



Session on negotiating safe sex in Vietnam. Photo: Ehrin Macksey © Aidsfonds

# The impact of Community Empowerment

## on access to sexual and reproductive health and rights (SRHR) services (including HIV) in line with the Sex Worker Implementation Tools (SWIT) for female, male and transgender sex workers

A summary of research in Indonesia, Kyrgyzstan and South Africa

In 2018, research commissioned by Aidsfonds was conducted in Indonesia, Kyrgyzstan and South Africa on community empowerment, meaningful involvement of sex worker communities and access to sexual and reproductive health and rights services (including HIV)<sup>123</sup>. The studies were executed by three academic partners in equitable partnership with sex worker communities, utilizing community based participatory research (CBPR) methods and were finalized in 2019.

This paper summarizes the main findings and recommendations of these three studies, answering the main research question:

**“What is the impact of Community Empowerment on access to sexual and reproductive health and rights (SRHR) services (including HIV) in line with the Sex Worker Implementation Tool (SWIT) for female, male and transgender sex workers – in Indonesia, South Africa and Kyrgyzstan?”**

1 The Impact of Community Empowerment on access to sexual and reproductive health and rights (SRHR) and services (including HIV) in line with the Sex Worker Implementation Tool (SWIT) for female, male and transgender sex workers; The case of Kyrgyzstan. By Nina Bagdasarova, Elena Kim, Aikerim Nazaralieva, Kristina Mahnicheva, Shahnaz Islamova, Minavar Lusupova.

2 Community empowerment and access to sexual and reproductive health and rights services (including HIV) for sex workers in South Africa; Research report: a series of 6 research briefs. By Kristen Daskilewicz, Pamela Chakuvinga, Mina Haji, Alex Müller, July 2019.

3 BERDAYA: A Study on Empowerment of Sex Worker Community in Indonesia. By AIDS Research Center, Atma Jaya Catholic University, Jakarta Indonesia and OPSI (Indonesia National Network of Sex Workers).

## Community empowerment

According to the Sex Worker Implementation Tool (SWIT)<sup>4</sup>, community empowerment is a process whereby sex workers take individual and collective ownership of programmes in order to achieve the most effective HIV responses, and take concrete action to address social and structural barriers to their broader health and human rights. It is regarded as essential in health and rights interventions. The eight key elements of community empowerment according to the SWIT, are: (1) working with communities of sex workers; (2) fostering sex worker-led outreach; (3) developing sex worker collectives; (4) adapting to local needs and contexts; (5) promoting a human-rights framework; (6) strengthening the collective; (7) shaping policy and creating enabling environments; (8) sustaining the movement.

The studies examined a broad range of community empowerment programmes, including health interventions like information provision, condom use promotion, and voluntary counselling and testing, human rights education and legal support, advocacy and support to community organisations. It includes programmes carried out by sex worker-led organisations as well as NGOs that were not led by sex workers. The studies also examined services provided by the government. This shows that community empowerment entails many different interventions. Subsequently, all three studies used the SWIT to define community empowerment, but measured it in different ways. Table 1 outlines the indicators used in each study to measure community empowerment.

## Research findings

The studies in the three countries show a positive impact of community empowerment on access to sexual and reproductive health and rights (SRHR) services, including HIV.

In Indonesia, community empowerment programmes contributed to positive changes in sex workers' knowledge, view of themselves, behaviour change<sup>5</sup> and an increased social support network. Community empowerment has shown positive association with sex workers' participation in decision making of policy and program development and access and utilization of SRHR services. The coverage of the programmes in this country is still relatively low, and female sex workers have least access, while community empowerment for male sex workers tends to focus on awareness of sexual health instead of social and economic empowerment.

In Kyrgyzstan it was found that due to promotion of the SWIT, the attitude of sex workers towards services and service providers has moved towards a more confident and independent position. Many of the sex workers started directly demanding services from the state, like obtaining documents or visiting institutions.

The participation of sex workers in mobilisation activities and community events increased as well. Furthermore, community-led services in Kyrgyzstan have been successful in building adequate access to commodities such as condoms, lubricants, STI and HIV testing and consultancy. Nearly all respondents reported using condoms in their everyday work and life.

