1. INTRODUCTION
The Young, Wild and... Free? (YWF) project specifically focused on young sex workers (YSW) and men who have sex with men (MSM) aged 18 to 24. The project has two aims: to improve service delivery for young people from key populations and contribute to building existing inclusive networks of young people.

There is very little knowledge and data on young sex workers in Kenya, making it difficult to understand the extent and severity of their issues, their specific needs and how to reach out to them. Under the YWF programme, HOYMAS (a male sex worker-led organisation) and KESWA (the national movement of sex workers in Kenya) generated more data and insights on young sex workers, empowered them to define and advocate for their rights and scaled up the demand, access to and uptake of tailormade services for young sex workers. Insights from community-based participatory research (CBPR) and subsequent activities helped young sex workers to have the confidence to speak out on their rights. Young sex workers are now valued as equal members of wider networks that advocate for the rights of young key populations, such as young people living with HIV in Kenya.

2. THE PROBLEM
The 2018 national behavioural assessment conducted by NASCOP1 (National AIDS and STI’s Control Programme) in Kenya young sex workers raise awareness among other young sex workers to inform them about HIV and SRHR.

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with young male and female sex workers, and those aged 18+, showed how vulnerable sex workers are:

### Table 1: 2018 NASCOP national behavioural assessment results

<table>
<thead>
<tr>
<th></th>
<th>Young female sex workers</th>
<th>Young male sex workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experienced police violence</td>
<td>47%</td>
<td>27%</td>
</tr>
<tr>
<td>Received support after experiencing violence</td>
<td>40%</td>
<td>41%</td>
</tr>
<tr>
<td>Self-reported HIV-positive</td>
<td>18%</td>
<td>20%</td>
</tr>
<tr>
<td>Enrolled on antiretroviral treatment (ART)</td>
<td>63%</td>
<td>68%</td>
</tr>
<tr>
<td>Missed the last ART appointment</td>
<td>37%</td>
<td>34%</td>
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Young sex workers face severe stigma and discrimination, a barrier to accessing HIV and sexual and reproductive health and rights (SRHR) services. The fear of violence and stigma forces this population to go underground and become invisible. Judgmental attitudes, threats of eviction or public disclosure, social isolation, and violence perpetrated by clients, law enforcement officials, religious leaders, and their own families stop young sex workers from accessing health care services. YSW exhibit a high rate of dependence on alcohol and substance abuse. This impacts their risk perception, making them more likely to face violence or engage in unprotected sex. Young sex workers are unaware of ways to seek assistance without exposing themselves to the risk of further harassment. The Young, Wild and... Free? research and Upinion surveys with young sex workers highlighted the need for stigma- and discrimination-free services in which the rights of young sex workers are respected.

Evidence provided through the research highlights the fact that criminalisation of prostitution prevents young sex workers from accessing necessary prevention and response interventions. Criminalising policies and legal frameworks also act as a barrier to young sex workers accessing HIV services. This leads to AIDS-related deaths, which have remained the leading cause of death and morbidity among sex workers, as highlighted in Kenya’s national implementation guidelines for HIV and STI programming among young key populations.2

### 3. THE CHANGE(S)

In 2020, HOYMAS undertook a youth-led participatory study in Nairobi and Nyeri Counties to analyse and identify the health needs of YSW. A total of 94 in-depth interviews and three focus group discussions were conducted with young sex workers. The study findings informed the development of a specialised package of HIV and sexual and reproductive health and rights services for young sex workers. The tailormade package targeted issues specific to young sex workers such as violence, high HIV and STI prevalence and challenges in accessing SRHR services, stigma and discrimination. The research resulted in recommendations to healthcare providers, implementing partners and policymakers on providing proper preventative responses and policies appropriate for working with and for sex workers below the age of 24.

The HOYMAS drop-in centre (DIC) was established in 2013 and co-located with a clinic that provides HIV prevention, care and treatment services, and screening and treatment for sexually transmitted infections. Clinical data from 2019 revealed that most young sex workers did not want to visit the centre because of stigma and discrimination.

In June 2020, HOYMAS and KESWA enabled 20 young sex workers to attend virtual learning exchanges with organisations from Vietnam, Ukraine, and South Africa. One of the key learnings from Ukrainian partners was setting up a youth-friendly drop-in centre. As a result, HOYMAS established a drop-in centre community committee with young sex workers to ensure YSW were meaningfully engaged in the planning of activities. HOYMAS decorated the DIC with attractive colours and pictures and introduced edutainment activities such as Beauty Friday and games to motivate YSW to visit the centre and use services at the clinic. HOYMAS boosted Wi-Fi connectivity at the drop-in centre by allocating one account for the community to use and used a peer-to-peer approach in creating awareness of the new DIC package. As a result, 627 young sex workers participated in different centre activities and were referred to the clinic for screening, treatment, and care.

