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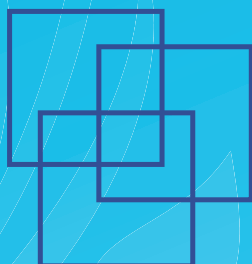


International
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Union Aid Abroad-APHEDA

**Cambodia - addressing HIV vulnerabilities of
indirect sex workers during the financial crisis:
Situation analysis, strategies and entry points for
HIV/AIDS workplace education**

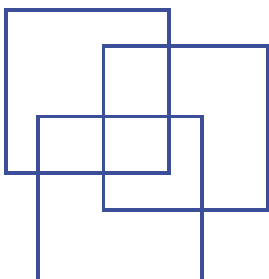


Union Aid Abroad – APHEDA

On behalf of
International Labour Organization (ILO)
DWT for East and South-East Asia and the Pacific



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Union Aid Abroad – APHEDA

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Preface

In 1998, the International Labour Organization (ILO) published *The Sex Sector: The Economic and Social Bases of Prostitution in Southeast Asia* by Lin Lean Lim. It was a groundbreaking publication for the ILO, the first to analyse the underpinnings of sex work and its connections with the national economies of Indonesia, Malaysia, the Philippines and Thailand.

At the time, *The Sex Sector* was hailed for “steer[ing] an intelligent path through the maze of highly charged debates on trafficking and child prostitution,”¹ and was awarded the prestigious publishing prize, the 1998 International Nike Award.

However, the book was not without its controversy. As Lim, herself, recognized, there was – and more than a decade later, there still is – a great debate amongst human rights advocates, feminists, lawmakers and sex workers, regarding whether sex work for adults should be legalized and how it should be regulated. Furthermore, there is debate on whether a sex worker should be protected under labour laws and provided with health protection, just like any other worker.

In many ways, *The Sex Sector* is a compass for this current publication on indirect sex work in Cambodia. It shows where we have come from, and it indicates the path ahead.

On the very first page Lim’s book points out that in spite of the taboos, in spite of dissension on the subject, sex work (or ‘prostitution’ as Lim called it back then) is “the provision of sexual services for reimbursement of material gain”.² In essence, it is a labour issue, and thus it is essential for the ILO to study it.

The ILO’s mandate vis-à-vis sex work has even more relevance since the creation of the programme on HIV/AIDS and the World of Work (ILO/AIDS) in the year 2000. One of its key objectives is to raise awareness of the social, economic and development impact of AIDS through its effects on labour and employment.³ As this current study indicates, indirect sex work increases the HIV vulnerabilities of working women in Cambodia, particularly during this financial crisis, and their vulnerabilities, in turn, impact on labour and employment.

¹ J. West: “Reworking sex work”, in *Work, employment and society* (London, Cambridge University Press) 2000, vol. 14, pp. 395-399.

² Ibid, 1.

³ ILO/AIDS website, <http://www2.ilo.org/public/english/protection/trav/aids/aboutiloaids.htm> (accessed 23 Dec. 2009).

However, this current study differs from *The Sex Sector* as it focuses on a topic that the previous publication only mentioned in passing, “the danger of an extending chain of transmission of HIV/AIDS”.⁴

Here, there is also a difference in nuance. This study does not look at the issue as a ‘danger of HIV transmission’ posed by sex workers to the general population. Rather, it focuses on the ‘HIV-related vulnerabilities’ indirect sex work poses for the sex workers themselves. That is, this study presents sex workers not as ‘the danger’, but rather, ‘the endangered’ by the conditions in which they carry out their work.

At the time that *The Sex Sector* was published, the modern garment sector in Cambodia was just being established and young women with little formal education were streaming into Phnom Penh, exchanging their rural lifestyles for factory work. Moreover, as this current study indicates, it was at the very inception of garment work in the 1990s that some women garment workers in Cambodia began to supplement their factory income with indirect sex work.

Thus, such indirect sex work is not a new phenomenon in Cambodia. Rather, the recent context – the current financial crisis and the concomitant mass closures of brothels – has seen a rapid increase in indirect sex work. It has also led to a terribly-preoccupying increase in these new sex workers’ vulnerabilities to HIV, for it is the new workers who are less familiar with condoms, less likely to negotiate for them and more likely to contract STIs.

The narratives of sex workers that form the basis of this study show not only great vulnerabilities to HIV, but also sexual and physical violence, forced alcohol consumption, lack of healthcare and severe stigma and discrimination.

They also describe the long chain of labour exploitation which these women workers have experienced, beginning with their premature entry into the labour market, leading to dangerous and degrading conditions in factory work, to their becoming ejected from their workplaces, to that last link, which is their ‘choice’ of becoming indirect sex workers as a way to pay for a bowl of rice for themselves, childcare for their infants and medicine for their families.

As this study takes a sense of direction from *The Sex Sector*, it also heeds its warnings. Lim wrote that “Many current studies highlight the pathetic stories of individual prostitutes, especially of

⁴ Ibid, 1.

women and children deceived or coerced into the sector. Such an approach tends to sensationalize the issues and to evoke moralistic, rather than practical, responses.”⁵

The purpose of these narratives – indeed the purpose of this entire study – is not to sensationalize these stories of abuse, not to play upon the emotions of the reader. Rather, it is to show the very human face of these women workers, to understand their vulnerabilities, so that we can offer them practical responses. This human face is needed, as we are constantly inundated with negative stereotypes of sex workers that degrade, demonize and disabuse them of their humanity. These stereotypes push sex workers into further marginalization and away from the health and educational services they so desperately need.

Sex workers are like Raksmei, a woman interviewed for this study, who was forced out of school to work as a maid at the age of seven. Then, when she was a teenager, she had to bribe a factory recruiter for her first salaried job from which she was laid off without severance pay. Then she worked at a number of jobs, finally as a beer promoter where she was raped by the brother of her boss. In spite of this abuse, Raksmei considered herself fortunate to be employed. As she could not survive on her wages alone she entered sex work so she could rent an apartment with her sister and send money home to her mother.

Raksmei is the face of indirect sex workers in Cambodia. But she is neither a ‘danger’, nor an ‘enemy’ nor a ‘threat’. She is a woman worker who is trying the best she can to support her family and to survive.

As long as Raksmei and other women like her are employed in the sex sector, then it is the ILO’s prerogative – indeed, it is the ILO’s obligation – to find ways to lower their HIV vulnerabilities, to help promote their health and to bring in the strengths of their partners in labour unions, employers’ organizations and governments, to make entertainment establishments decent places to work.

It is to Raksmei and the other workers interviewed in these pages that this study is dedicated.

Eric Stener Carlson

Senior Technical Specialist on HIV/AIDS and the World of Work
East Asia, South-East Asia and the Pacific

⁵ Ibid, 3.

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The team undertaking the research was comprised of:

Neil Poetschka, Senior Researcher, APHEDA South East Asia Regional HIV/AIDS Adviser, responsible for planning and carrying out project activities including writing the final report.

APHEDA's Cambodian project team, Country Coordinator Barbara Fitzgerald, Program Coordinator Lim Sok San, Assistant Program Coordinator Ly Kim Song and Project Officer Chhea Thao. The team provided valuable assistance in organizing technical interviews, providing translation, and assisting in focus groups with women beer promotion, karaoke, restaurant and massage workers. Di Butler, APHEDA Sexual Health Technical Adviser also provided valuable insight. Special thanks also to Ms Heak Morina a social researcher with considerable experience, who conducted in depth interviews and focus groups in Khmer on behalf of APHEDA.

The research was assisted also by the generous cooperation of the Cambodian Women's Development Association (CWDA) and its Executive Director, Kien Serey Phal, Cambodian Women for Peace and Development (CWPD) and Pharmaciens Sans Frontières (PSF). They assisted by facilitating site visits, focus groups and interviews with women who had recently lost employment in garment factories as a result of the global financial crisis and were currently engaged in entertainment work and selling sex.

The research work incorporated the views of all key players in the entertainment sector, formal and indirect sex workers, the ILO tripartite partners (government, unions and employer groups), UN agencies, worker's associations and NGOs. Their experience and insight were extremely informative.

Abbreviations and acronyms

AIDS	Acute Immunodeficiency Syndrome
APHEDA	Australian People for Health, Education and Development Abroad
ART	Antiretroviral Therapy
BSIC	Beer Selling Industry in Cambodia
CACHA	Cambodian Alliance for Combating HIV/AIDS
CAMFEBA	Cambodian Federation of Employers and Business Associations
CBCA	Cambodian Business Coalition against AIDS
CFSWF	Cambodian Food and Service Workers' Federation
CPU	Cambodian Prostitutes Collective (Union)
CSSD	Co-operation for Social Service and Development
CWDA	Cambodian Women's Development Agency
CWPD	Cambodian Women for Peace and Development
FHI	Family Health International
GDP	Gross Domestic Product
HIV	Human Immunodeficiency Virus
IDEA	Independent Democratic Informal Economy Association
KDFO	Khmer Development of Freedom Organizations
KHEMARA	Cambodian NGO for the Advancement of Women & Children
KHANA	Khmer HIV AIDS NGO Alliance
KWCD	Khmer Women's Cooperation for Development
MARPs	Most-At-Risk Populations
MEC	Medicine l'Espoir du Cambodge
MHC	Men's Health Cambodia
MHSS	Men's Health Social Service
MoLVT	Ministry of Labour and Vocational Training
MoWA	Ministry of Women's Affairs
MSM	Men who have sex with men
NAA	National AIDS Authority
NCHADS	National Centre for HIV/AIDS, Dermatology and STDs
NGO	Non-Governmental Organization
NSP II	National Strategic Plan for a Comprehensive and Multi-sectoral response to HIV/AIDS II
OI	Opportunistic Infections
PAO	Provincial AIDS Office
PLHIV	People Living with HIV
PMTCT	Prevention of Mother-To-Child Transmission

PSF	Pharmaciens Sans Frontieres
PSI	Population Services International
RHAC	Reproductive Health Association Cambodia
SFODA	Sacrifice Families Orphans Development organization
STI	Sexually Transmitted Infection
TCC	Tripartite Coordinating Committee
TWG/OPC	Technical Working Group- Outreach, Peer Education & 100 per cent Condom Use
VCCT	Voluntary Confidential Counselling and Testing
WNU	Women's Network for Unity
WOMEN	Women's Organization for Modern Economy & Nursing

INTRODUCTION

This research paper is the first step towards developing a tailor-made, focused intervention on HIV/AIDS for indirect sex workers in Phnom Penh, using the structure of their formal entertainment sector workplaces.

This approach follows the recommendations of the recent report from the Commission on AIDS in Asia, which UNAIDS and its co-sponsors are using as a framework for all HIV programmes throughout the region. As the Commission suggests, by implementing best practice intervention packages with most-at-risk populations “New infections will fall steadily, and regional HIV prevalence will begin to fall slowly.” (Commission on AIDS in Asia, 2008)

While this research does not provide a framework for interventions at all entertainment venues in Phnom Penh where sex work occurs, it does pinpoint where HIV workplace education is most needed, what sorts of approaches will most likely be effective and where it will have the biggest impact within the context of the recent financial crisis.

BACKGROUND

Until 2007, Cambodia’s economy was growing at a remarkable speed, with several consecutive years of double-digit gross domestic product (GDP) growth and continuous progress in poverty reduction. As it is a small, open economy reliant on foreign direct investment (FDI) and exports for much of its growth, Cambodia was hard hit by the economic downturn, with two of its four main drivers of growth (construction and garment manufacturing) suffering severe declines.

By September 2009, when this situational analysis was undertaken, the economic and labour market implications of the financial crisis were bleak. The World Bank estimated that 200,000 more Cambodians would fall into poverty and Cambodia was expected to post a GDP growth of no more than two per cent for 2009, down from more than ten per cent in 2007.

Against this backdrop, Cambodia’s poor and vulnerable were facing a range of new and intensifying hardships. Of particular concern were populations considered most at risk of HIV exposure. The most at risk populations (MARPs) include sex workers (and their clients); men having sex with men; injecting drug users; and migrants. Even prior to the crisis, most-at-risk populations' markedly-higher prevalence was a cause for great concern, the main reason being that if their vulnerabilities are not addressed there, there is a strong potential for them to become

a nexus of transmission to the general population. For Cambodia, which has achieved significant reductions in its HIV prevalence rate over the last decade, this increasing vulnerability is a worrying prospect that requires urgent preventative action.

OBJECTIVES

The International Labour Organization (ILO) proposes to make a contribution to meeting this challenge by exploring the HIV vulnerabilities faced by this new influx of indirect sex workers within Phnom Penh and to develop a strategy for reaching them with HIV prevention education.

METHODS

In order to assess the HIV vulnerabilities faced by indirect sex workers in Phnom Penh during the global financial crisis and provide concrete suggestions on how to reach the sex workers with HIV workplace education, the following investigations were conducted:

1. A desk review of all relevant studies, reports and analyses relating to sex work and the current financial crisis (and trends over time) in Cambodia.
2. A synthesis of existing mapping of indirect sex work venues/settings throughout Phnom Penh, identifying potential for HIV workplace interventions within these venues/settings.
3. Technical interviews with experts in the field of sex work within Phnom Penh to identify existing interventions and to gauge their opinions on strategies that will most likely facilitate successful HIV workplace intervention activities aimed at indirect sex workers.
4. In-depth, qualitative interviews with representative samples of sex workers in Phnom Penh about their HIV vulnerabilities.

DEFINITIONS

In Cambodia today, the term ‘entertainment worker’ is often used interchangeably with ‘sex worker’, conflating the entertainment sector and the sex industry. Therefore, in publications on sex work, ‘entertainment worker’ is often a euphemism for ‘sex worker’. While a significant overlap does exist between both, the conflation of the two, and the interchangeable use of the term ‘entertainment worker’ to describe both sex workers and entertainment sector workers complicates discussions about both.

For the purpose of clarity, this report will use the following terminology:

- **Direct sex work/ers:** Women whose primary mode of employment is to sell sex for material benefit.
- **Indirect sex work/ers:** Women whose primary mode of employment is not sex work but who may sell sex opportunistically for material benefit.
- **Sex work/ers:** Includes both direct and indirect sex workers regardless of their context.
- **Entertainment work/ers:** Women employed in the entertainment sector, e.g. beer promoters, karaoke singers, massage workers and hostesses, regardless of their possible involvement in direct or indirect sex work.

PART 1. THE CONTEXT OF SEX WORK IN CAMBODIA

The purpose of this section is to describe the relationship between garment factory workers, entertainment sector workers and indirect sex work in Cambodia. Specifically, in light of the global financial crisis, the section aims to describe the current context of indirect sex work in Phnom Penh, the types of indirect sex work and the links between indirect sex work and garment factory work.

GLOBAL FINANCIAL CRISIS

In terms of its impact and spread, the current global financial crisis is unprecedented, and arguably more serious in its impact than those associated with the great depression (Hossein et al 2009, p 1). Originating with the collapse of financial markets in the United States, the crisis spread quickly to other countries through world financial markets and broadened as it became “a general economic crisis; which is becoming an employment crisis; and which has in many countries produced a social crisis and in turn a political crisis”. (Rudd, K. 2009)

The direct impact of the global financial crisis on countries that were not fully integrated into world financial markets, like Cambodia, was not as severe as the subsequent indirect impacts (Hossein J, p 2). A rapid assessment of the impact of the financial crisis in Cambodia conducted by the ILO (2009) attributed the slowdown in Cambodia’s economy following the global financial crisis to:

- falling exports due to lower demand from overseas markets;
- falling foreign direct investments from countries directly impacted by the financial crisis;
- and
- falling number of tourist arrivals due to lower incomes.

The garment, tourism, construction and agriculture industries are highly dependent on trade, foreign direct investments and overseas development assistance. As a result, these sectors were hardest hit by the economic downturn that followed the global financial crisis.

In addition to the financial crisis, the Overseas Development Institute (2009) stresses the importance of other recent events that may have contributed to the economic downturn in Cambodia, including the recent food and oil crisis and, for tourism, the recent border conflict with Thailand. The ILO also points out the compounding impact on the garment industry caused

by the loss of Cambodia's favourable trade arrangements with the US and increasing competition from China and Vietnam (Ratnakar, 2008).

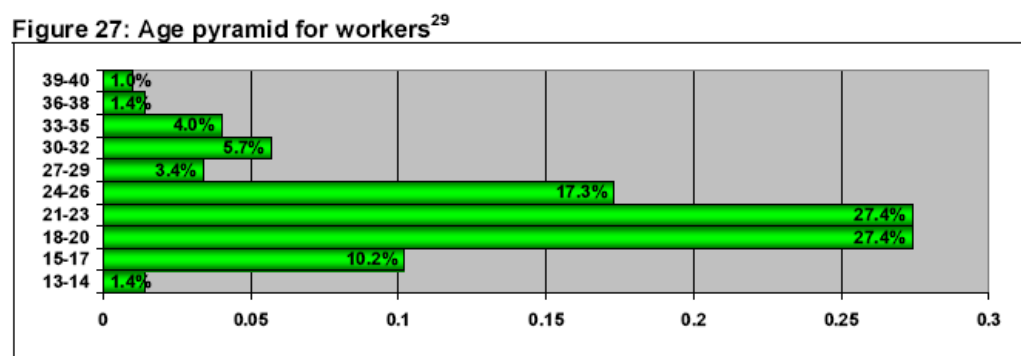
THE CAMBODIAN GARMENT INDUSTRY

The Cambodian garment industry began growing rapidly in the mid-1990s and through favourable trade arrangements with the United States became Cambodia's most successful industry (ODI 2005). The Cambodian Investment Law of 1994 encouraged investors with incentives such as: full import duty exemption; nine per cent corporate tax; free repatriation of profits; no export tax or withholding tax on dividends; and no nationalization of assets.

By the end of 2007, the garment industry employed more than 350,000 workers in over 300 factories and accounted for between 70 per cent and 80 per cent of Cambodia's total exports; an industry worth an estimated US\$2 billion dollars or 17 per cent of gross domestic product (USAID, January 2009). The Economic Institute of Cambodia (2007) estimated 1.7 million people were dependant on the garment industry by 2006.

According to Better Factories Cambodia (2006), garment workers are 90 per cent female, generally come from rural areas and have little or no previous experience with formal employment. They migrate to the cities to support large families of between four and nine individuals and to support their siblings through education. Most are single (72 per cent), some are married (22 per cent) and a few are divorced (six per cent). They range in age from 13 to 40 with the bulk of women aged between 18 and 26 years old.

Figure 1. Age pyramid for Cambodian garment workers (2006)



Source: Better Factories Cambodia: *Cambodia: Women and work*, (Phnom Penh, 2006), p. 42.

In addition to faring well under the quota system, the government promoted Cambodia to investors with “low labour costs and a large, untapped workforce mak(ing) Cambodia unbeatable for labour-intensive industries” (Nishigaya 2009). However company owners’ growing awareness of their corporate social responsibility during the 1990s meant their decisions to manufacture in Cambodia included a consideration of labour standards as well as production costs. As a consequence, the Cambodian garment industry has built on its reputation for better labour standards, primarily through Better Factories Cambodia, a tripartite monitoring mechanism established in 2001 by agreement with government, unions, business and the ILO. Better Factories Cambodia conducts annual audits and produces reports on garment factory labour conditions for purchasing companies.

The garment industry relies heavily on foreign purchase orders, primarily from the United States (75 per cent) and the European Union (20 per cent). Less than ten per cent of the capital in the Cambodian garment sector is owned by Cambodian investors, with the remainder held by investors from Taiwan, Hong Kong, China and Korea. In addition, more than half of all Cambodian factories are subsidiaries of overseas parent companies (ILO 2009) that were established in Cambodia under the quota system. Their dependence on US markets means Cambodian garment factories are heavily impacted by reductions in US purchasing power. With few national investors in the industry, diminishing purchase orders and new capital investments can be easily redirected away from Cambodia to more competitive countries.

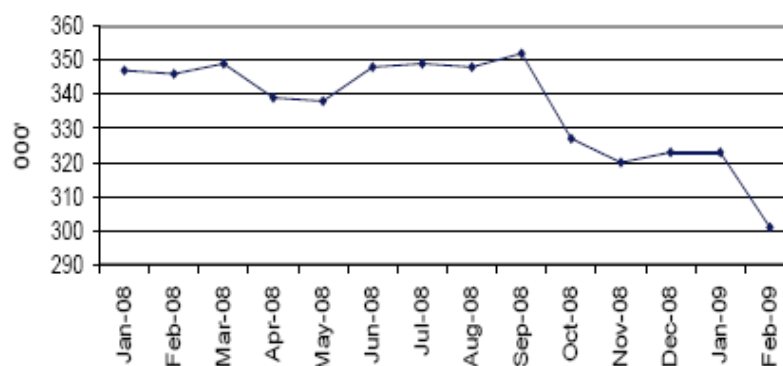
After growing at 28 per cent per-year for the past decade, the decline in foreign purchase orders saw monthly average garment exports drop from \$250 million in 2008 to \$100 million in January 2009. By October 2009, the Cambodian Ministry of Labour and Vocational Training (MoLVT) reported a net loss of approximately 50,000 jobs and 90 factory closures for 2009. Better Factories Cambodia’s monitoring reports show total factory and total employee numbers remaining stable at around 295 and 340,000 respectively from early 2007 to mid 2008 and falling to 250 and 280,000 respectively by August 2009⁶.

