counseling and testing. Recruiters talked about HIV prevention strategies and referred eligible the men to the study clinic. By providing transport to the study clinic, the study was able to recruit a significant proportion of young STD clinic attendants for HIV counseling and testing, and other participants from the community. Participants were compensated for time away from work and for travel to the clinic for all regularly scheduled visits, at the rate of approximately $4.00 (300 Kenya shillings) per visit.

For inclusion in the study, men had to be uncircumcised, HIV seronegative, sexually active (defined as reporting sex within the last 12 months), aged 18-24 years inclusive, have a Hb of 9.0 or greater, and be resident in Kisumu district with no plans to

move away for the duration of follow-up (two years). They had to return for follow-up as required by the study protocol, and agree to periodic HIV testing following appropriate pre-test counseling and informed consent. Men were excluded from the study if their foreskin did not cover one-half or more of their glans, if they were not sexually active, not resident in Kisumu or surroundings or unlikely to remain there for the follow-up period, or unwilling to conform to the follow-up protocol. In addition, men with hemophilia or other bleeding disorders, or other medical conditions for which a surgical procedure is contra-indicated, were excluded. Other exclusion criteria included hypospadias or the presence of an absolute indication for circumcision (e.g. urinary retention). As indicated above, men who had a condition that could have temporarily contra-indicated surgery were excluded until the condition has resolved.

The first visit was used to provide pre-test counseling and screen potential participants for HIV, using CDC-recommended procedures, after which results were provided at the same visit. Also screening for the hemoglobin (Hb) level was done using two drops of blood taken from the same finger prick as for the HIV tests. Any participant with Hb levels below 9.0 were excluded, counseled to eat green vegetables, given multiple vitamins, and invited to return after one month. Those who were concordant HIV-negative and Hb levels of 9.0 and above, were invited to enroll in the study after a brief physical/genital exam to ensure that they were uncircumcised.

On the second visit, during which randomization was done, all participants were given a detailed explanation of the study and a detailed review of the consent procedure, after which all consenting participants' medical history was taken and a medical exam performed. As indicated above, a physical/genital exam was done to verify circumcision

status, and the presence of genital ulcers, urethral discharge or other genital conditions were also be noted. Blood and urethral discharge samples were collected to test for STDs. Also, a questionnaire assessing sexual risk behavior was administered to obtain socio-demographic and health information and to assess behavioral risk factors. Participants were then block-randomized to treatment and control arms, through a process stratified by age, with two age groups: 18-20 years and 21-24 years. Block randomization within strata was done to ensure approximately equal sample sizes in the two groups. An opaque envelope system was used to block-randomize - the participant was randomly assigned an envelop on which he would be registered in the trial prior to opening. All participants in the control group were told that if circumcision was found to be unsafe, they would not be offered surgery. Unless circumcision was found to be unsafe, those in the control arm were offered circumcision at the end of their two-year participation period. At enrollment, all men were informed that, if they were randomized to the control arm, at the end of their 24 months of follow-up, they would be provided with the best information available at that time regarding the risks and benefits of male circumcision. The UNIM Project was able to provide them with safety data from the circumcisions performed at the study clinic, though they were unable to tell them whether circumcision decreases or increases the risk of STDs or HIV infection until the study was canceled in 2006. They had the option to accept circumcision at the end of their 24 months of follow-up on the basis of the information the study could provide at the time, or to wait until the end of the study, when there was expected to be definitive evidence of efficacy of circumcision as a prevention measure.

Also, participants who tested HIV seropositive at any point during their

participation in the study were purged from the study, but they were referred to the 'post-test club', which was essentially a support group formed by UNIM to provide social support for HIV positive men, and treat opportunistic infections of people who are found to be having HIV. They were also referred to other facilities that would provide them with HIV counseling and treatment services around the district. They lost access to all the benefits they had with the UNIM Project, including medical services and compensation money given on every visit. Nobody was expelled from the study due to risky sexual behavior or occurrence of other STDs. While the primary endpoint of the UNIM Project was HIV incidence, the study was also interested in establishing STD incidence, evaluating any adverse clinical effects of the circumcision procedure, and differences in sexual behavior, perceptions of sexual function and sexual pleasure between circumcised and uncircumcised men. The study hypothesized that there would be no differences between circumcised and uncircumcised men in their reported sexual behaviors.

b) Clinical Management

Circumcision was performed on those in the treatment arm on the same day that randomization took place, or as soon as possible after randomization, preferably within a few days. Circumcised men were counseled to refrain from sex for 30 days post-surgery, and also counseled about risk of HIV infection through open wounds during the healing process. In addition to checking their wounds to assess how healing was occurring, circumcised men were also checked for complications, levels of pain and asked about their resumption of work and other activities, satisfaction with the procedure and care at the clinic and their sexual activity three days, eight days and one month after the surgical

procedure.   Men in both arms were given HIV testing and counseling one month after enrollment and again at three months. Further follow-up was done at 6 months, 12 months, 18 months and 24 months after randomization with behavioral risk assessment, HIV testing and counseling, and STD testing and treatment at each interval. Participants were allowed to visit the clinic for unscheduled visits at any time during the 24 months of follow-up.

Unscheduled clinic visits were encouraged whenever participants felt the need for medical attention. At such visits, medical examinations and laboratory testing were conducted as indicated above, and appropriate treatment provided for common medical problems, free of charge. Medical referral was made if required.

As with all visits, any adverse events[1] were recorded. Characterized as mild, moderate, severe or death, not related, possibly related, probably related or definitely related to the circumcision procedure, adverse events included pain, excessive bleeding, excessive or insufficient skin removal, anaesthetic-related events, swelling/hematoma, damage to the penis, infection, delayed healing of the wound, erectile dysfunction and psycho-behavioral problems. Appropriate medical care for adverse events was provided to all study participants, as well as surgical care if and when required. For medical and surgical complications that the study could not attend to, participants were referred to the New Nyanza Provincial General Hospital (PGH) in Kisumu.

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1 An adverse event is any untoward medical occurrence in a participant and that does not necessarily have a causal relationship with the treatment. An adverse event can therefore be any unfavorable and unintended sign (including an abnormal laboratory finding), symptom, or disease temporarily associated with the beginning of the treatment (i.e., following randomization).

Counseling and Education

All the participants were counseled at enrollment and all follow-up visits to reduce their risk for HIV infection. They were advised to consistently use condoms, and where applicable, reduce the number of sexual partners. Counselling on condom use and sexual risk reduction was provided by trained, experienced, native-speaking counsellors. Additional counselling was provided by the project physician and clinical officer as required. In the community, basic information about the study and about HIV infection and circumcision was provided by the peer recruiters, who received special training by the research team in this regard. Men who are found to have STDs or HIV infection were urged to bring their partners to the clinic for treatment and counselling. During clinic attendances, individuals and their contacts were provided with appropriate health education and counselling advice, including advice on condom use, and they were offered STD and HIV testing as indicated above. Condoms were provided free of charge to all men and their partners.

Efficacy on a Tight Leash

As seen in the design of this RCT, the participants were very carefully selected and monitored throughout the study. The study environment was closely controlled and participants were under close supervision, through counseling, testing and treatment of STDs, complications arising from circumcision surgery and other non-circumcision-related illnesses. Obviously, this study design was instrumental in achieving the outcome of the study in terms of HIV incidence during the period between the time of randomization and 24 months of follow-up, minimizing complications due to

circumcision surgery and influences on sexual behavior. The question of effectively translating these outcomes to a broader and more complex population is important, but, according to some members of the UNIM research team, it was beyond the scope of the RCT. To try and address this question, I closely followed participants in my study, asking questions and observing their interactions with peers, girlfriends and other sexual partners.

One of the most revealing cases was that of Omollo, a 22-year old participant attending college at a local Polytechnic, studying electrical engineering. He joined my study as a member of Bob's, one of the initial participants, social network. My first meeting with Omollo was at a youth event initiated and facilitated by a community-based organization (CBO) called Tuungane Youth Project, for which Bob, one of the initial participants in this study, worked as a peer educator. I was following up on Bob's invitation to visit his work place and meet his co-workers - some of whom doubled as friends, and clients. I had heard about Tuungane from some of my study participants, who were also participating in Tuungane, and other community members, and looked forward to learning more about the project, as well as meeting participants and other beneficiaries.

Tuungane Youth Project is an HIV intervention program being implemented by Impact Research and Development Organization, a local non-profit making organization based in Kisumu, Kenya. Initiated in October 2004, Tuungane (which means let's join together) brings together youth, parents, teachers and religious leaders to fight HIV/AIDS among the youth residing in the informal settlements in Kisumu city, as well as in Suba District. The project targets youth and young adults below 29 years and was at the time, being funded by the President's Emergency Plan for AIDS Relief (PEPFAR) through the

Center for Disease Control and prevention (CDC). The project objectives included

training youth on life planning skills, peer counseling and education, and providing health

talks to participants. It also offered HIV counseling and testing, STI treatment,

HIV/AIDS care and treatment, PMTCT, Post-rape care, family planning services, and

alcohol and substance addiction counseling and treatment. The CBO also designed and

distributed information, education and communication (IEC) and behavior change

communication (BCC) materials with behavior change messages, sexual and reproductive

health information, with the aim of promoting abstinence and faithfulness among the

youth, implementing activities and providing services that aim at reducing HIV and STI

infection among young people. In addition, Tuungane also provided recreational activities

to reduce idleness among young people.

It was to one of such recreational activities that Bob invited me to participate.

