

# **“IN THE SHADOWS”**

**Male Survivors of Sexual Violence**



Ambasáid na hÉireann  
Embassy of Ireland



**WANGU  
KANJA**  
FOUNDATION



## ANALYSIS OF THE SEXUAL VIOLENCE CASES REPORTED TO WANGU KANJA FOUNDATION (WKF) FROM APRIL 2016 TO APRIL 2019.

### Background & Introduction

Wangu Kanja Foundation (WKF) is a nonprofit organization founded in 2005 and it focuses on promoting prevention, protection and response towards ending Sexual and Gender Based Violence (SGBV). WKF envisages a society that is safe and free from all forms of violence. WKF convenes the Survivors of Sexual Violence in Kenya (SSV\_Ke) Network that brings together a unified voice of the survivors to address all forms of sexual violence and to amplify their voices across the country. The movement is anchored within the already existing community structures for purposes of ensuring innovation and sustainability.

Sexual violence (SV) is a serious human rights and public health problem with both short- and long-term ramifications on a survivor's physical, mental, and sexual and reproductive health. Notably, sexual violence happens in every community in Kenya and affects people of all affects people of all genders, ages, religions, cultures, ethnicities, professions, abilities and sexual orientations. Whether committed by non-partners or occurs in the context of an intimate relationship, within the larger family or community structure, or during conflict times, sexual violence is an extremely violating, traumatizing and painful experience for the survivor. **One constant fact is that: it's never the survivor's fault.**

In 2016, ActionAid Kenya and Wangu Kanja Foundation through “**Access to Justice**” Project, worked with communications company Databit to set up a free text messaging helpline for reporting cases of sexual violence in the informal settlements of *Mukuru Kwa Ruben* and *Mukuru Kwa Njenga* in Nairobi. Through the helpline (referred to herein as the *SMS Platform*) all one need to do is to text the word ‘**HELP**’ to **21094**, and well-trained personnel would be at hand to receive and respond to their message. The trained personnel are volunteers who include system operators, health workers, paralegals and counselors. They engage with the clients and link them up with service providers including the law enforcement agencies, medical and psychosocial support services. In April 2017, the *SMS Platform* was rolled out and expanded to cover other parts of the country.

This report is based on an analysis by the Wangu Kanja Foundation (WKF) of the cases of sexual violence directed at men and boys that were reported *via* the *Walk-In* (one on one reporting) and *SMS* platform (using mobile phone). The data analysis of the cases reported through the *Walk-In* and *SMS Platform* between April 2016 (*Walk-In*) to April 2019 will help WKF, its partners and other stakeholders to have a better understanding of the complexity and dynamics around sexual violence programming and interventions for male survivors.