UNEMPLOYMENT

The table below from the Overseas Development Institute illustrates the rapid decline in garment factory jobs beginning in late 2008. Garment factory lay-offs are occurring alongside down turns in construction and tourism and amidst a period of population growth that has seen 250,000 young people enter the job market in the past five years.

⁶ See Better Factories Cambodia synthesis reports 19 to 22

Figure 2. Garment factory workers_- January 2008 to January 2009



Source: Pradesh, 2009 as published in ODI *Global Financial Crisis Discussion Series Paper 4*, page 10.

Many of the laid off and underemployed garment workers are from rural, subsistence farming areas and may have the option of returning home after a short period of looking for new jobs in urban areas. Recently, the Asian Development Bank (ADB 2009) projected that the agricultural sector would be a growth area for the Cambodian economy. Subsistence agriculture however is not the preferred choice of many workers with experience living in the city, and not all women have families to return to. Female workers interviewed by Chandararot et al. for the ILO reported that many women preferred to seek new jobs in the city and would take a job with lower wages, sell assets or go into debt rather than return to agricultural areas where poverty⁷ remains at 43 per cent compared with five per cent in Phnom Penh (MoWA 2009).

According to Adhikari and Yamamoto (2006), worker's wages and conditions worsened in 2005 following the end of the quota system⁸. Despite rising exports, worker's actual wages reportedly dropped 8.5 per cent. In 2008 Jassin-O'Rourke (2008) reported that Cambodian wages were \$0.33 per hour, the second lowest in South-East Asia. At the same time working hours were increasing and employment contracts began shifting to casual work, short-term contracts and piece-work.

⁷ Proportion of population living on less than \$0.46/day

⁸ The 1974 Multi-Fiber Arrangement (MFA), sometimes called the *quota system*, was a regime of trade protection for the global textile and clothing industry. The MFA enabled developed countries to bilaterally negotiate purchase quotas with supplier countries. Cambodia's textile industry thrived under the quota system until it was phased out at the end of 2004.

LINKS BETWEEN GARMENT, ENTERTAINMENT AND THE SEX SECTORS

The flow of workers between garment, entertainment and sex work has been well documented and, although accelerated by the financial crisis, this flow pre-dates the current economic downturn. The United Nations Inter-agency Project on Human-Trafficking (2009) surveyed 357 women currently working in massage, karaoke and direct sex work and compared those women who entered the sector before the financial crisis (42 per cent) with those who entered during financial crisis (58 per cent). The comparison of the women's jobs immediately before entering the entertainment sector shows similar backgrounds between the two groups. Most women in both groups were unemployed and rural, subsistence farmers, with a small group of ex-garment factory workers, increasing in proportion from 13 per cent before the financial crisis to 19 per cent during or after the crisis. This data illustrates the movement of women from garment factories into the sex industry and is also in keeping with a longer term historical relationship between the garment industry, the entertainment sector and sex work (Nishigaya, 2004).

The extent of garment factory workers' involvement in formal and indirect sex work, as far back as 2000, is illustrated in a survey of 852 female garment factory workers in Phnom Penh (Nishigaya, 2009). Of the total sample 466 women (54.7 per cent), reported having pre-marital sex and 94 per cent of this group reported ever⁹ having sex for gifts. Among these women, 51 reported always receiving money in exchange for sex (\$10) and an additional 28 reported always receiving gifts in exchange for sex. Garment workers participating in the study and involved in sex work met their clients at night through brothel based work, or while working in the evening as beer promoters, karaoke singers, massage workers and hostesses.

Garment factory workers are mostly young women and, after leaving or being laid off from factory work, an option for many is to stay in the city and take jobs in the entertainment sector. These entertainment sector jobs increase their opportunity to earn additional income by selling sex and in turn, expose them to a number of new occupational risks. A recent survey of 1116 entertainment workers by the Cambodian Alliance for Combating HIV/AIDS (CACHA) found that 18 per cent were previously employed in factories (CACHA 2009). It is not clear from the study when or why these workers left the factory for entertainment work, but it is clear that not all women entering the entertainment sector from the garment factories had been laid off as a result of the global financial crisis. Some factory workers have used entertainment sector jobs to escape the long hours, harsh working conditions and poor pay associated with the garment sector.

⁹ 17 per cent 'always' (79 women); 68.9 per cent 'sometimes' (321 women); 8.2 per cent 'a few times' (38 women); six per cent 'no' (28 women)

SEX WORK CURRENT CONTEXT

The CACHA and UNIAP studies do not give a sense of the magnitude of the increase in the total number of sex workers or the types of entertainment work being taken up by women leaving the garment sector. National Centre for HIV/AIDS, Dermatology and STDs (NCHADS) data¹⁰ shows a total increase of 21,463 sex workers between 2007 and 2009. From 12,730 sex workers in 2007 (including 9,885 non brothel-based and 2,845 brothel-based) to 34,193 total sex workers in the first quarter of 2009, (including 32,418 non brothel-based and 1,775 brothel-based).

In the past, sex workers had entered a high risk industry but one that had been making progress toward reducing HIV prevalence. HIV prevalence among brothel-based female sex workers declined from a peak of 45.8 per cent in 1998 to 21.4 per cent in 2003, falling again to 12.7 per cent in 2006 according to surveillance data. The United Nations attributes the fall to there being 96 per cent condom use among brothel-based workers. HIV rates among non-brothel based female sex workers showed a similar decline, falling from 19.3 per cent in 1999 to 11.7 per cent in 2003 (NCHADS Sit. An.).

However, the financial crisis and large scale unemployment caused a sharp increase in the number of women entering the sex industry at the same time as changes occurred to the law governing human trafficking and prostitution. These changes have caused the sex industry and sex workers to reinvent themselves within the entertainment sector. The application of the law has hampered efforts by HIV/AIDS projects and other services to reach both the group of ex-factory workers and also the ex-brothel based workers who are moving into entertainment sector jobs.

The Joint United Nations Initiative on Mobility and HIV/AIDS (2008) describes the changes within the sex industry in Cambodia as a result of the new law and the challenge faced by health programs:

'...massage parlours have seen a large increase in the number of workers in recent months. Of 322 brothels that were previously directly serviced by Population Services International's (PSI) condom social marketing programs, most have been shut down by authorities with 143 operating as less obvious entertainment venues, which are less likely to have condoms on hand. A survey of high risk men found that more than twice as many (83per cent vs. 35per cent)

¹⁰ Provincial AIDS Office data presented during stakeholders meeting with Dr Nith Somsothy, Head of BCC Unit, NCHADS, 2/10/2009.

reported having sex with a non-brothel based sex worker since the new law was initiated. Also, while there has been a 51 per cent decrease in the number of women working in brothels in Phnom Penh, there has been a 44 per cent and 6 per cent increase in the number of women working in beer gardens and karaoke parlours respectively. Besides closing brothels, authorities have also arrested large numbers of entertainment workers, who are taken to detention centres, where there have been many reports of abuse by police. Family Health International (FHI)-Cambodia reported that their implementing agencies were less able to reach sex workers with their HIV prevention programs since the new law has been put in place, due to the women's fear of detention. ' (Richter, pp. 12-13)

The (Australian) National Centre for HIV Epidemiology and Clinical Research used models to estimate the changes in HIV and AIDS in Cambodia and Papua New Guinea as a result of the financial crisis and highlighted the importance of maintaining programme coverage. The models suggest that decreases in HIV programs (Voluntary Confidential Counselling and Testing VCCT and Antiretroviral Therapy ART rollout) will likely have a greater impact on the HIV epidemic than changes in unemployment (Wilson et al., 2009).

Unfortunately, the capacity of health services to reach sex workers has already been impeded by changes to the trafficking law. In 2008 the Non-Government Organisation (NGO), Chhouk Sar's HIV treatment clinic, reported a 26 per cent reduction in women seeking VCCT and increases in the number of HIV positive women not returning for ART and opportunistic infections (OI) treatments.

Whether influenced more by the sudden increase in unemployment, changes to laws governing sex work, or a combination of these and other factors, it is clear that women entering the sex industry during this period already have poorer access to information and services. The increase in the overall number of sex workers and reductions in men's disposable income has increased competition for clients, reduced individual sex worker's negotiating power¹¹ and reduced negotiating capacity of sex worker collectives.¹² The breakdown of traditional brothel based sex industry in favour of more covert methods of selling sex makes reaching these women with health services more difficult. Recent results from the Young Women's Health Study cohort showed that 23 per cent of young entertainment workers were HIV positive (Page, K., 2009).

¹¹ K. Richter: *Analysis of the Asian financial crisis on trafficking and HIV* Bangkok, (JUNIMA, 2009).

¹² Membership of sex worker unions and associations are declining as workers migrate or choose not to identify themselves. Cambodian Prostitutes Collectives numbers have fallen from 1000 to 300 following recent law changes. Pers. Com. CPU, October 2009.

PART 2. MAPPING ENTERTAINMENT ESTABLISHMENTS IN PHNOM PENH

INTRODUCTION

This section of the report synthesises existing mapping of entertainment establishments and sex worker venues in Phnom Penh and includes the following information:

- A summary of mapping conducted by Khmer HIV and AIDS NGO Alliance (KHANA) in 2008 describing types of entertainment establishments and types of sex work in Phnom Penh. KHANA also provides estimates of the number of each type of establishment and the number of workers within each.
- A summary of data collected by the Phnom Penh provincial health department in 2009 and collated by the National Centre for HIV/AIDS, Dermatology and STI (NCHADS). The data estimates the total number of establishments and workers in Phnom Penh at the end of June 2009.

ENTERTAINMENT ESTABLISHMENTS IN PHNOM PENH

The Provincial AIDS Office (PAO) is a unit within the Provincial Health Department responsible for provincial planning, management, coordination and reporting for HIV/AIDS and STI programmes.

The PAO in Phnom Penh meets quarterly with all partners targeting entertainment workers in Phnom Penh. The group maps entertainment establishments in Phnom Penh, coordinates outreach to entertainment establishments and facilitates discussion on implementation issues.

Mapping reports produced by the PAO are disaggregated by district, type of entertainment establishment and number of entertainment workers. The provincial mapping reports are available on request from the Phnom Penh Health Department.

In brief, the entertainment establishments and entertainment workers in Phnom Penh for quarter two (2009) are displayed in the table below.

Table 1. Entertainment establishments and entertainment workers in Phnom Penh (Quarter 2, 2009)

Phnom Penh establishments	Total establishments	Total workers
Brothels	36	248
Beer promoters	13	6 045
Karaoke	128	5 063
Massage	211	2 424
Freelance	53	799
Restaurant/ Bar/ Beer garden	306	6 659

In Phnom Penh the PAO directly manages a range of clinical services and coordinates private clinics established by NGOs (such as Marie Stopes, Family Health International and the Reproductive Health Association Cambodia), as well as coordinating HIV/AIDS prevention, care and support programmes.

Phnom Penh's clinical services include:

- Anti-retroviral treatment at nine locations;
- Twenty home-based care teams;
- VCCT in 15 locations;
- Preventing Mother to Child Transmission (PMTCT) in 11 locations; and
- Sexually Transmitted Infections (STI) clinical care in five clinics.

Details of clinical services are available from the Phnom Penh PAO.

CHANGES IN MODES OF SEX WORK BETWEEN 2008 AND 2009

To illustrate the dramatic and sudden change in the entertainment and sex industry in Phnom Penh, NCHADS 2009 data is presented here alongside the KHANA 2008 data with a percentage change indicator. These figures are comparing two different data sets and should only be viewed as illustrative. Nevertheless, they serve to emphasise the change within the sector following the introduction of the new laws governing prostitution in Cambodia.

Table 2: Changes in entertainment and sex industry in Phnom Penh between 2008 and 2009

Entertainment workers	KHANA (2008)	NCHADS (2009)	% change
selling sex			
Karaoke	2 699	5 063	87.59
Massage	494	2 424	390.69
Beer gardens	1 489	6 659	347.21
Beer promoters	1 326	6 045	355.88
Freelance	337	799	137.09
Brothels	765	248	-67.58

ENTERTAINMENT ESTABLISHMENTS

KHANA completed a mapping of sex workers, entertainment workers and men-who-have-sex-with-men (MSM) in 2008. The KHANA mapping report provides definitions of each type of entertainment establishment. For each type of establishment, the report goes on to estimate the total number of workers, common characteristics of workers and condom use patterns. Data from NCHADS June 2009 provincial monitoring reports is used as a current comparison.

1 Brothels

Brothels are defined as places where sexual services are available for paying customers on request. Brothels can be housed in any type of building and many are co-located within hotels or guesthouses. Sex work is not illegal in Cambodia but profiting from the sex work of others is. As a result, many brothels have closed and those that remain are under reported by officials. (NCHADS, 2009)

The closure of brothels has not seen a reduction in the sex industry. On the contrary, NCHADS data show a dramatic increase in the total number of sex workers in Cambodia (an increase of 21,463 sex workers between late 2007 and early 2009). Brothel closures have caused a shift away from easily-identifiable brothels to less-obvious entertainment businesses, such as karaoke and massage lounges, bars, nightclubs, beer gardens and restaurants.

In 2008, KHANA estimated a total of 108 brothels in Phnom Penh supporting 765 brothel-based sex workers. By 2009, NCHADS estimated there were 36 brothels in Phnom Penh with 248 brothel-based sex workers.

Brothels are generally open 24 hours and busiest between 7 p.m. to midnight. Clients can also request sex workers to be sent to their hotel rooms. Sexual services cost from \$1 to \$2 per act to \$5 to \$10 per night.

The Cambodian Prostitutes Union (CPU) reported in October 2009 that following the enactment of the new laws governing prostitution:

...police began closing down the brothels in Toul Kork by introducing nightly raids on the workers in undercover operations, saying that treatment of the workers was poor. More recently, the women have not been abused but locked up over night and counselled before release.

The young ones can go to karaoke and entertainment establishment jobs because they're younger/desirable. The older ones stay in the area (Toul Kork) working the streets. Now that they can't solicit openly, the women stand back in the shadow of the doorway and signal the clients discreetly. In Toul Kork, the sex happens in rented shacks along the railway line, rented directly by small groups of five or six workers (Cambodian Prostitutes Collective, Pers. Comm., 2009).

2 Karaoke

KHANA reports a total of 2,699 karaoke workers and 79 karaoke bars in Phnom Penh in March 2008 compared to 5,063 karaoke workers and 128 karaoke bars reported by NCHADS in March 2009.

Karaoke bars are popular places where people go to sing, socialise, drink and, in some cases, to purchase sexual services. Opening at midday until midnight, karaoke bars can be open-air street cafés, small one-room venues or large, multi-story entertainment centres that offer multiple karaoke booths and possibly other services, such as massage and sex. Karaoke bars are common fronts for direct sex venues and may have rooms available on-site or arrangements with nearby guesthouses, that can be used for sex.

The women who work in karaoke bars are hostesses, singers, escorts, waitresses and beer promoters.

Each woman receives a basic, monthly wage and, reportedly, the women in these establishments may negotiate or decline an offer of sex with a client. Sexual services range from \$10 to \$50 per

act and up to \$100 per night. Monthly wages are low and provide an incentive for the women's participation in sex work, which in turn attracts larger numbers of clients.

According to the women involved in qualitative interviews and focus groups for this report, discussions of money for sex are not shared with managers or owners who, under the new law, can only take profit from renting the room, selling food, drinks and entertainment. The workers are often pressured to sell alcohol and drinking unsafe levels of alcohol consumption is common among the karaoke workers.

3 **Massage parlours**

KHANA reported a total of 494 massage workers who sell sex in 47 massage parlours in Phnom Penh providing sexual services in March 2008, compared with 2,424 massage workers selling sex in 211 parlours reported by NCHADS in 2009.

Massage parlours may or may not offer sexual services. Those that do are commonly attached to a hotel or guesthouse where both massage and sexual services are performed. In large venues, massage workers are often seated in a glass fronted room exposed to the foyer or lobby. Men select women and identify them by a colour-coded number. The number is an individual identity number so clients can remember their favourite workers, while the colour denotes ethnicity and type of sex performed.

Massages cost up to \$6 with the venue owner keeping \$5 and the masseuse keeping \$1. Sexual services are negotiated privately between the client and worker during the massage for a cost of \$10 to \$20 per hour and up to \$100 for the night. Massage workers, like karaoke workers, can decline sex with a client, but they are not paid unless they are chosen by a client for massage, and then receive only \$1 per hour. Apart from any other pressure, the financial imperative to agree to sex is compelling.

4 **Beer gardens**

KHANA reported a total of 1,489 beer garden workers in Phnom Penh in March 2008 compared with 6,659 reported by NCHADS in 2009 working in 306 beer gardens in Cambodia.

Beer gardens usually open between 4 p.m. and 10 p.m., are usually open-air and offer cheap beer and cheap food with entertainment, such as a big screen TV or live band. Workers may include hostesses, waitresses, singers and beer promoters depending on venue size. The workers can

negotiate sex directly with clients and usually meet after they finish work, or pay the owner a commission for time away during work hours.

Salary for their formal employment varies according to their role but, as with other entertainment sector jobs, salary is generally supplemented with sex work.

5 Beer promoters

KHANA reported a total of 1,326 beer promoters in Phnom Penh March in 2008, compared with 6,045 in Phnom Penh reported by NCHADS in 2009.

Beer promoters work in restaurants, bars, entertainment venues and at private functions. Their employment can be either by contract with the beer company or on commission based on the number of beers sold (demonstrated by the worker presenting beer bottle caps to the distributor). Their role is to encourage clients to choose the brand of beer they are promoting, and to encourage them to continue drinking. The beer promoters commonly drink with the clients and are chosen for their sociability and attractiveness.

Beer promoters can negotiate or decline sex with their clients and may charge between \$10 and \$20 per act up to \$50 per night.

In 2006 the six major brewers in Cambodia (Cambodian Brewery Cambrew, Asia Pacific Breweries, Heineken, Guinness and Carlsberg) joined together to establish the Beer Selling Industry in Cambodia (BSIC) which aimed to address the concerns expressed by international women's and workers' rights organization over beer promoters' dangerous working conditions and to bring these to the attention of members, outlet owners and consumers.

BSIC frames their concerns under an occupational safety and health (OSH) model and seeks to reduce harm through a code of conduct, which states that beer promoters should not sit or drink with the clients.

6 Freelance sex workers

KHANA reported a total of 337 freelance sex workers in Phnom Penh in 2008, compared with 799 in Phnom Penh reported by NCHADS in 2009.

Freelance workers usually solicit for clients in public places at night and charge \$2 to \$5 per sex act or \$5 to \$10 per night. Sex usually occurs in a nearby house shared with other workers or in a secluded but public place. Clients are generally low-income workers.

Freelance workers are the most at risk of police arrest, theft and abuse by clients. Freelance workers tend to work in groups for safety and may make arrangements to mask their sex work, for example by posing as snack vendors.

PART 3. TECHNICAL INTERVIEWS

Technical interviews were carried out with experts in the field of sex work and the world of work within Phnom Penh. The goal was to explore existing interventions and gaps that might be filled from a world of work perspective.

Interviews were conducted during September 2009 with a range of stakeholders representing a selection of Cambodian government departments, businesses, unions, workers associations and NGOs. The technical interviews also included four focus groups with women currently employed in the entertainment sector who were also involved in sex work. The interview team also participated in venue outreach with one local NGO in Phnom Penh to directly observe the environments of various entertainment establishments. The list of participants for both the in-depth interviews and the consultative meeting are attached below (Attachment 4).

SEX WORK IN CAMBODIA

Law on Suppression of Human Trafficking and Sexual Exploitation

Stakeholders interviewed for this report spoke at length about the impact of recent changes to the law governing sex work. Many stakeholders identified the core problem with the law is the way it is being implemented and they stressed the need to improve dialogue with front-line officials to minimise the law's impact on HIV/AIDS programming.

Stakeholders reported that many entertainment establishments that were previously engaged in HIV/AIDS prevention programs have been closed for displaying HIV/AIDS posters and distributing condoms to customers. Others have removed posters and condoms from the establishment and have restricted health workers' access to their staff for fear of being closed.