Tuungane had organized a football tournament featuring teams from four sub-locations

that are predominantly inhabited by informal settlements. As a peer educator, Bob was

one of the key people involved in organizing and publicizing the event. Many young men

and women, as well as their parents and community leaders were in attendance, cheering

for their neighborhood teams, and socializing with other attendees. Also in attendance

were students from Kisumu Polytechnic, on whose sports grounds the event was

happening. Since Bob was busy with organizing the activities, I did not get to interact

with him for most of the event, but at every opportunity, he introduced me to his friends,

neighbors and community leaders.

Omollo was one of the friends that Bob introduced to me on that day. He was

attending the event not only as a member of Tuungane, but also because the event was at

his college campus and was 'free and fun'. We spoke at length on this day, as he gave me

some background information about himself, including the fact that he was also a

participant in the UNIM Project. Over the period of this study, I met him often, since, it

turned out, that he was in fact, in the social network of three of my initial participants. I

interviewed him many times and attended some of his social activities (which were also

attended by his friends, who were also initial participants). We talked about a range of

issues ranging from his childhood to expectations for his future. We often discussed the

subject of circumcision and HIV/AIDS, as well as sexual behavior and other issues

related to young people, such as drug/alcohol use. During one of our discussions about

circumcision, he talked in detail about his sexual relationships, pointing out how he had

changed his sexual behavior because of the counseling he had received from UNIM.

Pressed further, he revealed in the quote below:

> "You know how UNIM operates. They are checking you every time you go there. They ask you questions about what you have been doing and tell you when you are doing something wrong... They check if you have AIDS every time you go for follow-up, and if you have it [AIDS], they will tell you that you are not part of the project any more. I remember one time when I went there to be treated for something I thought was an STD, and the counselor and the doctor gave me a long lecture about the risk of having sex without a condom, which would also put me at risk of getting AIDS and getting thrown out of the project. Of course, I did not want to get AIDS, but it would also be a disappointment to be thrown out of the project, where I am getting an allowance every time I go for a follow-up visit, and also getting treatment when I get sick. I would not like to miss out on such benefits... In the end, it was not an STD. They found that I had a bad rash, which they thought was due to too much heat. You know Kisumu is very hot, and at that time it was hotter than normal. They gave me some ointment and advised me to dress in loose clothes and always be hygienic. But it made me think about the risk that I was taking with my behavior. I really want to be part of this project until the end. It is a good project" (Omollo, 22, Kisumu).

Asked how he had changed his behavior, he said he had reduced the number of

sexual partners, and was also using protection with all three of his girlfriends. He

complained about how difficult it was to only have three girlfriends because he was very

popular at college, and many girls were attracted to him, especially because they knew

that he was circumcised. He believed that if his participation in the project were

discontinued for whatever reason, some of that popularity would diminish. In his words:

> "I have to be a good boy. I want to continue with UNIM so I have to try
> hard to be a good boy. You know when you go there and the counselor
> takes out your file and asks you questions, it is very embarrassing for you
> to be saying that you still sleep around. I feel embarrassed every time the
> topic of my three girlfriends comes up, but at least I feel better because I
> use the condom. But I know without such scrutiny, I will be back to my
> original self. I think that might be the case when I finish with UNIM."
> (Omollo, 22, Kisumu).

Omollo's opinion on sexual behavior outside the context of the RCT was shared

by many of the young men I spoke to. They felt that they were so closely monitored that

they were compelled to behave in a certain way in order for them to continue to

participate in the study. They felt that it was crucial for them to continue to be part of the

study because it enhanced their social status among their peers, and made them popular

with women (as discussed in detail in chapter 4). In addition, the project provided them

with incentives such as health care and money. All of the young men in Bob's social

network expressed similar opinions about the importance of continuing to participate in

the UNIM Project, as shown in the quote below, by one of Omollo's friend and colleague

in college:

> "All my schoolmates envy me because I am with UNIM. They think it is very nice
> to be part of the project. I get many things, such as medical cover. And the
> circumcision is free, and very professionally done. I had always wanted to get
> circumcised, but it was too expensive in the hospitals. I remember asking at
> Russia (common name used to refer to the Nyanza Provincial General Hospital)
> and they said it was 1500 shillings. That is too much money for a student like me.
> And am sure my parents would be unwilling to fund something like this. I also get
> pocket money. You know here, the Polytechnic (college) does not give us health

care. In many cases, they will send you to Russia and there, they don't have very good care and medicine. It is very disheartening over there. The UNIM clinic is great. They check you thoroughly and give you the appropriate medicine at no cost. I hope by the time I finish at UNIM, I will be done with college and will have a job and a good salary to take care of my health the same way that UNIM is caring for me. But for now, I will do everything to remain with the project." (Young man, 22, Social network, Kisumu).

Omollo's younger brother narrated how he joined the project, emphasizing the influences of his older brother, who seemed to enjoy his participation in the project, and was getting 'paid' to participate. He said:

> **R:** I really wanted to join UNIM when I saw that Omollo was getting all these favors. So, I went there to sign up and they said I was too young. They said I had to be eighteen, and had to have a national Identity card to prove it. I was only seventeen at the time. I was disappointed, but I did not give up. The day I got my ID, I went straight to the UNIM clinic to join. I was very happy when, after they looked at all my papers and I was examined by the doctor, they told me to come back the following day to decide whether I was to be circumcised or I was to be in the control group. I was very happy... After struggling that hard to join, I don't think I want to mess it up. I want to be in the Project's good books." (Young man, 20, Social Network, Kisumu).
> **I:** What do you mean that you do not want to mess it up?
> **R:** "I try not to get into trouble. You know, the project will send you away if they find that you have AIDS. So, I don't do things that will put me at risk. I use a condom with my girlfriend, and also when I stray a little and sleep with someone other than her. They will test you for AIDS every time you go for your visit at UNIM, so you try to make sure that you are not going to test [HIV] positive.... There are times when you are so afraid that you may turn out [HIV] positive because you never know with condoms. Sometimes you are just not sure, so it is always a relief when you are [HIV] negative. It scares you so much that you don't do anything [have sex] for a while after the test. But then you forget about it a little and resume, and then start to worry again when you are about to go back for another [scheduled] visit. The regular tests keep you on your toes." (Young man, 20, Social network, Kisumu).

In Omollo's network of friends, the monitoring and counseling extended beyond UNIM. When they invited me to participate in some of their activities at Tuungane, I realized that I knew many of the participants, including some employees, such as peer

counselors. At one point or another, I had encountered them at UNIM, either as participants or visitors waiting for their friends who were participants. Upon further inquiry, I found out that Tuungane's steering team comprised of the same people who held leadership positions at UNIM. Some of the participants at UNIM were recruited during Tuungane events such as the football game I was attending. There were posters, leaflets and other advertising material about UNIM, inside Tuungane offices, as well as distributed during Tuungane events. UNIM recruiters were known to frequent Tuungane premises to give Tuungane participants information about their project and, eventually recruit them to join UNIM. The counselors and peer educators and counselors at Tuungane said that in addition to the training they received at Tuungane, they got additional information and advice from trained counselors at UNIM. According to one UNIM official, the intersection and exchange of participants, officials, activities and information between UNIM and Tuungane, was unplanned, but it worked well for both projects.

As seen in the description of the UNIM protocol, it was not part of the study to have external activities that were in close collaboration with the study, except for HIV/AIDS treatment centers and other post-testing 'clubs'. However, the intersection and overlap of leadership, activities and participants with Tuungane is clear, and according to the participants and UNIM researchers, worked to achieve the goals of both projects. In any case, it raises questions about the efficacy of the intervention since members of both the control and intervention groups are constantly interacting with each other, as well as with the researchers outside the settings of the study. In randomized designs such as the UNIM, participants are allocated to either the intervention or control arm of the study,

possibly because there is a large population to draw from and the likelihood of members of the different arms interacting in the community is minimized. In many such studies, the intervention community is often geographically distant from the control community in order to minimize contamination. It appeared as though many of the participants in the project knew each other and interacted closely in the community. And the presence of the project in the community through proxy – Tuungane – worked further to keep participants connected, and possibly, contaminate the study.

For ethical reasons, I was not allowed into the counseling sessions at UNIM, but I was able to get most of my information regarding these sessions from both the participants and the counselors. Dennis joined UNIM as a counselor three years prior to the time of my study. He received his training and certification in HIV/AIDS counseling five years earlier, and had worked as a counselor with various projects in Kisumu district. During one of my interviews with him, he talked about the difficulties of getting the right sample for the study. Many of the young men who came to register to participate and discovered that, for one reason or another, were ineligible, went back home and tried to 'rectify' their situation, then return to register again. He gave an example of young men who were very interested in participating but were ineligible because they were below 18 years. On a number of occasions, they caught potential participants with fake identity cards or birth certificates. In any case, despite their strict recruitment methods and elaborate vetting process, he was not entirely sure that only eligible were admitted to the project.

