

**“Bitches Killing The Nation”:
The State-Sponsored Scapegoating of Sex Workers for
HIV in Zambia 2004-2008**

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A Thesis
In
The Special Individualized Program

Presented in Partial Fulfillment of the Requirements
for the Degree of Master of Arts at
Concordia University
Montreal, Quebec, Canada

June 2010

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Your file *Votre référence*
ISBN: 978-0-494-71038-8
Our file *Notre référence*
ISBN: 978-0-494-71038-8

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ABSTRACT

“Bitches Killing the Nation”: The State-Sponsored Scapegoating of Sex Workers for HIV in Zambia 2004-2008

Anna-Louise Crago

Between 2004 and 2008, sex workers in Zambia experienced a period of severe state repression. This coincided with a number of government officials blaming sex workers for HIV and the passing of a national curfew law. Repression occurred through the detention and displacement of sex workers and was implemented through high levels of verbal, physical and sexual violence by police. The public scapegoating of sex workers for HIV by state-actors led to an increase in social repression by members of the public-at-large. This period of repression is analysed in relation to national and transnational policy on sex work and HIV. Zambia's policy approach to HIV and prostitution embodies many of the current UNAIDS directives and the policy orientation of PEPFAR (The United States President's Emergency Plan for AIDS Relief), of which it is a major recipient. As such, this research provides important findings of the impacts of such policy approaches that are of relevance far beyond the Zambian context.

This thesis offers a critical analysis of the state repression. It considers the official institutional record of HIV in Zambia through government and transnational policies. Qualitative interviews with sex workers provide an alternative account of HIV in Zambia in terms of its impact, as well as its relation to state policy.

During this period, sex workers simultaneously grappled with the toll of HIV on their community. Stigma and blame mediated their access to information, prevention, treatment and care. Sex workers resisted these conditions individually and collectively in a number of ways.

For all my "street-wise sisters".

*And most especially, for Bertha, who taught me the term, made this project possible, and
died part way through its completion, at the age of 27.*

Acknowledgements

I am grateful to Winstone Zulu and Paul Kasonkonoma for their trust, knowledge and help. Without them, this research would not have been possible. I also wish to thank Winstone's family, Bertha, Nalundu and the Banda household for their generosity and welcome.

Dr. Viviane Namaste, my principal supervisor, provided invaluable insight and patience. My other committee members, Dr. Peter Stoett and Prof. Kate Sterns, were supportive and flexible when it mattered the most. Dr. Frances Shaver and the late great Dr. Lillian Robinson extended help at a number of critical junctures. SSHRC, FQRSC and the Concordia Graduate Award provided crucial financial support.

Over the course of this masters', I was blessed with some rather spectacular bosses. Sue Simon's kindness and faith in my abilities has had a deep and lasting impact in my life. Materially and mentally, I would not have been able to embark on this project if it had not been for her. Rachel Thomas' generosity of spirit and clear thinking, Heather Doyle's keen intellect and great humour, and Aliya Rakhmetova's patience and commitment have made each of them an absolute privilege to work for. As colleagues go, Jayne Arnott forever raised the bar with her quick wit, passionate commitment and unparalleled ability to dodge elephants on highways at night. Joanne Csete, a colleague in the broader sense, has been an unflagging source of encouragement and perhaps unwittingly, a terrific mentor.

I have had the incredible opportunity of working for the past few years alongside the members of the Sex Workers' Rights Advocacy Network of Central Eastern Europe and Central Asia (CEE/CA) whose flare, determination and courage is a constant inspiration. Je suis également très remerciante envers les femmes de l'équipe de Stella, le centre par et pour les travailleuses du sexe à Montréal. Elles m'enseignent à foncer avec grâce, humour et dieu-sait, quelques jokes cochonnes: Merci à Diane, Émilie-Cloé, Stéf, Pascale, Mylie, Marilyne, Elsa, Sonia, Irène, Pierrette, Nadya, Ève et Véro.

I owe a tremendous amount to my family. My mother encouraged me to believe in my own research and invest in it. My father has been a steadily supportive presence. My older brother Jonathan, provided his sharp editor's eye and generously bailed me out more than once. He edited an earlier draft, submitted my missing transcripts when I was on another continent and wired me money when my bankcard didn't work. My sister-cousin Caitlin was a true delight to have out there. My little brother Peter is tout simplement le plus *saucy-wild* des *saucy-wild*. I was very touched by the generosity of my cousins Ann and Basil Sabbah and Julie Carey early on in the travels that led to this work.

Nancy Beaton has been a better friend than I could ever hope for. I am deeply grateful to her and to Brooke Morrison for the *muffaloes* and our many joyful adventures. For their kindness and support over the past few years, I am grateful to: Kate Lawrence, Sam

Singer, Ben Owens, Coral Short, Tif Flowers, Hugh Cawker, Jackie Campbell, Raffaella Diana, Aziz Choudry, Svea Rawe, the spectacular Miss Jennifer Clamen and the very precious Liz Hilton. I owe a very special thank you to Diane Mondor for her wise and caring presence in my life.

And lastly, I am deeply grateful to Katrina Peddle. In the words of Tina Turner, "You are simply the best!"

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Acronyms

AIDS: Acquired Immunodeficiency Syndrome

ABC: HIV-prevention programs based on abstinence, being faithful and condoms

ARV/ART: Anti-Retrovirals or Anti-Retroviral Treatment, treatment for HIV

GFATM: The Global Fund to Fight AIDS, Tuberculosis and Malaria

HIV: Human Immunodeficiency Virus

IOM: International Organization for Migration

IR: International Relations

PEPFAR: The United States President's Emergency Plan for AIDS Relief

STDs: Sexually Transmitted Diseases

STIs: Sexually Transmitted Infections

TB: Tuberculosis

TIP Report: The United States' Trafficking In Persons Report

UNAIDS: United Nations Joint Programme on HIV/AIDS

USAID: The United States Foreign Assistance Department

VCT: Voluntary Counseling and Testing for HIV

WHO: World Health Organization

Introduction

At its core, this thesis is about official and unofficial accounts of knowledge. It is an exploration of how the gaps and discrepancies between institutional records and accounts from marginalized communities illuminate some of the ways in which law and policy function.

My research began with the intention of examining sex workers' access to HIV-prevention commodities. Specifically, I was interested in how anti-prostitution policies in American foreign aid, and increasingly, in UNAIDS policy, were affecting sex workers' access to condoms in Sub-Saharan Africa. These two policy developments represented the reversal of hard-won gains in sex workers' right to access HIV-prevention and treatment. I wanted to know how this policy climate was affecting condom supplies for sex workers working in very high-risk environments. Furthermore, I wanted to understand how sex workers' experiences could teach us about the ways in which transnational and national policies collide and the resulting interventions into women's lives.

I chose to focus on Zambia chiefly because it was a large recipient of American aid for HIV programs and one of the countries that is the most highly affected by HIV in the region, and the world. In the end, sex workers' narratives relayed far more than information on condom access and this project expanded in breadth. It is still true to its

original project of examining how transnational sex work policies are being experienced by sex workers in Zambia, but now encompasses far more points of analysis.

I begin my thesis with a literature review that draws on many disciplines. In the first part of my literature review, I trace the emerging political science research on HIV from international relations and international political economy perspectives. I then look at how that body of work intersects with research on national and international sex work policy from the fields of political science, political philosophy, history, post-colonial studies and public health. In the second part, I look at the health literature on sex workers in Zambia alongside the cultural studies literature that takes a critical look at the construction of “the African prostitute” within medical research.

Chapter two is an overview of my methodology. I discuss how this research draws on feminist methodologies within International Relations (IR). I explain how I used a combination of documentary data sources and in-depth qualitative interviews with sex workers to contrast official and unofficial accounts of the same period.

I follow my methodology chapter with two more chapters intended to bring context to my research: chapter three, traces the historical roots of the governance of sex work in Zambia. A number of themes emerged across time. These included the role of transnational interests in the governance of sex work, the inter-play between state and non-state actors in implementing repression and the social control of sex workers particularly through their displacement or rehabilitation. The historical data allowed me to bring an added

dimension to my research by analysing whether current policies represented points of continuity or departure. Furthermore, such data allowed me to consider how my research can raise new questions about the historical information that exists. In particular, sex workers' accounts illustrate the violence with which state policies of displacement were frequently executed. This raises questions about whether similar violence underpinned previous policies based on controlling women's mobility and access to the public sphere.

In the final section of my history chapter (chapter three), I trace the institutional record of policy regarding sex work and the response to HIV from the advent of HIV in 1984 to the present. This element, allows me to contrast official narratives of the governance of sex work with women's narratives.

Following the historical work, chapter four provides an explanation of the current legal framework and the ways in which it shapes working conditions. It is meant to offer the reader necessary background information to interpret the data that follows.

The following three chapters are based primarily on sex workers' accounts. Chapter five documents a period of violent repression against sex workers between 2004 and 2008 that coincided with statements by government officials blaming sex workers for HIV, and the passing of a national curfew law. This period of repression is analysed in relation to national and transnational policy on sex work and HIV.

Chapter six explores how government policies of repression and scapegoating led to social repression against sex workers by non-state actors. It also documents the ways in which sex workers negotiated persecution and exclusion.

Finally, chapter seven records the impact of the HIV epidemic on sex workers. It examines the ways in which blame and stigma circumscribed women's access to information, prevention, treatment and care and the resulting toll on the community.

The data provided by sex workers in this thesis underscores the importance of including the narratives of members of marginalized communities in political science research. This project further demonstrates how qualitative research outside of centres of political power can offer important insight not only into processes of national governance, but of transnational governance as well. In the conclusion, I expand further on the contributions of this research to scientific literature.

CHAPTER 1

Literature Review

I International Relations, Sex Work and HIV Policy

The large majority of HIV research has concentrated on bio-medical research, epidemiological studies, social and behavioural research, and assessment of interventions and programs.ⁱ There is a narrow but emerging set of research that attempts to investigate HIV from an international relations or political economy perspective.ⁱⁱ So far much of this research has concentrated mostly on the political negotiations around access to generic essential medicines and health infrastructure in developing countriesⁱⁱⁱ although one recent study has looked at the political economy of preventing mother-to-child transmission.^{iv}

Another vein of literature has examined what role governance plays in the HIV epidemic. Farmer has posited, from a medical anthropology perspective, that large-infrastructure development projects like dams or mines contribute to displacement, mobility and increased rates of HIV.^v Parker makes links between the democratization process in Brazil and the country's responsiveness to the HIV epidemic and the emerging Brazilian HIV movement.^{vi} Patterson, for her part, has found that no consistent link exists between democratization of African states and commitment to addressing HIV.^{vii}

But what of research in the field of political science that examines HIV policy and aid money as a *form* of governance not just a product of it? Since the inception of the Global Fund Against Aids, Tuberculosis and Malaria (GFATM) and the American President's Emergency Plan for Aids Relief (PEPFAR), new research has emerged that seeks to document the ways such donors create new constellations of governance by sidelining or buttressing African states.^{viii} PEPFAR has meant a doubling of foreign aid for some countries and has led to the shifting of national health allocations to reflect American priorities such as sexual abstinence programs^{ix} or an emphasis on HIV-treatment as opposed to prevention.^x Such aid flows are credited with having a destabilizing impact on governance and state capacity to respond to HIV in many African states^{xi} as states become more accountable to donor agendas than to their electorate. However, de Waal points out that in certain cases, state power is strengthened, such as in the case of Museveni in Uganda, who has gained increasing international legitimacy for his hold on power by becoming the spokesperson for the successes of PEPFAR-identified strategies for combating HIV. His reliance on local councils to enforce abstinence and faithful dictates further reinvigorated his grasp on power nationally, while leading to vigilante justice against young women believed to have disobeyed.^{xii} Simultaneously, the growing influence of donors has created new openings for civil society to pressure compliance of the state with their objectives when they have a donor's ear.^{xiii}

However, little research from political science has examined the transnational political economy of access to HIV-prevention commodities, either for states or for populations or sub-populations on the ground. It has been largely literature from the

health sciences that have tackled some of these issues, for example, by documenting the gap between needed and available condoms in the third world.^{xiv} Another body of literature has examined the links between national and transnational drug policies and their effect on HIV-prevention for drug users.^{xv}

The usefulness of investigating the political dimensions of HIV responses becomes particularly salient when examining how policies and discourses around sex work dovetail or depart from HIV policy. Political science scholars have examined how discourses around prostitution and national and international prostitution policy contribute to nation building,^{xvi} national identity^{xvii} and international relations.^{xviii} In another vein of scholarship, a number of post-colonial theorists have examined historically the roles of public policy, economy and culture in creating sexuality and reproduction as sites of intervention necessary to building empire. They have examined the spread of prostitution policy from the metropole to the colonies as crucial to the organization of colonial projects.^{xix} This scholarship has included research into how prostitution has been regulated by independent states and colonies through medical controls^{xx} such as registration in order to conduct forced testing, forced treatment and detention in lock-hospitals, as well as social controls such as movement restrictions, incarceration, forced “rehabilitation” and religious indoctrination.^{xxi}

On a domestic scale, political theory texts have examined the ramifications of gendered protectionist policies. Wendy Brown has made the case that “sexual protections” from the state such as anti-prostitution laws, increase and perpetuate a

“modality of dependence and powerlessness.”^{xxii} Gail Pheterson has further analyzed how prostitution policy can function as a mechanism for patriarchal state control of women’s freedoms, sexuality and labour.^{xxiii} Larissa Sandy in her study of Cambodian sex workers has illustrated how labeling poor urban women who sell sex as “helpless victims” has given the state and other men and women (nationally and internationally) license to intervene coercively in their lives.^{xxiv}

Contemporary research on the politics of current prostitution policy has tended to be split between political science literature on the international relations (IR) implications of transnational policies, and health literature or grey literature from the human rights arena on the consequences of such policies for sex workers on the ground. In the first category, Soderlund^{xxv} and Kapur^{xxvi} have examined the discursive links between current American foreign policy on prostitution and American objectives in the war on terror. Berman has examined how European discourses on prostitution and trafficking have given renewed authority to EU states at a time of globalization and integration.^{xxvii} Jo Doezema, for her part, has investigated how Western feminists have used a representation of the powerless “third world prostitute” to advance their own orientalist political interests while denying sex workers the possibility of self-representation.^{xxviii}

In the second, health studies have examined how policies impact health and safety for sex workers. These have included documentation of increases in HIV-incidence among brothel-based sex workers in Bangladesh following a campaign of brothel-raids;^{xxix} a reduction in sex workers’ ability to enforce condom use after being displaced by

police repression in Canada;^{xxx} and increased HIV-risk for sex workers following the confiscation of condoms by police in South Africa.^{xxxi} Recent work however, has gone farther still and looked at state policies such as the criminalization of sex work as a barrier to HIV prevention, treatment and care in South Africa^{xxxii} and Canada.^{xxxiii} A recent cohort study of sex workers in Canada has also co-related the criminalization of sex work with increased violence against sex workers.^{xxxiv}

Emerging research has looked at the role and impact of current American prostitution policy internationally or its impact on global policies on sex workers. In 2003, due to the successful lobbying of a coalition between the Christian Right and anti-prostitution feminists,^{xxxv} the American government prohibited the allocation of USAID funds to organizations that “do not have a policy explicitly opposing prostitution and sex trafficking.”^{xxxvi} This is enforced through a contract provision colloquially known as the “anti-prostitution pledge”. In 2004, the American government attributed 15 billion dollars to fighting HIV globally with the restriction that a minimum of one-third of all funding for HIV- prevention go to the promotion of abstinence and fidelity (“AB”) and that no condom promotion can occur unless coupled with abstinence and fidelity promotion (“ABC”). Such policies also overlap with the United States State Department’s classification on an annual Trafficking in Persons (TIP) Report, with penalties reserved for those in the last tier.

In South-East Asia, research found that governments initiated raids to improve their TIP status and protect their US aid funding. In Bangladesh, US aid restrictions

resulted in the closing of drop-in centers for sex workers^{xxxvii}, the closure of a Doctors Without Borders health project previously funded through USAID in Cambodia,^{xxxviii} and health personnel censoring information given to male or trans sex workers.^{xxxix}

Due in large part to the United State's political weight, these policy trends have found their way into the UNAIDS Guidance Note on HIV and Sex Work^{xi} where the emphasis was put on preventing women from doing sex work rather than preventing HIV. This marked a dramatic policy shift from 2004^{xii} where international guidelines for preventing HIV among sex workers set out the three following objectives: "increased condom use and safer sex, increased sex worker involvement and control over working and social conditions and a reduced STI burden."^{xiii} Though criticized for endorsing mandatory-testing schemes such as the 100% Condom Use Program, the 2004 document was largely seen by sex worker groups as supporting sex workers to protect their health rather than instigating controls. The 2007 Guideline provided support for the provision of condoms and STI-testing for sex workers, but was overwhelmingly focused on reducing sex work by providing rehabilitation through alternative employment or micro-credit to sex workers and by an emphasis on large structural changes intended to prevent sex work through gender sensitivity trainings, girls' education, poverty eradication and legislation and policy to suppress the demand for sex work.^{xiii} A consortium of sex work and HIV groups protested this departure in a counter document that called for a return to much of the 2004 framework.^{xiv} Sex worker groups argued that while long-term gender and development goals are laudable, diverting the scarce funds that do exist to protect sex workers from HIV to such broad and long-term objectives, leaves one of the most affected populations side-lined.^{xiv}

The 2009 Guidance Note retained some changes but overall, its emphasis on measures to reduce sex work remained intact despite a lack of evidence for the proposed measures.^{xlvi} Indeed, a literature review of studies on the outcomes of rehabilitation programs to reduce sex work indicated no evidence for the effectiveness of such projects in reducing participation in the sex trade or, most importantly for a document whose primary concern was HIV, in reducing HIV.^{xlvii} The Guidance Note not only departed from evidence-based interventions, but its endorsement of “end-demand measures,” which are often repressive in application, put it in contradiction with the UNAIDS human rights guidelines’ support of the decriminalization of sex work.^{xlviii}

There is little research on the effects of transnational policies such as PEPFAR and the UNAIDS Guidance Note on working and living conditions for sex workers in Africa. Reports have surfaced that point to possible effects of such policies. Under pressure from USAID funders, an HIV prevention and treatment program for sex workers in South Africa began to offer vocational “rehabilitation” classes.^{xlix} Though there has been no explicit documented link to PEPFAR, in 2006 sex workers from 4 countries in West Africa reported that since PEPFAR’s implementation, they experienced condom shortages and stock-outs.¹ Sex workers from Ivory Coast told of condom shortages citywide resulting in condom price inflation in the market place and strategies they deployed to buy, trade, import or sell condoms as a result.^{li} In Nigeria, US funding was cut from initiatives that educated sex workers about safer sex and funding was channeled to faith-based groups to promote “abstinence and fidelity”, sometimes to sex workers.^{lii}

The funding of evangelical groups had broader consequences for sex workers though, according to Irene Ngabo of WHED, an NGO offering health services to sex workers in Nigeria:

The evangelical groups say that abstinence is the only way to prevent HIV transmission. They have always been known to condemn sex work and now they are being funded to do this so they are more aggressive and confrontational in their approach. They are on TV and radio and other public places condemning “pre-marital sex”, sex work, same sex practices.^{liii}

One study paid for by PEPFAR to look at access to prevention and treatment access for female sex workers in Botswana^{liv} offers insight into how these developments will not only affect policy, but potentially research conclusions as well. Sex workers interviewed in the study spoke of the increased autonomy and money they had from sex work. One third of sex workers interviewed held other jobs but preferred the greater income from sex work. They requested peer education, complained that they “feared taunts from health care providers if they took too many condoms”^{lv} and many reported using Vaseline as a lubricant.^{lvi} They echoed much of the appeal made by four sex workers to journalists and a City of Francistown council meeting in 2006 when they decried “poor service from hospitals and negligence by government to make their profession safe and acceptable.”^{lvii}

Botswana’s HIV prevalence rate is the second highest in the world at 24%.^{lviii} Yet, despite the lack of access to treatment and care expressed by sex workers, the report ended up recommending “building of self-esteem, providing relationship counseling, [*presumably since most sex workers cited a lack of a man to support them as a reason for*

entering the sex trade-note mine], teaching about sex and sexuality and increasing the daily wage” to prevent entry into sex work.^{lix} In fact these were often reported by the media as *proven* means to do so.^{lx} While the research did also call for condom distribution points and STI-testing facilities, the greatest emphasis was on preventing entry into prostitution and thus technically, on programs that targeted not sex workers but those at risk of becoming one (i.e. all poor women).^{lxi}

II The “African Sex Worker” in Health Research

The overwhelming majority of the available research on sex workers in Africa is from the health literature, and in particular HIV. These studies have mostly looked at sex workers’ HIV and STI rates; why, where and when sex workers sell sex; what it will take to stop them; and whether they use condoms with clients or loved ones.

Research on sex workers in Zambia has called for more training in peer counseling and information on STI treatment and screening.^{lxii} Due to sex workers’ low-rates of follow-up visits to clinics, one study also called for potential ‘tracking’ of sex workers as they migrate.^{lxiii} Other recommendations include legalization of sex work,^{lxiv} activities to reduce sex work and HIV-related stigma^{lxv} and increased “rehabilitation” programs promoting an alternative income.^{lxvi}

HIV-related stigma against sex workers is addressed in some studies, but generally as a psycho-social or cultural phenomenon, more than a political one.^{lxvii}

Merteni and Haller, for example describe how women who traded sex for fish hid this information from health professionals and church members, since they were held responsible for HIV in their area of Kafue Flats.^{lxviii} Agha co-relates stigma, harassment and “lack of protection available” to sex workers as playing a large role determining sex workers’ identities and further to this, their ability to use condoms: street-based sex workers in Lusaka, who had a professional identity as sex workers had an easier time persuading clients to use condoms compared to club-based sex workers, who chose to evade the stigma attached with such an identity.^{lxix}

An important adjunct to reading the health literature is the research from cultural studies that examines the social and political constructions of different scientific and medical discourses and interventions. In post-colonial studies, such work has examined historically how the study of sexually transmitted disease was originally geographically and racially mapped as the study of “tropical disease”.^{lxx} Cultural theorists of HIV have sought to unmask the ways in which both media and epidemiological constructions of HIV have constructed or latched on to pre-existing systems of social ordering through notions such as “risk groups”, “African Aids” and “promiscuity”.^{lxxi} They have looked at the stigma and medico-social control such categories can generate as well as the inevitable blind spots they can produce to individuals or groups affected by HIV.^{lxxii}

Much medical and sociological research, as well as policy, in Western countries has long been predicated on prostitutes as sites of pollution and disease.^{lxxiii} Allan Brandt explains how female sex workers in the West were historically scapegoated for epidemics

through a moral mapping of contagion: “An ‘innocent woman’ could only get infected by a sinful man. But the man could only get infected by a ‘fallen woman’...this uni-directional mode of transmission reflected prevailing attitudes rather than any bacteriologic reality.”^{lxxiv} At the very beginning of the HIV epidemic, prostitutes were again singled-out in connection to fears of contagion. Sex workers were for a while the only representation of women and HIV, often becoming, (occasionally with “mothers”, the two categories being considered as mutually exclusive) a proxy group for all women with HIV.^{lxxv} This bias has been translated into HIV research, where some studies of “prostitutes” have in fact “classified all sexually active single women as prostitutes.”^{lxxvi}

Amidst these representations, constructions appeared of the “African prostitute” as an omnipresent itinerant tropical vector or passive site of decay.^{lxxvii} A series on AIDS in Africa in the New York Times in 1990, for example, proclaimed that “Prostitution, always an engine of sexually transmitted diseases has played a major role in African AIDS.”^{lxxviii} African prostitutes have come to represent both “origin” and “cause” of HIV in Africa.^{lxxix} This schema stems from eugenics discourses from the turn of the century that blamed “bad women” for disease^{lxxx}. The same narrative has appeared not only in the media and public discourse, but has been overlaid onto a number of epidemiological models that seek to identify a “core risk group”, “a bridge group” and the “general population”. As a result, a great deal of current medical research has further entrenched the narrative, labeling African sex workers as “reservoirs of infection” and as a threat to “innocent” women and babies^{lxxxi}. Consequently, public health policy has focused on how to prevent sex workers from infecting their clients, with seemingly quite little

concern for the women themselves.^{lxxxii} In one such example, a 1989 paper titled “A Model of HIV Diffusion from a Single Source,” Steven Nahmias chose to focus on a hypothetical prostitute to create:

A preliminary mathematical model of transmission of the HIV virus from a sexually active prostitute to her clients, and the transmission from those clients to their sexual partners. The final line in the chain is the transmission from pregnant mothers (sic) to their fetuses.^{lxxxiii}

Similarly, studies in Ivory Coast and Zimbabwe have sought, through interviews with HIV+ men, to trace back how many had ever had contact with sex workers or were “certain” they had been infected by sex workers.^{lxxxiv} David Wilson, of the Global AIDS Monitoring and Evaluation Team, World Bank stated that 76% of male adult infections with HIV are linked to commercial sex workers in Ghana.^{lxxxv} Though it is true that a HIV transmission can take place at high levels within commercial sex, such a framing of the risks of transmission completely evacuates factors such as working conditions, availability and use of condoms and information for both sex workers and clients. Nonetheless, the narrative of sex workers as vectors and clients (and their “innocent wives and children”) as victims has retained much of its power and currency over the years. Elizabeth Pisani recounts how she participated in UNAIDS’ efforts to exploit the epidemiologically unfounded fears of sex workers infecting the wives and children of clients, to enlist governments in concentrated epidemics^{lxxxvi} to invest in HIV-prevention services for sex workers, they would otherwise not provide.^{lxxxvii} Melinda Gates, co-chair of the Gates Foundation, similarly urged participants at the opening ceremony of the 2006 International AIDS Conference in Toronto to picture the innocent mothers and

children being infected by sex workers (through clients) if they could not fathom the usefulness of helping sex workers themselves.^{lxxxviii}

Given the large number of public health authorities spreading such a message, it is unsurprising that many men would blame sex workers when they get HIV, rather than the fact that they had unprotected sex. This extends to many “good” women as well. Dladla et al. found that in South Africa, rural women who engaged in unprotected sex with a number of partners did not feel their behaviour put them at risk of HIV. Rather, they blamed sex workers who they suspected of having sex with their husbands for potentially putting them at risk of HIV.^{lxxxix}

The discourse blaming African sex workers for the HIV epidemic exists alongside constructions of “African sexuality” and “African Aids” as exotic phenomena due to “radical differences of physiology, behaviour, culture and morals” from the West.^{xc} Inherent to many constructions of HIV in Africa is the belief anchored in colonial narratives that all African women are sexually unrestrained and dangerous, essentially, akin to prostitutes.^{xcii} The “otherness” of sexuality, and in particular of sex work, in Africa continues to appear with little critique in many current discussions of African sex workers and HIV.

Recent research commissioned by UNAIDS and undertaken by J. ValdePitte et al. estimated the number of female sex workers in every continent.^{xciii} Such attempts are from the outset fraught with difficulties in circumscribing “prostitutes” or “sex workers” given

the temporary nature of some peoples' trading of sex or culturally divergent understandings of trading sex, and associated stigma or lack thereof. (For example, Janet Wojcicki has studied how women in South Africa identified less stigma associated with being perceived as exchanging something for sex, particularly for survival, than with the dangerous levels of stigma associated with being considered 'promiscuous' or a 'sex worker' who might enjoy sex.^{xciii})

Though in a caveat the authors expressed the difficulties in defining commercial sex and the rough nature of the estimates, their results found that Africa outstripped the rest of the world by a large margin, with 0.4%- to 4.3% of all women in urban areas being sex workers, and the proportion rising when transactional sex (informal exchanges for sex) was included.^{xciv} Based on the Valdepitte data, research emerged attributing the size of the prostitute population in Africa with responsibility both for the history and scope of the pandemic in Africa.^{xcv} In Talbott's words: "a working prostitute in an HIV/AIDS infected country has the same wanton disregard for human life (as a drunk driver)."^{xcvi} Despite J. Valdepitte et al.'s refutation of such use of their data and support for the success of condom-promotion in partnership with sex workers,^{xcvii} it is not surprising that that their data would be marshaled for such an argument.

Daniel Halperin has refuted the claim that sex work is much more prevalent in Africa asserting that no epidemiological or other literature supports the claim. He attributes the inflated numbers of sex workers in Africa in J. ValdePitte et al. to confusion of long-term intimate relationships that have a transactional element, such as gifts, with

prostitution.^{xcviii} This conflation is increasingly widespread. The term “transactional sex” has entered the literature, in reference to relationships wherein exchanges take place but has increasingly, been collapsed, confused or interchangeable with “commercial sex”.^{xcix} Similarly, a 2003 survey of Zambian sexual behaviour reported that 29% of women in Zambia were sex workers,^c because they had answered positively to a question that referred broadly to having traded sex for reward.

