

Presentation ELENA REYNAGA

## Sex Work and Human Rights

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Good morning everyone. This is the first time a plenary session at one of the International AIDS Conferences is dedicated to sex work, so we'd like to start by saying that this is a great achievement for us! This is a true reflection of the capacity of sex worker organisations to build a solid response to HIV/AIDS.

I am going to present *some* data today, but this is not going to be a scientific presentation. Instead, I am going to talk about *who* I am, and *where* I come from. I am a female sex worker, and 14 years ago, I began to defend my rights – only by organising ourselves and defending our rights can sex workers begin to build effective responses to HIV/AIDS.

Before I start talking about what I mean by 'effective responses', I'm going to show you some data of HIV prevalence rates among sex workers across the world. Unfortunately not all countries have data on sex work and HIV.

As you can see, the data originates from UNAIDS reports from 2001, 2003 or 2005. It is not the most precise of images – but it is the best information we have on HIV among female sex workers.

What *is* clear is the important relationship between sex workers' human rights, poverty and HIV prevalence.

Let's look at an example. In Kolkata, India, there is a strong movement of sex workers – together they are known as the '**Sonagachi Project**'. Sonagachi is the city's largest red-light district. In 1992, only 1.1% of sex workers used condoms. By 1998 this had gone up to 90%. What did the organisation do to achieve such incredible results? They fought for their health by advocating for sex work to be recognised as legitimate work and by defending sex workers' human rights. HIV prevalence rates among sex workers in Sonagachi have now plateaued at 5.17%, while in other cities across India, such as Mumbai, HIV prevalence rates reach up to 54%.

**To reduce our exposure to HIV, we need to ensure the rights of all sex workers: female, male and trans are respected.** All too often, not only are our rights and access to health care denied but our very existence is denied as well.

But, we are still here and we've had some great achievements along the way:

- In some countries, we've successfully reduced HIV prevalence rates among sex workers
- In some places, we've successfully overturned legislation that penalised us.
- We've held an International Consultation Meeting on Sex Work
- We've also held a Latin American and Caribbean Regional Consultation Meeting on Sex Work.

- We are now in the process of organising National Consultation Meetings on Sex Work in every country in Latin America.
- We have been invited to participate in United Nations meetings on various occasions.
- In some countries, we have a seat on the Global Fund's, Country Coordinating Mechanism (CCM)
- We participated in the United Nations debate to define the criteria for the UNAIDS's Guidance Note on HIV and Sex Work, originally drafted using stigmatising language and definitions – we proposed alternatives.
- AND, being here today is a big achievement. We've been invited because of the real and concrete changes we have made to the HIV/AIDS response.

How can it be that we've achieved all this, and yet we still haven't convinced you that **it's not just about giving out condoms?** The HIV/AIDS response **needs** to include all areas of government.

**Sex workers themselves aren't vulnerable to HIV. What makes us vulnerable are the policies that repress us in so many different ways.**

A perfect example of this is happening in Cambodia right now. Anti-prostitution policies have been approved under great pressure from the US – and now, as a result, sex workers are being arrested under the pretense that they are victims of sexual slavery and trafficking. In order to 'protect' them, they are imprisoned in rehabilitation centers where they are raped by law enforcement officers and can only escape by paying off large bribes. In Bolivia this year, violent raids and the public "lynching" of sex workers, drove our fellow sex workers to sew their lips together in protest.

The **double stigma** against HIV and sex work, in many contexts is used to justify police repression. In Zambia, sex workers, are publicly whipped and beaten by the police while being yelled at that they are: 'bitches who are killing the nation' and 'rat poison'.

Violence perpetrated by the police and other law enforcement officers is a direct risk of HIV transmission for female, trans and male sex workers.

Between February and April 2007 in the Democratic Republic of Congo, ALCIS documented 29 cases of sexual violence against female sex workers by police or military, including rape, kidnapping and torture. Following these attacks, a number of women tested positive for HIV.

**State violence, is a direct consequence of the lack of recognition of sex work as work.**

The lack of legal protection not only allows, but also, **fuels** violence toward sex workers. There isn't a consolidated international database of the number of sex workers that have been murdered, but using reports from our 13 member organisations, the Latin America and Caribbean Sex Worker Network has recorded **the murders of 34 sex workers in the last ten months alone in Latin America.** 100% of those crimes remain unpunished.

**At times, our rights are violated by health services** - such as when we are **forced to take an HIV test and our results are not confidential.** In almost every country in Latin America and the Caribbean we are forced to carry a sanitary control card with the results of our HIV and STI tests stamped on it.

