

Changing Female Sex Work Patterns in Delhi:

Geographical to Virtual Network



Delhi State AIDS Control Society



India Health Action Trust



**Changing Female Sex Work Patterns in
Delhi:
Geographical to Virtual Network**

Changing Female Sex Work Patterns in Delhi: Geographical to Virtual Network is a consolidated document, which narrates the penetration of advanced communication devices into grassroots level and its impact on the process of HIV prevention programs amongst them. This is an attempt to propose a strategy to address the FSWs operating in mobile phone based networks.

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Preface

Female Sex Workers (FSW) is one of the high risk groups in the context of HIV infections. Focused behavioural and biomedical interventions for them are a thrust of the National AIDS Control Program (NACP) of Govt. of India.

Sex work pattern in Delhi has drastically changed from being generically a hotspot based *geographical network* to a mobile phone communication driven *virtual network*. This document is an effort to decipher the changed work pattern of FSWs in the state of Delhi in view of planning effective and efficient outreach and service delivery to them.

The change in technology reflects in current coverage of FSWs in TI program. Other than the traditional ways of sex work different layers of networks have emerged, making it difficult to reach out to the individual female sex workers with current strategy. Keeping in view the changes in sex work pattern and its program implications, the document is relevant in directing to a new approach that needs to be tested and scaled up through the TIs for FSWs in the state.

This study document is prepared by Delhi State AIDS Control Society (DSACS) and India Health Action Trust Technical Support Unit (IHAT TSU) for DSACS. I appreciate the attempt of TI division and TSU and I hope that this document will give inputs to develop strategies that can guide FSW TI programs in the state and across the country to minimize HIV incidence & prevalence among most vulnerable section of the society

(Dr. Mrinalini Darswal, IAS)





India Health Action Trust



Message from Managing trustee IHAT

IHAT started TSU in Delhi in May 2014 with a mission of value addition to the TI program in Delhi. We have acquired the techno-managerial knowhow in public health through the direct learnings from community and the experiences in implementing the theoretical expertise of the management team into grassroots. IHAT is committed to increasing the effectiveness and efficiency of public health policy and programmes through the use of Programme Science—the systematic application of scientific theories, methods, and findings to programme design, implementation, and evaluation. Programme Science enables implementers and researchers to select and manage the most appropriate strategies for achieving rapid population-level gains in public health.

This document "Changing Female Sex Work Patterns in Delhi: Geographical to Virtual Network" is a collection of community voices with facts and figures revealing the changing patterns of sex work in Delhi. The findings are strategically crucial to streamline programs to cover the FSWs in the mobile based networks.

HIV prevention programs need dynamic strategies with adaptability to respond to the changes and to improve the efficiency in coverage. This study will help TSU and DSACS develop strategies for BCC, IEC and other service deliveries for the network based FSWs. We should work on addressing the mobile based virtual network FSWs through innovations with the help of new technologies.

I appreciate TSU team and DSACS for this great endeavour.

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Abbreviations

ANC	- Ante Natal Clinic
BCC	- Behavioural Change Communication
CBO	- Community Based Organisation
DIC	- Drop-in Centre
DSACS	- Delhi State AIDS Control Society
FGD	- Focus Group Discussion
FSW	- Female Sex Worker
GSDP	- Gross State Domestic Product
HIV	- Human Immunodeficiency Virus
HSS	- HIV Sentinel Surveillance
IDU	- Injecting Drug User
ICTC	- Integrated Testing and Counselling Centre
IPC	- Inter Personal Communication
MSM	- Male having Sex with Male
NACP	- National AIDS Control Program
NGO	- Non-Governmental Organisation
NACO	- National AIDS Control Organisation
ORW	- Outreach Worker
STI	- Sexually Transmitted Infection
TG	- Transgender
TSU	- Technical Support Unit
TI	- Targeted Intervention



Executive Summary

Female sex work pattern in Delhi has drastically changed from hotspot based geographical networking to virtual networking with the increased use of mobile phones, internet and social media. It reflects in current coverage of FSWs in TI program. Other than the traditional ways of sex work, different ways of networks have emerged, making it difficult to reach out to the individual female sex workers with the current strategy.

Keeping in view of the changes and program implications, TSU and DSACS initiated a qualitative study on the changing patterns of female sex work in Delhi with the objective of exploring new trends of sex work pattern and to devise a new strategy.

Participatory research methodology is adapted for the study. TI program data and ICTC data are used as secondary sources. Primary data is collected directly from TIs. TI program staff, peer educators, pimps, female sex workers, secondary and tertiary stakeholders participated in the process. The study started in September 2014 and the field level data collection was completed by February 2015.

Key Findings

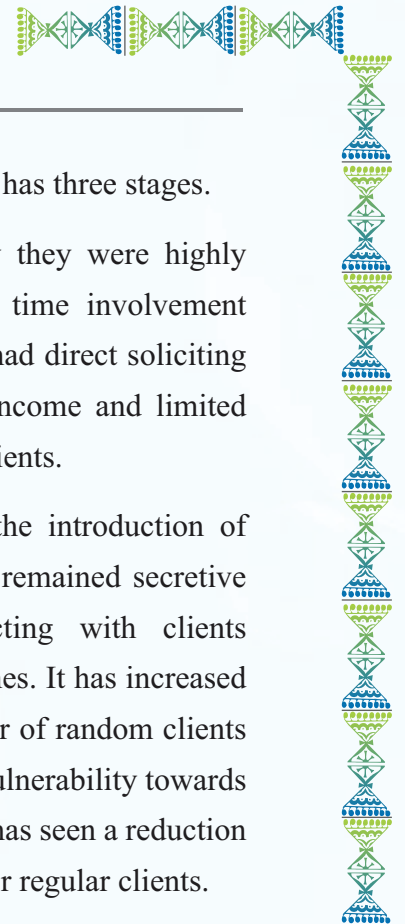
1. The entry of mobile phone changed the networking pattern of FSWs in Delhi. The street and home based FSWs have into converted mobile phone based and pimp based networks.

2. Street based FSWs have gone through four stages during the evolution from street based to network based sex work. The presence of the FSWs in the hotspots declined significantly as reported by the network based FSWs during the study.

a. Stage I: In this initial stage they were visible at hotspots, soliciting directly. They were exposed to violence and discrimination.

b. State II: This is the stage after mobile phones got introduced as a device for networking and soliciting. With the introduction of mobile phones, the visibility of FSWs has reduced and direct client solicitation in the hotspots has become meagre. This stage also shows reduction in violence against FSWs.

c. Stage III: This is a stage of rectifications. The characteristics of Stage II have been seen corrected in Stage III. In this stage, FSWs are seen



trying themselves to position among their clientele by trying to disseminate their mobile numbers, which are the only form of their identity in the network. For disseminating their phone numbers to the clients, they have sought the help of middlemen. This move totally disconnected them from hotspots. In this stage, they had to face cheating from their unknown clients.

d. Stage IV: This stage starts where they got disconnected from their hotspots in stage III. In Stage IV, the FSWs are totally relying on mobile phone based technologies for soliciting which is totally controlled by their pimps (a middle person). Here, clients are assured by the pimp. Income of FSWs got increased in this stage. They are also prone to violence from random clients. Substance abuse is also seen higher among FSWs during this stage. This pimp-controlled operation has led to a transformation of PEs to pimps, which is detailed in this document, separately.

3. The study found that even the home based FSWs shifted into network based sex work pattern. The metamorphosis to

reach to the network has three stages.

a. Stage I: Initially they were highly secretive, with part time involvement in sex work. They had direct soliciting at home with less income and limited number of regular clients.

b. Stage II: With the introduction of mobile phones they remained secretive and started interacting with clients through mobile phones. It has increased their income, number of random clients as well as risk and vulnerability towards HIV. But this stage has seen a reduction in the number of their regular clients.

c. Stage III: This stage identifies that the house based FSWs have also started moving to other destinations due to the use of mobile phones. In this stage, they start moving out of their house for sex work, as they are able to get connected with their family members through mobile phones. They disguise themselves as part time workers and as a natural course get linked to a pimp network through their clients. Their income as well as risk and vulnerability towards HIV increase.