The conflation in some cases is intentional when it refers to a framework that sees all exchanges linked to sex (for money, for gifts, for food) as deriving from female powerlessness, economic deprivation (or occasionally greed). In many of these representations, women’s sexuality outside of marriage is widely construed as powerless (or occasionally dangerous) and exchanges for sex are essentially a “gender” issue. For example, in reference to Zambian and Kenyan women, Fleischman asserts that: “There are many reasons to consider women and girls in general to be a high-risk group. Indeed, the very social and economic vulnerabilities that drive women into risky situations also lead them into commercial sex work.”^{ci} The concept of “gender” as a risk category for HIV has led to HIV-prevention policies that increasingly take the shape of broad and far-reaching gender and development goals, with the underlying assumption that these will diminish the number of sexual partners women have and thus HIV. Micro-credit for women, employability training, access to school and legal reform are some of the programs being recommended *as* HIV-prevention projects.^{cii}

For sex workers, this merging of concepts has important consequences. The concept of “transactional” sex is divorced from a notion of work. Its collapsing with sex work under a “gender” rubric limits recognition of sex workers’ labour. Thus, in terms of HIV, it nullifies a recognition of labour conditions and of potential life-saving means to improve them. Daniel Halperin et al. al have also disputed the conflation by noting that the interventions necessary for reducing transmission in commercial sex are different than those “among people in Africa who consider themselves ‘lovers’, even if there is a transactional element to their romantic relationships.”^{ciii}

It is worth noting for a moment, that just as the premise of sex work as a manifestation of powerlessness is flawed, so too, has it been contested - or at the least complicated - for transactional sex. The concept of transactional sex emerged in American social work literature about HIV and was referred to as “survival sex”. It originally referenced the sexuality of Black women in the U.S. inner-city.^{civ} According to E.J. Sobo:

As Kline and colleagues suggest, much of the literature dealing with heterosexually transmitted HIV/AIDS among women describes a model in which impoverished minority women engage in unprotected sex for material gain or because of financial coercion and their lack of a developed sense of power or agency.^{cv}

Research on the political economy of unsafe sex for inner-city Black women found that most women were in fact the breadwinners who supported dependent male partners. Decisions to forego condom use were about social and emotional factors, “love not money”.^{cvi} It is worth questioning the emancipatory potential for women of a

framework very common in development literature that posits women's sexuality as inherently negative and a result of victimization.^{cvii} The ways in which this view has been applied to sex work is perhaps instructive.

The portrayal of sex work as both a manifestation and a cause of gender inequality has led to a number policy developments. Micro-loans and skills-training intended to "rehabilitate" sex workers are increasingly promoted as a response to HIV transmission in commercial sex settings^{cviii}. Beyond this, the concept that all women are "at-risk" of becoming sex workers has meant that programming that targets poor women, or women over-all with gender and development projects is being counted as "sex work and HIV" programming since it is assumed to prevent prostitution. These developments are evidenced in the recommendations of the PEPFAR-funded research in Botswana and the UNAIDS Guidance Note mentioned above.^{cxix} The conceptualizing of sex work as essentially a gender issue has also pushed the provision of appropriate services for male and trans sex workers far off the agenda.

Such policy trends have proven very popular with governments. Pisani posits that governments, particularly conservative ones, do their best to avoid providing health or any other services to sex workers for fear of upsetting the electorate.^{cx} While Pisani expresses her support for structural changes that improve women's access to justice, health and education, she questions at what cost they *take the place* of evidence-based HIV-programming, particularly for the most-affected, such as sex workers.^{cx1} Indeed, the premise that sex work must be reduced or stopped in the name of gender equality is at

odds with supporting sex workers in improving their conditions in sex work. A framework predicated on women's lack of agency in sex work precludes the implementation of many of the peer-driven HIV-prevention programs among sex workers in Africa that have proved successful in reducing HIV-incidence among sex workers.^{cxii}

And yet, even as many initiatives providing HIV-prevention information and tools to sex worker have been supplanted, some have remained. It is interesting to note that in the UNAIDS guidance note and PEPFAR funding, support for reducing sex work exists in tandem with support for interventions that protect the health of people who sell sex. This may be in part due to the accomplishments of the sex workers' rights movement in lobbying for the inclusion of sex workers' health as a priority. It may also be a reflection of the preoccupation with clients' health and limiting the toll of HIV on male labour forces - and only by default, sex workers' health.

The trends in UNAIDS and PEPFAR are coherent with a broader trend away from community-led or rights-based HIV initiatives that has coincided with an increasing push towards the bio-medicalization of HIV-prevention. This has added yet another tension to policy approaches to sex work.^{cxiii} Sex workers are necessary to the quest to find new prevention technologies. As women at "high-risk" for sero-conversion, they have been important candidates on which to test the efficacy of HIV vaccines, microbicides or medical prophylactics. The important influence of the lobby for new technologies, supported by the pharmaceutical industry, has forced UNAIDS to maintain an interesting double-speak. On the one hand, they have acknowledged sex workers and sex work

communities as important partners when it comes to the development of new prevention technologies^{cxiv} while simultaneously advancing a guidance note that sees sex work as something that must be reduced, if not eliminated.^{cxv}

In this chapter we reviewed the scientific literature on the role of HIV policy and prostitution policy in international relations. In particular, we looked at two current transnational policy documents, the UN Guidance Note on HIV and Sex Work and the PEPFAR Reauthorization Act, and how these epitomize a policy shift from trying to fight HIV, to trying to fight sex work. We then looked at the health literature on sex work in Zambia and critiqued narratives that have emerged within some health literature that portray African sex workers as “vectors” of infection or as both a cause and symptom of women’s inequality. Finally, we examined how some of these narratives have found their way into policy in both the UN Guidance Note and PEPFAR. My research adds to the existing scientific literature by exploring the impact of such policy-approaches on sex workers by privileging sex workers’ own accounts. In the next chapter, I outline the methodology I used to do so.

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^{xcix} See for exmple: A. Côté et al., “Transactional sex is the driving force in the dynamics of HIV in Accra, Ghana,” *AIDS* 18 (2004:917–25). I define “sex work” or “commercial sex” as a formal negotiation between parties for the exchange of sexual services against remuneration, be this in money or in goods. In my definition, this applies, whether it is undertaken for ‘survival’ needs or also provides discretionary income (similarly to the way that farming is considered work be it subsistence farming or farming for

accumulation of profit). I find the term 'transactional sex' to be a frustrating taxonomy since it has now been used to include vastly different dynamics ranging from intimate relationships with a transfer of wealth, to commercial sex by women for 'survival needs' to instances I would consider sexual harassment or coercion (i.e. sex with a teacher to get a passing grade). I feel that the term 'transactional relationship' is more a more illustrative designation for relationships (including marriage) that may have a transactional component but where there is not formal, mutually agreed upon and negotiated exchange for sexual services.

^c Central Statistical Office, "Zambian Sexual Behaviour Survey," (Lusaka: Government of Zambia: 2003). In contrast, VanDepitte found that scarcely 2% of women in the mining town of Ndola, Zambia were sex workers.

^{ci} Janet Fleischman, "Strengthening HIV/AIDS programmes for women: Lessons for U.S policy from Zambia and Kenya" (Washington: CSIS Task Force on AIDS, CSIS, 2005), 4.

^{cii} Ibid. Also, see earlier incarnations of this view in "Poverty and Gender Inequality Cause Aids" in World Bank, *Confronting AIDS: Public Priorities in a Global Epidemic*, (Oxford: Oxford University Press: 1997).

^{ciii} Daniel Halperin, "Male Circumcision Matters (as One Part of an Integrated HIV Prevention Response)," PlosOne.

<http://www.plosone.org/annotation/listThread.action?inReplyTo=info%3Adoi%2F10.1371%2Fannotation%2F723&root=info%3Adoi%2F10.1371%2Fannotation%2F723.html>

^{civ} "Survival sex" is used in Western Canada by agencies dealing with street prostitutes and is defined as "the lack of opportunity to consistently exercise the right to refuse sex in dangerous circumstances. This lack of opportunity is primarily due to poverty, unsafe working conditions, health and addictions issues, exploitation, predatory violence, and the "criminalization" of negotiation." Prostitution Alternative Counselling Education (PACE), www.pace-society.ca/

^{cv} E.J. Sobo, "Love, Jealousy and Unsafe Sex among Inner-City Women" in *The Political Economy of Aids*, ed. M. Singer, M. ed (Amityville: Baywood Press, 1998): 100.

^{cvi} Ibid.

^{cvi} Susan Jolly, "Why the Development Industry Should Get Over its Obsession With Bad Sex and Start to Think About Pleasure," (IDS Working Paper 283, Brighton Institute of Development Studies, 2007).

^{cvi} UNAIDS, Guidance Note on HIV and Sex Work (Geneva: UNAIDS, 2007).

^{cix} A. Sharma et. al., *Multiple Settings, Partners and Lifestyles among Women in Sex Work in Botswana* (Seattle: International Training and Education Center for Health (I-TECH) University of Washington, 2007) and UNAIDS, Guidance Note on HIV and Sex Work, *ibid*.

^{cx} Elizabeth Pisani, *The Wisdom of Whores: Bureaucrats, Brothels and the business of AIDS* (New York: W.W.Norton, 2008).

^{cx} Ibid.

^{cxii} See for example for Africa: M. Laga et al., "Condom promotion, sexually transmitted diseases treatment, and declining incidence of HIV-1 infection in female Zairian sex workers," *Lancet* 344 (1994):246-8; P.D. Ghys et al., "Increase in condom use and decline in HIV and sexually transmitted diseases among female sex workers in Abidjan, Cote

d'Ivoire, 1991-1998," *AIDS* 16 (2002):251-258; M. Alary et al., "Decline in the prevalence of HIV and sexually transmitted diseases among female sex workers in Cotonou, Benin, 1993-1999," *AIDS* 16 (2002):463-470. For an example of the strong evidence for peer-driven projects on a collective empowerment model see: B.T. Swendeman et al., "Evidence for the efficacy of the Sonogachi project in improving condom use and community empowerment among sex workers: results from a cohort-control study." (Paper presented at International Aids Conference, Bangkok, Thailand, July 11-16).

^{cxiii} Dan Allman, email to author, July 17th, 2007.

^{cxiv} UNAIDS/WHO, "Ethical Considerations in Biomedical HIV Prevention Trials: Guidance Document"(Geneva: UNAIDS/WHO, 2007); UNAIDS, "Good Participatory Practice for Biomedical HIV Prevention Trials", (Geneva: UNAIDS, 2007).

Prepublication version at:

http://data.unaids.org/pub/Manual/2007/jc1364_good_participatory_guidelines_en.pdf

^{cxv} I am indebted to Dan Allman for this analysis.

CHAPTER 2

Methodology

I IR and Feminist Methodologies

This research project seeks to contribute to the growing field of feminist International Relations (IR). The dominant perspective in traditional IR has been that studying local phenomena can reveal little in terms of explanations of IR and emphasis has been placed instead on studying state actors and international bodies.ⁱ In response, a body of feminist IR work has pointed out how women's lives are often excluded from this type of inquiry. This scholarship seeks to reinsert women in IR discussion.ⁱⁱ

Feminist research has posited that studying the lives of ordinary women can help explain the actions of states in international relations by, for example, explaining their role in reproductive labour to support workers and soldiers.ⁱⁱⁱ Other feminist interventions in IR have sought to highlight how global processes have impacted women, their disproportionate representation amongst the world's poor, or increasingly, in precarious industrial labour.^{iv} In challenging IR to take women's lives into account, feminists have called for further exploration of qualitative methodologies that are often marginalized in political science research.^v These contributions to the literature, however, have remained somewhat marginal in that they have not engaged with the centres of power and political decision-making that are most commonly IR concerns.^{vi}

V. Spike Peterson, advances however, that feminist interventions in IR have the potential to be disruptive of andro-centric bias within IR when they examine how gender is deployed as a tool of governance rather than just adding women's lives to the equation.^{vii} It is in this sense that Marchand's interviews with Latin American women are presented as producing new knowledge on the processes of development that upsets hegemonic discourses.^{viii} My research is situated in this vein, in that I have not chosen to interview sex workers simply to bring attention to their lives and labour as the forgotten "products" of political economies or as "the human face" of international relations. Rather, I have chosen to draw on a framing similar to that of Carolyn Nordstrom in her ethnography of wartime economies in Mozambique.^{ix} Qualitative research allowed Nordstrom to unveil Mozambicans' stories of mounting casualties and failed troop demobilization processes that disrupted official state and International Organization narratives of "peace time". This disjuncture illuminated the political interests behind official designations of "peace":

A vast international machinery, a global bureaucracy surrounds a peace process. ...The diplomats and their governments, the United Nations, the INGOs, and the host countries become interwoven players in the peace process...International trade agreements are forged on the declared stability. A political culture emerges, a political economy forms. With this vast peace-brokering network in place, how do you admit it isn't working?^x

Nordstrom breaks with much of traditional IR by researching outside of the centres of power to reflect back on how power is being articulated and produced. In a similar way, I have chosen to approach sex workers as a community with prized vantage point on the interstices of certain forms of local and transnational governance and as

active negotiators of these dynamics.^{xi} This is the first point of departure for my inquiry. If in Enloe's words, it is an exercise of power to make sure that people on the "bottom rung" of International Relations are not heard,^{xii} my work figures among those that question what is at stake in this exercise of power. What do sex workers' accounts and community history tell us about local, national and transnational responses to the HIV crisis in one of the countries with the highest rates of HIV seroprevalence? How do sex workers' perspectives illuminate the way gender is governed? What can sex workers tell us about which narratives of sex work and HIV are privileged and why?

I believe that the questions I have raised are best answered by contrasting sex workers' own narratives of the political processes governing sex work to official descriptions of these laws and policies. As Luise White notes in her historical reconstruction of the political economy of sex work in Kenya, which uses both colonial sources and interviews with 70 sex workers: "As African historians are beginning to privilege participants' accounts over those of colonial rulers, the contradictions and ambiguities of colonial policies have become apparent."^{xiii}

Likewise, more recently, sex workers' voices have illuminated the wide gap between not just health policies and their implementation, but the diversity of epidemiological interpretations that are drawn from such situations. Thailand's "100% Condom" Policies (100% CUP) which dictated police-enforced mandatory STI-testing and treatment for sex workers as well as closure of brothels where sex workers tested positive for STIs, are credited with having dramatically reduced STI and HIV rates

among sex workers in the mid-1990s.^{xiv} In contrast, the Thai sex worker group Empower offers a markedly different narrative of the period:

The statistics are completely skewed because they tested in brothels, but facing punishment, brothel-managers started hiding or firing HIV+ or symptomatic sex workers. In 1992 – 1997 many many women with STI symptoms and Empower were desperately trying to get treatment. I remember taking one woman to a fucking vet for antibiotic injection. Then we all died... we died and died and died and the working conditions changed and guess what... the stats [on prevalence rates] went down!!!!??? Actually rates DID NOT JUST GO DOWN...it was when working conditions in the brothels improved that rates of infection among workers became more even across the board. In the beginning around 80% of brothel workers had HIV and 10% of Bar Workers. After changes to the working conditions it evened out at around 5-8%. But for us, [during the time the statistics claim a decrease] it meant when we went to visit any brothel eight out of ten of our friends had HIV, and when we went to visit any given bar one out of the ten friends had HIV. 100% CUP is not a dry academic statistical debate for sex workers.^{xv}

My hope is that the documentation of sex workers' voices in the Zambian context will not only disrupt or complicate medical and state discourses on prostitution and HIV, but will also question the primacy and authority of such discourses as sites of knowledge.

Harding has advanced that if women are to dislodge the masculinist epistemological biases, they must go beyond being “objects” or “victims” in research, to becoming “subjects”.^{xvi} Richardson has similarly lauded the power of recording collective narratives of oppressed groups for social transformation.^{xvii} Sex workers' narratives offer the chance to document the oft-buried histories of how individuals and communities subvert, acquiesce to, ignore, or revolt against the governance of their lives, labour, bodies, and sexuality. In her study of colonial lock-hospitals in Madras India in

the 1870s, Hodges brought to light documented instances of sex workers escaping the hospitals, sneaking in lovers, and manufacturing pretence so they could be incarcerated, and thus fed, in times of famine.^{xviii} In recent years, official histories of health policies for prostitutes in England and Mexico at the turn of the 20th century have been contrasted to documented accounts of sex workers fleeing the lock-hospitals and reformatories those policies created.^{xix}

The second aim of my work is to document the narratives of a time when a subjugated community of women was both the target of multiple state and non-state interventions and living through - or dying in the midst of - an epidemic that engulfed this community. Given this documentary concern as an aim in itself, this thesis includes extensive quotes from sex workers' stories.

II Country

I wanted to examine the impact of HIV and HIV-related policies from sex workers' perspective in areas where the epidemic is considered to be generalized. In generalized epidemics, female sex workers are no longer considered a "risk group" since the general population is considered to be "at risk". Female sex workers, however, are still seen in many countries with generalized epidemics as totems for measuring new trends in the direction and growth of the epidemic^{xx} or as actors driving the epidemic.^{xxi} In order to examine the tensions at play in these public health constructions, and their

ramifications, I chose to carry out my research in Southern Africa, the region by far the hardest hit by the HIV epidemic.

In recent years, Zambia has had recent large influx of aid money for HIV. In 2004 and 2005, Zambia received 196.7 million US dollars from PEPFAR^{xxii} and 117.1 million US dollars from GFATM.^{xxiii xxiv} Zambia thus receives, after Uganda, the second most amount of aid from the two combined sources and the fifth highest amount of money per HIV+ person in the country.^{xxv} Of the money allocated to Zambia by PEPFAR in 2005, 47 % of funds for prevention of sexual transmission were allotted to promoting abstinence and fidelity alone.^{xxvi} The country is therefore a useful place to examine how donor policies have affected the state and governance locally, nationally and transnationally.

The HIV epidemic is considered “generalized” in Zambia (general prevalence is estimated at 16.5%.^{xxvii} Sex workers in Zambia have a reported HIV-prevalence rate of 68%.^{xxviii} Examining their working conditions and access to HIV-prevention commodities and treatment is thus of significant importance. Furthermore, the devastation of this community has not been documented in any depth or analyzed in an academic context.

Another point of interest for me was that sex workers in Zambia and Lusaka in particular seemed to be actively negotiating and contesting the conditions of their labour and health even though they have no formal association or organization. *Agence France Presse* reported that in 1999 sex workers’ attempted to form a trade union but “were

thwarted by both the government and existing trade unions.^{xxxix} A number of sex workers publicly intervened in 2002 to denounce arrest, police rape and extortion.^{xxx} In the same year, sex workers protested in favour of legalization of sex work^{xxxi} and 30 HIV+ sex workers demanded ART treatment from the government.^{xxxii} Zambia is thus an interesting place to document sex workers' own responses to the effects of relevant policies on their lives.

III Defining Sex Workers

Defining and delimiting “sex workers” creates many challenges. Cultural studies of sexuality have problematized the idea of sexual identities as being fixed and transcultural.^{xxxiii} Ethnographies of different forms of sex work, from brothels to sexual services provided in homes, have shown the many variations in forms of sexual exchange, sometimes coupled with other labour such as caring work and food preparation.^{xxxiv} Histories of sex work in certain locales show how sex workers have often shifted the parameters of their work to provide shorter or longer periods of service,^{xxxv} or include food or lodging as payment, in order to offer competitive services and protect their earnings.^{xxxvi} Such shifting boundaries can make precise delineation and identification of sex work complex.

Though grey areas abound in all cultures, it is a mistake to assume that no concepts of sexual labour and of those who perform it exist. The recent tendency to blur

different forms of sex work into broader categories of relationships that include sexual exchange (under the rubric of “transactional sex” or “survival sex”) presents an important problem for studying sex work. Much like feminist models that put sex work on a spectrum of exchange with marriage and arguably illuminate gendered and/or economic disparities, these frameworks do little to shed light on the working conditions, political and legal frameworks, and social environments of people who are selling sexual services for a living.

The purpose of this project is not only to examine the reasons for such omissions, but also to counter them with sex workers’ narratives. As a result, this study focuses on women who are doing formal sex work: that is to say, those engaged in actively and explicitly negotiating the sale of sexual services (setting price or terms of exchange, location, conditions). I have interviewed women working in a number of different settings. Generally however, these are settings known as “prostitution areas.” I have chosen to use the terminology of sex work to describe and highlight a particular kind of labour and the context in which it is performed, not to impose a cultural identity.

Sex work is performed by individuals of different sexes and gender identities. Male and trans women sex workers are in most instances, consistently ignored and erased from discussions of sex work, particularly in the policy and public health sphere.^{xxxvii} In some instances, for male sex workers in particular, this invisibility can shield them from some of the worst repression, though certainly not always. However, it also means their rights to health, justice, and decent working conditions are further marginalized within

the public agenda, even as their communities are often attacked or disproportionately affected by crises like HIV.^{xxxviii}

Much work needs to be done to document the experiences of male and trans sex workers, particularly in relation to HIV. Unfortunately, to include these populations and their experiences would have been overly ambitious for this project. Thus I have focused on (non-trans) female sex workers. In the rest of this thesis, I often use “sex workers” when referring specifically to female sex workers.

All the sex workers I interviewed were over 18 though some began selling sex when they were younger.^{xxxix} Though in a few instances I have included references to the experiences of women of repression and state response when they were adolescents, this research focuses primarily on the labour experiences of adults selling sex. The particular issues facing children and youth are beyond the scope of this research.

IV The Politics of Contact: Reaching Sex Workers

The location of my research was largely the result of where I had contacts. Having never been to Zambia before conducting my research this presented quite a challenge. Two organizations exist in the capital city of Lusaka working primarily with sex workers: MAPODE (Movement of Community Action for the Prevention and Protection of Youth against Poverty, Destitution, Diseases and Exploitation) and Tasintha (“We have changed.”). Both are rehabilitation projects, whose primary aim is to get

female sex workers to stop doing sex work through various means. They also run a number of parallel programs: MAPODE, for instance, runs abstinence-promotion programs as well as programs for homeless children.^{xi} Both MAPODE and Tasintha take the stance that sex work is inherently morally wrong and dangerous. Complementing this belief is the shared position that most women engaged in sex work are victims. MAPODE makes little differentiation between children trading sex, older youth, and adult sex workers in its research.^{xii}

I chose not to contact sex workers through these organizations because I felt doing so could create obstacles to the research project at hand. Sex workers may not have been at full liberty to disclose current or recent experiences of sex work without fearing jeopardizing their access to services such as skills-training and living allowances, meant to have “rehabilitated” and “changed” them. Research conducted in Namibia documented such a dynamic: sex workers at the rehabilitation centre spoke of having quit sex work and how bad it was, however, when interviewed subsequently while working on the street, they spoke of their desire for safe and legal hotels to work in and of the need for police enforcement against attackers.^{xiii}

“Rehabilitation” projects such as those in Lusaka often promote a prescribed narrative of women’s descent into sex work and redemption. The concept of “community” among sex workers is often seen as suspect and a dangerous influence. I worried that sex workers would feel compelled to fit their stories into this narrative at the cost of engaging with questions about working conditions and community histories.

Furthermore, if I was perceived as associated with the project, sex workers might assume I engaged in similar judgment of their work. This might prevent sex workers not associated with the group from speaking to me freely.

MAPODE has also previously collaborated on research with a leading activist against sex work.^{xliii} Anti-prostitution groups have used this research to mobilize public opinion against sex work by presenting it as inherently harmful and sex workers as psychologically and physically “damaged”.^{xliiv} Given my recognition of sex work as work rather than exploitation, it is questionable whether either group would have been interested in collaborating with me anyhow.

Another actor in contact with many sex workers is Corridors of Hope (COH), a large multi-national project doing HIV-prevention in the region. They primarily target migrant workers such as truck drivers and sex workers, although they also have secondary mandates such as prevention projects to reduce transactional and inter-generational sex in communities where they work. These aims are reflective of their USAID funding base, which also dictates that a certain amount of money must be allocated to the promotion of abstinence and faithfulness promotion. COH is permitted to work with sex workers under PEPFAR regulations, as long as they follow the anti-prostitution pledge. In practice, this has meant that groups do not promote legal reform, the recognition of sex workers as workers, sex workers’ self-organization, or other rights-based agendas.

I contacted COH with the hopes of working through them to contact sex workers. I hoped that sex workers would be able, among other things, to illuminate how COH promoted its different aims. Though they seemed eager to collaborate, I encountered a more subtle resistance when they wouldn't allow me to do my research without going through governmental approval procedures for medical research. Such a process was designed primarily to evaluate clinical trials, it could have taken upwards of 3 months and cost between 500\$ and 800\$ US. I was prepared to do so if necessary, but I was assured by an official in the government research office that no such procedure was required for my social science research project.^{xlv} Nonetheless, COH refused to collaborate with me lacking such approval. The incident can be interpreted variously. It could be a sign of COH's rigorous approach to research ethics; of their inability to conceive of interviewing sex workers about HIV outside of medical research; of our divergent views of sex work; or it may speak to the contentiousness of studying sex workers from a rights-based perspective for a group that adheres to anti-prostitution funding restrictions.

In the end my work as an activist in the HIV movement was what allowed me to make contact with sex workers in Lusaka and Kabwe through two key-informants on the ground, both of whom are active in a movement for people living with HIV in Zambia, Winstone Zulu in Kabwe and Paul Kasankonoma in Lusaka.

In Kabwe, Winstone is involved with Kara Counseling which runs Health Triangle, a very small HIV-prevention initiative for sex workers that exists only very

intermittently depending on funding. The project had run a weekend-long workshop on HIV-prevention and treatment, shared information on HIV with sex workers through two part-time outreach workers and set up a way for sex workers to access non-judgmental HIV-testing.

One of the outreach workers for the project, a former sex worker, housed me and put me in contact with sex workers in Kabwe by going to their homes and other sex work venues. Recruitment operated at first through snowball sampling: sex workers contacted and brought along other sex workers. This was an early revelation of the tight network among many sex workers. Since I am white, my presence in the sex worker sites was quickly noticed and other sex workers began approaching me independently and volunteering to be interviewed. As word got out during my stay, some sex workers requested that I return to sites to interview them. This networking extended to Lusaka. I believe that my presence in sex work venues allowed me to overcome the potential biases in using services as a means of contacting sex workers, such as the over-representation of women in crisis or precarious situations and those present in recruitment through snowballing, such as the over-representation of sex workers from one particular social background.^{xlvi}

The outreach worker and former sex worker from Kabwe was the daughter of a successful businesswoman from Lusaka. Her mother's family welcomed me in their home there. She occasionally frequented bars and was friends with an older generation of sex workers with whom she put me in contact. Paul Kasankonoma further put me in

contact with two sex workers who he knew through HIV-support groups and activities in Lusaka.

In many ways Kabwe and Lusaka provided important counterpoints for this research. Kabwe, a small city situated at the entrance of the Copperbelt region, and Lusaka, the capital city, presented different and valuable vantage points for assessing how different forms of governance take place.

V The Process: Sites & Interviews

My research was based on long semi-structured qualitative interviews with sex workers. These interviews were triangulated with interviews of key informants active in HIV policy circles and with an examination of certain policy documents such as the Zambia HIV strategic plan, the UNAIDS Advisory Note on Sex Work and HIV and the PEPFAR Authorization. However, this work is primarily based on sex workers' history and analysis of events.

I spent two weeks in Zambia: ten days in Kabwe and four days in Lusaka. I interviewed 20 sex workers in Kabwe. In Kabwe, I visited three general areas: downtown, Site and Service Settlement and a bar area in another settlement on the outskirts of town that was temporarily closed down. Downtown, I spent time in two sex work bars (Chez N'Temba and Big Bite), in the bar of a lodge and on the main street

where sex work took place. In Site and Service, I visited the local *shabeen* (informal bar or beer garden) and conducted interviews in the home of three sex workers and their parents. Downtown, I conducted interviews in the bar of the lodge. Further interviews were conducted at the home of a friend and relative of sex workers.

I interviewed three key informants from Kabwe: Winstone Zulu of Kara Counselling; Precious,^{xlvii} a former sex worker who occasionally did outreach with Health Triangle; and Jennifer,^{xlviii} a social worker who had worked with sex workers in Lusaka and Kabwe. I also held informal discussions with a taxi driver, a soldier and an abstinence-and-faithfulness counsellor.

In Lusaka, I interviewed 6 sex workers at the home of a friend of theirs and at my lodge. I spoke with two key informants: Ms. Malala Mwendela of the Zambia AIDS Law Research and Advocacy Network (ZARAN) and Paul Kasankonoma of Treatment Advocacy and Literacy Campaign (TALC) Zambia.

I have provided a list of all the sex workers interviewed along with their ages, places of work, years during which they have worked and contextual notes in Appendix I. The interview guide I used is included in Appendix II.

VI Ethical Considerations

I recorded 26 interviews for which I obtained both an oral and written consent. For those I did not record, I got written consent. I left a written copy of the consent with the interviewee but given low rates of literacy, I ensured that there was a thorough oral consent process for each interview. I ensured that the interviewee was fluent enough in English to fully understand the consent form or received full translation to Bemba provided by Precious' sister.^{xlix} Because I was introduced to some sex workers through someone from an HIV-prevention project, I was sure to emphasize that refusing to participate in my research would in no way compromise their access to receiving services.

I warned the interviewees when questions could be difficult to answer or emotionally stressful. I ensured that I had contacts for local sources of support in the case that a sex worker was distraught following or during the interview, though this did not prove necessary.

