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Dispelling “heterosexual African AIDS” in Namibia: Same-sex sexuality in the township of Katutura

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Abstract

This paper questions international public health theories that characterize AIDS in Africa as an unambiguous heterosexual epidemic. It does so by describing the daily sexual lives of a community of Namibian youth who engage in same-sex sexual practices. The author outlines how the ongoing vilification of “homosexuals” by ruling State officials serves as a stigmatizing backdrop against which young people experience and practice their sexuality. Drawing upon 20 months of ethnographic research, the paper discusses the HIV sexual risk perceptions and practices of young men, highlighting the complexities in sexual subjectivity that form within the cultural politics of competing masculinities, state-sponsored anti-homosexual rhetoric and transnational queer rights protest. Bounded and monolithic notions of gender and sexual identity do not lend themselves to HIV risk and vulnerability analysis in this community.

Keywords: *HIV/AIDS, Namibia Homosexuality, masculinity, sexual subjectivity*

Introduction

In Namibia, as in most African countries, there have been virtually no national or regional public health campaigns that include any suggestion of HIV risk through homosexual behaviour in their messages. “Men who have sex with men” in Namibia, as a consequence, are likely to be more vulnerable to HIV infection. For example, males incarcerated in Namibia and involved in same-sex sexual behaviour are prohibited from receiving condoms despite the growing HIV prevalence within the country’s 13 overcrowded prisons (Ministry of Prisons and Correctional Services 2000). Indeed the silence around the homosexual transmission of HIV in Namibia is largely due to the illegal status of homosexuality, defined as sodomy in its criminal code (IGLHRC 2003:83–84); but the exclusion is also reinforced by the epidemiological framing of AIDS in Africa as a “heterosexual epidemic”. Although Cindy Patton has aptly interrogated this typological scheme (Patton 1990: 89–92), her critiques have yet to be matched with any substantive ethnographic reporting that illuminates how southern African communities involved in same-sex sexual practices may be at risk for HIV infection, with the notable exception of Lockhart (2002). Furthermore, this *lacuna* appears pronounced in the face of the significant body of literature in gay and lesbian studies on African homosexualities (see for example, Gevisser and Cameron 1995, Eprecht 2004, Murray and Roscoe 1998).

While issues of same-sex sexuality have been elided beneath HIV/AIDS public health campaigns that target “the heterosexual citizen”, “homosexuality” has been hotly debated in political arenas where notions of Namibian authenticity are contested. On 19 March 2001, 4 months prior to my first arrival in Namibia, President Sam Nujoma called for the arrest, imprisonment and deportation of all gays and lesbians during his official address to students at the University of Namibia. Throughout my ethnographic fieldwork, between 2001 and 2005, the state constructed homosexuality in discourse by linking it to emergent problems of the post-colonial era: globalization, neo-colonialism, and criminality. Anti-homosexual rhetoric continues to be deployed under the newly elected SWAPO President, Hifikepunye Pohamba. During a national commemorative ceremony in August 2005, Deputy Minister of Immigration and Home Affairs, Theopolina Mushelenga, publicly denounced the human rights of Namibian gays and lesbians and also asserted that homosexuals were responsible for the AIDS pandemic.

In this paper, it is illustrated how the ongoing vilification of gays and lesbians by ruling state officials serves as a stigmatizing backdrop against which a community of youth experience and practice their sexuality. It is specifically analysed how HIV-vulnerability forms for a community of young males living in the Namibian township of Katutura by focusing upon their sexual risk perceptions and practices, drawing out the complexities related to sexual subjectivity. Through my representations, sexuality in Namibia appears as the uneven, ever-moving, erotic and strategic engagements of individuals and groups that take shape within “the cultural politics of everyday life” (Werbner 1996:13).

In the case of informants in this study, gender and sexuality take on numerous expressions as individuals navigate between multiple and shifting cultural contexts. Their flexible identities allow them to readily slide between seemingly incommensurable cultural spaces marked by multiple languages, ethnicities, ages and economic statuses—from the urban life of discos and private parties with foreigners in the capital city, to active participation in the gay rights social movement and to daily community life in outlying townships. Thus, bounded and monolithic notions of gender and sexual identity do not lend themselves to HIV risk and vulnerability analysis here.

Many of the informants connect with each other and to broader transnational LGBT (lesbian, gay, bisexual and transgender) communities and human rights networks through the cultural and economic resources of the only sexual minority rights NGO in Namibia called *The Rainbow Project* (TRP). TRP provides programming for members around sexuality in the context of human rights and began to deliver HIV-transmission information after several members tested positive for HIV. Despite the HIV-related knowledge transferred through the organization, members continue to experience difficulties in practicing safer sex. Frequent involvement in sex work with wealthy foreigners and local elites, socially sanctioned gender inequalities, and stigmatization greatly undermine individual health seeking and protection capabilities. In this article, the author locates a series of safer sex difficulties that materialize at the intersection of government-sanctioned discrimination, transnationally-mediated protests and historically structured social inequalities.