Some of the most revealing cases of fraudulent participation involved the requirement that all participants be sexually active. According to Dennis, he had

encountered cases of people who came to register to participate and were disqualified

because, during their first interview with the counselors, they indicated that they were not

sexually active. Below is my conversation with Dennis on participants who went back

home to 'rectify' their situation:

> **Dennis**: It was interesting to see them go about it. I came across a number of them who were not involved in sex at the time. So after talking to them and establishing that, I told them that they do not qualify to be in the study. You could see that they were very disappointed. Some of them would change their story right there and say they were lying about being celibate in the first place, so I should still consider them for the study. In such cases, I always told them 'no'. Others went away and came back like after a week and declared that they had had sex in that week, and so they were now eligible to join UNIM. The answer was still 'no'. But it was very interesting to watch how they went about it... There was one particular guy who came back three times. The first time, he was not sexually active, so we sent him away. He came back after a week and said that he was now having sex and so we should include him in the study. He told me he had in fact come with his girlfriend, who was sitting in the waiting room as we spoke, to prove to us that he was indeed sexually active. I did not bother to talk to the girlfriend because it was pointless. The answer was still 'no', because we had disqualified him when we first vetted him. The third time he came in, he had another identity card, which, I later found out, belonged to his older brother. He was just so persistent and I warned him that if he came back, I would call the police. He did not come back again.
>
> **I:** Did you ever find out if they actually had sex when they went to 'rectify their situation'?
>
> **Dennis:** We have no way of telling if they actually went and had sex, or if they were lying about their celibacy in the first place. We just go by what they tell us. But we have heard from people who are condemning the project, saying that the requirement of sexual activity by the project is encouraging young people in the community to have sex. At one time, one of our recruiters was almost beat up by members of the community because some people in that community were concerned because they thought that the project was encouraging young people to have sex in order to participate in the study. It is all misconception, but I think there are some young people who might assume that that is what the project is encouraging." (Dennis, UNIM Counselor, Kisumu).

The experiences narrated above by participants, project officials and members of

participants' social networks highlight the thorough process by which UNIM recruited

and maintained only desirable study participants, and how important it was for the

participants to join and remain in the project. It also shows the extent to which the project itself influenced sexual behavior for participants, either positively or negatively. It seems like some of this was anticipated by the project as shown in the study proposal (Bailey et al., 2004), in which it was posited that 'treatment might potentially alter the subject's sexual behavior in follow-up, which could affect the subject's risk for HIV infection. The primary and secondary analyses previously described consider this as part of the intervention; these analyses should be considered "effectiveness analyses."(26) In its analyses, the study separates 'effectiveness' (which I discuss in further detail in the next section) from 'efficacy' in that 'effectiveness' consists of analysis that does not control for behavioral influences, among other covariates, while 'efficacy' is obtained by 'repeating the adjusted analyses in, and adding covariates measuring the participant's sexual behavior during follow-up. This analysis is considered an "efficacy analysis" because it will assess the effect only of the operation, controlling for all other variables.' (26).

While the study anticipated the possibility of circumcision influencing behavior of participants in the treatment arm, it did not consider that the project itself, as an entity, through its design, would have its own effects on participants' perceptions and behavior, irrespective of their treatment assignment within the study. Omollo and his friends' narratives show that aspects other than circumcision itself, played a major role in the sexual behavior of UNIM participants and their social networks. These included benefits such as health care, compensation money, free circumcision, free HIV counseling and testing, as well as requirements of the study population that participants had to fulfill in order to be part of the study. Clearly, these aspects play a prominent role in participants' existence within the context of the project, but may not necessarily be reflected in the

final analysis of the efficacy of circumcision as a preventive measure against HIV/AIDS. This is because efficacy analyses in this case control for behavioral factors, as well as other covariates, none of which reflect the underlying influences of the study itself. Given this, issues arise of how a similar efficacy level can be achieved in a larger context, devoid of project incentives such as free medical care, circumcision, counseling and testing and constant surveillance achieved through other networks that closely work with UNIM. How would this efficacy level be translated in a context where the population is much larger and varied in demographics than the study population?

Omollo and his friends, who represent the general view of young men I spoke with, provide us a glimpse into how most of the participants involved in UNIM would behave outside the context of the study. In this regard, their narratives provide us with a starting point as to determining the efficacy of circumcision in a broader context. It is clear from these accounts that without the incentives provided by the study, the efficacy levels would be significantly different and participation would be significantly low. The lack of such constant monitoring, testing and counseling as was provided by UNIM and Tuungane in the 'real world' was viewed as a challenge to maintaining safe sexual practices by both UNIM participants and their peers, as well as researchers. Many participants that I spoke with were of the view that they would not have maintained their participation in the project for the entire 2-year period had it not been for the constant monitoring and incentives that the project provided them. And indeed, the project anticipated problems with loosing participants to follow-up, and so the study design was such that participants were provided with incentives. Interestingly, many of the study participants felt that the constant monitoring, testing and counseling was somewhat

intrusive, and that under different circumstances, they would not agree to be subject to these procedures. What was most significant to their acceptance of these conditions was the follow-up they received from the project. For example, Omollo believed that, under different circumstance, he would not go for an HIV test because he would be afraid of the result and his future. In his words:

> "I had never gone for a test before UNIM. I was so afraid that I might be [sero]positive, that I was discouraged to go for a test. But it is very different here with UNIM. I feel that here, even if they find you to have AIDS, there is hope of something hopeful after that. They will remove you from the project, but they will send you to a place where you can get proper counseling and treatment. In other clinics, you are tested and then told the result. And that is the end of it. It discourages you from going to test because it is like the end of everything if you are [sero]positive....You couldn't have convinced me to go for testing in those circumstances. What is the point if all they will tell me is that I am [sero]positive and they don't help me further? That is just torture in itself. I don't have to go through that, so I would not agree to be tested. But this here is good. At least there is hope after a [sero]positive test."

While most UNIM participants believed that their participation in the study had a positive effect on their sexual behavior, the general perception in the community was somewhat different. The idea that UNIM project encouraged youth to be promiscuous was widely held in the community, and some of my study participants' parents were skeptical about their children's participation. As mentioned earlier in the dissertation, many of my study participants' parents, especially fathers, were unaware of their children's participation in the RCT, mainly because the youth did not consult or seek advice from them for different reasons. One of the reasons which many participants cited for not informing their fathers was that their fathers' perceived circumcision as culturally inappropriate, and would not, therefore, be receptive to the idea that their children were considering it. Not only was this idea strongly held by participants' parents, but also their

sexual partners. During one of the events at Tuungane, I met Akinyi, who came with her friends to cheer her favorite football team from the Polytechnic. She was curious to know what I was discussing with the boys, so she approached me after the games and asked which team I was cheering for. I told her I did not favor any particular team, since I had friends playing on several of the teams that played that day. She then said she was glad that I was not particularly cheering for team *Shujaa* since all the players on the team were 'players', who should not have been allowed to participate in the tournament because they were not the best role models for the youth at Tuungane. Upon further inquiry, it was clear that almost all the *Shujaa* players were current or former UNIM participants. According to Akinyi, they thought they 'own the world', and used their affiliation to UNIM to gain popularity with women. During subsequent interactions with her, she told me that one of the men on the *Shujaa* team was her former boyfriend, with whom she got separated because of his apparent popularity with women when they found out that he was a UNIM participant [taken to mean that he was circumcised]. According to Akinyi:

> I always laugh when I see girls following him around because they think he is circumcised. It is funny because they always leave after a while, and he gets another one. He has had so many since I left. They decide to leave because they think he is circumcised, but when the moment of truth comes, they find out that he is not! He is in the group that is not circumcised until the end of the project [control group] and these girls do not know that. They don't even understand that there are two groups.... I did not leave because he was not circumcised, but because he was running around with so many girls after he joined UNIM. He was not like that before joining UNIM. Many of them are not like that when they join [UNIM]." (Akinyi, Social network, Female, Kisumu).

Accounts like Akinyi's were often reiterated by members of the community, especially when they referred to the sexual behavior of UNIM participant. The community seemed to be of the opinion that the project has a negative effect on

participants' sexual behavior, yet the opposite position was held by the youth themselves, who roundly thought that the study discouraged risky behavior, and that they had improved their own knowledge and behavior as a result of participating in the RCT. Regardless of where the truth lies, it is clear that the presence of the project influenced different aspects of community life, and that the project itself was influenced by events beyond its realm.

Translating Effectiveness

The experiences of Omollo and his friends not only prompt us to ask questions about the influences of the project on the behavior of participants and, subsequently, the efficacy of the intervention, but also the importance of understanding the extent to which this level of efficacy can be to the rest of the community. To attain similar levels of efficacy at population level, it would need similar conditions as those under which the study was conducted. Obviously, going by the participants' narratives, these conditions were either unavailable or could not be accessed in the community, and thus, their decision to join UNIM. In this case, it raises the question of generalizability of this intervention to the entire community.

As mentioned earlier in this chapter, the UNIM study anticipated that treatment would potentially alter the subject's sexual behavior in follow-up, which could affect the subject's risk for HIV infection. One of the things the study anticipated would happen was the possibility of participants in the circumcision group getting a false sense of protection and, therefore, engaging in risky sexual behavior, with the likelihood of developing HIV at a higher rate than the control group. In such a case, analysis would

reflect this against the intervention. Similarly, it was assumed that in such an analysis, the same would be reflected against the control, given that the final analysis is in fact, viewed in relation to the control. However, it is unclear if the study anticipated that the behavior of participants in the control group would be influenced by circumcision (or lack thereof). In other words, the study assumption that treatment would only influence outcomes in the treatment group may be standard in RCT designs, but in this case, circumcision was a different kind of intervention, in which participants were unblinded, aware of their treatment assignment, and also aware of the circumcision option at the end of the study. It seems like their need to stay in the study in order to be circumcised at the end of the study period played a role in the sexual behavior of participants in the control group. The option of free circumcision and post-surgical care provided for control participants at the end of their participation motivated many of the young men in the control group to behave 'appropriately' in order to maintain their membership in the study.

