



TINGIM LAIP SOCIAL MAPPING

HIV RISK & IMPACT FOR WOMEN EXCHANGING SEX

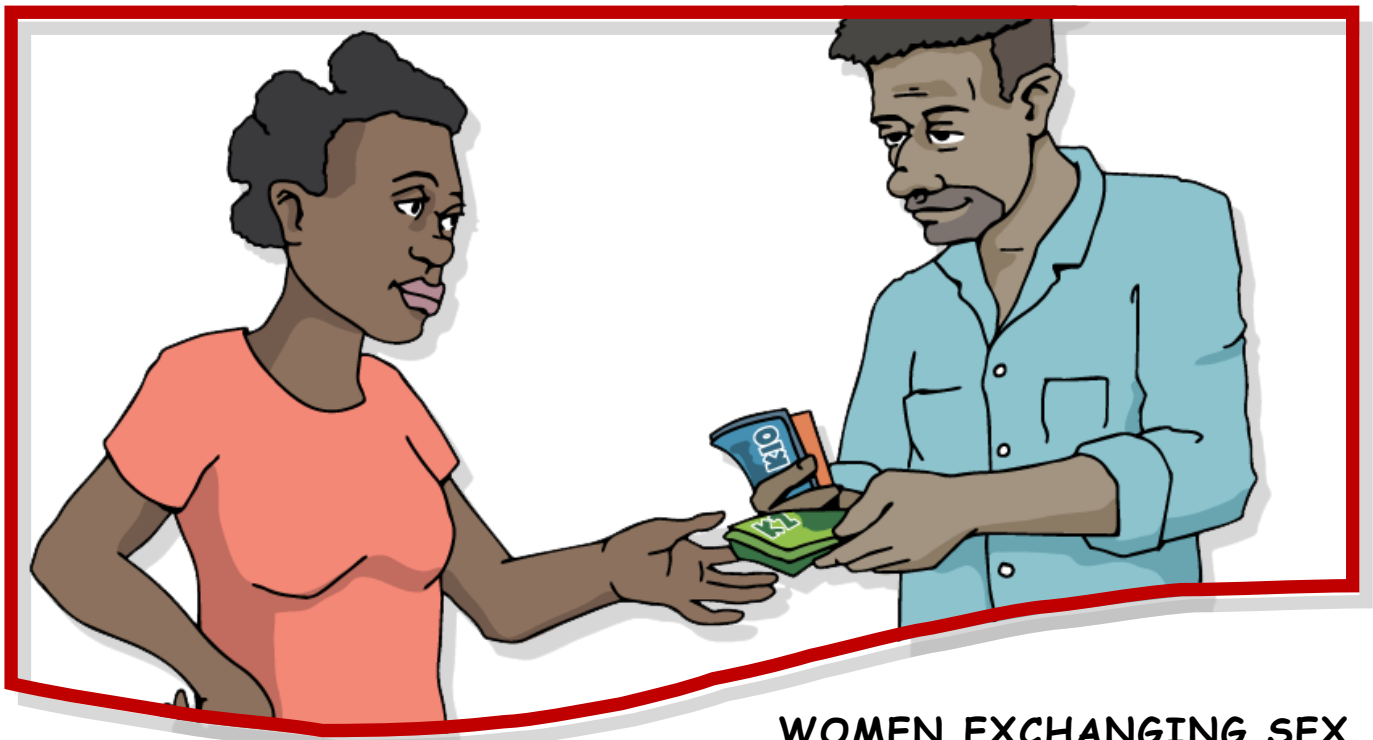
THE SOCIAL MAPPING

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.



WOMEN EXCHANGING SEX

Women who exchange sex for money, goods and favours have increased risk of, and impact from HIV. In all four settings explored during this Social Mapping exercise, there was found to be large numbers of women engaging in varying levels of sexual exchange—ranging from small amounts of cash or commodities (such as flex cards and produce) through to large amounts of money. The frequency of these encounters, and the low reported levels of condom use, indicate risk of STI and HIV transmission and these risks are increased further by some sexual exchanges exposing women to environments of heavy alcohol use, physical violence and sexual violence.