In Ecuador, we've recently obtained the right to a new type of card – one that guarantees access to integral healthcare services. All women seeking healthcare carry the same card.

Test results are not stamped on the card, and confidentiality *is* respected. We achieved this because a sex worker organisation sat down and debated the relevant legislation directly with the government.

**But there are also other ways of subjecting sex workers to violence:** - such as when we are used as research subjects and yet never get access to the results. Such information is crucial to us to be able to propose evidence-based public policies.

And let's not forget the role of many states, often the first to discriminate against us by **rejecting the legal registration of sex worker organisations.** This is true across the world – and they always use the same argument: ‘a sex worker organisation does not contribute to the greater good’.

What do you think? Do the achievements that we've talked about today not contribute to the greater good?

And now, how about asking ourselves this: **'Where is the funding for HIV and sex workers?'** Are funds being targeted at these issues?

Unfortunately, the answer is very little.

**And yet, the truth is that there are more funds than ever for HIV.**

**The problem is that they are being poorly distributed.**

**First off, funding is given without an understanding of our real needs.**

In many parts of the world, sex workers can't even access basic commodities such as enough male and female condoms. In parts of Africa and Latin America, **water-based lubricants** are not available. Instead, sex workers use Vaseline or oil which damage condoms.

In some cases we receive funding, but it comes with conditions attached that totally deny our reality.

For example, take the **policy of Abstinence, Be Faithful and Condoms (ABC)** promoted by the United States, a country with a prohibitionist stance on sex work. I ask you now; do you think that sex workers can use ABC as an effective HIV prevention tool? It's an affront to our work ! The only letter that is of any use to us is **C** - the use of condoms in all sexual encounters. And yet, in many countries you will find that the materials that target sex workers use the ABC message.

**If international agencies are really invested in supporting sex workers, then they shouldn't impose their own agenda or their own ideology.**

United Nations' agencies should not develop policies or guides without our meaningful participation. Over the last year, sex workers across the world have had to spend a lot of time making clear to UNAIDS that their draft guidance note on HIV and Sex Work contained highly discriminatory content and was unacceptable.

The emphasis of the draft on stopping prostitution was a major CHANGE from UNAIDS policies from 2002 and 2004 and came about due to strong pressure from conservative governments.

Let me give you two examples: the guide talked about programming to **promote sex workers changing to a ‘decent job’ – as if sex work were less decent than other work.** It also suggested that **people living with HIV could not engage in sex work. Well, based on that criteria, no person living with HIV should have sex. The problem is not sex – it’s NOT USING A CONDOM!**

**We would like to tell UNAIDS, that if they continue in this direction, many sex workers will die due to a lack of rights-based HIV services due to the prejudices of a powerful few.**

**In short, for funding resources to be employed effectively in the fights against HIV, they must be adapted to the realities of the population that they aim to support.**

When funds are spent on condoms alone without discussing rights – they have little effect in halting HIV transmission. In many countries, police confiscate sex workers’ condoms as evidence of sex work.

Similarly, guaranteeing sex workers’ access to antiretroviral treatment protects our health. Yet in many parts of the world, we suffer treatment interruption when we are arrested and detained for days or months....**Often the only way to avoid prison, is to submit to rape by police**, almost always without condoms, of course.

**Secondly, not enough resources are allocated to the populations most affected by HIV.**

What I mean, and this is backed up by UNAIDS’s **2006 report on the Global AIDS Epidemic**, is that the amount of resources allocated to prevention, treatment and care is not proportional to the rates of HIV prevalence among those populations most exposed to HIV.<sup>[2]</sup>

According to an article published in the journal, Health and Human Rights, only 22.5% of female sex workers in Africa and 35% of female sex workers in Latin America have access to prevention programmes.

Let me give you a concrete example: In 2005, in the Dominican Republic, the HIV prevalence rate was 1.1% among the general adult population. The prevalence rate among female sex workers, however, was 3.6%.<sup>[3]</sup> The Global Fund for AIDS Tuberculosis and Malaria invested US\$48 million in the Dominican Republic – and yet, only US\$20,000 a year has been allocated to the sex worker organisation MODEMU, a community-based group of female sex workers working throughout the country.

Moreover, rarely are funds managed directly by community-based sex worker organisations.

We will accomplish real change in the HIV/AIDS response if we manage to change public policies – and this will only be achieved if sex worker organisations push for change. But to do this, we need to be stronger; we need to have the capacity to participate in decision-making spaces.

