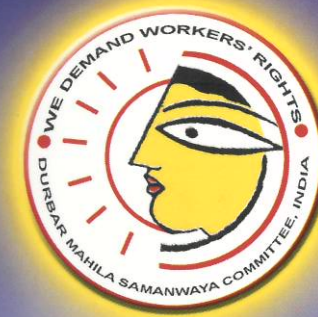


The Durbar-run health intervention programme that aims at reducing STDs, increasing condom use and preventing the march of HIV/AIDS among sex workers of West Bengal is not just a vertical HIV Intervention programme but a horizontal multi-dimensional programme that addresses key issues that primarily affect sex workers and their families and keep them marginalised and stigmatised. The programme has evolved into a broader development initiative in which HIV/AIDS prevention and other health interventions form just a part. The concept of 'empowering' sex workers by creating an 'enabling environment' for them that facilitates transformation of their subjectivity from a 'victim' or 'fallen woman' to a change-agent has been at the heart of this evolution or change. This very concept played a pivotal role in unleashing the long suppressed energy and creativity of sex workers. It has resulted in enormous and spontaneous participation of members of the community (which includes sex workers, their children and fixed clients or babus and male and transgendered sex workers), and has led to the birth of an autonomous organisation of sex workers. The gradual development and changing structure of the organisation, its participation in struggle for rights of sex workers has enormously enhanced the position and self-confidence of the community members. This may not be the first attempt of collectivisation of sex workers in history, but certainly this is the first time that a sex worker organisation has taken over an HIV/AIDS intervention programme and not only upscaled its activities but continues to maintain high standards of performance in HIV/AIDS prevention and in empowering sex workers to take charge of their own lives.

# DURBAR



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*Ten Years of Sex Workers' Struggle for a Better World*

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## DURBAR



- Advisor : Dr. Smarajit Jana
- Edited & Compiled by : Arunangsu Aich, Debasish Chowdhury
- Acknowledgement : Mrinal Kanti Dutta, Bharati Dey, Gouri Roy, Sangeeta Pal, Dr. Protim Ray, Kumkum Pal
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- Publisher : Durbar Prakashani
- Editorial Office : 44 Balaram Dey Street  
Kolkata-700 006  
E-mail: sonagachi@sify.com  
Ph. : (033) 2543-7560/7451  
Fax : (033) 2543-7777  
URL : www.durbar.org

Durbar (*durbar* in Bangla means unstoppable or indomitable) is a forum of sex workers based in West Bengal, India. Durbar has been active in addressing the structural issues that frame the everyday reality of sex workers' lives as they relate to their material deprivation or their social exclusion. Durbar is explicit about its political objective of fighting for recognition of sex work as work and sex workers as workers and for a secure social existence of sex workers and their children. Durbar also seeks to reform laws that restrict human rights of sex workers, tend to criminalise them and limit their enfranchisement as full citizens.



## Vision

We seek a world where all marginalized communities of the world live in a peaceful environment with due respect, rights and dignity. We hope for a social order where there is no discrimination practices based on class, caste, gender or occupation and all global citizens live in peace and harmony.

## Mission

Durbar's mission is to enhance a process of social and political change in order to establish rights, dignity and improvement of social status including quality of life of all sex workers community of the world as part of the global movement to establish rights of marginalized people through:

- 1) Improvement of image and self esteem of marginalized Community.
- 2) Influencing existing norms, policies and practices operating at all levels in the society.
- 3) Empowering communities through a process of Collectivisation and capacity building.
- 4) Addressing power relations within the trade and outside.
- 5) Formal and informal alliances with individuals, groups, institutions and movements.

## Core Values

Core Values are the most central and fundamental features of an organisation. Every organisation has Core Values, whether they have been explicitly defined or not, and they rarely change over time. Thus, if we want to find out what an organization is really all about, we should seek to know what its Core Values are, and the degree to which they are respected by staff in their work.

Following core values may be considered for our organisation.

1. **Respect**
2. **Recognition**
3. **Integrity**
4. **Commitment**
5. **Reliance**

**Respect:** *We affirm the dignity, potential and contribution of participants, partners and staff.*

Women and men, sex-worker and non sex-workers are equal, should have equal rights and should participate equally in society.

- All Projects shall promote the empowerment & full participation of women in general and sex workers in particular in designing, planning & implementing project activities.
- All staff shall have equal opportunities for career development and promotion based on their quali-

cations and experience. In order to achieve this, we shall proactively promote the development and recruitment of sex-workers.

Cultural, religious and gender diversity can be achieved only through the appreciation of and respect for such Diversity.

- Project approaches shall equally value the perspectives & suggestions of all project participants regardless of their age, gender or power.
- All projects, departments and committees shall strive for diversity and adequate representation.

People work best in a physically and emotionally secure environment, mistakes provide important learning opportunities.

- All old and new projects shall promote full community participation.
- All staff shall be free to express their opinions without threat of punishment or censure. Staff should be encouraged to learn from their mistakes. Mutual expectations should be clearly communicated.

### ➤ Workplace behaviour:

- Before making decisions that affect staff, provide each of them the

opportunity to express their opinions.

- Treat with courtesy and politeness our visitors, neighbours, and colleagues, especially those who drive and serve us in the workplace.
- In meetings and group work, focus as carefully on what others have to say, as on your own ideas.

➤ **Recognition:**

*We affirm the right to self-determination of individual and community and more specifically the rights of sex-workers community.*

We recognize that sex work is a work and the sex workers have every right to determine her life and profession. We also recognize that to establish the basic human, civil and occupational rights of sex workers the structures of existing power relations have to be altered. We are committed to carry out a process to empower sex workers at individual, community and at societal level.

➤ **Workplace behaviour:**

Before taking any decision think twice whether the action/s will help sex-workers to feel more capable and in control of situation.

Keep on questioning 'Does our program in general and activities in particular influence the imbalance of the power equation within the sex trade and between the sex workers community and the main stream society'.

Examine before taking decision to what extent your actions could held society and state actions more responsible/accountable towards the marginal community and more specifically towards sex workers community.

Measure how this empowering process initiates positive changes at individual, community and at structural level.

Assess your program in terms of increasing relationship with people and other organisation?

Enquirer how does your work help increasing access of sex workers community to economic and other resources.

➤ **Integrity:**

*We act consistently with the mission of the organization, being honest and transparent in what we do and say, and accept responsibility for our collective and individual actions.*

Honesty, integrity and Sincerity are the cornerstones for success of any individual or organisation.

- All staff shall actively promote and cultivate Honesty, Integrity, and Sincerity & Transparency in planning and implementing project activities with all project participants and partners.
- The professional & personal conduct of all staff shall reflect their Honesty, Integrity, Sincerity and Transparency.

➤ **Workplace behaviour:**

- Funds have been donated to the organisation; therefore treat them with the same frugality that one would spend one's own income.
- While dealing with individual and members of partner organisation ask whether I am upholding the fame and interest of my organisation.

When responsible for the custodian-

ship of Project's assets, resources, materials, and equipment, always ask, "Am I doing the right thing?"

➤ **Commitment:** *We work together effectively to serve the larger community.*

Positive perceptions of capability and accountability are fundamental to commitment, self-esteem & ultimately success.

- Project participants possess the knowledge and capability to identify and solve their own problems. Projects shall continue to facilitate this effort.
- All staff shall take greater responsibility for the development and implementation of their own work plans Constructive feedback will promote accountability and capability.

➤ **Workplace behaviour:**

- **Be observant of the support needs of colleagues, and those living around us, ready to lend a voluntary hand when such needs arise.**
- **Break down the "barriers" between and within sectors, programs, and projects, seeking the greater, collective good rather than individual recognition.**

➤ **Reliance:**

*We constantly challenge ourselves to the highest levels of learning and performance to achieve greater impact.*

Trust on peoples, knowledge and wis-

dom and create an interactive and sharing approach to development.

- Organisation shall assist all staff in fulfilling their needs to enhance their performance level.

Experience and learning skills are interrelated, self-sustaining & fundamental to human development.

- Organisation shall promote the experience and learning skills of all Project participants to ensure programme sustainability.
- All staff shall share in the responsibility of ensuring a wide range of experience, knowledge and skills in order to build greater capability and creativity.