Many of the women, however, who engaging in very high levels of transactional sex, do not identify as sex workers. They present with minimal to low level awareness of STIs and HIV, and are not accessing programmes that provide education or condom distribution. As a result of perceived or real stigma and discrimination, many women exchanging sex are not accessing sexual and reproductive health services. This briefing presents the themes and findings of how women in Papua New Guinea begin exchanging sex and move onto sex work. There were many commonalities among the stories heard across all settings of this Social Mapping, for this key population.

Oil Palm Plantations

The trajectory into sex work for young women living in and around oil palm plantations follows a similar pathway to the Highlands Highway. Differentiation between sex work and high level transactional sex was difficult in these regions. Women involved in transactional sex for money, favour and goods do not identify as sex workers, however, often present with very similar patterns of negotiating and exchanging sex as those who do.

There are large groups of women not employed by the palm oil companies, that are accessing the cash economy by having sex with mobile, and permanent, men with money in and around the plantations. The reports of men having sex with up to four women a day increases risk of, and impact from, HIV amongst all exchanging sex, especially in consideration of poor reported condom use despite significant efforts by Provincial AIDS Committees, local sex worker networks and local guesthouses.

"One time there was a client who gave 2,000 Kina to one of the girls. She must have done him good, that's why he gave her that"

Guesthouse Manager

"When I was working as a sex worker I educated the other young women [around me about] how to do it. I am very clever ... I can rob a man of K1,000"

Young Woman

"We all got so drunk, we drove up to the border then drove back. On the way we stopped [and] while the others were drinking beer near the car we went and had sex on the gravel. He was so happy after sex, saying he liked the way I had sex with him. He has never done it that way before. He put his hand into his bag then pulled out some money and gave it to me. The next day I counted it. It was K3,000. I was so happy"

Young Women in Sex Work

Military Sites

Women are exchanging sex for money work in and around military locations, especially around the outstations in Vanimo and Kiunga where deployed soldiers spend long periods of time away from family. There is inconsistent reports of condom use in these transactions and this presents risk of HIV transmission and acquisition amongst military personnel.

WOMEN EXCHANGING SEX

The Highlands Highway

Women and female adolescents frequently exchanging sex for money, goods or favours with multiple men along the Highlands Highway corridor are at particular risk of, and impact from, HIV. Some of these women are highly mobile, including sex workers and fresh produce traders. Others are selling cigarettes and buai from local stalls or are employed within local towns, or in rural settings. Women exchanging sex along the Highlands Highway include adolescent women on the street, women who self-identify as sex workers and other women involved in transactional sex.

