

SUMMARY

A BEHAVIOURAL MAPPING STUDY FEMALE COMMERCIAL SEX WORKERS IN LAHORE, MULTAN AND KARACHI

BACKGROUND:

- Pakistan although is a low prevalence in terms of HIV/AIDS, the sex industry in Pakistan is changing rapidly and becoming increasingly complicated with highly differentiated sub sectors.
- The most authoritative studies available from Asia suggest that sex market is vast and the Pakistan market seems to be increasingly contributing to the markets in Middle East, Asia as well as to the demands from London, all under the cover of dancing and singing troupes.
- Commercial sex work in Pakistan is illegal according to the Haddood Ordinance but mostly going on under the cover of performing art. Because of its being illegal the whole community of female sex workers are being subjected to exploitation by police, pimps and community leaders, therefore, these groups are need to be involved as target audience.
- There has been no effort to get an estimate for total CSWs in Pakistan and number, nature and risk behaviours of scale of street-based sex workers operating in major cities of Pakistan.

OBJECTIVES:

- To MAP the scale and HIV Risk Behaviours of brothel and street based sex workers in Lahore, Karachi and Multan.
- To identify needs of CSWs and options for the organization of procurement packages while designing HIV/AIDS interventions in these cities.
- To understand the female sex workers awareness and knowledge about HIV/AIDS, their sexual practices and demand for various risk taking sexual behaviour by their clients.
- To understand the power dynamics between FSWs and their clients as well as the behavioural factors which could make them vulnerable to as well as risk behaviours of HIV/AIDS transmission to STI's and HIV infections.

METHODOLOGY:

- The study was an exploratory study which used four months to estimate the scale of sex work in the three cities.
- The design of the study was developed through the consultative process with the consultants from the Technical Alliance for Social Change (TASC), and its field research team members as well as representatives of collaborating NGOs, male and female CSWs from Heera Mandi Lahore, Haram Gate Multan and Nappier Road Karachi.
- Ethnographic methods of participant observation and walk through surveys were done to identify and estimate numbers as well as organization of street and residence based sex work.
- Thirty-four in-depth interviews (IDIs) were conducted with FSWs from brothels, those operating through streets and residences, 54 IDIs with key informants and 12 with healthcare providers in the brothel areas. Besides, six FGDs were also conducted with FSWs and Naikas.
- On completion of data collection, a one-week workshop was arranged to train the participants in data collation so that they have made meaningful segments of the data by learning to look for themes and patterns in the data.

FINDINGS:

Findings are divided into two parts. Part one gives detailed information on the structure, size, clientele and operational networks of the female sex workers in different settings, while part two deals with environmental and contextual factors which can increase FSWs vulnerability to HIV/STIs.

Part One

- The number of FSWs is reducing in the traditional brothel settings and is increasing in both the street and residential settings. Whereas hotels, parlors, road sites, chowks and chowk crossings, markets and road sides near residential areas, followed by parks, railway stations, mazaar's, bus stands and hospitals parking are also emerging as a major access venue for both FSWs and clients in all the three cities.
- With decreasing brothels and ban on dancing and singing is one of the reasons for a broader networking and commercialization of sex work in civil society.
- Estimated number of CSWs in brothels, kothi's and streets of three cities are 99,200, which could be higher or lower.
- There are connections between the Brothels and kothi's, which are mostly an outgrowth from the brothels. However the street-based FSWs are mostly women coming from the main strata of the society, with no links to the brothel network. It was only observed in Karachi that FSWs working on the streets have also linked with managers of Kothi's.
- Karachi has the largest number of street access points identified (420), followed by Lahore (54) and Multan (38). Visibility and number of FSWs standing at one access point varied in the three cities.
- FSWs were between the ages of 13-45 years. Majority were reported and observed being between 15-25 years. Younger FSWs were observed on street sites in Karachi. Most of the clients observed were in the ranges of 15-20, 21-30 and 36-40 years.
- Two categories of work hours amongst street-based FSWs have emerged. Part time workers those who working for a limited hours. Full time workers as being available all day and night. Fee for part time or one time sexual services offered are lower in Multan (50-600) as compared to Lahore (500-1000) and Karachi (50-5000).
- There is a wide range of income variation amongst the various economic categories of FSWs based on the social status of FSW, the choice and liking preferences of clients they are catering to, age, virginity and beauty. Charges also vary with the type of sexual services and the type of place for provision of sexual services.
- Wide range of clients is accessing FSWs including businessmen, government officials, police, doctors, lawyers, labourers and students. However FSWs from brothels mentioned that men with black and illegal money also visited them.

Part Two

- Addiction, trafficking, forced commercial sex work and demand for unsafe sexual practices is putting the FSWs in Pakistan at greater risk to contact HIV/STI infections.
- Condom used is higher in streets, followed by brothels and kothi's. The comparison between three cities highlights the maximum condom use in Karachi followed by Multan and Lahore. Although majority of clients are aware of infection transmission and its prevention through condoms, a significant proportion is using condom as a contraceptive measure.
- Clients for the sake of enjoyment and sex workers to retain their clientele avoid condom use. A category of CSWs who does not use condom by choice also reported pain during sex act if condom is used. Irregular condom use made them vulnerable to HIV/AIDS and STIs.

- Other factors that increase FSWs vulnerability to HIV/AIDS and STIs include non-use of condom with the “kharcha provider”, multicplicity of partners, artificially prolonged duration of sexual act, sex work in Pakistan as well as abroad while performing stage shows, high demand for oral and anal sex, violence, exploitation and harassment by police, clients, brothel and kothi managers, addiction, gang rape and no concept or understanding of safe sex.
- Major STIs reported by FSWs were leucorrhoea, itching/purities, AIDS, lower abdominal pain, excessive bleeding gonorrhoea, syphilis and burning maturation.
- Awareness and knowledge of HIV/AIDS was high, but very few of the FSWs could define what was meant by safe sex practices, and what type of sex acts could make them more vulnerable to HIV/STIs.
- AIDS cases have started appearing amongst FSWs and their clients. The AIDS victims are either deported through police and community pressure to other areas or are isolated within the communities they live.
- High rates of addiction especially of alcohol drinking followed by cigarette smoking, charas, and cigarette smoking with or without charas, bhang, tablets, guthka, heroin and afyoon.
- There are hardly any ongoing sustained programme interventions for provision of any type of preventive or promotive or curative services even within the brothel areas.

RECOMMENDATIONS:

- Community building and organization of FSWs in the three cities for safe sex promotion and HIV/STI IEC Programmes.
- Making sex safe, educational strategies should be adopted for both sex workers and clients.
- Development of a sexual health services package for FSWs and other vulnerable groups.
- Interventions with police and other stakeholders to initiate safe sex and anti violence activities.
- Advocacy and mobilization of issues linked with commercial sex work to develop policy frame works for trafficking and forced commercial sex and issues related to STD/HIV policies.
- Networking and capacity building of NGOs, government and private sector to work with vulnerable populations and the community of sex workers on STDs/HIV interventions.

 ***For complete report contact to NACP***