Methodology

When preliminary research began in Namibia in 2001, TRP’s membership totalled 190 men and women. Most were Black and young (in their late-teens and early-20s); and many

were unemployed and living in the Windhoek urban township known as Katutura. In 2002, TRP staff facilitated the recruitment of research informants by introducing me as an AIDS researcher from Canada to members at their office, situated in the central business district of Windhoek. Members who expressed interest in participating in the study later agreed to introduce me to their peers, some of whom did not associate with TRP (but who also lived in Katutura). In general, this community of youth was enthusiastic about participating in the research. Only two men introduced to me refused to participate in the research (because they were convinced, despite my explanation of the goals of ethnographic research, that the author was a journalist who wanted to release their names to the local newspaper). It should be noted that because my recruitment procedure drew upon the social networks of particular TRP members, my study may not reflect the broader spectrum of experiences related to male-male sexuality in Katutura.

Within the first three months the author established 93 contacts who contributed to the research process in varying degrees. Of these contacts, 62 individuals (31 males and 31 females) were asked to participate in formal, in-depth interviewing and ethnographic follow-ups. Due to time constraints, the remaining 31 persons were asked to participate in small focus groups, which tended to become information delivery sessions on HIV/STIs at the request of informants. Although these focus groups generated less data on sexual subjectivity, they did provide a significant source of “knowledge and attitudes” surrounding the same-sex sexual transmission of HIV. This paper reports on findings concerning males who participated in this study. Reference to the HIV risk practices of female informants can be found elsewhere (Lorway 2005).

An attempt was made to recruit research informants from all ethnic communities. However, most informants identified with the Damara ethnic group, reflecting the disproportionate number of Damara youth who are members of TRP. This does not suggest that same-sex sexual behaviour is practiced more widely by Damaras; rather, this over-representation relates to how same-sex sexuality is regarded in their communities. In the fieldwork among Damara informants and their families, the author commonly encountered openness around expressions of gender nonconformity. This is consistent with Khaxas and Wieringa’s (2005: 123) findings of Damara women in same-sex relationships who “live their lives more openly than woman of other communities in Namibia”. According to these same authors, this openness can be traced to gender-egalitarian subsistence, ownership and inheritance practices in the pre-colonial period. The tensions around homosexuality that did erupt in the families of Damara research informants often related more directly to SWAPO’s delivery of anti-homosexual rhetoric. By contrast, informants who identified as Ovambo encountered intense discrimination in their communities. In the case of Ovambo women in same-sex relationships, Isaacks and Morgan (2005: 79) attributes homophobia to a “deeply entrenched patriarchal ... culture”.

Sexual and gender identities employed by informants frequently altered depending on the social context. During TRP political meetings, local press engagements and formal interviewing, individuals identified as gay, bi-sexual or transgender. Labels such as *moffie* (effeminate male), “drag queen”, “bottom/top”, and “straight” were used more during informal social gatherings. While some *moffies* employed female names, and identified themselves as sexually receptive during anal sex, others identified as being “gay men” who engaged in penetrative as well as receptive sexual practices. Traditional words that referred to gender nonconformity, such as *eshenge* and *!gamas*, tended to circulate within Katutura society among community elders.¹ Eight men who engaged in bisexual behaviour, and who

did not directly associate with TRP, identified as “straight”. However, bisexual behaviour was not limited to these men; individuals who appeared more effeminate also practiced it. In fact, sexual relationships were commonly reported between effeminate males and “butch” (as they were sometimes called) lesbians.

Open-ended structured interviews were conducted initially at the centre, but later took place in coffee shops, restaurants, parks and homes as familiarity with informants grew. Interview guides were pilot-tested with TRP staff and volunteers. However, interviewing posed some difficulties. While informants provided rich accounts of their sexual/gender identity and attitudes toward political institutions during interviews, they were more reticent to discuss the details of sexual risk behaviour and involvement in sex work. Once the tape recorder was shut off, some informants tended to talk more freely about these issues.

As greater rapport developed outside the formal interview setting, informants explained sexual risk practices in greater detail. In most cases, ethnographic follow-up, participant observation and field note writing yielded more significant findings. After several months, the author was welcomed within the informants’ daily social lives. This allowed witnessing several factors that significantly contributed to HIV-risk such as alcohol and drug use, violence, stigma, and gender inequality. Informants and contacts explained sexual risk taking practices in terms of these factors during informal conversations. The author also spent considerable time observing interactions between informants and their friends and family at local discos in the capital city, and at *shebeens* (unlicensed drinking establishments), parties, and funerals in Katutura. Tape-recorded qualitative interviews (which elicited life histories of “coming-out” and sexual risk-taking) were conducted during the day, while participant observation and note-taking took place at night as the author moved about the streets of Katutura and the capital city with informants, from house to house, *shebeen* to *shebeen*, disco to disco.