Everybody is responsible for the project's work place environment and sound management of resources.

- All project planning and activities shall be empowering and enjoying.
- All projects shall manage their resources cost effectively.

➤ **Workplace behaviour:**

- **View each hour spent in the workplace as providing an opportunity to expand and deepen the quality of work.**
- **Never be satisfied with simply meeting expectations; always try to exceed them significantly.**
- **Recognize and reward innovation and responsible risk-taking by staff.**



## Health Development Activities

Following the survey in the year 1992 All India Institute of Hygiene & Public Health (AIHH&PH) initiated an intervention programme in the area with the objective of controlling the spread of STD and HIV in Sonagachi. The intervention programme started with three principal components: provision of health services including STD treatment; information, education and communication (IEC); and condom programming. The programme was put into operation through a collaborative network of government and non-government institutions. Durbar Mahila Samanwaya Committee (DMSC), a sex workers' forum which emerged with direct support of the Project, became an active participant in the Programme from 1995.

Durbar Mahila Samanwaya Committee (DMSC) took over the management of STD/HIV Intervention Programme (SHIP) from AIHH&PH by 1999. After taking the full control of the intervention programme DMSC started replicating the basic principles of guiding policies of 'Sonagachi Project' in other red light areas of district towns. The organisation took special initiative to reach an increasing number of sex workers. The basic approaches what Sonagachi

adopted can be summed up as three 'R's': Respect, Reliance and Recognition. That is respect towards sex workers, reliance on them to run the programme and recognition of their professional and human rights. In practice the Project focused on translating this approach into a relationship of mutual trust and rapport between the community of sex workers and the staff members of the Project. DMSC has started STD/HIV intervention work among street based sex workers and their clients: one in Ultadanga and one in Cossipore covering a population of over 20,000 female sex workers (FSW). The major components of the programme is centering around drop in centres for counselling, referral STD care services and social marketing of condoms. At present DMSC run clinics offering treatment of STIs and other common ailments in 49 centres in Kolkata, Howrah and other districts of West Bengal. Our AIDS prevention activities include promotion of condom through social marketing and community based marketing of condoms among sex workers in all the red light areas in West Bengal. DMSC has formed Mamata Care and Treatment Centre

(MCTC) provides services for HIV screening with pre and post test counselling. As one of the key aspects of intervention activities, regular health surveys are also conducted in order to assess the improvement of the status of sexual health of the community. In ad-

dition, impact of community development and social mobilization strategies deployed by the 'Sonagachi Project' is regularly assessed through on-going monitoring mechanisms using both quantitative and qualitative tools.

The following table reflects achievements of the intervention project over time.

**Table: 1**

**Comparative distribution of sex workers according to use of condom by clients.**

Sex Workers Surveyed	1992	1995	1998	2001	2005
Total number of sex workers interviewed	442	582	506	614	560
Percentage of users	1.11	76.14	78.45	81.87	85.07

The data of condom use shows significant increase in condom use over time. The percentage of sex workers using condoms in 1992 was only 1.11% but in 2005 it is 85.07%.

**Table: 2**

Prevalence of HIV amongst Sex Workers	1992	1995	1998	2001	2005
	%	%	%	%	%
HIV prevalence	1.13	4.81	5.53	11.73	5.18

Table-2 reflects that HIV prevalence remained stable at around 5% as shown by the Baseline and point prevalence studies conducted in different years.



## Mamata Network of Positive Women

The network started with the aim to enlighten the positive woman raise their voice against human rights violation in the patriarchal society. Female sex workers in general and positive sex workers in particular marginalized by profession and stigmatised for the disease, are oppressed by the madams-pimps-police-nexus. For these social barriers, which are difficult to overcome, they cannot immerge out of this nexus and remain at the margin deprived all the rights enjoyed by the other. On the other side women from the mainstream society are in dark about the knowledge of the disease and its consequences even. So called 'care & support programme' has failed to reach substantially to those marginalized women. Only collectivization of positive women and their own initiative to fight against the disease as well as social ostracisation of the victims could be a solution to bring about a positive change in this direction.

### > Objectives of Mamata Network of Positive Women

*The objectives of Mamata Network of Positive Woman are as following:*

- 1) The make care and support pro-

grammes including VCTC, treatment of OIs and ART, available, accessible and acceptable to People Living with HIV/AIDS (PLWHA), in particular women, in a setting that is non-stigmatising and non-discriminatory.

- 2) To increase feelings of solidarity between PLWHA coming from all walks of life.
- 3) To enable PLWHAs to unite and voice their protest against social stigma, discrimination and social ostracism.
- 4) To develop a network of positive women who raise their united voice for human rights, rights to care and treatment and rights to non-discriminatory workplace environments.
- 5) To involve PLWHA - particularly women - in planning, decision-making and implementing VCTC and care and support programmes.
- 6) To mobilize and unite PLWHA and centre-stage their actions in advocacy campaigns to reduce stigma and discrimination, and to increase access to treatment for HIV/AIDS.

### > Achievements :-

- 1) 15 community sensitization programme done in different red light areas
- 2) 5 capacity building programme for the staff at the central level and as well the branch level taskforce.
- 3) Positive Women are being united to form Mamata Network of Positive Women.
- 4) Referral linkages to various institutions have been strengthened which has enable positive patients to get proper facilities for their treatment and care & support.
- 5) 22+5 positive people are getting free ART from National Free ART Programme - STM and Mamata Care & Centre respectively.

### > Future Plan of Mamata Network of Positive Women:-

- 1) To strengthen the networking activities through issue based sensitization programme in different areas of West Bengal.
- 2) To arrange for vocational training programme for positive women both sex workers and non sex workers as an alternative of their profession in income generation.
- 3) Capacity building of positive people particularly women about the disease and privileges of care & support programme.
- 4) Awareness generation programme for women who are not in sex trade.
- 5) A ceremonial publicity programme of the centre will be arranged to highlight the activities more elaborately.



## Capacity Building Through Education and Vocational Training

Our experience has taught us that for a marginalized group like us to achieve empowerment, it is imperative that we improve our self-esteem and begin a process of self-actualisation. We have realized that in striving collectively against all social injustice, we must protect our right to information and demand our right to instruction and education. Our long-term goal is to achieve our desire for a better life, for a better tomorrow for our children and us. In order to achieve the above objectives, we initiated a comprehensive education programme that addresses our children's and our needs.

### > **Adult Literacy Program (KOROK and DIGANGANA)**

Adult literacy program was first started in 1993 in the name of KOROK and DIGANGANA. The education programme has helped and enabled our community in designing health and other intervention activities including empowerment and community mobilization. Currently, 15 adult education centres covering almost 300 sex-workers run in Kolkata and in several districts. A spoken English class has be-

gun recently, and we hope to carry it forward.

### > **Educational Assistance for the Children of the sex-workers (BERABHENGE)**

A perennial problem with children of sex workers is questions raised by other people and other children of their father's identity. This fear of inability to answer queries on father's identity keeps children of sex workers on tenterhooks in schools and other public places. In addition, they have to constantly be on their guard lest someone finds out that they live in red light areas, or that their mothers are sex workers, because once their origins are known, they become stigmatised and discriminated against. This constant vigil to protect the 'secrecy' of ones own identity and origins adds stress in their lives, particularly at public spaces like schools.

We address this problem with special educational approaches. Berabhenge ("Breaking fences"), as the name suggests, tries to address these issues. Basically Berabhenge is an assistance programme with three compo-

nents viz. special assistance centres for the school going children, education centres for school drop-out children and special coaching centres for children of higher classes. Classes are held during evening, the time when most sex workers are busy with their work and the children have to fend for themselves. Currently 15 Berabhenge centres are running in Kolkata and other districts, covering almost 500 students.

Additionally, the broader objective of Berabhenge is starting and continuing a constant interaction with the 'mainstream' children's activities through participation in quiz contests, sit-and-draw events, photography workshops, sports, etc. It is heartening to note that these 'Ekalavyas' are competing well and at par with the 'Arjunas' in such events. In the 2003, Berabhenge children have won prizes in two inter-school sit-and-draw competitions one organized by Gorky Sadan and another by Lions' Club of India in Kolkata. We are in the process of bringing teachers of various 'mainstream' schools to help our children through special meetings. Also we organise interactive sessions involving important and influential persons from the neighbourhood.

