

TINGIM LAIP SOCIAL MAPPING

HIV RISK & IMPACT FOR MOBILE POPULATIONS

THE SOCIAL MAPPING

The Tingim Laip Social Mapping exercise was conducted between November 2011 and March 2012, to explore patterns of increased HIV risk and impact that exist along particular corridors and in particular settings across Papua New Guinea.

The field work was carried out by two teams and consisted of intensive observation and data collection within targeted sites, followed by field team meetings to talk through findings, in a continuous process of information validation, shared discussion and analysis.

The four corridors and settings of increased HIV risk and impact that were explored during this Social Mapping exercise were the Highlands Highway, Towns Affected by the LNG Project, Oil Palm Plantations and Military Sites. Within these corridors and settings, the field teams observed and collected data from sites including towns, enclaves, plantations, military sites, villages, settlements and other places (such as marketplaces).

A more detailed methodology, along with observation and interview findings from this exercise, presented under dominant themes and for specific populations, are available in the Tingim Laip Social Mapping Report (Tingim Laip, 2014). It is important to note that the findings presented are only representative of the views and experiences of the people we observed and engaged with. This Social Mapping exercise does not claim to communicate the stories of all people, or even populations at risk, within the locations and spaces visited.



MOBILE POPULATIONS

There are highly mobile population of people, mostly men, across Papua New Guinea who have the money, time and freedom to maintain multiple concurrent short and longer-term sexual relationships with women. Mobile populations identified through this Social Mapping exercise included men with money who travel by air, road and sea, specifically Truck Drivers, PMV Drivers, LNG Project Workers, Oil Palm Plantation Workers, Business and Land Owners, and Buai Traders.

Mobile men with money present with higher risk of, and impact from, STIs and HIV as a result of multiple, concurrent sexual relationships. There were frequent descriptions during this Social Mapping of

extramarital affairs, adultery and promiscuity, with poor reported condom use and health service access. Marriage breakups and domestic violence were discussed as indirect effects related to shifts in social dynamics and gender roles.

MOBILE POPULATIONS

High levels of mobility are a relatively new phenomenon in PNG and are increasing due to resource extraction and infrastructure development along the Highlands Highway. Large numbers of men and women travel now travel almost continuously, to access opportunities in mining, agricultural and other industries. Companies rarely provide family housing, so couples are often separated for long periods. Some of our respondents spoke of being permanently separated from their families and establishing 'second' families in their new locations. The increase in mobility and shift in lifestyle among these mobile populations is transforming the way people live and the way in which sex occurs.



Mining and Seasonal Workers

Mining and seasonal workers are often separated from villages and families whilst they travel for work. These men spoke of forming sub-cultures and friendships with work colleagues and local people, who become their new community, family or clan.

Many men reported taking multiple wives or having a number of sexual partners in the areas that they travel through or reside. This growing group of mobile men with money have power and influence, and their risk of HIV is increased through multiple concurrent partners with poor reported condom use.



PMV Drivers

PMV drivers move constantly up and down the Highlands Highway and on all roads across PNG. Our sample of PMV Drivers was small during this Social Mapping, however, there were consistent reports of this mobile population engaging in transactional sex with women, especially during longer journeys.

PMV drivers were difficult to engage in interviews, as even when stationary at stop-points, they were busy collecting fares and dealing with passengers. PMV Drivers are at increased risk of STIs and HIV as a result of multiple, concurrent sexual partners, with low levels of condom use reported and a common theme of disconnect from health services due to their mobility.



Truck Drivers

The life of a truck driver along the Highlands Highway was described as hard, dangerous and lonely. These men are disconnected from their places and families, spending months alone whilst travelling up and down the corridor in a continuous cycle. Stop points provide access to sexual partners, alcohol and gambling for this population. There were many stories of truck drivers maintaining multiple concurrent sexual partners along the corridor and frequent reports of these men engaging sex workers. Policies vary amongst truck companies regarding condom distribution, but there is evidence of some condom use and awareness amongst truck drivers of HIV and STI risk and impact.



Business Men and Landowners

Business men and landowners across PNG are often mobile, with travel related to work and land management. This population often have power and influence within communities, and also when travelling. Access to money provides opportunity for these men to engage sex workers, or to transact money, goods or favours for sex with women. They may also pay higher rates to avoid use of a condom. There were reports of multiple marriages and long-term partners among business and land owners.





"We're married to the road and we eat two kinds of meals. One is food and one is sex ... A man's got to eat you know (laughs)"

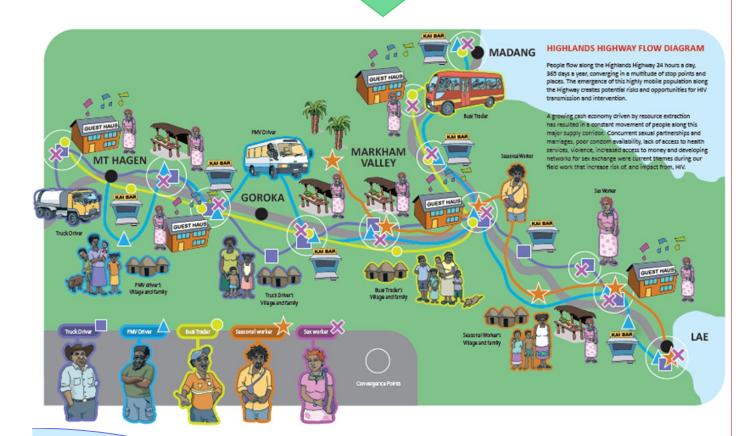
Security Guard

"When we walk around nobody recognises us. But when we are at the steering wheel of a Highway vehicle, all the women's eyes are on us. A vehicle is poison for women. During the school holidays, the drivers are happy because that is the time [for] picking up young and tender women to have sex with"

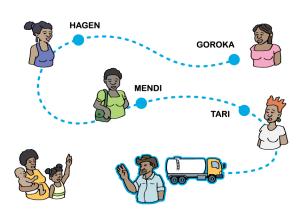
Truck Driver

"We truck drivers have multiple partners along the Highway. At each stop we call them up and have sex with them before travelling on"

Focus Group Participant



The stories
we heard depicted lives
of hardship, long working hours,
isolation and loneliness amongst these
mobile populations. There is separation
from their personal history and families whilst
they travel for work. There were common
references to the formation of new sub-cultures
and friendships with work colleagues and local people,
who become their new community, family or clan. Many
mobile men reported taking multiple wives or having
multiple partners in the areas that they travel through
or reside.





Tingim Laip is Papua New Guinea's largest targeted peer-led HIV prevention and care project, operating in 20 locations over 10 provinces. It is a project of the National AIDS Council, administered by DFAT for the Australian Government and managed in this, its second phase, by Cardno Emerging Markets.

PNG is experiencing a concentrated HIV epidemic with prevalence estimated to be greater than five per cent amongst key populations including women exchanging sex, men who have sex with men and mobile men with money. In response to this, Tingim Laip has sharpened its focus and restructured its workforce to ensure greater participation of key populations, prioritised peer-led interventions, strengthened activities across the STEPs model, tested alcohol harm reduction approaches in select locations and strengthened linkages with partner organisations.

The objective of Tingim Laip is to ensure that key populations in selected locations will engage in safer sex by using condoms regularly, obtain regular treatment for STIs, know their HIV status and access treatment if living with HIV.

To achieve this Tingim Laip is increasing focus on selected locations where there is a higher convergence of HIV risks. The project continues to work towards friendly STI, VCT and HIV clinical services being accessible, available and used regularly by people from key populations. This is supported by innovative work on addressing drivers of HIV risk.