In consultation with TRP staff, it was decided that the interviewing process could provide the opportunity both to correct misinformation and respond to questions concerning HIV/AIDS. Because informants claimed that anal sex required more lubricant than was afforded by the free condoms distributed by the Ministry of Health and Social Services, small satchels of lubricant, paid for by TRP, were provided during ethnographic work. Informants were also directed to TRP’s HIV/AIDS resources where they could receive further information, free condoms and lubricant for future need. TRP staff conducted workshops on STIs, and held safer-sex information sessions based on the findings of this research. The policy implications of this research are discussed at greater length in Lorway (2005).

Anti-homosexual rhetoric and transnational protest

The events surrounding the 1995 *Zimbabwean International Book Fair*, during which President Robert Mugabe blatantly demonized “homosexuals”, served as a catalyst that set off a barrage of homophobic discourses across southern Africa (IGLHRC 2003: 14–15). In Namibia, two SWAPO government ministers, echoing Mugabe, launched verbal attacks against Namibian gays and lesbians in 1995. Amidst growing protest from international LGBT human rights networks and threats of economic sanctions from Swedish, Dutch and British foreign ministries and the EU, SWAPO released the following press statement in 1997:

[M]ost of the ardent supporters of these perverts [homosexuals] are Europeans ... They are not only appropriating foreign ideas in our society but also destroying the local culture by hiding behind the facade of the very democracy and human rights we have created. We are convinced that homosexuality ... is a hideous deviation of decrepit and inhuman social behaviour. (SWAPO 1997)

In February 1997, following the SWAPO Press release, a gay and lesbian rights movement was mobilized. The initial collective of approximately 50 individuals, called *The Rainbow Project* (TRP), drew its membership from pre-existing gay and lesbian social groups in Windhoek. Most of the members identified as White or Coloured. Many were well-travelled in Europe and North America, were highly credentialed, and were employed within middle-upper range income jobs. A number of the core organizers were non-Namibian. *Sister Namibia*, sponsored by German and Dutch development foundations, organized the first meetings. In 1998, The Rainbow Project received operational funding from Swedish, German and Dutch development agencies. During the flood of hate speeches in 1997, leading officials from Amnesty International, lesbian and gay associations based in Europe and North America, and transnational NGO networks released a flurry of press statements that were carried by the local and international news media.

Politically savvy local activists and academics commanded several public forums in Windhoek that directly challenged, and at times ridiculed, the remarks made by the SWAPO government. Between 21 November and 2 December 2000, TRP held its first LGBT human rights week in Windhoek, which was comprised of a series of public panel discussions on homosexuality and human rights. That week, 150 Black youth from Katutura were attracted to an “open house” at TRP office (Isaacks 2000–2001). But as TRP’s membership increasingly included Black youth from Katutura, many of the older White and Coloured members withdrew their association from the organization.

Despite the public rebuke levelled by activists at Nujoma and his ministry, no arrests, imprisonment or deportations occurred. The more affluent White and Coloured gays and lesbians in Namibia in fact did not experience direct violent effects from the hate speeches, because the international human rights community carefully “guarded” them. However, this was not the case for Black Namibians living in the impoverished township of Katutura. Many young men and women interviewed received immediate anti-homosexual feedback within their communities. Jason, who was 20 years-old when we first met, explained to me how anti-homosexual nationalist rhetoric ignited conflict within his family.

When the President made that speech, my mother said, “He’s doing the right thing. When they start to arrest or deport people I will personally bring you to the police or to whoever will do the job!” My grandmother sent me to the shops and the people were saying, “Sam is saying you must go out of our country, you must be deported” ... I felt like [my friends and I] had nowhere to go.

As contestations concerning homosexuality worked their way through township cultural life, tensions took shape within local fields of ethnic identity politics. A call for the return to “traditional” practices accompanied the President’s condemnations of homosexuality (Menges 2001); however, many considered “traditional” as referencing Ovambo and Herero culture. Namibia’s “queer” rights movement therefore provided a platform from which members of other ethnic groups (particularly Damara and Nama) could protest the tribalism associated with the homophobic rhetoric. For those who identified as Ovambo and Herero and engaged in same-sex sexual practices, however, traditionalist rhetoric intensified the experience of isolation and stigmatization within their communities.

Informants described their encounters with anti-homosexual discrimination as occurring within institutional, community and familial settings. Spaces once considered private became public and politicized when paramilitary forces, church and medical representatives intruded upon their daily lives. Thus, sexuality became a site of personal and national conflict, as 22 year-old Francis describes:

[W]e decided to go to my aunt's place because she was selling some beer and on our way to the house while we entered we just saw a car coming with the lights off and [paramilitary police] stopped and said that all of us would have to come out from the yard. Then my aunt said "no they are staying here"! And then one said "yah it's *eshenges* [effeminate man]. Eshenges are not allowed in Namibia!" Then they began to speak in [Oshivambo] and my friend, who was also Ovambo said, "I am Ovambo Eshenge" and they started to beat him and my aunt said she was going to call the [Legal Assistance Centre] so they drove off. We filed a report after that but nothing happened.

Christian associations also took cues from government hate speeches. Many of my informants reported that at the time of the hate speeches, church leaders took up the evils of homosexuality in public sermons before the congregation.