## Key Concepts and Definitions

Concept	Definition	Description
<b>Sexual Violence</b>	It is any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic a person's sexuality, using coercion, threats of harm or physical force, by any person regardless or relationship to the victim, in any setting, including but not limited to home and work.	Encompasses acts that range from verbal harassment to forced penetration, and an array of types of coercion, from social pressure and intimidation to physical force. Sexual violence takes many forms, including rape, sexual slavery and/or trafficking, sexual harassment, sexual exploitation and/or abuse, and forced abortion. Neglecting the needs of male survivors of sexual violence can also reinforce and encourage patterns of violence.
<b>Sexual Torture</b>	Includes violence directed at one's sexual organs, the introduction of foreign bodies into the vagina or rectum, rape and other forced sexual acts.	Can also constitute mental sexual assault and sexual humiliation such as forced nudity, such as forced masturbation, sexual threats, and the forced witnessing of sexual torture.
<b>Torture</b>	Consists of severe pain or suffering, whether physical or mental, inflicted for such purposes as obtaining information or a confession, exerting pressure, intimidation, or humiliation.	Torture can be actual or threatened physical intrusion by force or under unequal or coercive conditions. Perpetrator uses power over the survivor/victim (especially men) to emasculate them and oftentimes torture is committed during conflict times.
<b>Defilement</b>	Defilement ( <i>statutory rape</i> ) is defined as any sexual activity with any person under the legal age of consent, even if the person cooperates. In Kenya, defilement has different degrees of punishment depending on the sexual act and age of the child ( <i>minor</i> ).	Can be committed by someone the child trusts, including parent, sibling, extended family member, friend or stranger, teacher, elder, leader or any other caregiver, anyone in a position of power, authority and control over a child.
<b>Attempted Defilement</b>	It includes any sexual activity with any person under the legal age of consent, even if the person cooperates.	It is often difficult to report cases of attempted defilement since children (minors) are always threatened by the perpetrators and sometimes their parents and close relatives.
<b>Rape</b>	The invasion of any part of the body of the victim or of the perpetrator with a sexual organ, or of the anal or genital opening of the victim with any object or any other part of the body by force, threat of force, coercion, taking advantage of a coercive environment, or against a person incapable of giving genuine consent ( <i>International Criminal Court</i> ).	Any person in a position of power, authority and control, including husband, intimate partner or caregiver.
<b>Attempted Rape</b>	Attempt(s) by anyone to unlawfully and intentionally commit an act which causes penetration with his or her genital organs without the consent of another person.	Can also be defined as attempted forced/coerced intercourse without penetration. In some cases, it takes the form of sexual harassment at home or in the workplace.



<b>Gang Rape</b>	"Gang rape" means two or more persons intentionally and unlawfully commits an act which causes penetration with their genital organs without the consent of the other person ( <i>victim/ survivor</i> ).	Usually becomes more aggressive as the offending gang member takes their turn especially with a single victim.
<b>Sexual Harassment</b>	Refers to unwelcome sexual advances, requests for sexual favours, and other verbal, visual or physical conduct of a sexual nature.	Examples include: attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks.
<b>Abuse</b>	It is the misuse of power through which the perpetrator gains control or advantage of the abused, using and causing physical or psychological harm or inciting fear of that harm.	Abuse prevents persons from making free decisions and forces them to behave against their will.
<b>Coercion</b>	Is forcing, or attempting to force, another person to engage in behaviours against her will by using threats, verbal insistence, manipulation, deception, cultural expectations or economic power.	Coercion often involves the exercise of power and control by an assailant over their victims.
<b>Consent</b>	Is when a person makes an informed choice to agree freely and voluntarily to do something. The phrase <i>against her will</i> is used to indicate an absence of informed consent. There is no consent when agreement is obtained through the use of threats, force or other forms of coercion, abduction, fraud, deception, or misrepresentation.	Consent is only used when referring to adults. Children on the other hand cannot give consent. The age of consent in Kenya is 18 years.
<b>Perpetrator</b>	A person, group, or institution that directly inflicts, supports and condones violence or other abuse against a person or a group of persons.	Perpetrators are in a position of real or perceived power, decision-making and/or authority and can thus exert control over their victims.

## Objectives for Analysing Sexual Violence against Men and Boys

- Provide a basis for learning more about existing sexual violence-related prevention mechanisms for men and boys and to identify challenges and gaps with regards to protection and response efforts;
- Understand the needs of male survivors, their families and communities in order to effectively cope with and restore their dignity and that of their families and friends;
- Explore the availability of cross-sectoral services for male survivors of sexual violence and their families as well as barriers and enablers to accessing comprehensive care and support services including access to justice.