Evidence shows that HIV prevalence among sex workers is 12 times greater than among the general population. Even in very high prevalence countries, HIV prevalence among sex workers is much higher than among the general population. An analysis of 16 countries in sub-Saharan Africa in 2012 showed a pooled prevalence of more than 37% among sex workers.

The Gap Report 2014, UNAIDS / JC2656 (English original, July 2014, updated September 2014)

4. The study has also seen a surprising shift of TI peer educator into a pimp with the introduction of mobile phones. The PE is a natural leader of around 50-60 FSWs. The conversion, mobility and invisibility of the FSWs have made the PE as a contact point for clients in the hotspots. The PE in turn get linked to the FSWs through mobile phones as she knows the phone numbers of most of the FSWs. This situation contributed to their conversion as pimps.

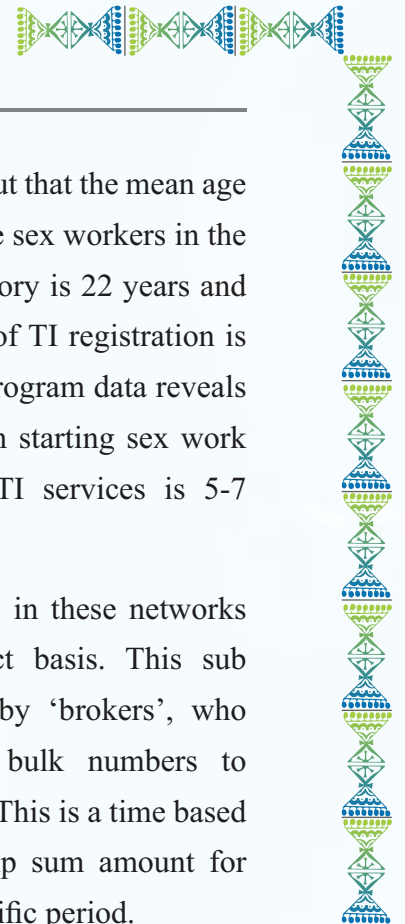
5. 43% of the experienced peer educators currently working in the TI are practicing as pimps too. This develops a business competition among the current peer educator cum pimps and the conventional pimps, who are not

PEs. Presently the contacts of individual PE are limited to 25-30 FSWs. The other attributing factors for limited contacts are high mobility and virtual/mobile network. During the period of last four years (2010-2014), 33% of the FSW TI peer educators established pimp network and left the PE job.

6. The shift of geographical network into virtual network is the overall result of the entry of mobile phone based communication into the female sex work. It has reduced the social networking and focused on business networking. It reduced the geography based individual face to face contact and increased network based phone contacts. There is no physical space for mutual supports and collectivization as the space is changed and as a result, the vulnerability increased at a high rate. It increased the secrecy and anonymity of individuals involving in sex work. The mobility is high due to better transportation facility in Delhi as a metro city as well as the mobile connectivity for instant information sharing.

7. A pimp is defined in this study as the middle person working between FSW





and client/customer. Majority (83%) of the pimps, who are in touch with TIs are females. Intra and inter networks are established for improving the business.

8. It has been reported that 72% of network based sex workers are moving on a regular basis. 70% of the network based FSWs are below 22 years of age. 65% of this category is unmarried and the earning members for their family. 80% of the community members are literate and well experienced in using smart phones and its applications.

Migration and mobility have particularly complex and non-linear effects on HIV risk pathways among FSWs, both mitigating and conferring HIV risk. Internal domestic and circular migration and mobility (eg, intra-urban or intra-district mobility, and short-term travel to sex-work hotspots) have been associated with enhanced HIV vulnerability, whereas long durations of mobility and international migration from non-endemic settings have been linked to high rates of condom use and low HIV prevalence.

2014: Kate Shannon and ten other authors Global epidemiology of HIV among female sex workers: influence of structural determinants

9. Study has found out that the mean age of the majority of the sex workers in the network based category is 22 years and in TI the mean age of TI registration is 32. The current TI program data reveals that the gap between starting sex work and accessing the TI services is 5-7 years.

10. There are FSWs in these networks working on contract basis. This sub category is driven by ‘brokers’, who supply women in bulk numbers to pimps for sex work. This is a time based contract paying lump sum amount for each FSW for a specific period.

Program Implications

The change in the sex work pattern from geographical to virtual networks leads to many program level implications in TI. Less visibility of FSWs in hotspot has become a challenge in the traditional hotspot-focused peer-led outreach model. The regularity in coverage has become difficult due to the high mobility among the network based FSWs. It leads to the reduced access of services from the TI program. The secrecy maintained by FSWs often is a deterrent towards the onward referrals and linkages with



ICTCs and other HIV services. All the FSWs in this network have a different predominant social identity such as house wife, student, part time worker etc. and their social networks are linked with those groups. Messaging on HIV and sex work related health issues required an innovative strategy to address this group.

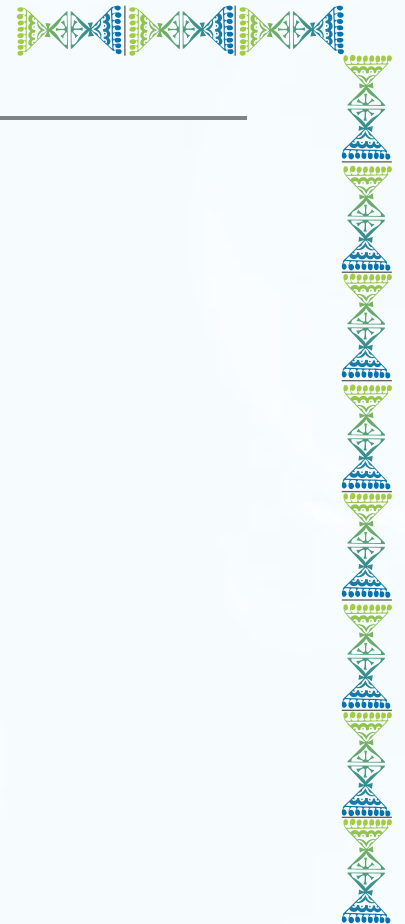
Strategic Recommendations

There is an urgent need to develop a strategy to address the virtual network based FSWs with the use of pimps as a central point in outreach and communication. The capacity building of pimps in view of message delivery, referrals and condom education need to be planned to reach out the FSWs effectively. Digital media can be used for

IEC BCC programming and referrals. Condom education and distribution need to be linked with the pimp centred strategy. Developing satellite PPP clinics or linkage with the preferred health provider mode has to be revamped to address the STI care for this community. Screening of HIV can be decentralized through the use of whole blood test technique and capacity building of TI staff. Referral system can be used for the confirmatory tests of HIV. Digital social network media platforms can be used for the community collectivization among this group. Reporting of this approach needs to be simplified and possibly some mobile applications need to be devised for reporting, tracking and analysis.

* * * * *





Chapter 1

Introduction

Delhi is growing as an emerging economy with 9.3% growth during 2013-14 with GSDP of 67.1, billion USD. Delhi expects a growth rate of 11 to 11.5% by 2017. Delhi is also to be one of the first smart cities owing to recent government decisions. Delhi has a population of 1.68 crores (Census 2011) and its estimated population by 2017 will cross 2 crores. Better transportation options, investments in real estate and tourism in the city have attracted millions to share their dreams.