Indonesia	Kyrgyzstan	South Africa
Access and utilization of empowerment programmes	Sex workers' access to services	Sex workers received health information from sex work organisation outreach workers
Perception of being empowered (power within, power with others, power over resources)	Personal empowerment (self-care, agency, decision-making and self-perception)	Collective agency (whether sex workers helped fellow sex workers with different problems)
Perceived benefit of empowerment programmes	Sex workers' participation in community life	Membership of a sex worker collective

**Table 1: Indicators used to measure community empowerment**

<sup>4</sup> The Sex Worker Implementation Tool (SWIT) was produced in 2013 and offers practical guidance on effective HIV and STI programming for sex workers and features community empowerment at the core of all recommended interventions.

<sup>5</sup> This included increased independence in accessing health service and increased consistency in condom use.

In South Africa, the findings show that educational interactions of sex workers with peer educators (outreach workers) were associated with increased knowledge and health service use. Four out of five sex workers in the sample had received health information from an outreach worker in the past year, and sex workers who had received this health information were more likely to know their HIV status and to have accessed healthcare in the past year.

In all three countries, the use of the Sex Worker Implementation Tool (SWIT) has been crucial in promoting community empowerment of sex workers. The SWIT provides a framework to promote the meaningful participation of sex workers in programme development and policy making. Through the use of the SWIT, sex workers have an increased say in programme planning and implementation, they are increasingly involved in mobilization activities and are more confident to speak up and share their stories. For example, in Kyrgyzstan, sex workers started developing their own agendas for discussions and organized meetings and events independently.

However, not all elements of the SWIT are implemented evenly. For example, in Indonesia, it was concluded that community empowerment related to health services, in particular HIV services had the largest coverage compared to programmes focusing on rights awareness or skill building. The elements of the SWIT that were found by the studies to be implemented most often and successfully are: working with communities of sex workers, fostering sex worker-led outreach, and promoting a human-rights framework. Elements that are still not implemented well enough or were mentioned little in the studies are: strengthening collectives, sustaining the movement, adapting to local context and needs, and shaping policy and creating enabling environment.

## Best practices

### Working with communities of sex workers

The studies show that sex workers play an active role in the design of empowerment programmes of sex worker-led organisations and NGOs, by giving input to the priorities of the programme as well as in the implementation by serving as outreach worker or help fellow sex workers to access health services.

The studies show that community empowerment contributes to reduced self-stigma and increased

confidence of sex workers. Sex workers know better what their rights are, have an increased feeling of pride for being a sex worker and confirm that participation in empowerment program gives them more self-confidence. They feel less insecure in dealing with other people, and have more courage to speak in public.

The studies show that the support of friends who are also sex workers and sex worker collectives is essential for sex workers to participate in programmes and ultimately utilize services. Through community empowerment, sex workers extend their networks with other sex workers as well as with institutions and healthcare providers. Sex workers share information with co-workers, which makes them see themselves as useful and more positive.

### Fostering sex worker-led outreach

In all three countries it is highlighted that outreach work by and for sex workers plays a crucial role for successful community empowerment and access to SRHR services (including HIV). In Indonesia it was concluded that sex workers were most often participating in outreach programmes, compared to other empowerment programmes. The outreach programs discussed in the different studies vary, whereby some are executed by sex-workers themselves, and others by staff of NGOs.

Outreach workers have a positive influence on the knowledge, health and behaviour of sex workers. Due to sex worker-led outreach work, sex workers have increased access to and use of condoms, lubricants, STI and HIV testing and health services. In the studies of Indonesia and South Africa, successful peer educator programmes are cited as best practices and in Kyrgyzstan it is shown that outreach workers are ready to support sex workers and step outside their actual responsibilities. Examples of this include building friendships with the sex workers and babysitting children when sex workers need to go to the court. This enhanced the involvement and commitment of sex workers to the community.

The studies show tight links between the relationship of trust from sex workers towards outreach workers and their participation in community events, their readiness to defend their rights, motivation to resist institutional violence and grow their self-reliance. Building long-term relationships between programme implementers, outreach workers and sex worker communities is essential for successful programmes and it encourages sex workers to utilize the service provided.

### **Promoting a human rights framework**

The studies show the importance of providing accurate information to sex workers, as well as education, not only on sexual and reproductive health and services but also on human rights. Through an increased awareness about their rights and possible forms of violence, sex workers can increasingly recognize, report and defend themselves against their rights' violations, as well as access the health services they need.

The coverage of human rights education differs per country. In Indonesia most community empowerment programmes focus on health services and less on rights awareness or skills building, while the findings in South Africa document that human rights education is currently prominent in sex worker-led outreach and that this education is having a positive impact on sex workers knowing their rights. Here, the Sex Workers Education and Advocacy Taskforce (SWEAT) Legal Defence Centre (SLDC) is an example of a successful programme for and by sex workers. Sex workers have been trained to provide paralegal services and a lawyer is employed by and physically located at SWEAT so that sex workers can easily access her.