With respect to health care institutions, informants generally perceived the state health care system as excluding their needs. This greatly inhibited the effort of TRP to promote HIV and other STI-testing practices. Among male informants who came from poorer households, apprehension toward the medical community was consistently expressed.² These informants discussed two main concerns. Firstly, they were fearful of being mistreated if they disclosed their sexuality to practitioners. The story of a *moffie* who was ridiculed by nurses for having an STI circulated widely within the closely knit *Rainbow Community*. Secondly, they perceived health care practitioners to be untrustworthy when it came to matters of privacy and confidentiality. What is of great concern here is not only if, in fact, nurses and physicians disclosed identity regularly (although the research of LeBeau *et al.* (1999) suggests that breaches in confidentiality by health care practitioners is prevalent in many regions of Namibia), but also that persons *perceive* themselves to be at great harm. Such perceptual barriers become concrete as they prevent poorer individuals from accessing state health resources. In short, most informants were averse to the idea of getting tested for STIs at the state hospital. By contrast, those who were able to afford to attend a private hospital (4 out of 31) stated that they fully trusted their physician. Moreover, they went for regular STI and HIV testing and disclosed their sexual identity to their health care practitioner.

Ambiguities in masculinity

Fear and stigma also shape the sexual subjectivity of many of my informants. In the following ethnographic portraits, it is illustrated how gendered subject positions emerge and are postured in sexual relationships. It has been chosen to represent the sexual lives of Ron, Winston, Louami and Fox (all pseudonyms) for two reasons: first, because they provide contrasting accounts of sexual subjectivity; and second, they highlight the main axes around which sexual risk taking practices occur for most of the informants.

Ron: Struggle for manhood

Ron's tight pants and short-cropped shirts, accentuating his tall slender physique, made him a striking feminine figure in Damara Lokasie [location]. During a social gathering

organized by TRP, he said that his sense of gender identity was “changing”. When later encountered in Katutura he explained, “I am feeling more butch these days ... that is why I am wearing these black boots”. Although Ron had attended the “sexuality lessons” at TRP, where universal and precise notions of sexual identity were taught, he discovered multiple ways of understanding his “self” through sexuality. When asked how he understood his sexual desires, he stated:

I am a man, a homosexual. I'm gay and I am sleeping with men and I am fucking men. I am fucked by men, also. In some cases, I am a *moffie*.

For Ron, sexuality and gender were not limited to the unitary parameters of “identity”, but understood as a repertoire of relations that brought together numerous desires and sexual practices into ways of being.

In relationships with “straight” men, Ron explained the violence he frequently encountered:

I have a “straight” boyfriend in [Katutura]. He is very aggressive, very violent. I told him I don't like to be fucked all the time and I said, “sometimes I must do it [penetrate you]”, and he got so worked up at the club. He was beating me with brooms and champagne glasses. He would not go 50/50.

Sometimes straight guys, they won't want to use the condom and you say no and you get a smack on the face ... When he hits me ... I think he loves me ... I know that he loves me. I feel that someone cares for me. I don't get love at all, [or] affection in my family. My father is very violent. I didn't come out to him, but he knows from the start that I am a *moffie*. But if I came out to him he would beat me.

Informants and informal contacts maintained that it was common for straight men and *moffies* to engage in sexual relationships in Katutura. Although the *moffies* had attended HIV/AIDS workshops at TRP, their safer-sex negotiating abilities were greatly restricted by straight men who insisted on sex without condoms. But what makes these young *moffies* particularly vulnerable to HIV is that their struggles remain deeply hidden. Although elder Damara women effectively “discipline” men, even throwing them out of the house for being intoxicated or physically violent toward younger female relatives, which was frequently witnessed, such familial mechanisms of support and protection are unavailable to *moffies* who are unlikely to disclose their secretive affairs with straight men to family. Four informants did report incidents of sexual violence to police; however, officers neither investigated their claims nor pressed charges. Derek, who was 19 years-old, explained the difficulties in safer sex negotiations that he and his friends experienced:

We don't date moffies, each other ... it is only “heterosexual” guys, so most of them approach us at the clubs. We have sex sometimes at his house but usually in the veld [field] or in the toilet. I have slept with about 60% of the guys in that shop [he points]. They have girlfriends also. If we sleep with a guy it is only us moffies who know ... The “straight” guys do not socialize with us, they approach us only when they are drinking or are drunk. We do not sleep together in the day, mostly we sleep with each other at night. It is difficult to make them wear a condom when they are drunk ... Although my family knows that I am a gay, I don't talk about my sexuality with them.