Cost-Effectiveness

While funds for HIV/AIDS prevention have greatly increased in recent years, they still fall far short of what is needed (Schwartlander et al., 2001; UNAIDS, 2003; 2005)]. Thus, it has been of great interest for researchers to consider how male circumcision compares with other prevention and treatment strategies in developing countries in terms of economic criteria. Recent reviews of HIV prevention cost-effectiveness suggest a range of $10 to more than $10,000 per HIV infection averted (HIA) (Creese et al., 2002; Hogan et al., 2005). There have been some studies done to assess the cost-effectiveness of HIV intervention. For example, in South Africa, such studies focus on mother-to-child

transmission prevention interventions - with results ranging from cost saving if adjusted for averted medical care cost to $2,492 per HIA) (Soderlund et al., 1999; Wilkinson et al., 1998; 2000; Skordis and Nattrass, 2002) and the cost-effectiveness of ongoing antiretroviral therapy (Boulle et al., 2002; Kenyon et al., 2003; Cleary et al., 2004). Provision of the female condom to sex workers was found to be cost saving if adjusted for averted medical care costs (Marseille et al., 2001). A study of re-screening for HIV during late pregnancy found net savings (Wilkinson, et al., 2000), and another study found that targeted STI treatment in sex workers costs $78 per disability-adjusted life year (DALY) (Soorapanth et al., 2006). Other studies have been done using methods that did not use the outcome metric of costs per HIA or per life year saved (Wilkinson et al., 2000; Soorapanth et al., 2006; Soderlund et al., 1999; Harrison et al., 2000; Vickerman et al., 2006). There have been very few studies done to assess the cost-effectiveness of male circumcision. One example is the study by Kahn et al., (2006) using data from the Orange Farm, South Africa RCT, which showed that male circumcision, at $181 in program cost per HIV infection prevented and cost saving when adjusted for averted medical costs, is amongst the most economically efficient of HIV prevention strategies in sub-Saharan Africa. The cost per HIA has been estimated at $68–$79 for peer education for sex workers, $58 for mass media, $10–$2,188 for condom distribution, $393–$482 for voluntary counseling and testing, $20–$2,198 for antiretroviral drugs to prevent mother-to-child transmission, $271–$514 for treatment of other sexually transmitted infection, and $7,288–$13,326 for school-based education.

Based on results from these studies, proponents of male circumcision argue that, in addition to its high efficacy level, its high cost-effectiveness further supports

implementation of appropriately designed and scaled interventions. This argument revolves around the medical knowledge that the preventive effects of circumcision are indeed biological, and therefore, cost effective since it is only performed as a one-term intervention. In calculating these costs, it seems like little attention is paid to the attached social meanings and circumstances that may affect sexual behavior and stretch the need for intervention well beyond the surgical procedure, and increase the cost of intervention. Participants in my study have shown the results obtained in the RCT may not only be attributed to biological factors, but also social factors such as incentives such as medical care, free circumcision, compensation money, access to information, inclusion and exclusion in certain groups and settings, that greatly influenced sexual behavior. Based on this, it can be argued that without these social incentives, the RCT would have different efficacy results for this intervention.

The desire for participants to stay in the project in order to access these incentives reflects the lack of access to these and similar social amenities in the larger community. To obtain similar efficacy levels in the community would require that these social incentives are also available to community members. The difficulties in maintaining an RCT or RCT-like environment for a long period of time across larger populations have been documented (Black, 1996). One of the biggest impediments to maintaining RCTs over a long period of time is their relatively high costs, and especially if the RCT's are to be applied in population-based settings. As a result, research funding typically determines the life of a project. In the case of UNIM, study participants had access to incentives for a period of two years, after which they would 'join the real world'. The idea of 'the real world' suggests that there are challenges that are social in nature that exist in the larger

context of the community, which need not be detached from the eventual success of the intervention. In which case, it would require infusion of funds in addressing the supplementary social aspects of circumcision, as well as conducting longitudinal follow-ups to determine the effectiveness of the intervention. This approach to calculating cost-effectiveness of circumcision challenges the existing notion that circumcision is one of the most cost-effective prevention measures against HIV/AIDS. It also reflects the reality of everyday life within the larger social context, and emphasizes that the cost of circumcision also depends on the success of social supplementary applications. In this regard, this study raises questions about using cost-effectiveness as a basis for deciding which medical interventions work for given communities. Farmer (1999) argues that the idea of cost-effectiveness denies communities comprehensive treatments by focusing on preventative interventions alone and ignoring restorative cures, which are deemed expensive. In this case, male circumcision is being touted for its cost-effectiveness, without putting it in the social context within which it has been allowed to be effective, and in the process, it fails to address the social realities that attract young men to participate in a circumcision trial, but would be reluctant to participate under different circumstances.

Translating Scope (and duration)

One of the most discussed disadvantages of RCTs in population health research is the lack of generalizability of results, mostly due to a lack of mechanisms to evaluate external validity. In many cases, this occurs when the group of participants is unrepresentative of the community population (e.g. Hancock et al., 2001), or the

participants are uncharacteristic of the community population. Methodologically, all trials exclude certain categories of people and if the exclusionary requirements are too stringent, the final sample of participants may be far too removed from the larger population. Also, as we have seen above, the receptiveness of the participants to the intervention may be atypical, and the effects of the intervention on participants, through special services and incentives, may present difficulty in evaluating the external validity of the intervention.

In the case of UNIM, it is clear that sampling and selection of study participants was very restrictive, resulting in a very select group of young men as participants. As indicated by the UNIM counselor in the previous account, the stringent requirements to qualify to participate in the study excluded a significant group of youth who were interested in participating, and the same time provided a feeling of superiority for those who were accepted in the study. The idea that UNIM participants were 'special' or 'modern' or 'progressive' was repeatedly invoked, not only by the participants themselves, but also male and female peers. Their social status was perceived as elevated, in which case they viewed themselves, as they were viewed by others, to represent a distinct group of youth that prided itself in its position as trend-setters. The idea that they were participating in a scientific study was particularly intriguing, and served to separate them from the rest of the youth in the community.

While it is not just a methodological consideration, it is also important to mention the [natural] exclusion of women from this intervention, especially given that women, compared to men, have been shown to be more vulnerable to HIV/AIDS among the Luo, as well as in many African communities. All of these point to the exclusionary nature of

the UNIM study, and raise questions about its external validity and generalizability. Some proponents of circumcision argue that although there is no evidence of direct reduction of HIV/AIDS for those who may not be able to participate, like women and other excluded groups in the short term, there is indication that over a long period of time, it would lead to a decrease in HIV prevalence at community level. This projection is on the basis of the assumption that a scaled-up circumcision intervention would lead to aversion of new infections in men, and therefore, decreased transmission to their sexual partners and other community members.

It emerged from my study that there were distinct generational and gender differences in the way that people in the Luo community perceive circumcision. While the older generation was perceived as conservative and less agreeable to the uptake of circumcision, the youth viewed themselves as 'progressive' and 'modern', and more positively responsive to the idea of circumcision. Given these perceptions, I asked the youth about their views on circumcising their own children. Although the responses were varied, they generally reflected a similar generational divide, as seen in the quote below:

> "As I told you, my father does not know that I am circumcised, and I have not told him on purpose. He is very traditional. He would not support my decision. The same way I would probably not support my [hypothetical] child if he/she decided to do something that is not in our culture. It is a difficult decision, and I think that we would be expecting too much of our old traditional parents to agree." (Young circumcised man, 20, Kisumu).

There was a range of answers, but the most prominent and consistent response was against the idea of circumcising their own children. The young men felt that circumcision was a personal decision, which they [the youth] had carefully thought through and came to the conclusion that it was good for them. On the other hand, they

would not commit to circumcising their children because they felt that their children, like them, needed to assess their particular situation and make the decision whether they wanted to be circumcised or not. The idea of choice was very important to them, and so they believed that they would give their children the opportunity to make their own choices. They would be supportive of whatever choice their children would make. According to them, the circumstances leading to their choice of circumcision might not be the same when they start their own families, and so they would prefer not to expose their children to a practice whose social meaning and practical use may have changed or may be irrelevant altogether.

Many outcomes of interest in population and health research are best observed in the future, long after the end of the RCT. For example, Black (1996) highlighted how the consequences of such interventions as oral contraceptives or dietary changes may not be apparent in the short-term, and so may require long-term evaluation to see their effectiveness. Similarly, some interventions require long-term implementation before an effect can be measured, such as the effects of breast screening on mortality from breast cancer. In the case of circumcision as an HIV/AIDS intervention, it is touted as a one-time medical intervention with partial but likely durable effect, potentially applicable to all uncircumcised men. It is argued that in populations with null or low existing circumcision rates, the scope of public health benefit is potentially high (Williams et al., 2006). Given that estimate, it is viewed that male circumcision in adults and children may be a key part of a broadened program of HIV prevention in the next years (Kahn et al., 2006). Furthermore, as we have seen above, despite there being limited scope and skepticism about acceptability for circumcision that may result in its occupation of a

small HIV prevention niche, some have argued that because it is a one-time medical intervention, its high cost-effectiveness still supports implementation of appropriately designed and scaled interventions. This, they argue, may be especially true if acceptability evolves over time, such that 'early adopters' pave the way for others later (Rogers, 1995). The youth in my study highlight the problem of extrapolating short-term trials to long-term effects, especially so in the case of circumcision, where future uptake is largely dependent on intergenerational flow of information and influence favoring circumcision. The generational differences in perception seem like they will persist even in the future, and may not be necessarily a positive effect on the continued uptake of circumcision as an HIV/AIDS prevention measure. The early adopters in this case are not committed to making decisions for future generations in favor of circumcision, although they are open to providing information and support to their children in case they consider the option. These youth show the difficulties of extrapolating from short-term trials to long term-effects, and the unreliability of translating scope from short-term trials under very specific conditions to other settings or time frames.

