

Sex workers self-organizing and empowerment

The experience of Women's Network for Unity (WNU) in Cambodia

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Condoms changing hands at a provincial monitoring and outreach meeting

The majority of sex workers in Cambodia are female and they are among the country's most marginalized groups. The oppression they face as women is exacerbated by the stigmatization associated with their work. Many sex workers lack access to education, adequate health care, skills training, and decent living conditions. The Women's Network for Unity (WNU) is the first independently registered sex workers' collective in Cambodia. It has over 5000 members including sexual minorities such as gay, lesbian and transgender people, who also engage in sex work. The network strives to create safe, health-conscious, women-centred spaces in which sex workers can work in solidarity for their mutual protection and empowerment to fight HIV and AIDS, violence and discrimination. The Women's Network for Unity's conviction is that sex workers can only exercise their rights when they are empowered and their voices are heard.

The network started in 2000 as an informal group of sex workers who were encouraged by Oxfam Hong Kong and Family Health International in Cambodia to establish a union. From the beginning, the idea was to cultivate, nurture and facilitate a process whereby a group of leaders would emerge to take on the role of establishing and managing their own organization. In 2002, WNU became an independent network. Seven board members were elected in the first election to represent the membership for a period of two years. Then, WNU was not recognized by a number of local NGOs who were working on sex workers'

empowerment. They claimed that sex workers were not strong or capable enough of working on their own. In 2003, a policy came into effect which prohibited sex workers to benefit from USAID funds. Therefore, all the NGOs that received funding from the US government were obligated to sign contracts/agreements declaring that their activities did not involve supporting prostitution and sex trafficking.¹ As a result, the then newly formed WNU was deserted by several NGOs that received US funding.

Since its inception, the Womyn's Agenda for Change (WAC) has been working on women's empowerment with a focus on sex worker empowerment and was behind the evolution of the WNU. Initially WAC's work on sex worker empowerment was funded by USAID through Family Health International. However, when the donor policy changed, WAC refused to change its mission and philosophy of empowering sex workers. After consulting with the WNU Board, WAC rejected the funding from

USAID and continues to work and support the WNU.

Until now the sex workers who have enlisted with WNU believe that they were used by NGOs as pawns to attract funding. This confirmed their view that NGOs, like the general public, believed that sex workers are vectors of disease, had no rights and therefore needed to be eliminated. Furthermore, it was clear that the only people that could represent sex workers adequately were sex workers themselves because NGOs proved to be unreliable and changed their approaches according to donor demands.

Judgements and violence

WNU was formally registered with the Ministry of Interior in 2004. The formation of sex worker collectives is legal under Cambodian law, mandated by Cambodia's constitutional commitment to the advancement of women's rights. However, sex workers are judged by society as 'bad girls', and they are widely believed to be responsible for the deterioration of society's morality. They are also seen as responsible for HIV infections. In their daily life, sex workers face violence and rape, particularly gang rape by clients and gangsters. They are also subjected to violence from the police and the local authorities who extort money from them. This is worsened by the fact that they lack access to social services such as education, health care and access to antiretroviral therapy (ART).

In this context, WNU's work is crucial. The network frequently engages the police and



On the back of the WNU member card, information can be found on STIs and HIV/AIDS, access to medical services, condom use, saving money and rights

local authorities to make them understand the difficult situation of sex workers and ensure protection of their rights. It has outreach programmes run by team leaders in target areas in seven regions around Phnom Penh and also in 13 provinces. Team leaders educate members about HIV and AIDS, health, human rights and access to health services. Through this programme, WNU negotiated with several state hospitals and some NGOs operating clinics in Phnom Penh to enable sex workers to receive free health care and ART, including free food when hospitalized. The WNU has issued its members with cards, both in Phnom Penh and in the provinces, to help them access the services. The card acts as a 'welfare entitlement' to accessing health services from the state hospitals collaborating with WNU.

With support from WAC (funded by Oxfam Novib), WNU has secured its own funding. In

addition to WAC's contribution, it receives funds from the Tides Foundation, the American Jewish World Service (AJWS) and ActionAid International. The WNU has expanded its activities to include providing non-formal education for the children of sex workers. These children are faced with social discrimination and stigmatization: they are excluded from the school system because their parents are too poor to pay for their education. This non-formal education programme provides about 125 children with English, literacy and numeracy classes. It also includes break-dancing lessons to build their self-esteem. Eventually the children will be prepared to integrate into the public school system. So far, WNU has helped some 50 children to enrol in public schools.

The network also opened two drop-in centres at Svay Park and Beoung Salang areas in Phnom Penh, through the ActionAid-funded programme on



A victim of violence consults WNU staff

Vietnamese sex worker empowerment, to provide space for Vietnamese as well as Cambodian sex workers to organize and help each other to access information regarding trafficking and human rights violations and to also assist them in accessing health care and treatment.

Exercising leadership

The WNU is a unique example of a grassroots organization created by sex workers to achieve their aims. Their strong solidarity and mutual support for each other has proven that people power is effective in overcoming problems. Their victory against forces such as respectable universities, powerful organizations, drug companies and large donors is an example of the power that social groups can exercise when united in advocating for their rights. An example of this power was manifested when WNU managed to halt a drug trial in 2004, which it claimed was unethical (see the Box). Tenofovir is an antiretroviral drug used to treat people infected with HIV. The trial in Cambodia and other countries aimed to assess whether the drug could also prevent new infections. The network members demanded insurance against possible side-effects of Tenofovir for 30 or more years and not just health care for the duration of the trial. They also claimed the researchers failed to disclose the details of the trial protocol to the participants, which violates their right to be fully informed about the risks.