## The Root Causes and Risk Factors of Sexual Violence against Men

Sexual violence rape and other forms of sexual coercion against men and boys take place in a variety of settings – including homes, workplaces, schools, streets, and prisons. **Gender inequality, abuse of power** and **disrespect for human rights** are root causes of sexual violence targeting men and women. Sadly, sexual violence against men is a very sensitive and neglected area of study. However, smaller studies have shown that sexual violence when perpetrated against men and boys is always as a means of disempowerment and dominance in the same way that it has been shown to be about power and dominance in the case of women and girls. In some instances, the attacks are mainly directed at their sexual or reproductive health or identity including undermining concepts of masculinity.

may involve use of objects, genital violence – beatings of genitals or forced circumcision, castration, forced nudity, forced masturbation, defilement and rape of relatives in one's presence and other forms of sexual humiliation; including forced incest (*enforced defilement and/or rape of relatives*). It is worth noting that sexual violence is a violation of the human rights of an individual since it takes away a person's right to control their own bodies.

**Summary: It is important for all stakeholders to develop and implement effective and appropriate preventative, protective and responsive measures to address underlying causes and factors that encourage the perpetuation of sexual violence in various communities across Kenya.**

**Sexual violence is a public health problem with profoundly traumatic personal experience impacting every aspect of a survivor's life leading to large scale problem that has a wide effect to the society.**

Understanding the factors associated with a higher risk of sexual violence against men is complex, given the various forms that it can take and the numerous contexts within which it occurs. Research indicates that sexual victimization, especially during childhood, is associated with perpetration in later life, so it is important to address this gap in its own right and for prevention of subsequent sexual violence.

- a. Sexual violence against men and boys in Kenya has taken many forms such as rape, whether anal or oral, which

*Other than the root causes, there are many factors that contribute to acts of sexual violence in any setting which include:*

- ▣ Cultural, traditional practices which include assumptions, myths, misconceptions and stereotypes about male behaviours;
- ▣ Perceived loss of male power or role in the family/community;
- ▣ Alcohol, drugs and substance abuse;
- ▣ Lack of services and programs to address unemployment;
- ▣ Breakdown in law and order;
- ▣ Inefficient enforcement and/or implementation of laws against sexual violence among other factors.



**Total Number of Cases Recorded Via the Walk-In and SMS Platform**

The matrix below indicates the total number of survivors who reported cases through the two reporting mechanisms i.e. *Walk-In* and the *SMS platform*. It is important to note that while the *Walk-In* data was clearer in terms of capturing the nature of the case being reported, there were some limitations with the *SMS platform* since not all recorded data of 793 were conclusive.

Figure One: Total number of cases reported

	Female	Male	Unspecified	Total Cases
Walk-In	399	69	0	468
SMS Platform	300	135	358	793
Total Clients	699	204	358	1,260

**NB:** Markedly, more men reported the cases through the *SMS platform* in comparison to the *Walk-In*. This can be attributed to culture, social stigma and lack of support system for men who report cases of violation against them. To this end, men find it easy to anonymously report cases and it may not be surprising to find out that the unspecified cases recorded through the *SMS platform* could arguably be attempts by men to report cases. Having said that, the web portal and the Mobile Application (*MobApp*) developed by Wangu Kanja Foundation and the Survivors of Sexual Violence in Kenya (SSV\_Ke) Network, will come in handy towards capturing more cases not only for women and girls but also for men and boys.



**Cases of Sexual Violence Recorded**

This analysis looked into the total number of sexual violence cases that were recorded through *Walk -In* and *SMS platform*. Cumulatively, there was a total of two hundred and fifty (250) cases of sexual violence (defilement, attempted defilement and rape) reported. Forty (40) cases which reflects 16% of all the cases of sexual violence reported were meted against men and boys.

Figure Two: One on one reporting



Figure Three: Mobile reporting



A total of 180 cases of sexual violence were reported via *Walk-In* of which 26 were against men and boys. The *SMS platform* recorded 72 cases and 14 of these were against men boys. To address sexual violence against men and boys different actors must first raise awareness among and build the capacity of providers and responders, implement services, and establish or expand functioning referral pathways before awareness-raising among the community is initiated.