Conclusion

The limitations of RCTs to evaluate population-based interventions are related to both methodology and pragmatic concerns. These include but are not limited to population availability, contamination, time for follow-up, external validity, cost, ethics and informed consent, and the inhibition of innovative research questions. In the measurement of quality of evidence, there is often a focus on internal validity but less emphasis on the external validity of the data. My findings here reveal the complicated

and problematic issues that arise when conceptual designs for laboratory studies are employed in social environments. The premise upon which an RCT is designed is that there can coexist two discreet populations occupying the same environment. By merit of the fact that they share the same environment, the group that receives an "intervention" or, in this case, treatment – can thus be compared to a group that does not. The differences can be both observed and measured. It is thus possible to quantify the efficacy of this intervention. This conceptual apparatus is derived from the clinical sciences where "contamination" within a laboratory environment can be controlled for and, consequently, eliminated.

In a social environment, however, the underlying principles of contamination do not correspond. The basis upon which social environments are constituted and reproduced are through social interactions. It is impossible to prevent one group of persons from interacting with another if they inhabit the same environment. The implications of this are that the findings of these studies are distorted or skewed. In this particular study's design, the control group is one which is not "exposed" to a circumcision. The men in both populations, however, are from the same peer group, and their interactions with one another are, in some cases, even facilitated by the study coordinators, such as through social and educational programs. Their interactions – and even friendships -- with one another motivate them to stay in the study, and to appreciate the presumed health benefits of a circumcision.

Even more importantly, I have observed that the "environment" itself is being altered by the study taking place. The study offers all of its participants free health care, free counseling and testing, and money, among other things. These incentives shape the

environment where they live – those not in the study do not receive these resources. Thus, the "environment" being observed by the researchers does not reflect the environments from which participants actually come. What this study further shows is that these young men are appropriating the study to fulfill social aims that may not be otherwise achieved in their everyday experiences. In the process, they demonstrate that some incentives are more valuable than others, and that understanding the process of prioritization and decision-making might be key to understanding the social values of these young people and the broader community.

To complicate matters more, this particular case involves a scientific phenomenon (circumcision) whose conception and understanding originates in the social sphere. Circumcision for the Luo is understood in cultural terms – meanings, values and associations – and the idea that it possesses scientific qualities that prevent HIV/AIDS adds a new dimension to the way it is understood. What my study shows is people grappling with a social concept in a scientific way, and not necessarily succeeding in separating the two spheres in which circumcision exists. It is evident in the way the UNIM participants present themselves to the project, by behaving in a way that they understand to be desirable to guarantee them continued participation, and behaving differently once they leave UNIM space. At the same time, by virtue of their participation in UNIM, they continue to carry the 'trendsetter' label in the community, and enjoy the social status that is associated with it.

For many involved in RCTs and other epidemiological approaches in studying disease, the biological nature of male circumcision fosters higher confidence in generalization. However, the results of this ethnographic study show that the way that we

view and react to disease ought to include not only biological approaches, but also social ones. An effective way to understand disease is to also understand the social realities that exacerbate or reduce disease, in which case, there is need for analytical approaches that draw from clinical or biological sciences, and also social science theory. The linkages between biological events and social realities of given communities are key to making successful translation of research to practice. Studies that consider external as well as internal validity are important for informing real-world decision making in such situations.

The design challenges highlighted in this chapter suggest that it might be worthwhile to consider what valuable information can be gained from employing a variety of study designs. One can also ask whether the weight of evidence from non-randomized study designs can offset the strength of evidence lost when randomization is impossible or inappropriate. The ethnographic data generated here by living in the community, observing and talking with people who are actively engaged in living in this Luo community and making sense of their world describe, at the most basic level, the values, beliefs and behaviors as they occur and are constructed in their natural and social environments. Using these data, it is possible to look beyond the laboratory-like settings of the RCT to describe behavior through analyzing the relationship between various social settings, social roles and risk behaviors. As seen in the decision-making process of study participants and their social networks, it is evident that the larger political economy of AIDS, including poverty and inadequate health care and services also contributes to the way they react to the disease. In this study, as previously demonstrated by medical anthropologists (e.g. Carlson, 1996; 1999; Singer, 1994; Agar, 1985; Clatts and Sotheran,

1999), such an analysis is made possible with the use of participants' accounts and experiences, which are vital to public health research because they deconstruct and clarify epidemiological constructs in local settings and help to cast prevention messages in ways that are meaningful to the target population. Often, epidemiologic categories affect the development of public health policies and become estranged from the people to whom they are directed. Descriptions and analyses based on the perspectives of other people can contribute significantly both to evaluating epidemiological explanations of disease phenomena as well as to designing relevant prevention initiatives. These points have been demonstrated by revealing participants' decision-making process and the underlying reasons for the interest in participating in the UNIM Project and highlighting the social circumstances that drive the uptake of circumcision in the larger Luo community in Kisumu. These revelations indeed model real-world settings and provide an idea of real-world behavior of treatment.

CONCLUSION

NEGOTIATIONS

Many scholars examining the concept of ethnic identity in Africa identify the roots of contemporary ethnic identities in the colonial era. In Kenya, as in most of Africa, ethnicity is viewed as a phenomenon that was shaped by the colonial encounter, coming through colonial mappings of physical boundaries, local authorities and calculated influences on local cultural norms and practices. Central to these colonial influences is the conceptualization of 'tribe', which was a major focus of anthropology in its founding period. Although most scholars have examined it from a political sense of 'tribalism,' there is historical evidence connecting it with social and cultural repertoires.

In this dissertation, I have discussed the role played by tribalism/ethnicity in colonial Kenya and the freedom movement, as well as explored the historical development of the Luo identity from their migration from their original home in Southern Sudan to their settlement along the shores of Lake Victoria. Particularly, this dissertation has shown that contemporary ethnic categories in Kenya are as much a product of colonization as they are a historical testimony of their evolution and resilience. In contemporary times, I have shown that the Luo identity continues to evolve, following influences of social change such as urbanization, labor migration and modernization. Encompassed in this context is the problem of emerging diseases, particularly HIV/AIDS. For the Luo, HIV/AIDS is especially of concern, given that the rate is higher in the community than in any other community in the country. The introduction of circumcision to the community by a scientific trial not only gives the community an opportunity to stop and even reverse the spread of HIV/AIDS, but also introduces new

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questions about the community's identity and their position in the face of multiculturalism. To complicate things further, the link between circumcision and HIV/AIDS introduces the idea of science into a practice that has only been viewed in the context of culture. A combination of all these events creates a unique situation for the Luo, in which there is need to prioritize and balance their choices in their everyday activities.

This dissertation has explored the different ways in which Luo people navigate through these social, environmental and scientific challenges, a process which involves negotiating with themselves, their fellow community members, and other ethnic groups in the country. The negotiation process provides interesting commentary about cultural/ethnic identity and sexuality, in the face of social change and modern challenges that include emerging diseases such as HIV/AIDS. In practical terms, it gives an insight into ways in which ideas in the scientific realm can be translated to apply to larger social realities in order to effectively address the health and social challenges that face affected communities.

Negotiating Sexuality

As indicated throughout this dissertation, male circumcision is not a traditional practice of the Luo people, but there is evidence of increased uptake, especially among the youth. One of the factors underlying this trend is the idea that male circumcision reduces risk for HIV/AIDS. The idea is overwhelmingly supported by results from the UNIM study in Kisumu, in which there was evidence of a 54 percent decrease in HIV/AIDS risk after circumcision. This dissertation is based on narratives from youth

who participated in this study, and members of their social networks. Anthropological theories of sexuality have often shown sexual behavior of both men and women to be strictly guided and regulated by culturally acceptable values and norms. Traditionally, the Luo transmitted group values and ideals from individual to individual through communicative techniques such as language, signs, proverbs, idioms, gestures, stories, riddles, and observation. In recent decades, most likely due to modernization and urbanization, secondary techniques of learning such as formal education (reading and writing) and the media have gained prominence. As evidenced in this dissertation, the process of learning with regard to sexuality is taking a new approach for the youth in Kisumu. Learning and teaching is increasingly involving individuals that had previously been excluded in the process. As much as some aspects of this new approach are not unique to the Luo, they are different from those that are traditionally and culturally ascribed. The adoption of male circumcision is itself new, but also, it has affected ways in which young Luo people view their own sexuality as individuals, and also, as a community. Evidently, they continue to change their attitudes, practices and values involving sexuality, but most interestingly is the unfolding picture of contradictions in meanings and practices that lead to a disorderly and ambiguous situation that continues to produce confusion in the realm of sexuality and in the everyday function of the individuals and the community.

Young people participating in this study view circumcision as a positive practice which, despite previously lacking cultural significance to their community, now has meanings and perceptions associated with it. This is evident in the increasing number of Luo young men getting circumcised. With increased uptake of circumcision, these young

men are essentially erasing the 'otherness' that has defined them to other ethnic groups and gaining acceptability in those communities. In the process, their social networks are redefined both within and without their community.