To further institutionalise the process of learning for our children we have started libraries, one in Kolkata and the other in Kanthi, in Midnapore district. Any one from the community, aged

or young has access to reading facility in these libraries.

### > **Vocational Training for Community members (SRISHTI)**

We began a vocational training programme for community members with a modest aim to initiate some productive engagement for aged sex workers and for sex workers' children. At the SRISHTI (Creation) unit, training as well as production of handicraft goods (terracotta toys and figurines, soft toys, jute objects, beadwork toys, badges, etc.) is done. The unit is housed at the Lolita Mali Mukta Mancha in our office premises. At the end of the six months' training we confer certificates to the trainees and attempt to increase their access to the market. SRISHTI markets its products through one sales outlet in SWABHUMI (a crafts park) in Kolkata. In addition, SHRISHTI delivers beadwork badges and other handcrafted mementos to different NGOs, CBOs and government organisations against job orders. We are planning regular sales in urban and district level handicraft outlets. Over time, we hope to employ certificate holders of our training programme in our units. We also have plans to organize trainings and workshops on marketing and packaging among our staffs and trainees.



## RESIDENTIAL HOME FOR THE CHILDREN OF SEX WORKERS

The residential home in Baruipur, named RAHUL VIDYA NIKETAN, is located in the southern suburbs of the city. Rahul Vidya Niketan presently houses about 48 children in the age group of 5-14 years. We are also running another residential school in Ultadanga named INDUBALA ABASIK VIDYALAYA that presently houses about 20 children in the age group of 4-10 years.

All boarders at Rahul Vidya Niketan have enrolled in local 'mainstream'

schools and are performing well in class. In order to improve the children's access to books, a small library has already begun at Rahul Vidya Niketan.

We offer drawing and music as part of our education programme. We plan to develop the two residential homes for children as self-sustaining units, with visions of providing children gainful employment such as agriculture, handicrafts and allied activities after they complete their instruction. To this end, we have planned to begin vocational training for the children at these two residential homes.

### > Change in Literacy status among sex workers:

Category	1992	1995	1998	2001	2005
ILLITERATE	84.4%	68.6%	53.3%	57.49%	69.1%
JUST LITERATE	12.2%	17%	11.8%	11.56%	19.5%
PRIMARY	2.6%	8.4%	27.5%	25.9%	5.9%
SECONDARY	0.7%	5.7%	5.3%	5.05%	5.2%

Sex workers reached by the Sonagachi Project have become consistently more literate.

## CULTURAL CHANGES AND DEVELOPMENT

### KOMOL GANDHAR

As workers in the entertainment sector, we have always had strong association with performing arts - in particular theatre, music and dance. After DMSC was formed and we began to demand and fight for our rights, we felt a need to begin and develop a cultural wing through which we could express our feelings and performing skills and also reach a wider audience with our messages and demands for workers' rights and decriminalisation of sex work. KOMOL GANDHAR, the cultural wing of the movement was built up by our grass root efforts. Komol Gandhar has dance, theatre and singing groups and has performed all over India and in venues abroad - getting critical and popular acclaim. The troupe has received praises and prizes from various organisations in India and abroad. We also stake claim as performers in the mainstream cultural arena. Komol Gandhar has emerged as a platform for

exchanging various cultural traditions, across linguistic, religious and regional barriers, for forging a common identity as sex workers and has become a political tool in the sex workers movement.

### > Some Milestones

- In 1998 Komol Gandhar was chosen as the only cultural team to perform in the inaugural ceremony of the 12th International AIDS Conference (28th June - 3rd July) held in Geneva, Switzerland. Komol Gandhar was invited to a cultural competition organised by 'Guria' a well-known Varanasi-based organisation and won the first prize competing with cultural troupes from various parts of India.
- In 2002 September Komol Gandhar participated in a cultural programme in New Delhi organized by UNDP. They captivated the audience by their dance-drama "I am that woman".



## Immersion Learning Program

### > Prelude:

CARE India has undertaken Saksham Program to assist the Avahan - India AIDS Initiative program funded by The Bill & Melinda Gates Foundation. The Saksham Program basically aims at building capacities of the Avahan partners on CLSI concepts & Implementation. DMSC is one of the best examples of CLSI implementation not only in India but world over. To provide better understanding of the CLSI concepts and for providing an immersion learning experience with CLSI in practice, CARE India has chosen Durbar Mahila Samanvay Committee (DMSC), the largest sex workers collective in India, Kolkata as a CLSI demonstration site.

### > What Is Immersion Learning Program?

Immersion learning is based on concept of providing learning experiences within an enabling environment. It replaces the class room learning with experiential, integrated learning based on self-learning. Contrary to the traditional class room learning, the onus of learning here is more on the learner rather than the trainer. Many a times there might not be any trainer at all but

just the environment & processes. The learning is through sharp observations, experiences, perceptions & continuous analysis process. Immersion learning is believed to be one of the best methods for capacity building of adults & senior personnel.

As a part of the Saksham Program, CARE India has developed an Immersion Learning Program at Sonagachi for the Avahan partners. The first initiative of this Immersion Learning Program is a five-day learning circuit at Sonagachi. This learning circuit has been designed keeping in mind the specific needs of the Avahan partners & the program objectives of the Avahan Program. This learning circuit provides an overall immersion into the Sonagachi movement and CLSI experience. The circuit is based on minimal time of participants and travel within and around Kolkata and still takes five days. The sites are selected to provide diversity of work and approaches (brothel based sex workers, flying sex workers and migrant workers, truckers and industrial workers, Micro credit/saving/enterprises initiatives/CBO formation/CBOs operation and cultural and mainstreaming initiatives etc.).

### > The CLSI immersion program is based on the principles of:

- Ensuring complete immersion as far as possible to the limits of practicality
- Based on principles of experiential learning and adult learning within strong facilitating environment of the project.
- Demonstration -Seeing is believing
- Two way transfer of beliefs and wisdom apart from knowledge
- Providing contextual environment for transfer of tacit knowledge
- Community advocacy- best advocacy is self-advocacy
- ACTION LEARNING- CLSI essentially argues a change in the mindset and the way we implement the development/HIV projects. This requires changes in the beliefs to a greater extent than skills and thus CLSI immersion program is based on "learning by

self and developing self-convictions" and to that extent participants him/her self is the teacher and can learn to the /limits of his/her desire. The program aims at providing a strong facilitating environment within which the participants can carry out self-inquiry/analysis and arrive at conclusions. This immersion program thus is different from other traditional programs in which, there are no teachers but only facilitators, whose' role is to assist the participants in their learning. The fact that learner is in the driving seat should be clear to all the participants.

Methodological framework comprises creating learning (and at times moving) experiences through facilitated but loosely structured togetherness and sharing activities.



## Community Led Capacity Assessment & Building Unit (CLCAB)

The CL-CAB unit has been designed to incorporate the critical issue of peer education in developmental arena, especially in HIV/AIDS. This unit is envisaged as a capacity building and learning platform, utilizing key strengths and best practices of community led approaches. The unit aims to enhance community mobilization & ownership building through 'hands on' training and capacity building via community to community approach.

### > Key Role of CLCAB

- Trainer of empowering processes and methodologies
- Sharing of experiences by experienced community members who have undergone the process
- Facilitators of cross proliferation of experiences through networks
- Handholding of community members and CBOs through crucial phases of implementation

### > The operational mechanism of CL-CAB

CLCAB is being developed by involving combined teams of community

members/peers, senior consultants and community leaders/peers from DMSC who have been through an empowerment process for the last 12 years and are a part of the well known best practice model of Sonagachi. This team is envisaged to expand and include community leaders from all the six AVAHAN states to form a pool of resource persons. The pool of CL-CAB members will include not only female sex workers but also male sex workers and Transgenders from all the sex work settings Injecting drug users and transport workers.