This break-down in trust and resulting restricted access to the workers was a major concern for the stakeholders who had recently been informed of research findings showing a drop from 90 per cent to 70 per cent condom use among entertainment workers. The establishments' withdrawal from participation in projects has raised concern for the general safety of women in an environment where four of five workers experience some form of abuse.

The Cambodian government, non-government and community-based organizations are working to minimise the impact of the new law. However, while resources are diverted to resolving problems related to its implementation, the entertainment sector has become the recipient of a

large number of direct sex workers, as well as large numbers of women who lost their jobs in other sectors.

Links between the sex, entertainment and garment sectors

Most of the stakeholders interviewed believed that some of the female garment factory workers who were laid off during the global economic crisis took other factory jobs or returned to their home villages after a short period of looking for new work in the city. However, they also believe a large number of ex-garment factory workers chose to stay in the city for economic reasons or because they preferred the social freedoms they enjoy in the city. Stakeholders estimated that between 80 per cent and 90 per cent of entertainment workers were also engaged in sex work.

Sex workers were concerned that the sudden, large influx of women entering the sex industry at a time when clients had less money to spend, meaning that women had to compete for clients. This competition was driving prices down, resulting in lower incomes for sex workers across the board, as well as increasing the risks women were prepared to take to secure these increasingly-scarce clients.

The ex-garment factory workers were reportedly unhappy with the situation in entertainment establishments for a number of reasons:

- As entertainment workers, their reputations are damaged even if they do not sell sex, leading many to conclude that they may as well sell sex if they are already suffering social stigma related to it.
- As entertainment workers, they are targeted for a range of HIV prevention and care resources and believe that the NGOs should have used these resources to help them secure their factory jobs or have helped to retrain them in preparation for factory closures.
- As entertainment workers, they are currently framed as potential vectors of disease rather than as workers with rights and respect and are unhappy with poor working conditions that go unchallenged.

Associations and unions

The community-based networks, associations and unions within the entertainment sector and the sex sector in Cambodia have a relatively small membership base. Also, there are distinct

differences between the associations that operate largely as components of NGO projects and those that operate as member-based advocates for workers themselves.

The NGO-supported workers' associations tend to be better funded and more active but also tend to be more focused on single issues centred on donor programming, such as women's health, HIV/AIDS and sexual health. The NGOs are working toward membership and member-based representation, but the groups are not driven by members and are not structured for independence or long-term sustainability. The NGO rationale for these associations is to find a middle road that allows advocacy on specific issues without being adversarial. As associations, they are unable to participate in industrial relations negotiations and generally do not take up broader issues on behalf of workers, such as wages and terms and conditions of employment, as such, they are unable to address underlying vulnerabilities. However, because of their narrow approach, they do gain access to forums where they have been very successful in introducing a high standard of HIV/AIDS/STI prevention and care services to the entertainment and sex sectors.

The unions representing the entertainment sector are relatively new and operate within a member-based structure using membership fees to further a membership-driven agenda. The unions are recognised by the Cambodian government and do have some voice in industrial relations negotiations. However, they can be outflanked by well-funded NGO-backed associations and the immediate material benefits they offer potential new members.

For example, most members of NGO-based associations were unaware of the existence of the Cambodian Food Service Workers Federation and some stakeholders questioned the wisdom of being aligned with unions while attempting to access workers with health information. Others believed that ultimately these associations would need to work in partnership with unions to affect broader change in the industry to address the underlying vulnerability of the workers.

Initiation to sex work

The relationship between the garment sector, the entertainment sector and the sex sector was well known to the stakeholders. A major concern amongst them was the sheer number of new women entering the entertainment sector at a time when traditional red light areas were being closed. A specific concern was that the inexperienced, younger women were working in entertainment sector jobs alongside experienced sex workers and may, therefore, be initiated into sex work.

Stakeholders believed that the movement of direct sex workers into the entertainment sector places pressure on entertainment workers to become involved in sex work. The pressure may not always be direct (e.g. observing over time the better standard of living of women who sell sex and the slow desensitisation of transactional sex in the workplace). The large numbers of women from factories entering the entertainment sector are particularly vulnerable due to their lack of experience in dealing with these kinds of pressures.

Stakeholders believed that the stigma associated with entertainment work means that workers are more likely to withdraw from their traditional social networks and avoid discussing difficult decisions related to their work. The shifting support in decision-making from family and friends to co-workers and housemates who are more experienced in sex work may increase the likelihood that they will begin to sell sex.

The low wage, or, in some cases commission only, in the entertainment sector encourages entertainment workers to sell sex to clients. Desperate economic circumstances and diminishing client numbers lead workers to accept increasingly higher risk propositions from clients.

Perceptions of customers

While acknowledging that a large proportion of entertainment workers sell sex, stakeholders reported that entertainment workers do not perceive themselves as sex workers and many view sex workers with disdain. By framing their relationships with clients in romantic terms, they are less likely to insist on condom use and they are also less willing to access sexual health services.

A general perception held by customers of entertainment establishments is that all women who work in entertainment establishments are potentially available for sex. This perception means that inexperienced women entering the entertainment sector are exposed to pressure from men to provide sexual favours for money. The less experienced entertainment workers are assumed to be healthy and 'safe' and are highly sought after, increasing pressure from clients as well as managers and co-workers who may stand to profit from the transaction.

Abuse and harassment

Stakeholders believed that the level of harassment, violence and intimidation that entertainment workers experience is high. Most were able to recount anecdotes to illustrate their belief. All of the women interviewed had experienced some form of abuse, and inappropriate grabbing, touching and verbal harassment were common.

In-depth interviews with 16 entertainment workers revealed a number of specific incidents of violence and abuse occurring mostly within the context of their entertainment work as well as within the context of their sex work.

Stakeholders believed it was necessary to acknowledge that many entertainment workers do, indeed, negotiate sex for material benefit with clients and in doing so may place themselves in unnecessarily risky situations. As such, in addition to HIV prevention strategies, indirect sex workers needed to be educated in ways to minimise their risk of theft, rape and other forms of violence at work (both as entertainment workers and as sex workers).

Drugs and alcohol

Stakeholders reported that high rates of alcohol consumption among entertainment workers is a major health concern due to the direct impact of chronic alcohol abuse and also, indirectly, as a result of their vulnerability while intoxicated. The reports of alcohol abuse were reinforced by focus groups of entertainment workers who reported drinking excessive amounts of beer, wine and spirits every working night as part of their regular duties.

None of the women in the focus groups reported using illegal drugs and only one of the stakeholders mentioned the use of amphetamines by night workers to help them stay 'awake and lively' during their shifts. The Young Women's Health Study (NCHADS 2009) surveyed 160 entertainment workers and found almost half (42.5 per cent) reported amphetamine use. The mismatch between stakeholders' anecdotal reports of low level drug use and NCHADS' finding that almost half of all entertainment workers are using amphetamines may indicate a gap in information.

Though not specifically highlighted by stakeholders in the focus groups, second-hand tobacco smoke can be recognised as another major occupational health concern for entertainment workers in Cambodia, particularly those employed in venues with enclosed spaces. Results from the Regional Research Report on Tobacco (Efroymson, D.; Jones, L. 2007) identified in Cambodia one of the highest smoking prevalence rates among men in the region, with an estimated 66.7 per cent of urban and 85 per cent of rural males reported to use tobacco regularly. Thus smoking and second-hand tobacco smoke are likely to pose a threat to the health of entertainment workers in Cambodia and have particular significance for people living with HIV/AIDS (PLHIV) employed in the sector.

Condom use

Stakeholders believed that condom use among sex workers in Cambodia has been very high in recent years. This was reinforced by the consistency of the response of sex workers interviewed as part of this situational analysis who reported 100 per cent condom use with clients. Some of the women reported clients attempting to negotiate sex without a condom (which they declined) and only one woman reported having unprotected sex with a client while drunk. One woman was convinced by a client to have unprotected sex and subsequently tested HIV positive. It is important to note that women interviewed were already linked with current NGO projects and condom use may be less likely among women working as street sex workers or in entertainment establishments that are difficult to access.

Most stakeholders believed that the major risk of HIV infection for sex workers was poor condom use with non-commercial partners and regular clients. Entertainment workers do not always acknowledge that the sex they are having is commercial in nature and they frame their relationships with regular clients as being romantic. As such, condoms are less likely to be used despite the obvious risks.

Stakeholders believed that in order to increase the rate of condom use with non-commercial and regular clients, broader community awareness campaigns addressing Cambodian women's ability to carry and use condoms within relationships is needed.

Competition for clients

With the movement of large numbers of unemployed women into the entertainment sector at the same time as brothel based sex workers, competition for clients has increased. A concern among the stakeholders was that traditional camaraderie and support will be lost as women compete with each other for clients. This may place them at greater risk of physical danger, theft and of HIV infection.

Program coverage

It was generally agreed that the Government, private sector and NGOs need to scale up education for entertainment sector workers, to respond to the influx of new workers and encourage regulation of the entertainment industry. The Provincial AIDS Office suggests that more resources are needed to respond and that one appropriate action would be to increase the funding of existing implementing partners.

Overall, the stakeholders indicated that they do not believe there are significant gaps in coverage for outreach programmes because there are already many NGOs working in Phnom Penh. Some believed there were overlapping services in some areas. The few establishments that were not being reached were newly-established venues and those that were refusing access. The stakeholders did not feel that a new project would have any better success in entering establishments that were currently refusing access and that the existing partners had the capacity to work with newly established venues as they open.

Once access to the entertainment establishment is secured, access to the women working within is still usually limited. Opportunity for contact is usually brief, a few minutes between the time when clients arrive on site and when they begin selecting prospective sex partners.

Workplace interventions

Most of the stakeholders were aware of the workplace HIV/AIDS programs targeting garment factory workers as well as the work of CARE and BSIC targeting work conditions of beer promoters. All were aware of implementing legislation, *Prakas #086 on the Creation of HIV/AIDS Committees in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace*.

However, almost all pointed out that the risks are broader than those associated with HIV. In fact, HIV is often quite low on the women's list of immediate concerns, suggesting that projects need to respond to the worker's own identified priorities (such as basic health and security conditions at work) before they can adequately address HIV/AIDS.

It was also generally agreed that work conditions within the entertainment sector placed employees' physical integrity at risk (including risk of HIV) and most believed that there was a role for the tripartite partners in forwarding a broader agenda to address the underlying vulnerabilities within the entertainment sector.

The need for regulation within the industry was discussed by stakeholders and considered an essential first step in improving workplace health and safety. The NGO CARE has been working with the association of beer selling companies in Cambodia (BSIC) and APHEDA- Union Aid Abroad has been working to strengthen union engagement with beer promoters through the Cambodian Food and Service Workers' Federation (CFSWF). Most of the stakeholders felt that strengthening associations and unions was an important first step in improving health and safety conditions for workers.

PART 4. QUALITATIVE INTERVIEWS

INTRODUCTION

Qualitative interviews were conducted with ex-garment factory workers who had been recently laid-off due to the financial crisis, who were now working in the entertainment sector and were selling sex in Phnom Penh. The purpose of the interviews was to understand the sex workers' points of view and to complement information gathered through the literature review and interviews with technical experts and stakeholders.

METHODS

Focus groups were conducted with groups of women working in entertainment sector jobs, before developing a discussion guide for the in-depth interviews that were to follow (see attachment 6).

In total, four focus groups of four women each and one interview with an additional two women were conducted in preparation for the in-depth, one-on-one interviews. The focus groups and interviews represented groups of waitresses, hostesses, beer promoters, karaoke singers and masseuses and were conducted within the workplace outside business hours. (Preliminary focus groups were arranged by Pharmacien's Sans Frontier). The investigators also participated in one day of outreach to entertainment establishments in Phnom Penh with the Pharmacien's Sans Frontier outreach team.

Participants for the in-depth interviews were identified by the Cambodian Women's Development Agency, a local NGO with an established track record of working with sex workers in Phnom Penh. They had the trust of a large number of sex workers and were able to identify women who met the following selection criteria:

1. recent past employment in a garment factory;
2. current employment as an entertainment worker - i.e. currently working as karaoke, hostess, waitress, massage or beer promotion worker; and
3. currently involved in indirect sex work - providing sexual services for money or other material benefits, in addition to their other employment.

An experienced interviewer carried out 16 interviews in the APHEDA- Union Aid Abroad's Phnom Penh office during November 2009. The interviewer was a female Khmer social

researcher in her early twenties with considerable experience interviewing both sex workers and their clients. The interviews were conducted in Khmer. Summary reports were prepared by the interviewer in Khmer and translated into English by a professional translation company with experience in translating sexual health-related material.

Following the in-depth interviews, two additional focus groups of eight women each were conducted to clarify and elaborate on the information gathered in the in-depth interviews.

Before being summarised as brief case studies, the interviews were analysed for common themes focusing on:

- standard of living during childhood;
- experience in the garment sector;
- experience of working in the entertainment sector;
- experience of working as indirect sex workers;
- changes in standards of living while moving between these occupations and notable impacts of the global financial crisis; and
- condom use with clients and non-clients.

The full sample of 16 women was interviewed and while individual cases varied, there was strong consistency in experiences across all interviews. Focus groups reiterated themes brought up in the individual interviews and added insight into the lives of entertainment workers who sell sex in Phnom Penh, although no new themes emerged.

Case Study #1: Raksmei

Raksmei was born in a Svay Rieng Province in 1984. She is the eldest of seven children to a farming family and she is blind in one eye.

Raksmei was taken out of school at age of seven after completing grade three to take a job in Phnom Penh. She was made to work as a maid servant, for which she was given full board while her parents received a small income for her labour.

Raksmei's father was an alcoholic and her mother was a gambler who borrowed heavily against the family property, which was eventually confiscated by the bank. As the oldest daughter, Raksmei became responsible for her siblings.

After returning home at the age of 12 to look after a sick younger sister, Raksmei and her brothers worked as street vendors to help support her family. Looking back on her life of extreme poverty, she has feelings of disappointment and embarrassment over her parents drinking, gambling and debts.

When she was fourteen years old, Raksmei paid a \$50 bribe to a recruiter who secured her first garment factory job. When she first started working in the factory, she was looked on with suspicion by management who believed she would never be a good rim cutter because of her sight impairment.

Fortunately, she says, her team leader overlooked her disability and encouraged her. She stayed with the factory for nearly five years before moving to her second factory job, which ended abruptly in 2006 after the factory closed because workers were poisoned by glue and chemical fumes. She moved to another factory shortly after but was no longer in good health, and the factory was facing financial problems. In November 2008, she was laid off without severance pay, and the factory was closed.

While working at the garment factories, Raksmei received \$45 per month and 1,000 riel per hour for overtime. Her salary was not enough for daily expenses and accommodation (she shared a room with three other women paying \$7 each). There was no holiday pay and money was deducted for days off work, so she was not able to visit home frequently. Nonetheless, she could occasionally send some money home to her mother. She was required to work overtime during busy periods and if she refused she would lose \$5 per day.

Between her factory jobs, life was hard. Raksmei had a number of failed attempts to find other work during these periods of unemployment. She tried to find work as a waiter without success, but she did meet an old lady from her village who helped her get a job as a restaurant dishwasher for 50,000 riel per month (about \$11).

She tried unsuccessfully to become a beer promoter during the day but realised she was not a good sales person. After one month, she was offered \$90 to resign but continued as a beer promoter on a freelance basis. She was offered a waiting job at a local restaurant but was "fired" because the supervisor was envious that the clients liked her and also gave her tips.

After being laid off by the factory in 2008, Raksmei began working in a massage parlour. She had no training or experience in massage and at first regular clients were angry at being massaged by a new worker. Nevertheless, sometimes, when she made mistakes, the clients "felt pity" and said

they were satisfied with her work and she quickly gained skills.

Raksmei lost her virginity when a man (the younger brother of her boss at the beer company) raped her. After forcing her to have sex, he offered to pay her; in the end, he didn't pay her. In spite of the rape, she was grateful to be employed, and when her rapist realised she was a virgin "he felt so regretful".

Occasionally, clients who were drunk asked her to sleep with them and at first she refused. If the clients complained that she had not served them well by declining sex, the boss told them that she was a newcomer. Often, on learning that she was new, the clients would offer a lot more money if she would agree to sleep with them.

After a while, all of the clients asked her to have sex with them and eventually she agreed because she needed the money. She continues to meet clients through work but mostly receives phone calls from clients asking her to meet them at a guesthouse. She may go out with three clients per month and charges between \$20 and \$50 for sex depending on the client.

As a masseur Raksmei believes she is "quite well paid" and she and her sister rent a room together for \$40 to \$50 per month. She saves more money than at the factory and is frequently able to send money home to her mother and still have some left over. She sees her employer as a good person, she has more holidays and her wage is never cut for taking leave as was done at the factory.

She uses condoms every time she has sex with clients. Condoms were used during her rape and she uses them even with men she thinks love her because she fears unplanned pregnancy and sexually transmitted diseases.

Sometime after she began sex work, Raksmei met a client who told her he loved her and wanted to live with her and have children. After a while, she agreed to have sex without a condom with him and later had a test to check her HIV status which was negative. Sometimes, when she has her health checks, she is nervous, because clients ask her to perform unprotected oral sex on them and she is afraid she may get a communicable disease.

Raksmei has had four blood tests in the past and used to have a gynaecological examination every month, but she doesn't go to the doctor very regularly any more. "Because she is getting weaker" she now only goes every three months and has never been diagnosed with a sexually transmitted disease.

Raksmei didn't join the union while working at the factory because she was so young at that time. At the time of this interview, she had just become a member of one of the NGO sex worker groups. She became a member, because “everyone is offered \$5 to get their health checked, and they can receive medicines free of charge. When they return for the result of the health test, they are given another \$5”. The NGO provides brief instructions during work and more detailed instructions when she has her health checked.

Raksmei states she has never been looked down on or undervalued regarding her work and believes the main motivation for people who criticize her is jealousy.

Case Study #2: Phary

Phary is 26 years old and born in Battambang Province. Her father was a construction worker, and her mother was a Khmer noodle seller. Phary is the second of eight children. The family was very poor and she had to leave school in grade 1 and then worked as a cake and jelly street vendor to help earn money for the family.

Phary was married at 17 and divorced a year later. She met a new boyfriend shortly after and had one child with him. However, after a few years, he began to drink and see other women, so they broke up.

At 16, her aunt helped her bribe the interpreter of a Chinese factory manager (the aunt claims to have paid \$250). She set up Phary's first factory job as a night worker, checking the quality of stitching. Phary believes she was lucky because the Chinese manager liked her and allowed her to rest occasionally during work hours.

Phary earned \$45 per month and up to \$60 when there was overtime. She helped her aunt around the house and, after paying her aunt for accommodation and repayments on the bribe, she would have \$15 remaining for the month.

During the global financial crisis, her living conditions became more difficult; pay days became irregular and the factory was often closed. Eventually, she was laid off without severance pay and the factory was closed. Immediately prior to this point in time, her health was poor and she was concerned that conditions in the factory were affecting her health and she was considering leaving anyway.

One month after being laid off at the factory one of her friends suggested she try working at a karaoke bar. Work was from 12 noon to 12 midnight and she received \$60 per month in salary plus tips. Phary only stayed in this job for three months, because she was exhausted by the long hours and late nights.

While working in karaoke she felt undervalued because she had to "...queue like a sales product waiting for clients to choose her' and some clients were as old as her father or grandfather and called her 'darling'. Some of the clients "would embrace and kiss her but some were really kind and just asked her to sit nearby and sing for them and gave her tip".

During her time as a karaoke singer, she often had sex with clients because her mother was sick, and she needed extra money for treatment. By this time, she had moved out of her aunt's house and began sharing a house with her friend, paying \$15 each per month. However, her friend had a boyfriend and her landlord was very strict, so she resigned from the karaoke job, took a job as a beer promoter and moved to another house.

As a beer promoter, Phary works from 5 p.m. to 9 p.m., earning \$10/case (she could sell about seven cases per month). She also earns tips for sitting, drinking and entertaining the guests at the restaurant and \$30 to \$50 each time she has sex with them. Earning more money this way, she was able to move into a place of her own for \$35 per month

She believes her manager is very kind and never looks down on her. The only serious problem she has had with a client was when she first became a beer promoter. She was asked to sit and drink with a client who forced her to drink eight bottles of beer until she became unconscious. Her friends helped her home and they noticed the man was waiting with his friends outside the restaurant as they left.

Phary says she has never had any major problems with sex clients. Sometimes they want sex the way they do it in pornographic movies, but she says no. She now receives \$50 each time for sex and has four or five clients per month. She still meets clients at work but, mostly, the clients arrange to meet her at a guesthouse by telephone.

Phary says she always uses condoms with clients because "...both the clients and she did not trust each other' and either of them could have a sexually transmissible disease".