On a number of occasions, sex workers' responses indicated to me that they were misinformed or lacking information on high-risk behaviours. These included reporting using two condoms, using Vaseline as a lubricant or not taking ART because they wished to continue drinking regularly or having the occasional beer. I did not correct sex workers in the interview. When sex workers asked me, I gave them the information I knew and referred them to local HIV resources. If I was not asked, following the interview, I would mention what information I knew and refer them to the expertise of local HIV resources. I also brought the areas of lack of information to the attention of local HIV services.

Sex workers had the opportunity to inform me if they wished to use a pseudonym or have their names appear in the research.

I paid the sex workers 20 000 Kwacha to participate. This is quite a high amount of money. It is equivalent to sex with one client for the mid-range of sex workers, which is perhaps not accidental, since the interviews were about 45 minutes to an hour long and corresponded to an average amount of time with a client. In Kabwe, the sex workers had previously participated in a daylong training organized by a Belgian funder with Health Triangle and this is how much they had been paid. As a result, the former sex worker who was my gateway to the other sex workers informed me that the sex workers would not participate for any less. This incident was revealing to me and is discussed later in the thesis.

Research results will be provided through a printed copy and an audio recording of the final research to the groups and individuals who assisted in accessing sex workers.

VII Limitations

Time limited me in a number of crucial ways. My stay in Zambia was brief and as a result I did not have the time to make myself known and trusted within the sex worker community. This undoubtedly limited my access to information about the very sensitive

topics we were discussing. Most sex workers' encounters with anyone interested in sex work from outside of the sex work world was with people intent on saving them from themselves or harshly condemning them, particularly in the case of many richer women. As a white foreign woman, at first a number of sex workers associated me with Aid agencies or churches. In my first interviews, I received a number of rote and depersonalized answers from sex workers condemning sex work and sometimes themselves as wrong, while insisting on the fact that their poverty meant they didn't have a choice. Conditions were presented as static and unchanging. I sensed women feeling defensive.

After a few interviews, I began explaining in more depth why I was doing the research. I positioned myself as a sex worker in Canada who had chosen to do this research because I believed in the value of sex workers' experience, expertise, and communal knowledge for understanding what is happening politically in a society. Although I was still positioned as an outsider, divulging this information built a level of trust.

Some sex workers also came to trust me over time because they saw that I was not afraid to be perceived as one of them by drinking beer with them, hanging out at the sex work bars, dancing with them late at night or by answering questions openly about my own sex work experience. It was nonetheless crucial not to be considered as competition, and so my polite repudiation of different customers' advances made me trustworthy in this regard. The fact that I never corrected customers' impressions that I was there

working or showed any discomfort at being approached by them also served to build trust.

With a few exceptions, the later interviews differed a great deal. Sex workers opened up and provided much more nuance and detail about their working conditions, their strategies, and their perception of changes around them.

This is similar to the findings of Larissa Sandy. In her interviews with Cambodian sex workers, some women began by emphasizing that they “had no option.”^{li} However, more detailed accounts of their lives revealed many instances of agency, negotiation, and weighing of options. While recognizing that many women had constrained choices, Sandy concludes that claiming a victim identity was a strategy sex workers used to avoid blame and to distance themselves from the stigma associated with prostitution.^{lii} This is a conclusion shared by Laura Agustin in her interviews with Latin American sex workers^{lii} and Catherine Campbell in her interviews with South African sex workers.^{liii}

Chapkis chooses to frame such narratives as circumscribed by the ability or not to speak freely in different contexts.^{liv} For Agustin, withholding information on one’s life or framing it the way you believe the researchers want you to, is not just a product of limitations but can be seen as a form of strategic negotiation. As Agustin writes:

To put it another way, keeping secrets may help sex workers gain independence or control over projects to help them. Talking about sexual risks with people who think it’s wrong to ever take any risks may cause them to treat you as irresponsible. Admitting the desire to stay in sex work after getting out of the clutches of abusers can render you ineligible for victim-protection programmes.

The best policy may be to omit certain information from responses or to put on the expected front.^{lv}

As themes began to emerge in the research, the prevalence in Zambia of a discourse of rehabilitation and the need to be conversant in it in order to access certain services or evade persecution became clear. In this light, my first interviews with sex workers who withheld information or framed their experiences in particular recurrent ways reveals their perception and active negotiation of a political economy which functions depending on the identity of the interviewer. The nature of those first interviews thus appeared to hinge largely on their impressions of who they thought I was. This contributed to my understanding and analysis of how rehabilitation featured in sex workers' lives.

VIII Analysis

My interviews were open-ended and covered three main topics: sex workers' experience of working and living conditions (covering structures of work, varying levels of discrimination or acceptance, violence, pay, access to prevention information and materials); sex workers' experience of regulation of sex work (laws, policies and their application); sex workers' experience of the impact of HIV on sex workers and their community.

I indexed the interviews according to themes that emerged inductively.^{lvi} I then created a master-index of subjects that emerged.^{lvii} Although I had framed my research

question as looking at the politics of access to HIV prevention, much of the data that emerged was about the violent repression of sex workers and how HIV policy had mediated this repression for many sex workers.

Three key themes emerged from the data: the blaming of sex workers for HIV and subsequent violent repression by state actors; the simultaneous violent repression by non-state actors; and the advent of HIV, in particular its large toll on sex worker communities and the role stigma played in controlling their access to prevention and treatment.

Each theme contained a subset of several themes that emerged as I reviewed transcripts of the data. In the case of the first significant theme, the sub-themes included sex workers' experiences of how state repression was articulated and their analyses of why repressive policies came to be. For the second theme, the sub-themes comprised sex workers' experiences of persecution and exclusion by actors in their community, the consequences for their working and living conditions as well as the strategies they deployed for negotiating, resisting or acquiescing to them. Finally, for the third theme, the sub-themes consisted of sex workers' accounts of the evolving impact of HIV on the sex worker community from deaths to how stigma mediated access to information, prevention, treatment and care. The full list of themes and sub-themes is included in Appendix III. I then cross-referenced these sub-themes across 2000-2008 in order to identify changes in women's working and living conditions that coincided with changes at the micro, meso and macro policy levels.^{lviii} I supplemented my field data with documentary data (both historical and current) to achieve this.

Change was a lens through which to situate my analysis not just of women's narratives but of their place within feminist IR. In my analysis of sex workers' stories, I have sought to understand the themes not simply as social or psychosocial phenomena or as health phenomena in the case of the last one, but as political phenomena. In so doing, I have used a combination of inductively derived theory and deductively derived theory.^{lix} I have sought to offer explanations of why sex workers were scapegoated and analyse links between the changes in their working and living conditions and larger political processes. To do so, I begin in the next chapter, by exploring the historical roots of both the transnational and national regulation of sex work in Zambia.

ⁱ J. Ann Tickner, *Gendering World Politics: Issues and Approaches in the Post-Cold War Era* (New York: Columbia University Press, 2001), p. 140.

ⁱⁱ V. Spike Peterson, "Feminist Theories Within, Invisible To, and Beyond IR," *Brown Journal of World Affairs* 10, no.2 (Winter/Spring 2004): p.35.

ⁱⁱⁱ See Cynthia Enloe, *Maneuvers: The International Politics of Militarizing Women's Lives* (Berkeley: University of California Press, 2000); Cynthia Enloe, *Bananas, Beaches and Bases: Making Feminist Sense of International Politics* (Berkeley: University of California Press, 1989).

^{iv} V. Spike Peterson, "Feminist Theories Within, Invisible To, and Beyond IR," *Brown Journal of World Affairs* 10, no.2 (Winter/Spring 2004): p.40.

^v J. Ann Tickner, *Gendering World Politics: Issues and Approaches in the Post-Cold War Era* (New York: Columbia University Press, 2001), p.140.

^{vi} V. Spike Peterson, "Feminist Theories Within, Invisible To, and Beyond IR," *Brown Journal of World Affairs* 10, no.2 (Winter/Spring 2004): p.40.

^{vii} Ibid.

^{viii} Marianne H. Marchand, "Latin American Women Speak on Development: Are we Listening?" in *Feminism/Postmodernism/Development*, ed. Marianne H. Marchand and Jane Parpart (London: Routledge, 1995), p.70.

^{ix} Carolyn Nordstrom, *Shadows of War: Violence, Power, and International Profiteering in the Twenty-First Century*, California Series in Public Anthropology, 10 (Berkeley; Los Angeles; London: University of California Press, 2004), p.170.

^x Ibid.

^{xi} This separates this work from a large traditions of social science, and in particular, sociological work on sex work that has focused on sex workers as "deviants" and their life stories as key to understanding *why* they trade sex and categorized them accordingly with answers ranging from physiological deformations, previous trauma, lack of moral guidance, economic desperation. Much of such work has as its premise that trading sex is "problematic" and seeks to remediate the problem by targeting its sources, be they in the sex workers themselves or outside forces.

^{xii} Cynthia Enloe, "Margins, Silences and Bottom Rungs: How to Overcome the Underestimation of Power in the Study of International Relations," in *International Theory: Positivism and Beyond*, ed. Steve Smith, Ken Booth and Marysia Zalewski (Cambridge: Cambridge University Press, 1993), p.187.

^{xiii} Luise White, *The Comforts of Home: Prostitution in Colonial Nairobi* (Chicago:University of Chicago Press, 1990): 28.

^{xiv} UNAIDS, *The Thailand 100% Condom Program: A Case Study* (Geneva : UNAIDS, 2000).

^{xv} Personal communication, Liz Cameron, Empower, October 12, 2006.

^{xvi} Sandra Harding, "Is There a Feminist Method?" in *Feminist Methodology* edited by Sandra Harding, Bloomington : Indiana University Press, 1987) p.8.

^{xvii} Laurel Richardson, "Narrative and Sociology" in *Representation in Ethnography*, ed. John Van Maanen (Thousand Oaks, California: Sage, 1995), p.199-200.

^{xviii} Sarah Hodges, "'Looting' the Lock Hospital in Colonial Madras during the Famine Years of the 1870s," *Social History of Medicine* 18, no. 3 (2005): p. 379.

^{xix} Walkowitz, Judith. *Prostitution and Victorian Society: Women, Class and the State* (London: Cambridge University Press, 1998), p. 167; p. 315 ; Katherine Elaine Bliss, *Compromised Positions: Prostitution, Public Health, and Gender Politics in Revolutionary Mexico City* (Pennsylvania: Pennsylvania State University Press, 2001), p.119.

^{xx} World Health Organization and Joint United Nations Program on HIV/AIDS, "Second Generation Surveillance for HIV: the Next Decade," (Geneva: WHO and UNAIDS, 2000).

^{xxi} See Alcorn, K. "Watch your epidemic closely warn World Bank scientist, or risk pointless prevention work." *AidsMap News*, July 04, 2007.

^{xxii} PEPFAR (the United States President's Emergency Plan for AIDS Relief) was instituted in 2003 under George W. Bush. Between 2003 and 2008, PEPFAR allocated over 15 billion dollars (USD) to fighting HIV primarily in 15 focus countries that had the highest HIV-prevalence. (<http://www.pepfar.gov/>)

^{xxiii} The GFATM (The Global Fund to Fight AIDS, Tuberculosis and Malaria) was initiated by the United Nations and funded by the G8 countries. It initiated grants in 2002

in support of national health mechanisms initiatives addressing AIDS, Tuberculosis and Malaria. (<http://www.theglobalfund.org/>).

^{xxiv} Amy S. Patterson, *The Politics of AIDS in Africa*, Challenge and Change in African Politics, (Boulder, Colorado; London: Lynne Rienner Publishers, 2006), p.165.

^{xxv} Amy S. Patterson, *The Politics of AIDS in Africa*, Challenge and Change in African Politics, (Boulder, Colorado; London: Lynne Rienner Publishers, 2006), p.165.

^{xxvi} Center for Health and Gender Equity. "Risk and Reality: PEPFAR Fact Sheets," (Takoma Park MD: Center for Health and Gender Equity, 2006).

^{xxvii} UNAIDS/WHO, *Report on the Global AIDS Epidemic* (Geneva: UNAIDS/World Health Organization, May 2006).

^{xxviii} Ibid.

^{xxix} "Lusaka: Zambian police crack down on prostitution in tourist town," *Agence France-Presse*, December 7, 2000. <http://www.aegis.com/news/afp/2000/AF001279.html> (Accessed March 10, 2010)

^{xxx} "Sex workers "raped" by Zambian Police", *BBC News Online*, April 23, 2002 <http://news.bbc.co.uk/2/low/africa/1946107.stm> (Accessed March 10, 2010) ; Zarina Geloo, "Zambia: Sex Workers Fed Up with Sharing their Loot with Police," *Inter Press Service*, April 30, 2002. <http://ww4.aegis.org/news/ips/2002/IP020419.html> (Accessed March 10, 2010).

^{xxxi} "Prostitutes Want Legalization," *News 24*, April 28, 2002.

http://www.news24.com/News24/Archive/0,,2-1659_1174402,00.html (Accessed March 10, 2010).

^{xxxii} "40 Sex Workers Lobby For Anti-Retroviral Drugs," *The Post Newspaper*, August 13, 2002.

^{xxxiii} Dennis Altman, "Sexuality and Globalization", *Sexuality Research and Social Policy* 1, no. 1: (January 2004)pp. 63–68; Richard G. Parker, Gilbert Herdt and Manuel Carballo, "Sexual Culture, HIV Transmission, and AIDS Research," *Journal of Sex Research* 28 no. 1 (February 1991): pp. 77–98.

^{xxxiv} Laura Agustin, "The Cultural Study of Commercial Sex," *Sexualities* 8, no. 5 (2005): 618.

^{xxxv} These could vary from a matter of minutes, to negotiated services over many nights.

^{xxxvi} Luise White, *The Comforts of Home: Prostitution in Colonial Nairobi* (Chicago:University of Chicago Press, 1990), 84.

^{xxxvii} Anna-Louise Crago, *Our Lives Matter: Sex Workers Unite for Health and Rights* (New York: Open Society Institute, 2008), 66.

^{xxxviii} Anna-Louise Crago, *Arrest the Violence: Human Rights Abuse Against Sex Workers in 11 Countries in Central Eastern Europe and Central Asia* (Budapest, Hungary: SWAN, 2009), 28; Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009), 35.

^{xxxix} All sex workers told me they were 18. A key informant confirmed this with the exception of one young woman she believed to be 17.

^{xl} See MAPODE Web Site <http://www.mapode.freewebspages.org/> (Accessed March 10, 2010)

^{xli} Ibid.

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- ^{xlii} Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009), 70-72.
- ^{xliii} M. Farley, I. Baral, M. Kiremire and U. Sezgin. "Prostitution in Five Countries: Violence and Post-Traumatic Stress Disorder (South Africa, Thailand, Turkey, USA, Zambia)." *Feminism & Psychology* 8, no. 4 (1998): 405-426.
- ^{xliv} See Melissa Farley's web page: <http://www.prostitutionresearch.com/>.
- ^{xlv} Telephone conversation with Mr. Jere, Office of the Director of Research at the University of Zambia (site of ethics approval for research in Zambia), March 2, 2008. I also received Concordia University ethics approval for my research prior to my field work in 2008.
- ^{xlvi} Frances M. Shaver, "Sex Work Research: Methodological and Ethical Challenges," *Journal of Interpersonal Violence* 20, no. 3 (2005): 296-319.
- ^{xlvii} Precious requested anonymity.
- ^{xlviii} Jennifer requested anonymity.
- ^{xlix} I cannot disclose her identity here without compromising Precious' request for anonymity.
- ¹ Larissa Sandy, "Just Choices: Representations of Choice and Coercion in Sex Work in Cambodia," *The Australian Journal of Anthropology* 18 no. 2: 203.
- ⁱⁱ Ibid.
- ⁱⁱⁱ Laura Agustín, "Alternate Ethics, or: Telling Lies to Researchers," *Research for Sex Work* 7 (June 2004): 6-7.
- ⁱⁱⁱⁱ Catherine Campbell, *Letting Them Die: Why HIV/AIDS Intervention Programmes Fail* (Oxford: James Currey; Bloomington Indiana: Indiana University Press, 2003), 74.
- ^{liv} Wendy Chapkis, *Live Sex Acts: Women Performing Erotic Labour* (New York: Routledge, 1997), 7-8.
- ^{lv} Laura Agustín, "Alternate Ethics, or: Telling Lies to Researchers," *Research for Sex Work* 7 (June 2004): p.7.
- ^{lvi} Jodi Aronson, "A Pragmatic View of Thematic Analysis," *The Qualitative Report* 2 no. 1 (Spring 1994). (<http://www.nova.edu/ssss/QR/BackIssues/QR2-1/aronson.html>)
- ^{lvii} Valerie Raleigh Yow, *Recording Oral History: A Guide for the Humanities and Social Sciences* (London: Alta Mira Press, 2005), 282.
- ^{lviii} E. Balka, "The Invisibility of the Every Day: New Technology and Women's Work," in *Sex and Money: Feminism and Political Economy in the Media* edited by E.R. Meehan and E. Riordan (Minneapolis: University of Minnesota Press, 2002), 60-74.
- ^{lix} Pranee Liamputtong Rice and Douglas Ezzy, *Qualitative Research Methods : A Health Focus* (Oxford: Oxford University Press, 1999), 191.

CHAPTER 3

A History of The Governance of Sex Work in Zambia

The history of measures to control sex work in Zambia provides an important context for my thesis. A number of themes that emerge in the historical research reoccur throughout my data. These themes include: how the regulation of sex work has fluctuated in connection with national and transnational power contests; how it has been enacted by both state and non-state actors; how sex work has largely been governed through social controls, particularly through the repression of women's mobility but also through "civilizing" or "modernizing" projects that delineate proper female behaviour. The tracing of these dynamics historically has allowed me to analyze how current regulation is situated as a point of continuity or disrapture from previous forms of governance of sex work.

This chapter is based on documentary data both historical and current. There are few academic sources on the history of measures controlling sex work in Zambia, and what was Northern Rhodesia prior to 1964. As a result, the historical review relies heavily on the work of a few authors.

The final historical section of the chapter brings us from the advent of HIV in 1984 to the present period. It provides a primarily institutional record of sex work policy during the period and in particular, the way in which it intersected with HIV policy. This

piece provides an important backdrop against which to contrast sex workers' own accounts of sex work and HIV policies during the same period.

I Late 1800s to 1924 : Colonialism and Victorian Narratives of Prostitution

Different interpretations exist of the levels of power and autonomy that women exerted within different African societies prior to colonialism.ⁱ British colonialism is held to have reified women's subordination as it existed and introduced new forms of domination,ⁱⁱ all of which had a direct impact on women who traded sex. Amidst various new segregations, the British entrenched a public/private dichotomy modeled on Victorian ideals that excluded women from the public sphere.ⁱⁱⁱ Beyond this, the British model of governance through "indirect rule" in Africa gave elder male tribal leaders increased power over women's movement and autonomy.^{iv} This indigenous gender hierarchy was then captured and codified in customary law.^v

In contrast to how little its policies discussed women's lives, colonial governance through administrators and missionaries was organized around multiple interventions into women's labour and sexuality.^{vi} For the British, Africans' sexuality was considered in and of itself to be "uncivilized": dangerous and unrestrained. This was a gendered narrative that borrowed from British eugenics, where women were held accountable for degeneration and disease.^{vii} According to Jeater:

While both men and women in Africa were perceived as dangerously sexual, Victorian sexuality found women's sexuality impossible to accept. In Africa, the openness towards female sexuality seemed almost to be threatening apocalypse. In the early decades of the twentieth century, whole groups of Africans were thought to be facing "extinction" as a result of "premature debauchery".^{viii}

These narratives held sway over how prostitution policy was applied and its links to public health policy for venereal disease. In the metropole, the British had begun through the Contagious Disease (CD) Acts to forcibly test women who were arrested on suspicion of selling sex for venereal disease and to detain them in lock-hospitals to undergo treatment.^{ix} These policies focused on "the act" of prostitution in order to constitute the category of "the prostitute", however, these British policies were applied differently abroad. In India, for example, women who sold sex were forced to be registered as prostitutes with colonial authorities and to submit to regular tests.^x As Laura Briggs explains: "English women [who sold sex] were treated as involved in a criminal act, where Indian women [who sold sex] were understood as belonging to a class, of being (ontologically and essentially) prostitutes."^{xi}

This discourse went one step further in Africa where all women, regardless of whether they sold sex, were seen as suspect of prostitution. However, the British policy of controlling prostitution medically was difficult to implement when one considered all women to be potential "prostitutes". In one instance, officials in the British Dominion of South-West Africa (currently Namibia) passed a regulation to enforce routine forced testing of venereal disease in the city of Windhoek on all Native women who were not legally married or not living with their husband. Violent rioting by Herero women halted the measure.^{xii}

Even when applied on a smaller scale, regimes of forced medical testing required large structural interventions. British colonial management in Africa chose to evade these. Though Britain introduced the CD acts throughout its colonies between 1840 and 1917,^{xiii} they were not enacted in Eastern and Southern Africa with the exceptions of the Baganda in the Uganda protectorate and the Cape Colony.^{xiv} In Southern Rhodesia, (to the south of present day Zambia, then Northern Rhodesia), Chief Medical Officer Andrew Fleming, attempted in 1919 to open special wards to treat prostitutes but these did not come to fruition.^{xv}

The British justified the costs inherent in the system of forced venereal disease testing as a protectionary measure against syphilis for British troops abroad^{xvi} or as a “*cordon sanitaire*” to protect imperial holdings of key importance.^{xvii} In Africa, without a troop presence on the same scale, the same incentive didn’t exist. Forced, albeit free, medical treatment of venereal disease for all prostitutes in Africa was also ruled out due to cost.^{xviii} The majority of hospitals in Southern Africa were mission hospitals and this presented yet another issue. A number of them were vocally opposed to providing treatment for syphilis to Africans under the pretense that it would legitimize Africans’ sinful ways.^{xix}

In general, prostitution in Africa was more often controlled socially than medically. Furthermore, indirect rule meant that the regulation of women’s behaviour had largely been delegated to native men.^{xx} As such, prostitution policy in sub-Saharan Africa

was an exception in the British Empire. The discourse on sexuality that underpinned the measures in Africa were however a consistent extension of the Victorian eugenics-inspired beliefs. It is perhaps not surprising then that the figure of the “prostitute” as a symbol of degeneracy so prevalent in Europe began to emerge in Southern Africa as well as a scapegoat for venereal disease. While white prostitutes, particularly those who slept with Black men, were accused of weakening the empire and causing “black peril”, a term for the alleged dangerous outcomes of Black men and White women having sex, Black prostitutes were held responsible for epidemics of syphilis and gonorrhoea. In Northern Rhodesia, colonial administrators blamed women in towns for causing STD epidemics through prostitution, based on what many now consider poorly analyzed data.^{xxi} Colonial officials referred to these women as “alien native prostitutes” or “traveling prostitutes”.^{xxii} This narrative has proven to have incredible endurance. The emphasis on prostitutes’ mobility is recurrent and situates their perceived transgression as relating to space and to autonomy. The women migrated from rural areas to towns and settlements with pools of male labour, sometimes within their traditional ethnic perimeters, sometimes beyond these.^{xxiii} Indeed, selling sex was both a possible goal of travel and a crucial means for women’s ability to move around. Women’s crossing of colonial lines of both racial and ethnic segregation and of behaviour lines by selling sex, is what renders them “alien” and intruders in colonial narratives. It prefigures their spatial removal and control as means of restoring order and combating the ills for which they are blamed.

Southern Rhodesia provides an interesting example of how even medical administrators for the colony employed social measures to control African women selling

sex. In his book, Jock McCulloch details how in 1917, the Chief Medical Officer Andrew Fleming forced suspected prostitutes to give their names, those of their birth villages and tribal leaders, their marital status and the length of time they had left the village and he deported women back into the custody of elders who could be trusted to control them.^{xxiv} The establishment of systems of control over women's movement also proved useful for the sporadic instances when colonial officials did attempt to intervene medically. In the 1920s, preoccupied with the threat of syphilis, Fleming enlisted the colonial administration and mining companies to track down prostitutes for testing and treatment.^{xxv} The women's perspectives on such measures are not documented, though they seem to have developed means for escaping some of the controls imposed on them. A 1927 report by Fleming decried how women successfully evaded authorities by repeatedly changing names.^{xxvi}

Burgeoning colonial cities became the staging ground for many such attempts to exert control over women selling sex. In most of Southern and Eastern Africa, cities emerged during the colonial period and served as home bases for colonial administration.^{xxvii} Originally, the city was primarily the home of white colonials, with Africans, primarily men, only permitted to enter as labourers, often temporarily since: "Managers wanted a rapidly circulating labour force to reduce social costs, reinforce tribal authority and forestall the social risks of proletarianization."^{xxviii}

Such policies were also inherently about maintaining racial segregation.^{xxix} In the first part of the 20th century, colonial cities in fact also maintained a certain gender

segregation since only a very small number of women were allowed to inhabit them.^{xxx}

This would change in the 1920s.

II 1924-1945 The Opening of the Copper Mines and the Emergence of Cities

In 1924, the British opened the first large copper mines in present day Zambia. A number of cities began to emerge in what was then Northern Rhodesia around the newly opened mines as a result of the influx of administrators and male labourers. Most mines provided lodging for male workers only. However, those in Kabwe and Lusaka provided lodging for wives, hoping to attract men in spite of low wages and to prevent workers from straying to nearby communities to buy sex.^{xxxii} As a result, women who were married to men working in the mines were granted permission to go to the city and visit their husbands, and in the cases of mixed-gender lodging, to stay.^{xxxiii}

Beyond joining their husbands, many women wished to go to colonial cities to escape patriarchal control or to find better conditions or autonomy through work, primarily as small traders and sex workers.^{xxxiiii} Between 1890 and 1900, women in Northern Rhodesia had substantial mobility, but this changed as controls on women were concretized and coordinated.^{xxxv} In the 1920s, any woman wishing to travel outside of her village needed rare and difficultly obtained authorization papers from tribal leaders.^{xxxvi} To enforce the policy, the government set up permanent roadblocks along

main roads and women lacking official approval to travel were detained and sent back.^{xxxvi} In the Copperbelt, truck drivers caught giving lifts to women faced arrest. Some women were able to advantage of truck drivers who were in ignorance of the law, convincing drivers to let them embark or disembark out of sight of checkpoints.^{xxxvii}

Independent women became adept at negotiating the severe restrictions imposed on them. They developed “mine marriages” in order to stay in the city.^{xxxviii} These were the exchange of sexual and domestic services made with miners in exchange for being able to live with them as their “wives” for periods ranging from one night to years. If a woman was dissatisfied, she could negotiate a new deal by changing “husbands” who were often encountered at beer halls.^{xxxix}

Though some colonial officials occasionally tolerated prostitution, they were concerned, along with missionaries and mine management, about the immorality of selling sex. Tribal elders were enlisted to police women’s behaviour in the city and repatriation was deemed the answer to the problem of prostitution.^{xi} Women who sold sex were by no means the only targets of repatriation. On the Copperbelt, many people considered all unmarried or divorced women as improper. Furthermore, “bad behaviour” on the part of any woman could result in her repatriation by tribal elders.^{xii} By 1938, Urban Native Courts encouraged mining police to find all the single women, fine, and deport them.^{xiii} Women who had been married three times were considered to be prostitutes and punished with permanent banishment from the entire Copperbelt region.^{xliii}

It was women's independence broadly, which could include but also went beyond the selling of sex, that was deemed immoral particularly when it provided no direct benefit to men. In this regard, prostitutes were not alone in being attacked. They were simply the vilified embodiment of sexually and economically independent women. Gail Pheterson has suggested that the stigmatization of women's autonomy ("the whore stigma") is a form of regulating women's behaviour through the creation of a division between "good" and "bad" women.^{xliv} A division along these lines began to grow as attacks on single women encouraged married women to distinguish themselves as "legitimate" occupiers of the city and colonial citizens: sexual regulation was at the root of a growing class divide.^{xlv}

Both Colonial officials and tribal elders had mutual and vested interests in keeping women out of town: for officials this meant that African male labour forces were not rooted in the city; tribal elders could benefit from women's unwaged labour in homes and fields.^{xlvi} Nonetheless, not all rural men shared this view, particularly since women in the cities could provide substantial remittances.^{xlvii} Furthermore, men in the cities appreciated the sexual and domestic services that women provided.^{xlviii}

The interwar period heralded what Jeater has called "the second colonial occupation" of Africa and brought with it many changes for women's labour. Development "experts" descended on Africa with a view to making the colonies

economically viable for the metropole through modernization projects such as cash crops.^{xlix} Whereas women had often been agricultural producers in Southern Africa prior to colonization, they were forced out of this role by policies that entrenched male land ownership and denied women agricultural credits. Colonial agriculture policies depended on women's work in the fields, but it was as unpaid labour for cash crops owned and sold by their male relatives or husbands.¹ As Geisler explains: "Ironically, this meant that while women's importance in production increased, their control decreased: the ideology of the domestic domain as the proper place for women consolidated this loss of control."^{li}

Agricultural policies were coupled in the Zambian Copperbelt with projects intent on teaching modern Western domesticity and home economics to women.^{lii} Christian Missions were important partners for colonial officials in these ventures. They provided training on proper womanhood to prepare African women to be maids in British houses or proper housewives.^{liii} Inherent to many of these initiatives, both in the metropole and Africa, was the belief that once trained, "good women" could play a role as protectors of morality.^{liv}

Though some modernization projects allowed women's growing participation in certain occupations (nursing, for example), over all, they represented overwhelming losses for women. Many women lost rights to their land, their sources of wealth, and power over their own labour.^{lv} In light of this, the colonial city held one more attraction: ownership. In Gondola's words:

The colonial city was the only place where African women were able to become property owners through small trade, crafts, domestic work, and of course, prostitution which was the primary source of accumulation for the first women in [African] cities.^{lvi}

Indeed, prostitutes in some colonial cities in Africa were able to not only own homes and land but some, further transgressed patrilineal inheritance rules by handing down their homes to young prostitutes when they died.^{lvii} Furthermore, the sex imbalance was a great advantage to prostitutes as casual sex in Northern Rhodesia in 1941 cost one to two days of a man's salary.^{lviii} Such advantages were sufficiently important that, despite the difficulties women encountered in attaining and staying in the city, they continued to migrate both legally and illegally. In Northern Rhodesia, women and women-headed families occupied land outside of cities and built up informal slum settlements.^{lix} Despite repeated attempts to evict and deport them, the women returned and rebuilt once more.^{lx}

III 1945-1964: World War II to Nationalism

In the 1940s, a shift in mining company policy altered the makeup of "company" towns in the Copperbelt. Gone were the mining compounds whose housing only permitted single men (which continue to exist in parts of Southern Africa to this day).^{lxi} In the interest of fostering a stable workforce, African workers were permitted to establish families in the city, at least for their working years.^{lxii}

Women also continued to migrate on their own. According to Parpart, despite the many obstacles:

The Numbers [of women] rose anyways. In 1931, 30% of men lived with women. By 1946, 40% and 70% in 1956... Many more women and children lived informally in townships and squatter compounds around the copperbelt.^{lxiii}

The large influx of women to cities in Northern Rhodesia created a sense of panic for colonial officials and the need to separate the “legitimate and moral” from the “immoral” city dwellers.^{lxiv} Social programs and new legislation were rolled out to do just that^{lxv} and prostitution became a potent symbol of what was so clearly wrong about single women in the city.