The HIV epidemic in India is observing a decline in new infections and age specific incidence by male and

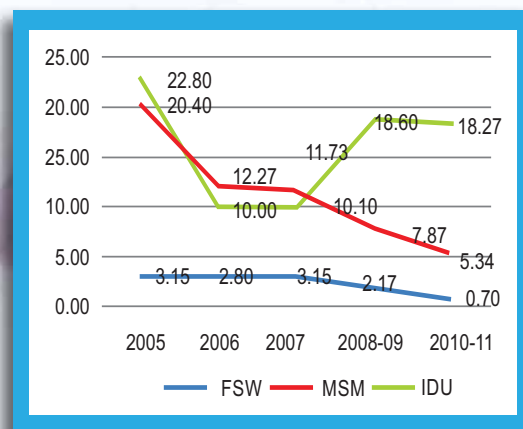


Figure 1: HIV prevalence among HRGs in Delhi (Source: Technical Brief, HSS 2012-13)



female at National Level. While Delhi continues to be in the categories of rising epidemic since last two rounds of HIV Sentinel Surveillance (HSS). Currently the ANC HIV prevalence is

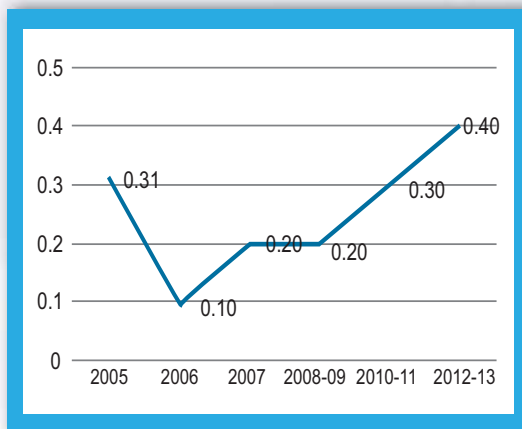


Figure 2: ANC HIV prevalence trends in Delhi (Source: Technical Brief HSS 2012-13)

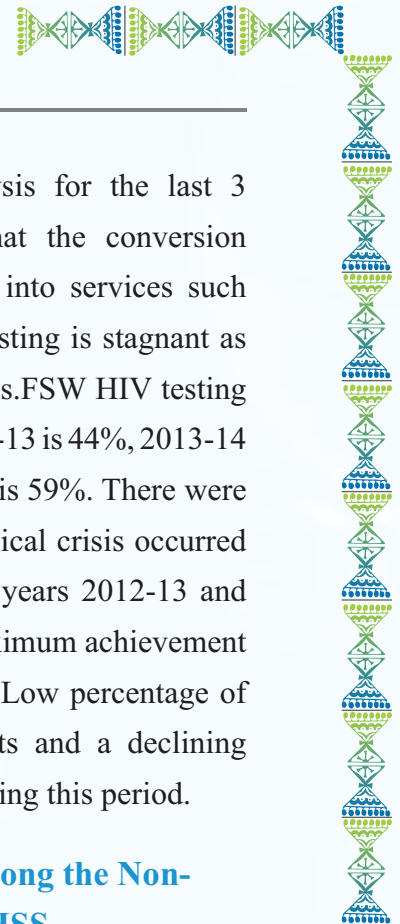
0.40% as against National prevalence of 0.35% (Source: Technical Brief HIV Sentinel Surveillance, 2012-13). Delhi is showing inclining trends in the consistent ANC HIV sentinel sites. The HIV prevalence among HRGs shows a declining trend among FSW and MSM, while the same is stable in case of IDUs as per the HSS, 2012-13. However, the ICTC reactivity among HRGs across different parts of the city is varying and recently in IDU program there has been sharp increase of ICTC reactivity. Significantly

the HRG testing in ICTCs remains a challenge due to various reasons.

Delhi state has a mapped population of 44600 female sex workers, who are basically from three sub types such as brothel based, street based and home based. The HIV prevalence among the FSWs in Delhi shows a decline among the brothel based category and it is stable among the non-brothel based categories over the period from 2003 to 2010-11 (source NACO HSS data)

Need of the Study

The analysis of FSW TI master registers indicated that the average age of FSWs accessing services from TI is 32. It has increased over a period of time up to 36. The average number of years, the FSWs completed, in sex work profession at the time of registration in TI is seven. This data has generated a hypothesis that the TIs have reached out the population 5-7 years late to the time of their entry into sex work. More than 70% FSWs registered in TIs are above 30 years old. The new registration of FSWs in the TIs in a year is less than 1% of the active population for the last 3 years.



“Female sex workers are a population who are at heightened risk of HIV infection secondary to biological, behavioural, and structural risk factors. When reviewing the data from the past 5 years, female sex workers still carry more than a 50-times increased odds of HIV infection in India.”

2012: Stefan Baral and 7 other authors
Burden of HIV among female sex workers in low-income and middle-income countries: a systematic review and meta-analysis

Analysis of the drop out data in master sheet revealed that 91% of the dropped out cases from the TIs are young age (below 25 years old) FSWs. The total dropouts of FSWs in TIs in a year is less than 2%. The master sheet became stagnant after 2 to 3 years of the initiation of the intervention.

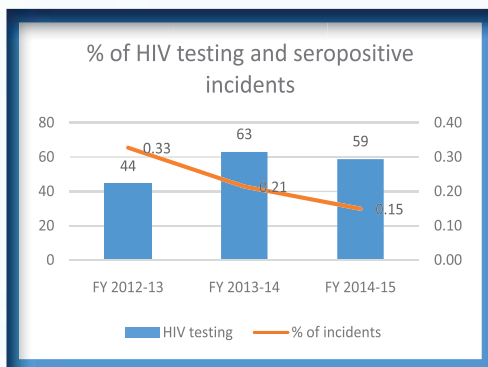


Figure 3: HIV Testing and Seropositive Incidents
Source TI Program Data DSACA

Program data analysis for the last 3 years discovered that the conversion of outreach contact into services such as clinic and HIV testing is stagnant as given in the diagrams. FSW HIV testing during the year 2012-13 is 44%, 2013-14 is 63% and 2014-15 is 59%. There were no financial or technical crisis occurred during the financial years 2012-13 and 2013-14 and the maximum achievement has limited to 63%. Low percentage of seropositive incidents and a declining trend are noticed during this period.

Low Positivity among the Non-brothel FSWs in HSS.

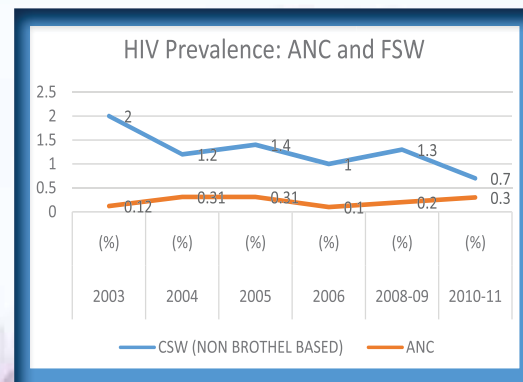


Figure 4: HIV Prevalence: ANC and FSW
Source Program Data-DSACS

As per the HSS data the positivity among the FSW shows a decline over the period from 2003 to 2011-12 as the line diagram given here.



Discordant couple data of 3 years

The discordant couple data, among couples husband/male partner is negative and wife/female partner positive is

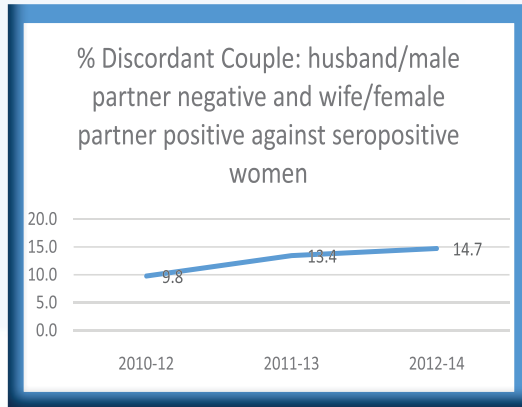
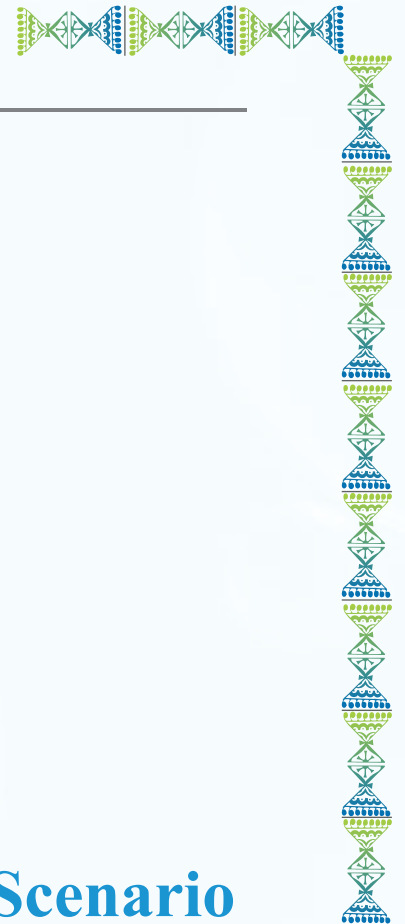


Figure 5: Discordant Couple data
Source -Program data DSACS

shown substantial increase year by year. The data for the period of 2010-14 have been analysed.