### > Main Activities

- Mapping of power dynamics and structural barriers within communities
- Participatory needs assessment
- Facilitation in peer development
- Facilitation of formation and strengthening of CBOs
- Facilitation of networking of CBOs at district and state level
- Facilitation of a community driven system including STI man-

agement, advocacy and condom accessibility

- Facilitation of self development of community members through various CB modules.
- Capacity Building on hand holding violence towards sws & sws attitude towards others, anti-trafficking program, legal literacy

- Develop and facilitate implementation of necessary training / learning tools based on the key principles, obstacles and lessons learnt of DMSC program components

- Community Led Advance Field Orientation in DMSC focus on Component based



## Ensuring Economic Empowerment-

### USHA MULTIPURPOSE COOPERATIVE LIMITED

Economic insecurity coupled with extortionate money lending practices that exist only in red light areas, had always been part of the lives of us, sex workers. This had made us unable to save our incomes and often made it impossible for many of us to escape debt traps. To change this, we took one of the most significant steps by registering a consumer co-operative society (Usha Multipurpose Co-operative Society Limited, or Usha). Usha is for and by sex workers. During August 1995, we succeeded in persuading the Government of West Bengal to remove the relevant clauses from the Cooperative law so that we could register our cooperative society as the co-operative of 'sex workers' rather than being passed off as ubiquitous 'housewives'. The registration of the Co-operative marks an important strategic advantage for sex workers in our struggle to re-frame the definitions and meanings of our occupation. Usha hopes to use the fact that a state institution has formally recognised prostitution as the Co-operative member's profession to bolster our campaign for social recognition of sex work and sex workers' right to self-determination.

Usha runs a micro-credit programme for sex workers; creates alternative jobs

for out-of-work or retired sex workers; does social marketing of condoms and other consumables; and plans to start a large scale production unit for generating employment for retired sex workers and those who want to opt out of sex work.

We, members of Usha are very emphatic that the Co-operative is not meant for economic rehabilitation of sex workers who are in the trade, but is designed to provide a financial support for us to fall back on in moments of crisis, and to minimise our economic desperation by creating a space for negotiation. Moreover, through social marketing of condoms in areas where we do not yet have an organisational base, Usha aims to acquaint more and more sex workers with the aims and objectives of the sex workers' movement. The cooperative has done a tremendous service to the cause of sex workers' empowerment by disempowering the local moneylender-pimp-trafficker nexus, which works as the pivotal coercive node in the trade.

Having developed the necessary technical expertise and infrastructure, Usha now operate as the principle financial institution for the range of sex workers' organisations affiliated

to Durbar, and manages grants from external agencies for them. At present Usha has more than 5,000 registered

members and its increasing turnover is trumpeted as a success story of the Cooperative movement in West Bengal by the Department of Cooperatives of the state government.

The following table reflects the development of USHA Co-operative Society over the years.

#### ➤ Sramajeebi Mahila Sangha

Sramajeebi Mahila Sangha is one of the oldest surviving self-help groups of sex workers that begun in Sethbagan to stop the violence of the local hoodlum "Langra". The SMS was rejuvenated and integrated with DMSC, but maintains an independent partner sex worker organisation status within DMSC.

#### ➤ Saathi Sangathan

Babus or fixed non-paying partners of sex workers are an integral part of sex workers' families and communities. DMSC realised that their fixed partners have a role to play in their empowerment process as well. DMSC therefore facilitated the formation of a collective for the Babus, the Saathi Sangathan (Companions' Collective). Saathi Sangathan is beginning to play a role alongside us and is fighting alongside us against all kinds of violence and coercion faced by sex workers, our children and clients.

Particulars	1995-96	1996-97	1997-98	1998-99	1999-2000	2000-01	2001-02	2002-03	2003-04	2004-05 (Till Oct.)
Working Capital (Rs in lakhs)	0.61	8.45	9.91	12.65	62.33	95.68	115.33	180.00	250.00	350.00
Turnover (Rs in lakhs)	3.00	15.00	17.50	20.00	40.00	150.00	180.00	350.00	525.00	800.00
Loan to Members (Rs in lakhs)	-	.97	2.20	3.59	2.61	3.41	17.70	23.69	44.64	200.00
Members (up to 30.11.2005)	7800									

### > Binodini Srameek Union

We the members of DMSC and other Durbar organisations, maintain that prostitution is not a moral condition but an occupation and as sex workers we are working women and men, who like many other working people are engaged in a marginal, sexist, exploitative and low-status job. For most sex workers, working in the sex industry is not an irrational act of desperation, but a rational choice made from the very limited options available, particularly to poor, unskilled women, and poor gay men, in a capitalist and patriarchal society. Claiming recognition as workers has now become the immediate strategic aim for securing our basic needs as human beings. From 1998 we

have celebrated the International Labour Day every year by organising midnight torchlight rallies foregrounding our demand for workers' rights. To strengthen our demand, we have now applied for registration of our own trade union, Binodini Srameek Union (Binodini Labour Union). Through the formation of the trade union we want to take this struggle forward and join the larger international labour movement for the autonomy of workers and workers' rights.

### > Durjoy Durbar

Recently, to formalise the loose affiliation of our organisations, an umbrella institution, Durjoy<sup>2</sup> Durbar has been registered.

1. Binodini in Bangla means one who entertains. The name also pays homage to a Nineteenth century sex worker from Calcutta, Binodini Dasi, who had become a celebrated stage actress.

2. Durjoy in Bengal means that which cannot be vanquished.



## Ethics of Research Among Sex Workers-experience and praxis: Sonagachi Project and Durbar Mahila Samanwaya Committee

### > Introduction

Durbar Mahila Samanwaya Committee (DMSC) is a forum of sexworkers and their children. In July 1995, a group of sexworkers from Sonagachi, one of the oldest and largest sex work sites of Kolkata organised and collectivised themselves. Their main objectives were to create solidarity and collective strength among the community of sexworkers, to forge a positive identity for themselves as workers, mark out a space for action to change their own lives and demand legal and social recognition of sex work. The founding members of DMSC had come together through their work as Peer Educators (PEs) of the STD/HIV Intervention Programme (SHIP or 'Sonagachi Project') that began in Sonagachi sex work site in 1992. Beginning modestly in Sonagachi in 1992, the Sonagachi Project, currently run by Durbar, a conglomerate of sex workers' organisations (DMSC, Usha Multipurpose Cooperative Society, Komol Gandhar, Binodini Srameek Union and Sramajeebi Mahila Sangha) now spreads over 49 sex work sites in the whole of the state of West Bengal (India).

From its inception, DMSC activists realised that for creating an enabling environment in which individual sexworkers could exercise choice and practice safer sex, it was necessary to challenge structural barriers that controlled their lives within the sex trade and to engage with the larger society that looked on sexworkers as either 'fallen women,' or as 'victims of oppression' or as 'easy game' for social, epidemiological or communicable disease research.

### > Background: Experience of sexworkers as subjects of Research

Sonagachi Project was initiated following a community-based research conducted in 1992 among sexworkers of Sonagachi - the "Baseline Study" that was conducted by All India Institute of Hygiene and Public Health (AIIPH, Calcutta) under the auspices of the World Health Organization (WHO) and National AIDS Control Organisation India (NACO). The first major epidemiological research conducted among sexworkers anywhere in India, the work could be completed only because the researchers gained the trust of sexworkers who

participated in the study. The study was unique in the fact that, a clinic to provide services to sexworkers was begun within the sex work zone to facilitate the study. Once the study was completed, NACO, the WHO and AIIH&PH decided to begin an intervention programme - the STD/HIV Intervention Programme (SHIP or Sonagachi Project) for the sexworkers. The Project adopted the now famous - "3-Rs" strategy of "Respect", "Reliance" and "Recognition", and inducted sexworkers willing to work in the Project as Peer Educators. Built into the Project design was an occupational health approach to sexwork and of equating commercial sex to an occupation that exposed its practitioners to the occupational hazards of unsafe working conditions, namely sexually transmitted infections (STIs) and HIV. One of the successes of the Sonagachi Project can be attributed to this major paradigm shift in concept and design of the intervention programme. All was, however, not smooth sailing for the new Intervention Programme and the sexworker community it served.