Colonial officials and mining companies agreed that only couples able to produce a marriage certificate would be able to access housing.^{lxvi} Urban Native Courts enforced the continued repatriating of women who “misbehaved”, particularly women engaged in prostitution.^{lxvii} To prevent such misbehaviour, in 1953 mining companies began offering courses on proper domesticity for young women aiming to make them better candidates for marriage and to dissuade prostitution.^{lxviii}

During this period, women faced many attempts to control the sources of their autonomy.^{lxix} There were few forms of work available to women beyond selling sex and beer and these often over-lapped spatially in *shabeens* [beer gardens] in the informal compounds where women lived.^{lxx} In 1954, 2000 women rioted in Lusaka against efforts by the local government to take over their industry and income by outlawing home-brew.

The same year, women protested in Ndola against a crackdown on prostitution.^{lxxi} Outcry at both the sale of beer and sex led to further “domestication” projects to attempt to reform women or prevent them from engaging in acts deemed immoral.^{lxxii} Such projects were premised on teaching women, many of whom were in desperate poverty, how to budget properly while other welfare initiatives concentrated on teaching hygiene and dress-making.^{lxxiii} Successful students received government badges. These were retracted if women failed to abide by the moral standards set out in their training.^{lxxiv}

“Misbehaving” in colonial terms was a lot about not fitting into your proper place in the colonial economy: men who were unemployed and women who were independent. The growing respectable classes of Africans were keen to differentiate themselves and so they used their associations in cities to decry prostitutes as a problem and relied on the cooperation of Native Courts to discipline them.^{lxxv}

The Nationalist movement brought a renewed vigour to these attacks, particularly on prostitutes. They reserved special disdain for women who drank beer and sold sex while also pillorying women who wore Western clothing or makeup, a charge that managed to hit women at both extremes of the class spectrum.^{lxxvi} UNIP, one of the two nationalist parties with the ANC, banned women from beer halls, the main places where drinking and picking up clients took place.^{lxxvii} To the male leaders of nationalism, attacking prostitution appears to have offered greater cohesion by bringing a sense of power and responsibility to nationalist adherents. Women and youth wings were urged to bring bad women into line and they took up the call with vigour.^{lxxviii} Their vigilantism

against prostitutes is an early example of how existing stigma proved fertile ground for the persecution of women identified as a social threat.

The Youth Wing urged young people “to ‘rape prostitutes’ not by touching their bodies but by laughing at them.”^{lxxix} Meanwhile, women’s chapters of the ANC in Northern Rhodesia transgressed gendered behaviour limits of their own, by picketing, burning, and stoning to shut down beer halls.^{lxxx} The mantle of nationalism and women’s commitment to the role as moral custodians of it, bought many women the ability to engage in the public and political sphere in new ways.^{lxxxii} Though they changed the terms of the division between what marks “proper” and “improper” women, they did so in a way that reified the dichotomy itself and entrenched prostitutes as the ultimate targets. This dynamic would repeat itself many times in future decades.

IV 1964-1984: Independence

In 1964, Northern Rhodesia gained independence and became Zambia. By the 1970s and 80s, under Kaunda’s proto-socialist government, women in Zambia were no longer fighting for their place in the city but for a space in government and politics. Women’s main access point to political power was through the formation of the Zambian Women’s League, a governmental adjunct to the authoritarian state party.^{lxxxiii}

The league was in essence delegated the task of ensuring that women supported the nation by supporting their men and by disciplining those who might buck patriarchal rule.^{lxxxiii} Betty Kaunda, wife of Zambia's president and president of the ZWL represented this archetype in pronouncing the "new role of women" as "custodians of happiness and security in the home, the watchdogs of morality in our society."^{lxxxiv} The role was not new, though its integration into a para-state organization was.

Inherent to this moral mission was the repression of prostitution. Though this was already done through state mechanisms such as policing, the ZWL took on the mission with its own fervour. Women of the ZWL had their own interest in attacking another group of women as immoral. As ZWL members' own occupation of the public sphere extended through their involvement in politics and paid labour, so did attacks on their virtue.^{lxxxv} In contrast to the nationalist campaigns of previous decades, the ZWL also included many women who had amassed significant incomes as beer-sellers.^{lxxxvi} In order to demarcate themselves as "good" women, the ZWL members needed to identify and target "bad women".

Their campaigns broadly targeted women who were too sexually independent or sexual, and reserved a particular focus and hatred for those who sold sex. Their discourse played on nationalist tropes by evoking the corrupting moral influence of the West.^{lxxxvii} The immorality of pregnant adolescents, single women who dressed "provocatively", and prostitutes were held up as an obstacle to development and the potential causes of economic ruin.^{lxxxviii} Ironically, even as they denounced the West, it is possible that both

the ZWL and the national government were aware, that in a postcolonial context, effective “control” of prostitution could confer marks of “civilization” on an independent state by imperial powers.^{lxxxix}

Much as colonial officials might have a few decades earlier, the ZWL followed the government’s directions and called on women to protect the nation by returning to work on cash crop plantations over which they still had no ownership.^{xc} The ZWL instituted women’s clubs across the nation to encourage women to bake and sew, although these clubs’ appeal was limited, even to the ZWL’s own membership, as only 8 of 23 functioned.^{xcj}

The vigilante justice ZWL members meted out included the public hosing down of women who were returning from a night at the military barracks in Livingstone.^{xcii} Their attacks on women’s freedoms were far more dangerous, however, when they became institutionalized. Women in Zambia, particularly sex workers, have contended with the long reach and enduring influence of many of these policies. In the early 1980s, as part of its battle to suppress prostitution, the ZWL supported the reinstatement of a curfew in Lusaka and the Copperbelt that made it illegal for women to be in bars or guesthouses after 7 pm without a male escort.^{xciii} League members publicly called for the arrest of all single women after nightfall on loitering charges and harsher sentences of up to 6 months imprisonment for those found in infraction.^{xciv} This proposition was endorsed by the Lusaka Urban Women’s Conference in 1984.^{xcv}

During this time, prostitutes were always represented as a threat to the nation, and as such, were commonly cast as “outsiders” and “foreigners” harkening back to the labels of the “alien native” and “traveling” prostitutes. In its congratulations to the ZWL for its resolution, the Zambia Mail wrote of women who sold sex as external threats. “These women,” it told readers, “are a security risk for the whole country...not every foreigner who comes here is innocent.”^{xcvi} The stigmatizing of sex workers’ transgression of place was an important underpinning of efforts to “remove them” spatially.

As an adjunct to the government, the ZWL took its role in disciplining women seriously. The ZWL incited non-state actors to repress prostitutes and supported, even encouraged, the state to entrench repressive mechanisms. Political science scholar Geisler has analyzed how the ZWL’s attacks divided women in ways that allowed for a retrenchment of Zambian women’s rights overall by a firmly patriarchal government.^{xcvii} The female activists of the ZWL were not alone in attacking sex workers during this period. As sex workers moved visibly onto the streets of Lusaka in 1979, unrest grew among religious groups:

[The sex workers were] mostly from the Copperbelt and had previously worked in Kitwe at the Golden Peacock and in Kapiri Moshi. They moved together into a compound in the Garden Shanty near the hotels of Addis Abiba Lane. A group of elders from Trinity Church (...) waged an immediate war against the new trend’s “culprits”(...). They invaded the women and started chasing them. (...) Women political leaders led by a (...)female member of the ruling Party’s Central Committee (CC) also joined the “street cleansing” exercise.^{xcviii}

These attacks took place against a backdrop of growing economic decline. The 1973 rise in the cost of oil and the 1974 drop in the price of Copper led to a downturn in

employment and growth.^{xcix} Between 1974 and 1980, Zambia's GDP dropped a staggering 52%.^c Within this context, sex workers migrating to the city were perhaps a visible symptom of many of these changes upon which it was possible for groups to project culpability.

V 1984-Present: Sex Work and the Response to HIV

There is little literature available on the governance of sex work in Zambia between 1984 and 2008. What exists is documentation of factors such as economic shifts and the advent of HIV- and the government's response - that impacted sex workers both directly and indirectly. The 1990s mark the advent of rehabilitation services for sex workers as a response to HIV, while the turn of the century marks the beginning of large-scale condom promotion to sex workers and pools of male labour considered proxy groups for their clients.

Due to a heavy debt, Zambia was forced in the mid-1980s to follow IMF and World Bank prescriptions including for Structural Adjustment Programs (SAPs) and began one of the fastest economic declines in sub-Saharan Africa.^{ci} SAPs led to the privatization of large swaths of the education and health systems and women bore the brunt for many of these reforms through their unpaid labour.^{cii} Women's employment opportunities at that time were very limited, primarily to the informal sector.^{ciii} In the early 1990s, food riots led to a coup attempt. It wasn't until the 1990s that Zambia began

recovering economically, although by this time, the HIV pandemic was hitting the country full-force.

The first 17 years of the HIV epidemic were characterized by a lack of political will to address HIV. Even by 1999, the Zambian government vociferously attacked and denied claims by the UN that prevalence had risen to close to one in five adults.^{civ} It wasn't until 2004 that HIV was declared a national emergency.^{cv} Although information was available before 2002, it predominantly focused on abstinence and fidelity with moralizing messages like the "Sex Thrills, Aids Kills" Campaign.^{cvi} Frederick Chiluba came to power between 1991 and 2001, in a quest to consolidate his power base, wrote into the constitution that Zambia was a Christian Nation and stoked the populist fires of support for him with campaigns against pornography and "illegitimate" sexuality and opposed condoms as proof of "weak morals".^{cvii} Despite this conservative climate, the Planned Parenthood Association of Zambia (PPAZ) was able to run widespread and successful condom promotion campaigns and along with Population Services International (PSI) promoted condoms under the "success" brand.^{cviii}

It was in this context that in 1992, Professor Nkandu Luo, the Minister of Health established Tasintha, a project to rehabilitate sex workers in Lusaka in order to prevent HIV. The women were taught alternatives to prostitution such as "baking, typing, crafts, tie-dye, knitting, crocheting and polish-making."^{cix} Although by 1996 the program reported having expanded:

Activities include literacy, crafts, drama, choir, art, pottery, jewelry, polish making, tailoring, flower arrangement, hair dressing, puppetry, tie dye/batik knitting, crocheting, shop assistantship, catering, security guarding,^{cx} etc., all aimed at empowering the women to earn incomes outside sex work.^{cx}

Rehabilitation also had a religious component: “The program is sensitive to the spiritual needs of the women and twice a week a pastor and religious teachers hold counseling sessions with the women.”^{cxii} Perhaps what separated Tasintha (“We are changing”) the most from its historical predecessors, the “modernizing” projects intent on teaching “good womanhood”, was that it was rehabilitation proposed by the Health Minister as a means of halting the HIV epidemic. As such, it represents a historical disjuncture. Though in the past, measures of social control had been used against sex workers in response to fears of their spreading disease, this was usually through deportation. This was the first time rehabilitation was being presented as a public health measure rather than simply the solution to a moral or social problem. In a circular logic, according to Tasintha’s mission, HIV education was not primarily in order to stop transmission *per se*, but to stop sex work. Tasintha had

formed with the sole purpose of reaching out to the street women, with skills development and HIV/AIDS information education to create alternative means of survival and a new self worth to guard against sex money and behavior [sic]^{cxiii}

Tasintha’s position was in line with the (now former) health minister’s broader position on condoms. Though Professor Luo supported their distribution, including to sex workers, she was hardly a promoter of safer sex: “Prof Luo says condoms are not 100 percent safe to protect anyone from getting HIV infections, but as a Catholic, she advises abstinence from sex as a better approach to the matter.”^{cxiv}

By 1997, Merab Kambamu Kiremire left Tasintha and founded MAPODE a rehabilitation project that offered similar services to sex workers as well as street youth. Rehabilitation was a natural extension of Kiremire's missionary upbringing and long association with women's clubs.^{cxv}

Another series of rehabilitation centers, Sanduka ("Deep Change"), were founded by the international Christian organization World Vision. In line with their Christian foundation, the director of Sanduka refuses to promote condom use.^{cxvi} According to World Vision, Sanduka Centres are places where: "women who've been trapped in the sex trade are given opportunity through counseling, health care, Bible study, friendship, vocational training and micro-loans to begin a new life."^{cxvii} In Chirundu, the Sanduka Project, concerned by sex workers' migration, aimed not only to rehabilitate but also to "reintegrate them [women] into their communities of origin."^{cxviii}

Rehabilitation groups' share a vision of marriage as an important achievement for reformed sex workers. For World Vision: "These women have reintegrated into their communities and some have even gotten married."^{cxix} And according to Tasintha: "The women's lives at Tasintha have been transformed as some are doing business while some are now married."^{cxx} This highlights how despite their emphasis on vocational training, rehabilitation was not concerned foremost with increasing women's ability to earn an income. Indeed, for many women, marriage represents neither an escape from poverty nor financial autonomy. This is perhaps one of the main reasons for the high

percentage of married sex workers in certain parts of Zambia.^{cxxi}

Not all sex workers have been eager to participate in rehabilitation. In fact sex workers themselves were named as the prime obstacle to their own rehabilitation. An evaluation of Tasintha reported that: "Constraints are the resistance of certain sections of the sex workers that interfere with enrollment."^{cxxii}

Indeed even when health services and vocational trainings are popular, they do not mean that women can or want to stop sex work. To quote a more recent report: "One of the major challenges faced by Tasintha is actually getting FSWs [female sex workers] away from sex work."^{cxxiii} When "rehabilitation" fails, it is rarely the premise that is blamed however - far more often the women are. A project that attempted to rehabilitate sex workers in Zambia to curb AIDS concluded that the sex workers recruited for rehabilitation as hair dressers and bakers "had no patience in learning on how to run their businesses but just to make quick money whether skilled or not."^{cxxiv}

It is in these instances when the link between rehabilitation and repression as two sides of the same coin - measures of social control - is most clear. Police and rehabilitation groups work together in a complicated tandem. When Zambian police arrested 30 sex workers in Nakonde in 2001 in a rare intervention, they were submitted to forced testing and treatment for STIs by medical authorities. Rather than oppose coercive testing, Worldvision, through its Sanduka rehabilitation provided the medication to the authorities for treating women who tested positive to STIs.^{cxxv} Similarly, a 2008 study

reported that Tasintha “partners with police and government to reduce exploitation and recruit women into [their] program.”^{cxxvi}

Rehabilitation groups’ discourse of complete and total victimhood of sex workers, in particular their conflation of adults with children, is used to exert pressure on the state to intervene and further repress sex work.^{cxxvii} Mapode has gone so far as to celebrate the historical vigilante efforts to chase sex workers off the street in “street-cleansings” in Lusaka in 1979, writing in a recent report that: “Most unfortunately, both efforts proved futile. The City’s new ‘line of trade’ had already taken root.” They further express dismay that sex workers settled in the city: “The women were moving up the hill slowly but surely, not only as night walkers, but as ‘tenants’.”^{cxxviii}

This is not to say that some of the services that rehabilitation groups offer are not important, or even desired by some sex workers, particularly in the case of medical treatment. It is simply to state that when access to these services is conditional on a woman’s sexual behaviour (having done sex work and pledging to stop) rather than need, they function as a means of gendered social control.^{cxxix}

It is also arguable that gendered skills training and micro-loans are a paltry substitute for access to education. Sex work provided the funds for many women I interviewed to pay school fees for themselves or their children, or support themselves while getting an education. Real structural changes towards a social safety net, including the abolishing of school fees, would no doubt alleviate a great deal of economic pressure

on sex workers.^{cxxx} However, none of these interventions have proven to be substitutes for ones that support sex workers in creating better working conditions and accessing HIV-prevention tools, information, and treatment. These crucial components were neglected through much of the 1990s in Zambia, during which time, according to two key informants, the health of sex workers was very much sidelined by the government. Indeed, they remain so in many places today.

By the late 1990s, concern had however begun to grow over the dramatic toll of HIV on the male labour force in sub-Saharan Africa and its effect on corporate profits, as well as GDP.^{cxxxii} The high HIV prevalence among workers (in particular amongst mobile male workers such as truck drivers, fishermen, soldiers, and miners) led to the development of a number of large-scale HIV-prevention projects. Since many of the labourers were the sexual partners of sex workers, they were included in the scope of a number of these projects and a new paradigm of HIV-prevention with sex workers began to establish itself.

In 2000, 4 NGOs funded by USAID began one such project, Corridors Of Hope (COH), to provide HIV-prevention to truck drivers and sex workers across many sites in Zambia. The project was renewed under PEPFAR in 2007 in Zambia.^{cxxxiii} A few other small-scale projects also emerged in the early 2000s. Among these was SKOWA (Street Kids, Orphans and Widows Association), which does outreach to sex workers in Kapiri Mushi and is funded by the International Aids Alliance and Health Triangle, an

intermittent small project in Kabwe. Health Triangle, SKOWA and COH all provide condoms, information, voluntary counseling and testing (VCT), and STI treatment.

The 2000s also brought along new actors in “rehabilitation”. Men Make a Difference (MENDIF) was first inaugurated to encourage men to get circumcised (for HIV-prevention) and advance gender equality. It now encourages the rehabilitation of sex workers and leads the fight against sex work: “MENDIF has identified existing structures like the rural development committee, traditional structures and communities to implement the anti-prostitution campaigns.”^{cxxxiii} Another article illustrates how promoting repression is linked to rehabilitation activities for MENDIF:

[MENDIF] have held meetings with the Town Council and the local Chief in the area, Chief Hanjaalika (who is a well known as an anti AIDS activist) about the sex trade in the town and how best to curtail it. They are targeting the "customer" - including local fishermen, taxi drivers, truck drivers and migrant workers - with information on the virus. Most importantly, they are trying to find ways to EMPOWER THE WOMEN in the community. Setting up workshops for women, organizing craft groups, and generally finding more suitable ways for women and girls to make a living.^{cxxxiv}

In many parts of the world, funding for sex worker HIV projects has led to sex workers fighting for better working conditions and greater recognition of their rights.^{cxxxv} This has not occurred on a large scale in Zambia and PEPFAR makes it far less likely that it will. Both COH and SKOWA are circumscribed in their actions by the anti-prostitution pledge of PEPFAR. In some instances, COH's aims may be at odds with those of sex workers, such as when they promote abstinence and fidelity in surrounding communities or encourage truck drivers to reduce visits to sex workers.^{cxxxvi} COH has

also worked in partnership with rehabilitation groups by referring sex workers who wish to undergo vocational training to Sanduka and Tasintha. Sanduka, in turn, obliges sex workers who wish to be reformed, to get tested for HIV and relies on COH to do so.^{cxxxvii}

PEPFAR has other important impacts on the HIV-prevention landscape for sex workers. Between 2003 and 2007, PEPFAR channeled 544 million dollars into Zambia's HIV response. Until 2009, it had an earmark for abstinence (though this has been rescinded, the policy still appears to favour abstinence).^{cxxxviii} Almost twice as much funding (\$20,544,658) went to the promotion of Abstinence and Fidelity over other prevention methods (\$12,427,000).^{cxxxix} A Siecus report stated:

Today in Zambia, messaging promoting abstinence as an HIV-prevention strategy has supplanted messaging promoting condom use....The disproportionate emphasis on abstinence-until-marriage....has created a distinctly anti-condom atmosphere.

The results of this approach to condoms affected sex workers, particularly those who accessed mainstream clinics or facilities. Suzie, an HIV-counselor informed me that due to PEPFAR, she was under strict instructions not to mention or show condoms in the course of HIV-counseling or testing, even with HIV-positive individuals, sex workers or HIV-discordant couples. At best, she could refer people to another project with a different funding base for information on them.

The Zambian government has shown little preoccupation with providing HIV-

related services to sex workers. They are not named as service-recipients in the 2006-2010 National HIV-AIDS Strategic Framework. The National HIV-AIDS-STI-TB policy doesn't call for any HIV services for sex workers other than "a framework for the rehabilitation of sex workers".^{cxl} It is only in reference to male clients' health that sex workers reappear in the policy when it calls for "the targeting of clients of sex workers with appropriate information and education, and encourag[ing] sex workers to take responsibility for their partners' sexual health."^{cxli} Despite HIV prevalence rates of up to 68%,^{cxlii} sex workers' own health is never mentioned in either document.

In 2007, the International Organization for Migration (IOM) cited the lack of HIV interventions targeting sex workers in Zambia as an important concern.^{cxliii} In 2009 SIECUS reported echoed the sentiment, adding that the PEPFAR anti-prostitution pledge was in part responsible. They cited the example of Youth Visions Zambia in Kafue that attempted to provide services to sex workers (without PEPFAR funding) and routinely ran out of condoms.^{cxliv} Overall however, the glaring absence of concern for sex workers' access to HIV-prevention and treatment has been noted in relatively few quarters.

Zambia's policy of combining "rehabilitation" with basic condom-promotion and STI-treatment without a community-based or rights-based element is of crucial interest. This approach is in many ways a perfect crystallization of the policy directions of both the UNAIDS Guidance Note on HIV and Sex Work and that of PEPFAR. The institutional record provides a glimpse at the persistent marginalization of sex workers and the disregard for their health and well-being embedded within such policy-

approaches. However, it is only when the institutional record is read alongside sex workers' accounts of the enactment of these policies that their far-reaching impact becomes clear.

VI Tracing the Historical Threads

From the onset of colonialism, transnational interests have played an important role in how sex work was governed in Zambia. British colonial policy on prostitution as well as on broader issues of gender, migration and public health all impacted on the governance of sex work. After independence, the role of foreign powers in dictating sex work policy was far more diffuse although the British imprint remained, for example through the inheritance of British prostitution laws. It is hard to evaluate to what extent nationalist campaigns against prostitution pre-independence and in the decades following were intended to play to a broader imperial audience to show Zambia's ability to self-govern and status as a "civilized" nation. At the end of the 20th and beginning of the 21st century, structural adjustment programs and foreign aid repositioned foreign powers once again as powerful arbiters of health and gender policy and in particular, of prostitution policy in Zambia.

On a domestic scale, repressing sex workers has been a means for governments to introduce the repression of women's freedoms more broadly, to deflect social unrest, and to rally the population's confidence in a party's ability to govern. For social groups, it has been a means to negotiate social status. The state apparatus has relied at different times

on social or non-state actors, such as missions, tribal elders, mine management, women and youth leagues or “modernization” projects to police women’s behaviour. Conversely, moral panics amongst the population at large have given license to the state to intervene and exert greater control over women, and in particular those who sell sex. These dynamics are often interlocked with transnational pressures. My research attempts to analyze the current inter-play between state actors such as politicians and the police and non-state actors such as rehabilitation projects and neighborhood groups in repressing sex work.

There is a strong historical continuity in the use of social control measures against sex workers. “Rehabilitation projects” for sex workers that operate today are the direct descendants of modernization projects meant to teach women respectable skills and make them more “marriageable” to prevent prostitution. Today, however, they are coupled with medical services and in a few cases, with a strong role in advocating against sex work.

Similarly, the repression of sex workers is still very much mediated through controls on their movement. The mechanisms with which these are enforced have nonetheless evolved somewhat. In the first half of the 20th century, women were expelled from urban centres not only for prostitution, but also for being unmarried or failing to behave appropriately. This was enforced by male elders hired to police women’s actions and later, by the Urban Native Courts. By the 1980s, women in transgression were no longer routinely expelled from the city. However, gendered curfew ordinances highly circumscribed their presence by prohibiting them from being in public space

unaccompanied at night. This has a direct link to the period covered in my research in which a national curfew ordinance was again reinstated severely restricting women's ability to be present or move outside of the home at night. Though the 2004 curfew is in theory not gendered like its predecessor, in application, it very much still is. Though deportation is not routine policy, it still occurs in connection with women's selling sex. In 2008, women were expelled from Livingstone back to Zimbabwe and to their "home towns" in Zambia following anti-prostitution raids.

Throughout the years, there has often been a singling out of the "foreignness" or "alien" status of women who sell sex in Zambia. This construing of sex workers' occupation of public space as illegitimate and unnatural constitutes them as permanently existing outside of "the public", outside of citizenship and the nation.^{cxlv} As Sherene Razack writes about the exclusion of homeless people: "Through its presence as a material body that occupies space, but as one that is consistently denied space through a series of violent evictions, the homeless body confirms what and who must be contained to secure society."^{cxlvi} An emphasis on women's spatial transgression in Zambia reappears often through out the decades, particularly when coupled with a narrative that blames sex workers for "spreading" disease. In the period covered by my research, it re-emerges in the statements of politicians and police and again, prefigures the women being displaced under the guise of protecting "the public". The conflation of sex workers with infection and the concomitant level of threat they come to represent inform the very violent nature of many such displacements.

In this chapter, I have explored the history of regulation of sex work in Zambia according to documentary sources. The next chapter will give a brief overview of the current national law and policy framework for prostitution and the ways in which it constructs working conditions for sex workers.

ⁱ Diane Hodgson and Sue McCurdy, "Introduction," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001), 16.

ⁱⁱ Gisela Geisler, *African Women and the Remaking of Politics in Southern Africa: Negotiating Autonomy, Incorporation and Representation*, (Oslo: Nordiska Afrikainstitutet: 2004), 17.

ⁱⁱⁱ Jane Parpart, "'Wicked Women' and 'Respectable Ladies': Reconfiguring Gender on the Zambian Copperbelt, 1926-65," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001), 278.

^{iv} Diane Jeater, "The British Empire and African Women in the Twentieth Century" in *Black Experience and the Empire*, eds. Philip D. Morgan and Sean Hawkins (Oxford: Oxford University Press, 2004), 228-256.

^v Gisela Geisler, *African Women and the Remaking of Politics in Southern Africa: Negotiating Autonomy, Incorporation and Representation*, (Oslo: Nordiska Afrikainstitutet: 2004) p. 19.

^{vi} Diane Jeater, "The British Empire and African Women in the Twentieth Century" in *Black Experience and the Empire*, eds. Philip D. Morgan and Sean Hawkins (Oxford: Oxford University Press, 2004), 228-256.

^{vii} Ibid.

^{viii} Ibid.

^{ix} Walkowitz, Judith. *Prostitution and Victorian Society: Women, Class and the State* (London: Cambridge University Press, 1998), 13.

^x Philippa Levine, *Prostitution, Race and Politics: Policing Venereal Disease in the British Empire* (New York: Routledge, 2003).

^{xi} Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2003).