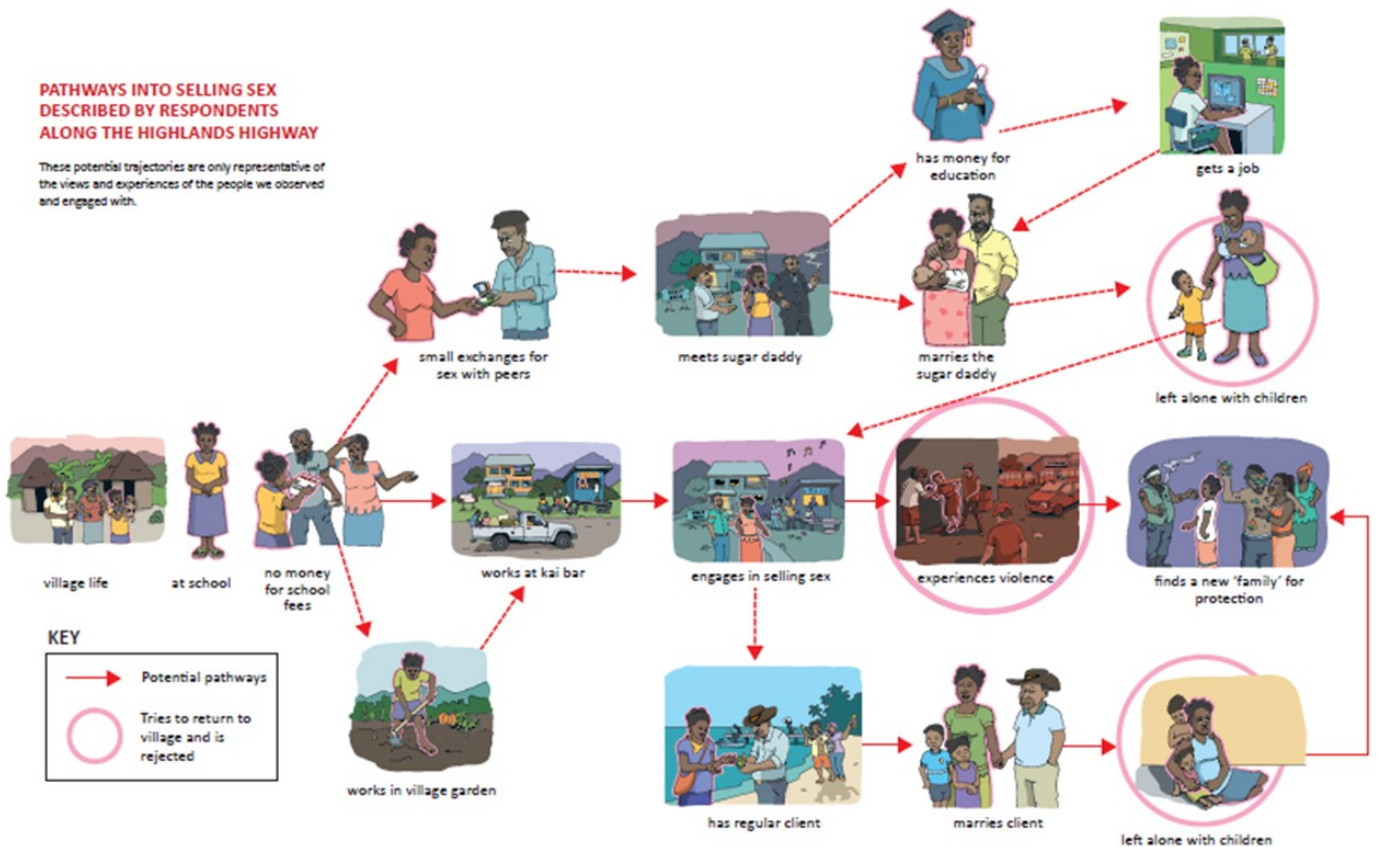
Adolescent women, whose life trajectory leads them to the streets, are engaging in sex with men to access money, goods, favours and ongoing hope for a secure life. Despite high levels of transactional sex, this group of young women do not identify as sex workers. During early years on the streets, young women are exposed to initiations of violence and lainaps, before entering into protective circles and 'families' of raskols, security guards and other women who sell sex.

Women who sell sex along the Highlands Highway have commonly followed the developmental pathway described for adolescent girls on the street. These women, embedded in street life and often rejected by family, are surrounded by violence and crime. Multiple sexual partners, lack of condom use, sexual violence and poor healthcare and support service access determine that these women selling sex and the social circles immediately surrounding them, are high risk for HIV transmission and impact.

A further group of women engaging in transactional sex for goods, money, security or favours along the Highway come from traditional and non-traditional marriages, or may be separated and divorced. Increased mobility of people and changing social dynamics has increased access for both men and women to relationships outside of the family home. And condom use was reported as low between married couples despite the frequent accounts of extramarital affairs and transactional sex.

PATHWAYS INTO SELLING SEX DESCRIBED BY RESPONDENTS ALONG THE HIGHLANDS HIGHWAY

These potential trajectories are only representative of the views and experiences of the people we observed and engaged with.