North East district of Delhi reported the highest number of discordant couples whereas the TI data shows high number hidden FSWs networks. This data also instigated to enquire about the hidden sex work networks in the state. However, this is not the lead string for the enquiry, this is an area need more profiling of the ICTC clients and further researches to find out the facts.

* * * * *



Chapter 2

FSW Intervention: Current Scenario

The FSW TI program in Delhi state started in 2001 with 2000 population. Massive scale up to saturate the coverage of population has occurred during 2004 - 05. The expected outcome of the program is sustained behaviour change of individual FSWs from the risk behaviour of HIV transmission. It is assumed that the behaviour change will occur and sustain through peer pressure and synchronously certain community norms will be developed among the peer group members. These norms will work as the support mechanism

for the sustained behaviour change. The program follows NACO NACP III operational guideline for Targeted Intervention.

Current Program Coverage

As per the TI program site revalidation data Delhi has 44550 FSWs active in sex work. Forty TI units are working in Delhi to implement the HIV prevention program among FSWs. There are different sub types among the FSWs. The sub types are defined for the program purpose in terms of the soliciting pattern of FSW. The FSWs, who solicit clients



in the street or public place are termed as street based. Those who are soliciting in the brothels are called as brothel based. The women, who operate in their houses/residences individually are known as home based. These three are the predominant sub types.

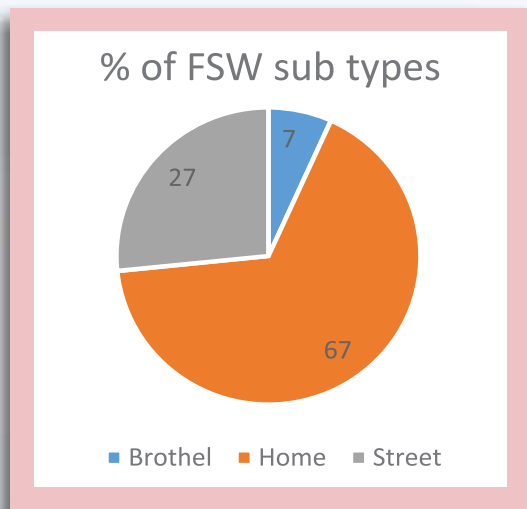


Figure 6: FSW Sub Types

67% of the population is home based, 27% is street based and 7% of the population is brothel based. About 23% of the population belongs to Northwest district. South district has the second biggest share and West district is in the third position.

Current Program Strategy

There are 5 components in the program to attain the HIV risk behaviour change among the FSWs such as;

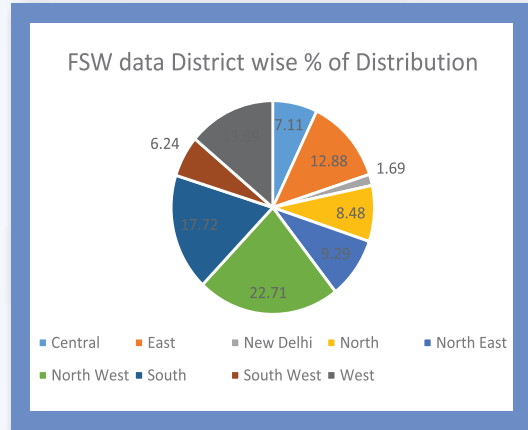
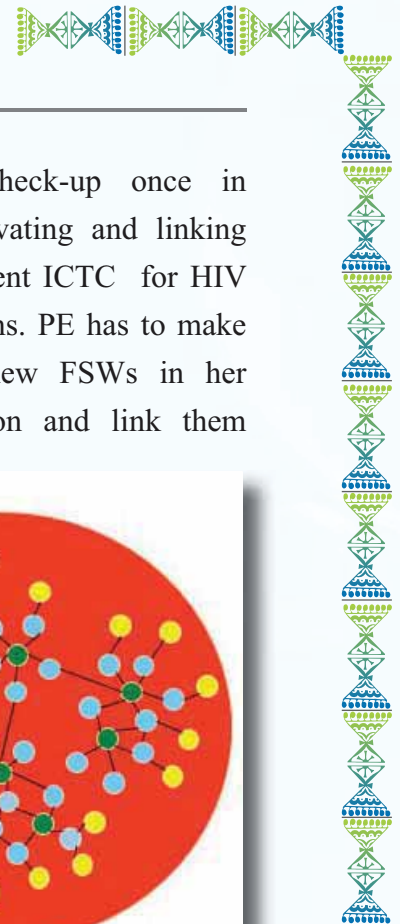


Figure 7: FSW data District wise % of Distribution

Outreach and Communication, Condom Programming, STI Management, HIV testing & Treatment and Community Mobilisation. Peer Education is the core approach and strategy of TI.

The basic geographical unit of the FSW TI program is ‘hotspot’, wherein the FSWs are soliciting for clients. The hotspot is different for different subtypes of FSWs. It may be a street corner, near to a public toilet in the bus stand, railway station platform, under the over bridge, etc. for a street based FSW. The brothel room is the hotspot for the brothel based FSW. The house of the FSW is the hotspot for the home based FSW.

‘Site’ is the bigger geographical unit. It is a geographical area with a stretch of one to two kilometres and has many



hotspots. The social geography such as district/taluka/ward is divided as sites and the sites are divided into hotspots. Hotspot is the micro unit and district/state is the macro geographical unit for intervention.

regular medical check-up once in three months, motivating and linking them with government ICTC for HIV test once in 6 months. PE has to make rapport with the new FSWs in her geographical location and link them

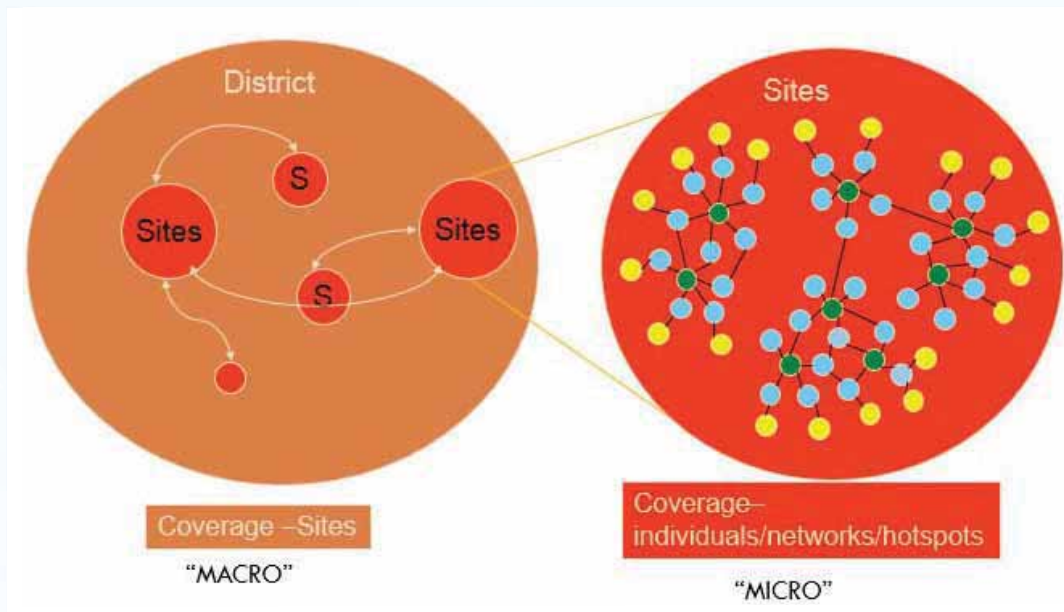


Figure 8: FSW TI Geography

As per the NACO guideline the PE (Peer Educator) has to serve 60 FSWs in her network. The service package includes regular contact with all the 60 FSWs on a regular interval of 15 days, providing free condoms as per their demand, mobilising them for

to the TI services. Providing condoms and motivational peer communication to adapt risk reduction practices are the main purposes of the regular contacts. PE is an active sex worker and must have direct network with 60 peer group members.