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- ^{xii} Legal Assistance Centre, *Whose Body Is It? Commercial Sex Work and the Law* (Windhoek: Legal Assistance Centre, 2002).
<http://www.lac.org.na/projects/grap/Pdf/commsex.pdf>
- ^{xiii} Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2003).
- ^{xiv} Carol Summers "Intimate Colonialism: The Imperial Production of Reproduction in Uganda 1907-1925," *Signs* 16 no. 4 (1991): 787-807; Elizabeth Van Heyningen, "The Social Evil in the Cape Colony 1868-1902: Prostitution and the Contagious Disease Acts," *Journal of Southern African Studies* 10 no. 2 (1984):170-197.
- ^{xv} Jock McCulloch, *Black Peril, White Virtue: Sexual Crime in Southern Rhodesia, 1902-1935* (Bloomington and Indianapolis: Indiana University Press, 2000), 160.
- ^{xvi} Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2003).
- ^{xvii} Philippa Levine, *Prostitution, Race and Politics: Policing Venereal Disease in the British Empire* (New York: Routledge, 2003).
- ^{xviii} Luise White, *The Comforts of Home: Prostitution in Colonial Nairobi* (Chicago: University of Chicago Press, 1990).
- ^{xix} Jock McCulloch, *Black Peril, White Virtue: Sexual Crime in Southern Rhodesia, 1902-1935* (Bloomington and Indianapolis: Indiana University Press, 2000), 160.
- ^{xx} Luise White, *The Comforts of Home: Prostitution in Colonial Nairobi* (Chicago: University of Chicago Press, 1990).
- ^{xxi} Bryan T. Callahan and Virginia Bond, "The Social, Cultural and Epidemiological History of Sexually Transmitted Diseases in Zambia," in Philip Setel, Milton James Lewis and Maryinez Lyons, eds., *Histories of sexually transmitted diseases and HIV/AIDS in Sub-Saharan Africa* (Westport: Greenwood Press: 1999) p.187.
- ^{xxii} Jock McCulloch, *Black Peril, White Virtue: Sexual Crime in Southern Rhodesia, 1902-1935* (Bloomington and Indianapolis: Indiana University Press, 2000), 138-139.
- ^{xxiii} Bryan T. Callahan and Virginia Bond, "The Social, Cultural and Epidemiological History of Sexually Transmitted Diseases in Zambia," in Philip Setel, Milton James Lewis and Maryinez Lyons, eds., *Histories of sexually transmitted diseases and HIV/AIDS in Sub-Saharan Africa* (Westport: Greenwood Press: 1999) p.187.
- ^{xxiv} *Ibid.*, 160. This incident is also interesting, in that colonial action was prompted by complaints from white farmers that African prostitutes were 'using up' men's wages. It is unclear whether it was the transfer of wealth to African women or the potential transmission of syphilis that was judged sufficiently a threat to male productivity in service of colonial enterprise that it warranted official intervention.
- ^{xxv} *Ibid.*
- ^{xxvi} *Ibid.*
- ^{xxvii} Didier Gondola, "Unies pour le meilleur et pour le pire: Femmes africaines et villes coloniales, une histoire de métissage" in Catherine Coquery-Vidrovitch, ed. *CLIO, Histoire, Femmes et Sociétés* 6, Femmes d'Afrique, (1997): pp. 87-104.
- ^{xxviii} Frederick Cooper, "African Workers and Imperial Designs," in *Black Experience and the Empire*, eds. Philip D. Morgan and Sean Hawkins (Oxford: Oxford University Press, 2004), 297.

- ^{xxix} Diane Jeater, "The British Empire and African Women in the Twentieth Century" in *Black Experience and the Empire*, eds. Philip D. Morgan and Sean Hawkins (Oxford: Oxford University Press, 2004), 228.
- ^{xxx} Didier Gondola, "Unies pour le meilleur et pour le pire: Femmes africaines et villes coloniales, une histoire de métissage" in Catherine Coquery-Vidrovitch, ed. *CLIO, Histoire, Femmes et Sociétés* 6, Femmes d'Afrique, (1997): pp. 87-104.
- ^{xxx} George Chauncey Jr., "The Locus of Reproduction: Women's Labour in the. Zambian Copperbelt, 1927-1953," *Journal of Southern African Studies* 7 (1981):135-164.
- ^{xxxii} Ibid.
- ^{xxxiii} Didier Gondola, "Unies pour le meilleur et pour le pire: Femmes africaines et villes coloniales, une histoire de métissage" in Catherine Coquery-Vidrovitch, ed. *CLIO, Histoire, Femmes et Sociétés* 6, Femmes d'Afrique, (1997): pp. 87-104.
- Luise White, *The Comforts of Home: Prostitution in Colonial Nairobi* (Chicago: University of Chicago Press, 1990).
- ^{xxxiv} Karen Tranberg Hansen, "Negotiating Sex and Gender in Urban Zambia." *Journal of Southern African Studies* 10, no. 2 (Apr., 1984): 219-238.
- ^{xxxv} Jane Parpart, "'Wicked Women' and 'Respectable Ladies': Reconfiguring Gender on the Zambian Copperbelt, 1926-65," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001).
- ^{xxxvi} Parpart, 2001, *ibid.*
- ^{xxxvii} James Ault, "Making 'Modern' Marriage 'Traditional': State Power and the Regulation of Marriage in Colonial Zambia," *Theory and Society* 12 (1983), p.183; Parpart, Jane, "Class and Gender on the Copperbelt: Women in Northern Rhodesia Copper Communities, 1926-1964," in Claire Robertson and Iris Berger eds., *Women and Class in Africa* (New York: Africana Publishing, 1986), p. 149.
- ^{xxxviii} Parpart, Jane L. "'Where is Your Mother?': Gender, Urban Marriage, and Colonial Discourse on the Zambian Copperbelt, 1924-1945." *The International Journal of African Historical Studies* 27, no. 2 (1994): 241-271.
- ^{xxxix} Ibid.
- ^{xl} Jane Parpart, "'Wicked Women' and 'Respectable Ladies': Reconfiguring Gender on the Zambian Copperbelt, 1926-65," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001)
- ^{xli} Ibid.
- ^{xlii} Ibid.
- ^{xliii} Parpart, Jane, "Class and Gender on the Copperbelt: Women in Northern Rhodesia Copper Communities, 1926-1964," in Claire Robertson and Iris Berger eds., *Women and Class in Africa* (New York: Africana Publishing, 1986).
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- ^{lv} Gisela Geisler, *African Women and the Remaking of Politics in Southern Africa: Negotiating Autonomy, Incorporation and Representation* (Oslo: Nordiska Afrikainstitutet: 2004) p. 17; Didier Gondola, "Unies pour le meilleur et pour le pire: Femmes africaines et villes coloniales, une histoire de métissage" in Catherine Coquery-Vidrovitch, ed. *CLIO, Histoire, Femmes et Sociétés* 6, Femmes d'Afrique, (1997): 90 : "Avec la colonisation, les paysannes ont parfois perdu le droit de propriété et d'accumulation en milieu rural."
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^{xc} Gisela Geisler, "Sisters Under the Skin: Women and the Women's League in Zambia." *The Journal of Modern African Studies* 25, no. 1 (March, 1987): 43-66.

^{xcj} Ibid.

^{xcii} Ibid.

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^{xcviii} Merab Kiremire, *Children and Young Women in Prostitution and Trafficking for Commercial Sexual Exploitation, Labour and Crime in Zambia* (Lusaka: Movement of Community Action for the Prevention & Protection of Young People Against Poverty, Destitution, Diseases & Exploitation - MAPODE, 2004).

^{xcix} Karen Tranberg Hansen, "Negotiating Sex and Gender in Urban Zambia." *Journal of Southern African Studies* 10, no. 2 (Apr., 1984): 219-238.

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^{civ} Peter Moszynski, "United Nations estimates of HIV prevalence in Zambia under attack," *British Medical Journal* 319, No. 720 (August 07, 1999): p. 338.

^{cv} "Zambian Government Declares HIV/AIDS National Emergency, Launches Collaborative Treatment Project" *KaiserNetwork.Org*, September 08, 2004.

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^{cvi} Laurie Garrett, "Prosperity's fatal side effect: New urban lifestyle spurs virus," *Newsday*, December 27th 1988.

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^{cvi} Isabel Apawo Phiri, "President Frederick J. T. Chiluba of Zambia: The Christian Nation and Democracy," *Journal of Religion in Africa* Vol. 33, Fasc. 4, Expressions of Christianity in Zambia (Nov., 2003): 401-428; "Zambia's president questions the use of condoms," *Bay Area Reporter*, January 11, 2001; Brian M. Abshire, "Those Who Walk In Darkness, Will See A Great Light...: The Christian Reconstruction of Zambia," *Still Waters Revival Books Newsletter*, March 7, 2010.

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^{cviii} Ariana Childs Graham, *Making Prevention Work: Lessons from Zambia on Reshaping the U.S. Response to the Global HIV/AIDS Epidemic* (Washington: SIECUS, 2009).

<http://www.siecus.org/data/global/images/Zambia%20Final%20PDF%206%2018%202009.pdf> (Accessed March 10, 2010)

^{cix} Ruth Nduati and Wambui Kiai, *Communicating with Adolescents about AIDS: Experience from Eastern and Southern Africa* (Ottawa: International Development Research Center, 1997) p.159.

^{cx} I have not heard any current programs promoting "security-guarding" but I found this example intriguing since it departed from the deeply gendered nature of the skills generally being taught.

^{cxii} Practical interventions in the prevention of the spread of HIV among Lusaka's female sex workers - the case of TASINTHA program. Kiremire KM, Luo-Nkandu ; International Conference on AIDS. *Int Conf AIDS*. 1996 Jul 7-12; 11: 362 (abstract no. Th.C.4709).TASINTHA Programme, Lusaka, Zambia. Fax: 260-1-254981/253783.

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^{cxv} Joy Sata, "Joiner Girls is Changing Life for Ex-sex Workers." *Daily Mail*, July 3 2000. <http://www.medguide.org.zm/aids/aidszam26.htm#joiner-> (Accessed March 10, 2010)

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^{cxii} Brenda Zulu, "Tasintha programme is about GBV issues," *NGO Coordinating Committee Gender-Based Violence Blog*, November 25, 2006.

<http://gbv16.wordpress.com/2006/11/25/tasintha-programme-is-about-gbv-issues/> By Brenda Zulu (Accessed March 10, 2010)

^{cxxi} MENDIF reports that in a survey they did of sex workers in Mazambuka, 55% of the people in the sex trade are married women. Glenda Thompson, "Getting A Handle On The Aids Problem In Mazabuka," *Mazabuka Mumblings*, January 2005
<http://www.lowdown.co.zm/2005/2005-01/mazabuka2005-01.htm> (Accessed March 10, 2010)

^{cxxii} Ruth Nduati and Wambui Kiai, *Communicating with Adolescents about AIDS: Experience from Eastern and Southern Africa* (Ottawa: International Development Research Center, 1997) p.159.

^{cxxiii} Family Health International, *Qualitative Assessment/ Documentation Corridors of Hope Project* (Washington; Lusaka: FHI, June 2006), p. 37.
<http://www.fhi.org/NR/rdonlyres/ezwiou4r6gvmv6nkiqc5xvqj3p27ygunqjkhvmjkyenqqlzyxwynppfmauyt4wt2hilgg2y2ogqwbb/COHQualitativeAssessment2006enhv.pdf>
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^{cxxiv} A.S. Munaulca, "AIDS and prostitution in Zambia: Non-Governmental Coordinating Committee Zambia" (Paper presented at the International Conference on AIDS, Amsterdam, Holland, July 19-24, 1992).

^{cxxv} "Nakonde sex workers test positive to STDs," *Times of Zambia*, August 15, 2001

^{cxxvi} Jennifer Beard, Godfrey Biemba, M. Ibrahim (Bram) Brooks, Megan Bresnahan, et al, "Children of Female Sex Workers and Injection Drug Users: A Review of Vulnerability and Family-Centered Models of Care in Low and Middle-Income Countries," (Presentation by USAID/ Project Search August 1st, 2008).
<http://www.ccaba.org/resources/Jennifer%20Beard%20-%20Children%20of%20Female%20Sex%20Workers%20and%20Injecting%20Drug%20Users%20-%20Feb%202010.pdf> (Accessed March 10, 2010)

^{cxxvii} Merab Kiremire, *Children and Young Women in Prostitution and Trafficking for Commercial Sexual Exploitation, Labour and Crime in Zambia* (Lusaka: Movement of Community Action for the Prevention & Protection of Young People Against Poverty, Destitution, Diseases & Exploitation (MAPODE), 2004)
http://www.childtrafficking.com/Docs/kiremire_2004_trafficking_research_report.pdf
(Accessed March 10, 2010)

^{cxxviii} With their daily incomes, they could pay rent on demand, and any amount demanded, whether daily, weekly, or monthly-- MAPODE reinforces the old- by now familiar trope- about 'foreign' women invading and introducing sex work to an area. "A phenomenal feature of these women who, overnight, hit Lusaka city by storm was ... a good number were Lingala speaking Congolese." Kiremire, 2004, *ibid*.

^{cxxix} In contrast, sex workers' cooperatives in India provide income-generating activities in a different framework "We (...) are emphatic that the cooperative is not meant for the economic rehabilitation of women in the trade, but is designed to provide a financial support for us to fall back on in moments of crisis, and to minimize our economic desperation by creating a space for negotiation." Quoted in: Anna-Louise Crago, *Our Lives Matter: Sex Workers Unite for Health and Rights* (New York: Open Society Institute, 2008) p. 38.

^{cxxx} It is possible that decreased poverty would decrease sex work, although there is no evidence to currently support this. If this were the case however, then it potentially improve the working conditions of remaining sex workers by placing them in a stronger

bargaining position. However, social safety nets have never eradicated the sex trade in countries where they are in place.

^{cxxxix} International Labour Organization, *HIV/AIDS in Africa: The Impact on the World of Work*, (Geneva: ILO, 2000)

<http://www.ilo.org/public/english/protection/trav/aids/publ/adforange.pdf> (Accessed March 10, 2010)

^{cxxxix} Corridors of Hope works with four main collaborating agencies: Family Health International (FHI), MEASURE Evaluation, POLICY Project, and Population Services International (PSI). These agencies are currently working at 41 sites, and have agreements with 12 sub-partners in the region. See:

http://siteresources.worldbank.org/INTTSR/Resources/462613-1135099994537/SouthernAfrica_CorridorsHope.pdf (Accessed March 10, 2010)

^{cxxxix} “Commercial sex trives in Mazabuka,” *Zambia Daily Mail*, April 4, 2006.

http://www.queensu.ca/samp/migrationnews/article.php?Mig_News_ID=2974&Mig_News_Issue=16&Mig_News_Cat=10 (Accessed March 10, 2010)

^{cxxxix} Glenda Thompson, “Getting A Handle On The Aids Problem In Mazabuka,” *Mazabuka Mumblings*, January 2005 <http://www.lowdown.co.zm/2005/2005-01/mazabuka2005-01.htm> (Accessed March 10, 2010)

^{cxxxix} Jo Doezenia, “International Activism: Jo Doezenia Interviews NSWP Coordinator Cheryl Overs” in *Global Sex Workers : Rights, Resistance and Redefinition*, edited by Kamala Kempadoo and Jo Doezenia, (New York ; London: Routledge, 1998), p. 204.

^{cxxxix} COH’s targets in 2007 included reaching 140 000 people with abstinence and fidelity messages. See: http://www.fhi.org/en/CountryProfiles/Zambia/res_COHII.htm (Accessed March 10, 2010)

^{cxxxix} Family Health International, *Qualitative Assessment/ Documentation Corridors of Hope Project* (Washington; Lusaka: FHI, June 2006), p. 37.

<http://www.fhi.org/NR/rdonlyres/ezwiou4r6gvmv6nkiqc5xvqj3p27ygunqjkhvmjkyenqqlzyxwynppfmauyt4wt2hilgg2y2ogqwvh/COHQualitativeAssessment2006enhv.pdf> (Accessed March 10, 2010)

^{cxxxix} Ariana Childs Graham, *Making Prevention Work: Lessons from Zambia on Reshaping the U.S. Response to the Global HIV/AIDS Epidemic* (Washington: SIECUS, 2009).

http://www.siecus.org/_data/global/images/Zambia%20Final%20PDF%206%2018%202009.pdf (Accessed March 10, 2010)

^{cxxxix} Ibid.

^{cxl} Instead, the policy contains an emphasis on the general provision of “accurate information on safer sexual practices and [on] practices that perpetuate HIV transmission including transactional sex”.

^{cxli} The Zambian National HIV-AIDS-STI-TB policy, 2005.

<http://www.nac.org.zm/index.php/publications/policy-a-planning> (Accessed March 10, 2010)

^{cxlii} UNAIDS/WHO, *Report on the Global AIDS Epidemic* (Geneva: UNAIDS/World Health Organization, May 2006).

^{cxliii} International Organization on Migration, *Briefing Note: Zambia and Labour Migration* (Geneva: IOM, 2007).

http://www.iom.int/jahia/webdav/site/myjahiasite/shared/shared/mainsite/events/docs/Briefing_Notes_HIV_Zambia.pdf (Accessed March 10, 2010)

^{cxliv} Ariana Childs Graham, *Making Prevention Work: Lessons from Zambia on Reshaping the U.S. Response to the Global HIV/AIDS Epidemic* (Washington: SIECUS, 2009).

http://www.siecus.org/_data/global/images/Zambia%20Final%20PDF%206%2018%202009.pdf (Accessed March 10, 2010)

^{cxlv} Sherene Razack, "Introduction" in *Race, Space and the Law: Unmapping a White Settler Society* ed. Sherene Razack (Toronto: Between the Lines, 2002), 10.

^{cxlvi} Ibid.

CHAPTER 4

Legal Context

The following section briefly delineates the law and policy context in which sex workers work in Zambia. I begin in the first part by exploring the origins of the current legal framework and the political vision that undergirds it. I follow this by a discussion of how the law has shaped working environments and conditions for the sex workers I interviewed.

I The Legal Framework of Sex Work

Zambia inherited British prostitution laws during the period of British Rhodesia (1923-1964). In 1930, the British Colonial Office drafted a Penal Code based on existing British case law and exported it to Northern Rhodesia (now Zambia).ⁱ When Zambia achieved independence in 1964, it adopted this code with a few modifications.

British laws had first taken notice of prostitution in 1824 in the Vagrancy Act, criminalizing not the selling of sex per se but rather the occupation of space by “idle and disorderly persons” such as prostitutes.ⁱⁱ It wasn’t until the Contagious Disease Acts (CD Acts) of 1864, 1866 and 1869, that ‘the prostitute’ as such came to the fore as a rubric under which the state could classify and control poor women who transgressed conventional gender norms by selling sex.ⁱⁱⁱ The CD Acts called for women in port and

garrison towns in Britain who were suspected by police of prostitution to be subjected to medical testing and sent to lock-hospitals.^{iv}

The laws then changed again at the turn of the century as social purity activists in Britain and America, most of them women, led a large campaign for the suppression of prostitution, which they dubbed “white slavery”.^v Their aim was to infuse Britain and America with Christian values.^{vi} By playing to the traditionally feminine role of guardians of female virtue and national honour, social purity activists managed to insert themselves into the British public sphere as political actors with a certain amount of clout.^{vii} By 1885, they were successful in campaigning for an amendment to criminal law that prohibited brothels and dancehalls. They also won the repeal of the CD Acts. They opposed the acts on the grounds that state-regulated prostitution represented government tolerance of a social evil caused by uncontrolled male lust.^{viii} For many of the British “abolitionists”, as they called themselves, this mission later extended to the colonial enterprise and the Indian CD Act was eventually repealed as well.^{ix}

Abolitionists’ goals were not only the suppression of prostitution but also the rehabilitation of “wayward” women, often by middle-class Christian women like themselves.^x These goals overlapped in a particularly repressive way: “The movement....strong in the metropole and weak in the colonies, turned after 1900 to advocating incarceration for prostitutes as women’s rights measures.”^{xi}

Abolitionists felt justified in over-seeing the control of other women since it was with the aim of “elevating” them above selling sex. Coercive measures were the logical extension of defining women as too passive and victimized to know what was best for them, or as hardened delinquents who would resist improvement. According to Laura Briggs:

Imprisonment in state and federal facilities explicitly built upon the model of “rescue homes,” wherein Protestant women attempted the work of “reclaiming” and rehabilitating the prostitutes who came to them, but they also bore more than a passing resemblance to the lock-hospitals that repealers had spent decades condemning.^{xii}

Though by the 1900s prostitution laws and policies had shifted in Britain and Britain’s colonies, they were still being deployed for the surveillance and punishment of transgressive women. The abolitionists paid little attention to colonial Africa - medical controls were by and large not put into place^{xiii} and so it was not a battleground in the same way as India. The new legal approach to prostitution the abolitionists helped create was exported to many colonies, among them Northern Rhodesia.

This history helps explain why prostitution laws put into effect in 1930 in Zambia express prohibitionist tendencies that are at once “protectionist” and punitive towards sex workers. The laws governing prostitution articulate a familiar dichotomy in portraying women who sell sex as “sad girls” or “bad girls”.^{xiv} The first group of women^{xv} is construed as passive, as having been “innocently” induced, procured or forced into prostitution by bad men and women and in need of rescue and rehabilitation. The second group is construed as exerting agency, refusing “rescue” or inducing other women into

prostitution and in need of punishment. The reality is that the laws repress sex workers across the board, and indeed, sometimes African women across the board. In Pheterson's words, agency and victimization are not mutually exclusive: "Women may at times be victimized in their quest for greater agency and at other times be compelled to take transgressive initiative in their attempt to escape constraint."^{xvi} The dichotomy is simply a discourse that serves to reify the "need" for the state to intervene to exert control over women.^{xvii}

The "protectionist" laws include sections 140-49 of the Zambian Penal Code, which target third parties who might corrupt women into sex work. Therefore, keeping a brothel or any establishment for prostitution is prohibited, as is procurement for prostitution inside or outside Zambia and living off the earnings of a prostitute.^{xviii} Specific violent infractions such as confining someone in a brothel against their will or using threats to enlist them in sex work are criminalized in this section as offenses separate from other forms of confinement and they are mixed with infractions that are not necessarily violent such as recruiting someone under "false pretenses".^{xix} Such conflation serves to reify the concept of prostitution, not violence, as a crime against a woman or more importantly, against her virtue. Similarly, a law against the sexual exploitation of children defines children as under the age of 21^{xx}, reinforcing women's passivity and inability to act, even after they are no longer minors. The figure of the prostitute as victim is writ large across this section.

However, a final section breaks with this and a slightly different picture begins to emerge. This section penalizes “any woman who, for the purpose of gain, exercises control, direction, or influence over the movements of a prostitute in such a manner as to show that she is aiding, abetting, or compelling her prostitution.”^{xxi} The terms “aiding and abetting” of someone’s prostitution hint at a prostitute’s agency in a way that has so far been absent.

This agency takes center stage in a separate section of the code. Article 178.a criminalizes not the act of prostitution itself, but prostitutes’ presence in public space whenever it is deemed to be a social disturbance. Here, “every common prostitute behaving in a disorderly or indecent manner in any public place” and “every person who, without lawful excuse, publicly does any indecent act” are considered to be an “idle and disorderly person” and can be jailed for a month.^{xxii} A later section further entrenches the powers of expelling social “undesirables” like sex workers from public space. Scott Long explains:

181(a) provides that more than one conviction under 178 can cause one to “be deemed to be a rogue and vagabond,” liable to three months’ imprisonment for the first offense and one year for each offense thereafter. “Rogues and vagabonds” also include “every person found wandering in or upon or near any premises or in any road or highway or any place adjacent thereto or in any public place at such time and under such circumstances as to lead to the conclusion that such person is there for an illegal or disorderly purpose.”^{xxiii}

The same vagrancy laws were the legal mechanism that enabled tribal elders to repatriate single women, often forcibly escorted, from the cities in Northern Rhodesia in 1920s.^{xxiv} For Long, these provisions against prostitution are part of a larger set of laws

on public space that originated in British Vagrancy Laws and that under colonialism sought to regulate segregation:

Colonial rule required extensive regulation of public behavior—to police the behavior of whites and mold a morally and socially cohesive community, but also to ensure that the proximity of non-whites would be conditional and highly controlled. The laws that spun that supporting web of rules were directed at restricting movement and suppressing non-conforming expression and dress. They were written broadly, so as to give authorities maximum scope to wield them against any even potentially disruptive conduct. Most of those laws are still in place.^{xxv}

The difficulties of proving prostitution accusations have led the police to rely heavily on vagrancy charges.^{xxvi}

On a national scale, under the Immigration and Deportation Act, a person becomes a “prohibited immigrant” and required to leave the country if they are found to be a prostitute, a person who has “lived off the earnings of prostitution or has procured any other person for immoral purposes.”^{xxvii} This makes the swift deportation of sex workers, even potential refugees, possible as has been shown with the frequent deportation of Zimbabwean sex workers from border towns in Zambia.^{xxviii}

II The Law: Constructing Working Conditions

The legal prohibitions on sex work set the parameters under which anyone selling sex works. In some instances, this is further complicated by the level of application of different legal provisions and of other intersecting policies. The following explains the type of work environment that was available to the women I interviewed.

As a result of laws prohibiting brothels, sex workers picked up clients on the street, at the market, near army bases, mines or truck stops, in bars or *shabeens* (informal bars or beer gardens in settlements) and had sex with them at home, in clients' trucks, in guest-houses where the client paid for a room, or sometimes in the grasses outdoors. None of these options offered very much in terms of safety. Soliciting clients in bars also often brought the financial obligation to buy a drink or to pay for entry and the pressure to consume alcohol.

Some women had worked out of guesthouses where they lived for a time, although none worked out of this type of establishment in Kabwe or Lusaka nor mentioned them existing in the two cities. Such places were however described as existing in a town along the Zimbabwean border called Chirundu. Chirundu is known for its long line-ups of trucks that wait hours and sometimes days to go through customs and cross the border transporting goods all across the interior of the continent. Such truck drivers were often prized clientele since they earned a relatively good wage and often paid sex workers in stronger currencies such as pula, rand or dollars. This allowed sex workers to often make an extra margin of profit thanks to currency conversion.

In the case of Chirundu, for the sex workers I interviewed, the arrangement described consisted of paying a fixed daily or weekly rent to a landlady rather than a percentage of one's sex work earnings; soliciting clientele was left up to the sex worker. This was not difficult as the guesthouses described were often near truck stops, for

example. By profiting off of the rental of the room and not the sexual transactions, establishments seemed to manage evading legal crackdowns. Such tolerance is perhaps fickle however, as guesthouses are periodically subject to being shut down.^{xxix} In media reports, some sex workers working in guesthouses described a cycle of incurring debts to landlords. However, this was not the case of the women I interviewed, who worked for themselves and who did not experience such constraints.^{xxx}

This chapter has given a brief background to the legal framework governing prostitution in Zambia that is necessary for understanding the findings of my research. It has also illustrated how anti-prostitution laws affected sex workers firstly by circumscribing the work places available to them, thus limiting their access to potentially safer working environments. However, the impacts of anti-prostitution laws and policy went far beyond this. The following chapter delves into the many other ways in which laws against prostitution have impacted on sex workers' lives.

ⁱ A. W. Seidman and R.B. Seidman, "Lawmaking, Development and the Rule of Law" in *Lawmaking for Development: Explorations Into the Theory and Practice of International Legislative Projects* eds. J. Arnscheidt, B. van Rooij and J.B.Otto (Amsterdam: Leiden University Press, 2008), p.128.

ⁱⁱ Walkowitz, Judith. *Prostitution and Victorian Society: Women, Class and the State* (London: Cambridge University Press, 1998), 13.

ⁱⁱⁱ *Ibid.*, 67.

^{iv} Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2003), 42-44.

^v *Ibid.*

^{vi} See *ibid.*, p.44 for references to their joint campaigns against male homosexuality and masturbation.

^{vii} Laura Agustin, "Helping Women Who Sell Sex: The Construction of Benevolent Identities," *Rhizomes* 10 (Spring 2005). (www.rhizomes.net/issue10/agustin.html).