"I don't go home [to my village] because I'm afraid of what my family will do to me [because I am a sex worker]. Here [on this oval] I am secure, I have friends, and people who care for me and protect me. Here is my real family"
 Woman in Sex Work

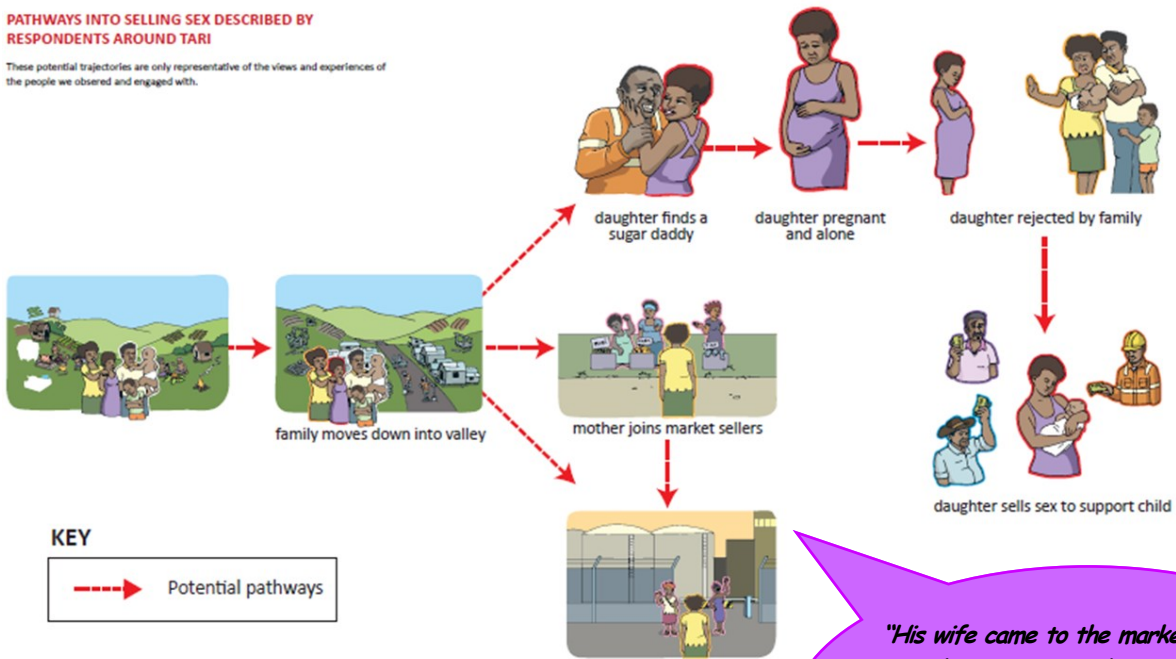
"We got to hospital ... they say we are whores ... but they will treat us and give us medicine. We don't go there now because they treat us [badly]"
 Woman in Sex Work

Towns Affected by the LNG Project

Towns affected by the LNG Project are experiencing changes in the dynamics of social and sexual interactions, with increasing reliance on a growing cash economy and a shift in traditional gender roles. To access money, goods and favours, some women around Tari and Porebada are engaging in transactional sex, hostessing (with or without sex exchange) and sex work. Single, married and divorced women around Hela Province, face the challenge of accessing money for survival as subsistence farming declines. Transactional sex provides opportunities for these women to obtain money, food, goods and favours. Young women are targeted by mobile men with money for sex and fun. Women transacting sex for goods and favours, as well as young girls meeting with wealthy men, do not identify as sex workers. The trajectory into formal sex work appears to result from break-ups and divorce from men, resulting in the woman seeking alternative means for income to provide food, shelter, education and security for herself and her children. The drive to access the cash economy has also increased the number of young women engaged in transactional sex, 'container ladies' and women selling sex in Central Province, around Porebada. Condom use among women engaged in transactional sex, especially adolescent women, was reported to be low. Self-identified sex workers, however, reported higher levels of condom use with demonstration of some HIV awareness.