She says, in general, condoms are available at the guesthouses and sometimes the clients bring them. Some clients use double condoms and one client even used triple condoms.

Phary does not use condoms with her boyfriend, because they both had HIV tests before having sex and "...he told her that he would introduce her to his mother and marry her if she got pregnant". She has regular health checks and feels she is well educated about HIV/AIDS and sexually transmissible infections.

Phary did not like working in the factory- she ate inadequately and the supervisors were very strict. They did not allow her to bring food to eat at the workplace, to go to the toilet or to leave early when she was sick. She also disliked working as a karaoke girl, because she had to allow herself to be selected by the clients and let them kiss and hug her. She felt undervalued.

In comparison, Phary does like working as a beer girl because she has more freedom and can work without coercion or control. Her parents know that she is selling sex, but they don't judge her, because they think all beer promoters sleep with their clients.

Case Study #3: Kolthida

Kolthida is from Kampong Thom Province and she is 27 years old. Her parents got divorced when she was one year old. She finished school in grade four, because she could not keep up with her school lessons and needed to help out in her mother's goods store. She was married at 21 but divorced soon after because her husband drank and didn't support her. She has one three-year-old daughter.

When she was 17 years old, she was given permission to leave home and work as a live in shop assistant. After 12 months, she returned home for a year before taking a job as a housemaid for a foreigner at \$60 per month.

To supplement her income, Kolthida began working nights in a factory as an examiner of cut, colour and quality of sewing on pant legs. She worked from 6.30pm to 5.00am on day contracts and received \$40 per month. Eventually, she had to leave her day job because she found working two jobs too hard to manage.

After dedicating herself just to factory work her salary increased to \$45 and with overtime she could earn as much as \$60. Because of her good performance, the trade union chair invited her to become a union representative, and she began helping other workers with their problems in the factory.

After leaving her job as a maid and beginning work at the factory, Kolthida rented a room for \$20 per month. After paying her rent, supporting her child and sending \$15-20 home to her mother each month, she had little left over.

Then in December 2008, the factory closed and all the workers were laid off. Kolthida, along with the rest, received \$500 severance pay, but her living standard worsened because of her high monthly commitments to her mother, her daughter and her rent. She did not look for another factory job, because she was bored with that kind of work.

Kolthida began working as a massage attendant in 2009 out of necessity, being introduced to the job by her neighbour. At first, she was shy but she soon got used to it. She began with \$50 per month and \$2-3 a day in tips, but now receives \$60 per month and about \$40 a month from tips.

Nowadays, as a massage attendant, she earns more money than in the factory but lives in a rented room with four younger cousins. Only one of her cousins is able to share expenses, so Kolthida pays \$30 a month, including utility bills, in addition to babysitting and other expenses for her child.

After leaving the factory, she remained quite poor and occasionally had to borrow money to get by. Because of this, she decided to have sex with the clients to earn more money.

Kolthida decides whether or not to have sex with the clients and her employer neither encourages nor discourages her.

Usually she meets the client at a guesthouse near her work. She charges \$30-\$40 for sex. She sells sex as often as the clients want her, but they only ask her for sex occasionally (about once every three months).

She says she always uses condoms with the clients; condoms are usually available at the guesthouses, but if they are not available, she tells the clients to get one somewhere else.

She never used a condom to have sex with her husband, but she does use a condom with her current boyfriend because she doesn't feel confident that they care much about each other. She has had one condom break because a client was being too rough during sex and on one occasion a condom slipped off during sex. After that incident, she had an HIV test and tested negative. She has a medical check every month and attends monthly meetings at work on HIV and health.

Kolthida was once cheated by a client who, after spending the whole night with her, asked her to arrange a motor taxi driver for herself. When she got back she found he had left without paying her the agreed amount of \$50.

Working in the factory was very tiring and she could save less money than now. Working as a massage attendant, she earns tips every day to help her get by and she can send a bit more to her mother (about \$30 to \$40 per month).

Kolthida's mother does not need to send her rice, as she did when she was working at the factory, and she does not feel that massage attendant work is harmful to her health. The downside is that her neighbours gossip about her when she doesn't come home at nights and occasionally her clients use bad language with her.

Case Study #4: Rachany

Rachany was born in 1982 in Kandal province. She is the third of four children. Her mother was a factory worker and her father died in a traffic accident when she was five years old. She went to school until grade seven, but her living conditions were very poor. They lived on their aunt's land and her family helped to work the farm.

In 2008, Rachany started her first factory job (she lied to the recruiter that she could sew when, in fact, she could not). She worked in the shirtsleeve sewing department for one month as probation.

The factory manager observed that she was weak and often fainted on the job, but she said she could continue work. At first she asked if she could avoid overtime but the manager said if she could not do over time then she would have to quit.

Rachany worked from 7 a.m. to noon and from 12.30 p.m. to 5 p.m. and overtime was from 6 p.m. to 8 p.m. with Sunday's off. Regular wages were \$40 per month, and up to about \$55 with overtime.

She stayed in a rented room with five people. Because she was very poor, her roommates allowed her to pay a share of only 5,000 or 10,000 riel per month, the lowest rate they could afford. Even with her roommates subsidizing her rent, Rachany did not always have enough money for food and sometimes she went without eating because she felt ashamed to eat meals she did not pay for (her friends were paying).

After two months, she again asked the manager if she could stop working overtime, because she couldn't stand it. Again, she was told that the factory only wanted workers who could work overtime and she was fired that same night. She received her salary without any severance pay.

After Rachany stopped working in the factory her living conditions worsened. She had to return to her hometown to grow rice.

Because Rachany's mother was sick, she borrowed money from her neighbours to buy medicines, and some neighbours gave her rice out of pity. After she had returned home for a month, she met one of her neighbours who recommended she work as a waitress.

She was told that she would receive \$25 a month and some tips every day if she worked as a waitress. If she worked as a hostess she would receive \$40 a month plus tips if she sat with clients during their meals.

She said she was willing to do any job, as long as she could earn money every day.

Rachany began work as a waitress in July 2008. She stayed in a rented house with four other people for \$25 shared between them. She worked from 9 a.m. to 3 p.m. and then from 4 p.m. to 11.30 p.m. for \$25 per month, plus about 15,000 riel in tips and one free meal per day.

At first, Rachany knew nothing about waiting tables and did as she was told, including sitting and drinking with clients during their meals. Later, when she became more aware, she would refuse to sit with clients who tried to make her drink too much beer.

She was concerned about her health because she was forced to drink beer every day. If she did not, she would not receive tips and could not send her mother her \$30 per month or purchase medicine for her.

Generally, Rachany's employer supported her in not being forced into drinking too much. However, on one occasion, he threw a party and told her, and the other staff, that if they did not sit and drink with clients, they would each lose \$5 in salary. On this occasion, Rachany was forced to drink so much that she passed out.

Rachany relates how she had sex with a client once and that it was her first and last time. The "convincing" manager told her that she would get a lot of money if she went with the client and

that she would never have enough money to cure her sick mother if she just worked as a waitress.

This potential client also tried to convince Rachany by telling her she could order whatever she wanted on the menu.

When the client asked if she would have sex with him and how much she would charge, Rachany felt upset. But then she thought of her mother at home and accepted, saying she would accept any amount the client would give. He waited for her after work and they went together to a guesthouse.

At the guesthouse, the client bought a condom; she did not know anything about condoms, and she asked the client what it was and he told her. Rachany had a boyfriend when she was at school but she never had sex with him.

The client had sex with her five or six times that night and paid her \$100 but he was very rough. She went to the doctor who told her to avoid sex for a while "because her uterus was not well".

She says she hasn't had sex with clients again.

When she has problems in the restaurant, the employer and her co-workers help solve them.

She just wants the clients to ask her to sit with them politely, but some clients speak harshly and look down on her- they do not value the women who do such a job.

Rachany's mother only knows that she works as waitress and doesn't know she had sex with that client. Rachany will not tell her mother about this, because she does not want her to be sad.

When Rachany visits her hometown, she tells her neighbours that she is a cook because if she tells them she is a waitress she worries that they will speak badly about her. They already look down on her because she is very poor.

Rachany lives better now compared to when she worked in the factory, where she was often blamed by the factory owner. She prefers working as a waitress because she gets tips for daily expenses but says the salary is still very low.

Case Study #5: Devi

Devi was born in 1979, the second of six children born to a Kampuchea Krom family; she is now a Cambodian national. Because her family was very poor, she never went to school.

Devi fell in love with a man when she was in her late twenties and now has a five-month-old baby girl. The man left her when she got pregnant; he tried to get back together with her after the child was born, but she rejected him. The girl lives with her parents, because she does not have time to take care of her.

Devi lived in a rented house in Phnom Penh with her parents until 2005 when she took her first factory job in Tak Leak as a machine sewer, working 7 a.m. to 11 a.m. and noon to 4 p.m. for \$45 per month. If she did not take any leave, she received a bonus of \$8. With overtime, she could earn up to \$70 per month. Because there was no accommodation for factory workers, she rented her own place for \$40 per month.

She was paid double for working on her days off and lost \$10 if she took work days off. She once asked for leave to visit her parents and was refused permission. However, because she was a union member, the union negotiated with the factory to give her leave. She believed the unions in the factory were useful for minor problems like this but not for serious problems because they were also being paid by the factory.

Devi worked at the factory for four years, until it closed in August 2009, when the workers were laid off with no salary and no severance pay. The workers held demonstrations for two days and one night, until eventually the factory agreed to pay them \$300 each.

After being laid-off from the factory, she describes her living conditions as bad, and she only had enough money to temporarily support the family. In September 2009, with the help of a friend, she started working as a beer promoter in a restaurant. She could earn \$10 for each case of beer she sold and she could receive up to \$10 in tips some days.

In the first month, Devi did not sell any beer and survived only on tips and selling sex to clients. Devi sends her parents \$30 per month and says if she had not started selling sex she would not have had enough money to survive or to support her daughter and her parents.

Before leaving with a client, Devi first negotiates the payment and gets paid at the restaurant, because she is afraid of being cheated. Then, after work she goes to a nearby guesthouse for sex.

She receives between \$10 and \$15 for sex and has sex with clients about twice per month. Devi is not worried about going with the clients because she already has the money and she considers herself very discerning about which clients she sells sex to.

Devi says she always uses condoms with her clients, because she is afraid of diseases. Condoms are available at the guesthouse and sometimes the customer brings them with him. She did not use condoms with her common-law husband; they had blood tests before having sex and agreed not to use condoms.

Devi says she has never been forced to have sex and has never experienced any violence from clients. She feels she has never had any problems with sex work because the restaurant owner is kind and her co-workers help her. She feels she can rely on her co-workers, as it was her friend who advised her to have her clients pay her before leaving the restaurant.

She has her health checked in Toul Kork because she was given a free health card by an NGO. She was also given a key chain with a phone number on it that she can call for advice free of charge.

Devi says her living conditions are much better now that she left the factory to become a beer promoter because she earns more money. Entertainment work is not as controlled as the factory work; if she does not want to go to work, there is no problem; nobody blames her.

Case Study #6: Bopha

Bopha, aged 28 years old, was born in Kampot province; she was one of eight children. She finished schooling in grade 2, because she could not afford her studies after her father died. Her mother was a farmer with a small rice field. She describes her living condition as very bad and she had to work to support her family with money.

In April 2006, she started at a factory job as a collar cutter. She worked from 7 a.m. to 11 a.m. and from 1 p.m. to 4 p.m. with the salary of \$50. If she did overtime work from 4 p.m. to 8 or 9 p.m., she received an extra \$30 to \$40. There was no accommodation for workers in the factory so she rented a room with three other people at the cost of \$25 a month, which they shared equally.

Bopha was allowed to have Sunday and other public holidays off; however, she had to ask for permission if she wanted to have additional days off or else her salary would be docked \$5 per

day. When the work needed to be done quickly, she was required to work on holidays and earned an additional \$3 a day. Usually, however, workers could choose not to work on holidays, if they did not want to. With overtime she could send \$30-40 a month to her mother.

Bopha mentioned that there was a doctor in the factory but the doctor could only give medicines for minor illnesses. If the workers got seriously ill they went to see a doctor outside the factory.

If Bopha became sick, but not seriously, she could ask for permission to stay home but her salary would be paid only based on the hours worked. If she fainted at work, Bopha was allowed to stay home without a salary deduction.

Bopha had to do assorted work such as collar sewing, carrying goods and counting the number of rolls of thread in boxes. Because she did a lot of work she asked for a salary increase, but she did not receive it. When she persisted in asking for a salary increase, she was dismissed from work in January 2008, receiving \$30 in compensation but no salary for the month. After she strongly protested, her salary was paid.

She visited her home on holidays but not often because she did not have a lot of money for travelling. She never became a member of any trade union.

After she left factory work she returned to her hometown and sold vegetables to support her family. After she had been at home for a few months, she went back to Phnom Penh to work as a waitress at a restaurant with a recommendation from someone she knew. In the beginning, she got \$25 for the first month and then it was increased to \$30. At the same time, she could earn from \$2.50 to \$10 a day in tips, but not every day. She describes some clients as kind, but some others were mean.

Bopha then began to earn extra income through having sex with clients. She gets \$20-100 per client, but she sometimes only has one client a month because there are not many clients inviting her to have sex. Her mother does not know that she has sex for money because she does not want to make her sad. She feels many people at work look down at her for what she does.

Normally, she negotiates sex with clients before she goes with them but she has never talked with clients about the price as part of the negotiations. Sometimes, clients wait for her after work and they go out together, however sometimes clients ask her to take a moto-taxi to the guesthouse on her own.

Bopha is afraid that some clients may torture or cheat her but she considers herself lucky that she has never faced such problems. When she has sex with clients, she says she always uses condoms, because she is afraid of infections. Sometimes she wants clients to use two condoms because she is afraid of condom leakage.

Some clients bring condoms with them and she always brings condoms herself because she got them from an NGO. She is married and when she has sex with her husband she does not use condoms and her husband would not want her to.

At the restaurant she works from 7 a.m. to 9.30 a.m., again from 1 p.m. to 4 p.m. and continues working from 5 p.m. to 11 p.m. However, if there are not many guests, she can go home at 9 p.m. or 10 p.m. Since working there, she has not been able to take any holiday, but on Chinese New Year she was given \$5 as a gift from her employer.

If she wants to take a day off she has to ask for permission otherwise her salary will be deducted. She sends her mother \$50 a month.

She always has her health checked once a month for STIs and she has had an HIV test twice.

She has her health checked at a clinic around Deum Kor Market and in Prek Leap. Also, she is a member of Smart Girl and when she participates in Smart Girl she receives \$5 to have her health checked. She learned from the Smart Girl programme that HIV is transmitted by having sex without a condom.

Comparing restaurant work to factory work, Bopha does not feel they are very much different. The main difference is that she felt more tired doing factory work and now she has better-tasting food.

Bopha does not know what her future will be like and she is afraid of contracting STIs. If she could save enough money she would like to sell vegetables in her hometown.

Case Study #7: Sotha

Sotha was born in Prey Veng Province in 1987, the second of six children. Her mother ran a small business and her father was a musician. At the age of fourteen she recognised her family was very poor and that "her parents were miserable" so she left school in grade four to work and help her family.

Her first job was working as a maid for 50,000 riels per month but shortly after starting work the husband of the house attempted to rape her. His mother-in-law heard her cries for help and intervened. She was given permission to return home soon after.

Late in September 2008 she took a job at a garment factory. At first, she sewed clothes and received \$50 per month and an extra \$5 per month if she worked overtime. She had Sunday and public holidays off but if she worked those days she could receive an extra \$3 per day. With her \$55 per month, she rented a house with seven other workers who paid \$7 each, including utilities. She sent \$25 per month to her family and occasionally they sent her rice.

In 2008 the factory stopped paying the workers for a number of months. The workers joined with other companies and demonstrated against their lack of payment. The owner then closed the factory, paid the workers their salaries and told them as soon as the factory re-opened they would be called for.

Sotha then moved to Kampongsom province and stayed at her sister in-law's but while there, a cousin stole all her money. She needed work urgently and her aunt recommended becoming a waitress.

Sotha subsequently took a job as a waitress and worked from 5.30 p.m. to 10 p.m. arranging sauce dishes, serving rice and cleaning the tables. For this she received \$25 per month. At first the supervisor at the restaurant "loved" her and did not allow her to sit with the clients so she didn't receive much in tips (occasionally \$1 or \$2).

One night during work, a client threatened Sotha with a gun trying to force her to have sex with him. She told the man to wait for her at the guest house and that she would meet him after she showered and changed her clothes. At first he didn't believe her but Sotha eventually convinced him and he left for the guesthouse.

Sotha did not go to meet him, because she was afraid that she would be shot dead. The client never returned to her restaurant.

Soon after this incident, she sold sex to a customer for the first time, for \$100. This time, she was not forced into sex and now she sells sex about once a month.

Sotha stopped working in that restaurant because she had a quarrel with her supervisor. The

quarrel began when the supervisor forced her to take care of clients at their tables and the clients were forcing her to drink. She told the supervisor that she would neither drink nor serve the clients any more. The next day she was dismissed.

After returning home for some days she came back to Phnom Penh and began working as a hostess (her niece was working at a restaurant and recommended her). She works from 6 p.m. to 10 p.m. and her job is to greet clients at the gate and usher them to their table and, if asked, she also accompanies them at their table. She is paid \$35 a month and receives \$5 per month in tips. If she has sex with the clients she can earn \$25 to \$30 per client. Combining her hostess job with sex work she earns a total of \$200 per month.

Sotha negotiates the price of sex with clients in advance and arranges to meet them at a nearby guesthouse. She is cautious every time she goes with a client, because she is concerned they might treat her badly. Once, a client was having sex with her for such a long time that it was becoming painful; she asked him to stop, but he refused. She thinks he may have been on drugs.

Sotha says she always uses condoms with clients. Some clients ask her to have sex without a condom, but she never agrees. Condoms are available at the guesthouse and sometimes the clients have their own.

She is currently living with her lover who is working in a bar and he sends half of his salary to his own mother. Her lover pays \$25 monthly rent for their place. Sometimes, she uses condoms when having sex with her lover, to prevent pregnancy, and sometimes she does not. When she does not use a condom her lover uses the withdrawal method.

Sometimes her lover goes away and leaves her for some time. Neither her parents, nor her lover knows that she sells sex. They may suspect, but they dare not ask her about it.

Sotha believes working in the garment factory is harder than working as a hostess. When she was working in the garment factory she was reprimanded if she went to the toilet.

She doesn't want to work in the garment factory anymore because it was not comfortable, she did not have holidays and if she did not want to go to work she had to ask for leave.

In the entertainment sector her co-workers are indifferent towards each other and she says, the manager "blames" all the workers. In some ways, she liked working in the factory more than working as a hostess because, as a hostess she pities her lover (because she is having sex with

other men).

She once went to a private clinic for a gynaecological problem but she has never had an STI check-up. People have asked her to go for a check-up but she was always too busy.

Case Study #8: Sorpheny

Sorpheny was born in Svay Rieng Province in 1984. She is the third of seven children. She dropped out of school in grade five because her family needed extra money. Her father was a farmer and her mother was a vendor. The family sold their farmlands and moved to live in Phnom Penh in the year 2000. After that, her father made a living by driving motor taxis and her mother was a housewife.

At nineteen, Sorpheny got married to a mechanic and moved in with her husband and father-in-law. Her husband became hospitalized so she is now the main income earner and pays the rent. She has a young daughter who is staying with her grandmother because she has no one to take care of her while she is at work.

When she arrived in Phnom Penh with her family she started working as a piece-rate trimmer at a garment factory. She worked from 7 a.m. until 6 p.m. and earned \$25 to \$30 per month; with overtime she might earn up to \$40. Later, she started sewing and could earn up to \$65 with overtime.

When she was sick she asked not to work overtime but factory management threatened to dismiss her. She was never allowed to have sick leave because they were afraid they would not meet their deadlines. Unless she passed out at work, or there was a death in the family, she could not take days off.

While she was working at the factory, she rented a house and lived with eight people, including her parents. The rent was \$25 a month and she paid a total of \$40, including utilities. Whenever she got paid she could only keep 20,000 riel with her and the rest she gave to her mother because she felt pity for her father who tried to make money alone.

In June 2008 the factory was closed because of the economic downturn. She lost her job and was paid only \$100 including salary, incentives and severance pay.

After the factory was closed, her friends asked her to work as a hostess at a restaurant. She took

the job which was to welcome customers and accompany them to the table. She would join her customers at the table if they requested it. She worked from 5 p.m. to midnight and got \$65 per month; she could, however, earn up to \$80 with tips.

There were no days off at the restaurant and if she came late \$2 would be deducted from her pay. She would also lose \$10 each day she took leave. She supplements her salary by having sex with customers. The owner does not reduce her salary when she leaves the premises with them.