- ^{viii} Jo Doezema, "Loose Women or Lost Women? The Re-emergence of the Myth of White Slavery in Contemporary Discourses of Trafficking in Women," *Gender Issues* 23 no. 1 (January 2000): 24.
- ^{ix} Philippa Levine, *Prostitution, Race and Politics: Policing Venereal Disease in the British Empire* (New York: Routledge, 2003), 95.
- ^x Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2003), 42-44.
- ^{xi} *Ibid.*, 46.
- ^{xii} *Ibid.*, 44.
- ^{xiii} *Ibid.*
- ^{xiv} Thank you to Liz Cameron at Empower Thailand for this terminological summation.
- ^{xv} These laws generally had women selling sex in mind, though trans women sex workers in the other Southern African countries have frequently been targeted with them, as have some male sex workers (See: Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: Sex Workers' Human Rights in Botswana, Namibia and South Africa* (Johannesburg: Open Society Institute for Southern Africa, 2009), 35). Trans women and male sex workers in the region are also policed using laws against homosexuality and non-normative gender expression (See: Scott Long, "More Than Just a Name: State-Sponsored Homophobia in Southern Africa" (New York: Human Rights Watch, 2003) 256-297.)
- ^{xvi} Gail Pheterson, *The Prostitution Prism* (Amsterdam: Amsterdam University Press, 1996.), 18.
- ^{xvii} *Ibid.*, 17-18.
- ^{xviii} Zambian Penal Code, Article 140-149
- ^{xix} Zambian Penal Code, Article 140-149
- ^{xx} US Department of State, *Report on Zambia* (Washington: Bureau of Human Rights, Democracy and Labor, 2007). <http://www.state.gov/g/drl/rls/hrrpt/2007/100511.htm>
- ^{xxi} Zambian Penal Code, Article 140-149
- ^{xxii} Zambian Penal Code, Article 178
- ^{xxiii} Scott Long, "More Than Just a Name: State-Sponsored Homophobia in Southern Africa" (New York: Human Rights Watch, 2004), 278.
- ^{xxiv} Karen Tranberg Hansen, "Negotiating Sex and Gender in Urban Zambia." *Journal of Southern African Studies* 10, no. 2 (Apr., 1984): 219-238.
- ^{xxv} Scott Long, "More Than Just a Name: State-Sponsored Homophobia in Southern Africa" (New York: Human Rights Watch, 2003), 277.
- ^{xxvi} *Ibid.*
- ^{xxvii} Zambian Immigration and Deportation Act
- ^{xxviii} "Immigration Deports 60 Zim Prostitutes", *Times of Zambia*, May 6, 2008. <http://allafrica.com/stories/200805060404.html> (Accessed March 10, 2010), ZAMBIA- "ZIMBABWE: Zimbabwe's sex workers look to their neighbour for business", *IRIN*, October 26, 2007. <http://www.hellonam.com/business-economy/2864-zambia-zimbabwe-zimbabwe-sex-workers-look-their-neighbour-business.html> (Accessed March 10, 2010)
- ^{xxix} "Zambia, Sex Workers Flushed Out of Guesthouses in Solwezi," *Lusaka Times*, January 26, 2009. <http://www.lusakatimes.com/?p=7783> (Accessed March 10, 2010)

^{xxx} Joy Sata, "Joiner Girls is Changing Life for Ex-sex Workers." *Daily Mail*, July 3 2000. <http://www.medguide.org.zm/aids/aidszam26.htm#joiner>- (Accessed March 10, 2010)

CHAPTER 5

“Unless Prostitutes Are Done Away With”: State Repression

In the previous chapters, we explored law and policy governing sex work in Zambia, both historically and currently. We now turn to sex workers’ experience of the policies regulating their work. The following section details changes in the regulation of sex work that occurred around the end of the 1990s and between 2004 and 2008. It then documents the context of severe state repression sex workers described at the time of my fieldwork in 2008. I examine the ways in which this repression was enacted through controls over sex workers’ occupation of public space using police detention, displacement, extortion and high levels of verbal, physical and sexual violence by police.

I Unleashing State Repression (2004-2008)

Sex workers described the current conditions in 2008 as the culmination of two different shifts in governance of sex work. Two older sex workers reported a first shift towards increased police repression starting around the turn of the last century. (Only five respondents had worked prior to 1999.ⁱ) Rose, who had worked all over Zambia (Kabwe, Chirundu, Kazungulu, Livingstone) as well as in the Congo (DRC) since 1998 asserted that: “It is different since 2000. In 1998, there was no police to catch sex workers. Around 2000, is when they started.” For Mary, who began sex work in 1994 and worked

all over Zambia (including Chirundu, Livingstone, Kitwe and Ndola) as well as in the Congo (DRC), this change occurred around 1998.

Police are worse now. It's gotten worse, I'd say in about the past decade. Police don't want us to stand on the streets and only release us after we pay 58 000 K. We just hide and then we go back. I usually get arrested 3 or 4 times a year, spend a night in the cells. When you don't listen to the police or do what they want, they beat you.

Though there is no doubt that police raids existed before, there is support for assertions of an increase in 1999 and 2000 in different cities in the media coverage of the time. Recurrent police raids are described in a 1999 media article.ⁱⁱ A report by the World Organization Against Torture (OMCT), found that by 1999 police repression had increased to levels where it was displacing sex workers out of the country:

The alarming scale of the HIV pandemic in Zambia and the government's increasingly strict regulation of prostitution have forced many Zambian women to migrate to neighbouring countries in order to find work in the sex industry.ⁱⁱⁱ

In 2000, a police crackdown on prostitution was reported in Livingstone.^{iv} In 2001, police arrested and forcibly tested 30 sex workers in Nakonde telling the media the women were "a threat to the security in the border town" and "an obstacle to the fight against HIV/AIDS pandemic."^v According to the OMCT report, violence and excessive force were reported in repeated raids to remove sex workers from the street in Livingstone in 2000 and in Lusaka in 2002. Paul Kasonkonoma, a key informant from Treatment Action Literacy Campaigns (TALC), concurred:

In Lusaka, Great East Road and Addis Ababa drive were known for sex workers. In 2000, they began arresting them and locking them up. The government said it was because they spread HIV. Police used condoms as evidence of prostitution. The sex workers moved into inner roads. Before that was a time when they were kind of left alone.

The second shift in repression of sex work occurred in 2004. Perhaps because it was more recent, many sex workers identified this as a watershed moment.^{vi} In 2004, sex workers identified significant changes in both the ways in which, and the intensity with which, repression was being enacted. The first change identified was the passing of a national curfew ordinance in 2004 that made it illegal to be in public space at night. Though sex workers disagreed as to whether the specific aim of the curfew was to repress sex workers or street crime in general, there was consensus that it coincided with government orders to repress sex workers and officials blaming sex work for HIV. There was also agreement that these events occurred on a national level.

Respondents identified the blaming of sex workers for HIV on a large scale by authorities and the framing of crack-downs on them as a measure to “fight HIV.” While some politicians may have taken this stance in raids in the past, sex workers described this as a national initiative, implemented locally. The Zambian Parliament’s archives are only available on-line beginning in 2005, so I have not been able to access the government narrative for the beginning of this period in 2004. However, the national push to repress sex work is evident in the parliamentary transcripts in 2007. The Minister of Home Affairs and National Government Spokesperson Ronnie Shikapwasha called on all MPs to use the national budget to: “devis[e] opportunities to defeat HIV/AIDS, cholera, tuberculosis and prostitution.”^{vii} MP Chishimba Kabwili made repeated calls to

parliament for laws to criminalize prostitution (presumably with stiffer penalties than the existing vagrancy ordinances) and increased repression at this time:

Mr Kambwili: “On HIV/AIDS, Mr Speaker, I have said before that we need to enact laws that will prevent HIV/AIDS. We need to come up with a law that criminalise[s] prostitution. Unless we arrest all the prostitutes on the streets, AIDS in Zambia will never cease” □

Laughter

Mr Kambwili: We have to be extremely serious on this issue. Unless prostitutes are done away with, then we shall not fight HIV/AIDS.”^{viii}

Both the national curfew and the increase in political rhetoric blaming sex workers for HIV translated into a new governance of sex workers’ presence in public space marked by increased repression (arrest, detention, deportation, seizure of income through fines or extortion), increased state-sponsored violence and increased public scapegoating of sex workers for HIV in the media and public space.

These changes were experienced in cities across Zambia, as Jessica recounts:

For a while, I was getting caught twice a month. But I haven’t yet been caught this year [April 2008]. These days, it is better than it has been. The worst time was between 2004 and 2007. It was bad, oh, it was bad. They used to catch us !

Especially, after 22 h, it was very bad. That police was very strict. Brenda Muntemba, was the police spokesperson [of the Zambia National Police]. She is very strict and very serious with our work [sex work]. She just made an order, no movement after 22 hours, country-wide. Everybody. If you get caught, you get taken to the police station. If you don’t have that money, you clean the station.

I have been caught many times. Several times in Kabwe and several times in Lusaka. Even the other time, we were caught in Kapiri. There was a bar in Kapiri

called Maliri, we used to work there in those days, on that side, because you could find truck drivers and they have lots of money.

Rose tells a similar story, though starting a few months later:

Past 22 hours, they catch you by the road. It is worse in the past three years [Spring 2005 to Spring 2008]. Starting then, they really started chasing us and putting us in cells. I have been in the cells twice already this year, 6 times last year and four times the year before that. I had never been in a cell before that.

They say they want to protect us from sex working. They told us sex work is bad because of HIV. Here in Zambia, there are many HIV-positive people, so they try to chase us. They think if they can stop sex workers, yes, [it will stop HIV].

Sex workers reported police violence as increasing in tandem with authorities' mandate to reduce sex work. As Juliette explains:

The police are not friendly, they are used to chasing us. If they find us after 19 or 20 hours, they will apprehend you, they know that you are a sex worker. They put you in custody and fine you for that. I was put in the cells twice last year. There were 5 other women. They patrol every weekend and catch 10-15 of us every weekend. They will beat you. My friend was beaten and had to go to the hospital for the injuries she sustained. Sometimes, they will even force you to have sex with them without giving you anything. It has happened to girls I know, the police don't even use protection.

It has been like this since three years ago. I think is when they put some restraining order that no girls should be found loitering after 19, 20 hours in town. Before, they never used to bother us. They said it was because of HIV/AIDS. They said sex workers are spreading disease. Yes, so they wanted to put a stop to that. All over Zambia. Country-wide, they were just ordered to do so.

Much like had been reported in 1999, the high levels of repression forced some women to migrate from one city to the next in Zambia, as they attempted to evade harsher sentences that they had been threatened with for repeat offenses. Juliette

describes how this took place:

It [the curfew] changed how girls work on the street. Some won't be on the same place. [They move around.] They will go to Kapiri or Lusaka. It is the same order there too. If they find you and pick you up for the third time, there is a sentence of three to six months, I hear. I have not known anyone who got it but when girls have been arrested once or twice, they change cities because the police get to know them.

Sex workers who weren't from a city were often all the more liable to be punished by the law as their independent migration often made them suspect women to police and easier to blame for HIV. Helen experienced one such example in Kabwe:

They arrest you if they find you moving in the streets. One time, my friend called me and told me there were lots of people and to come [to town]. So, I was on my way. I had almost reached town when the police found me. I was lucky they knew me because they left me but advised me "Don't move at night. Only go in a taxi." But there was 2 ladies from Chiwombo, they said "You are not our girls. You are bringing diseases into Kabwe.

Only one sex worker, Jessica, felt that the worst period of police repression across the nation linked to blaming them for HIV was waning by 2008, everyone else felt it was very much still ongoing. Ironically, it was Jessica who told me about a large-scale crackdown against sex workers that occurred in Livingstone in the same month I was doing my fieldwork, May of 2008. Jessica recounted that police had rounded up and deported all the sex workers in Livingstone who were not from the town itself, including Zambians: "They just rounded up all of the sex workers in Livingstone. Sent the Zimbabwean girls back to their country and put the Zambian sex workers on a bus back to Ndola, Kabwe, or Lusaka, wherever they say they are from."

Following the raid, Zambian Immigration spokesperson Mulako Mbagweta reported that a total of 60 Zimbabwean sex workers were deported and 20 Zambian sex workers were charged with public nuisance offenses.^{ix} The raid became a platform for government officials to scapegoat sex workers as HIV-positive “murderers”. The immigration department reported to the national media that the Zimbabwean sex workers were in possession of ARVs and it was the leading line in one report in *the Times of Zambia*. According to the same article:

Ms Mbangweta said the 60 sex workers were even boasting that they had killed several Zambian men, as they produced tablets of ARVs. This was to show their HIV status and that they had been willingly passing on the virus to their Zambian male clients.^x

In the *Lusaka Times*, Ms. Mbangweta issued a warning to men to stay away from sex workers by “desist[ing] from engaging in illicit sex in order to curb HIV/AIDS in the city.”^{xi}

In May 2008, at the time of my research, the curfew regulation was still very much in effect. Repeated violent crack-downs on sex workers and public scape-goating for HIV persisted routinely. What had perhaps once been exceptional measures had become entrenched. In effect, a new form of governance of sex workers - and of HIV - had emerged and it was a brutal one. The following sections describe its articulations and its repercussions for sex workers. At the end of this chapter, I analyze why this came to be.

II Curfew

The law that all sex workers repeatedly reported being targeted with was loitering; in particular, in infringement of the curfew regulations. Sex workers reported this in Kabwe as well as Lusaka, and reported this to be the case across the country, and in all the cities in which they had worked. Though loitering charges were dispensed to sex workers prior to the curfew, the curfew changed the ways in which women's presence in public space was criminalized.

Curfew charges occurred when women were found on the street after dark if they were unaccompanied by husbands or men of a "respectable" class. Sex workers' perception of when the curfew started diverged. For some, being on the street after midnight was against the law, others said it was 10 PM and still others simply referred to it beginning at nightfall. This reflected the sometimes arbitrary times and ways in which they had seen the legislation enforced.

Technically, curfew legislation was meant to apply to all Zambians after 22h^{xiii} in order to prevent street crime. In actuality, the way it was enforced was both deeply gender- and class-based. Practically, charges of loitering and infringing the curfew occurred when one was not in a vehicle, either one's own or a taxi. Owning a vehicle is very expensive in Zambia and it is largely men who can afford one. Men who do not own a vehicle may still have access to one through their work as drivers or taxis. This was not the case for any of the women I interviewed. As a result, whereas women were routinely

charged with loitering in the same zone, clients never were. In fact, no sex workers ever recounted being targeted with the ordinance when they were accompanied by a man.

If men were to be charged, it was due to their status as *caponos*, their association with petty criminality or homelessness, never due to their public purchase of sexual services or even their general presence out at night. (*Caponos* rarely had the funds with which to purchase services and when they did were often turned down by sex workers who feared being harassed by them later on.). In this sense, the enforcement of the curfew for men bore much in common with the enforcement of vagrancy or loitering laws: police assessed men on an individual basis and ones who were associated with poverty, criminality, or disturbances were arrested. In application, men were not *a priori* criminalized for being in public whereas unaccompanied women were. Under the curfew, women's gender rendered them de facto visible and subject to disciplinary surveillance in a way that harkens to Foucault's concept of "panopticism".^{xiii}

Grace was the only sex worker who described the curfew being applied to large swaths of people. However, once arrested, those judged to have "legitimate" employment were released without a charge. Her experience illustrates a different application, yet one that is still structured along class and gender lines. Men, for instance, are far more likely to have formal employment:

Every Friday and Saturday, there are police men every time. They walk around, they catch you. I can call it what...*bashishi*.

Loitering ?

Yes. Standing there, not doing anything. *Mbashishi*. Standing idle, just fishing around. Let's go, they take you. Not just bitches^{xiv}, anyone who is working is taken to the police. Then they IDs, are you work? I'm from work. "OK. Don't move around this open hour."

Although some sex workers mentioned that the ordinance did not apply only to them, they all agreed, that one of its intents, if not its primary one, was to target sex workers. As Claire explains:

Here in this country, police don't like women who work in the streets after midnight. So they catch them and put them in the station. I have never been caught but my friends have many times. If I see the police, I am afraid. Immediately, I start off running.

Grace recalls how the police explained the curfew to her and other sex workers: "You can walk up to midnight. After that, ... they say it is *prostitution-free* zone. That is why they catch us. It is for security reasons. After 12 hours, it is midnight, so maybe some people can kill us or what. So like that."

This explanation clearly articulates how for the police at least, there was no doubt that the intent of the ordinance was in large part the repression of sex workers. The policing of sex workers' movement after dark follows the protectionist logic of curtailing women's freedoms and punishing them "for their own protection". While the restrictions were intended to target sex workers, they could apply to all unaccompanied women since 'prostitutes' were sometimes defined as women who repeatedly flouted the interdictions

on being out at night without a man. As Juliette remembers: "If they apprehend you more than three times [in violation of the curfew], they tell you that you are a sex worker." However, that very connection, that women who were out in public in night were "bad" and "prostitutes" and its attendant stigma, is what kept many women from doing so at all cost. As a result, the women arrested under the curfew were usually those who needed to be in public to earn their income - in short, overwhelmingly sex workers.

The sphere of illegality around women's simple presence "out" at night *de facto* rendered them culpable should something occur to them while they were breaking curfew. As a result, this added to sex workers' sense of vulnerability at being violently targeted at night. It also added a dimension of danger to their return back to often distant slum settlements: if, for example, a client abandoned them somewhere; if they did not earn enough; or had to pay off the police with their earnings and could not afford a taxi home. As Amora recounts:

Sometime men use you and give you no money, Then you have to walk without any transport. Maybe it will take 2 hours to walk home. You have to walk at 22 hours to maybe 01, 02, 04. Sometimes, I have had to walk at 4 AM, it is dangerous, so you sleep somewhere sometimes."

In Kabwe, police crack-downs for loitering happened primarily on Thursday, Friday and Saturday or on holidays. In Lusaka, they were said to happen every night. Loitering charges generally came with detention or fines, or both. "Fines" were often unofficial and amounted to extortion money being paid to the police. This all the more apparent in the fluctuating amounts sex workers report being forced to pay: from 10 000 kwacha, to 22 500, to 50 000 to 100 000.^{xv}

III Violence and Scapegoating by State-Actors

Many sex workers experienced the governance of sex work between 2004 and 2008, as violent, a threat to their safety and their livelihood. This is poignantly illustrated by how sex workers routinely fled when police were approaching. As Claire explains:

The police are rough with the girls. They have been with many of my friends. My friends they pay or they pay with their bodies. Other people will have good hearts and say it is her business, just leave her. Others have hearts of snakes and that is difficult for my friends and I. So I am used to running.

Or in Amora's words: "When we see the police, we run, run like the future."

For some sex workers this meant, as Grace said, that police were "the biggest safety threat for us." Police violence was inextricably linked to anti-prostitution measures: it was always recounted as having taken place in the course of enforcing laws against sex work and in particular, curfew infractions. In many cases, it was also directly linked to the scapegoating of sex workers for HIV, such as when police were explicit that the violence they were inflicting was meant to punish sex workers for "spreading HIV".

In Lusaka sex workers reported that public displays of violence against them were weekly and were directly linked to being blamed for HIV and arrested under the curfew laws:

-(Zanji) They whip you and insult you. They arrest us 4 to 5 times a month, sometimes they catch others and you get away. They say it is for loitering. They say prostitution is a crime and they whip you with a *shambok*^{xvi}.

-(Tine) They whip you so many times.

-(Z) They whip us in the street. It leaves bruises and cuts. Nobody comes to help you. Because you are doing something that is illegal and no one will come help you for sure, also, because you are a sex worker. The police say "You are the one bringing disease into the country. You are the bitches killing the nation."

Helen also describes violence routinely accompanying curfew arrests in Kabwe and its links to being blamed for HIV.

The police are violent if you are in town moving around. They will come to you and slap you. From nowhere, they will just slap you: "What are you doing at this time!" I was beaten one time. I was coming from N'Temba to Big Bite. The police said "Where are you going?" I said "To Big Bite." He said: "To do what? To infect people with HIV?" He started beating me. People came and asked him why he was beating me. Then, slowly, he renounced.

Rose recounted yet another dynamic where unofficial "fines" for sex work which police pocketed were enforced through tremendous physical violence. While this type of violence undoubtedly existed before the curfew, the mandate to repress sex workers provided cover for such types of police action. "In Chirundu, that side, the police are different. Some, they take your money. If you refuse to give him your money, they catch you, they take you to the cells. Lots of times, they take me to the cells and beat me."

In another story, Rose recounts how the police's power to detain her for sex work-related offenses meant the law could be wielded to place her in confinement under the direct control of a police officer who was attacking her.

Look...look at the scars on my face ...and my eye [*Silence. She starts crying, she points to a large scar going down her face and across her eyelid. One eye is unable to move.*]. I don't have any money to go to the hospital so this is how I look now. They caught me at around 3 AM. I was standing by the road waiting for a truck driver to take me to Chirundu. I was at the roadside 5 min and the police came and said "What are you doing?" I said: "I am going to Chirundu." So he took me to his car and started beating me. "No, you are a prostitute." He started beating me. He beat me. He took me to the cells after that. I stayed the whole night. I used to sleep in that place standing. Forced, they forced me to stand. They released me at 15 hours [3 PM the following day]. So, by that time, I don't have any money. They released me to go out. It took me until 12 hours [noon] on the next day, Saturday, to make my way back here.

Mevis' experience similarly explains the psychological impact of knowing that your aggressor has the power to confine you under the law:

"Sometimes those officers are difficult. They can even beat you, if you are not careful. They have beat me many times in Kabwe. With my friends from Kitwe, they held me tightly so I can't move. Sometimes, they took me to the cell, I was very scared."

Physical and sexual abuse by police against sex workers in public and in police custody, though increasingly documented, have yet to be commonly recognized as forms of torture.^{xvii} This is starting to change as a number of human rights reports contextualize such abuses within international legal frameworks and name the ways in which a number rise to the level of torture in contravention of the UN Convention Against Torture and Other Forms of Cruel, Inhuman, or Degrading Treatment or Punishment (1987).^{xviii}

In a number of the accounts sex workers describe how they were beaten and humiliated in public space. This indicated the impunity with which such violence took place. The common experience of many people being witness to their abuse and no one intervening increased sex workers' terror and sense of permanent vulnerability to attack. For police, such public displays may have functioned as a show of force intended in part, to induce precisely such fears. Becky who was 18 tells of her experience:

- I've been beaten by police in the streets three times. They beat us in town. Sometimes, they just take all your clothes and leave you without any clothes. Sometimes if you are outside of a hotel, they find you, they just take your clothes and throw them out. They just leave you there on the street. Maybe somebody will say, bring her some clothes. Bring her a sheet.

- *Has this happened to you? (Nods. Begins to shake. Begins to sob. Interview is stopped for a while.)*

- It happened to me once. I was just standing there with no clothes. I was just standing there crying for help. *Somebody to help me.* But they didn't.

In Kabwe, not all sex workers had experienced police violence. Two key informants from Kabwe insisted police violence was a major problem in other cities but not in theirs. They felt that it had gone down in recent years due to their efforts at advocating for the better treatment of sex workers with police officers who were their friends or relatives. This however, did not emerge in the interviews with sex workers from Kabwe. In Lusaka, sex workers all reported an extremely high rate of violence. Public beatings and whipping were a routine and generalized event that accompanied arrest. Police in both cities were commonly verbally abusive and publicly berated sex workers as Jessica tells: "The police shout at us. (...) One time when they caught us, they

were shouting at us “You, *Aoule* [*whores*], You bitches.” As Mevis explains, such harassment was common: “Sometimes the police bother us for walking on the street when they don’t arrest us. Just insults. You idiots. You bitches. Things like that. So you don’t feel good sometimes.”

While not as severe in its immediate repercussions, such verbal abuse marked sex workers as public targets for aggression and could incite further persecution by others, as will be seen later.

IV Detention

The rate of detention varied greatly between Kabwe and Lusaka. In Lusaka sex workers reported being arrested and taken to the cells around once a week. In Kabwe, women had generally been taken to the cells between zero and four times in the past year. Older women were more likely to have been taken to the cells than younger women, who had also often been working less long.

Detention was not the automatic result of arrest. The reasons for this were the same in both Kabwe and Lusaka. One means of evading it was having sex with police officers, which is explained more below. Paying the police a fine on the spot could also circumvent being taken to the station. This “fine” however was generally unofficial and could be double what the official amount would be to release you from the station. Tine in Lusaka explains: “There is no respect from police. If you have money, you have to pay

50 000. If not, then you spend the night at the cells and to be released someone has to pay 22 500.”

Paying off the police was far more frequent than being taken to the cells. Gloria estimated the frequency of fines in Kabwe as follows: “The older ones [sex workers], 20, 21, 30, 40, they have to pay 10 800 K to the police. Maybe twice a month, they have to pay.” Nonetheless, despite reporting rarely being taken to cells, sex workers reported that when they were taken, the cells were quite packed with other sex workers. Grace explains: “Maybe, if you are five [sex workers], they take you five of you [to the cells at the police station]. On at Saturday night, in Kabwe, maybe 10-15 [end up in the cells].” Rose describes the cells she has been in as follows:

It is about like this room [10’ by 10’]. They fit 20, 30, 40 sex workers in one cell. You fit sitting, one after the other, after the other. It is crowded every Thursday, Friday, Saturday. Maybe they catch 5 or 10 on Thursday but they keep you so by Saturday maybe 20. There is no food. Just water.

While over-crowding created discomfort, it could also provide some measure of security to women. Women recounted being at particular vulnerability to physical and sexual violence from police while in custody. This was most often the case when they were alone with police at the station or outdoors.

Sex workers’ access to necessities seemed dependent on people paying to bail them out. Generally sex workers described stays that varied from one, two or three days to a week. Although these periods are relatively short, it important to bear in mind the conditions sex workers like Becky described being trapped in: “The longest I have stayed

is a week. There is no food, just water. You sleep in a room with no bed, no blankets.”

For some women such periods in jail represented frequent HIV treatment interruption, inability to take care of and provide for their children and substantial lost income.

Furthermore, if women had previously been unknown to police as sex workers, they lost this anonymity making it more likely they would be targeted in the future.

All sex workers spoke of having to do forced domestic labour or groundskeeping while in the police station. This is a common report of sex workers of their experience in custody in other countries in Southern Africa, and even in regions as far away as Central Eastern Europe and Central Asia.^{xix} Amora describes this:

I have been taken to the police three times for two days. They are very bad. They treat us very harsh. If they find us in the street, they just get us and put us in custody. We have pay them to get out and work, sweep, inside the police station, before we are let out.

Much like the quotation above, sex workers decried being taken to the cells and the mistreatment they felt they received. One exception was a quote from Rose, an older sex worker, who seemed to echo the police’s perception that they were punishing the women to protect them from danger and sex:

-Police have a good attitude. They protect us from pimps and HIV. They are good jobs because they protect us from sex.

-How do they protect you ?

-If I have been with a boy, they are going to catch me. Take me to the cell. Ask me where I am going. Tell me that that they are here to help me. That when a man and a woman are together, you know they are going to use sex. They tell you not to do sex work.

The above quotation is striking since it so perfectly presents common justifications given to repressive tactics for policing sex workers and women. And yet the underlying logic was that sex work was bad, in fact damaging and a cause of HIV. Rose was a particularly interesting person to have espouse such reasoning since she not only continued to do sex work but facilitated the entry into sex work of other women by giving them advice, helping them select outfits and suggesting clients. The mention of pimps was also rather incongruent with all that I had heard since none of the women I interviewed, including Rose, had pimps and pimping was not a structure of the sex trade in Kabwe nor to my knowledge, in Lusaka.

Perhaps the most revealing thing about the quotation is that it was followed by the recounting of a particularly brutal experience of police violence in Chirundu described above and of how “bad” police were “over there”. In that sense, the quote is perhaps best interpreted comparatively. If such treatment is “good” it is perhaps offered as a concession to the “crime being committed”, only to underscore how unjustified the severity of abuse is when it is “bad.”

It is similar to the sentiment in the following quote by Chilechi: “If sex workers are older, the police are good. They just ask you “Don’t do this. If we meet you here again, we beat you.” Such statements can be read as potent articulations of how much aggression sex workers had come to expect from police and to normalize.

IV Broke: The Economics of Repression

Routine police repression had a large economic impact on sex workers. Sex workers reported making on average between 20 000 and 50 000 kwacha per night in Kabwe and Lusaka. Intercourse was usually sold for 20 000 kwacha.^{xx} However, particularly for younger sex workers eeking out a living in the compound, clients could pay as little 1500 to 5000 kwacha.

Official fines were reportedly 80 000 kwacha.^{xxi} Far more common, was police extortion or unofficial “fines” which ranged from 10 000 to 100 000 kwacha. Both of these could entirely clean out sex workers’ earnings for the night. Even so, paying off the police was generally economically more advantageous than being detained and losing wages over the weekend when earning potential was highest. The economic hit that accompanied policing of sex work created further conflict between sex workers and law enforcement. Claire explains: “I am scared if I don’t have money to pay that 10 000 K. And how are you going to give them that money if you need it for your budget. So, it is better you run away from them.”

Veronica recounted that young sex workers were unable to pay the police and often faced violence: “The young ones will not have money to pay the police. The young ones don’t have much money. Maybe only 5000K, they just want 2000K to buy biscuits.” Sex workers who were unable to pay police were detained and would generally hope for the assistance of other sex workers in paying off the police for them. Amora explains:

If you go with the police, maybe your friends will see [that you have been taken away] and they will send someone to come look for you. They just give the police money, 100 000K to get you out. But if you don't have money, you are going to remain there. But then, if you have sex [with the police officers], you are out that same day.

Sarah, from Lusaka, had experienced the most severe economic penalty under the law of all the sex workers when she was sued for Marriage Interference. The heavy fine put Sarah into abject poverty and eventually forced her to relocate:

Sometimes, wives take us to court for marriage interference. This happened to me. We were drunk in a bar, me and my client and I said: "Let's take photos." And the wife found them. There was a fight and I was charged and ordered to pay the wife 1.8 million Kwacha in penalty. I was told to pay 100 000K a month. So I had to sell all my household goods off. I paid 400 000K and I was scrounging to pay the rest. So by the time I paid 1 million, I left to the other township.

The rampant extortion and abuse from law enforcement officers also made it near impossible for sex workers to seek recourse when clients stole their belongings, refused to pay or reneged on negotiated prices. Clients' refusal to pay happened with tremendous regularity. Some clients further exploited the fact that sex workers were considered unworthy witnesses in order to extort them through legal avenues. Angela recounts her experience: "Sometimes clients falsely accuse us of stealing. If we cannot pay back, we must give whatever we can in the house to payback."