Figure Four: Cases reported via Walk-In

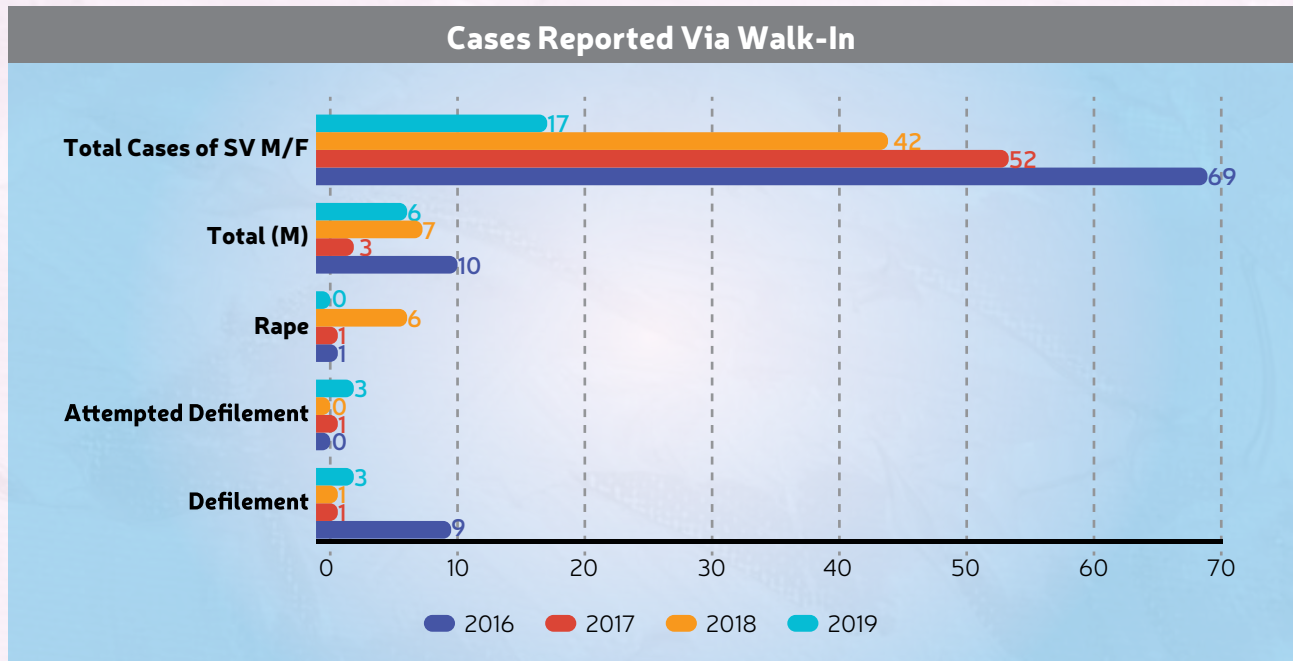
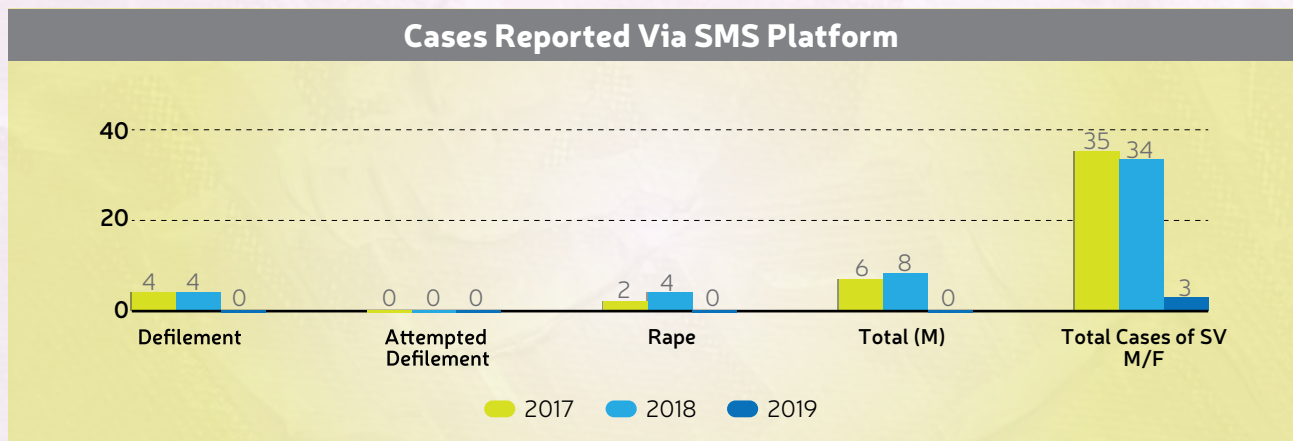


