

Working with brothel owners to promote HIV prevention: challenges and future directions

Janet Gruber von Kerenshazy



Photo: Chris Wigginton

The number of people working in the sex trade worldwide is not known, but they probably number in the tens of millions – and their clients in the hundreds of millions. The majority of sex workers are women and girls whereas most clients are men. There are high HIV prevalence rates among sex workers in Asia, the Caribbean and Latin America, Eastern Europe and sub-Saharan Africa.¹ Factors that contribute to their vulnerability to infection include youthfulness coupled with inexperience, which is a barrier to effective negotiation for safer sex, sexual violence, limited education, and (injecting) drug use. There are indications that a significant proportion of HIV-positive female sex workers have been infected by boyfriends, some of whom are their pimps, and with whom they practice unsafe sex.

According to UNAIDS' 2006 report on the global AIDS epidemic, the environment in which sex work is conducted assists the spread of HIV: "Sex workers operate in a variety of different environments, ranging from highly organized brothels and massage parlours to the street, markets and vehicles or cinemas, bars, hotels and homes. Each location carries its own degree of risk and vulnerability in terms of

stigma, discrimination or the potential for violence, as well as the obvious danger of HIV infection".¹

Working with brothel owners

Effective work to minimize risk behaviour and reduce sex workers' and clients' vulnerability to HIV infection is critically important.² While access to all categories of sex workers is challenging, those most easily reached with health information and services work in brothels, provided that brothel managers and/or owners permit access. It is essential to convince brothel owners and managers about the value of HIV prevention activities. While many brothel-based sex workers are neither trafficked nor entirely under the control of brothel managers, a high proportion of them have little autonomy in terms of human, sexual and reproductive health rights.

Research in Cambodia linked to the 100% Condom Use Programme provides a stark example of how many brothel owners view sex workers. To them, sex workers are disposable and this perception paves the

way for high levels of sexual violence and extreme human rights abuses by the police.³ The fact that brothel owners and managers may have considerable control over sex workers implies that the barriers to access can be insurmountable: after all, why should brothel owners be interested in protecting sex workers when there is a ready supply of impoverished or bonded girls and women? What is in it for them, when 'their' sex workers may well be seen as replaceable commodities? Why should brothel owners allow the spotlight to shine on what is usually an illegal and hidden industry? And why should political, law and order structures support such interventions, when police and other powerful people are often involved in the abuse of sex workers' rights?

Yet some interventions have worked with brothel owners, and some have even challenged their influence. The Sonagachi Project in the Indian city of Kolkata is probably the best known and is credited with empowering sex workers. UNAIDS cites Sonagachi as a 'best practice' intervention. Initiated in 1992 by the All India Institute of Hygiene and Public Health, the project has been run by a sex worker-led organization, the Durbar Mahila Samanwaya Committee (or 'Durbar'), since 1999. It has benefited more than 65,000 sex workers. Sonagachi sex workers currently manage a co-operative finance scheme, provide skills training, conduct sustained social marketing of condoms and seek to limit trafficking of girls and women.

More information

- Durbar Mahila Samanwaya Committee's STD/HIV Intervention Programme ('The Sonagachi Project'): <http://www.durbar.org> and <http://www.comminit.com/experiences/pds12004/experiences-466.html>
- 100% condom use programmes: http://www.wpro.who.int/health_topics/condom_use/general_info.htm and <http://www.nswp.org/safety/100percent.html>
- The Dominican Republic 100% condom use programme: http://www.popcouncil.org/horizons/projects/DR_CondomPolicy.htm

The number of ‘madams’ and pimps in Sonagachi’s catchment area is declining steadily, with many sex workers moving into hotels or sex worker-managed co-operatives, in search of independence. Such self-determination would have been impossible without more than ten years of external support and funding, which developed sex workers’ knowledge, independence and abilities to challenge powerful structures of control and abuse. As a result, sex workers have greater opportunity to determine their lives now.