On a structural level, anti-prostitution measures have resulted in the seizure of independent women's incomes and the co-opting of their labour by state actors, much like the outlawing of beer-brewing and prostitution did in the 1950s.^{xxii} This has

occurred directly through official fines and penalties and it has occurred indirectly through police extortion. State policies are complicit in creating the latter as well. Low and delayed salaries to police officers have resulted in widespread police corruption.^{xxiii} Coupled with expanded police powers of repression over sex workers, this has created a greater gendered transfer of wealth out of women's hands. Such a dynamic is arguably a structural form of economic violence.

VI Police, Sex & Violence

Sex workers recounted different kinds of experiences of sex with police. On some occasions, this included the odd paying client who happened to be a police officer. Far more common however were other types of experience. Some sex workers report having themselves been raped by police or of knowing sex workers who had been. All sex workers recounted that police officers would request sex under threat of incarcerating sex workers. This spectrum is present in other sex workers' accounts in Southern Africa^{xxiv} and in Central Eastern Europe and Central Asia.^{xxv}

The distinction between sexual violence and consensual sex with police under duress is not always clear-cut. Given some police officers' propensity to physical violence and all police officers' power to legally confine sex workers under horrible conditions, the issue of consent to sex in order to avoid jail becomes quite complex. In some instances, sex workers asserted that they could refuse sex with police, although this

was at some personal cost, in other cases they could not. Carolina, for example, invokes her ability to refuse sex with police, while also speaking of how girls can be forced:

-The things is with policemen, I think if they arrest you for loitering, then they will ask you to have sex with with them then they release you. If there are five police. Three. Or Five. First they will ask for money, then if you tell them that I don't have money, they will ask for sex. But me I can't sleep with a policeman and I will never do that. If you say "no", they will put you in cells and you have to pay. They put you in for one night. If you are not lucky, if you are exchanging words with them, 3 or 4 days.

-Do they force girls to have sex with them ?

-They do. (...) The policemen and the soldiers. I hate them.

-Are they clients or do they force girls ?

-The soldiers are clients. But the policemen, they are not clients. They just force you. Sometimes, they can agree with you but it depends on the person.

Grace similarly invokes some women's ability to refuse sex with police and other women's inability to do so:

Sometimes they can catch me. I'm alone, they can catch me. Or if we are three, they can say to my friends, "You two go. I will remain with this one". But I said "Why my friends, you release them, but me, you catch me. They say "You, Let's go to the police." After as you are calling [for help], they will do like... they say "I want to sleep with you then I release you." If you said no, they catch you and take you to the police, but if they fuck you, they release you.

-If a girls says "no" to the police, do they force her ?

-Yeah.

-They rape her ?

-No, not force like rape. They take her to the police then. They just talk "I want to sleep with you then I release you". If you refuse, they take you to the police.... But some they force. Like one of my friends, she told me the policeman forced her to sleep with him."

One young sex worker spoke of having been raped by police and a few sex workers mentioned close friends who had been raped by police. However, most of the older sex workers spoke of having had sex with police officers to get out of jail, avoid a police beating or a fine they could not or wished not to pay.

Some authors have framed the latter issue as “sex for free”,^{xxvi} a framework which completely vitiates the issue of consent. Other researchers have chosen to qualify exchanges of sex for freedom from jail as “sexual favours with police”.^{xxvii} For me, this framing does not do justice to the very real threat of violence both individual and institutional that police custody represents for sex workers in most settings, including the Zambian one. Nor does it explain how such sexual coercion functions socially or politically for the state actors in the equation. I will attempt to analyze this dynamic later on.

Nonetheless, women did distinguish between when they were having sex under duress and when they were being forced against their will. Their accounts make it important to take into consideration consent, while not dismissing that even when consent was present, there were very real and potentially violent constraints.^{xxviii} American researchers studying sexual violence by police against female citizens have chosen to conceptualize the existence of a continuum of acts; while there is a distinction made between forceful pressure to have sex and rape, both fall under the rubric of sexual violence.^{xxix}

Becky's account offers an important exploration of this issue. She had previously been raped by a police officer against whom she brought charges. She distinguished in her accounts between rape and sex for release from jail but she also articulated a relationship between the two. Refusing to consent to sex with police could sometimes result in rape. Her account of sex for release illustrates the complicated relationship between consent and force in such dynamics:

-The police don't behave good. Beating us. Taking us to the police station there. Locking us up. If you are lucky, you find some police there and if you sleep with him, he will let you walk out. But if you don't sleep with him, he won't let you out. Then you stay 3 days or two weeks. But if you sleep with them, you get out the same day.

-What happens if a girl says "no"? Do they ever force girls to have sex?

-If a girls says "no", they can force her. They sleep with us every month, every day they come there [where sex workers work]. They don't use condoms. They do force us. Me, I used to go with that female condom inside so I can't contract any diseases, everywhere I go, even in town, I take my female condoms. If there are four police officers, you are going to sleep with four of them.

They do watch [other police having sex with sex workers]. They are not going to tell on each other, they are police. If there are three of us sex workers, then they force all of us, maybe three [of us] in one day.

Amora also recounted rape following a woman's refusal to have sex with police. For Amora, rape was framed not just as a possibility but specifically as a form of punishment that police could exert if sex workers refused to have sex with them.

Sometimes the police force the girls to have sex with them, then they let her out of the police station.

-What happens if a girl says no ?

-Then they punish her. Like they do. She has to weed all the grass outside the police station, mop the station, cook for them. Do many things, and then they let her go. Sometimes, the police take her to the police or for a walk with them for a long time and have sex with them. This happens sometimes. Girls fear the police, when you just see their car, you run away. Some they are very harsh. They can hold you for one week in custody.

So while having sex with police could protect you from being detained, refusing to do so resulted in retaliation from police: detention (often prolonged detention resulting in economic penalty), forced labour or rape. In a case in 2002, in Lusaka, refusal resulted in severe physical violence. According to a report by the OMCT: “a female sex worker was arrested by police and allegedly tortured after refusing to have sex with the five police officers on duty at Woodlands police station on the night of her arrest.”^{xxx}

Given that the severity of the punishment is often unknown to sex workers, submitting to sex with police officers can be one means of attempting to mitigate violence and bodily harm against themselves. Research on sex between police officers and sex workers must interrogate the consequences of a sex worker refusing sex to paint a complete picture of what is occurring. Such information is key to understanding that what may at first appear to be consensual relationships may be women enacting “consent” in an attempt to protect themselves from more severe violence. Some researchers have termed such a relationship “defensive acquiescence”.^{xxxi} In situations that were not rape, though sex workers may have deployed defensive acquiescence to try and exert some control over sex with police, sex workers were almost always unable to control the terms of such sex. They were unable to enforce condom use or control the

number of men with whom they would be required to have sex. In many instances, such encounters involved sex with 3, 4 or 5 different men. Unlike Becky above, most women did not wear female condoms every time they were in public to prevent the HIV risk that the coerced conditions of such sexual encounters presented. Gertrude tells that:

Last Christmas, four of my friends were caught and taken to the cells. They slept with them [the police officers] so they wouldn't be locked up. Then they were released. The police didn't use condoms.

Carolina asserts that this is commonly the case:

Do police use condoms?

-I don't know because I never had sex with a policeman. My friend the other time, she went with a policeman, they used condoms. But three quarters of policemen don't use condoms, that is what I know.

Perhaps the most useful framing is to understand sexual coercion here as a means of controlling women's bodily integrity, as well as their freedom and labour. Indeed, sexual coercion by police goes beyond moral and physical harm, it a systemic barrier to sex workers' autonomy- their ability to earn their livings. Such a framing allows parallels to similar sexual coercion that women labourers face in Zambia.^{xxxii} Carolina describes this: "It is difficult to get a job here in Zambia. If you want a job, like in a bank, you have to have sex with the manager or the director. If he is HIV-positive....ah, it is difficult, it is not easy." Charity also described sexual coercion in women's labour in the informal sector, doing domestic work:

The problem here in Zambia is you go work as a maid. You start working- I've done it before... For me, I was raped, just once in my life. By my boss. When I

was working as a maid in that house there. He raped me. It was very bad. I was there in that house. It was very, very bad. I don't ever forget that night.

Helen Epstein similarly describes the prevalence of women market vendors in Zambia who have to have sex with police in order to keep their stall at the market or with border guards in order to be able to transport their goods.^{xxxiii}

Despite these commonalities, by virtue of the criminalization of their work, sex workers were all the more frequent targets for such coercion by agents of the state. This link was clear to sex workers in Lusaka, even before the increase in repression in 2004. In 2002, sex workers took their complaints of repeated sexual violence by police to the Minister of Social Welfare.^{xxxiv} The sex workers' complaints met with initial support from social welfare minister Judith Kapingipanga, who went "undercover" as a sex worker to confirm it was "true".^{xxxv} Sex workers then took their campaign against sexual violence by police to the media and the streets:

A group of prostitutes staged a surprise protest march on Tuesday against police officers, whom they accused of raping them each time they were arrested.^{xxxvi}

A few days later, sex workers demanded the legalization of sex work to take them out from under the sexual control of the police:

Zambian sex workers, who recently staged a protest against police harassment, now want a law that prohibits prostitution to be abolished.

"In some countries prostitution is allowed because it is also a way of earning an income," said a prostitute who asked not to be identified.

"Every time we are arrested, the police demand sex from us instead of taking us to court. We are tired of being abused and the government should just legalise prostitution," [a prostitute who had participated in the march] told state radio.^{xxxvii}

Sex workers' demands provoked a swift backlash from Minister Kapingipanga:

"Actually, they should be arrested and charged for practising prostitution, which is illegal in Zambia," said Judith Kapingipanga, minister in charge of social welfare.

"I was only disappointed that police officers who were supposed to have arrested sex workers ended up abusing them," said Kapingipanga, who forced the police to open an inquiry into the affair involving the five officers.

Kapingipanga said she did not support prostitutes when she instructed the police to take disciplinary action against those alleged to have abused sex workers.^{xxxviii}

Sex workers' call for systemic change to address routine rape by state officials, elicited hostility from other quarters as well:

"These people are sick and need help. They should not mistake our sympathy for them as support for what they are doing," said Pastor John Mwanza, from a Pentecostal Church.

"Nobody can support prostitution especially in this era of Aids," said Christine Musonda, a social worker involved in the rehabilitation of sex workers.^{xxxix}

In the end, the investigation into sex workers' accusations of frequent rape by police officers was not pursued and no police officers were disciplined or demoted.^{xi}

VII Adolescent Sex Workers and Repression

All of the sex workers I interviewed were over 18.^{xli} Some of the sex workers I interviewed, in particular in Site-and-Service started trading sex when they were minors. For most of those, this was during adolescence (15, 16, 17). In a few cases, this was at the ages of 12 or 14. Most of the older sex workers expressed strongly that at 12 or 14, girls were not old enough to trade sex. They were also all too aware of the concrete adult worlds many of these girls and teenagers were trying to survive in and their steadfast determination to eat, support younger siblings in orphaned households and go to school. The complexity of these issues is not discussed here. This section aims however to examine how the law and police responded to the issue of minors trading sex.

Laws exist in Zambia that criminalize child prostitution although they are rarely enforced.^{xlii} Nonetheless the government has relied on police in its attempts to stop child prostitution. In 2004, Zambia came under fire from the United States Trafficking in Persons (TIP) Report for not doing enough to stop child prostitution (which they referred to as “child trafficking”). Zambia took notice and in 2005, “the government funded a program that removed from the streets 5,000 children vulnerable to trafficking.”^{xliii} Street kids were sent to “rehabilitation camps” run by the Zambia National Service (ZNS) the state security department that oversees the police, where they were to stay for up to 18 months and be trained in skills such as agriculture, tailoring, and carpentry.^{xliiv} While some ZNS camps were exclusively for boys, others also received girls. In a 2004 parliamentary debate it was announced that: “Already, girls’ hostels are under construction at Chiwoko [ZNS] Camp in Katete.”^{xliv} By 2007, it was reported that 200

girls had been placed at Kitwe and Katete ZNS camps.^{xlvi} In 2009, another camp was reportedly expecting 200 girls.^{xlvi}

In 2007, 46 kids had reportedly run away from one of these ZNS camps.^{xlvi} In 2008, a report found that camps largely failed in their mission to “rehabilitate” street kids as upon leaving, they had returned to the streets to try and earn a living.^{xlvi} A 2007 report from the US state department seems to confirm this:

Although the government removed and rehabilitated some children who lived on the streets during the year, the presence of an estimated 20-30,000 such children throughout the country contributed to the proliferation of begging and prostitution.¹

Even towards children and youth, the state response was primarily repressive rather than one based on social supports and intervention- not to mention access to basic education. This coercive approach is reflected in sex workers’ accounts. Sex workers of all ages recounted that police often justified punishment, as a means of deterring the trading of sex which was considered morally wrong and dangerous. For many police, this impetus was heightened with young adolescents and similarly, it translated into detention and forced labour, and on occasion, police violence. Sex workers disagreed, however, about whether young women were treated more or less harshly than older women.

For Rose, an older sex worker, underage girls were treated better. Furthermore, in her view detention was an appropriate response to young women in sex work:

The police just catch the young ones. They cuss them and catch them. And we support them because she is very young to do sex work. They take them to cells and ask who the parents are and call the parents. They do not beat the young ones. They just keep them in the cells, maybe 3 days, that way maybe she can stop sex work.

Gloria, a 20-year-old who had started working as a 16-year-old, gives a description similar to Rose's: "The police talk to us everyday and tell us to stop going to town. They give us younger ones work cleaning the police station and surrounding area. They use you like this, then you go home."

Veronica, who was two weeks shy of 19 and had begun working at 16, told a different story. The disapproval of young women selling sex, translated into violence from police or violent punishment from family members. Much like the descriptions above, none of the state interventions described in any way palliated the crying needs to which many young women selling sex were attempting to respond. In Veronica's case, she had been orphaned with her two brothers and placed alone to live with an uncle who disdained her and wouldn't provide for her or her schooling.

Underage sex workers are treated different. They will say "You should be sleeping at your mother's house." If they find someone who is 15 in town, for them it is very difficult. The police beat them so that they shouldn't be doing this. And then they are beaten by their parents if they are caught. Even me, I was beaten by my uncle for bringing badness into the house. But you are giving me nothing, what am I supposed to do ?

The underage are beaten by police. Maybe to under-rate them. You know, to say they are not supposed to do be in that work, they should stop, something like that. I know one girl. I just saw her there, she was like me, a sex worker. I asked her how old she was and she was like "Me, I am 14 years" "You are 14 years ? How are you ?" And that's when she started telling me: "Me, I was beaten by the

police. Just look at me.” It was terrible. It was very very terrible. She was beaten. With big sores on her foot. I didn’t have any money at that time, but I really wanted to pay for her to go to the clinic. You know, so that maybe, she could be given some painkillers at least.

The differing reports make it hard to conclude whether violence against minors was a generalized phenomenon. However, they do converge on the point of police detention. The question of differential treatment of youth was not on the questionnaire but emerged in some of the interviews. As such, I do not have sufficient data to assess if repression shifted following the 2004 curfew. Further research to explore the ways in which minors trading sex are impacted by police responses would be a valuable contribution to available data.

VIII Seeking Justice

The repression of sex work created an antagonism between law enforcement and sex workers and put police at odds with having to offer any equal access of protection of the law to sex workers. This having been discarded, violence by police officers occurred with almost total impunity. For many sex workers, including Rose, seeking justice in such cases was futile in part because of the complicity of police officers in perpetrating violence against sex workers: “It isn’t possible to go to police [when they beat us]. Eeeeh....I am a prostitute ! They can’t help you. They have beaten about 15 of my friends. They know that they beat us.”

The inaction of police is apparent in Carolina's account.

This friend of mine she complained at the police station [about being forced to have sex by other police officers]. And they told her [if it happens again], the time you are arrested for loitering, then you should phone or get something at least to prove, get something from him, then you bring it to the police station.

The police's reported response belies their knowledge that sexual violence by police is common occurrence in the context of enforcing the loitering laws. It also demonstrates both a patent lack of concern with preventing future incidents from happening. Two incidents broke through the impunity and both were recounted to me by Becky. They represent two very different avenues for redress. In the first case, Becky reported a police officer who had raped her to the police: "They accused the police [officer] of forced sex. I went to Victim Support, I did the programs. I gave his name. They got him and locked him up. They stopped him working because of my report."

Victim Support Units in many countries are staffed by women and specialized in dealing with violence against women and children. The reception sex workers receive can be far more supportive than that from regular police officers or patrollers. This is true in other parts of the region. In a similar case in Namibia, Victim Support was the only institutional means that a sex worker had managed to pursue to receive redress for being raped by 3 police officers while in detention.^{li}

The second incident was of spontaneous sex worker resistance. It took place on the street:

One time we beat that policeman. He came to our arrest. He took cash so the sex workers beat him. Then the other police came and arrested us but somebody said to leave us [alone], that we are just trying to keep ourselves.

Becky was one of the sex workers, who, having fought back against injustices in many ways, saw them as directly connected to systemic repression and abuse of sex workers. She spoke of going beyond individual attempts at redress and believed in the need for sex workers to collectively fight for their rights.

Impunity for violence against sex workers created by police repression often extended to attacks by individuals who were not police officers. One sex worker, Angela, spoke of a positive experience with police who had helped to apprehend a man who threatened her with a gun. Veronica had a mixed perception of the police:

Do the police help ?

-It depends on the person, others they are stupid, they will just get money from [the attacker]. Others they will tell him to go, chase you like a dog.

Collusion between attackers and police is more forcefully echoed in Chilechi's account:

Many sex workers are raped but won't go to the police. They fear. The police say to her "Why are you doing this?". So they just keep quiet. Maybe the man has a lot of money. He will pay the police and they will just go with it. So, if you go to

the police and say this man raped me. They will say “No, you are lying. You are just a prostitute, maybe it is you who has raped him.”

For most sex workers the combination of stigma, the hostility and violence of police, and the corruption that wed attackers and law enforcement made it impossible to obtain justice. Veronica sums up the thoughts of many sex workers when she says:

You can not go to the police because many of them are against sex workers. You are not given any rights, so even if someone beats you, you’ve got nowhere to go, so you just go on without doing nothing. Because you won’t be supported.

This impunity fueled violence against sex workers from unknown assailants, community members and family members, as well, of course, from police.

IX Working Conditions 2000-2008

There were conflicting reports on whether the number of clients had stayed the same or diminished in recent years. Among the many factors to take into account, Beatrice and Sarah were the first to point out that their increasing age was probably one of them! Some sex workers spoke of clients diminishing in the past ten years as people became afraid of HIV and associated sex workers with it. There is some support in the literature for the idea that paying for sex decreased in Zambia over this period. Corridors of Hope report a decline in truck drivers reporting paying for sex between 2000 and 2006.

This may also reflect the extent to which truck drivers are increasingly aware of what they are supposed to answer to the question or the fact that the interviews were not with the same core group.^{lii}

In some cases, sex workers reported that clients had seen many of their friends who were sex workers or fellow clients die and feared purchasing sex could mean the same for them. Mary describes this: “There are less clients, maybe it is because of the HIV rate, they are scared they could get HIV. Because a lot of men have also died of HIV. So they are scared of sex workers. A number of my customers died of HIV.”

Interestingly, very few sex workers reported condom use or demand for condom use from clients increasing in tandem to this trend. For Mary, the lower number of customers to pick from made it harder to enforce condom use.

Being blamed for HIV, particularly when it came from government sources, made sex workers more feared and thus impacted on potential clients. Grace felt that overall there were the same number of men willing to pay for sex if sex workers were able to creatively evade HIV-stigma by posing as non-sex workers:

These women who are married, they say we are giving it [AIDS] to their men. Even government people say the same.

-Does that affect you when you are working ?

-Yes, too much. Clients say “You can give me some diseases so tonight I am not going to be with you.” For example, those men here from Kabwe,

they can't take me, because they know I am a sex worker...only maybe if they are from Ndola...Lusaka...

Since 2004, sex workers felt that working on the street had become more dangerous since police could target them for curfew offenses. Hiding from the police made it difficult to attract clients. Furthermore the street marked women as "sex workers" in a way that was more explicit than in the clubs and being publicly identified as a sex worker had become quite dangerous. In many cases, women chose to move in to clubs to pick up clients.

For Juliette, the pronounced fear of sex workers as vectors of HIV intersected with the passing of the curfew however, the decrease in clients and therefore incomes, without an increase in demand for condom use, meant accepting more unprotected sex.

There are more women working in the clubs now because it is safer. When that law was passed and they said we were the ones spreading HIV-AIDS around, then there were also fewer customers. So you struggle, sometimes you display yourself, no one is picking you, you go home with nothing. It makes it hard to say no to 'live' sex. Way back, we used to use protection, now, we are desperate. It has made it harder for sex workers to protect ourselves. Because it is really up to the client. You have to make a living, so you go for it.

Jessica describes a similar situation:

Business is better in the bars than in the street right now. Most men are in the bars now. It is worse on the streets recently because people are aware of HIV so people are scared to pick up along the street. It made it much harder to make money there. You hide, people can't see you. Business is slower. Especially when it is cold. You just stand there, eh ! Or you just sit in a bar. It changed well....

[roughly 2005] when I went back it was really slow, it did not used to be like that. But even in the bars it is slow since people got scared of AIDS.

It is less money since it is slower. You go there at night, we call it work, you go to work, and the money might be 50 000K, 100 000K. Not enough. It affects if you use condoms. You will go live for an extra 50 000. Even before it was so slow, girls would go live for more money. If you are desperate, especially us mothers, the kids expect us to bring back money and food. It is harder now to use condoms when there is less money.

Pisani disputes the notion that even among the poorest sex workers, enforcing condom use results in lesser incomes.^{liii} However, it is possible that the belief that it does may lead sex workers to forego condoms. More research is necessary to evaluate to what extent paid commercial sex diminished and to what extent a decline in clients can affect sex workers' conditions and incomes.

Mary, Tine, and Juliette felt that changing the law was necessary to improve their working and living conditions. They felt that the illegality of their work made them easy targets. In Juliette's words: "There should be a law for sex work passed in parliament. So it would be legal. Then people would respect you. Right now, what we are doing is illegal so no one respects us."

Macy, Veronica and Gertrude hoped for an organization to defend sex workers' rights, hoping it would bring greater unity amongst sex workers and an end to police violence.

IX Analyzing A State-Sponsored Witch-Hunt

When a state represses sex workers, it is not a static dynamic. As we have seen, historically, the terms of such repression fluctuate. As Pheterson puts it: “State reprisal against women in transgression is (...) sometimes a means of readjusting the terms of control in accordance with prevailing circumstances.”^{liv} In accordance with this idea, sex work has been tolerated in Africa, within limits, when it supports military policy^{lv} or the creation of ghettos of predominantly male labour.^{lvi} Conversely, state imperatives to control a group’s migration, enforce segregation, or to reinforce “nationhood” and its concomitant security powers can provide the impetus for renewed periods of repression and imprisonment or displacement of sex workers. This can be particularly true at a time of social flux or contestation.^{lvii}

The repression sex workers describe taking place in Zambia between 2004 and 2008, is of a particular tenor: one in which state actors violently scapegoated sex workers for HIV. Scapegoating on that scale was possible to enact due to a number of factors that I explore in-depth below: the existing repressive mechanisms such as the loitering laws, as well as the new curfew law; an incentive by police to repress; the lack of contradiction with national public health policy for HIV which emphasized stopping sex work (rehabilitation) as an approach for sex workers; and the historical legacy of narratives of sex workers as sites of disease and social threats. As a policy it also offered potential benefits to the national government. In terms of international relations, combating sex work fit well with the proscribed anti-prostitution approach of American foreign aid, of

which Zambia was a major recipient at the time. Domestically, blaming sex workers for the HIV epidemic deflected responsibility for the government's failures to address the epidemic and precluded the political costs of these.

The pre-existing social control of sex workers under the law meant that the mechanism with which sex workers were scapegoated did not represent a brusque departure that could have cost the national government support. Even though the curfew was new, previous measures had similarly been enacted in the 1980s. Police had a particular interest in this means of cracking down on sex work since it provided them with both the license and the cover to scale up extortion of sex workers. This not only ensured their support in applying the measures, but meant they acted as both judge and jury in repressing sex workers. In Scheingold's analysis of the politicization of street crime and resulting scapegoating of Blacks in England in the 1970s, he explains that : "Repression is in any case attenuated by the partial autonomy of the criminal process, which is sustained by institutional practices and legal values."^{lviii} This was not the case for most sex workers in Zambia, whose repression was wholly enforced by the police, in some instances in collaboration with immigration police.

Measures to stop the selling of sex did not contradict Zambia's health policy for HIV. As we explore in further depth in chapter 7, the National Policy on HIV-AIDS-STIs-TB voted in 2005 focused on rehabilitation for sex workers. Naming access to health services as a priority for sex workers might have created a road-block to measures

which dispersed sex workers and drove them into hiding. This, however, was not the case.

Blaming sex workers for HIV was a politically viable option in Zambia for a number of reasons. Sex workers in Zambia had historically been the targets for social anxieties by a host of state and social actors. They had been cast as the “spreaders” of syphilis in the 1920s^{lix}, sources of immorality in the 1930s and 40s^{lx}, enemies of nationalism and debased womanhood in the 60s^{lxi} and obstacles to development in the 70s and 80s.^{lxii} As such, they were a familiar target to attack. Furthermore, HIV was associated with prostitution and labeled “a prostitute disease” in the first decades of the epidemic in many countries and so Zambian politicians were hardly taking a novel position.

The aim of reducing sex work fit well within the foreign policy objectives of USAID, particularly under PEPFAR, of which Zambia had just become a major recipient. PEPFAR had made clear its position against sex work by its requirement of grantees (and in one case, a government) to sign the anti-prostitution pledge.^{lxiii} PEPFAR had further prioritized “abstinence and fidelity” as the approach to HIV-prevention and Uganda was held up by the United States as the model pupil of this approach at the 2004 World Aids Conference in Bangkok.^{lxiv} Uganda’s “abstinence and fidelity” had been partly achieved through the enforcement of local councils who led attacks on young women who went to discos or were considered to be sexually misbehaving.^{lxv} The strength of United States’ desire to advance the reduction of sex work and the promotion of rehabilitation as a

global HIV response would be apparent in the 2006 UNFPA consultations on the UNAIDS Guidance Note on Sex Work and HIV. In the face of proper protocol, a first draft of the guidance note was refused by American officials who made UNAIDS put a larger emphasis on reducing sex work.^{lxvi} If there were not direct pressures on the Zambian government to repress sex work, then at the least there was the enticement that such repression, particularly if twinned with a strong focus on abstinence and fidelity could win them much American support and accolades- particularly if data could be marshaled to show a decline in HIV incidence.

The other major American foreign policy tool that has impacted national governance on sex work in many countries is the “Trafficking In Persons” (TIP) Report, which grades countries according to their performance in fighting trafficking. The report is the cornerstone of Bush’s fight on trafficking - the “special evil” that the United States would take the global lead in fighting which was announced in a 2003 UN speech.^{lxvii} True to the Christian Evangelical influence on the Bush White House, the report takes an anti-prostitution approach that often conflates sex work and trafficking and seeks a repressive approach to the sex trade as a means to curb trafficking. Graded into essentially four tiers (1,2,2-watchlist and 3), countries in the third tier face economic sanctions that include withholding foreign assistance as well as US opposition to assistance from the IMF or World Bank (exceptions are humanitarian, trade-related and certain development-related assistance).^{lxviii} According to the Center for Health and Gender Equity (CHANGE): “Governments get the clear message that brothel raids and more stringent anti-prostitution laws please the U.S. government.”^{lxix} Research on the

impact of the TIP Report in Thailand, Cambodia and Vietnam found it had led to greater crackdowns and police raids by national governments:

Eager to score well, informants report that governments conduct brothel raids and evictions to avoid USG funding cuts as a result of poor marks. It has been observed by two informants that “as soon as trafficking ratings drop, a raid takes place at which time the observed country’s marks improve.”^{lxx}

The TIP report appears to have had an impact on the Zambian government. As mentioned above, following a reprimand in 2004 that it was not doing enough to stop child prostitution, the government put into action the large-scale removal of street kids and their placement in “rehabilitation” camps.^{lxxi} It is highly plausible that the TIP Report encouraged the government to escalate crackdowns on sex workers as well.