PATHWAYS INTO SELLING SEX DESCRIBED BY RESPONDENTS AROUND TARI

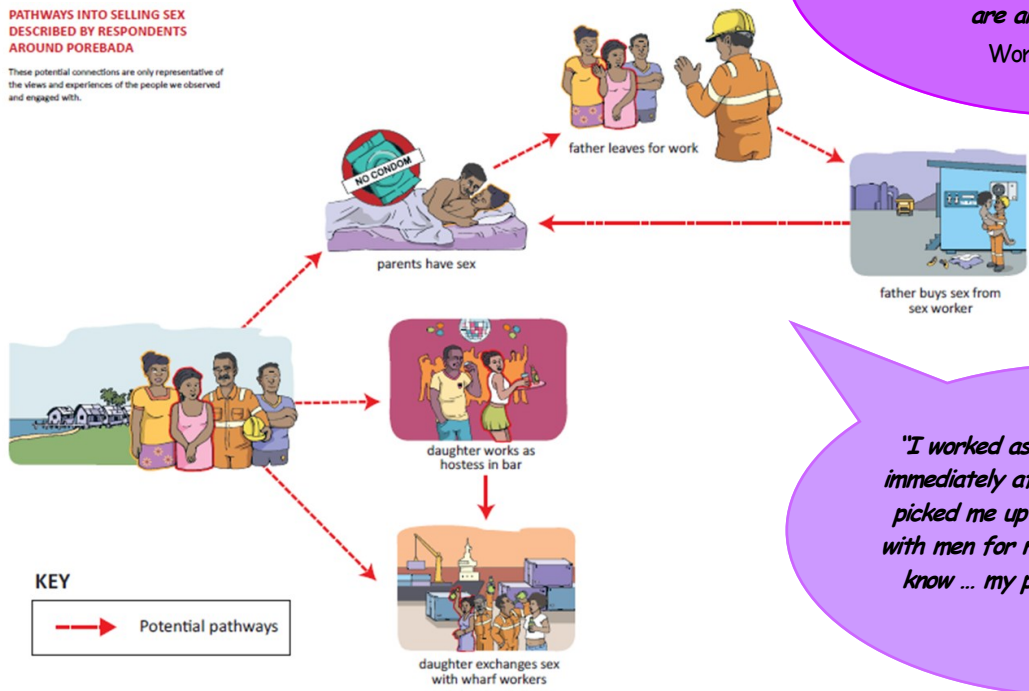
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"His wife came to the market place and was shouting [at me] because I had sex with her husband ... You are a prostitute, you have AIDS, you are an AIDS carrier!"
 Woman Selling Sex

PATHWAYS INTO SELLING SEX DESCRIBED BY RESPONDENTS AROUND POREBADA

These potential connections are only representative of the views and experiences of the people we observed and engaged with.



"I worked as a hostess, I started I immediately after school. Another lady picked me up and I started going out with men for money. My parent's didn't know ... my parents still don't know"
 Hostess



Alcohol Use

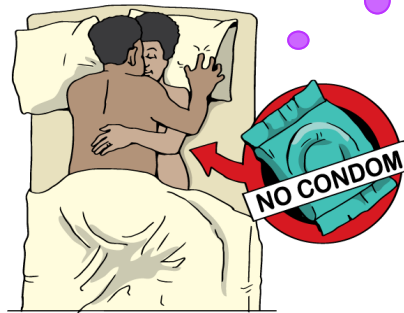


Violence



Extramarital sexual relationships and second families

Poor Health Access Related to Perceived or Real Stigma and Discrimination



Poor Condom Use

FACTORS THAT INCREASE HIV RISK AND IMPACT AMONG WOMEN EXCHANGING SEX



SPACES AND PLACES THAT WOMEN EXCHANGE SEX





THE TINGIM LAIP PROJECT



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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.