The production of gender subjectivity in sexual interactions, as described by the informants, stands in contrast to Campbell's (2001) discussion of masculinity and HIV-risk among miners in South Africa. Here, Campbell (2001: 282) refers to the social

construction of masculinities around sexuality as “bringing together the concepts of bravery, fearlessness ... and going after women”. In her theorization of masculine identity formation, multiple notions of manhood get drawn into self-conceptualization, and through social reiteration, *form* identities. However, masculinity, in the case of my study of male-male sexuality, proceeds through a less stable and more ambivalent social process. Many of my informants oscillated between desiring and disavowing, even violently negating, what was differentiated as feminine in their attempts to secure a sense of manhood in male-male sexual relationships. Although straight men access a sense of masculine power through the subjugation and sexual domination of *moffies*, the repeated acts of violence in defence of manhood suggest the presence of internal contradictions; vulnerability and fragility lie at the core of hegemonic masculinity (Connell 1995: 77). Thus, masculinity among the informants can be regarded as *ongoing struggles for manhood* rather than as completed identity formations.

The relationship between masculinity and sexual risk practices must also be viewed in relation to structural inequalities, which are tied to Namibia’s history of colonial Apartheid and sustained through the State’s implementation of neo-liberal economic policies that favour foreign investment over the interests of working class Namibians (Jauch 2002: 34). This reality is reflected in the most recent census report that calculates Katutura’s unemployment rate at 37% (Central Bureau of Statistics 2005). In the next section, it is illustrated how poverty interacts with Namibia’s anti-homosexual political climate and TRP’s organized protests to shape the imaginations and desires of my informants. For many, the pursuit of a life that is more economically and socially liberated requires taking on multiple and contradictory masculine subject positions. The following portraits, which depict different forms of “survival sex”, demonstrate that HIV-vulnerability cannot be understood in static terms—it changes over time.

Louami: Local struggles, nationalist strivings

Louami was introduced and proudly identified as Herero and Damara at a TRP workshop in 2002. When she worked “on the streets” (as a sex worker) in Windhoek, she certainly looked glamorous: she wore bright foundation makeup a few shades lighter than her natural facial complexion and her hair was piled up into a regal-looking hive of dark waves that drew the eyes up to her statuesque 6’3” figure.

During the first interview with Louami she talked about her childhood:

At six years-old I knew I was different than other boys. I was playing with the dolls and I was only playing the mother side in “Mummies and Daddies” games and small boys were touching my buttocks. My Mum talked to me ... as if I was a girl. They were telling me at the [TRP] office that I am transgender but I will never have the operation! I like how I look.

That same day, Louami showed several photos that reminded her of meaningful life events. First she held out a photo of her local gay friends: three had died of AIDS and the remaining two were living with HIV. Then she showed a picture of herself in a drag performance, during which she had stripped down to a thong-like bikini bottom before a cheering audience in a local *shebeen*. Next, Louami showed a picture in which she was wearing a striking traditional Herero women’s gown with distinctive head wrap. She had worn this dress in the human rights march in 2001 to protest against SWAPO’s hate speeches. Louami’s mother, who made the dress, had stayed up the entire night before the march sewing together the appropriate colours of the SWAPO party flag.

Donning these colours allowed Louami to express her deep disappointment, as she told me: “My father died fighting for SWAPO in the liberation army”. In early-2003, Louami’s mother died, leaving her to look after her younger siblings, their children and household finances.

Upon the author’s return in 2004, Louami was found without makeup and wearing men’s clothing. A glance at her bed in the centre of her room revealed that the bible was left open as though someone had been reading it. She explained that she had quit drinking and prostitution and was going to church regularly. It was then that she revealed how her friend who worked on the streets with her had died from AIDS: “He would sometimes let German men take him without a condom because they usually offered more money for it”. Loumai was terrified because she had also done this: “I am too too afraid to get tested. If I find out I am positive I will get sick faster”. When asked why she stopped wearing women’s clothing she said, “I am 30 now and my sister’s children ... I don’t want them to grow up seeing ... their uncle dressing like a woman”.

One day when Louami came from a funeral, she was seen dressed up in a suit and her hair cut short. She had received much praise from her fellow parishioners. “Inside I am a woman, still, but outside I am now like a man”, she giggled. Louami told that TRP staff were giving her a tough time about her masculine appearance. She stated, “they don’t understand ... I can’t find work if I am dressed like a woman and with my mother gone, I am the oldest, I have responsibilities”.

Winston: Shifting masculinities

When the author first met 19 year-old Winston in 2002, his appearance was striking. He wore bright purple eye shadow, matching lipstick and nail polish and a leopard print cowboy hat that looked as though it were out of a Madonna video. Winston, who identified as Ovambo, had come to live in Katutura to get away from pervasive homophobia in his village in northern Namibia during SWAPO’s anti-homosexual pronouncements. In one of the many interviews, he recollected his first same-sex sexual relationship, which occurred before the “hate speeches”:

There was this guy at my place ... normally people they say that I look like a girl in my face. One time we were looking after the cattle (this is what the men must do) they [the other villagers] used to say that when I come to the house I must bring him some *Ongome*—you make it in a pot with *Mahangu* [root crop] and put sugar and salt; it is what a woman brings to the man. One day he comes home and he was saying “this one is my girlfriend”. They were saying that I must bring the *ongome* to the man like a woman. When people use to want to beat me, he would say: “No, he is my girlfriend!”