In 1994-95, when the Project was off the ground and had gained the trust of sexworkers of Sonagachi, a large NGO in Calcutta - the West Bengal Voluntary Health Association (WBVHA) planned to conduct research on HIV prevalence of sexworkers of Sonagachi. The WBVHA did this without any consultation with sexworkers of Sonagachi and utilised

the services of the local police! Sexworkers however, protested and put a stop to this violation.

Subsequent to this, a physician of dubious repute and without any clearance from the Indian Council of Medical Research (ICMR) claimed he had produced a 'vaccine' against HIV - his choice of 'subjects' for the vaccine trial was again sexworkers of Sonagachi. Although this 'trial' suffered the same fate as WBVHA 'HIV prevalence' study, sexworker activists of the then-nascent Durbar Mahila Samanwaya Committee (DMSC, the sexworkers' organisation), initiated a discussion within the organisation, facilitated by the Project, on the ethical norms and standards that must be followed when researchers wished 'conduct research' on 'sexworker subjects'.

Following the First National Conference of Sexworkers organised by DMSC in 1997, global recognition of the Sonagachi Project as a 'best practice' model by the UNAIDS and upscaling of the Sonagachi model of intervention to other sexwork sites in Kolkata and the districts of West Bengal the Sonagachi Project, sexworkers, DMSC and its sister organisations became 'subject' of research and documentation by groups of filmmakers, 'researchers', sociologists, et al. Experiences of sexworkers and DMSC activists of such activities were never completely satisfactory as, time

and again, commitments agreed upon by external researchers and media-persons were rarely adhered to in the field, and it was virtually impossible to protect rights, dignity and privacy of sexworkers who agreed to be 'subjects' of such exercises. An urgent need was then felt to set up norms and ethics of research on sexworkers.

#### > The Ethical Review Committee on Research (ERCR) of DMSC

The Ethical Review Committee on Research was born out of the necessity of protecting the rights (civil and human) of sexworkers who agreed to participate in research conducted by external agencies. Based on the Helsinki Declaration, the ERCR developed a protocol that is needed to be adhered to by individuals and groups who wished to conduct research on sexworkers. The process was dialogic and evolutionary and the procedures that are followed by Sonagachi Project currently are provided as an annexure to this article. The central principles of the Ethical Review Committee of Durbar are the following:

1. Research among sexworker communities must have approval of and permission from the community. Durbar considers that mere approval from the Ethics Committee of the researcher (and/or her country/institution) is not enough - the research, its objectives, methodology, protocols, end-point, risks and benefits, compensation, etc.

must also be agreed upon by the community who are 'subject' of such research.

2. Informed Consent - both at community level and at individual level must be procured with full understanding of the consequences, risks and benefits of participation, and the researchers must procure Informed Consent from all research subjects without duress and / or undue inducement.
3. Rights of individual research 'subject': the right of the individual to participate in or to withdraw from research is unassailable and Durbar believes that individuals can refuse to participate in / continue in any research at anytime, notwithstanding the fact that community representatives and / or its organisation have agreed to participate in the research.
4. Ownership of research products: sexworkers and their organisation (s) not only must be acknowledged when they participate in any research, but must also be recognised as part-owners of the research products - whatever its form (intellectual or material).
5. Overseeing research activities: An ombudsman body - composed of representatives of the community being 'researched', local scientific persons, representatives

from the government and / or local-government functionaries will oversee research activities on a day-to-day basis to ensure that researchers are following the mutually agreed-upon rules, procedures and protocols. This body will have the power to stop the research if the researchers violate any of the stipulations laid down and ensure appropriate compensation to the erstwhile 'subjects' of the research.

#### > Sexworkers as Researchers: the Durbar way

Another issue that emerged during the dialogue with sexworker activists on the ethical standards of research was the question of sexworkers becoming researchers themselves. The process had actually begun since 13 PEs were inducted in the Sonagachi Project way back in 1992 and they began, in course of their work, to document (a) their everyday realities (b) the barriers the women faced in adapting safer sex practices, (c) the ways in which the Project could improve its service delivery and (d) the other needs of sexworkers that needed to be addressed urgently. However, the major constraint in developing the research abilities of sexworkers was their lack of capacity and training to become researchers. Realities of working as PEs in service delivery were another constraint.

In 1998-99, an opportunity to utilise sexworkers in direct research became possible during the Horizons Project (Population Council) sponsored research to enquire into community mobilisation activities of DMSC and the Sonagachi Project. A selected group of sexworker activists, PEs and supervisors were trained in conducting field interviews and data entry procedures. The success of this experience was overwhelming, but not sustainable once the research ended.

However, that it was possible for sexworkers to become researchers ignited the imagination of the sexworker leadership that took over the running of the Sonagachi Project in 1999.

A relatively long-term opportunity to develop a team of researchers from the sexworker community presented itself when Theory and Action for Health (TAAH) Group initiated a collaboration to research and document the social approaches to health and HIV prevention in Sonagachi Project in 2003. Funded over a period of 3 years, the DMSC-TAAH team evolved in June 2003. The objectives of this group are to (a) research the social approaches that worked successfully in Sonagachi Project (b) document the successes, (c) develop a model of the Sonagachi Process and (d) develop learning resources for sexworker groups, community leaders, donor agencies and policymakers at local, national, regional and global levels. Since the

inception of the DMSC-TAAH Project, a core cadre of 5 community researchers is conducting all field research required by Durbar and its sister organisations. In the short span of one-and-a-half years (since January 2004), this team has conducted over 30 focussed group discussions, almost 90 in-depth interviews, two quantitative surveys (one on clinic satisfaction, and the other on prevalence of violence), documented major events of Durbar and Sonagachi Project and presented their findings to an international consultants' group. Skills building of the group have been impressive: all have developed basic computer skills, including data-entry procedures, skills at data-tabulation and basic analysis, PowerPoint presentations and handling of sophisticated documentation equipment. In short, Durbar has proved conclusively that given the opportunity, sexworkers are no less than 'trained researchers' and are better researchers as they come from the community.

#### > Challenges

1. Continued violation of rights of key populations and marginalised community vulnerable to HIV by researchers, pharmaceutical companies, public health experts and vaccine manufactures. Even after 12 years of successful intervention by Sonagachi Project, sexworkers in North Bengal were

subjected to HIV test without their consent in July 2004. What was scary about this event was that the researcher represented ICMR - the Indian equivalent of National Institute of Health (US).

2. In light of the current public outcry over Tenofovir trials among sexworkers in Cambodia and Thailand, and closure of a similar trial by the Government of Cameroon, Durbar feels that a global consensus on (predominantly) HIV research on key populations (sexworkers - female, male and transgendered, injectable drug users, long-distance transport workers and people living with HIV/AIDS) must evolve that safeguards their rights, dignity and privacy.
3. Newer research methodologies and protocols - including more use of sequential analysis - need to evolve to provide early benefits from such research without prejudice, in particular for drug and vaccine trials.
4. Research protocols need to be holistic and need to involve community representatives from design stage to outcome stage.
5. Ownership of research products - must be an issue that has to be addressed in evolving a more ethical research process for HIV/AIDS research among key populations.



## Theory & Action for Health (TAAH) Research for Empowerment

We now recognize the relationship between knowledge and power. Very often the kind of knowledge generated in a society can be linked to the needs of those in power. The history of research in sex work quite clearly shows this. Sex workers have been traditionally used as guinea pigs to generate knowledge about diseases, not to save sex workers' lives but to save the larger society. The movement of sex workers led by Durbar Mahila Samanwaya Committee (DMSC) has sought to turn the tables. One of the major focuses of the movement has been to generate knowledge not just for others but, and primarily, for the empowerment of the sex workers themselves. The DMSC-TAAH Project aims to document and synthesize factors that contributed to making the Sonagachi Project in-Kolkata-India, one of the most successful community HIV prevention initiatives in the world. The project would identify the powerful local social approaches used by the sex workers of Sonagachi to transform the quality of their lives and to prevent the spread of HIV infection. It would establish best practice in programme development and evaluation and disseminate this globally. Today, the movement has a large number of informed, active, trained researchers -capable of gaining knowledge, owning it and using it for the betterment of the community and the larger society.