She has had a number of problems while working at this restaurant. Customers sometimes get angry and want to hit her when she refuses to sit with them at their tables or when they do not think she is friendly enough with them. On occasion customers have broken glasses if she makes phone calls while sitting with them.

These incidents make her supervisor furious. The manager just cares about the customers and the owner looks down on her and tells her that doing this kind of work she needs to satisfy the clients.

Sorpheny also has problems with her co-workers because the customers sometimes request her more than her colleagues and as a result some co-workers have threatened her because they thought she was taking away their customers. Once, a co-worker hit her and pulled out her hair but fortunately a security guard came and broke up the fight.

Sorpheny started having sex with customers at the restaurant because her friends persuaded her to. She gets \$20 to \$40 each time she sells sex and that is about twice per month. Sometimes, she negotiates the price before going to a guesthouse with customers, but it depends on the customers. She sends her mother \$80 a month and keeps \$20, because her husband never asks her how much she makes.

She is always concerned about her safety with the customers, but luckily she has never had any problems. She has had customers try to force her not to use condoms, but she never agrees with them and they usually go away without problems because there are security guards at the guesthouse. Some customers have used double condoms with her. When she has sex with her husband, she never uses condoms because they trust each other as husband and wife.

She has her health check-up every three months for HIV and she pays for it herself.

Compared with factory work, Sorpheny says her new work is easier because she only works

nights. At the factory, she worked all the time. She liked sewing but she disliked the owner blaming her and looking down on her.

She still gets looked down on for working at the restaurant because it involves sex work but the work is not as difficult as at the factory. Basically, she does not like either kind of job and if she had enough capital she would start a small family business, such as selling things at a market.

Case Study #9: Vannary

Vannary was born in 1971 in Kampong Chhnang province but the family moved to Khan Daun, Phnom Penh when she was a baby. She is the youngest of six children. Her mother worked as fruit seller and her father died when she was four years old.

Vannary left school in grade three because the family couldn't afford her education and she was needed to help earn money. In the early 1980's, the family moved to Tuol Kork, Phnom Penh and, by this time, she was already a breadwinner and a decision-maker on all problems in her family because her mother was quite elderly.

Vannary got married in 1993 and had two children. She divorced her husband, because he did not get along with her mother and because he had another lover and left her at home alone regularly.

In 1999 she worked in a garment factory for a year as a rim maker, earning \$35 per month before delivering her second child. In 2002 she started to work as a waitress at a restaurant near her house- she knew the restaurant owner and he allowed her to work there. She worked from 6 p.m. to midnight serving ice and was paid \$45 per month. She could earn up to \$40 extra per month in tips.

She took her second factory job in 2003, this time as a colour controller. She worked from 7 a.m. to 4 p.m. with an hour for lunch and was paid \$50. She received an extra \$5 if she didn't take a day off during the month and with overtime she could earn up to \$80 per month.

She was dismissed in 2008 because the factory manager believed that she didn't work enough overtime and was often absent from work. They paid her a month's salary as compensation but no severance pay.

In 2007, overlapping with her garment factory job, she began working as beer promoter. She

worked for different companies as both a contract worker, where she earned \$50 to \$60 per month, and later as a freelance worker paid by the number of bottle tops she presented to her manager. After a while she was able to sell an average of three to seven bottles per day. At \$1 per bottle cap, she could earn about \$100 per month and she occasionally received tips.

Vannary has been working as a beer promoter and selling sex for more than a year. She only sells sex to one man. Each time she has sex with him, he pays her \$29 to \$50. In total, she earns about \$100 to \$200 per month from selling sex. When she had sex with her husband, she never used a condom, because they were married. With her client, she uses a condom and feels confident that she is skilful in using it.

She gives money to her mother and she saves some money to run a business back home. Her mother knew that she was working in a garment factory but she does not know she is working as a beer promoter or that she is selling sex.

While working at the factory, an organization used to come during lunchtime and provide training on HIV, STDs and how to use condoms. That organization sent her to have her health checked for free. She used to have her health checked once per month, but now does not do so regularly as she feels, in the case of an emergency she can have a health check free of charge.

While she was working in the garment factory she joined a union and became a union representative. As a representative of the union she could follow up on complaints for other workers. If she had any problems she could ask the union office for help.

She feels the work she is currently doing as a beer promoter is very dangerous. Sometimes, when clients get drunk, they follow her and beat her. Occasionally, the manager has protected her, but not all the time. She would like the restaurant to establish a union, so she can have more rights and be treated with more respect when she talks to clients.

Vannary has nothing good to say about her factory work. She had to stand all day long and if she went to the toilet too often she was reprimanded.

She does not like sex work but says working in the restaurant is better than working in the factory. At the restaurant she receives tips and works shorter hours. Life was difficult in the factory: she could hardly pay for food, let alone her child's education.

She is aware that there has been an economic crisis because there used to be many more

customers. There are now only a few and life is really more difficult. She eats less or more depending on how much money she has and she sometimes needs to borrow money from her neighbours.

Case Study #10: Sony

Sony is 34 years old, born in Kampong Cham province; she was the second of six children. She describes her living conditions as a child as "terrible". She dropped out of school in grade three to help her family make money. Her father was a supervisor at a wood processing factory but died of an illness in 2000. Her mother sold food but stopped work due to poor health; she and her siblings now support their mother. She sends \$10 to \$20 home each month and returns home once per year to visit.

She married a motorcycle broker but he died of an illness a few years later in 1997. They had two children, a son who lives with her mother-in-law and a daughter who lives with her mother, both are now teenagers. Shortly after her husband died in 1997, Sony started work as a karaoke singer in a Phnom Penh restaurant. She worked from 4 p.m. to midnight and sometimes as late as 3 a.m. or 4 a.m. She got \$45 per month and could earn up to \$55 with overtime and an additional \$30-\$40 in tips.

In 2000 she met another man, a motor taxi driver, and had two more children. Her second partner did not help to support the family and they separated, taking her two young children with her.

In 2003 she took another factory job as a colour examiner. She worked from 7 a.m. to 5 p.m. and received \$45 but could earn up to \$80 with overtime. In 2007, for a short time, she took an additional job as a beer promoter at a restaurant and was paid per bottle top. In 2008, during the financial crisis and after five years of working at the factory, she was dismissed for being sleepy during work and for not doing enough overtime.

She returned to the Phnom Penh restaurant after losing her factory job. Instead of karaoke, this time she started work as a waitress, a job she currently holds, and earns an extra \$35 per month.

She sells sex two or three times per month to supplement her salary, receiving \$20 to \$30 each time. She started to sell sex soon after becoming a karaoke singer. She arranges to meet with her clients at a guesthouse and she never discusses the price for sex in advance.

She describes how some clients force her to "have sex like the movies," don't pay her, or slap her in the face. When she has an abusive client there is no one to help her and she has to "struggle" for her money.

She said that her employer does not allow her to have sex with clients, but she does it by herself because she needs money and she cannot depend only on her salary. In the past, when she had sex with her partners, she did not use condoms, since she considered them her husbands. However, after having two children, she used condoms when having sex with her husband, in order to prevent pregnancy. In addition, she was afraid of sexually-transmitted infections.

Nowadays, she always uses condoms during sex with clients. She says they are available at the guesthouse, or the clients bring their own. She recounts how "some clients do not want to use a condom and sometimes I refuse to have sex with them". There are also some clients who remove their condoms while having sex.

Once a client asked her not to use condoms and so she asked him, "Aren't you afraid of me?" He replied, "I am not afraid of you" and she was shocked by his reply and allowed the client to have sex with her without a condom two or three times.

Once while having sex with a client the condom broke.

An NGO visits her workplace once per month and teaches about HIV/AIDS and syphilis. The NGO representatives explain that she should protect herself and others by using condoms.

She tested HIV positive a few years ago and started ARV treatment before the birth of her last child who has subsequently tested HIV negative. When she learned the result of her blood test she was very upset and her weight decreased from 60 kg to 40 kg.

She said that if she had been aware of HIV since she worked at the factory she may have been able to prevent herself from becoming infected.

All her family members, including her mother, know that she is HIV positive. However, she says, "they still love and encourage her".

She has never told anyone in her workplace she is HIV positive and receives no support from NGOs or others. If she has health-related questions she asks the staff at the health centre.

She is getting older and with the economic downturn it is becoming more difficult to earn money. She sometimes borrows money from her co-workers to buy food for her children.

She did not like garment factory work but did so to earn her living. She considers that, comparatively speaking, she is now quite well paid, although at her factory job she was not looked down on as she is now. She wants to run a small business selling fruit; she cannot afford it now but hopes to do this in the future.

ANALYSIS OF INTERVIEWS

Background

The women whose stories appear in the previous pages were aged between 17 and 38 with an average age of 25. Most of the women were from rural or semi-urban areas and from a range of provinces across Cambodia. Their childhoods were characterised by poverty, low levels of formal education and, in a number of cases, childhood labour and neglect.

Their parents were primarily farmers and small food vendors with a few working in construction or factory jobs. All of the women came from large families: three women were from families with less than four children, although most came from families with more than five children, and one came from a family of more than eleven children. All of the women described their childhoods as “poor” or “very poor”.

Child labour¹³ was a common theme within the workers interviewed. Four of the women were working before they reached their teens and most were working during their early teens. Child labour for the very young involved work as street food vendors and maid servants; for those that started as older children, working in a family business was common. One began garment factory work at age 14.

Childhood neglect and abuse was not uncommon within the group, with reports of neglect resulting from parental alcohol abuse and (in two cases) gambling debts. There was one report of childhood sexual assault while at work as a maid servant.

The women's school education ended between grade one and grade seven with the average being grade four; one did not attend school because she was poor and because she was Kampuchea Krom. Reasons given for low levels of schooling were:

- Poverty: being needed to work and support the family.
- Cultural beliefs: not viewing education as necessary for girls whose “work is never far from the kitchen.”

There was one report of schooling being denied entirely and five reports of girls being withdrawn from school at a very young age. This needs to be viewed against the backdrop of the late 1970's

¹³ *Defining child labour*, <http://www.ilo.org/ipec/facts/lang--en/index.htm> (accessed 15 May 2011).

and 1980's when many of the participants were children. Most teachers had either fled from or been killed by the Khmer Rouge and schools were not beginning to function again until the early to mid 1990's. For the parents of these workers providing formal education for their children must have been extremely challenging and for some it may have been impossible.

About half of the women were married in their late teens and early twenties; one was widowed and all but one was subsequently divorced. Four of the women had long-term relationships with men; all but one had separated. Two have had no long-term relationships to date. The reasons for divorce and separation were invariably due to their husbands' alcohol abuse, their husbands' general neglect of their family responsibilities and/or their relationships with other women. Four of the women had children with their male partners before separating; most of the children are in the care of relatives whom the women support financially.

Starting work at the factory

Most of the women started working in the factory in their late teens and early twenties. Four of the women paid bribes to secure their first factory job, three used the influence of friends or family and the rest obtained their first factory job through standard means. The types of work at the factory varied between fabric cutters, machinists, detailing (buttons, collars etc.), quality examiners, and ironing and packing.

Although factory work seems to have lifted these women out of rural, subsistence living, life at the factory was difficult for them. The women's accounts of their time at the factory are characterised by stories of long hours, hard work, overcrowded living quarters, poor health, hunger, feelings of being driven by factory managers and of being overburdened financially. When asked about their time at the factory, none of the women spoke about a newly-found sense of independence, friends or other such aspects of their new lives in the city.

Even with overtime, salaries were often too low to meet their commitments and forced them to go without basic necessities. One woman reported that she did not eat regularly because she felt ashamed that her friends had to pay for her food. Most of the women earned between \$40-45 per month, going up to between \$60-90 depending on overtime worked. Their standards of accommodation during this stage of life were basic, in line with their salaries. Two women lived with relatives, but most lived in rented rooms that were shared with large numbers of other women (most with four or five other women sharing one room).

Conditions in the factory were harsh. Many women reported low pay, long hours, forced overtime, being forced to work while sick, poor hygiene, regular illnesses from exposure to chemicals and long hours of standing. Their life outside the factory was limited and few had the time or money needed for leisure, to maintain regular visits to family, or to eat properly.

Leaving the factory

The women were selected for interview on the criteria that they were current entertainment workers who sell sex and who had left the garment industry during or after the global financial crisis. Not surprisingly, almost all of them could attribute leaving their factory jobs to the global financial crisis. One woman resigned from her garment factory job prior to the financial crisis. Of the remaining women, half were laid off as a result of factory closures due to the global financial crisis and half had their contracts terminated prior to the factory closing for complaining about not being paid, complaining about being shorted, or asking for more pay. One woman was reportedly fired for poor quality workmanship after having been employed at the same factory for a number of years.

Severance pay was rare, with one woman receiving \$20 severance pay, another \$300 and another \$500. Most women received no severance pay, including one woman who had worked at the same factory for nine years.

Entertainment work

Most of the women returned to their family homes for a brief period after losing their garment factory jobs. Some of the women did not have the option to return home and stayed in the city looking for work. Both groups had financial commitments and describe this period as "miserable." All turned very quickly to the entertainment sector and supplemented their income with sex work in Phnom Penh.

The women moved into all types of entertainment sector jobs, including: beer promotion, karaoke, massage, waiting and hostessing. Some took concurrent jobs- waiting in the day and promoting beer in the evening. Base salaries vary but range from \$25 to \$60 per month with some women working as freelance beer promoters and being paid for each bottle cap they presented to the manager. The women supplement their income with tips for sitting, talking, entertaining, kissing and cuddling the guests. Once established in their new jobs, some women report earning most of their monthly income in tips, one beer promoter reporting up to \$150-\$200 per month in tips alone.

Although struggling financially, in general, the women describe greater satisfaction with their standard of living after working in the entertainment sector - with examples of women moving into better accommodation, sharing rooms with fewer people, working shorter hours, being able to send more money home or supporting more family members. The contribution of entertainment work alone to this increasing satisfaction with life is unclear, as some of the women began indirect sex work very soon after starting their entertainment sector jobs.

While their standard of living outside work hours was improving, they were generally not happy with their working conditions. This is illustrated by a quote from one of the karaoke singers who felt undervalued by her work, saying, in the words of the interviewer, she had to “....queue in a row like a sale product waiting for clients to choose....some clients were as old as her grandfather and some were as old as her father and they asked her to call them ‘darling’”. She was repulsed by these men and eventually stopped working in karaoke lounges in favour of beer promotion.

Sex with clients for money

Generally, salaries in the entertainment sector are so low that eventually all of the workers interviewed began to supplement their income with sex work. The underlying reason for all of the women beginning to sell sex was their financial commitments, including accommodation and food but also often related to commitments to support their mothers, siblings or cousins. Most made the decision to sell sex independently, although a few said they were convinced (but not forced or coerced) to sell sex by someone else.

For sex, the lowest paid worker charges between \$10 and \$15 per client, and the highest paid charges \$100 per client; the majority of workers charge between \$30 and \$50 per client. Some of the workers had boyfriends who paid them in money and gifts over long periods of time (in addition to their regular sex work); one worker had a Khmer French lover who paid her \$200 per month. Others only occasionally sold sex when money was needed. Women considered younger, good looking and inexperienced are more highly sought after and generally paid more.

Some of the participants in the follow-up focus groups reported that there are fewer clients following the global financial crisis, but most individual workers interviewed reported having four to six paying clients per month. Follow-up focus group participants believed that their job has become more difficult and that before the crisis there were many clients. Afterwards there were about two to three clients per month and at the same time as their income was being reduced, living costs were increasing.

Sex with clients is usually negotiated at work directly between the sex worker and the client. Once sex is agreed upon, beer promoters, waitresses and hostesses usually arrange to meet the men after work at a nearby guesthouse. For karaoke and massage workers, rooms are available on site and sex can happen either immediately in a room rented by the hour, or they may also arrange to meet at a guesthouse after work. Many of the women also make appointments by telephone particularly with regular clients with whom they also arrange to meet at local guest houses. One woman reported arranging most of her sex work by telephone appointments.

Although many of the karaoke and massage lounges are thinly-veiled brothels, in Cambodia benefiting from other people's prostitution is illegal. As such, most karaoke and massage lounge owners ensure that their profit is not linked directly to the sex work. Most owners charge for room rental, drinks and a fee for massages and karaoke. Many of the women working in massage parlours have no income unless they are chosen by a client and then receive a token fee of \$1 for the massage that they may or may not provide. Sex is privately negotiated between the worker and her clients.

Occasionally, managers or supervisors of beer gardens and restaurants introduce clients to the workers who, in turn, pay a small commission to the manager. However, such commissions are not compulsory, and the workers report that there would be no repercussion if they did not pay the commission; the manager would simply stop introducing clients to them, which they seemed to be unconcerned about.

The women's relationship with the guesthouses seems important to their sense of safety. Some of the workers rely on security at the guesthouse for protection and to supply condoms for their rooms. Neither the in-depth interview nor the focus group participants discussed paying commissions to the hotel managers who seem to generate their income solely from high turn-over (hourly) room rentals.

Condoms with clients

Nearly all of the workers interviewed reported using condoms always; condoms are generally available in the guesthouses where sex happens and the workers also carry condoms with them. When no condoms are available, they send the client or a staff member of the guesthouse to get one. One worker reported a condom breaking due to "strong sex" and one occasion where the condom slipped off.

Some clients request sex without a condom, but most of the workers interviewed said they are able to negotiate their use by explaining the risks. According to the interviewer, one worker admitted that she “...sometimes does and sometimes doesn't because the clients rejected using the condom...even when she tried her best to explain to them”. She said that these clients did not want to use it because they “...paid her in exchange for their comfort. They want to have natural sex with her naturally. Hence the only thing she could do was follow them”.

Another worker reported that a client did not want to use condoms with her, and she asked him “aren't you afraid?” When he replied that he wasn't, she was shocked but allowed him to have sex two or three times without a condom: she later tested HIV positive¹⁴. Follow-up focus group participants reported that some workers do not use condoms with their regular clients because they trust each other.

Condoms with non-commercial partners

One worker said she used condoms with her boyfriend because she did not feel confident with him, and another said she used them because she was scared of diseases. The remainder all reported having sex with their non-commercial partners without using condoms.

One woman simply said she “was once loved and asked to sleep without using a condom.” Initially, she refused but, eventually, the man persuaded her that, if she agreed, he would do everything she wanted. Another said she did not use condoms with her boyfriend, because he would “introduce her to his mother and marry if she got pregnant,” so they both got tested for HIV and began having sex without a condom. Reasons for not using condoms were related to feeling loved and trusting the man involved. Focus group participants believed that workers agree to sex without condoms with their non-commercial partners for fear of losing them or being judged by them as not being ‘good’ women.

Abuse: Verbal, physical, sexual

All of the workers experienced some form of workplace abuse- ranging from verbal abuse to serious physical and sexual assault. One worker reported meeting a man at a nearby guesthouse who had rough sex with her five or six times, refusing to stop. Another met a client who had sex with her “like the movies” and would not give her any money and slapped her. Another two

¹⁴ This worker has a history of occasionally not using condoms with commercial partners and never using condoms with two non-commercial partners- one whom died of an unspecified illness. She may have been HIV positive before this incident- but it illustrates her view of herself as the one to be feared by men, not the reverse.

women reported clients who left without payment or robbed them. Follow-up focus group participants also recounted numerous anecdotes of their sex worker colleagues being abused by clients. One focus group participant was detained at a guesthouse after having sex with a client who held a gun on her and who refused to let her leave: she eventually negotiated her escape unharmed.

Importantly, most of the reports of abuse experienced by the workers themselves (i.e. not anecdotes or stories of friends) occurred within their formal work setting and not within the context of their sex work:

- Most of the workers experience verbal humiliation and abuse- clients yell abuse or humiliate them for not agreeing to sit with them or simply because the clients believed the women were not respectable.
- Almost all workers had been forced to drink excessive amounts of alcohol, either by the clients or by managers. One worker reported an experience of one client forcing her to drink until she passed out; another reported her manager forcing her to drink with clients at a private party or lose pay.
- One worker had her drink spiked by a client while at work with what she now believes was methamphetamine.
- All of the women reported being concerned about violence when clients get drunk. One beer promoter told of being abused and kicked by a regular client who accused her of making him drink too much. Rather than receiving assistance from the establishment's manager, she was dismissed to appease the client.
- Three women reported sexual assault or attempted sexual assault within their place of employment. One, mentioned previously in this report, was raped by her boss' brother. Another woman was forced into a car while leaving her workplace and was driven away against her wishes for sex (although she was able to negotiate her way out of the car and escape). Another woman reported being threatened at gunpoint while at work and forced to agree to sex with the customer (again the worker was able to negotiate her escape without having sex).