However, a high level of violence and human rights violations of sex workers remains persistent in all three countries. This shows a need for (further) sensitization of health care workers, government officials and police, as well as accountability mechanisms.

## **Risks and challenges**

### **Stigma and violence**

Although community empowerment contributes to decreased (self-)stigma of sex workers, stigma is still a major barrier for the empowerment and access to health services of sex workers in all countries. This includes stigma by others, including health care workers, as well as internalized stigma of sex workers themselves.

Violence and discrimination against sex workers were mentioned as a challenge in all three reports. In Indonesia, 47.42% of the respondents reported having experienced some type of violence or abuse within the last year, with transgender sex workers experiencing violence most often. In South Africa, one in four respondents reported discrimination when going to health facilities. This reduces the access of sex workers to health facilities, in fear of facing discrimination due to their profession. In Kyrgyzstan, psychological and social support services were mentioned by sex workers as desirable but unavailable.

High levels of self-stigmatization also obstruct full participation of sex workers in programmes and services, their ability to make decisions and take control over their lives and to seek (mutual) assistance.

Structural violence, including the closure of brothels, raids and police violence, were widely reported and impact the safety and health of sex workers. In Kyrgyzstan, study results indicate an increase in illegal actions by the police compared to 2015. For example, the level of arbitrary detention of sex workers rose from 17% to 42%. Law enforcement does not recognize the extent of the violations, citing a lack of formal complaints from sex workers.

### **Shaping policy and creating enabling environments**

Criminalisation of sex work is still a serious issue in many countries. This contributes to stigma and prevents sex workers from fully participating in healthcare. Furthermore, criminalisation and stigma contribute to sex workers' fear to speak up and participate safely in public campaigns. The studies show that sex workers in all three countries have only limited ability to influence and participate in decision making in policy making in an environment where sex work is criminalised.

However, sex worker collectives are finding ways to promote community empowerment and take part in government consultations or coordination mechanisms, such as a country coordinating mechanism of the Global Fund in Indonesia. This is often done with a focus on health services; in Indonesia it was mentioned that by using HIV programming as an entry point, it is possible to organise sex workers into groups within the current policy environment. Similarly, advocacy in South Africa takes access to health as a starting point by emphasizing that access to health services is a human right. Also in Kyrgyzstan, sex workers have achieved considerable achievements by advocating for health rights through the Global Fund. Community-led services have been especially successful in building adequate access to commodities such as condoms, lubricants, STI and HIV testing and counselling.

In South Africa, a success story is the National Sex Worker HIV Plan 2016-2019, which was the result of sex worker advocacy. This policy recognises sex workers, emphasises the need to protect sex workers' human rights and promotes participation of sex workers in community empowerment practices. However, challenges for meaningful engagement between sex workers (and all civil society) and national government remain, especially when it comes to accessibility and transparency.

### Adapting to local needs and context

Even though it was reported that sex workers participate in the design and implementation of empowerment programmes, mixed findings were reported about the extent to which empowerment programmes by NGOs meet the needs of sex workers. In South Africa, sex workers were pleased with the services provided by NGO programmes, but at the same time it was reported that they did not feel ownership or leadership of programmes. In Indonesia, often the same repetitive activities were implemented without proper follow-up. The studies did not explicitly compare this to empowerment programmes by sex-worker led organisations. This shows the importance of adapting programmes to the local context and the needs of sex workers. As indicated by the SWIT and the studies, sex workers therefore need to participate in a meaningful way in all stages of programme planning and implementation, and not only, for example, as outreach workers.

### Strengthening the collective and sustaining the movement

Both in Indonesia and Kyrgyzstan it was reported that there was a lack of trust between sex workers and a sense of community was missing. Research

findings show that a sense of community plays a great role when it comes to feeling secure and supported. Different and complex factors can interrupt the process of sex workers coming together with a joint purpose and connecting with each other, such as self-stigma, stigma within the community concerning HIV/AIDS. This prevents sex workers from participating in empowerment programmes, as well as from organizing themselves, advocating for their rights and participating in decision making on government level. The study in South Africa shows that the importance of strengthening collectives is generally underestimated by NGO workers and government and the topic was hardly discussed in focus groups, even though this is specifically mentioned in the SWIT and the National Sex Worker HIV Plan of South Africa.