Figure Five: Cases reported via SMS Platform (Mobile Phone Reporting)



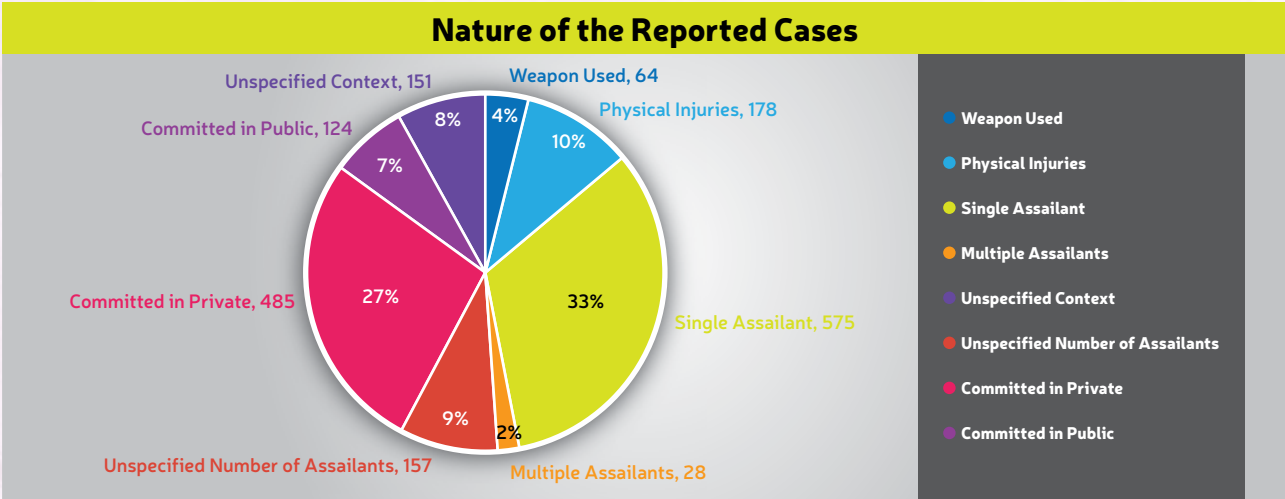
## Nature of the Reported Cases

Data analysis sought to look at the unique nature of the reported cases with regards to whether a weapon was used, physical injuries inflicted, number of assailants involved and the context where the violence was committed (*public or*

*private*). From the illustration, it is worth noting that majority of cases of abuse were committed by single attackers and in private spaces. This affirms the fact that most cases are highly likely to be committed by someone known or close to the survivor as opposed to a stranger.



Figure Six: Differentiated cases reported



### Consequences of Sexual Violence on Men and Boys

Evidence suggests that male survivors of sexual violence may experience similar mental health, behavioural and social consequences. Moreover, effects of sexual violence on male survivors vary from one survivor to the other. The most commonly reported consequences include among others;