Comparing factory life with entertainment work and sex work

Almost all the workers preferred entertainment work and sex work to working in garment factories. Most felt life was harder in the factories, where they worked long hours, were poorer, didn't eat regularly, and were less able to support themselves or send money home to their mothers. Factory managers were strict and controlled them to the point where some workers complained that even going to the toilet was an issue. Hygiene was poor and they were concerned about the health consequences of being exposed to chemicals and standing in one place for long hours.

By combining entertainment work with sex work, these workers can send more money home to their mothers, pay their living expenses and still have some money left over for themselves. Their families do not need to send them rice, they work shorter hours, have more time with their families and have more freedom.

The workers felt the basic salaries in entertainment jobs were too low and would prefer not to have to be “selected by clients like products”, have sex with them or tolerate their abusive behaviours. Neither do they like being looked down on, gossiped about or verbally abused by other members of society. Some of the workers do not see entertainment or sex work in their long term future and are making plans accordingly. Others see it as a valid work choice and one that should be respected.

Regardless, most felt combining entertainment work and sex work, with all its pitfalls, was preferable to garment factory work and would not return to the factory even if they were offered a job.

Family links

One worker said her family knows she is a beer promoter and that she has sex with clients, but they do not judge her. Another worker said her family may suspect she has sex with clients, but “they don’t dare talk about it.” On the whole, most workers’ families know about their work in the entertainment sector but are unaware that they sell sex as well.

Almost all of the women have assumed some responsibility for supporting their family. This is usually in the form of remittances home to their mothers (usually between \$20-40 per month) or by taking in and caring for younger siblings/cousins. The financial burden of these

responsibilities is daunting for most of the women, and they often place their families' needs above their own basic necessities.

Health checks

All of the women interviewed were identified through a local community-based organization and as such were well connected to clinical health services as well as health promotion programs. Almost all of the women were able to confidently describe how HIV is transmitted and were in the habit of having regular sexual health checks. This may not be the case across the board given the very large, and sudden, influx of women entering the entertainment sector and selling sex following the global financial crisis.

Unions and associations

Four of the sixteen workers interviewed were members of a union while working in the factories and two of these were union representatives. One worker did not join the unions at the factory, because she said she “prefers quietness”. As a result of the selection process, almost all of the women interviewed were members of NGO associations. Some of the women saw a role for the unions in the entertainment sector to provide better working conditions and to help make entertainment work more respectable.

Conclusion:

Vulnerabilities of indirect sex workers and steps to address them

The entertainment and sex sectors in Cambodia are complex with multiple areas of overlap and numerous stakeholders. Many of the vulnerabilities and risks that workers in both industries face stem from the underlying structural and policy issues surrounding them. Without responding to these issues, many of the specific risks these workers face, including HIV/AIDS-related vulnerabilities, will not be reduced.

▪ Gender

Male sexual and social behaviour in Cambodia is the predominant driver of both the entertainment and the sex sectors. The expectation that men will have multiple, concurrent sex partners (including sex workers, casual sex partners and their wives) and the belief that women in the entertainment sector are available for their pleasure is rarely questioned. Cambodian sexual and social norms place both men and women at risk: men through social pressure to comply with the norm and women through the men's sexual and social behaviours. In the absence of broader community awareness campaigns addressing gender, the pragmatic decision to focus prevention efforts on sex workers reinforces the gender norms at play in Cambodia.

▪ Conflation of sex work and entertainment work

A serious problem for the entertainment sector and the sex industry (as well as services trying to reach them with health and other services) is the conflation of the two sectors in common dialogue. The euphemizing of sex work as entertainment work unnecessarily complicates both discussion of, and service delivery to, one of the most vulnerable groups in society- sex workers. Without the ability to have a frank discussion about sex workers and their use of the entertainment sector to meet clients, the entertainment industry will continue to be viewed as a cover for the sex sector and entertainment workers will be regarded as sex workers. The corresponding stigma and discrimination attached to entertainment workers heightens the abuse they receive both at work and within the community.

▪ Industry regulation

Entertainment workers are vulnerable on a broad front. After conducting interviews with stakeholders, technical experts and the workers themselves, the single most important factor

contributing to the vulnerability of entertainment workers is the lack of regulation within the entertainment sector. Venues open and operate with very few requirements or incentives to ensure the safety of their customers or staff.

Undoubtedly workers face a number of serious risks once they agree to sell sex to a client, some of which are discussed below. However, importantly, most of the vulnerabilities raised during the course of the situational analysis point to the entertainment establishments themselves as the place where most abuses occur. Beyond not having a simple contract that provides workers with a living wage and protection from unfair or unsafe conditions, these workplace abuses range from verbal slurs to forced alcohol consumption to serious physical and sexual assaults. They all occur within the workers' place of formal employment (the entertainment establishment) while they fulfil their duties as entertainment sector workers, not necessarily only while selling sex.

It is unlikely that the key vulnerabilities of entertainment workers will be addressed unless fundamental changes take place to properly license, regulate and monitor the overall operations of entertainment establishments.

- **Wages**

Wages are fundamental to workers' decisions to sell sex; entertainment sector wages are currently such that most entertainment sector staff are compelled by necessity to supplement their income by accepting tips for tasks such as kissing, cuddling, drinking with and entertaining male clients. For many workers, selling sex is one of the only means of earning enough money for them to survive.

- **Unions and associations**

The need for workers' representation to government on conditions of employment in the entertainment sector is an essential precursor to reducing workplace vulnerability. Entertainment sector unions in Cambodia have low coverage within the sector and those that exist are quite weak. The Cambodian Food Service Workers Federation and the Independent Democratic Informal Employees Association both represent entertainment sector workers on conditions of work. Both organizations are relatively new and focused on building their memberships and their capacity to act on their members' behalf.

A major barrier to their development is the heavily funded NGO based workers associations that act as a proxy for the workers' voice in various forums. The NGO based associations have had great success in moving forward their HIV/AIDS health agenda and have made a major contribution to reductions in HIV prevalence in Cambodia, but none are in a position to advocate change for overall working conditions within the entertainment sector. In effect, despite their success in the area of health and HIV/AIDS, the NGO backed associations inhibit the development of the sector as a whole by inhibiting the growth of grassroots workers' organizations with an independent agenda and access to industrial relations negotiations.

▪ **Law on Suppression of Human Trafficking and Sexual Exploitation 2008**

Regardless of its intent in the area of child protection and anti-trafficking, the effect of the *Law on Suppression of Human Trafficking and Sexual Exploitation* has disrupted outreach to sex workers and has increased their vulnerabilities. The impact of the law was almost immediate following its introduction, causing brothels to reinvent themselves as entertainment establishments and brothel based sex workers to establish themselves as entertainment workers.

▪ **Rapid, large influx of women into entertainment sector and selling sex**

Large-scale unemployment caused by the economic downturn has resulted in an increase of approximately 21,000 entertainment workers in Cambodia in the space of six months. The magnitude of this shift, combined with the complexity caused by the introduction of the *Law on Suppression of Human Trafficking and Sexual Exploitation* means that services need to be scaled up rapidly to provide prevention education and clinical care to almost three times the number of beneficiaries expected during project planning.

Some of the more experienced entertainment workers who sell sex reported that since the global financial crisis, client numbers have reduced and, with the influx of large numbers of women entering the entertainment sector, competition has increased. A concern for many is that the inexperienced workers may place themselves at higher risk in order to secure clients.

This study identified the following key vulnerabilities faced by workers in entertainment sector jobs:

▪ **Workplace violence and abuse**

Workplace abuse and violence was experienced by almost all of the women who participated in in-depth interviews for this situational analysis. Focus group participants related numerous anecdotes of friends who had been abused, robbed and/or physically or sexually assaulted. A USAID study conducted in 2006 on violence and HIV risk among Phnom Penh's sex workers found that 90 per cent (of a sample of 1000 women) had been raped at least once in the previous year, many of them gang raped. The abuse of sex workers in Cambodia is an extensive and well-documented problem that needs urgent attention.

Of interest for this situational analysis, was the extent to which violence and other forms of abuse that occur during work hours within the entertainment establishments themselves. The list of abuses experienced by entertainment workers in entertainment establishments during work included: verbal abuse, physical assaults, sexual assaults, being drugged, being forced to drink alcohol, being threatened at gun point and being abducted while leaving the workplace.

Far from being a safe place to work, the picture that emerges from these interviews is that entertainment establishments are places in which workers are made vulnerable to serious harm while carrying out their regular duties.

▪ **Skills to negotiate safety**

Many of the approximately 14,000 new entertainment workers that have entered the industry between 2008 and 2009 (see NCHAD and KHANA figures, page 14) and do not have experience in dealing with unwanted sexual advances from clients and male staff members, or with drunk, unreasonable or abusive clients. They also have little experience in declining invitations to sit and drink with clients or have the skills to build support networks in the workplace that may help them to defuse difficult or potentially dangerous situations.

Many of these workers are also new to selling sex and may not be aware of the dangers or knowledgeable of how to minimise their risks. With most stakeholders focusing their attention on the issue of workers using condoms, the workers themselves are often more preoccupied with the more immediate risks of theft and violence and they are left to address these problems alone.

The lack of skill and experience in dealing with potentially dangerous situations (both within the entertainment establishment and sex work environment) place the workers at serious risk.

- **Condoms with clients**

Stakeholders interviewed for this report expressed the belief that condom use with clients was very high among entertainment workers who sell sex; this was reinforced by both the focus group and in-depth interview participants. Two of the women reported sometimes not using condoms with clients. Both women described how they often negotiated condom use but also gave examples of where they were unable to convince the client, who either refused or persuaded the worker to have “natural sex”.

These two reports of sex without condoms are exceptions within the group interviewed for this report, although it is possible that there is underreporting. Low condom use may also be more common among groups of workers involved in street based sex work or who work in entertainment establishments that are not being reached by health workers.

The inability of women in entertainment establishments to access sexual health services may mean that the overall condom use rate declines among entertainment workers who sell sex.

- **Condoms with non-commercial partners**

Almost all of the workers interviewed reported having sex without condoms with non-commercial partners, including both husbands and boyfriends. They also reported having sex without condoms with men whom they didn't regard as commercial clients but from whom they accepted regular gifts, money and other forms of support. The reasons given for sex without condoms were related to love, trust and the worker not wanting to be viewed as a “bad woman”. Given the generally-accepted norm among Cambodian men of having multiple sex partners and regularly visiting sex workers, the stakeholders signalled that sex with non-commercial partners places these women at serious risk to HIV and STIs.

- **Alcohol**

Excessive, chronic alcohol abuse is a major issue for the entertainment worker in Cambodia. Clients expect that, when asked, any female entertainment worker should be available to sit, drink alcohol and entertain them. A key duty of the entertainment worker is to encourage clients to purchase more food and alcohol, and, as such, establishment owners encourage workers to sit and drink with clients. Salaries are generally set so low in the entertainment

sector that workers, in order to earn a living wage, need to earn tips and, therefore, agree to sit, drink, and entertain the guests in anticipation of supplementing their wages.

Focus group participants at one karaoke lounge reported drinking between ten and 12 cans of beer each night. One woman reported regularly drinking one litre of wine per night and another woman reported drinking an entire bottle of scotch with a group of clients in her karaoke lounge. Two workers were forced to drink until they became unconscious.

The health risks for workers of chronic excessive alcohol are obvious, as is the potential harm caused by their own errors in judgement and their vulnerability to abuse by others.

KEY RECOMMENDATIONS FOR WORKPLACE ACTION TO REDUCE HIV VULNERABILITIES OF INDIRECT SEX WORKERS IN THE ENTERTAINMENT SECTOR.

There are already a large number of NGOs providing direct education and clinical outreach interventions to entertainment establishments. The organizations collaborate well together and are co-ordinated by the Phnom Penh Provincial AIDS Office to ensure overlaps and duplication is minimal. It was generally believed amongst the stakeholders that coverage was such that there was no need for an additional implementing partner in Phnom Penh, targeting entertainment workers with similar outreach education projects.

There was however a belief among the stakeholders that the tripartite partners had a unique role to play in addressing underlying vulnerabilities resulting from structural and policy issues within the entertainment sector, and also in bringing to the fore workplace specific strategies as indicated in the options proposed below.

1. Co-ordinate occupational health and safety interventions in the entertainment sector

The role of the tripartite partners, working through the existing tripartite Technical Co-ordinating Committee on HIV/AIDS (TCC), chaired by the Ministry of Labour and Vocational Training would be to:

- i) Form a working group, of TCC members and stakeholders in the entertainment sector.
- ii) Develop a mechanism to monitor and report on occupational health and safety within the entertainment sector, and conduct regular on-site inspections of conditions at entertainment establishments, in partnership with the Ministry of Tourism, the Department of Occupational Safety and Health of the Ministry of Labour and Vocational Training, employers and unions.
- iii) Work with the Ministry of Tourism to improve the license conditions for entertainment establishments, and include as a condition compliance with *Prakas 086 on the Creation of HIV/AIDS Committees in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace*.

- iv) Oversee project design on implementation of *prakas* 086 within entertainment establishments support the efforts of National AIDS Authority (NAA) and partners to *extend* the coverage of sexual health services to entertainment establishments and ensure consistent condom use in commercial sex.
- v) Work in partnership with the Ministry of Women's Affairs and representatives of men's and women's health associations to identify opportunities for addressing underlying gender issues.

2. Bring a workplace perspective to prevention and care initiatives and strategies

The role of the tripartite partners would be to:

- i) Invite representation of the NCHADS Technical Working Group on Outreach, Peer Education and 100per cent Condom Use on the TCC and request that the TCC be represented on the Technical Working Group on Outreach, Peer Education and 100 per cent Condom Use, to assist the TCC to have greater insight into HIV/AIDS prevention and care in the entertainment sector and to encourage the implementation of *Prakas* 086 by the Ministry of Health and their partners
- ii) Work with the Ministry of Labour and Vocational Training and the Ministry of Interior to develop workplace strategies in line with the NCHADS Standard Operating Procedures for Entertainment Workers.
- iii) Strengthen and increase direct education, treatment and referral to health care services for entertainment workers.
- iv) Strengthen and increase peer education activities at entertainment establishments.
- v) Oversee the production of specialised IEC materials, which respond to the vulnerabilities identified in this report, for dissemination to workplaces targeting entertainment workers and their clients.
- vi) Advertise the existence and availability of voluntary confidential counselling and testing services to all within the workplace, targeting both entertainment workers and their clients.

3. Support entertainment worker unions

The role of the government and employer tripartite partners would be to recognise and support the role of the third tripartite partner, workers' unions in the entertainment sector, by:

- i) Recognising and supporting the work of entertainment worker organizations and networks that represent workers in the entertainment sector, to address issues linked to working conditions within the sector, which underpin many of the risks faced by workers, including HIV.
- ii) Supporting efforts by the unions to increase coverage of entertainment workers and provide appropriate services for them.
- iii) Encouraging regular meetings and consultations between unions and other independent organizations of entertainment workers, to exchange experiences, clarify the roles of each group including the particular role of the unions in identifying and addressing issues related to wages and working conditions.

4. Address workplace and work-related abuse and violence

The role of the tripartite partners would be to oversee the development of education for:

- i) entertainment establishment owners and managers on how to minimise, respond to and report incidents of workplace abuse and violence
- ii) entertainment workers on how to reduce and respond to risks in the workplace and while travelling to and from work, and how and where to report incidents of violence
- iii) entertainment workers who sell sex on ways to minimise their risk of abuse and violence from clients, including the risk of theft, and how to report such incidents
- iv) entertainment workers and establishments on the links between physical safety and condom use, and to work with the Ministry of Women's Affairs to strengthen and increase the number of places available to receiving complaints from victims of abuse.

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Attachment 1: Key stakeholders

IMPLEMENTING PARTNERS IN PHNOM PENH

1 GOVERNMENT

1.1 The National AIDS Authority (NAA) coordinates 30 line ministries in response to HIV/AIDS in Cambodia. According to the National Strategic Plan for Comprehensive and Multisectoral Response to HIV/AIDS 2006-2010 (NSP II), the main platform for HIV/AIDS work in Cambodia is built around seven strategies:

- prevention;
- comprehensive care and support;
- impact mitigation;
- effective leadership;
- supportive legal and public policy environment;
- increased information for policy makers and programme planners through monitoring, evaluation and research; and
- increased, sustainable and equitably allocated resources.

The strategies are directed specifically toward high-risk populations:

- orphans and vulnerable children;
- mobile and migrant populations;
- men who have sex with men;
- youth and adolescents;
- female spouses;
- indirect sex workers; and
- drug users, including injecting drug users.

The NSP II states that commercial sex between men and women is one of the major drivers of the HIV/AIDS epidemic in Cambodia. In addition to broad strategies that aim to benefit all Khmers, the strategy highlights specific issues in targeting indirect sex workers:

- knowledge about condoms and their role in preventing HIV transmission;

- the availability and affordability of condoms within entertainment establishments;
- capacity and skill of sex workers to negotiate condom use; and
- the provision of regular universal access to HIV/STI screening.

1.2 The National Centre for HIV/AIDS Dermatology and STDs (NCHADS) is the focal point within the Ministry of Health, it provides:

- health sector policy development;
- programme management;
- provincial support and coordination;
- practice guidelines;
- planning;
- evaluation;
- surveillance;
- behavioural research; and
- oversees the national HIV/AIDS/STI clinical services.

NCHADS complies with strategies endorsed by the National Aids Authority (NAA) and works in partnership with other government ministries, donor bodies and provincial health departments.

NCHADS provides operational guidelines for partners working in HIV/AIDS prevention and care in Cambodia. For sex workers, NCHADS has developed the publication *Standard Operating Procedure for Outreach/Peer Education and 100per cent Condom Use Programme to Sex Workers in Cambodia*.

The standard operating procedures draw together all of the prevention interventions targeting entertainment workers under the oversight of a single technical working group (The Entertainment Worker Network) in an effort to:

- improve coordination and to strengthen partnerships;
- standardize and improve the quality of outreach/peer education and 100 per cent Condom Use Project;
- strengthen the link between outreach/peer education, STI services and 100 per cent Condom Use Project and continuum of care; and

- ensure efficient use of resources.

Under the standard operating procedures, NCHADS charges NGOs with responsibility for implementing outreach education and government staff with planning, coordination and reporting. The Standard Operating Procedures can be found on the NCHADS website at <http://www.nchads.org/>

- 1.3 The **Provincial AIDS Office** (PAO) is a unit of the Provincial Health Department responsible for provincial planning, management, coordination and reporting for HIV/AIDS and STI programmes.

2 COORDINATION FORUMS

- 2.1 **Technical Working Group on Outreach/Peer Education and 100per cent Condom Use** (TWG/OPC) sets policy/strategy, coordinates monitors and supervises implementation nationally.
- 2.2 **The Condom Use Coordination Committee** (CuCC) provides strategic and policy support and monitors condom use at the provincial level.
- 2.3 **Provincial Working Group on Outreach/Peer education and 100per cent Condom Use** (PWG/OPC) see POA above.
- 2.4 **The Entertainment Worker Network** is a National AIDS Authority working group established to coordinate and advise on policy and programs relevant to entertainment workers. Membership includes non-government organizations, relevant ministry representatives and workers associations.
- 2.5 **The Tripartite Coordination Committee** (TCC) provides strategic and policy guidance on HIV/AIDS activities in the workplace. Chaired by the Ministry of Labour and Vocational Training (MoLVT), the TCC is mandated to promote the implementation of *Prakas number 086 (on the Creation of HIV/AIDS Committees in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace)* and to play an important role in the monitoring and evaluation of workplace HIV/AIDS activities. The TCC is provided technical support from the International Labour Organization (ILO).

- 2.6 **The HIV/AIDS Coordinating Committee (HACC)** has a membership of around 90 local and international NGOs with working groups on training, care and support, advocacy and special events. HACC is an information-sharing forum and assists in coordinating the activities of NGOs working on HIV/AIDS in Cambodia. HACC also acts as a representative of the NGO sector at government and UN forums.
- 2.7 **Khmer HIV AIDS NGO Alliance (KHANA)** is a local NGO supporting approximately 66 organizations working in the field of HIV prevention, treatment, care and support. KHANA supports these organizations through funding and technical support for project activity, networking and capacity building of civil society and representing civil society at government and UN forums. KHANA has a program targeting entertainment workers throughout Cambodia with the exception of Phnom Penh.
- 2.8 **Cambodian Alliance for Combating HIV/AIDS (CACHA)** was established early 2006 and is aligned to the Asia Pacific People's Alliance for Combating HIV/AIDS (APPACHA). CACHA is a collaboration of 18 local and international NGOs, and aims to bring together important stakeholders and actors to advocate for continuous dialogue among positive groups and the broader community.

3 **NON-GOVERNMENT ORGANIZATIONS**

There are a large number of NGOs currently implementing projects in Phnom Penh targeting both sex workers and entertainment workers.