The final element of community empowerment in the SWIT, namely 'sustaining the movement' was also mentioned little in the studies. The studies did find that sex worker organisations are not always connected to wider civil society or other movements and face challenges with regards to their institutional sustainability. Finally, in Indonesia it was reported that continually changing and complex financing schemes pose a challenge towards program sustainability.



Safe condom workshop organized by WONEETHA. Photo: Chris de Bode © Aidsfonds 2016

## Recommendations

Based on the findings of the three reports, the following recommendations are formulated to further improve (national) support for community empowerment.

### For NGOs and community-led organisations<sup>6</sup>

- **Further promotion of the implementation of SWIT:** In all countries it was recognized that the SWIT is a very useful framework for community empowerment and contributes to the meaningful participation of sex workers and their access to sexual and reproductive health and rights services. As shown in the studies, not all elements of the SWIT are equally implemented. Special attention should be given to the following elements of the SWIT: strengthening collectives, sustaining the movement, adapting to local context and needs, and shaping policy and creating enabling environment.
- **Expand the roles sex workers play in community empowerment programmes to promote meaningful participation of sex workers in all stages of programme development and implementation:** The studies show promising good practices of the meaningful participation of sex workers, but it should be ensured that sex workers participate and work in all stages of community empowerment programmes, and not solely as outreach workers and peer-educators.
- **Promote sex workers' ability to advocate and influence national and local policymaking:** This includes continuing efforts to build sex worker communities and collectives, further promoting a human rights framework, and connecting to other community networks to combine advocacy efforts. The studies suggest using access to health as an entry point works to organise sex workers and advocate for their rights. In the study of Indonesia recommends sex workers organisations to work with the local government and authorities as the institution that will be in direct contact with sex workers, either during raids or follow-up empowerment activities.
- **Increase psychosocial support for sex workers:** In the light of the violence and stigma faced by sex workers, psychosocial support is essential for

the reduction of self-stigma, and the affirmation of sex workers' autonomy and rights. The study of Kyrgyzstan also identified the need of psychological support for NGO staff.

### For governments and policy makers

- **Improve the ways in which civil society, including sex workers, can participate in policymaking:** this includes transparent decision making, building relationships between sex worker collectives and government actors and making government services accessible for sex workers (such as obtaining documents and receiving social support).
- **Decrease stigmatisation of sex workers among government institutions:** Sensitizing of government actors and law enforcement, as well as accountability mechanisms can contribute to reduced violence and stigma faced by sex workers, ultimately contributing to increased safety and access to health services of sex workers.
- **Improve the availability and quality of health services provided, including sensitization of health care workers:** For sex workers to access sexual and reproductive health and rights services, it is essential that the quality of these services is sufficient, that the services meet their needs and they don't face discrimination when visiting facilities. This means as well that sex workers should be involved in shaping policies with regards to the accessibility and access to health care and the principles of community empowerment (as outlined in SWIT) should be adopted, as this is a key approach in access to health services.

### For donors and international organisations

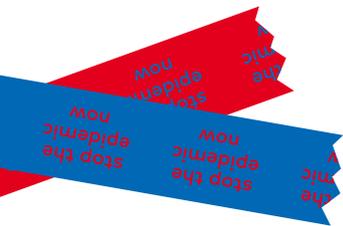
- **Increased scope and coverage of community empowerment programmes:** in some countries, community empowerment programmes mostly focused on health services, or were only focused on specific groups of sex workers or regions/cities. Programmes should be expanded to include human rights education, psychological support and economic empowerment, and measures should be taken to ensure sex workers of all genders and localities benefit from the programmes.

<sup>6</sup> In the recommendations of the reports, no distinction was made between recommendations for sex worker-led organisations and NGOs

- **Prioritise the strengthening and sustainability of sex worker collectives:** Collectives ensure that sex workers build their social communities, provide opportunities for leadership and learning and create a safe space for sex workers to address their needs. Continued support should include building the institutional sustainability of sex worker collectives.
- **Promote sex workers' ability to advocate and influence national and local policymaking:** This includes continuing efforts to build sex worker communities and collectives, further promoting a human rights framework, and connecting to other community networks to combine advocacy efforts. The studies suggest that using access to health as

an entry point works to organise sex workers and advocate for their rights.

- **Further promotion of the implementation of SWIT:** In all countries it was recognized that the SWIT is a very useful framework for community empowerment and contributes to the meaningful participation of sex workers and their access to sexual and reproductive health and rights services. As shown in the studies, not all elements of the SWIT are equally implemented. Special attention should be given to the following elements of the SWIT: strengthening collectives, sustaining the movement, adapting to local context and needs, and shaping policy and creating enabling environment.



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