TAAH, the Theory and Action for Health Group, has conducted a 3 year Research Project (2003 - 2006) to record and evaluate the social approaches that worked successfully in Sonagachi Project, (b) document the successes, (c) develop a model of the Sonagachi Process and (d) develop learning resources for sex worker groups, community leaders, donor agencies and policymakers at local, national, regional and global levels.

In course of its research, the TAAH Project has organized a large number of focus groups, in depth interviews, quantitative studies and various other activities to understand the changes and processes unleashed by this very unique movement. TAAH has also identified a number of core values embedded in DMSC's programmes and projects:

**1. Respect for Human Dignity**  
Sex work is work like any other. Sex workers deserve respect like other people.

**2. Respect for Sex Worker Agency**  
Under the right circumstances sex workers can take control and have the ability to learn from others and the capacity to teach others.

**3. Egalitarian Organizational Culture**  
By making decisions collectively and sharing responsibility, sex workers gain ownership of each and every process related to all development activities.

**4. Anti Stigma, Discrimination, Exploitation, Violence**  
An organization is needed to sensitize people to SDEV and to overcome SDEV.

**5. Good Governance**  
Sex workers, as individuals and as a group, have equal political status as other citizens and have equal capacity to engage with and equal right to participate in political processes locally, nationally and globally.

**6. Community Ownership**  
Sex workers bring about and sustain changes to improve their lives through negotiating collectively as a community and by building alliances with other groups.

**7. Power sharing at all levels**  
Sex workers and other marginalized communities have equal capability and right to make decisions as other citizens and must have access to decision-making power in every forum they participate in.

**8. Equitable access to quality services and resources**  
Sex workers gain access and control over services and resources by challenging unequal relations of power in society and social and political norms and institutions that engender and reinforce inequality and inequity.

**9. Responsiveness to other NON-HIV needs**  
HIV will be automatically reduced by assuring the sex workers' rights and by providing the quality of life to them.





## Innovative Approaches to Combat Trafficking of Women in Sex Trade by Durbar Mahila Samanwaya Committee (Kolkata)

### INTRODUCTION

Durbar Mahila Samanwaya Committee (DMSC) is an exclusive forum of sexworkers and their children. In July 1995, a group of sexworkers from Sonagachi, one of the oldest and largest sex work sites of Kolkata organised and collective strength among the entire community of sexworkers, to forge a positive identity for themselves as workers, mark out a space for action to change their own lives and demand legal and social recognition of sex work.

The founding members of DMSC had come together through their work as Peer Educators (PEs) of the STD/HIV Intervention Programme (SHIP or 'Sonagachi Project') that began in Sonagachi sex work site in 1992.

From its inception, DMSC activists realised that for creating an enabling environment in which individual sexworkers could exercise choice and practice safer sex, it was necessary to address and challenge various structural barriers that controlled their lives within and outside the sex trade, and in order to achieve this, sexworkers needed to mobilise. This was the impetus for the sexworkers to start their own organisation.

Explicit objectives of DMSC are gain-

ing recognition of sexworkers as workers, a secure socio-economic existence for sexworkers and enhanced life-choices for their children. DMSC therefore runs literacy programmes and vocational training classes for adult sexworkers and their children. DMSC's partner organisations Usha and Komol Gandhar run a cooperative bank and a cultural team respectively. In response to the felt-needs of sexworkers, DMSC is active in reducing the rampant criminalisation that exists in sex work sites. The Organisation fights for the rights of sexworkers and raises its voice against all kinds of exploitation and oppression within and outside sex trade.

### Section 1: Anti-Trafficking initiatives of DMSC: The Context of Self-regulatory Boards

#### 1.1 Time Period:

Since 1997, the Organisation decided to develop strategies to solve the problem of underage girls trafficked into sex work sites and of unwilling women duped/coerced/forced into sex work. Informal rescue of underage girls who came into sex work sites by DMSC began in 1997. Over the next two years, the structure of DMSC Self-regulatory Boards (SRBs)

was formalised. This document describes experience of DMSC's anti-trafficking activities from the time period 1997 to 2005. The anti-trafficking activities of DMSC can be broadly divided into following phases:

- a) Phase-1 (1997-1998): Voicing concern about underage trafficking, informal approaches and advocacy and demand creation within the Organisation.
- b) Phase-2 (1998-1999): Piloting of formal Self-regulatory Boards in selected sex work sites in Kolkata and advocacy in forums outside the Organisation.
- c) Phase-3 (1999-2000): Demand generation and increasing reach of SRBs
- d) Phase-4 (2000-2005): Self-regulatory Boards established throughout sex work sites in West Bengal and formalising of activities and efforts.

#### 1.2 Need for Self-regulatory Boards of DMSC:

Movement and migration of human beings across national and international borders is not new. Globally, a large number of people migrate from their places of origin seeking better livelihood opportunities and for other reasons. People who migrate also do so because there is a demand for their labour in the destination countries/sites. Such (often illegal) labour are cheap as they are always at the mercy of their recruiters who can easily get them evicted if they are organised or protest against exploitative trade practices or demand proper

wages and/or benefits. As in other sectors, this demand for cheap labour from outside destination zone (be it cross-border or within-country) is present in the sex sector as well in addition, majority of labour that come in through irregular channels are people who come from low socio-economic backgrounds with little or no literacy and limited skills. Migration to unknown areas/countries by poor people, without proper travel permits or adequate knowledge is often with the help of unscrupulous persons or groups-who traffic unsuspecting people seeking better opportunities from sites of origin to destination sites. Although well known, this 'unofficial' migration of people has been going on for a long time. Recent evidence suggests that in response to the increased demand for labour, and for other causes including loss of traditional livelihoods due to globalisation, trafficking of human beings have intensified. Addressing this critical issue, in particular, to its impact on the sex sector, requires innovative approaches and strategies.

Ever since 1997, when DMSC activists articulated the issue at the First National Conference of Sex Workers, the Organisation has grappled with the problem of underage girls trafficked into sex work sites and of unwilling women duped/coerced/forced into sex work. DMSC is active in addressing and challenging the structural issues that frame the everyday reality of sexworkers lives as they relate to their material deprivation and social exclusion. From this standpoint, it stands against any form of exploitation and infringement of rights

of human beings that includes sexworkers and their children. DMSC is explicit, too, about its stand vis-a-vis forced or coerced labour in any form- if sexwork is work like any other, then it must be subject to certain norms and conditions- decided upon and enforced by the workers in the trade- that must be fulfilled before anyone can start as a sexworkers. Hence, DMSC is strictly against trafficking of minor girls and unwilling adult women into sex profession. It is also DSC's experience that Immoral Trafficking (Prevention) Act (ITPA), as enforced by police, is insufficient to combat this trafficking with any great success. Therefore, DMSC felt the need to constitute Self-regulatory Boards (SRBs) in the sex work sites. DMSC reasoned that these SRBs would serve as a double check to prevent entry of minor girls and unwilling adult women into sex trade, control the exploitative practices in the trade, regulate the rules and practices of the trade and institute social welfare measures for sexworkers and their children. DMSC also reasoned that illegal movement of people across international borders maybe prevented (to some extent) by enforcement agencies and border police, but intra-country movement cannot be prevented in this fashion. *Moreover, there was no existing effective mechanism to combat trafficking in destination (or sex work) sites and only a committed group of sexworkers could prevent entry of trafficked underage girls or unwilling women into sex trade.*

### 1.3 Objectives of DMSC Self-regulatory Boards are as follows:

**1.3.1 Preventing trafficking of women and under-age girls into sex work:** Sex workers are uniquely positioned as they live and work in sex work sites and are first to know when a minor girl has been brought into a brothel/sex work site; and the place/house/brothel where she is held. Consequently, they are in the best position to speak with the concerned brothel-manger and other stakeholders on prevention of minors from entering the trade. They are also specially placed to meet and interact with the trafficked girl, to win her confidence, to know her place of origin (address) and to discuss options open to her in a fair manner. Additionally, Self-regulatory Boards present in each sex work site are uniquely positioned to intervene in, and prevent trafficking into sex work, minor girls and unwilling women from international, national or local areas. The mechanism operative in the borders to prevent trafficking for sex-work intervenes only at international level (e.g., at the border between Bangladesh and India or Nepal and India). No such mechanism is either present or possible to prevent inter-district or inter state trafficking. However, as the self-regulatory boards are located in the sex work site, trafficking from district or state level can be monitored and entry of

underage girls and unwilling women into the grade can be prevented, irrespective of their place of origin.