- Physical, psychological, and socio-economic impact which can be extremely devastating, with both short- and long-term effects. Physical consequences include rectal fissures and inflammations, injury and scarring of the genitals, urinary and bowel incontinence, Sexually Transmitted Infections including HIV, sexual dysfunction and infertility;
- Experiences of anxiety and depression, self-harm, substance abuse, sleep disorders, aggression directed at oneself and others, suicidal ideation, and Post-Traumatic Stress Disorder (PTSD), and in some case compulsive sexual behaviour;
- Medical practitioners lack awareness that men might be sexually abused and are often not trained to seek the physical symptoms and ask the questions that would help diagnose a male survivor correctly in order to provide proper treatment;
- In some instances, adult male survivors may be unable to physically or psychologically perform their roles and responsibilities, increasing their risk of poverty. On the other hand, boys who are survivors of sexual violence may abscond school, acquire behavioural complications, or engage in juvenile delinquency and negative coping strategies, such as drugs and substance abuse;
- Psychologically, male survivors may report grappling with deep shame, guilt, and socially, they may be stigmatized and discriminated, ridiculed blamed for the assault and adult men may be abandoned by their partners and family members;



- ▣ Men and boys may have difficulty articulating their experiences of sexual violence, due to fears of social stigma due to perceived violation of masculine norms. They may be unable to conceptualize their experience as sexual violence, which is often socially constructed as a “women’s issue”.

## Barriers to Service Provision

Limited evidence base and lack of data (*due to under reporting*) has led to a widely held assumption that sexual violence against men boys is somehow rare or non-existent. This assumption must be dispelled and services for all male survivors of sexual violence should be in place all the same. *Other barriers to service provision include;*

- ▣ Limited knowledge and somehow negative attitudes (*disbelief and hostility*) among some service providers coupled with a lack of clarity on sectoral and institutional responsibility;
- ▣ Legislative barriers as well as lack of or inaccurate information about laws prevent or deter male survivors from accessing services;
- ▣ Shortage of skilled, sensitized and lack of confidence in service providers;
- ▣ Few targeted services for adult men and older adolescents including limited referral pathways;
- ▣ Sociocultural barriers- key misconception among most people is that men and boys cannot be sexually violated-- “It is unimaginable and impossible”. It is assumed that men and boys are capable of defending themselves and thus when it happens, they must have accepted it”;
- ▣ Limited prevention, protection and response capacity to the needs of male survivors;
- ▣ Blaming of survivors and possible reprisals for real or perceived sexual orientation
- ▣ Being ostracized and isolated
- ▣ Stigma (*being ostracised and isolated*) is one of the biggest barriers to timely treatment of male survivors of sexual violence as it may prevent the survivor from reporting and seeking timely help;
- ▣ Some male survivors require specialised services, such as reparative surgery or soft foods and diapers, which may be expensive or unavailable in most facilities;
- ▣ Gendered stereotypes and prejudice, social taboos, biased legal frameworks, and limited funding thwart men and boys from accessing the services they need.

**Targeted funding for male survivors is scarce and is oftentimes seen as a zero-sum game- this should never be the case. There is need for resource allocation to address sexual violence against men and boys alongside their engagement in design and implementation of initiatives to address sexual violence in various communities.**



## Ignoring Sexual Violence against Men and Boys is Wrong

Policy and programmatic responses to sexual violence focus almost exclusively on its effect on women and girls. But there are many male survivors and/or victims (men and boys), and they need support and assistance. Sexual violence against men and boys is intensely traumatizes the victims and has wide-ranging psychological and physical implications. Sexual violence against men and boys is largely hidden and ignored with regards to policy and resources. This silence is a result of under-reporting, policy frameworks, and structural discrimination against male survivors of sexual violence.

Failure to address the suffering of male survivors/ victims has profound consequences for the survivor, their families, community and the wider society. Furthermore, their exclusion from assistance and support, and near absence from judicial recourse, compounds the injustice experienced by male survivors. A more robust and dedicated commitment to men and boys as victims of sexual violence is urgently required.