One night he escorted me home ... I was 14 then ... we were just walking and we were next to the bush he was holding my hand ... And then he started kissing me. I didn’t know why, I was just getting this idea: why is his penis standing like this now, is something wrong? He started undressing me. Oh my god “you are so bigger than me” and he undressed me and we had sex and he didn’t use a condom, it was my first time.

Because Winston’s family held strong ties to SWAPO the “hate speeches” incited acts of domestic violence.

My father was hating me, sometimes beating me. He is not supporting me [financially] anymore. My mother understands [my sexuality], but she cannot do anything because they are men [father

and brothers]. My family, when they found out about me, they thought I had a mental illness. My father put me in the mental hospital for two months. I remember the psychologist was giving me a pill and injections every day ... But there was nothing wrong with me except that I was gay. I was locked in a room with only a toilet. I escaped from there and came to TRP. That is where I learned that I was a gay.

My uncle's friend he ... he was the one who raped me. He is not a gay; he is married. He used a gun and I was stabbed twice. My father wanted to solve the problem in the family ... but ... [the rapist] had pointed the gun at my head and he stabbed me here twice [shows large scar]. Sometimes I want to go to Ovamboland [northern Namibia] to visit my mother, but I cannot because of my father.

In Windhoek, TRP staff found a place in Katutura for Winston to live. Attending sexuality workshops, he came to identify as gay and regularly stood to give his testimonial of “coming out in Namibia” at human rights forums organized by TRP.

As the author came to know Winston well, he mentioned that he had taken cocaine on several occasions and was supplied with it by two gay foreigners in exchange for sex. He mentioned that he also had sex on occasion with “butch lesbians”, as he called them, “They sometimes would fight over me when I am at the *shebeen* [he laughs loudly]”. Winston maintained that most of the time he used condoms whether it was with men or women. However, it was difficult for him to practice safer sex because of drug use.

Daga [Marijuana] and cocaine, make you want to do things ... cocaine is very expensive. Sometimes you get it from your partner, usually the rich gay people, especially the White. Some of my friends work on the street. The rich people will take you home and they will give you cocaine and then you give them to your friends to try.

When the author returned to Namibia in 2004, Winston was no longer wearing partial drag or make-up. Instead he was wearing a tank top and a baseball hat. Winston smiled and said jokingly “I am good at pretending to be the man”. Unemployed and financially cut off from his family, Winston began to date two White businessmen who were “women”, Winston explained, because he penetrated them during sex. “Now I am dressed like a man but sometimes, if there is a [drag] competition I will do it still [dress up like a woman]. But [my boyfriends] don't know about it”. Winston recounted how he met his boyfriends:

...I was down the other side [of the bar] when he saw me ... I went to see his house in [affluent district] and he was showing me blue movies and he told me he liked me and wanted me to be his lover, and I said ok. He didn't do the sex, he was just sucking on me and I came in his mouth. When we went back to the club, we enjoyed drinks and then he gave me \$50 and then he said he was going back home. Now we have been seeing each other for a while and he wants me to fuck him all the time.

With my other boyfriend ... he is from Europe but he lives here now. He owns a business and he was telling me what [sexual practices] he liked and disliked ... then he wanted me to go to his office and he showed me some pictures and asked if I wanted something to drink. I went back to see his house. He was also showing me the [blue] movies ... Then he asked if I wanted to spend the weekend at his place.

I wear condoms with both boyfriends all the time because I am like a boy with them [the one who penetrates] ... they are my girlfriends. I never sleep with them without a condom. But the last time I was with the one ... he was not wanting to do it without a condom ... he gave me a tough, tough, tough time about not wearing a condom—Oh shit! The first time I wore it, the second time he

wanted me to use the condom, but the third time he didn't want to use it ... but he had given me \$600 the last time I went to the North.

In another interview with Winston in 2004 he had recently returned from the North where he had visited with his family. His father had since passed away and the rest of his family had begun to accept that he slept with men. When asked how others in his community “up North” responded to his sexuality, he explained:

A lot of boys when I go up North they want to sleep with me, especially the younger ones. Some of them are married men though...

I remember the last time I was in Oshakati, I was coming from the village and there was this police man that I was attracted to. He loved me so much. I went to the guest house with this man ... he looked so straight to me ... when we come in the room he said “oh shit!”—he liked my penis ... and he wanted to test [be penetrated by] my penis ... I was very shocked! He said mine is better than his and that I must do it to him [laughs loudly].

Some of the straight men they use a condom because they say it is dirty. Sometimes they say *kuka* [faeces] may be inside. And some of them say: “How can a *moffie*, a gay man get AIDS? You won't get AIDS from a man because when you go to the toilet, you Kuk out the sperm, it goes out the body.” They will say that it is very safe to sleep with a *moffie* because *moffies* don't sleep with women.

Fox: Sexual fantasies of modernity

When introduced to 21 year-old Fox by a TRP member, he was living with his girlfriend in Katutura. However, he frequently asked to tag along during the author's visits to the homes of gay informants. He greatly enjoyed socializing with *moffies*—“drinking and partying with them”, he said. Because Fox, who was gentle in demeanour, was one of the few straight men who openly associated with *moffies*, he was well-liked and warmly greeted by the informants. When more private conversations pertaining to the research needed to take place, he always respected the informants' privacy by leaving the room.