**1.3.2 Changing inefficient laws controlling sex work:** The police use provisions of Immoral Traffic (Prevention) Act of the Government of India primarily to raid sex work sites indiscriminately and arrest or 'pick' women from streets and brothels on the charge that they are all 'minors'. Once these women are brought to the local police station, they are forced to pay for their release or are harassed further. Active and running Self-regulatory Boards prevent this from happening.

**1.3.3 Stopping exploitation in sex trade:** Self-regulatory Boards act as controlling bodies in sex work sites and put an end to exploitative practices that range from exploitative contractual agreements through violence and sexual exploitation by local men, power-brokers and hoodlums, to financial exploitation of sex workers.

**1.3.4 Carrying out social welfare measures for sexworkers and their children:** Self-regulatory boards have heterogeneous membership. Apart from members of DMSC, each board has the local councillor/ panchayat representative, local doctor, local lawyers (if available) and any other community leader/influencer who is will-

ing to participate. This group is therefore in a position to demand social welfare schemes, oversee government works to be undertaken in sex work sites and see that social welfare measures reach the target group including children and retired sex workers. The Board acts, as a pressure group, and is able to pressurise the government to allot and undertake various welfare and development activities for betterment of sexworkers and their children. These activities include adult literacy classes, children's education and handicrafts and skills training.

### Section 2: Newness/Originality of the Self-regulatory Boards of Durbar

The Self-regulatory Boards of DMSC are innovative in the field of anti-trafficking activities in the following ways.

**2.1 Partnership with Depts. Of health, Labour and Social Welfare, Govt. of West Bengal:** From its inception, SRBs have developed links with Depts. of health, Labour and Social Welfare of the Govt. of West Bengal. Advocacy among Ministers-in-Charge and Department Secretaries are done regularly. Of late interactions are going on with the State Government on registering a State-level Coordination Committee of SRBs to facilitate rehabilitation of women and girls rescued by DMSC and to ensure that they get another chance at changing their lives.

**2.2 Innovative public-private partnership:** Self-regulatory Boards are col-

laborative efforts of sex workers and people from the 'mainstream' society. Sixty per cent of the membership is from the sexworker community and comprise sexworkers, DMSC branch committee members and peer educators of different intervention projects. Forty percent of members of SRBs comprise local doctors, lawyers, councilors, Panchayat functionaries and local opinion leaders. Efforts are taken to include, wherever possible, Social Welfare Officers, State Women's Commission members, and other government functionaries.

**2.3** Focus of SRBs is to make recruitment of underage girls into sex trade unviable to brothel-managers and madams, Central strategy is therefore, rescue and rehabilitation of underage girls or unwilling women forced/coerced into sex work sites; SRBs concentrate their maximum energy and effort at identifying; rescuing and repatriating/rehabilitating girls/women trafficked into sex work. DMSC feels, the central focus should be on the trafficked girl/woman and efforts should be to rescue, repatriate and/or rehabilitate her. DMSC activists, being sexworkers and residing in sex work sites, are uniquely positioned to do this task successfully. In areas where SRBs are functioning, trafficking of girls/women for sex work ahs becomes unviable for traffickers and other trade controllers.

**2.4** Standardised guidelines, and history-taking and medical examination formats are used by SRBs for rescue, repatriation, rehabilitation and follow-up of women trafficked into sex trade.

**2.5** Networking and partnership with police: SRB members regularly liase with local police and continue advocacy of their activities with district and state police. In a number of sex work sites, local police entrust SRB with rescue/rehabilitation of underage girls.

**2.6** Maintenance of comprehensive documentation, including photographs of rescued persons by DMSC.

**2.7** Rehabilitation of rescued girls in state-approved shelters and maintaining contact with them to ensure overall development of rescued girls with the aim to improve their chances in life. This is the central post-rescue thrust area for DMSC- providing access to the rescued girls to non-formal education, vocational trainings and cultural activities. This is in contrast to rescue of underage girls by law enforcement agencies- whose work ends, for practical purposes, after the girls is rescued and put into a Govt. run rehabilitation home.

**2.8** Other efforts: To improve quality of lives of sexworkers and their children and to give rescued women/underage girls chances in life, DSC runs adult literacy classes; education centres for children/underage girls and provides skills training in handicrafts.

### Section 3: Implementation of Innovation

#### 3.1 Implementation of SRBs of DMSC a brief profile:

Year	Events
1997	<ul style="list-style-type: none"> <li>● First began in Tollygunj sex work site</li> <li>● First National Conference of Sexworkers organised by DMSC in November</li> </ul> <p><b>Processes, Activities and Challenges Overcome:</b></p> <ul style="list-style-type: none"> <li>● Actual event: An underage girl, who was trafficked and forced into sex trade in Tollygunj, was rescued by DMSC activists and repatriated home.</li> <li>● <b>Demand creation and advocacy within the organisation</b></li> <li>● Reasons for initiating formation of self-regulatory boards articulated by DMSC activists for the first time: <ul style="list-style-type: none"> <li>• To reduce police raids in sex work sites</li> <li>• To prevent trafficking and entry of underage girls and unwilling adults into sex trade</li> <li>• To control practices in sex trade as a professional body like the Bar Council or Indian medical Association</li> <li>• To provide welfare services to sexworkers and their children in sex work sites, viz., clean drinking water and sanitation, education, handicrafts training, etc.</li> </ul> </li> <li>● When decision to start SRBs was taken, resistance came from madams, local clubs and local police</li> <li>● Resistance was overcome through frequent meetings and discussions with madams, pimps and local clubs- it was pointed out that trafficking of underage girls into the site would lead to frequent raids by local police and consequently all stakeholders would suffer.</li> </ul>
1998	<ul style="list-style-type: none"> <li>● Piloting of SRB in 3 sex work sites in Kolkata</li> </ul>
1999	<ul style="list-style-type: none"> <li>● Demand to form SRBs came from other sex work sites in Kolkata.</li> <li>● SRBs expanded to other sex work sites in Kolkata-Khidirpore, Kalighat, Chetla, etc.</li> </ul>
2000	<ul style="list-style-type: none"> <li>● Support to form SRBs in district sex work sites (Durgapur and Asansol) provided by Action Aid.</li> </ul>
2002	<ul style="list-style-type: none"> <li>● SRBs created in all district intervention sites of DMSC</li> <li>● <b>A Rapid Assessment Survey</b> conducted in Changrabandha (Cooch</li> </ul>

	<p>Behar), Lalgola (Murshidabad), Hilly (Uttar Dinajpur) and Basirhat (North 24 Parganas). The survey was funded by UNDP and primarily addressed sites where informal cross-border movement between Bangladesh and India (West Bengal) occurred.</p> <ul style="list-style-type: none"> <li>● Meeting to address interventions around cross-border (Indo-Bangladesh) movement was organised in September at Dhaka. CARE-Bangladesh, DMSC, Bhoruka Welfare Trust and Bangladeshi organisations participated.</li> </ul>
	<p><b>Processes, Activities and Challenges Overcome:</b></p> <ul style="list-style-type: none"> <li>● Extension of Anti-trafficking activities of DMSC through collaborating with other organisations/NGOs who worked in cross-border transit sites between Bangladesh and India.</li> <li>● Result of the Rapid Assessment Survey funded by UNDP: <ul style="list-style-type: none"> <li>➤ Orientation Meetings with local clubs, NGOs, policy makers</li> <li>➤ Short-stay Home "Bhalobasha" established in Maldah</li> </ul> </li> </ul>
2004 & 2005	<ul style="list-style-type: none"> <li>● Funds received from Action Aid for all SRBs of DMSC</li> <li>● A total of 30 SRBs organised and run by DMSC work in sex work sites</li> <li>● Workshops held to plan formation of the Steering Committee of Self Regulatory Boards</li> <li>● Consultations held with Lawyers' Collective (New Delhi) and other organisations around the issue of law and trafficking in Feb-mar. This was part of a national debate around repeal/abrogation/change of the ITPA of Govt. of India.</li> <li>● Detailed ToR of SRB at state, district and local level prepared; guidelines for field workers and formats after rescue and repatriation of underage girls/unwilling women developed and implemented.</li> <li>● Bill &amp; Melinda Gates Foundation (US), requested information of anti-trafficking activities of DMSC, on how SRBs function and their impact on trafficking.</li> </ul>
	<p><b>Process, Activities and Challenges Overcome:</b></p> <ul style="list-style-type: none"> <li>● Sensitisation of SRB functioning done with sex workers and other stakeholders of sex trade.</li> <li>● Regular meetings of SRB initiated in sex work sites whenever a girl was rescued</li> </ul>

- DMSC team follow-up 10% of girls rescued- visiting them at homes.
- DMSC teams regularly visit government-approved shelter-homes and monitor conditions of rescued girls who have been placed there by their SRBs.