What is a peer educator (PE)?

A peer educator (PE) is a person from the HRG who works with her/his colleagues to influence attitude and behaviour change. PEs are responsible for providing information on HIV/STIs and harm reduction, and promoting condom use among colleagues/peers, which ultimately results in building peer pressure for behaviour change. They can also distribute condoms, lubricants, needles and syringes. They also provide basic data for monitoring the project. A PE is paid an honorarium as per NGO/CBO costing guidelines for her/his contribution to the TI project.

PE Selection Criteria

- Available for the programme in terms of time
- Committed to the goals and objectives of the programme
- Representative of, and accepted by, the FSW/MSM/TG community
- Representative of multiple “social networks” from different locations/sites
- Representative in terms of age of their social network
- Knowledgeable about the local context and settings
- Sensitive to the values of the community, and able to maintain confidentiality
- Values accountability to her/his FSW/MSM/TG community and not just to the programme
- Tolerant and respectful to others’ ideas and behaviours

- Good listening, communication, and inter-personal skills
- Demonstrates self-confidence and shows potential for leadership
- Potential to be a strong role model for the behaviour she/he seeks to promote in others
- Willing to learn and experiment in the field
- Committed to being accessible to her/his peers in times of crisis

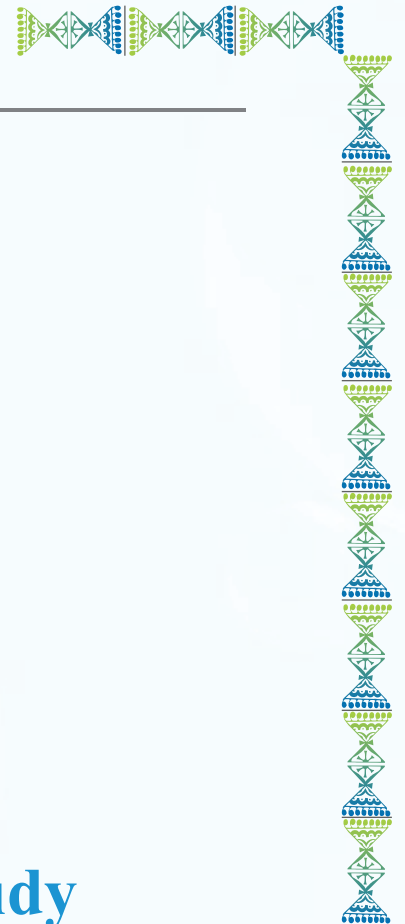
NACP III-Operational Guideline

The outreach of PE is geographically defined as per her working location. PE may cover one or more hotspots in order to reach out 60 FSWs. She might have to spend one to two hours in an area on a regular basis to outreach the FSWs and to provide them with free condoms. The outreach is exclusively PE led.

The TI ORW (Outreach Worker) monitors the outreach and helps PE identify the gaps in outreach and service uptake of FSWs.



Figure 9: PE Micro Plan



Chapter 3

Methodology of the Study

The gap in FSW service uptake, stagnancy in the TI coverage, the low HSS prevalence among the non-brothel FSWs and the discordant female infection cases lead to conduct the study with the following objectives:

Objectives of the Study

The objectives of the study are given below.

1. To understand the changing dynamics in sex work in Delhi
2. To understand the type of networks and the conversion of patterns

3. To profile the network based FSWs and Pimps
4. To measure the mobility among the FSW community within and outside Delhi State
5. To develop a feasible and effective strategy to address this population

Methodology

Participatory research methodology is used in this study to understand the changing patterns of sex work in Delhi. Primary and secondary research methods are used. The primary data was collected



through regular interactions, in-depth interviews and focus group discussions with the TI staff, Peer Educators, Pimps, FSWs and other secondary and tertiary stakeholders. 21 FGDs with FSW TI staff (118 individuals), 12 FGDs with pimps (108 individuals), 16 FGDs with PEs (144), 6 FGDs with the FSW community (52), 11 in-depth interviews with TI project managers, 9 group discussions with TI ORWs (57), 14 in-depth interviews with TI Counsellors and 2 FGDs with clients (15) have been conducted for data collection. 3 workshops on strategy development were conducted with TI staff, PE and TSU program officers. The secondary research method consists of analysis of TI program data, HSS data and ICTC data.

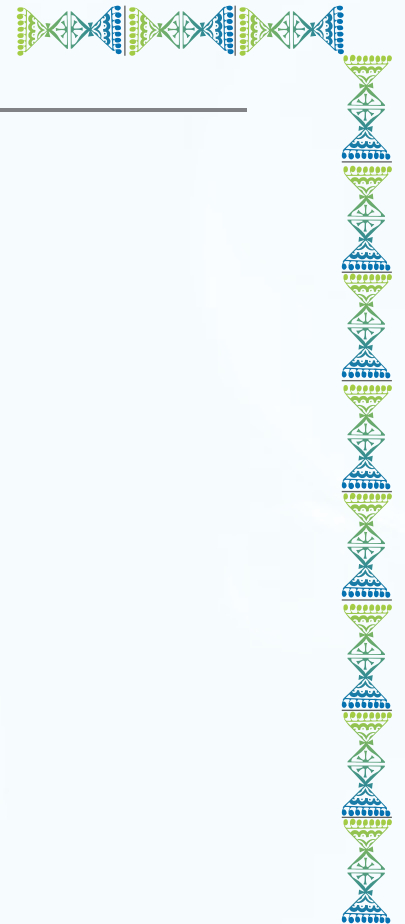
The process of data collection continued for 6 months. Program Officers' visit to the TIs and observations made in the reports also substantially contributed for the study. The staff in all the TIs supported and provided relevant information.

Limitation of the Study

The interaction was mostly done with the TI explored community and pimps. The network is highly hidden and more exploration should be made with proper mapping and outreach strategy. It was more of a qualitative analysis using purposive samplings. The data collection was limited to the stakeholders, who had given consent to participate in the study.

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Chapter 4

Findings

This chapter deals with the findings of the study in a sequential order. It discusses on the changing pattern, conversion of street and home based FSWs into virtual network based, PE conversion into pimp, the change of geographical network into virtual network, profile of pimps and FSWs in the network and mobility of the community.

Changing Patterns: The Metamorphosis

The introduction of mobile phones made drastic changes in the soliciting pattern

and nature of female sex workers in Delhi. The powerful and simple individualized communication mechanism leads to a sweeping metamorphosis in the soliciting patterns of FSWs especially the street based and home based. It affected the social network, which has high level of emotional bondages, formed on the basis of geography and other common factors. The brothel based sex work still continues its pattern without many changes.