![KESWA organises friendly football matches for young sex workers. These football matches stimulate conversations about SRHR and increase uptake of HIV and SRHR services.](image-url)
The exchange also enabled the two organisations to learn how to set up young sex worker-friendly clinics and embrace information and communication technology (ICT) for effective programme implementation. HOYMAS also adopted a Lighthouse\(^3\) digital innovation model and diversified HIV and SRHR service provision both online and offline. The project expanded virtual outreach to hard-to-reach young sex workers via TikTok, Instagram, WhatsApp, Grindr, Facebook, and Telegram.

In 2021, HOYMAS partnered with Upinion to survey 681 young sex workers on mental health, legal literacy awareness and sexual and reproductive health services. The survey findings enabled the project to incorporate young sex workers’ input into project design in an interactive and creative way. Feedback from them about digital technologies prompted referrals of YSW to online clinic bookings. In addition, 826 young sex workers subscribed to a new online education and delivery programme via the engage SPARK platform. The project has had 408 oral HIV self-test kits delivered to YSW, improving autonomy, dignity, and confidentiality.

In 2020 and 2021, the project conducted monthly human rights awareness sessions targeting 50 young sex workers per session. To date, 573 young sex workers have increased their knowledge of Kenya’s human rights and criminal procedures. As a result, there has been an increase in the number of cases being reported by YSW. Paralegals and law enforcers addressed 452 cases of violence that were reported between June 2020 and August 2021. The increased reporting of violence against young sex workers has ensured that perpetrators are held accountable. Sensitising the police and the criminal justice sector to prevent violence against young sex workers enhances access to justice in cases of rights violations.

There was an improvement in knowledge and attitudes among 95 sensitised health care workers at the Casino health centre, Ngara health centre and Mathare North health centre where young sex workers can freely access HIV and SRHR services. HOYMAS and KESWA used the peer-to-peer approach and a digital platform to create awareness of facilities that received training about young sex workers to increase uptake. Data from the HOYMAS clinic (located within the Nairobi Metropolitan Area) and facilities where sensitisation training was carried out show an increase in young sex workers using SRHR and HIV services. Between October 2020 and August 2021, HOYMAS clinic reached 1669 young sex workers with HIV prevention interventions such as HIV testing, STI treatment, condoms, and water-based lubricants. Additionally, KESWA reached 369 young sex workers with a similar package in 2021.

In 2020 and 2021, HOYMAS hosted two national technical working groups involving young sex worker leaders. The HIV-AIDS technical working group brought together stakeholders including community organisations, the private sector and the Ministry of Health. The meaningful involvement of young sex workers in technical working groups enabled them to advocate for the repealing of criminalising policies and legal frameworks. In addition, two young sex workers were subcontracted by the African Sex Workers Alliance as faculty members to build the capacity of other young people on advocacy, movement building and sustainability.

In Kenya, young sex workers lag substantially behind in representation in leadership positions and key decision-making platforms. HOYMAS and KESWA provided leadership training in November 2020 for 25 young sex workers from Nairobi and Nyeri Counties to address this situation. Twelve young sex workers have taken leadership roles in the project as peer educators, while three have been engaged as online peer recruiters. The latter have played a key role in linking 421 young sex workers to HIV and SRHR services.

Young sex workers started to organise themselves in sex worker networks in their counties. For instance, young sex worker-led groups such as Young Heroes, Young Generation, Young Angels and the Network of Key Populations Affected by HIV (NEKEPAH) emerged in 2020 and 2021. One of the participants from the leadership training took a leadership role by forming NEKEPAH. HOYMAS and KESWA played a key role in building the capacity of these groups by hosting and supporting them to apply for grants from various development partners. Young leaders from these emerging networks have been trained on communication for advocacy to enhance their skills.

**4. HOYMAS’ AND KESWA’S CONTRIBUTION TO THE CHANGE**

HOYMAS and KESWA sponsored 20 young sex workers to participate in a virtual exchange visit on best practices with Vietnam, South Africa, and Ukraine. The programmes trained and sensitised 95 health care workers from public health facilities in Nairobi on HIV. The change in attitude from these health care workers has reduced barriers to access to SRHR services among young sex workers. HOYMAS and KESWA also provided training and sensitisation meetings for law enforcers to reduce violence and enhance access to justice for young sex workers who experience violence. The Police AIDS Control Unit was involved in planning and played an important role, i.e., ensuring the right police officers participated in the sensitisation forums. HOYMAS and KESWA gave the police donations of a desk to report gender-based violence, condom dispensers, and prevention commodities. The sensitisation strategy with law enforcement personnel was based on the hypothesis that improving knowledge and attitudes among law enforcers encourages young sex workers to report violence. The police have been equipped with the necessary skills to handle sensitive human rights violations. HOYMAS and KESWA can generate sufficient data on human rights violations among YSW to inform change in criminalising policies and legal frameworks.

HOYMAS and KESWA provided leadership training with young sex workers to enhance their programme management, accountability, change management, influencing and negotiation, teamwork, and advocacy skills. During the training, young sex workers with great leadership potential started to

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\(^3\) Lighthouse is a community-based organisation in Vietnam for and with LGBT people.
emerge. These leaders were able to speak openly about living with HIV and started to demand services tailored to their needs. One of the participants from the training has been vocal in advocating for the rights of young sex workers with local media stations such as K24 TV, DW radio, Ukweli TV and Radio Jambo.