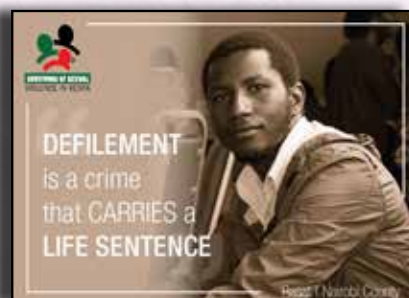
Over the last two decades, a growing body of evidence has documented the prevalence of sexual violence against men and boys in a wide variety of conflict settings, indicating that numbers of male victims are significantly higher than initially presumed. Men are especially vulnerable in certain conflict situations, for instance during post-election skirmishes in Kenya in 2007/08 and in 2017.

## Best Approaches to Stopping Sexual Violence

While approaches in the past to sexual violence have largely focused on the criminal justice system, there ought a paradigm shift towards a public health approach, which recognizes that violence is not the result of any single factor but is caused by multiple risk factors that interrelate at individual, relationship and community/societal levels. Accordingly, addressing sexual violence requires collaboration by all stakeholders including health, safety and security, legal and justice, psychological and livelihood sectors. The public health approach must endeavour to extend care and safety to everyone focusing predominantly on prevention, while ensuring that people who experience violence have access to appropriate services and support.

Providing comprehensive health care and medico-legal services for survivors of sexual violence is supreme. In addition to compassionate care, survivors need access to a range of specific health services from trained providers, *including*:

- Psychosocial and psychological support (*and referral for mental health care if needed*);
- Treatment and prophylaxis for Sexually Transmitted Infections (STIs) including Post Exposure Prophylaxis for HIV;
- Forensic examination to strengthen evidence base during legal process.



"In the Shadows": Male Survivors of Sexual Violence



## Recommendations

It is critical to comply with the principles of “Do No Harm and “Leave No One Behind” when dealing with cases of sexual violence against men and boys. To enhance reporting by male survivors, there is need to ensure their **safety and security** - *(protect male survivors from potential reprisals)* strengthening **confidentiality**, **respecting** their wishes and **non-discrimination** when it comes to accessing services.

**Consider establishing a community of practice to support learning and knowledge-sharing across and within different cultural contexts.**

### WKF further proposes the following:

- a. Strengthening **cross-sectoral coordination** on sexual violence against men and boys and identify which sector and actor *(including non-traditional actors)* are best placed to provide services to male survivors in settings where services are unavailable.
- b. Engagement of men and boys, in particular male survivors, male service providers, in program design, implementation, monitoring, evaluation and learning.
- c. Increasing the knowledge base and disseminating prevailing and new information on sexual violence against men and boys. This will ensure better prevention, protection and response initiatives. Data on prevalence and patterns can also be an important to engage governments and policy-makers in addressing this issue and convince them of the public health impact and costs of sexual violence to the productivity of the country.
- d. Identify innovative programmes to build evidence base on effective approaches that can be scaled up bearing in mind that addressing sexual violence against men and boys is a long-term, complex process requiring multi-year funding.
- e. Work closely with communities and male survivors to identify and develop sensitive and culturally appropriate engagement strategies on sexual violence against men and boys, including awareness-raising and advocacy.
- f. Initiate appropriate mechanisms to ensure good quality services are in place, and functioning referral pathways are established. Additionally, build the capacity of staff to identify and refer male survivors to specialized services.
- g. From the legal system, survivors need to have access to competent and sensitized professionals who will assist them should they decide to prosecute the perpetrator.



YOU HAVE A ROLE TO PLAY IN



PUBLISHED BY

Wangu Kanja Foundation (K)  
Mukuru kwa Reuben off Enterprise  
Road,  
P.O. Box 12608-00100,  
Nairobi, Kenya.



+254 722 790404 / +254 774 746699  
info@wangukanjafoundation.org  
www.wangukanjafoundation.org  
@WanguKanja / @SSV\_Ke  
Wangu Kanja Foundation

© Wangu Kanja Foundation 2020

COMPILED BY PHIL OTIENO  
+254 721 806 183 | philtoosh@gmail.com

DESIGN & PRINT | ENDLESS INSPIRATION  
+254 722 659 368 | hello@endlessinspiration.org