These include:

- Union Aid Abroad Australia (**APHEDA**)
- Coordination of Action Research on AIDS and Mobility (**CARAM**)
- **CARE International**
- Cambodian Food and Service Workers' Federation (**CFSWF**)
- Co-operation for Social Service and Development (**CSSD**) (Previously **USG- Urban Sector Group**)
- Cambodian Women's Development Agency (**CWDA**)
- Cambodian Women for Peace and Development (**CWPD**)
- Sacrifice Families Orphans Development organization (**SFODA**)
- Khmer Development of Freedom Organizations (**KDFO**)
- Cambodian NGO for the Advancement of Women & Children (**KHEMARA**)
- Khmer Women's Cooperation for Development (**KWCD**)

- Medicine l'Espoir du Cambodge (**MEC**)
- Men's Health Cambodia (**MHC**)
- Men's Health Social Service (**MHSS**)
- Pharmaciens Sans Frontieres (**PSF**)
- Reproductive Health Association Cambodia (**RHAC**)
- Save Incapacity Teenagers (**SIT**)
- Women's Organization for Modern Economy & Nursing (**WOMEN**)

In addition to the implementing partners, a number of NGOs are funding local associations, unions and community-based organizations to deliver programs.

Funding agencies include:

- Union Aid Abroad Australia (**APHEDA**)
- **CARE International**
- Family Health International (**FHI**)
- Khmer HIV AIDS NGO Alliance (**KHANA**)
- Pharmaciens Sans Frontieres (**PSF**)
- Population Services International (**PSI**)
- Reproductive Health Association Cambodia (**RHAC**)

4 **SEX WORKER ASSOCIATIONS**

4.1 Cambodian Prostitutes' Union (CPU) was established in 1998 under the Cambodian Women's Development Association (CWDA). Until recently CPU had 1,000 members, however, following the recent law changes, membership has dropped to approximately 300. CPU is not a union but a worker's association operating largely as a project of CWDA. CPU is focused on three main areas:

- HIV awareness-raising, human rights, trafficking, livelihoods and practical support (e.g. to go to clinics);
- collecting and documenting information on sex workers and their issues; and
- advocacy through media and attending local and international meetings to speak on behalf of CPU.

4.2 Women's Network for Unity (WNU) has 5,000 members in eight provinces including six districts within Phnom Penh. The membership includes both male and female sex workers. The original intention for the group was to establish an independent sex

workers union, but this was abandoned for lack of funding. Women's Network for Unity are organised around three key issues:

- advocacy- promoting rights to others;
- empowerment- educating women about their own rights; and
- health- HIV prevention education, access to care and support.

4.3 Smart Girl Project is a peer education project of FHI that frames education for entertainment workers in a positive and fun package. Smart Girls are entertainment workers who have been trained in family planning, reproductive health, HIV, STI, condom use, referral and are able to talk to their peers on these topics. Smart Girl operates as a health project and is implemented by six local non-government partners. Smart Girl is not a broad-based worker's association but focuses primarily on sexual and reproductive health.

4.4 Chuak Sar is a collective of HIV positive sex workers. The group operates monthly support meetings for HIV positive sex workers and education on treatments, condoms and other health issues as well as hosting two HIV treatment clinics (one in Chuak Sar and one in central Phnom Penh) that provide ARV and OI treatment for members. The clinic has approximately 700 registered patients in two locations in Phnom Penh and is primarily focused on care and support but it is vocal on issues that affect its members.

5 ENTERTAINMENT WORKER ASSOCIATIONS

5.1 The Solidarity Group is a network of beer promoters established in 2005 to respond to the social stigma and the common perception that beer promotion is synonymous with sex work. The group was formed to provide a representative voice in addressing the risks that beer promoters face at work. The network has 300 members and growing.

5.2 Independent Democratic Informal Economy Association (IDEA) was established in 2005 and represents the informal sector. It has a current membership of 100 entertainment sector workers and a total membership of 2,660 (tuk-tuk drivers, moto-dop¹⁵, cart-pushers, boat drivers, tourism workers etc.). IDEA is structured as a member-based union but is registered as an association. IDEA's agenda is focused broadly on conditions of work for informal sector workers and frames HIV/AIDS as one of many occupational health and safety issues.

¹⁵ Motor bike taxis are the most common form of transport in Phnom Penh. They are called *moto-dop*.

6 UNIONS

- 6.1 Cambodian Food and Service Workers' Federation (CFSWF)** was established in 2007 to organise food service workers and has been involved in organising beer promotion workers who are employed directly by the beer selling companies (not those who are employed by the entertainment establishment or those who are working as freelance beer promoters). CFSWF has a current membership of 1,003 including 300 beer promotion workers.

7 BUSINESS ASSOCIATIONS

- 7.1 The Cambodian Federation of Employers and Business Associations (CAMFEBA)** is an association of 700 independent businesses Cambodia.

CAMFEBA's vision is to unify and strengthen the Cambodian private sector through effective representation and collaboration with The Royal Government of Cambodia and relevant global bodies. CAMFEBA is not currently directly involved in HIV/AIDS activities in the workplace but supports the operations of the Cambodian Business Coalition against AIDS (CBCA).

- 7.2 Cambodian Business Coalition against AIDS (CBCA)** was registered in 2006 under the Ministry of Labour and Vocational Training. The operational office is collocated within the Cambodian Garment Factory Association. Activities focus on:

- advocacy- supporting the development and implementation of compulsory HIV/AIDS policies (i.e. establishment of workplace HIV workplace groups and committees- businesses with more than seven staff must have an HIV/AIDS working group, and those with more than 50 staff need an HIV/AIDS committee);
- HIV Education- supporting workplace programmes; and
- training workplace peer education officers is the main activity.

Work is exclusively related to HIV/AIDS and is the voice of the private sector on HIV in Cambodia. Traditionally, CBCA has worked with garment factories and industry. Recently however it has begun to work in partnership with UNAIDS and others to amend Prakas 66- to adapt it to allow implementation of the 100 per cent condom use project in entertainment establishments following the closure of brothels.

- 7.3 Beer Selling Industry in Cambodia (BSIC)** was established in 2006 and is an association of Asia Pacific Breweries, Cambodia Brewery Limited, Cambrew Ltd., Carlsberg a/s, Guinness and Heineken International. BSIC represents 75 per cent of companies selling beer in Cambodia and aims to improve the health, safety and working conditions of beer promoters by setting industry standards. BSIC conducts regular reviews of entertainment establishments where their employees work and report on workers conditions against an industry code of conduct.
- 7.4 Entertainment establishment owners** have no associations in Phnom Penh, and are not involved in any collective efforts to regulate the industry as a whole.

BSIC requires entertainment establishments to provide a safe work environment for their beer promotion workers, demonstrated through the establishment's compliance with the BSIC code of conduct. In addition to managers of beer selling companies visiting establishments regularly to monitor their staff, BSIC conducts annual audits on working conditions within the establishments to where their staff are deployed.

Most of the NGOs implementing HIV/AIDS prevention and care projects in Phnom Penh are involved in direct outreach to entertainment establishments and many have advocacy meetings with establishment managers and owners. These meetings are primarily to allow access to the women working within the establishments, but some outreach teams have been successful in educating owners and managers about HIV/AIDS transmission and their responsibility as employers.

Uncooperative employers who refuse access to the workplace create problems for health workers who, as a result, are unable to reach the workforce with health services. Some of the NGOs have trained peer educators and developed informal associations to conduct peer-based outreach to women in these establishments by engaging them in activities outside working hours.

None of the stakeholders were aware of any laws or regulations that govern entertainment establishments in Phnom Penh. Most believed that regulation of the industry was a fundamental precursor to preventing HIV and other health and safety issues within the entertainment sector. Some suggested advocacy to government was needed around occupational health and safety for entertainment workers and standards of operation for entertainment establishments. Others believed working in collaboration with entertainment establishment owners to self regulate would be a better strategy.

8 CLIENTS

The spread of HIV in Cambodia is driven by men's premarital and extramarital sex with sex workers. Almost half of new infections are from husband to wife and one-third from mother to child (MOWA 2008). In *Redefining AIDS in Asia: Crafting an Effective Response*, the Commission on AIDS in Asia estimates that 75 million men in Asia buy sex from an estimated 10 million women. Many stakeholders believe that the way this pattern of infection among women is framed portrays women as the main problem, reinforces stereotypes about male pre- and extra-marital sex and diverts the prevention agenda away from the main driver of the epidemic in Cambodia i.e. the sexual behaviour of Cambodian men.

Both PSI and FHI have recently conducted research on male clients of sex workers and PSI is about to commence a project targeting men in establishments where they drink before visiting sex workers. However, the general acceptance of male sexual behaviour, the lack of behaviour change resources targeting them and the continued framing of women (especially sex workers) as the problem was a source of major concern and frustration for many of the stakeholders.

Attachment 2: Background to the Tripartite Partners Consultative meeting

On 2 December 2009, the tripartite partners, NGOs and UN agencies met in Phnom Penh to discuss the HIV vulnerabilities of indirect sex workers in Phnom Penh and to help identify possible options for future action by employer's groups, unions/worker's groups and government. Through a series of presentations and workshops, the group identified a number of short term and long term strategies and activities that they believed would:

- contribute to HIV prevention among indirect sex workers in Phnom Penh;
- contribute to entertainment workers' overall workplace safety;
- be realistic, 'do-able' and would bring about positive change; and
- be within the capacity of the tripartite partners to implement.

These were:

- Ministry of Tourism, who issues licenses for entertainment establishments, should develop a set of conditions for employers to implement and comply with.
- Conduct regular on-site inspection at entertainment institutions on health related issues (conducted by labour inspectors from the Department of Occupational Safety and Health and the Ministry of Labour and Social Welfare).
- Accelerate and strengthen the implementation of Prakas number 086 on the Creation of HIV/AIDS Committees in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace, with a focus on creating workplace committees in entertainment venues.
- Strengthen and accelerate the decree on 100per cent condom use at the entertainment establishments (*Note: NAA, UNAIDS, CBCA, PSI and FHI have recently discussed making amendments to Prakas 66 on the implementation of the 100per cent condom project to allow it to operate within entertainment establishments as well as brothels.*)
- Amend the *Law on Suppression of Human Trafficking and Sexual Exploitation* articles relevant to the implementation of the AIDS program.
- Organise, establish and strengthen groups among workers working in entertainment establishments (for this, union involvement will be key).
- Continue implementing educational campaigns on non-violence in workplaces (the link between violence against women workers and HIV vulnerability is obvious and must be addressed).
- Strengthen and increase the number of places for receiving complaints from victims of abuse.
- Strengthen and increase the direct education, treatment and referral of women to health care services.

- Continue strengthening and increasing peer education activities at entertainment establishments.
- Produce specialized IEC materials that respond to the vulnerabilities identified in this report and disseminate them in entertainment establishments.
- Provide information on the availability of voluntary confidential counselling and testing (VCCT) services to entertainment workers and their clients.
- Provide training for workers on how to protect themselves from HIV/AIDS infection and also training in reproductive health.

The most important contribution the tripartite partners could make to HIV vulnerability in the workplace the group considered to be:

- Working toward regulating the entertainment sector e.g. through licensing of venues and scaling up the introduction of Prakas number 086 *on the Creation of HIV/AIDS Committees in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace*, for the sector.
- Scaling up broad HIV prevention and care education for women - for women currently in the entertainment sector and those most likely to enter in the future (such as women currently employed, or recently laid-off from the manufacturing sector).
- Organising the workforce, developing and strengthening workers groups to provide better representation of entertainment workers in discussions about their working conditions.

Attachment 3: Minutes of the Tripartite Partners Consultative Meeting

ADDRESSING HIV VULNERABILITY OF INDIRECT SEX WORKERS DURING THE FINANCIAL CRISIS: SITUATIONAL ANALYSIS, STRATEGIES AND ENTRY POINTS FOR HIV/AIDS WORKPLACE EDUCATION

Union Aid Abroad - APHEDA

(Australian People for Health, Education and Development Abroad)

Location: Ministry of Women's Affairs Kolab 1 Building, Street 47, Sankat Sras Chork

Date: Wednesday, 2 December 2009

Time: 8 a.m. to 12 p.m.

Chair: Barbara Fitzgerald Country Coordinator, APHEDA

Participants:

H.E. Dr. Huy HanSong	Secretary of State, Chair TCC, MoLVT
Ms Sat Salin	Deputy Directory, Ministry of Women's Affairs
Dr Leng Tong	Dept. Occupational Safety & Health, MoLVT,
Dr Sen Piseth	Deputy Director Phnom Penh Dept of Health,
Dr Tea Phaully	UNAIDS
Dr Chong Vandara	UNFPA
Ms Por Chuong	ILO National HIV/AIDS Focal Point
Mr Ti Sophana	Beer Selling Industry of Cambodia
Mr Huy Vuthy	Cambodian Business Coalition against AIDS
Ms Tep Kim Vannary	Cambodian Confederation of Trade Unions
Mr Sar Mora	Cambodian Food and Service Workers' Federation
Ms Ou Tephallin	Cambodian Food and Service Workers' Federation
Mr Heng Sam Orm	Independent Democratic of Informal Economy Association
Ms Keo Sichan	Cambodian Women's Development Agency
Ms Chan Dina	Cambodian Prostitutes Union
Mr Kaing Sophal	Pharmaciens Sans Frontier
Mr Soum Sen	Cambodian Women for Peace and Development
Mr Tim Vora	HIV/AIDS Coordinating Committee
Ms Pech Sochea	Women's Network for Unity
Ms Prok Vanna	Women's Network for Unity
Ms Ratana Khieu	Reproductive Health Association Cambodia
Mr Pech Sophea	Reproductive Health Association Cambodia

Facilitators:

Neil Poetschka

HIV/AIDS Technical Advisor, APHEDA

Lim Sok San

Program Coordinator, APHEDA

Project Advisor:

Di Butler

HIV/AIDS/OHS Technical Advisor, APHEDA

Minutes:

Chhea Thao

Project Officer, APHEDA

Ly Kim Song

Project Officer, APHEDA

Project Support:

Chap Sokha

Project Assistant, APHEDA

1 Welcome and introductions

- Barbara Fitzgerald, APHEDA Country Coordinator welcomed the participants and asked representatives of the tripartite partners to join her at the front: H.E. Dr Huy Han Song, Secretary of State, Ministry of Labour and Vocational Training and Chair of the Tripartite Coordinating Committee; Ms Tep Kimvannary, Cambodian Confederation of Trade Unions; and Mr Huy Vuthy, Executive Manager, Cambodian Business Coalition against AIDS.
- Barbara Fitzgerald gave a brief introduction and background to the meeting; to APHEDA's role in HIV/AIDS and worker education and highlighted the importance of tripartite cooperation in addressing the vulnerabilities of workers in the entertainment sector.
- H.E. Dr Huy Han Song gave a brief introduction to the Tripartite Coordinating Committee and reiterated the importance of the tripartite approach in addressing HIV vulnerability in the workplace in Cambodia.

2 Background to the ILO funded APHEDA situational analysis.

- Presentation: Terms of reference and progress to date

Neil Poetschka, APHEDA Regional HIV/AIDS Advisor and Lim Sok San, APHEDA Cambodia Program Coordinator presented a brief overview of the terms of reference and progress to date (*see attached*).

▪ Discussion

Dr Chong Vandara from UNFPA commented that there are many working groups in the HIV area but said that we need to work together. In particular the three tripartite partners should work together with the Ministries of Interior, Tourism and Women's Affairs to respond to the vulnerability of workers in the entertainment sector.

A representative from RHAC expressed a concern about the lack of access to entertainment workers caused by the new laws – said that the laws were a barrier to access and while they may not be able to be changed they can be corrected.

A representative from the Cambodian Prostitutes Union expressed a concern that with the new laws sex workers have become mobile and, to date, the implementing partners haven't coordinated a response to this newly mobile population of sex workers.

Ms Sath Salin from the Ministry of Women's Affairs representative acknowledged the difficulty caused but advised that agencies are now working together to begin to respond to the problems associated with the new trafficking laws.

Dr Huy Han Song reminded the group that the financial crisis has also impacted business, not only workers.

3 Activity 1: Possible future tripartite workplace activity

Participants were divided into three sectoral groups: business, government and workers/unions. Participants from non-government and community organizations were divided equally between the three groups. Participants were asked to respond to identify :

- i) *What the tripartite partners could do at a strategic/ policy level to improve OH&S for entertainment workers in Phnom Penh*
- ii) *What the tripartite partners could do to pilot or implement HIV/AIDS as a workplace issue programmes to reduce HIV risks within entertainment venues in Phnom Penh.*

Outcomes: government group

- Conduct a regular on-site inspection at entertainment institutions on health related issues (conducted by labour hospital).
- Make some amendments to the related articles on the implementation of AIDS program.
- Accelerate the establishment of policies on the implementation of the Law on Human Trafficking.
- Strengthen and accelerate the declaration of policy on 100 per cent condom use at the entertainment institutions.
- Establish and strengthen the implementation of the *prakas* (decree) No. 086
- Continue implementing the educational campaigns on non-violence in workplaces (short-term and long-term).
- Strengthen and increase number of places for receiving complaints from victims
- Strengthen and increase the direct education, treatment and referral of women to health care services.
- Continue strengthening and increasing peer education activities at entertainment institutions.
- Provide vocational training through conduct training courses at training centres.

Outcome: employer group

1. Strategies and procedures

- Short-term
 - Produce IEC & disseminate it.
 - Workplace owner's commitment.
 - HIV/AIDS working group or committee in workplace (086).
- Long-term
 - Options given to workers to choose.
 - Ministry of Tourism should issue licenses with attached a set of conditions for employers to implement and comply with those conditions set.

2. Pilot project / implementation

- Short-term
 - Conduct direct education at communities and workplaces.
 - Broadcast and disseminate on TV or brochures/leaflets.
- Long-term
 - Accelerate the establishment of HIV/AIDS committee at workplace.
 - NGOs, RGC provide technical assistance and IEC.

- For new businesses/entertainment establishments, Ministry of Tourism shall issue the license attached terms and conditions for implementation attached.
- Regular inspection made by labour hospital team

Outcome: unions/workers group

- Organise, establish and strengthen groups among workers working in entertainment institutions.
- Establish HIV/AIDS working groups at workplaces and entertainment establishments (based on *parkas* 086).
- Provide training for workers on how to protect themselves from HIV/AIDS infection, and also training on reproductive health.
- Further disseminate to the target groups.
- Include HIV/AIDS in joint conventions in collective bargaining agreements (CBA).
- Provide information on the availability of voluntary confidential counselling and testing (VCCIT) services.
- Encourage the labour inspection staff to monitor working conditions at entertainment establishments.
- Urge and encourage employers to register with the social security fund (B.S.S).

4 Activity 2: Analysis of suggested activities

Participants were divided into non-sectoral (mixed) groups and analysed the activities suggested by the sectoral groups. In doing so, they were asked to consider the following:

- a) *Whether the activity contributes to HIV/AIDS prevention among entertainment workers in Phnom Penh.*
- b) *Whether the activity contributes to entertainment workplace/worker safety.*
Considering:
 - *Does it address occupational health and safety issues for workers?*
 - *Does it address responsibility of employers to provide safety?*
- c) *Whether the activity was realistic/ do-able in Phnom Penh and would it bring about a positive change.*
- d) *Whether the tripartite partners have the capacity to implement the activity?*
Considering:
 - *Current/ past experience work with entertainment workers.*
 - *Current organizational interest in working with entertainment workers.*

- *Particular strengths of partners.*
- *Existing activity, policies, procedures in other sectors that may be adapted to the benefit of entertainment workers.*

Outcomes: Analysis of the suggestions made by business

The analysis found that the following activities agreed with the considerations above and were to be recommended.

- Conduct a regular on-site inspection at entertainment institutions on health related issues (conducted by labour hospital).
- Make some amendments to the related articles on the implementation of AIDS program.
- Strengthen and accelerate the decree of policy on using condoms 100 per cent at the entertainment institutions.
- Establish and strengthen the implementation of decree No.086.
- Continue implementing the educational campaigns on non-violence in workplaces. (short-term and long-term).
- Strengthen and increase number of places for receiving complaints from victims.
- Strengthen and increase the direct education, treatment and referral of women to health care services.
- Continue strengthening and increasing peer education activities at entertainment institutions.

Outcome: Analysis of suggestions made by employers.

- Produce IEC & disseminate it.
- Ministry of Tourism should issue licenses with a set of conditions for employers to implement and comply with.
- Accelerate the establishment of HIV/AIDS committee at workplace.