Male circumcision has impacted social networks in three ways: Firstly, many young Luo men feel that getting circumcised allows them to have a closer social connection with peers from circumcising, non-Luo communities and, in their view, minimize social tensions and enhances inter-community cohesion. The process of inclusion in these networks involves a flow of information about their circumcision status, which is surprising, given the taboos of secrecy surrounding sexuality among the Luo. The ambiguity in this is especially evident as these youth demonstrate that, on the one hand, matters of sexuality are now discussed in public domain, especially among peers, but also confined only to a certain group of acceptable members.

Secondly, Luo cultural repertoire is clear that the kinds of sexual and marriage partners one is allowed to have all depend on the clans and relatedness of the individuals involved. However, the regulations are somewhat unclear on sexual relationships with individuals from other ethnic groups, and on some occasions, the confusion has played out in public and dominated public discourse on cross-cultural marriages (e.g. the controversy of the burial of SM Otieno, as analyzed by Cohen and Odhiambo, 1992). The Luo youth in this study demonstrate the desire of many young Luo to expand social and sexual networks. Circumcision enables them to redefine and access such networks. The general belief that circumcision enhances coital experience for both men and women has influenced young Luo men to get circumcised, with the hope of enhancing their popularity with women, and expanding their sexual networks beyond their own

community. As the cases in this study show, their choice has met this expectation, and they now have easier and greater access to a wider and diverse network of sexual partners.

Thirdly, there is evidence of more cross-gender discussion regarding sexuality. Participants in this study show that men are consulting their sexual partners before they make decisions about circumcision. In some cases, the discussions are, in fact, initiated by the female partner. Additionally, there is evidence of discussions on sex – quality of sex, condom use – between sexual partners. As seen in this dissertation, women emerge as actors and agents negotiating the sexual landscape that would normally be viewed as men's domain. This is contrary to common belief that gender and sexual relations in patriarchal societies such as the Luo are oppressive for women. This theoretical framework has informed approaches to the empowerment of women in oppressive patriarchal and gerontocratic social systems. However this model, which has been highly influential in gender and development discourse, has often been transposed and applied to diverse situations in Africa as if it has universal applicability, and without recognizing the cultural biases that inform this particular understanding of the nature and circumstance of women's subordinate social position. Some have argued that, by eliding the cultural specificities of women's experiences, there has been a tendency amongst Western feminists to undervalue African women's agency in creatively responding to social and cultural circumstances. The women in this study suggest that indeed, women can creatively reimagine their sexual relationships in the context of 'love', quality and competition. In the process, they also redefine sexuality to reflect such concepts as love and commitment.

In this dissertation, agency is not only demonstrated by female sexual partners, but also by the older generation of women. This, too, is a shift from the traditional setup that only allowed discussion about sex and sexuality to occur between a child and his grandfather (or an elderly person with similar stature in society). In the 'universal female subordination' framework (Ortner, 1974; Lamphere and Rosaldo, 1974), are typically described as oppressed. Older women show increased interest and involvement in sexuality issues that affect not only them, but also their children's generation. More interesting is their involvement in issues around their male children, and the ways in which they are viewed by them as receptive, trustworthy and dependable. It is not surprising that more young men hold discussions with or seek advice from their mothers before circumcision, compared with those who consult with their fathers. Their active participation suggests a shift from the traditional setup based on 'respect' rules that only allowed discussion about sex and sexuality to occur between a child and his/her grandparent or other in his/her grandparent's generation.

There are concerns among women and people involved in programs empowering women and bridging the reproductive health disparities between men and women that male circumcision is a male-oriented HIV/AIDS prevention that may not have direct benefits for women. Certainly, there is no evidence of biological and physiological evidence to that effect. However, this study shows evidence that employing male circumcision as intervention against HIV/AIDS should not be an investment only in the realm of biomedicine. HIV/AIDS and male circumcision both occupy multiple and convergent spaces in the social and health life of individual women. It shows in this study that despite the highly structured traditional communicative practices about sexuality,

there seems to be a complex display of individual agency for the women involved. Participants in the circumcision project and their social network, including sexual partners, reflect on their communication as a key focus of their mutual interaction, and the act of circumcision as an important segue into discussing other sexual and reproductive health issues with their partners, peers and parents. Their interest in circumcision and its (perceived) benefits allow women in the Luo community to negotiate their sexuality, and impact their sexual behavior, as well as that of their sexual partners. Their contributions in the decision-making process influence men's choices in the uptake of circumcision. In as much as there is no evidence of biological or physiological benefits from male circumcision, women's individual agency has allowed them to inject themselves in the decision-making process and participate in prevention activities that involve circumcision. This shows that they play an important role in the process, and suggests that their participation would contribute to strengthening acceptability, participation and effectiveness of circumcision programs.

It is apparent that young men and women in Kisumu are redefining sexuality by adopting male circumcision. However, they are also raising questions about the role of male circumcision in reducing the risk of HIV/AIDS. The participants in this study show that the impact of male circumcision on the epidemic could be double-edged. On the one hand, the expansion of sexual networks and the perception that circumcision enhances sexual experience may lead to risky sexual behavior. As youth get circumcised, they gain acceptability with members of other communities, who then view them as adults for having undergone this symbolic ritual. Adulthood comes with particular meanings and responsibilities, including the assumed permission to engage in sexual activity (usually

within marriage, but the rules seem to be flexible when it concerns young men engaging in premarital sex). The perception that they are permitted to have sex after circumcision, combined with the expanded network from which they can access sexual partners certainly exposes the youth to higher risk of HIV/AIDS. Furthermore, the perception that circumcision enhances their sexual prowess attracts women to circumcised youth, even if just out of curiosity.

On the other hand, the belief that male circumcision alone does not prevent HIV infection may lead to safer sex practices. Many of the youth argued that many people from circumcising communities were getting infected with HIV/AIDS and, therefore, the idea that circumcision reduced risk was questionable. What is shown in expressing these doubts is that the young people are thinking about their behavioral individual responsibilities to reduce their own risk and not depending on circumcision for prevention. This information may be a positive development for scientists who are concerned that promoting circumcision as a method of risk reduction may increase complacency and lead to risky sexual behavior. But more importantly, it shows that understanding and responding to the risk of HIV is not only a matter of factual knowledge, but also an issue of corresponding values, beliefs and social circumstances related to its transmission. These ambiguities suggest that there is need for further research to understand these issues and incorporate the knowledge in order to optimize circumcision programs.

Negotiating Science and Social Reality

In carrying out fieldwork with participants who were part of a randomized control

trial (RCT), I was in a position to be involved with the RCT, the core participants and their social networks. My unique position enabled me to observe and participate in activities that involved the scientific processes of research, as well as the social realities of the participants in the scientific study. The literature indicates that there are many limitations of RCTs, but more so when the results from the RCTs are used to evaluate population-based interventions. The limitations are related to both methodology and pragmatic concerns. These include but are not limited to population availability, contamination, time for follow-up, external validity, cost, ethics and informed consent, and the inhibition of innovative research questions. Many quality-of-evidence ratings emphasize internal validity without also giving consideration to external validity. This dissertation reveals the complicated and problematic issues that arise when conceptual designs for laboratory studies are employed in social environments. The premise upon which an RCT is designed is that there can coexist two discreet populations occupying the same environment. By merit of the fact that they share the same environment, the group that receives an "intervention" or, in this case, treatment – can thus be compared to a group that does not. The differences can be both observed and measured. It is thus possible to quantify the efficacy of this intervention. This conceptual apparatus is derived from the clinical sciences where "contamination" within a laboratory environment can be controlled for and, consequently, eliminated.

In a social environment, however, the underlying principles of contamination do not correspond. The basis upon which social environments are constituted and reproduced are through social interactions. It is impossible to prevent one group of persons from interacting with another if they inhabit the same environment. The

implications of this are that the findings of these studies are distorted or skewed. In this particular study's design, the control group is the one not "exposed" to circumcision. The men in both populations, however, are from the same peer group, and their interactions with one another are, in some cases, even facilitated by the study coordinators, such as through social and educational programs. Their interactions – and even friendships - with one another motivate them to stay in the study, and to appreciate the presumed health benefits of a circumcision.

Even more importantly, I have observed that the "environment" itself is being altered by the study taking place. The study offers all of its participants free health care, free counseling and testing, and money, among other things. These incentives shape the environment where they live – those not in the study do not receive these resources. Thus, the "environment" being observed by the researchers does not reflect the environments from which participants actually come. What this study further shows is that these young men are appropriating the study to fulfill social aims that may not be otherwise achieved in their everyday experiences. In the process, they demonstrate that some incentives are more valuable than others, and that understanding the process of prioritization and decision-making might be key to understanding the social values of these young people and the broader community.

For many involved in RCTs and other epidemiological approaches in studying disease, the biological nature of male circumcision fosters higher confidence in generalization. However, the results of this ethnographic study show that the way we view and react to disease ought to include not only biological approaches, but also social ones. An effective way to understand disease would be to also understand the social

realities that exacerbate or reduce disease, in which case, there is need for analytical approaches that draw from clinical or biological sciences, and also social science theory. The linkages between biological events and social realities of given communities are key to making successful translations of research to practice. Studies that consider external as well as internal validity are important for informing real-world decision making in such situations.