Since the 1990s, several countries have implemented a 100% Condom Use Programme (CUP), following Thailand, which developed its CUP in 1989. The Cambodian programme, which began in 1999, achieved some success with a minority of brothel owners on whom

Sex worker participation in programme design and implementation should be actively promoted as an integral element, as should opportunities to challenge and re-shape interventions

authorities placed responsibility for condom access and use. Although the 100% CUPs are criticized by sex workers’ organizations for not sufficiently safeguarding their rights, the policy is officially endorsed by the WHO. On a smaller scale, successes in a community-based approach in Puerto Plata in the Dominican Republic were attributable to a 100% condom use policy linked to brothel owner compliance, anti-corruption measures and the participation of sex workers as trainers of health staff.

Successful interventions

Lessons learned from Sonagachi and elsewhere indicate that the following approaches are important in working with brothel owners. It is important to note that no single programme has achieved overall progress.

Effective engagement with brothel owners and other gatekeepers to allow sex workers’ participation and safer sex practices is

essential. If such approaches are resisted, concerted efforts should be made to neutralize brothel owners’ power base and connections. Interventions need to promote collective initiatives that open up opportunities for dialogue and action with influential people on sex workers’ rights. This should go hand in hand with the promotion of political commitment at all levels, which should be devoid of corruption and abuse.

Further, sex worker participation in programme design and implementation should be actively promoted as an integral element, as should opportunities to challenge and re-shape interventions. A failure to enable sex workers to shape and also evaluate activities has profound rights and equity implications: their absence as active partners may jeopardise sustainability. Sex workers should be enabled to see the benefits of becoming ‘safer sex practitioners’. In this context, solidarity among sex workers must be facilitated to empower them to insist on safer sex.

There is a need for effective promotion of HIV prevention through, for instance, behaviour change communication, rights and negotiation skills training, in collaboration with brothel owners. Such behaviour change initiatives require high quality, non-judgemental support from public health services so that sex workers can gain the confidence to utilize such services.

The following issues present areas for further attention:

- More attention is needed to establish which approach between threats and persuasion works best with brothel owners and other powerful people. It is also important to consider means of sustaining brothel owners’ support once funding ends.
- There needs to be greater attention to policy reform and social change that address sex work through rights-based approaches, e.g., through exploration of legalization, decriminalization or licensing of brothels.

- Deeper understanding of the social dynamics of sex work, especially why people enter the trade, is necessary. One goal must be to support exit from sex work for those who want to leave, the other being to support those who decide to remain in the trade, or have no other choice, to do so safely and with rights.
- While focus on brothel-based safer sex practices is essential, so too is increased support to how best enable sex workers to negotiate similar practices with their boyfriends and frequent clients.
- Engagement with communities to promote understanding and greater acceptance of sex workers and to work towards reduced stigmatization is another area that has so far received relatively less consideration.

Finally, there is a need to expand and embed data management and documentation in projects working with sex workers because many sex worker interventions lack credible evidence on lessons learned. The Sonagachi Project has probably experienced the closest scrutiny, however, in many programmes, monitoring and evaluation are limited or lacking. Interventions cannot be evaluated properly if data are absent and as a result, sustainability and future funding may be threatened. ■

Janet Gruber von Kerenshazy

Independent Consultant
Cambridge, United Kingdom

Correspondence:
E-mail: janetgvonk@hotmail.com

1. *2006 Report on the global AIDS epidemic*. UNAIDS, 2006: http://www.unaids.org/en/HIV_data/2006GlobalReport/default.asp
2. Risk refers to a person’s knowing or unknowing activity that increases the possibility of infection, e.g. unprotected sex, while vulnerability denotes a person’s relative ability to have control over risk factors, e.g. sex workers able or unable to negotiate condom use.
3. C. Jenkins, 2006: *Violence and exposure to HIV among sex workers in Phnom Penh, Cambodia*. The POLICY Project: <http://www.alternatevisions.org/publications/Cambodiarapereport.pdf>