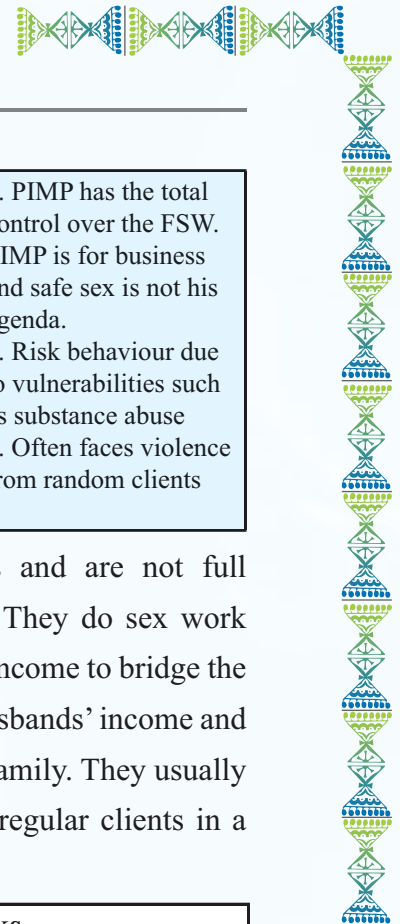


Evolution Matrix of Street Based FSW

The street based FSWs have gone

through four different stages in the process of metamorphosis. The matrix given below depicts the same.

Stages	Characteristics	Business	Risks
Stage 1 Street based FSW without mobile phone	<ol style="list-style-type: none"> 1. Visible in hotspot (public space) 2. Have contact with many peer group members 3. Direct client soliciting in public space 4. Unlimited client load 	<ol style="list-style-type: none"> 1. Low rated FSW with low income 	<ol style="list-style-type: none"> 1. Highly vulnerable to violence and HIV 2. Highly stigmatised and discriminated
Stage 2 Street based FSW with a mobile phone (first phase of the mobile phone use)	<ol style="list-style-type: none"> 1. Less visible in the hotspot. 2. Reducing direct contact with peer group members. 3. Direct soliciting through client mobile networks and seldom seen in the public space 4. Reducing client load 	<ol style="list-style-type: none"> 1. Low rated FSW with low income 2. Increased number of regular clients due to direct mobile contact and reduced or no income from them 	<ol style="list-style-type: none"> 1. Reduced vulnerability to violence due to less contacts 2. Increased unpredictability (invisible client network) of client behaviour 3. Cheating over phone by pretending as client 4. Moving from fixed public space (less rate of mobility started)
Stage 3 Street based FSW with a mobile phone (second phase of mobile phone use)	<ol style="list-style-type: none"> 1. Seldom visible in the hotspot 2. Direct client soliciting through client networks 3. Seeking middlemen to disseminate the phone number (auto driver, petty shop owner, street vendor etc.) 4. Frequently changing the mobile numbers to avoid regular or nuisance clients and other vulnerabilities 	<ol style="list-style-type: none"> 1. Improvement in rate and income. 	<ol style="list-style-type: none"> 1. High mobility 2. High unpredictability (invisible client network) of client behaviour



<p>Stage 4 Street based FSW with a mobile phone (third phase of mobile phone use) changed to network based FSW (no longer street based)</p>	<p>1. Invisible in the hotspot. Geographical space changed to virtual space. 2. The FSW linked with middlemen (pimp) network. 3. Client solicitation only through pimps. 4. Mobile number is not shared with clients so as no frequent changes in number.</p>	<p>1. Income is determined by the PIMP 2. High income in comparison with the street life</p>	<p>1. PIMP has the total control over the FSW. PIMP is for business and safe sex is not his agenda. 2. Risk behaviour due to vulnerabilities such as substance abuse 3. Often faces violence from random clients</p>
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Evolution Matrix of Home Based FSW

The home based FSWs are also gone through a transformation in soliciting patterns. The basic characteristic of this group is the secrecy in their work. The home based FSWs are basically house

wives/house makers and are not full timers in sex work. They do sex work for some additional income to bridge the gap between their husbands’ income and the expenses of the family. They usually have 3 to 4 limited regular clients in a week.

Stages	Characteristics	Business	Risks
<p>Stage 1 Home based FSW without mobile phone</p>	<p>1. Highly secret sex work 2. Limited client circle 3. Sex work is part time 4. Direct soliciting at home</p>	<p>1. Low income 2. Kind or cash</p>	<p>1. Average vulnerability and risk</p>
<p>Stage 2 Home based FSW with mobile phone</p>	<p>1. Highly secretive 2. Client interaction through mobile phones 3. Activity may change from home to other destinations for limited time</p>	<p>1. INCREASED income 2. More clients and reduced regular clients</p>	<p>1. Increased risk and vulnerability</p>
<p>Stage 3 Home based with mobile phone FSW into network of pimps</p>	<p>1. Highly secretive 2. Linked to client through pimps, no direct solicitation. 3. Rare activity at home, mostly done outside the house. 4. FSWs pretend to be part time workers to find time for sex work 5. The sub type is changed</p>	<p>1. INCREASED regular income 2. Reduced regular clients</p>	<p>1. Increased risk and vulnerability</p>



The mobile phone equipped the home based FSWs also to be in touch with the networks. Many of the home based FSWs have converted into network based FSWs. The limited time of the home based FSWs is properly utilised through the pimps by arranging clients with high payments. The matrix given below is trying to deliberate the process of evolution among the home based FSWs.

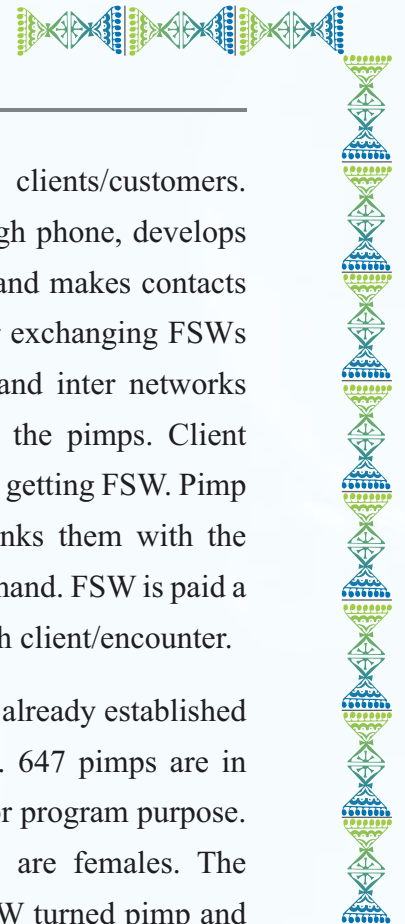
PE Conversion into Pimp

Another surprising transformation noticed in the field is the gradual conversion of TI FSW peer educators into pimps. This conversion took place along with the entry of mobile phones.

In one hand it is quite natural as the PE is the central point in the HIV prevention program and works among 40-60 FSWs in the field. This natural leader becomes the predominant point of contact for all her peer group members and in turn she starts arranging them clients by availing commission. On the other hand PE is popular in the field as a health worker and has good access to public institutions and clients. Since she is more visible in the hotspots than the other sex workers, a habitual multi partner client who always searches for a new sex worker for sex, ends up with the all-time available PE in the hotspots. The PEs make use of this opportunity to earn money by arranging

Characteristics of Geographical and Virtual Network

Geographical Network	Virtual Network
Social Network	Device based communication network
Direct contact in the same geography	Contact through phone and unknown/undefined geography
Emotional bondage	Business relations
Higher number of peer members in the group	Maximum 30 in the network
Regular face to face contact	Irregular phone contact (contact is only for business purpose)
Mutually supporting in the crisis	No space for mutual support
Vulnerability addressed through collective peer group support	Highly vulnerable as independent individuals
Disclosed identity	Highly secretive
Part of a single geography based social network	Part of one or more virtual networks
Less mobility	High mobility



FSWs from her network. 43.8% of the old experienced PEs currently working with TIs are pimps. 34% turnover of PEs is reported in the year 2014-15. For the last 4 years, 2010-2014, 36% of the old FSW PEs left the job of peer educator after established themselves as pimps. Still they voluntarily support TIs, though the priority goes to the work.

Conventional peer education reached out the population at the hotspots as per the timing of FSWs, and it was a geography based network. The entry of communication devices and technology converted this geographical network into virtual network. We define virtual network as the FSW network operates through mobile phones.