“As a result, we have seen growth in their [young sex workers] involvement in SRHR advocacy, participating fully in raising their voices in key population technical working groups, which take place every quarter. We have people volunteering to be part of these platforms. We give them technical and financial support to be able to input in policies that have always been mainly focused on older sex workers.”

– Programme Coordinator at KESWA

All these activities were informed by the CBPR that concluded in September 2020 (delayed due to COVID-19 restrictions). The research findings identified barriers to young sex workers accessing SRHR and HIV services and informed appropriate interventions. Taking recommendations from the research on board – such as the microplanning approach, a process that decentralises outreach management and planning to grassroots-level workers – was indispensable to redesigning the outreach strategy. For example, oral HIV self-test kits, flavoured condoms, and lubricants were delivered to YSW who could not access the clinic at their preferred locations. 408 YSW benefitted from this intervention.

5. ANALYSIS

The project highlighted the critical importance of leadership and capacity building for young key population leaders in supporting movement building and rights-based advocacy. Young sex worker-led groups have also emerged to challenge policies that discourage YSW from accessing sexual and reproductive health and rights and services. KESWA has engaged other partners in advocating for the full implementation of the National Guidelines for young key populations in Kenya. Technical working groups provided a platform for YSW to interact with other stakeholders, demand change, share issues and solutions. Young, Wild and... Free? proved that it is possible to enable young key populations to mobilise for their rights with modest support and capacity building. Nurturing latent leadership potential is vital to building movements and inclusive networks.

The increase in the visibility of young sex workers because of the leadership training has built their capacity to demand services that meet their needs and an enabling legal, social and policy environment. This remarkable change paves ways for young sex workers to articulate their issues and design mitigating mechanisms to the barriers they face in accessing HIV and SRHR services.
Learning from other organisations through study visits and exchanges assisted rapid scale-up and helped the partners to identify and implement quick wins, such as setting up youth-friendly spaces. Education programmes introduced at the drop-in centre had a major impact on the number of YSW who visited the centre and clinic. The average number of YSW visiting the clinic increased from five to ten each day.

Digital platforms were effective ways of creating awareness of services offered at the clinic and drop-in centre. Apps such as Facebook, WhatsApp, TikTok, Twitter and Grindr encouraged young sex workers to use sexual and reproductive health and rights services. However, online bullying has been a major problem faced by our online peer mobilisers.

YWF research highlighted the need to reach sex workers who are minors. However, reaching this group with services has been challenging since the Kenyan legal framework bars community organisations from reaching them.

The YWF project generated evidence from the CBPR and three Upinion surveys enabling the partners to identify barriers to mental health, legal literacy awareness and SRHR among YSW. The use of microplanning enabled plans to be locally appropriate, agile and responsive. The project did not simply rely on baseline data from the CBPR and surveys but adjusted as new information emerged through the project’s life cycle.

Working with the government and public health sector to improve services and enhance access to youth-friendly services in public health facilities was vital to the success of the YWF project.

To address stigma and discrimination in government-provided healthcare settings, partners had to work with health care workers to change their perception of YSW. This has strengthened our referral and linkage system. However, some sensitised health care workers haven’t changed their attitudes and need to be engaged with continuously.

Reduced stigma and discrimination and increased respect and protection of young sex workers’ rights among policymakers and stakeholders are key to attaining social inclusion. In the long run, this strengthens and enhances their advocacy to obtain sexual and reproductive health rights. Being meaningfully involved with the National AIDS Control Council also provides a platform to change punitive policies that act as barriers to accessing SRHR services among young sex workers.

6. LOOKING AHEAD: LESSONS LEARNED AND RECOMMENDATIONS

Empowering young sex workers is an essential component of service provision. They should be meaningfully engaged in planning, designing, implementing, and evaluating services and research. Creating an enabling environment for them to access services leads to increased uptake of HIV and SRHR services. Furthermore, evidence from YWF research suggests that an effective intervention package for young sex workers must address their vulnerability and risk in equal measure and address the circumstances that compel them to take such risks. The strategies for young sex workers should be rights-based, evidence-informed and tailor-made to suit their needs.

Young sex workers should be empowered in leadership and ownership by encouraging them to form networks and become members of community-led groups. YSW are underrepresented in key decision-making platforms, and networks are key in challenging criminalising policy and legal frameworks. Information and education about sexuality, the risks of unsafe sexual behaviours, and prevention strategies and services should be provided through digital innovations to maximise the reach to YSW.

HOYMAS and KESWA realise the importance of involving young people in capacity building, leadership roles, engagement with key stakeholders and other key decision-makers. As a result, they will continue using similar strategies in addressing uptake of and access to HIV and SRHR services for young sex workers in Kenya.

With the Undetectable=Untransmittable campaign HOYMAS’ online peer counselling aims to enhance acceptance about people living with HIV in society to reduce stigma and discrimination.