WNU has extended its work to not only covering the needs of sex workers but also assisting other people in the community, such as garment factory workers, students and poor women. The network helps them

The Tenofovir trial

Early 2004, sex workers held two press conferences in Phnom Penh at which the Women's Network for Unity in Cambodia expressed its opposition to an experiment which was recruiting young and healthy female sex workers who were HIV negative to test Tenofovir – an antiretroviral drug. The aim of the trial was to find out if it was safe to use the drug in HIV-negative women and whether it reduced HIV infection. The trial was conducted by researchers from the University of California, San Francisco and Australia's University of New South Wales and was funded by the Bill and Melinda Gates Foundation and the American National Institute of Health. The researchers aimed to recruit 960 Cambodian sex workers who were HIV negative to take the pill once a day for one year in exchange for free medical check-ups, counselling, condoms and \$3 per month.

Even though a number of NGOs tried to persuade sex workers to participate in the trial, WNU opposed to it because they felt the trial wanted to use sex workers in a poor country for experimentation without life insurance and they knew the drug had only been tested on healthy monkeys – never on healthy human beings. Side-effects of the drug when given as an HIV and AIDS treatment are diarrhoea, nausea, liver and kidney failure, among others. Network members wanted insurance against possible side-effects of Tenofovir for 30 or more years and not just health care for the duration of the trial. They believed that all sex workers who participated in the trial had the right to ask questions and be fully informed about the risks; they said that the researchers had not even disclosed the details of the protocol of the proposed trial. They also believed that sex workers had the right to demand better medical and financial protection: *"Poor sex workers in Cambodia were expected to take the risk of taking Tenofovir, withstand the side-effects and sacrifice health and income for \$3 per month and no longer-term guarantees"*.

Key messages by WNU to halt the drug trial were: *"We are human beings, not animals"*, *"Thirty-six dollars per year cannot buy Cambodian sex workers"*, and *"Why should people ask us to think about humanity when humanity has long forgotten us"*. On August 11, 2004, the Cambodian government ordered the researchers not to proceed with the trial. Following protests by sex worker organizations, trials were halted in several countries including Cameroon.

Resources

HIV prevention for sex workers



Sex work and HIV/AIDS in Asia MAP Report 2005
Monitoring the AIDS Pandemic (MAP), 2005 (32 p.)

The purpose of this booklet is to summarize what researchers have learned about the epidemiology of HIV/AIDS within Asian commercial sex networks and to discuss the programmatic implications of those findings.

PDF: <http://www.mapnetwork.org/reports.shtml>

UNAIDS Guidance Note HIV and Sex Work

UNAIDS, 2007 (11 p.)

This Guidance Note has been developed to provide a unified approach by the UNAIDS cosponsoring agencies to the reduction of HIV vulnerabilities in the context of sex work. The approach rests on three pillars and associated actions to provide a comprehensive, rights-based, evidence-informed response to HIV and sex work. The pillars are: 1) reducing vulnerabilities and addressing structural issues; 2) reducing risk to HIV infection, and 3) building supportive environments and expanding choices.

PDF: <http://www.aids.md/files/library/2007/1144/unaids-guidance-note-hiv-sex-work-apr-2007.pdf>

Toolkit for targeted HIV/AIDS prevention and care in sex work settings

World Health Organization, 2004/2005

The WHO toolkit was developed to make both published and unpublished information more accessible to a wider audience, and so to contribute to global efforts to develop and scale up effective HIV interventions in sex work settings. The toolkit is intended as a resource to guide the development and implementation of effective HIV interventions in diverse sex work settings. It outlines key steps and issues and provides links to many documents, manuals, reports, and research studies containing more detailed and in-depth information. It is available as a database as well as a publication.

Online: <http://who.arvkit.net/sw/en/index.jsp>

PDF: <http://whqlibdoc.who.int/publications/2005/9241592966.pdf>

Some websites:

Eldis dossier on sex work: <http://www.eldis.org/gender/dossiers/sexworkers.htm>

Avert page on sex work: <http://www.avert.org/sex-workers.htm>

Network of Sex Work Projects: <http://www.nswp.org>

access health care, encourages them to do blood testing, and refers them to legal organizations that assist victims of violence. WNU has gained support from local authorities and community members leading to its recognition as a network that can also help the children of its members. This has resulted in less discrimination against sex workers. Keo Tha, a board member of WNU said: *"I recognize that I have changed from the time that I could not even talk to and confront people who said I was a 'bloody sex worker'. Now I can deal with them through my daily activities for the WNU, for instance, I can talk to public hospital staff to help sex workers get access to health care."* Eth Hor, a sex worker at Svay Park said: *"I am very poor and unable to send my child to school. Now I am very happy and thank WNU for helping my child participate in the non-formal education programme. I wish the programme would be extended."*

Members of the network can play a big role in the reduction of HIV and AIDS prevalence among sex workers in Cambodia because they have the power and they are able to negotiate with clients for condom use as well as lobbying for access to health care as a human right. Neither sex workers nor their children are thought of or valued by society. But WNU and its members have proved that they are able to bring changes and convince society that 'bad girls' can take leadership in improving their lives. ■

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1. In 2003, the United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act was published, which formed the basis for PEPFAR (The President's Emergency Plan for AIDS Relief). One of the provisions in this 'Leadership' Act is that, "No funds made available to carry out this Act, or any amendment made by this Act, may be used to provide assistance to any group or organization that does not have a policy explicitly opposing prostitution and sex trafficking."