The Pimp

The study found that the FSWs, who operate using mobile phones, inevitably linked with a middle person for improving the business. We call this middle person as pimp. (Dictionary form of pimp: A man who makes money illegally by getting customers for prostitutes). In this study context, we define the 'pimp' as a middleperson, irrespective of gender, connecting the

FSWs and male clients/customers. Pimp operates through phone, develops networks of FSWs, and makes contacts with other pimps for exchanging FSWs in turn basis. Intra and inter networks are operated among the pimps. Client contacts the pimp for getting FSW. Pimp fixes the rate and links them with the FSWs on client's demand. FSW is paid a fixed amount for each client/encounter.

The TIs in Delhi has already established contacts with pimps. 647 pimps are in touch with the TIs for program purpose. 538 out of the 647 are females. The female pimp is a FSW turned pimp and often she also does sex work.

Pimps are operating mainly in four ways.

1. 3-5 full time FSWs stay in the house/apartment, in a residential area, of the pimp pretending to be her/his family members. The clients can visit the house and have sex from there. Pimp has network with 10-15 FSWs other than the fulltime FSWs. These FSWs will be sent to client outside the house as per the demand of the clients.
2. 3-5 full time FSWs stay in a rented



apartment, which is not the house of pimp, looks like an office with a lot of registers and files etc., and two or three male aides of the pimp will be the caretakers of this centre. The entry hall of the apartment is arranged as a reception and the males will be available there. The client can directly walk in and avail the services from this apartment. Other than the regular FSWs, the pimp has many FSWs in his network and mostly the same apartment will be used as the activity place. This apartment will be provided as a space for couples, come for paid/casual sex with a fixed charge. There are many cases observed that girls, who come with their boyfriends to these spaces, are befriended by the pimps and later become the members of the FSW network of the pimp. School and college students are mostly linked with pimps through this way. Most of these girls are from poor economic background and the money offered by the pimp attracts them. Such centres are mainly operated by male pimps.

3. In the mask of unisex beauty parlours and hair cutting saloons pimps are operating sex work in many places of

Delhi. The entire setting is like a beauty parlour/saloon. Both male and female beauticians are available here. The females are sex workers too. Other than this regular staff cum FSWs, female FSWs in the PIMP network also come in turn and stay in the saloon day time.

4. The fourth way of operation is the traditional mode of pimping. Auto drivers, petty shop owners, street vendors etc. work as pimps using mobile phones. They also have a network of 15-20 FSWs, who are available on call. Clients approach the pimps and fix time and rate. As per the clients' requirement pimp arranges the FSW from his/her network.

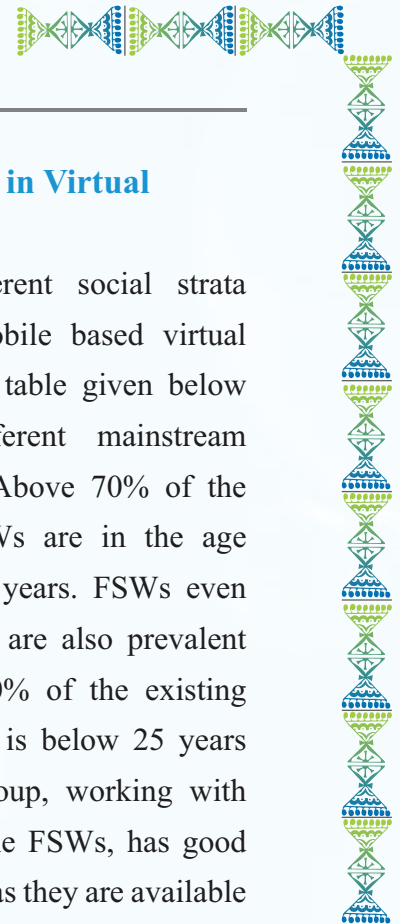
The PIMP used to ask three introductory questions to a new client, who contacts directly over phone...

1. Who has given my number to you?
2. Where are you from?
3. How can I identify you?

This is a strategic way to ensure the call is from an actual client.

Average 18 FSWs are available with each pimp at a time. Among this 44.5% are moving on a regular basis (measured monthly movement). They move from one pimp to another or move back to their





houses for minimum number of days and come back. 85% of these FSWs do not come back to the same pimp. Increase in the number of members in the network is very important for the pimp.

14,787 network based FSWs are mapped through the already known pimps in the existing TIs during the study period. Around 10% of this population is registered with the TIs. As per the data shared by TIs on pimp based sex workers, there is a turnover of 12% population among the pimp based FSWs in a month. During the study it is observed that 44.5% of the FSWs change in a month.

Profiling of FSWs in Virtual Network

Women from different social strata are part of the mobile based virtual FSW network. The table given below deciphers the different mainstream profile of FSWs. Above 70% of the network based FSWs are in the age group of below 20 years. FSWs even below 18 years old are also prevalent in the networks. 20% of the existing TI FSW population is below 25 years age group. This group, working with the pimps as fulltime FSWs, has good rapport with the TIs as they are available for the regular service uptake. The mobile population does not have an access to the TI services at present.

Sl. No	Profile	Nature	Time	Space	(Mobility)
1	House wife	Secret	Limited time	House	Less mobility
2	Student (college school)	Secret	Adjustable time	College/school	Medium mobility
3	Working women	Secret	Limited time	limited space	Less mobility
4	Maids/domestic help	Secret	Limited time	Fixed space	Less mobility
5	Full time FSW	Ready to reveal	Unlimited time	No fixed space	Highly mobile



During the study we could identify other two types of soliciting among women in sex work.

Group 1: Direct client soliciting FSWs in the big industrial areas of Delhi.

These are independent individual FSWs often work in different industries as casual labour. They solicit clients from the male labourers, predominantly migrants, of the industry and do activity either in the industry premise or outside. These women change industries on a regular basis for more clients.

Group 2: Women directly soliciting in Malls.

The malls in the city are soliciting point for this FSW group. There are dance bars in malls, wherein female entry is free and male entry charges. These are young and well-dressed FSWs who fix the clients from the mall. Difficult for a TI to outreach.

65% of this category of FSWs is unmarried and earning members for their family. There are close boyfriends around the unmarried youngsters and information on high frequency of exploitation in different ways are shared by the FSWs. 85% of this community members are literate and well experienced in using newer

smart phones and its applications like whatsapp. Another group of FSWs, who are working in the pimp network, is the FSWs on contract basis. These FSWs are linked with one 'broker', who supplies FSWs to the pimps according to their requirement. The broker charges a lump sum amount for each FSW for a specific period. After the contract period the pimp has to return the FSWs back to the broker. The brokers recruit FSWs through different sources and they pay monthly salary to the FSWs' houses. This practice is called as 'FSWs on contract basis'. The pimp has to bear the routine expenses of the FSW during the contract period including travel and accommodation. These FSWs are full timers in the field.

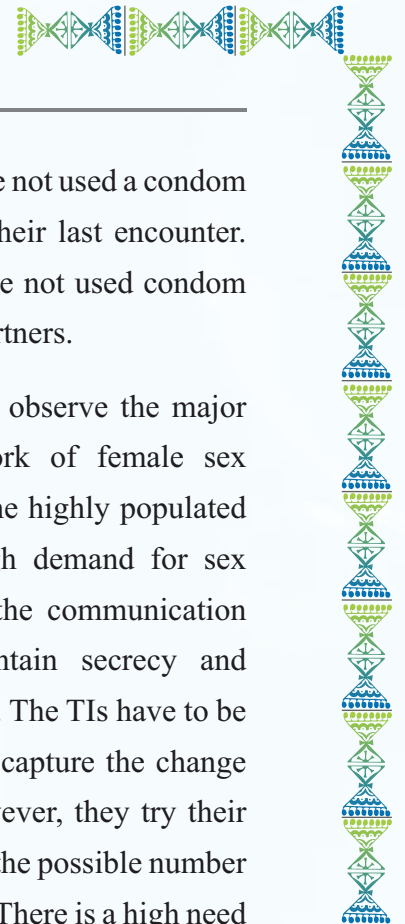
The new entries into the virtual network are important areas to be explored. No data collected on this area.

Mobility among FSWs in Delhi

As a part of the process of this study, one questionnaire is administered to capture the mobility of FSWs in Delhi. The mean age of the respondents is 28.