The design challenges highlighted in this dissertation suggest that it might be worthwhile to consider what valuable information can be gained from employing a variety of study designs. One can also ask whether the weight of evidence from non-randomized study designs can offset the strength of evidence lost when randomization is impossible or inappropriate. The ethnographic data generated here by living in the community, observing and talking with people who are actively engaged in living in this Luo community and making sense of their world describe, at the most basic level, the values, beliefs and behaviors as they occur and are constructed in their natural and social environments. Using these data, it is possible to look beyond the laboratory-like settings of the RCT to describe behavior through analyzing the relationship between various social settings, social roles and risk behaviors. As seen in the decision-making process of study participants and their social networks, it is evident that the larger political economy of AIDS, including poverty and inadequate health care and services also contributes to the way they react to the disease. In this study, as previously demonstrated by medical anthropologists (e.g. Carlson, 1996; 1999; Singer, 1994; Agar, 1985; Clatts and Sotheran, 1999), such an analysis is made possible with the use of participants' accounts and experiences, which are vital to public health research because they deconstruct and

clarify epidemiological constructs in local settings and help to cast prevention messages in ways that are meaningful to the target population. Often, epidemiologic categories affect the development of public health policies and become estranged from the people to whom they are directed. Descriptions and analyses based on the perspectives of other people can contribute significantly both to evaluating epidemiological explanations of disease phenomena as well as to designing relevant prevention initiatives. These points have been demonstrated by revealing participants' decision-making process and the underlying reasons for the interest in participating in the UNIM Project and highlighting the social circumstances that drive the uptake of circumcision in the larger Luo community in Kisumu. These revelations indeed model real-world settings and provide an idea of real-world behavior of treatment.

As much as this study has raised some questions about the design of the UNIM Project and related results, this chapter is not meant as a critique of the UNIM Project. In fact, UNIM has made a huge contribution in the study of HIV/AIDS prevention, and in shaping the direction of the HIV/AIDS epidemic. Rather, this chapter is meant as an examination of ways in which science infiltrates into the daily experiences of community members, in which it assumes a social role, depending on local situations and interpretations. With regard to these social roles, the impact may be either positive or negative, and it may be difficult, while designing a scientific study, to address how and why this intermingling of scientific and social ideas occurs. The important message here is that there is a need to recognize such occurrences and design programs with strategies that address social effects in order to achieve effective programs at community level.

Negotiating Identity

Circumcision in this study is a simple act in form, but very complex in substance. In this one act, there is a clear demonstration of malleability, fluidity, imprecision, multivocality because of the variability of meanings among those who adopt it. It demonstrates the complexity of identity as a phenomenon and modernization as a process. The ways in which identity is perceived among participants in this study shows that it is not simply homogenous, and cannot be placed in neat and distinct categories, the way supporters of primordialism and constructinism approach it.

Africanists, for the most part, have taken the position that ethnic groups, contrary to the conceptualization of tribes, are socially constructed. This view contrasts with an essentialists (or primordial) perspective that examines ethnicity (and identity) as historically enduring and regenerative because of the importance of kinship. However, focusing on social construction, especially as largely a matter of colonial control, ignores the reality (or myths) that people have of their pasts that transcend the colonial period. The Luo illustrate the dynamics by which this view of ethnic identification has operated. With substantial evidence, the Luo have a reasonable sense of a Luo history of migration that begins well before colonial control. This primordial orientation is tempered, yet reinforced, by their interaction with neighboring groups. Male circumcision, one of the key cultural markers that set the uncircumcised Luo off from their circumcised neighbors, has undergone a cultural transformation for many young Luo males. They see circumcision, offered as part of a scientific study, as a strategy both for furthering their sexual ambitions with non-Luo women who prefer to have intercourse with circumcised

men, and for preventing AIDS. How Luo males continue to be Luo after circumcision, and whether they will opt to circumcise their own sons, brings the primordial dimension of the social construction of ethnic identity back into play. Like the complexities involved with the adoption of circumcision, the narratives of participants in this study highlight the unstable, multiple, fluctuating, and fragmented nature of the contemporary "self."

It is clear from this dissertation that identity is a dialectical process involving internal and external opinions and processes, as well as the individual's self-identification and outsiders' ethnic designations-what you think your ethnicity is, versus what they think your ethnicity is. The location and meaning of particular ethnic boundaries are continuously negotiated, revised, and revitalized, both by ethnic group members themselves, as well as by outside observers. Since ethnicity changes situationally, the individual carries a portfolio of ethnic identities that are more or less salient in various situations and vis-a-vis various audiences. As audiences change, the socially-defined array of ethnic choices open to the individual changes. This produces a "layering" or multiplicity of ethnic identities which combines with the ascriptive character of ethnicity to reveal the negotiated, problematic nature of ethnic identity.

While the construction of ethnic boundaries is very much a story of structure and external forces shaping ethnic options, the construction of identity is also a tale of human agency and internal group processes of cultural preservation, renewal, and innovation. This study shows that emphasizing structural constraints over personal agency would be inaccurate, just as much as emphasizing the notion that ethnicity is simply a personal choice runs the risk of emphasizing agency at the expense of structure. In fact, ethnic identity is both optional and mandatory, as individual choices are circumscribed by the

ethnic categories available at a particular time and place. Theoretically, this broadly employs the use of Boudieu's approach to structuralism and constructivism, that contrary to the way the two approaches are viewed in the literature – as in conflict – the youth in Kisumu demonstrate that the two approaches in the study of identity can co-exist.

In all the chapters of this dissertation, it has been demonstrated that human experience cannot be studied without taking into account both how individuals are situated within and constrained by social structures, and how those individuals manipulate and reconstruct their own understanding of their world and give their life meaning. The youth, men and women in this study have clearly synthesized their approach to life and redefined their ideas about individuality, community and identity.

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APPENDICES

APPENDIX 1: MAP OF NYANZA PROVINCE

APPENDIX 2: INTERVIEW GUIDE

INTERVIEW TOPICS FOR KEY INFORMANTS
1st Interview
Background information
1. Name: Real, nickname or code name
2. Age
3. Education: Level of education, future plans, school experiences, grades
4. Occupation: Current and previous occupations
5. Area of residence; whom he/she currently lives with, neighborhood, previous migration, future plans
6. Marital status, family, other relatives, friends
7. Ethnic group and other ethnic affiliations
8. Religion
9. Experiences growing up

Subsequent Interviews
Circumcision
1. Why they decided to get circumcised. Probe for: Health concerns (STDs and HIV/AIDS), health incentives from UNIM Project, religious concerns, peer influence, sexual performance.
2. Are they in the circumcision or control group? Which group would they have preferred? For those in the control group, would they still consider circumcision at the end of the project?
3. What was their experience during the procedure and the healing process?
4. Which people know about their circumcision status? Why? Which people are not aware of their circumcision status? Probe: girlfriend(s), family, friends, etc. Why?
5. Will they circumcise their own sons? Why? At what age?
6. What are the alternatives for circumcision for the Luo?

Identity
1. How has his life changed after circumcision? Probe for: interactions with peers, relatives, friends, religious leaders, people from other ethnic groups, sexual partners.
2. What do they think of their 'circumcised' identity? Do they feel more or less Luo? Do they feel accepted by other ethnic groups? Do they feel rejected by fellow Luo?

Sexual Behavior
1. What are their perceptions about HIV/AIDS? Do they feel protected from HIV/AIDS after circumcision? Why? How?
2. Has sexual behavior changed after circumcision? How? Probe: Number of sexual partners, condom use, other sexual practices, sexual performance.
3. What is the change attributed to?
4. If no change, why not?

5.   Will their sexual behavior remain as it is now when they leave the UNIM Project? Why?

INTERVIEW TOPICS FOR SOCIAL NETWORK
1st Interview
Background information
1. Name: Real, nickname or code name
2. Age
3. Education: Level of education, future plans, school experiences, grades
4. Occupation: Current and previous occupations
5. Area of residence; whom he/she currently lives with, neighborhood, previous migration, future plan.
6. Marital status, family, other relatives, friends, relation to key informant.
7. Ethnic group and other ethnic affiliations
8. Religion
9. Experiences growing up

Subsequent Interviews
Circumcision
1. What do they think about circumcision for Luo youth? What are the available alternatives for circumcision?
2. Do they know any circumcised Luo youth? Why did they [the people they know] decide to get circumcised? Probe for: Health concerns (STDs and HIV/AIDS), health incentives from UNIM Project, religious concerns, peer influence, sexual performance.
3. Did they play any role in influencing the key informant or any other youth to get circumcised? Why?
4. Are they circumcised? Why did they decide to get circumcised? What was their experience during the procedure and the healing process?
5. Which people know about their circumcision status? Why? Which people are not aware of their circumcision status? Probe: girlfriend(s), family, friends, etc. Why?
6. Do they think the practice is gaining popularity? What is the future of circumcision in the Luo community?

Identity
1. How has his life changed for the youth after circumcision? Probe for: interactions with peers, relatives, friends, religious leaders, people from other ethnic groups, sexual partners.
2. What do they think of their 'circumcised' identity? Do they feel more or less Luo? Do they feel accepted by other ethnic groups? Do they feel rejected by fellow Luo?

Sexual Behavior:
3. What are their perceptions about HIV/AIDS? Do they think that people who are circumcised are protected from HIV/AIDS? Why? How?
4. Does sexual behavior for circumcised youth change after circumcision? How? Probe: Number of sexual partners, condom use, other sexual practices, sexual performance.