**Funds that aren’t allocated to support community-based organisations are funds that are misspent and they will not achieve a sustainable impact in the long term.**

Why do I say this? - Because only community-based organisations of sex workers can define our priorities and our needs in the HIV/AIDS response – because only we know and understand our reality.

Now for an example of poorly invested money. Many international agencies have supported Honduras, and yet there still isn't a strong community-based group of sex workers, despite the small size of the country, despite the poverty, and despite an HIV prevalence rate that reached 9.7% among sex workers in 2005 (one of the highest in Latin America).

Honduras proves that **it is not enough to seek out a few sex workers to carry out prevention work among our peers. We, sex workers, also need to have the right tools so we can sit down with government representatives and discuss the public policies that we need face-to-face.**

**Thirdly, a large part of the money available for HIV/AIDS is spent outsourcing management because many agencies refuse to give funds directly to community-based organisations.**

We often hear from others that as sex workers our discourse doesn't hold credibility. Yes, it's true; most of us didn't get the chance to go to school.

But we were able to advocate for changes in laws that criminalize us...

...and we were able to stand up and face those who wish us to stay ignorant. How could we possibly not manage our own organisations?

It is time we began to be trusted.

**Outsourcing the management of funds is a policy that contradicts the autonomy of sex worker organisations.** It certainly surprises us that so few sex worker organisations receive direct funding; the evidence clearly shows that effective HIV programmes combine strategies of peer outreach, the promotion of sex workers' rights, AND the abolition of laws that repress sex work.

**We are the experts** when it comes to peer outreach. **Orquideas del Mar**, a sex worker organisation in El Salvador reached 2,000 sex workers in the last year - 600 in workshops alone. Ecuador reached 8,763 sex workers in six months and in Argentina we reached 9,000 sex workers across the whole country.

An example of the combination of these three strategies can be seen in the experience of the Brazilian Network of Prostitutes and the organisation **David**. They have managed to inform public policy and collaborate with the government on a health and rights campaign called **"No shame girl, you're a professional!"**. They have also made sure the term 'prostitution' is included among the different categories of 'professions' in the Brazilian Ministry for Work. They even took the fight all the way to parliament where they pushed for a prostitution law that would abolish harassment and discrimination against sex workers.

In other words, the most effective responses have been achieved in places where sex work is actually recognised as 'work' and where, we, sex worker organisations, manage our own funds.

**And yet, our successes may turn against us.**

In Latin America, the Global Fund has decided that they will only allocate funding to those populations most exposed to HIV if the prevalence rate is 5% or more.

That is the big contradiction. What we have gained can be rapidly lost if favourable policies aren't implemented.

So, to wrap up..!

Today, in front of the whole world, we stand and say: **we, sex workers, will no longer hang our heads in shame.**

Some may say, sex work is not decent. We reply, **indecent are the conditions in which we work.**

There is no scientific evidence that so-called "rehabilitation for sex workers" works, nor is there any evidence that it reduces HIV transmission. So, how is it possible that HIV funds are being allotted to such projects?

According to UNAIDS, one in three sex workers does not have access to HIV prevention and treatment services. Female, male and transgender sex workers are dying because of a lack of health services, a lack of condoms, a lack of treatment, a lack of rights – NOT BECAUSE OF A LACK OF SEWING MACHINES!

**We don't want to sew, we don't want to knit, we don't want to cook. We want better work conditions.**

So we demand the following:

- **Abolish all legislation that criminalises sex work**
- **Investigate and condemn violence, abuse and the murder of sex workers.**
- **Oppose red-light districts that force us into ghettos and promoting violence and discrimination.**
- **Abolish mandatory HIV testing. Abolish the sanitary control card among sex workers.**
- **Promote voluntary, free and confidential testing including pre and post-test counselling.**
- **Ensure universal access to prevention, testing, treatment and high-quality care.**
- **Provide access to healthcare among migrant and mobile sex workers.**
- **Provide access to friendly integral healthcare services, without stigma and without discrimination.**
- **Ensure the availability of resources for community-based organisations. No more intermediary organisations.**

**But above and beyond all this, we want sex work to be recognised as 'work'.**

We want to be free to do, free to make mistakes and free to learn.

Free to decide what we, as sex workers, need.

Free from repression – this is the best way to build an effective response to the HIV/AIDS epidemic.

**Sex workers are not the problem; we are part of the solution.**

<sup>[1]</sup> In English "UNAIDS Guidance Note. HIV and Sex Work".

<sup>[2]</sup> World-wide epidemic of AIDS published by UNAIDS in 2006

<sup>[3]</sup> Data taken from the Report on the World-wide Epidemic of AIDS 2006, UNAIDS.