51.5% of them are soliciting/getting clients through pimps, 38% are through





telephone network, and 7.8% are directly from the street. Average mobility in Delhi within last 3 months is 12 times and outside Delhi is 3 times. The reason for mobility is more money/more client (86.6%) and 9% relies on the pimp's decision.

The highest number, 36.3%, of FSWs are from Uttar Pradesh and second highest, 19%, from Delhi. Women from 15 states working in Delhi as sex workers participated in the study.

20.3% of the moving FSWs have availed services from the TIs at their destination places.

6.1% of the FSWs are not used a condom with paid client in their last encounter. 37% of the FSWs are not used condom with their regular partners.

The findings clearly observe the major shifts in the network of female sex work in the state. The highly populated city state has a high demand for sex workers and using the communication technology to maintain secrecy and anonymity is natural. The TIs have to be equipped enough to capture the change in the patterns. However, they try their level best to address the possible number of individual FSWs. There is a high need to develop new strategies to address the network based FSW population in the state.

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Chapter 5

Programmatic Implications and Strategic Recommendation

This chapter discusses the programmatic implication of the changing pattern in female sex workers and the proposed viable strategies. The details of the program implications and strategic recommendations are as follows.

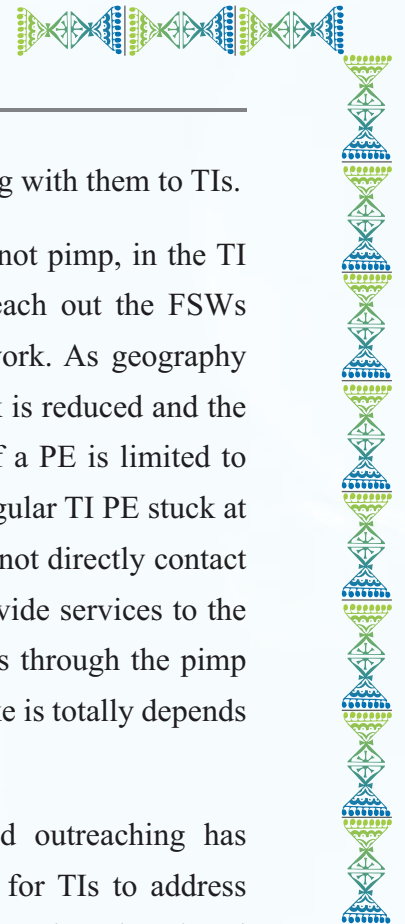
Program Implications

The shifts in the sub types and patterns made various implications in the TI program. The present architecture of the TI has to be modified to address this population.

1. The TI data reflect the mean age of registered FSWs is 32 and the gap of 5-7 years to access the TI services is raising concerns over addressing the young and highly vulnerable population work through the invisible networks.

2. The conversion of street based and home based FSWs into the mobile phone based virtual network made the community invisible in the hotspot. Anonymity and secrecy become the dominant characteristics of sex work. These changes create challenges to





the conventional PE led hotspot based outreach.

3. The newcomers into the mobile phone based virtual network are out of the reach of TIs.

4. The PEs are reluctant to link new FSWs, who are highly mobile in the mobile based virtual network, to the TIs to keep away from the burden of regular service uptake targets. TIs are also disinclined to register as they are not able to ensure the regularity in service uptake of them.

5. The proportion of PEs to FSWs is a core programmatic challenge due to the change of geographical to the virtual network. The direct contact of the PE is varying from 15 to 25 individual FSWs. Inter personal communications for behaviour change is diluted.

6. The PE transformation into pimp is one of the major bottlenecks of TIs to reach out the pimp based networks. Pimps are not ready to link the FSWs working under them to the TIs through the PEs, who are working as pimps, due to the business competitions. The pimp cum PEs rarely link up the new and

young FSWs working with them to TIs.

7. The PE, who are not pimp, in the TI has limitations to reach out the FSWs working in the network. As geography based social network is reduced and the individual contact of a PE is limited to 15-25 FSWs. The regular TI PE stuck at the pimp as they cannot directly contact the FSWs. They provide services to the network based FSWs through the pimp and the service uptake is totally depends on the pimp.

8. Since the PE led outreaching has become a challenge for TIs to address the mobile phone based virtual network FSWs with services the need for regularity of services is a puzzle for them. The time and space are also attributing factors.

9. The anonymity of the individuals often creates challenges on referrals for HIV testing and treatment. The network based secret FSWs are hesitant to reveal their sex work identity to ICTC counsellor or any others. The referral from TI confirms the label of their identity.

10. The secrecy and anonymity of this



community hindering the collectivisation and mobilisation process of present TI strategy.

Strategic Recommendations

Delivering the HIV prevention services to the FSWs in the mobile based virtual network has to be given more importance as the risk and vulnerability among this group is very high. There is need for designing a new generation TI with differently defined mode of outreach and service delivery in the context of the changed female sex work patterns in Delhi.

1. The outreach for this community has to be defined in terms of the mode of contacts. The virtual network based community members are constantly in touch with the pimp either directly or by phone. Pimps must be the central point of communication and contact for the network based FSWs for outreach and communication. Need to follow a pimp based approach.
2. Equipping the TIs in the direction of addressing the young and new population in the virtual network is an important area and it should be incorporated in

the capacity building plan of TIs for the coming years.

3. Capacity building plan for pimps has to be included in the regular TI capacity building plan. Topics on basics of HIV, message delivery, condom education and distribution, referral systems, addressing violence etc. have to be included.

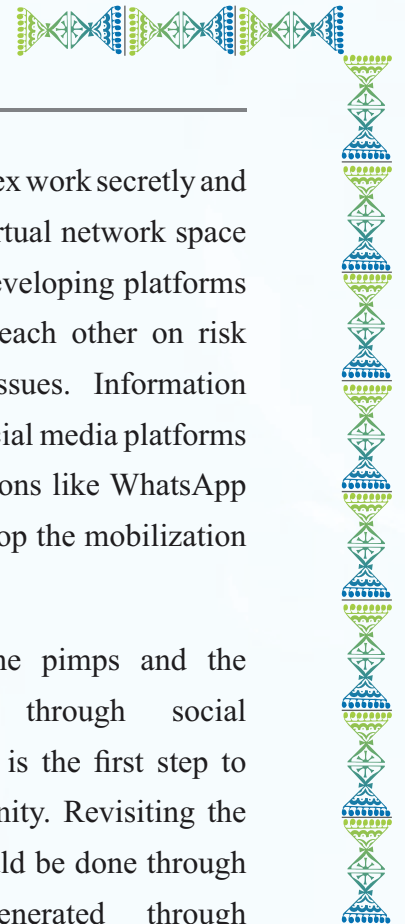
4. The pimp services have to be incentivized case basis and that should be in line with the existing costing pattern.

5. Mobile phone based outreach and contact strategy need to be designed for the mobile population to pass HIV related messages and service related information.

6. Condom distribution strategy follows both free and social marketing schemes. The pimp centred approach has to be followed for condom education and distribution.

7. Changing the mode of clinical program from project linked clinic to the preferred private provided is the important strategy to address the STI management among this population. More PPPs have to be identified and





trained in a scientific proportion of FSWs and Doctors.

8. Primary screening of HIV by using the whole blood test kits is one of the viable strategies for this community. Community has to be referred to ICTC for confirmatory test. Need to develop some different cross checking mechanism than the regular TI referral slip.

9. The mobilization of the community should be in view of HIV message reinforcement rather than capacity building of the FSWs through a collectivisation programme. Since this community has already established mainstream social identity and social

network, following sex work secretly and anonymously, the virtual network space has to be used for developing platforms to communicate to each other on risk and vulnerability issues. Information technology based social media platforms and mobile applications like WhatsApp can be used to develop the mobilization networks.

The mapping of the pimps and the FSW population through social mapping techniques is the first step to address this community. Revisiting the existing strategy could be done through the evidences generated through the mapping. TIs should give more importance to address the network based FSW population.

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