5. What is the change attributed to?
6. If no change, why not?

APPENDIX 3: CONSENT FORM FOR CORE PARTICIPANTS

Title of Project: **Negotiating Identity: Exploring Male Circumcision and the Sexual Behavior of Young Luo in Kisumu District**
Principal Investigator: **Salome Wawire**
                           Brown University
                           Department of Anthropology
                           P.O Box 1921
                           Providence, RI 02912
                           U.S.A
                           Tel: (401) 863-3251; Salome_Wawire@brown.edu
Advisor: **Prof. Nicholas Townsend**
                           Brown University
                           Department of Anthropology
                           P.O Box 1921
                           Providence, RI 02912
                           U.S.A
                           Tel: (401)863-9343; Nicholas_Townsend@brown.edu

1. **Purpose of the Study:** Hi, my name is [NAME] and I am working on this project whose overall objective is to understanding of the linkages between ethnic identity, religion and health. Specifically, the study seeks to understand how young Luo men in Kisumu district make decisions about sexual behavior and circumcision. Also, we would like to know if and how social, religious and health influences contribute to young people's final decisions regarding their health and behavior.

2. **Procedures to be followed:** You were selected to participate in this study because you are either circumcised or have shown interest in getting circumcised, and circumcision is a major focus of this project. If you agree to participate in the study, I will continuously interact with you as well as other participants and, at your invitation, participate in some of your day to day activities. In the process, I will have discussions with you. Participation in this study will require multiple interviews over the next one year, but you are free to drop out whenever you desire. Initial interviews like this one will touch on general questions regarding Kisumu district, the Luo community and norms and values of Luo people. As we continue to interact and know each other better, interviews will be more specific to your thoughts, beliefs and behaviors about HIV/AIDS, circumcision, religion and social networks. Also, we may be interested in meeting and interviewing some of the people you will identify in this interview as close associates or members of your social network. As such, at the end of the interview, we will go back to the consent form to give you the option to allow us to speak to them.

3. **Discomforts and Risks:** There are no risks in participating in this research beyond those experienced in everyday life. Some of the questions are personal and might cause discomfort. If for whatever reason you are uncomfortable answering a question or

discussing a certain topic, feel free to let me know and I will move right to the next topic.

4. **Benefits:** There will be no direct benefit to you by your participation in this research but you might learn more about yourself. Your participation might help you have a better understanding of your health decisions and how important your social networks are in your daily decision-making process. You might realize that others have had similar experiences as you have. Also, your participation will aid in our understanding of issues pertaining to HIV/AIDS. The study has policy implications for the prevention of HIV/AIDS for both circumcising and non-circumcising groups in Africa since the information collected here is critical in formulating HIV/AIDS policies and prevention strategies.

5. **Duration:** This interview may take an hour, but feel free to ask for a break or end it altogether, whenever you need to.

6. **Statement of Confidentiality:** Your participation in this research is confidential. Only the person in charge, and his/her assistants, will know your identity. The data will be stored and secured in a locked cabinet at a temporary project office in Kisumu. The Office of Human Research and Protections at Brown University may review records related to this project. Results of this study may be used for teaching, research, publications, or presentations at scientific meetings. If your individual results are discussed, your identity will be protected by using a study code name rather than your name or other identifying information.

At the end of this form you will be given the option of allowing us to make audio recordings and/or take photographs of you, which may be used in analyzing the research data or at scientific publications and presentations. All audio recordings will be destroyed at the end of the study. We may publish and present photographs of you, including your face. No other personal information about you will be included in the publication or presentation.

7. **Right to Ask Questions:** You can ask me questions about this research. If you have questions regarding your rights as a research participant, or if problems arise which you do not feel you can discuss with the Investigator, please contact the Human Research and Protections office at Brown University. Contact person is:

<div align="center">

Susan Toppin
Sr. IRB Manager
Human Research and Protections Office
Tel: 1 (401) 863-9206; email Susan_Toppin@brown.edu

Or
Eliya Zulu
Deputy Director,
African Population and Health Research Center
Tel: 254-20-272-0400/1/2; email ezulu@aphrc.org

</div>

8. **Voluntary Participation**: Your decision to be in this research is voluntary. You can stop at any time. You do not have to answer any questions you do not want to answer. Refusal to take part in or withdrawing from this study will involve no penalty affect your relationship with the investigator. Also, this study and the UNIM Project are unrelated,

and withdrawal from this study, or your decision not to participate will not affect your participation in the UNIM Project.
10.

I give permission for audio recording during this interview ………Yes   No

I give permission for photographs of me to be taken during this interview and used in scientific publications or presentations……………………………YesNo

I give permission for the study to contact and interview the following people known to me:

Name   **Contacts**

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

By signing this consent form, I confirm I have read (listened) and understand the information presented in it. I have had the opportunity to ask questions. I understand my participation is voluntary, and I am free to withdraw at any time without giving a reason and without cost. I voluntarily agree to take part in this study.
I understand that I will be given a signed copy of this consent form for my records.

_____   _____
Participant Signature   Date

_____   _____
Person Obtaining Signature   Date

APPENDIX 4: CONSENT FORM FOR SOCIAL NETWORKS

Title of Project: **Negotiating Identity: Exploring Male Circumcision and the Sexual Behavior of Young Luo in Kisumu District**
Principal Investigator: **Salome Wawire**
                Brown University
                Department of Anthropology
                P.O Box 1921
                Providence, RI 02912
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                Tel: (401) 863-3251; Salome_Wawire@brown.edu
Advisor: **Prof. Nicholas Townsend**
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                P.O Box 1921
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                Tel: (401)863-9343; Nicholas_Townsend@brown.edu

1. **Purpose of the Study:** Hi, my name is [NAME] and I am working on this project whose overall objective is to understanding of the linkages between ethnic identity, religion and health. Specifically, the study seeks to understand how young Luo men in Kisumu district make decisions about sexual behavior and circumcision. Also, we would like to know if and how social, religious and health influences contribute to young people's final decisions regarding their health and behavior.

2. **Procedures to be followed:** You were selected to participate in this study because [NAME], one of our key informants, identified you as a close and influential associate of his/hers. If you agree to participate in the study, I will continuously interact with you as well as other participants and, at your invitation, participate in some of your day to day activities. In the process, I will have discussions with you. Participation in this study will require multiple interviews over the next one year, but you are free to drop out whenever you desire. Initial interviews like this one will touch on general questions regarding Kisumu district, the Luo community and norms and values of Luo people. As we continue to interact and and know each other better, interviews will be more specific to your own thoughts, beliefs and behaviors with regard to HIV/AIDS, circumcision, religion and social networks. Also, we may be interested in meeting and interviewing some of the people you will identify in this interview as close associates or members of your social network. As such, at the end of the interview, we will go back to the consent form to give you the option to allow us to speak to them.

3. **Discomforts and Risks:** There are no risks in participating in this research beyond those experienced in everyday life. Some of the questions are personal and might cause discomfort. If for whatever reason you are uncomfortable answering a question or discussing a certain topic, feel free to let me know and I will move right to the next topic.
4. **Benefits:** There will be no direct benefit to you by your participation in this research

but you might learn more about yourself. Your participation might help you have a better understanding of your health decisions and how important your social networks are in your daily decision-making process. You might realize that others have had similar experiences as you have. Also, your participation will aid in our understanding of issues about HIV/AIDS. The study has policy implications for the prevention of HIV/AIDS for both circumcising and non-circumcising groups in Africa since the information collected here is critical in formulating HIV/AIDS policies and prevention strategies.

5. **Duration:** This interview may take an hour, but feel free to ask for a break or end it altogether, whenever you need to.

6. **Statement of Confidentiality:** Your participation in this research is confidential. Only the person in charge, and his/her assistants, will know your identity. The data will be stored and secured ina a locked cabinet at a temporary project office in Kisumu. The Office of Human Research and Protections at Brown University may review records related to this project. Results of this study may be used for teaching, research, publications, or presentations at scientific meetings. If your individual results are discussed, your identity will be protected by using a study code name rather than your name or other identifying information.

At the end of this form you will be given the option of allowing us to make audio recordings and/or take photographs of you, which may be used in analyzing the research data or at scientific publications and presentations. All audio recordings will be destroyed at the end of the study. We may publish and present photographs of you, including your face. No other personal information about you will be included in the publication or presentation.

7. **Right to Ask Questions:** You can ask me questions about this research. If you have questions regarding your rights as a research participant, or if problems arise which you do not feel you can discuss with the Investigator, please contact the Human Research and Protections office at Brown University. Contact person is:

<div align="center">

Susan Toppin
Sr. IRB Manager
Human Research and Protections Office
Tel: (401) 863-9206; email Susan_Toppin@brown.edu

Or

Eliya Zulu
Deputy Director,
African Population and Health Research Center
Tel: 254-20-272-0400/1/2; email ezulu@aphrc.org

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8. **Voluntary Participation**: Your decision to be in this research is voluntary. You can stop at any time. You do not have to answer any questions you do not want to answer. Refusal to take part in or withdrawing from this study will involve no penalty or affect your relationship with the investigator.

I give permission for audio recording during this interview ………Yes   No

I give permission for photographs of me to be taken during this interview and used in scientific publications or presentations…………………………YesNo

I give permission for the study to contact and interview the following people known to me:

Name   **Contacts**

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

By signing this consent form, I confirm I have read (listened) and understand the information presented in it. I have had the opportunity to ask questions. I understand my participation is voluntary, and I am free to withdraw at any time without giving a reason and without cost. I voluntarily agree to take part in this study.
I understand that I will be given a signed copy of this consent form for my records.

_____   _____

Participant Signature   Date

_____   _____

Person Obtaining Signature   Date