### 3.2 Perceived challenges and planned future activities:

#### Perceived Challenges:

- Repatriation/rehabilitation of foreign underage girls/women rescued through the SRBs
- Formal Registration of SRBs and of DMSC Short-Stay Home
- Development and registration of Central Steering Committee for SRB with participation of State-level government representatives.
- Re-entry of underage girls rescued by DMSC SRBs, into sex trade due to extreme poverty and discrimination the face once they are repatriated.

#### Future Plans:

- To work closely with Dept. of Home (Govt. of West Bengal), and Bangladesh High Commission to prevent cross-border trafficking.
- More advocacy initiative influencing Home and Labour Departments of Govt. of West Bengal.
- Intense advocacy of family members and neighbours of underage rescued girls to prevent re-entry into sex trade.
- Education centres and vocational centres in all sex work sites
- Training Institute approved by the Government and supervised by the SRB
- Home for elderly and retired sexworkers

### Section 4: Impact of Self-regulatory Boards of DMSC:

#### 4.1 Impact within sex work sites and within the Organisation

##### 4.1.1 Increasing numbers of sex work sites having SRBs:

Over the years, there has been a steady increase in DMSC's anti-trafficking activities through its SRBs. In 1997 there was only one informal anti-trafficking board in Tollygunj. By 2005, SRBs operate in 30 sex work sites throughout West Bengal- of which 8 are located in different sex work sites in Kolkata and the rest 22 are spread over different districts of West Bengal.

**4.1.2 Increasing success of SRBs in identifying, rescuing and rehabilitating underage girls/unwilling women trafficked into sex work:**

Table 1: year-wise break-up of girls/women rescued by SRBs of DMSC

No of Rescued Girls (June 1996 to June 2005)

Total Rescued 331		
Year	Total	%
1996	03	0.91
1997	02	0.60
1998	02	0.60
1999	01	0.30
2000	01	0.30
2001	31	9.37
2002	40	12.08
2003	61	18.43
2004	143	43.20
2005	47	14.21
<b>Total</b>	<b>331</b>	<b>100</b>

**4.1.3 Decrease in proportion of underage girls in sex work sites where DMSC works:**

Table 2: Significant decline in proportion of sexworker <18 years old in sex work sites where DMSC works

Year*	1992	1995	1998	2001	2005
Sample size surveyed	450	496	513	629	560
Proportion of sexworkers (in years)	22	22	27	28	28

\*Data from Sonagachi Project Baseline Survey (1992) and Follow-up Surveys (1995, 1998 and 2001, 2005)

**4.1.4 Increasing Median age of Sex Workers Surveyed over years in areas where DMSC works:**

Table 3: Literacy Centers and No. of Learners Enrolled

Category	Centres	No. Enrolled
Adult sexworkers	15	344
Children	17	722
<b>Total</b>	<b>32</b>	<b>1066</b>

Table 4: Outcomes of DMSC Education Scheme over years:

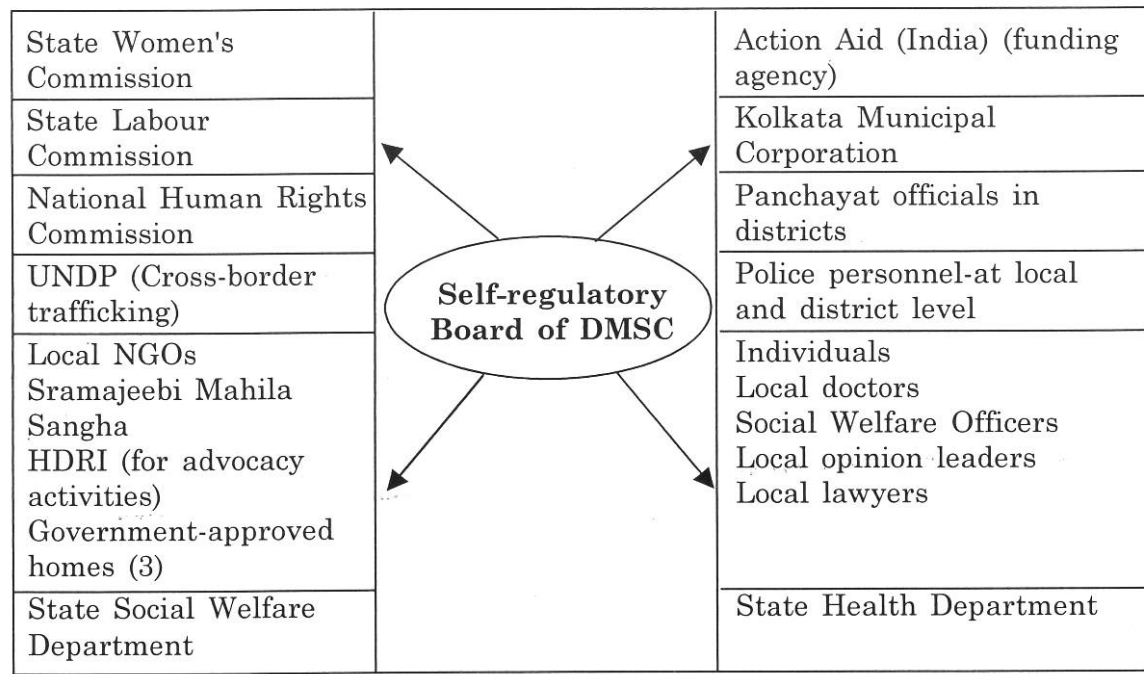
Category Adult sex workers		Category Children of Sex workers	
No Enrolled at "Korok" (Basic)	530	No. Enrolled at Durbar Centres	650
No. Graduated to "Digangana" (Advanced)	350	No. Admitted to Mainstream Schools successfully	500
<i>% Learners who advanced</i>	<i>66</i>	<i>% Learners who were mainstreadd</i>	<i>77</i>

Table 5: Outcomes of Durbar Vocational Training School ("Srishti") over the years

Courses	Total enrolment till date	No. Graduated	No. Self sufficient	% Graduated who are self-sufficient"
Handicrafts <sup>1</sup>	68	50	50	100
Beautician training	80	40	40	100
TV/Radio repairing	10	-	-	-
Electrician training	20	-	-	-
Visual literacy (photography) <sup>2</sup>	51	51	-	-

**4.2 Impact Outside the Organisation:**

**4.2.1 Linkages established between DMSC, state Government and civil society representatives including PRI through formation of SRBs:**



**4.2.2 Self-regulatory Boards gradually becoming an acceptable anti-trafficking strategy to prevent entry of underage girls and unwilling women in sex work sites:**

- DMSC is invited to share its experience of combating trafficking into sex work sites in different forums. Recently, the organisation was invited by West Bengal Women's Commission to share its anti-trafficking experiences at a two-day workshop held in the West Bengal State Legislative Assembly (2 and 3 Feb, 2005)
- Partnership with NGOs working at transit sites and at sites of origin developed by DMSC since 2002. DMSC has collaborated with Boruka Welfare Trust, UNDP and CARE-Bangladesh to address issues around cross-border trafficking. Out of this collaboration, SRBs were initiated in sex work sites close to Indo-Bangladesh border - at Changrabandha (Cooch Behar), Hilly (Dakshin Dinajpur) and Basirhat (North 24 Parganas).