VOICES FROM THE GROUND PROMOTING THE RIGHTS OF SEX WORKERS IN INDIA



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What is Sex work?

Provision of sexual services for cash or in kind by adults with consent.

- Sex Workers from the SWASA alliance and NNSW challenge the notion that sex work is selling sex or selling bodies [deh vikri]. The term in South Asia is Dhanda or business.
- Solution Wherein a sexual service is provided to the client, directly as independent workers or through third parties or client procurers.
- Sexual services are provided by women, men and transgender persons

Sex Work

The work does not enjoy social sanction.

Sex workers though an integral part of the global migrant population, the work is not recognized and is invisibilised

- >>> by stigma associated with the work
- Perception that they cater to an `immoral demand'
- Their mere presence assumes sexual and physical exploitation, slavery, slavery like practices and servitude









ORGANISING SEX WORKERS

VESHYA ANYAY MUKTI PARISHAD [VAMP]



COLLECTIVISATION FOR JUSTICE

Empowering sex workers

- ➢ Recognizes
- ≥rights of sex workers
- ≽right to sex work
- sexual labour both within and outside of a commercial context
- Sthe struggle for livelihood and existence.
- Self Organisation for self determination
- That cross movement dialogues and with allies for mutual solidarity is critical

Rights based approach

- People in sex work have the right to be involved in formulating policies affecting their lives.
- Collective wisdom from sex worker led initiatives and cross movement allies gives depth to policy
- The narrative of all women in sex work as victims of exploitation, slavery and servitude pushes those that are providing sexual services of their own volition, to the margins and blocks their voices in the debates around sex work.





PROMOTING THE RIGHTS OF SEX WORKERS IN INDIA

National Network Of Sex Workers (NNSW)







NNSW





COVID 19

- Spread depends upon people's physical contact hence physical distancing is the only prevention.
- This implies a total ban on human movement, avoiding any contact between people. Beauty parlours, massage parlours, hair dressing salons, spa's will face the brunt.
- Sex work is one such profession a huge population that earns its livelihood from sex work is gravely affected with no certainty of when it will end.

Organised sex worker networks

- immediately rallied provided grocery
- ART distribution and TB follow up
- VAMP went to court to get third-line dispensation at the district level.

BUT

Will the system provide hospital beds to a group so stigmatised and discriminated?

If a vaccine/drug is found will they prioritise sex workers as with other 'contact professions'?









Flawed understanding of sex work in India

The study presumes that most sex work in India occurs in clearly demarcated red light districts. SANGRAM/ VAMP/ MUSKAN run 6 targeted interventions of MSACS/NACO - MH



73.9% sex work happens outside brothel spaces



■ Brothel ■ Street ■ MSM ■ TG ■ Total







4248



Causal Link between COVID and RLAs Not Substantiated

- With/without RLA closure, evolution of epidemic within each of this group is not mentioned.
- Figure 3 gives cumulative cases with extended RLS closure. The curve for cities other than Mumbai and Kolkata, look almost flat. But no information on the assumption around transmissions in population outside RLA.

 This is important to put things in perspective – how much is contribution by RLA a source, vis-à-vis other sources of transmission in general community (Since it is not a sexually transmitted disease)

Scapegoating a marginalised community

Sex workers, care workers, waste-pickers, domestic workers, sanitation workers, or other migrant labourers living in close contact will all be `vectors' of COVID 19.

Abolitionism in the Name of COVID

- The study in its recommendation that only redlight areas be shut down effectively judges sex work and having deemed it as an unacceptable, calls for its abolition on the pretext of preventing COVID-19 casualties.
- It labels red-light areas as a "global health burden" when sex workers in red-light areas have led the charge for preventing the spread of HIV/AIDs in India in partnership with state and international authorities.







Why no peer review?

- While claiming to have done an exhaustive review of secondary literature, this study only mentions a few public health studies based on HIV/AIDS public health literature, and even those are extremely dated, from 1996 and 2003, fifteen to twenty years ago.
- Regarding the numbers of brothel-based workers are drawn from the U.S.
 Department of State Country Report on human rights practices and the Global AIDS
 Update 2016: both documents that sex
 work advocates have repeatedly criticized for having unrealistic and flawed numerical
 projections are not empirically informed.

- Is it not unethical for institutions such as Harvard and Yale to influence policies in the Global South without consulting sex worker collectives, where sex workers have been leaders and equal partners in combating the HIV/AIDS epidemic for three decades.
- The authors ignored multiple requests from academics to make the findings available, and bypassed civil society organizations completely, sharing it directly with media outlets and politicians in the absence of peer review.
- Important: e-prints posted on arXiv are not peer-reviewed by arXiv; they should not be relied upon without context to guide clinical practice or health-related behavior and should not be reported in news media as established information without consulting multiple experts in the field.







Vested interests? Why only brothels?

Closing of brothels has always been associated with land sharks. Most brothels are prime property and in the middle of the city.

The stigma of immorality dodges the workers and thus they can be easily evicted

Criminalization has ensured that the community lives `outside' the law where exploitative practices abound making it easy to `blame' them as this study does. The fantasy that there are clearly demarcated "red light areas" that can be contained by dramatic "pandemic control" measures shows how little the researchers know about sex work in India.







MEANWHILE IN INDIA....

COVID 19 – Organised Sex Worker collectives stood strong to ensure that their community is assisted. Over 15000 sex workers across eight states of India have been assisted by NNSW members. Survey, Packaging, Transport, distribution – done by sex workers







SEX WORKERS: THE BEST EDUCATORS OF MALE CLIENTS!

State recognition

- It is the government that has to take decisive steps to resolve this crisis. The government must show sensitivity towards the sex workers' community and design and implement policies and schemes for them.
- Currently, none of the schemes declared by the Central government include sex workers. NGO relief measures can only be of help for a short-term. STATE must step in.
- As undocumented migrant workers they are left out of all schemes.
- This study does not recommend relief measures other than alternative work. Is this an abolitionist's bias against sex work in brothels?

Immediate Demand

- Recognise the outreach and relief work done by the workers for their communities and involve them in all future work undertaken by the government
- This has been our struggle all along. Our demand has always been to grant the status of a sex worker, and recognise sexual labour [laingik shramik]
- A vital need is to transform social perception and accept sex workers as service providers and thus an integral part of our society.
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