During the onslaught of hate speeches, Fox, who identified as Damara, was greatly concerned for the wellbeing of *moffies* in his community: “I was scared for my friends”. Yet, nationalist debates of “homosexuality” supplied the fertile ground upon which Fox could imagine and access modernity. His participation in sex tourism, stemmed from fantasies of Europe as a location of abundant pleasure as well as freedom from economic and political struggles.

If I get married to a woman I will probably still have sex with men. I don't want to have any more children though because they are so expensive, schools fees even \$150 a year! That is a lot for me. I already have one daughter. But I don't want to have any more. Maybe it's good if I travel to the Netherlands or Germany and get married to [a man] and just stay there. In those countries they don't have a problem with gays. I would never get married to a man *here*, only to a woman. If I went to Europe I would get married to a man, I wouldn't care even if I would be made fun of. There I would have a very nice life.

Like Winston, Fox recognized numerous possibilities for sexual pleasure and economic gain in same-sex relationships. Although he identified as a “straight man”, he regularly had sex with *moffies*, particularly when he was drinking at night. None the less, he repeatedly maintained his sexual preference for women.

The *moffies* try to pay the straight men. Most of us are sitting around and drinking and if they [*moffies*] just come and say “*oute i ta /gom*” [I want to suck you] they will say no; but if they pay, they will go with them. It can be money or a drink—not a lot of money. That is why I am normally doing it with them....because they are paying me. Most of the times we are at the *shebeen* and the clubs. I will go to his place. The others guys just know that I am leaving to go with them from the club because they are doing it too. My ex-girlfriend knew but it didn’t bother her ... My girlfriend now asked if I was also doing those things and I said “no we are just partying with those people”.

When asked, “The guys know that you have sex with *moffies*?” he responded:

Yes ... they are also having sex with *moffies* ... it happens a lot around here [smiles]. Not just my age but older men too. *Moffies* will suck [give oral sex] ... they do it better than the women. Most of the men will suck my dick but the women, if I asked them that, they would be shy.

When asked if he also had sex with his straight friends, Fox exclaimed, “No! We are men ... I would not like to be fucked!”

Myths of sex, myths of science

During interviews, Fox demonstrated that he had detailed information about transmission and “infected body fluids” when it came to heterosexual sex; however, he maintained that:

Sex is safer with a *moffie* ... and a woman is more dangerous because other men have their eye on her, and she will run off with another men. The *moffies* make me wear condoms sometimes ... but some of my straight friends don’t won’t wear them. It is better to have sex with a *moffie* for a one-night stand.

The idea that sex with men was somehow safer than sex with women was a recurring theme in conversations with informants and informal contacts. According to Jason, the prevalence of sex between straight men and *moffies* was related to fear of HIV infection from women:

Most of the men I know who have girlfriends are saying that they prefer to have sex with us *moffies* because they don’t want to catch STDs cheating on them, or HIV, or pregnancy. Most of them think they can even have sex with men without a condom because they think it is less risky than sex with a woman.

Interviews and focus groups confirmed a prevalence of HIV-transmission myths among straight informants and informal contacts. When Calvin was asked why he enjoyed having sex with *moffies* he explained, “I believe that you can’t get HIV from having sex with a *moffie* because there is no mixing of fluid there [he point to the anal region]; it is dry”.

Peter, who also identified as straight, drew a similar equation as Calvin between “fluids”, “infectiousness” and the “female body”:

I see it [having sex] as more risky with a woman because there is blood connected. In a man I do not know where the blood is connected. In a woman you are directly connected ... You can tell inside they are wetter than a man.

Twenty-four year-old Ronel, who proudly claimed to have many girlfriends considered homosexual sex to be safe because:

With a woman you are attracted to their shape, their curves, but so are other men. She may run off with other men. But a *moffie*, they are safer because they do not sleep with women and they will be faithful to you.

Straight men were not, however, the only individuals who believed that sex between males was somehow safer than heterosexual sex. Myths also travelled through the community of *moffies*, particularly among those who were younger (and who had not attended AIDS workshops at TRP). The following responses were given when informants were asked “What is more risky: sex with men or with women?”

[Christina, 18 years old] With a woman, it is riskier ... from people having sex to get babies. You are more likely to get STDs from a woman because HIV comes through sexual intercourse.

[Lorin, 19 years old] I think it is more risky in heterosexual sex ... because in biology in school we would have the diagram and the anatomy [of a vagina]. You could see that all the way inside [a woman] it is wet. It is like full of membranes. But men don't have as many membranes [in their anus].

[Latoya, 17 years old] I heard that you are supposed to wear a condom between men but I don't know how you can get HIV from a man. I didn't learn about that in school. It is in the blood cells. It is different down there [points to anus]. It is not like a woman where there is blood and body fluids.