Outcome: Analysis of activities suggested by unions/workers

- Provide information on the availability of voluntary confidential counselling and testing (VCCT) services.
- Provide training for workers on how to protect themselves from HIV/AIDS infection and also training in reproductive health.
- Organise, establish and strengthen groups among workers working in entertainment establishments.
- Establish HIV/AIDS working groups at workplaces and entertainment institutions (based on the *prakas* 086).

Discussion:

Asked to discuss the single most important contribution the tripartite partners could make to HIV vulnerability in the workplace the group considered:

- Working toward regulating the entertainment sector and in particular scaling up the introduction of *prakas* 086 for the sector.
- Scaling up broad HIV prevention and care education for women - for women currently in the entertainment sector and those most likely to enter in the future.
- Organising the workforce, developing and strengthening workers groups.

4 Next steps and meeting close

Barbara Fitzgerald outlined the next steps - forwarding to ILO the groups suggestions and the situational analysis as a whole. She thanked everyone again for making the time to attend the meeting and for their valuable input and closed the meeting.

Attachment 4: Technical interview participants

TECHNICAL INTERVIEW PARTICIPANTS

- Ministry for the Interior, Government of Cambodia
- Cambodian Women's Development Agency
- Smart Girls Project- Peer Leaders for Phnom Penh
- Women's Network for Unity
- Worker's Information Centre
- Population Services International
- Independent Democracy of Informal Economy Association
- Cambodian Food and Service Workers' Federation
- Cambodian Women Peace and Development
- International Labour Organization
- Ministry of Women's Affairs
- Khmer HIV/AIDS NGO Alliance
- National Centre For HIV/AIDS, Dermatology and STI
- Kien Seray Phal, Consultant
- National Centre For HIV/AIDS, Dermatology and STI
- Cambodian Prostitutes Union
- Cambodia Business Coalition On AIDS
- International Labour Organization
- Pharmaciens Sans Frontiers
- HIV/AIDS Coordinating Committee
- UNAIDS
- Ministry of Women's Affairs
- Care International Cambodia
- Ministry of Women's Affairs
- Phnom Penh Health Department
- Phnom Penh Provincial AIDS Office
- Chuak Sor
- Focus group 1: Four restaurant workers
- Focus group 2: Four Female Entertainment Workers (Mixed Group)
- Focus group 3: Waitresses
- Focus group 4: Karaoke workers

- ILO Better Factories
- Family Health International

Attachment 5: Summary of Prakas 086

Prakas 086 on the Creation of the HIV/AIDS Committee in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace

Prakas 086 on the Creation of the HIV/AIDS Committee in Enterprises and Establishments and the Prevention of HIV/AIDS in the Workplace was released by the Minister of Labour and Vocational Training to stimulate discussion, raise awareness, promote workers education and prevent the spread of HIV/AIDS in the workplace.

It decrees that all enterprises and establishments that employ workers shall set up their own HIV/AIDS working group or HIV/AIDS committee in consultation with local unions. Workplaces that employ eight to 50 workers will set up a working group and workplaces with more than 50 workers will set up a committee.

The Prakas outlines the structure and reporting requirements for each member.

http://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/documents/genericdocument/wcms_100237.pdf

Attachment 6: Stakeholder concerns about the *Law on Suppression of Human Trafficking and Sexual Exploitation*

"The enactment of the 2008 anti-trafficking law, created the misunderstanding that sex work in Cambodia was illegal. This misunderstanding resulted in sudden raids, arrests, and detentions of brothel owners and sex workers. In reality, the law legalizes 'voluntary prostitution', but makes making a living from prostitution virtually impossible. The specific articles under the new law that confound sex work include articles 24, 25, 30, 31 and 32 below.

Article 24: Soliciting

A person who willingly solicits another in public for the purpose of prostituting himself or herself shall be punished with imprisonment for 1 to 6 days and a fine of 3,000 (\$0.75) to 10,000R (\$2.5). A minor (under 18) shall be exempted from punishment of the offense stipulated in this article.

Stakeholder concerns re Article 24:

- Soliciting is not clearly defined and has been open to misuse or abuse by enforcement officials; who have arrested women for carrying condoms in public.
- Public is not clearly defined and as written prevents women for indicating in any way that they are available for sex- effectively preventing them from working.
- Exemptions from prosecution for minors under article 24 encourages child prostitution and makes them vulnerable to exploitation.

Article 25: Definition of procuring prostitution

The act of procuring prostitution in this law shall mean:

- (1) drawing a financial profit from the prostitution of others;*
- (2) assisting or protecting the prostitution of others;*
- (3) recruiting, inducing or training a person with a view to practice prostitution; and*
- (4) exercising pressure upon a person to become a prostitute.*

The following acts shall be deemed equivalent to the act of procuring prostitution:

- (1) serving as an intermediary between one person who engages in prostitution and*
- (2) a person who exploits or remunerates the prostitution of others;*
- (3) facilitating or covering up resources knowing that such resources were obtained from a procurement; and*
- (4) hindering the act of prevention, assistance or re-education undertaken either by a public agency or by a competent private organization for the benefit of persons engaging in prostitution or being in danger of prostitution.*

Stakeholder concerns re: Article 25

Open to misuse and abuse by law enforcement officials who could conceivably charge any person associated with a sex worker such as motorbike taxi drivers, NGO workers etc.

Article 30: Management of prostitution

A person who, directly or through an intermediary, manages, exploits, operates or finances an establishment of prostitution shall be punished with imprisonment for 2 to 5 years.

Article 31: Management of establishment for prostitution

Shall be punished with imprisonment for 2 to 5 years when a person accepts or tolerates that:

- (1) another person indulges in prostitution inside an establishment or its annexes; or*
- (2) another person seeks clients with a view to do prostitution inside an establishment or its annexes.*

Article 32: Provision of premise for prostitution

A person who sells or makes available to another person premises not utilized by the public, knowing that they will be used by such person to indulge in prostitution shall be punished with imprisonment for 2 to 5 years.

Stakeholder concerns re: Articles 30, 31 and 32:

The only way to a sex worker can legally operate is in a house owned by the worker in which she lives alone. Given that voluntary prostitution is not illegal, the prohibitions are restrictive.

Attachment 7: Discussion guide for interviews with ex-garment factory workers currently working in entertainment sector jobs and selling sex

DISCUSSION GUIDE FOR INTERVIEWER/S

INTRODUCTIONS

Make them feel comfortable and safe, offer water and snacks, make sure they feel safe and that the room is private and closed etc

CWDA will confirm their current involvement in entertainment work AND sex work AND that they worked in a garment factory in the recent past- two years.

- Introduce yourself.
- Ask the workers to introduce themselves.

PURPOSE OF THE INTERVIEW

Let them know why we want to talk to them.

The recent financial crisis has caused many garment factories to close and many women have lost their jobs. Some factory workers are becoming entertainment workers and are also involved in sex work.

Ex-garment workers are especially vulnerable because they're new to entertainment work and inexperienced. They do not have easy access to HIV education and are sometimes pressured to have unsafe sex or find themselves in physical danger of violence or theft.

Your advice today will help us understand the issues currently facing women like you and help develop a strategy to reach entertainment workers with HIV prevention education.

CONSENT AND PRIVACY

1. Be clear about the nature of the questioning and that the information will become part of our final report.
2. Reaffirm that the information will be de-identified. Name and all other personal details will be changed to protect their privacy.
3. Ask for their verbal consent to begin the interview and proceed. Do not start the interview until they have indicated that they agree.

This interview will last for about 90 minutes and cover a range of topics related to your personal life, including:

- *Your education and work history.*
- *The circumstances surrounding you leaving the garment factory.*
- *Your current work in the entertainment sector.*
- *Your current involvement in sex work*

The discussion will be documented but no personal details will be recorded. Your name and any information that might identify you will be changed.

Do you want to proceed with the interview?

BACKGROUND

We want to know a little bit about her socio-economic status during childhood; the kind of environment she grew up in; her education levels; was it safe environment etc

For example:

- Year of birth/age.
- Province of birth.
- Parent's occupations (to get a sense of the standard of living during childhood).
- Number of brothers and sisters.
- Was the family happy with life or did they have problems- money, violence, moving home a lot, etc.
- Education level.
- Are they married or have a regular boyfriend?
- Do they have children of their own?

LINKS TO HOME AND FAMILY

We want to know if they have support from their extended family; how they are connected to family; do they support them financially; do the family support her emotionally- e.g. Encourage her, help her with difficult decisions.

For example:

- How often do they go home?
- Do they have any other family in Phnom Penh?
- Do they send money home, how much?
- Do they know she is an entertainment worker?
- Do they know she has sex clients?

LIVING ARRANGEMENTS

We want to know what their standard of accommodation is like; if it changed after they left the factory; is it safe and affordable and what they like or don't like about it.

For example:

- What type of home? Rented room, boarding house live at workplace, homeless etc
- Who with? E.g. friends or workers, how many people do they live with
- What was their living arrangement at the garment factory?
- Does the workplace provide this housing?
- Do you live in the same place you work?
- Can you leave your housing whenever you like?
- What are the good things and bad things about the current living arrangements compared to when they worked at the garment factories?

GLOBAL FINANCIAL CRISIS

In this section we want to know whether they were affected by the recent financial crisis.

Explore the following points for example:

- Are they aware of the crisis?
- What things have changed (food, petrol prices, less work, harder work etc.)
- Have they needed to make changes to their lifestyle? (Going out less, eating less, working longer hours, moving to cheaper accommodation).
- Personal finances- did they borrow money? Sell assets?
- Have their commitments changed? Sending less money home, supporting more family members, sending children home to the village etc.

FACTORY WORK

We want to know a little about their experience of working in the factories. How they become involved in factory work, what the conditions were like, how long they stayed at the factories, and the circumstances around their leaving the factory. Also if they were supported to re-train or find new work.

For example:

- When did they decide to go to work in the factory?
- Who or how did they make the arrangements?
- How long did they stay?

- What did they think about the working conditions- i.e. pay, hours, manual labour, benefits like health, training, ability to leave worksite etc.
- What were the circumstances surrounding their leaving factory work- e.g. did they resign or were they dismissed or did the company close?
- Did your economic situation change because of the financial crisis?
- What compensation payments?
- What help did they receive to re-train and find a new job?
- Will they return to factory work if new jobs become available?

ENTERTAINMENT WORK

We want to know how they entered entertainment work; experience in entertainment work; their working conditions and satisfaction with work and life.

For example:

- Why did they first decide to take a job as an entertainment worker?
- How did they negotiate their first job as an entertainment worker?
- What was that first job and what other jobs have they had since become an EW?
- What is their current job?
- Describe their employment arrangements i.e. contract, commission, free lance etc
- Describe their conditions i.e. pay and other benefits (food/housing/health etc.), hours.
- Describe their work- i.e. what they actually do at work.
- Is what they actually do different to what they were told they would be doing when they started the job?
- Describe what they like and what they don't like about their current job.
- Describe whether/how they feel safe and are valued/supported by their boss.
- If they had a suggestion about how to improve the workplace, would the boss listen to them?
- Any occasions where they have felt unsafe, experienced harassment or violence, theft, sexual abuse etc.
- Who helps them in these situations or how they help each other? E.g. If they had a personal problem (sadness, violence at work or at home, condom breakage), whom would they go to? (Would they go to a peer or a union representative or an employer?)

SEX WORK

We want to know how they first became involved in sex work; the nature of their current role as a sex worker; the working conditions and benefits and risks.

For example:

- When did they start to become involved in sex-work-Were they involved in sex work when they were a factory worker or did they start afterwards?
- Describe how they became involved- e.g. a broker, assisted by friend/family.
- Describe their current sex work-
 - The negotiations-where do they meet clients, who negotiates with the client.
 - The location- where do they go to have sex with the clients.
 - How many clients- per month
 - How are they paid? Money/gifts/protection etc.
 - How much money do they receive?
 - Do they keep all the money, or do they have to pay a percentage to an employer or some other person? (How much?)

CONDOMS

We want to know about their use of condoms.

For example:

- Do they use them 100 per cent with clients? If not, why?
- Do they use them with their boyfriends/casual partners? If not, why?
- Are they ever forced or coerced into having unsafe sex? E.g. offered more money or threatened with violence to not use condoms.
- Who buys the condoms?
- Does the workplace provide condoms (free of charge or do you have to pay)?
- Have they ever made a decision not to use a condom even when they thought they should (with their clients or with their boyfriends?) Ask why, was it money, fear, love, shyness etc?)

ACCESS TO HEALTH CARE

Describe how they maintain their sexual health.

For example:

- Where do they go for STI health checks?
- How often?
- Cost-Who pays? How much does it cost per month?
- Where do they usually get information about health (HIV or STI), safety and advice or counselling?
- Treatments- when they have STI where do they buy medicine.

- Does the workplace provide STI/HIV services? (what type e.g. medical service, education, referral etc.)
- If they were given training on health (including sexual health, HIV, STIs) would they prefer to have it at the workplace or somewhere else? When would be the best time for them to have this training?

PHYSICAL SAFETY

We want to know about their physical safety at work and how they reduce the risk of violence.

For example:

- Do they feel safe at work, and while travelling to meet clients?
- What are the physical threats/risks?
- What kind of violence occurs and how regularly?
- What do entertainment workers and sex workers do to avoid/deal with risky situations?
- Can you negotiate condom use with clients? (If so, how? If not, why?)
- Do the workers help each other?
- Does management help the workers? (If there is a problem with an abusive customer, would the employer help them or pressure them to comply?)

VULNERABILITIES

We want to know about their vulnerability as a new EW/Indirect Sex worker. It may be best to pose this as advice for a new worker.

For example:

What advice would they give to someone just starting to work in as an entertainment worker that might help them protect themselves from violence, theft abuse etc.

If you had received information on sexual health (including issues of pregnancy, HIV and STIs) in the garment factory prior to becoming an entertainment worker do you think you would have protected yourself better?

From there, follow up on the points they raise so that we clearly understand what the risks are as they see them.

- Future prospects- loss of social status
- Family- loss of contact and support
- Police/arrests- criminal record

- Being abused by clients- physical safety
- Theft, being cheated or robbed by clients and police or other officials.
- Rape/ sexual assault.
- Forced to have sex without condoms
- STI and HIV
- Substance abuse/addictions (alcohol or illegal drugs)

UNIONS/WORKER'S ASSOCIATIONS

We want to know if their awareness and experience of unions and associations and their awareness of their rights as an EW and sex worker?

- Do they know about unions and associations?
- Were they/are they a member of a union or workers association?
 - Garment Factory union membership?
 - EW union/association membership? (IDEA etc.)
 - Sex worker association membership? (CPU, WNU etc.)
- What was their involvement- member, organiser etc
- What support/benefit/advice have they received from unions?
- How do they think unions or associations might help them now as EW and sex workers?
- Would they be able to join a union? Advocate for their own rights etc. Know where to go for information about their rights?

SOLUTIONS

We want to know what they see as being able to support them in their current situation.

For example

What are some of the things that you would change in your workplace that would make your workplace safer, healthier or easier to work in? Consider:

- Physical safety- violence at work or going/coming from work;
- Sexual safety – condom availability, protection against sexual assault;
- Better lighting;
- Cleaner environment;
- Better housing conditions;
- Less/more working hours;
- More respect (from peers, employers or clients); and
- Financial security- living wage, protection from theft, cheating clients etc.

Attachment 8: BSIC Code of Conduct

BEER SELLING INDUSTRY CAMBODIA (BSIC) CODE OF CONDUCT FOR BEER PROMOTERS (BPS)

This document reflects the agreements made by the members of the beer selling industry in Cambodia. This Beer Selling Industry Cambodia (BSIC) will emphasize the occupational health and safety issues of beer promoters to its members, outlet owners, consumers, and to represent the industry at a national and international level.

STATEMENT OF INTENT

The Beer Selling Industry Cambodia (BSIC) recognizes its responsibility to improve the health and working conditions of beer promoters selling beer on the Cambodian consumer market. The industry body agrees on the below industry standards and will use its influence to ensure that other stakeholders also comply with these standards. All members of the industry body have agreed on the standards.

Objective

The objective is to improve the health, safety and working conditions of beer promoters by setting industry standards.

INDUSTRY STANDARDS

The following seven standards are minimum standards that the BSIC members have recognized as being critical to comply to in order to improve the health, safety and working conditions of BPs.

1. Employment status

The employment status of BPs will have to comply with the Cambodian Labour Law (1997). BPs must have a transparent, written contract, be they casual workers, full-time, or part time employees. The BPs will receive a copy of the contract. BPs will receive a fixed monthly base salary and will always be remunerated in accordance with the Cambodian rules and regulations. Incentive systems can be put in place on top of the basic salary but should be set up in such a way that they don't lead to unhealthy or unsafe situations. The BSIC rejects commission-only work.

2. Organization of work

BPs will be clearly informed on whom their supervisor is, and that a procedure is in place for them to express any grievances in relation to their work. The procedure includes the use of a

database where all grievances must be registered. This shall be linked with standard 6 on harassment.

3. Uniform

BPs who sell BSIC member brands will receive (company) branded uniforms or a clear sash with the brand name so that BPs are clearly visible and identifiable as workers selling or promoting beer. BPs who are off-duty shall not wear the uniform. Uniforms should be decent, taking into account the input from the BPs themselves.

4. Transport

The employer of the BP will ensure transport from the venue to the home of the BP as soon as the BP has finished his/her work in a particular venue, the provinces included. This will minimize the risk of BPs being harassed after working hours on their way back home. The BP is offered and encouraged to make use of the company transport.

5. Training and Information

All members of the BSIC will offer a standard and comprehensive training package as part of the orientation training of BPs. This training shall include; how to deal with difficult customers, alcohol and drug use, workplace harassment, relationships between men and women, gender roles and responsibilities, healthcare options, sexual and reproductive health, contraceptive methods, and HIV/AIDS and STI education and prevention. A refresher training shall be organised at least once a year.

6. Harassment

The BSIC declares a zero-tolerance approach with respect to abuse and sexual harassment of BPs. All BSIC members will develop and implement an anti-sexual harassment policy for company staff as a part of personnel contracts and code of conducts. The policies will be clearly communicated to employees and sufficient training will be provided to emphasize that sexual harassment will not be tolerated. Sanctions will be taken if rules are broken.

The BSIC will clarify its expectations vis-à-vis the outlet owners in relation to providing a safe working environment for BPs, including the zero-tolerance statement. All BSIC members will maintain an accurate and up-to-date abuse and harassment reporting system and share this within the BSIC. It is compulsory to register all reported cases. In the event of harassment, the BSIC members will firstly discuss with the outlet owners on a course of action. Unless actions are taken, the BSIC members will act together with the ultimate sanction of withdrawing all BPs (from all brands represented by BSIC members) from venues where serious or persistent physical

or sexual abuse occurs, and will make a public statement to ensure that other stakeholders are also warned.

7. Alcohol

The industry body acknowledges the risk that many BPs may be pressured to drink beer in order to support their sales or to please the customer. It is the policy of the BSIC that during working hours, BPs should not sit or drink with consumers. Members of BSIC will inform BPs on this rule and train BPs on how to refuse a beer offered without insulting the consumer and on what steps to take if one is forced to drink.

ANNEX 1

BSIC Organization

The members of BSIC believe that self-regulation is currently the best way of ensuring BSIC members will comply with the Code. An NGO will be requested to evaluate the compliance on a regular basis. The BSIC members inform their distributors on the Code, supervise and monitor the compliance and take actions if the distributor does not comply with the Code. Any beer-selling party in Cambodia is welcome to join the BSIC as long as this party ensures compliance to the code of conduct. Therefore, also beer distributors themselves are welcome to sign the code of conduct and become member of the BSIC. Regular meetings amongst BSIC members will be organised.

ANNEX 2

Communication with external parties

The BSIC will function as a platform for communicating with the government (governmental taskforce includes the Ministries of Labour, Interior, Commerce and Women's Affairs) to cooperate on a joint approach to improve the situation of BPs and related matters. The BSIC will also respond to media issues and share information on its activities by issuing press releases and by informing stakeholders via the internet sites of the individual BSIC members.

In Cambodia today, the flow of workers between garment, entertainment and sex work has been well documented and although accelerated by the financial crisis, this flow pre-dates the 2009 economic downturn. Garment factory workers are mostly young women and, after leaving or being laid off from factory work, an option for many is to stay in the city and take jobs in the entertainment sector which both increases women's opportunity to earn additional income by selling sex and in turn, exposes them to a number of new occupational risks. **Cambodia - Addressing HIV Vulnerabilities of Indirect Sex Workers during the Financial Crisis: Situation Analysis, Strategies and Entry Points for HIV/AIDS Workplace Education** is the first step towards developing a tailor-made, focused intervention on HIV/AIDS for indirect sex workers in Phnom Penh, using the structure of their formal entertainment sector workplaces. The narratives contained within reveal the human face of these women workers and an understanding of their vulnerabilities, so that we can offer them practical responses.

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