Through continual exposure to HIV/AIDS awareness campaigns in Namibia, most informants thought of AIDS as a disease of “dangerous bodily fluids”: breast milk, vaginal fluid, blood and semen. Many informants not only viewed female bodies as wetter—because they lactated, menstruated, and had many “membranes”—but also considered them more contagious and polluted than male bodies. For the straight men the author came to know, the *moffie* was conceived of as the purer substitute for the polluted female body. This idea was further emphasized when a 20 year-old man said: “Some of the straight guys think that we are virgins because we are tighter than women”.

When informants did wear condoms, they frequently used oil-based lubricants (unaware of the damage caused to the latex). Only two male informants and four informal contacts knew the difference between water and oil-based lubricant. Overall, this lack of knowledge points to public health's failure to bring general discussions of lubricants and anal sex into HIV-awareness campaigns.

Conclusion

As homophobic discourses circulate throughout Namibian society, local, national and global ideas of sexuality are reconstituted within the shifting cultural identity politics of everyday life. In the Windhoek Urban Area, safer sex negotiations often “break-down” unevenly for persons in same-sex sexual relationships around notions of gender, class, race and ethnicity. In particular, the larger social scene of gender inequality is replayed during intimate sexual negotiations where masculinities dominate feminine forms, placing *moffies* at tremendous risk for HIV infection. The concealment of same-sex sexual desire, as a means of coping with anticipated stigmatization, renders struggles with discrimination, violence and sexual harassment invisible. Within this context of oppression, relationships with foreigners are desired not only for their immediate economic benefits but also for their imagined access to modernity and sexual freedom. Such relationships get appraised at so high a value, that unsafe sex may be considered worth the risk.

Within the postcolonial project of nation (re)building, the “Truth” of Namibian sexuality—as “traditionally heterosexual”—is produced through the silencing of alternative practices and identities. The resulting exclusion of homosexuality from Namibian public health translates, in unexpected ways, into local myths of male-male sex as “safer sex”. Therefore, international and national public health constructions of “heterosexual African AIDS” are somehow implicit in the structure of HIV-vulnerability for many of the individuals encountered. In this ethnographic study of male-male sexual behaviour in Namibia, gaps in public health discourse operate as material forces that prove detrimental to local sexual risk taking perceptions and practices. To understand the widespread exclusion of homosexuality from public health discourses of “AIDS in Africa”, then, social health scientists must take into account how sexuality is intimately bound up in political economy. Unravelling the complexities between sexual practices, social inequality and HIV transmission in African countries, however, can only be accomplished if long-term and intensive ethnography is centrally incorporated within the methodologies of health science research projects.

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Notes

1. Some informants claimed that the Damara word *!gamas* referred to an animal (usually a goat) that possessed both genitalia. Ovambo informants asserted that *eshenge* was the traditional word for “a homosexual.”
2. Of the 31 men interviewed, 14 were unemployed, seven had part-time employment, while ten were employed full-time (although only four of the ten males employed full-time were paid wages that elevated their standard of living above the poverty level).

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Résumé

Cet article met en doute les théories de santé publique internationale qui caractérisent «le sida en Afrique» comme une épidémie hétérosexuelle sans ambiguïté, en représentant les vies sexuelles quotidiennes dans une communauté de jeunes namibiens qui ont des rapports sexuels avec des personnes du même sexe. J'explique brièvement comment les discours diffamatoires continus à l'encontre des «homosexuels» par des officiels gouvernementaux servent de toile de fond stigmatisante contre laquelle les jeunes expérimentent et pratiquent leur sexualité. En s'ancrant dans 20 mois de recherche ethnographique, l'article discute les perceptions sur les risques de contamination sexuelle par le VIH et les pratiques des jeunes hommes, en soulignant les complexités de la subjectivité sexuelle qui se forment dans les politiques culturelles des masculinités concurrentes, la rhétorique anti-homosexuelle soutenue par l'état et les revendications transnationales axées sur les droits *queer*. Les notions limitées et monolithiques de genre et d'identité sexuelle ne se prêtent pas à l'analyse des risques liés au VIH et de la vulnérabilité dans cette communauté.

Resumen

Representando las vidas sexuales diarias de una comunidad de jóvenes en Namibia que participan en relaciones heterosexuales, en este documento se cuestionan las teorías internacionales sobre la salud pública en las que se caracteriza el "Sida en África" como una epidemia inequívocamente heterosexual. Destaco cómo la continua denigración de los "homosexuales" por los organismos oficiales del Estado sirve de estigma para los jóvenes que experimentan y practican su sexualidad. Con información recabada en un estudio etnográfico de 20 meses de duración, en este ensayo se ilustra qué opinan los hombres jóvenes del riesgo del sida y qué tipo de relaciones sexuales tienen. Asimismo se resaltan las complejidades en la subjetividad sexual que se forman en las políticas culturales de la competencia masculina, la retórica antihomosexual impulsada por el Estado y la protesta transnacional de los derechos de los gays. La noción confinada y monolítica de la identidad sexual y de género no lleva a entender y analizar el riesgo del VIH y la vulnerabilidad en esta comunidad.