Sex workers spoke of an increase in crack-downs beginning in 2004, this coincides with the year that Zambia was moved for the first time on to the Tier 2 Watch-List. By 2005, Zambia returned to Tier 2 where it stayed until 2008.^{lxxii} In 2008, it was again demoted to the Tier 2 Watch-List despite the US state department’s lauding of Zambia’s efforts to repress prostitution. The Zambian government is congratulated by the US State Department in 2008 for efforts that seem directly linked to the crackdown on sex workers for spreading HIV, namely the training of police and military about how sex work is a danger that must be combated: “Standardized training in police and military academies includes a module that addresses reducing the demand for commercial sex acts as well as the dangers of commercial sexual exploitation....”^{lxxiii} The government is further

congratulated for its efforts to spread the message in the media and through publications:
“The government worked with NGOs on an ongoing basis to publicize the dangers of prostitution through radio announcements and the distribution of pamphlets and posters.”^{lxxiv}

Whether prompted by US policy or not, Zambia’s increased repression of sex work, at the least worked in its favour in terms of its relation to the United States. Scapegoating sex workers also had concrete domestic political value for Zambian politicians: in 2000, when sex workers remember the first increase in being scapegoated for HIV by Zambian government officials, the epidemic hit a prevalence rate of 17.9% of the country.^{lxxv}

Blaming sex workers for HIV enabled state officials to deflect responsibility for the devastation most Zambians were facing and their record of 17 years of seemingly intractable passivity towards HIV up until 2002.^{lxxvi} While treatment finally became available beyond a very small scale in 2004 when HIV was declared a national emergency,^{lxxvii} by 2007 more than half of those who needed it still were not receiving it^{lxxviii}. It is hard to underestimate the sustained suffering HIV continues to wreak. During the first decade of the 21st century, average life expectancy spiraled down from 60 to 37 years, largely due to AIDS.^{lxxix} Rates of newly trained teachers were unable to keep up with the death rate of current teachers, the medical infrastructure was strained under the deaths of staff and brain-drain to lower risk environments and a generation of orphans was struggling to raise and feed their siblings.^{lxxx} The death of working-age people had

led to food shortages in families and communities.^{lxxxix} On a personal scale, most
Zambians had lost loved-ones to HIV. To illustrate what this looks like for many on an
individual scale, one social worker I interviewed at the age of 26 had lost 9 relatives to
HIV.

Times of widespread suffering or deprivation have often led to the persecution of
women in transgression. In her book on gender and Sub-Saharan African history, Parpart
explores this theme further:

When communities faced particularly difficult social or economic circumstances,
wicked women became the locus of moral panic. Anxious to preserve existing
social orders, local and state officials blamed unconventional women for
community problems rather than acknowledge that their own programs and
policies created difficulties. These women and their actions were construed as the
cause rather than the symptom, thereby enabling others to lay the responsibility
for all the scourges of society on their laps.^{lxxxii}

In Zambia, this has proven particularly true for sex workers, especially in regards
to outbreaks of disease. The response to HIV has relied only in a few sporadic incidents
of increased medical control of sex workers, such as the mandatory testing of sex
workers.^{lxxxiii} Rather, much as occurred close to a century ago with syphilis, it has been
through increased social controls such as detention, deportation and public blaming that
the Zambian government has targeted sex workers. This research adds to the historical
literature by documenting women's experience of these events and their articulation and
provides two important findings. The first is that these periods of increased repression are
enacted by police with tremendous physical and sexual violence. The second is that a

great deal of this repression took place in the public eye: the beatings and stripping of sex workers in Kabwe, the public whippings and blaming for HIV described in Lusaka.

This repeated spectacle of violence by state actors against sex workers is informative on a number of levels. Firstly, it speaks to the level of tacit complicity - if not sponsorship - of higher authorities and belies the fact that these incidents are not isolated instances of corruption or abuse of power. Secondly, paired with government statements to the media relating sex workers to murderers and public campaigns to denounce prostitution (“commercial sexual exploitation”), it indicates a desire to communicate with a broad audience. This lends credence to the notion that scapegoating sex workers was part of a broader strategy of governance.

The political instrumentalization of HIV-related stigma may have served different purposes at different times. In his study of why the HIV crisis has yet to topple a government in Africa even though famines of far less devastation have done so, deWaal offers two explanations: the time it takes for HIV to evolve and government denialism of HIV.^{lxxxiv} I believe Zambia offers a different factor to consider. Rather than deny HIV, during his presidency from 1991-2002, Frederick Chiluba adeptly stigmatized HIV. Casting HIV as the result of “immorality”, a failure of “personal responsibility” and a marker of illegitimate sex meant that to protest the government’s response (or lack thereof) was to side with the affected and infected, and thus risk being one of the stigmatized.

By 2004, when the worst scapegoating described in this thesis begins to take place, Levy Mwanawasa, also of the Movement for Multiparty Democracy, had been in power since 2002. (He would remain so until the summer of 2008). Significant changes, such as the availability of treatment due to the Global Fund and PEPFAR, make it unlikely that HIV could have destabilized the government at this point, particularly since it had yet to. Nonetheless, deflecting communal rage for HIV onto scapegoats precluded any of the potential political costs of the party's previous failure to respond, or of the on-going devastation of HIV.^{lxxxv} It is also possible that it was not just averting costs, but accruing benefits that politicians had in mind. In this view, singling out sex workers was a means for the government to gain the population's confidence by projecting itself as capable of enforcing moral order and able to take decisive action to "protect" Zambians from HIV in a way previous politicians had failed to do.

In 2004, the Zambian government ushered in a period of increased state repression of sex workers that took place in the name of protecting the nation from HIV. A number of IR and national factors made scapegoating sex workers politically viable, and even desirable, for the Zambian government. The next part of this thesis describes what, in turn, such state repression rendered possible.

ⁱ In fact, six sex workers worked prior to 1999, however in the case of Precious it was through a few private contacts so she was never affected by changes in repression.

ⁱⁱ D. Hampande, "Sex Workers to be arrested," *Daily Mail*, October 22, 1999

ⁱⁱⁱ Joanna Bourke-Martignoni, "Violence Against Women in Zambia: Report Prepared for the Committee on the Elimination of Discrimination Against Women," (Geneva: World Organization Against Torture (OMCT), 2002).

^{iv} "Zambian police crack down on prostitution in tourist town," *Agence France-Presse*, December 7, 2000.

^v "Nakonde sex workers test positive to STDs," *Times of Zambia*, August 15, 2001.

^{vi} Not all sex workers had worked at this time. 6 sex workers had started sex work after 2004.

^{vii} "Parliamentary Debates for the First Session of the Tenth Assembly," *Zambian Parliament*, Wednesday, 28th February, 2007.

http://www.parliament.gov.zm/index.php?option=com_content&task=view&id=468&Itemid=86&limit=1&limitstart=3 Accessed March 10, 2010

^{viii} "Parliamentary Debates for the First Session of the Tenth Assembly," *Zambian Parliament*, Wednesday, 14 February, 2007

http://www.parliament.gov.zm/index.php?option=com_content&task=view&id=468&Itemid=86 Accessed March 10, 2010

^{ix} "Zambia: 60 Zimbabwe Sex Workers Deported," *Lusaka Times*, May 5, 2008.

^x "Immigration Deports 60 Zim Prostitutes," *Times of Zambia*, May 6, 2008.

^{xi} "Immigration Deports 60 Zim Prostitutes," *Times of Zambia*, May 6, 2008.

^{xii} Interview with Malala Mwendela at ZARAN, Key informant, May 10, 2008.

^{xiii} Michel Foucault, *Discipline and Punish: The Birth of the Prison* (New York: Pantheon Books, 1978).

^{xiv} Here the term refers to sex workers.

^{xv} 10 000 Kwacha was 3,00\$ CAD at the time of my research.

^{xvi} The shambok is a long whip usually made of elephant-hide meant to induce tremendous pain. It was used in the colonial era to punish slaves and labourers (known as the "chicotte" in Congo and by police under apartheid South Africa).

^{xvii} See for example: Crago, Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009).

^{xviii} See for example: Anna-Louise Crago, *Arrest the Violence: Human Rights Abuse Against Sex Workers in 11 Countries in Central Eastern Europe and Central Asia* (Budapest, Hungary: SWAN, 2009).

^{xix} Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009) and Crago, op. cit.

^{xx} 10 000 Kwacha was 3,00\$ CAD at the time of my research.

^{xxi} Zarina Geloo, "Zambia: Sex Workers Fed Up with Sharing their Loot with Police," *Inter Press Service*, April 30, 2002. <http://ww4.aegis.org/news/ips/2002/IP020419.html> (Accessed March 10, 2010)

^{xxii} Karen Tranberg Hansen, "Negotiating Sex and Gender in Urban Zambia." *Journal of Southern African Studies* 10, no. 2 (Apr., 1984): 219-238.

^{xxiii} Mildred Mpundu, "Want to see corruption in Zambia? Take a taxi." *World Hunger*, March 20, 2007. <http://www.worldhunger.org/articles/07/africa/mpundu.htm> (Accessed March 10, 2010)

"Many police officers live in squalid townships or end up sleeping in makeshift shacks or even horse stables. They struggle to meet their children's school fees. "Delays in paying salaries, lack of uniforms, accommodation, transport and other necessities are some of the factors contributing to officers' low morale," says Sylvester Tempo, general secretary of Zambia Congress of Trade Unions (ZCTU). "Tembo says anti-corruption strategies need to take in to account the economic reasons why traffic officers are soliciting bribes, and feels people should not be quick to condemn."

^{xxiv} Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009)

^{xxv} Anna-Louise Crago, *Arrest the Violence: Human Rights Abuse Against Sex Workers in 11 Countries in Central Eastern Europe and Central Asia* (Hungary: SWAN, 2009).

^{xxvi} For examples in the mainstream media see: "Ex-cop gets jail time for free sex" *News Talk Auckland*, December 12, 2009. <http://www.allvoices.com/s/event-4820929/aHR0cDovL3d3dy5uZXdzdGFsa3piLmNvLm56L25ld3NkZXRhaWwxLmFzcD9zdG9yeUIEPTE2ODA3OA==> (Accessed March 10, 2010); "Free Sex for Hong Kong Cops Draws Fire," *The Associated Press*, November 11, 2003.

For examples in academic literature see: AKM Ahsan Ullahi, "Prostitution in Bangladesh: An Empirical Profile of Sex Workers" *Journal of International Women's Studies*, 7 no. 2, (November 2005): 111-122 ; Sharvari Karandikar, "Need for Developing a Sound Prostitution Policy: Recommendations for Future Action," *Journal for Interdisciplinary and Multidisciplinary Research*, 2 no. 1, (2008).

<http://www.scientificjournals.org/journals2008/articles/1360.pdf>

^{xxvii} For variations of this see: D. Hickey, "'They Are a Worse Danger': Policing Prostitution in Washington DC": Policing Prostitution in Washington DC (Poster Presented at the XVII International Aids Conference, Mexico, August 3-8, 2008, abs. THPE1113): "Sex workers experienced negative interactions with police (...) such as police demanding sexual favours (17.3 %)" ; Q.A. Qarim, SS Karim, K Soldan and M. Sondi, "Reducing the risk of HIV-infection among South African Sex Workers: Socio-economic and Gender Barriers," *American Journal of Public Health* 85, no. 11 (1995) p. 1523: "The police occasionally (...) seek free sexual favours." p.1523

^{xxviii} A New Zealand judge has recently framed this issue as “inducing sexual consent by way of threat: “New Zealand cop jailed for forcing prostitute to have sex,” *IANS*, December 17, 2009. <http://www.allvoices.com/s/event-4820929/aHR0cDovL3d3dy5uZXdrZXJhbGEuY29tL25ld3MvZnVsbG5ld3MtMTI5ODIuaHRtbA==> (Accessed March 10, 2010)

^{xxix} Peter B. Kraska, Victor E. Kappeler, “To serve and pursue: Exploring police sexual violence against women,” *Justice Quarterly* 12, Issue 1 (March 1995): pp. 85 – 111.

^{xxx} *Women in Zambia: Report Prepared for the Committee on the Elimination of Discrimination Against Women* (Geneva: World Organization Against Torture (OMCT), 2002).

^{xxxi} Susanna Rance, "Control and Resistance: Empowering Strategies in the Reproductive Lives of La Paz Market Women," *Empowerment of Women Research Program: Bolivia Report No. 1* (Arlington: JSI Research and Training Institute, 1994)

^{xxxii} In Zambia, there are no laws against sexual coercion in the workplace, such as sexual harassment laws. Even if there were however, it is unclear if they would protect women working in the informal sector, and in particular, sex workers.

^{xxxiii} Helen Epstein, *The Invisible Cure: Why We Are Losing the Fight Against Aids in Africa* (Picador: New York, 2008).

Such sexual encounters, when referring to women working in the informal sector have sometimes been labeled as “transactional sex.” This is a misnomer. Transactional sex generally is an exchange whereas, sexual harassment is an abuse. Conflating the two is often done in the name of imposing more restrictions on women’s means of self-sufficiency without punishing abuse. The International Labour Organization (ILO) defines harassment as involving a quid pro quo or hostile environment (including coercion). See: ILO, *Declaration on Fundamental Principles and Rights at Work Sexual Harassment at Work* (Geneva: ILO, 1996) http://www.ilo.org/wcmsp5/groups/public/---ed_norm/---declaration/documents/publication/wcms_decl_fs_96_en.pdf

^{xxxiv} Zarina Geloo, “Zambia: Sex Workers Fed Up with Sharing their Loot with Police,” *Inter Press Service*, April 30, 2002. <http://ww4.aegis.org/news/ips/2002/IP020419.html> (Accessed March 10, 2010)

^{xxxv} Ibid.

^{xxxvi} “Prostitutes Want Legalization,” *News 24*, April 28, 2002.

http://www.news24.com/News24/Archive/0,,2-1659_1174402,00.html (Accessed March 10, 2010).

^{xxxvii} Ibid.

^{xxxviii} Ibid.

^{xxxix} Ibid.

^{xl} Human Rights Watch, *Suffering in Silence : The Links between Human Rights Abuses and HIV Transmission to Girls in Zambia* (New York: Human Rights Watch, 2002), p.57.

^{xli} A key informant disputed one sex worker’s being 18, claiming she was 16. Since I cannot substantiate this fact, I have used her reported age.

^{xlii} “Zambia”. *Trafficking in Persons Report 2007*. U.S. Department of State (June 12, 2007) <http://www.state.gov/g/tip/rls/tiprpt/2007/82807.htm>

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- ^{xliii} "Zambia". *Trafficking in Persons Report 2006*. U.S. Department of State (June 5, 2006) <http://www.state.gov/g/tip/rls/tiprpt/2006/65990.htm>
- ^{xliv} "Zambia: Government Fails to Break the Street Kid Addiction," *UN Integrated Regional Information Networks (IRIN)*, June 11, 2008.
<http://streetkidnews.blogspot.com/category/1/africa/zambia-streetkid-news/Lusaka> (Accessed March 11, 2010): Viola Kamutumwa [child care specialist] is quoted saying: "Children need to be constantly reminded that there is no market for their services, but they have to create it themselves, otherwise they forget and the end product is what we are seeing now - they are back on the streets."
- ^{xlvi} "Parliamentary Debates for the First Session of the Ninth Assembly," *Zambian Parliament*, March 10, 2006.
http://www.parliament.gov.zm/index.php?option=com_content&task=view&id=327&Itemid=86&limit=1&limitstart=4 Accessed March 10, 2010.
- ^{xlvii} "Zambia State Dispatches K6bn for Youth Development," *Lusaka Times*, March 11, 2007.
- ^{xlviii} "Zambia: Govt injects K3bn into training of 600 needy youths," *Lusaka Times*, February 14, 2009.
- ^{xlix} "Zambia: 46 Ex-Street Kids Abandon Camp", *The Times of Zambia*, September 8, 2007.
- ^l "Zambia: Government Fails to Break the Street Kid Addiction," *UN Integrated Regional Information Networks (IRIN)*, June 11, 2008.
<http://streetkidnews.blogspot.com/category/1/africa/zambia-streetkid-news/Lusaka> (Accessed March 11, 2010)
- ⁱ Bureau of Human Rights, Report on Zambia, (Washington: US Department of State, 2007) <http://www.state.gov/g/drl/rls/hrrpt/2007/100511.htm>
- ⁱⁱ Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009)
- ⁱⁱⁱ Kamanga J et al. "Targeting long-distance truck drivers with behavior change messages in border and truck corridor of Zambia," (Paper presented at The 2006 HIV/AIDS Implementers Meeting of the President's Emergency Plan for AIDS Relief, Durban, South Africa, abstract 102, 2006); J. Kamanga, P. Ndubani, S. Siziya, L. Long "Measuring the effectiveness of intervention among female sex workers (FSW) and long distance truck drivers (LDTD) through cross-sectional measurement of trends of risky sexual behaviors in the Corridors of Hope project (COH), Zambia 2000-2006," (Paper presented at the International Conference on AIDS, Toronto Canada, August 13-18, 2006). <http://www.aids2006.org/PAG/Abstracts.aspx?AID=10787> (Accessed March 10, 2010):
- "Between, 2000 and 2003, there was a pronounced decline in the proportion of truck drivers reporting sex with FSWs from 32.3 % to 17.7%(p<0.000), respectively. In the same period, the proportion of truck drivers reporting sex with non-regular partners declined from 27.2% to 1.7%. Further, there was increase in men reporting faithfulness to their wives from 83% to 90% (p<0.01)."
- ⁱⁱⁱⁱ Elizabeth Pisani, *The Wisdom of Whores: Bureaucrats, Brothels and the business of AIDS* (New York: W.W.Norton, 2008).

- ^{liv} Gail Pheterson, *The Prostitution Prysm* (Amsterdam: Amsterdam University Press, 1996).
- ^{lv} Enloe, Cynthia. *Bananas, Beaches and Bases: Making Feminist Sense of International Politics* (Berkeley: University of California Press, 1990); Katharine Moon, *Sex among Allies: Military Prostitution in U.S.-Korea Relations* (New York: Columbia University Press, 1997).
- ^{lvi} Catherine Campbell, "Selling Sex in the Time of AIDS: The Psycho-Social Context of Condom Use by Sex Workers on a Southern African Mine," *Social Science and Medicine* Vol 50, No. 2 (2000) pp. 479- 494.
- ^{lvii} J. Berman, "(Un)Popular Strangers and Crises (Un)Bounded: Discourses of Sex-trafficking, the European Political Community and the Panicked State of the Modern State," *European Journal of International Relations* 9 no. 37 (2003):
- ^{lviii} Stuart A. Scheingold, *The Politics of Street Crime: Criminal Process and Cultural Obsession*, (Philadelphia: Temple University Press, 1991) p.7.
- ^{lix} Jock McCulloch, *Black Peril, White Virtue: Sexual Crime in Southern Rhodesia, 1902-1935* (Bloomington and Indianapolis: Indiana University Press, 2000).
- ^{lx} Jane Parpart, "Wicked Women' and 'Respectable Ladies': Reconfiguring Gender on the Zambian Copperbelt, 1926-65," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001)
- ^{lxi} Ibid.
- ^{lxii} Gisela Geisler, "Sisters Under the Skin: Women and the Women's League in Zambia." *The Journal of Modern African Studies* 25, no. 1 (March, 1987): 43-66.
- ^{lxiii} Center for Health and Gender Equity, *Implications of U.S. Policy Restrictions for Programs Aimed at Commercial Sex Workers* (Washington: CHANGE, 2008) <http://www.genderhealth.org/files/uploads/change/publications/aplobrief.pdf> (Accessed March 10, 2010)
- ^{lxiv} Lloyd de Vries, "AIDS Delegates Differ On Condoms: Uganda: Abstinence; Thailand: Condoms Get Dramatic Results," *CBS News*, July 12, 2004. <http://www.cbsnews.com/stories/2004/07/12/health/main628799.shtml> (Accessed March 10, 2010)
- ^{lxv} Alexander De Waal, *AIDS: Why There Is No Political Crisis ---Yet.* (London: Zed Books, 2006).
- ^{lxvi} Anonymous Interview with a UN worker, November 30, 2008.
- ^{lxvii} Gretchen Soderlund, "Running from the Rescuers: New U.S. Crusades Against Sex Trafficking and the Rhetoric of Abolition," *National Women's Studies Association Journal* 17 no.3 (2005):
- ^{lxviii} Punitive measures are also subject to state department discretion. See: *Introduction to State Department's Trafficking in Persons Report* (Washington: US State Department, 2008) <http://www.america.gov/st/texttrans-english/2008/June/20080604114725eafas0.7835047.html#ixzz0kMr38yGW>
- ^{lxix} Center for Health and Gender Equity, *Implications of U.S. Policy Restrictions for Programs Aimed at Commercial Sex Workers* (Washington: CHANGE, 2008) <http://www.genderhealth.org/files/uploads/change/publications/aplobrief.pdf> (Accessed March 10, 2010)
- ^{lxx} Veronica Magar, Unpublished Manuscript, 2006.

- ^{lxxi} "Street kids rehabilitation gains momentum," *Times of Zambia*, August 9, 2005.
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- ^{lxxiv} "Zambia". *Trafficking in Persons Report 2008*. U.S. Department of State (June 4, 2008) <http://www.state.gov/g/tip/rls/tiprpt/2008/105389.htm>
- ^{lxxv} C. Evian et. al, "Prevalence of HIV in workforces in southern Africa, 2000-2001," *South African Medical Journal* 94 no. 2 (2004):125-130.
- ^{lxxvi} Stephen Lewis, *Race Against Time* (Toronto: Anansi, 2005)
- The treatment that was available still did not cover second-line treatment for resistant patients beyond Kaletra
- ^{lxxvii} Interview with Malala Mwondela at ZARAN, Key informant, May 10, 2008.
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- ^{lxxxii} Diane Hodgson and Sue McCurdy, eds., "Introduction," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. (Portsmouth, N.H.: Heinemann, 2001)
- ^{lxxxiii} Jane Parpart, "Wicked Women' and 'Respectable Ladies': Reconfiguring Gender on the Zambian Copperbelt, 1926-65," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001)
- ^{lxxxiii} In contrast, in 2003 Zambia implemented the mandatory testing of army personnel and recruits. See International Organization on Migration, *Briefing Note: Zambia and Labour Migration* (Geneva: IOM, 2007):
http://74.125.113.132/search?q=cache:x_HGmwNXWbkJ:www.iom.int/jahia/webdav/site/myjahiasite/shared/shared/mainsite/events/docs/Briefing_Notes_HIV_Zambia.pdf+police+Zambia+rehabilitation+sex+workers&cd=4&hl=en&ct=clnk&client=safari
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- ^{lxxxv} See Long, for how state-sponsored homophobia deflected attention away from government failings on HIV in Southern Africa. (However, unlike in the West, this homophobia, pernicious and violent as it was, did not blame gays for HIV, like it did sex workers). Scott Long, *More Than Just A Name: State-Sponsored Homophobia in Southern Africa*, (New York: Human Rights Watch, 2002).

CHAPTER 6

“Rat Poison”: Social Repression

This chapter examines how the Zambian government’s policies led to an increase in stigma and exclusion from non-state actors. NGOs and personnel in institutions like hospitals, as well as members of the community at-large, particularly the communities where sex workers lived, became active participants in scapegoating sex workers for HIV.

I Blamed for HIV

The Zambian government created the conditions for the widespread persecution of sex workers through its policy measures. Firstly, the curfew regulations marked women outdoors at night as “outside of the law” and as sex workers. This made sex workers into easily identifiable targets. Secondly, as we will see below, government officials embraced a narrative that presented sex workers as both a danger to “the public” and the cause of their suffering. Thirdly, public displays of violence against sex workers by police rendered sex workers into legitimate targets of aggression.

The government’s anti-sex work statements communicated with a wide audience and were not limited to repeated media interventions. Jennifer, a social worker and key

informant reported that in the previous years, she had witnessed a poster with the same message at government offices of the Drug Enforcement Commission:

The poster was showing a message of “Be Aware !” of such girls [sex workers]. There was a mother who was sitting with a baby and [traditional cloth] and then there was a woman with a mini-skirt and smoking. In big letters it said ”Be AWARE!” Like think about the “mother”.

Narratives holding sex workers up as “bad women” responsible for the deaths of “good men” and their “good” wives and children echoed back a schema that had emerged in some of the scientific discourse.ⁱ Men dying, women dying, children dying, Zambians were being asked to trace all of these back to sex workers as the first “guilty” link, the ultimate cause. The framing of such representation of as health messages, projected the appearance of a “scientific” or “neutral” basis.

A more violent version of this narrative was on public display when sex workers were beaten and berated as “rat poison”, “bitches who are killing the nation” and “spreaders of HIV” by police in the streets of Lusaka and, sometimes, Kabwe.

The mobilization of stigma by state actors played off of and fueled latent hostilityⁱⁱ against sex workers, perhaps in some instances creating an impression of official sanctioning of violence against sex workers. As a consequence, animosity towards sex workers flared in the public at large: all of the sex workers interviewed recounted being repeatedly and aggressively blamed for HIV by members of the

communities in which they lived. Becky recalls: “They blame us. You bitches. You are the ones with HIV and AIDS. You are the ones who make people die.”

Sex workers no longer figured in the collective imagination, as they had in past vigilante campaigns simply as wayward women, who were a threat to moralsⁱⁱⁱ or civilized development.^{iv} Instead, in this campaign they were depicted as predatory agents of destruction: indiscriminate killers. As Helen puts it: “They say we want to spread HIV to the whole world, to all of Zambia. They [say we] want to spread [it] because we can’t die alone, something like that.” Chilechi recalls: “They say “These are killers. They like killing.”

Other accusations such as the common “rat poison” or “roach powder” taunts by police officers or the general public went a step further in dehumanizing sex workers. The corollary of these epithets was that the exclusion and constant patrolling of sex workers was a matter of collective survival, their disappearance was desirable. Mary recalls how this created a boundless social permission to act on sex workers: “Anyone can do anything to us, even in the day, in the streets. They say you are a prostitute, useless, cheap. You are the cause of HIV.” Macey explains:

-They think we are killers because of HIV. They feel we are the ones spreading that. People call us “Roach Poison”...so many names. *Unapotkwas solola*- that means prostitute, bitch. Oh, yes, then there is *Umaoele Fief*’.

-*What does that mean ?*

-“Disposable”.

The term “disposable” foreshadowed what a number of sex workers reported: that some people, in their quest to rid Zambia of sex workers had turned to violence.

The following sections document how scapegoating for HIV fueled a stigma against sex workers that weighed into almost every facet of how sex workers lived and for many, how they died.

II Rehabilitation & Institutions

A number of projects in Zambia aim to stop sex work by rehabilitating women who sell sex. In a number of cases, such as Tasintha, Mapode, and Sanduka, they are also a main point of entry for sex workers to access medical services and treatment as well as condoms. In a 1996 abstract, the director of Tasintha and future director of Mapode wrote that in order to reach women and rehabilitate them:

A key strategy is the health scheme which provides these sex workers, both reformed and/or reforming and those still on the street, access to health facilities which they did not have before, apart from counseling and support.^v

These combined mandates are not without their tensions. Both Tasintha and Mapode have publicly blamed sex workers for spreading HIV. Forty HIV-positive sex workers approached MAPODE in 2002 for help petitioning the government to get ARVs.

The following article from *The Post* quotes MAPODE executive director Merab

Kiremire:

“The prostitutes have really flocked [sic] Lusaka and they are sick. You cannot believe it when you find them on the streets and where they stay at night. Most of them are sick but they go on the street to find their clients without being bothered about. Apparently, most of their clients are in a drunken state of which they cannot notice if their prostitutes are sick or not.” Kiremire said the problem of prostitution was contributing to the spread of HIV/AIDS which was in most cases spread by commercial prostitutes.^{vi}

Back in 1996, Tasintha embraced the corollary of this view, that stopping sex work was the means of stopping HIV: “For every 1 woman reformed, at least 3 customers are saved from HIV infection transmission at the rate of 3 customers per woman per day.”^{vii} However, as recently as 2007, Joy Phumaphi, Vice President of Human Development for the World Bank, an international donor program to rehabilitation projects embraced this perspective as well. In an article on the World Bank website, she advanced that if women stopped sex work they would reduce HIV in not only Zambia, but the whole region. In speaking to participants in World Bank grantee Sanduka, a rehabilitation project that is part of CRIAIDS, the Community Response to HIV and AIDS of the Zambia National Response to AIDS (ZANARA), Phumaphi said the following:

I am pleased that the Bank is helping to make a difference in the fight against HIV and AIDS....But, more importantly, I am very happy about your action to move out of the streets of Livingstone. You have taken a powerful and positive step, to live a better life, and also to reduce the levels of transmission not only for Zambia, but also for Zimbabwe, Namibia and Botswana.^{viii}

This a similar message to the one that rehabilitation projects tell sex workers according to Jennifer^{ix}, a social worker and key informant who was involved with Tasintha and did research with participants for a social work degree. Her experience was that sex workers were recruited for “rehabilitation” by peer workers or by men who posed as clients and asked sex workers to meet them the next day, when they would tell them about health information and rehabilitation:

The messages are go for medical check-ups, VCT[voluntary testing and counselling for HIV], if you are [HIV]-positive, learn how to take care of yourself. They will talk to them about condom use, one of the major preventatives. They are always told to stop. Health and stopping....Mostly they will tell them: “This is a danger to your life, to the people around you. Even, you are a danger to the next person in society.” Like in most cases you are to blame through the process, you are made aware to say that what you do [sex work] is bad because this causes this [HIV]. They will tell you the dangers about maybe say what one goes through when they reach the stage when they have AIDS. All those things are put in.

According to Jennifer, “rehabilitation” courses in tailoring, weaving, catering, domestic work (training to be a maid) were quite popular among sex workers in Zambia, particularly when they came with a stipend or “income substitute”. As a result, the “under-cover client” technique and peer outreach were designed partly to disqualify women who were not “real” sex workers, and partly so that sex workers could not deny that they were. Once sex workers enrolled, they were expected to stop sex work. Jennifer relates:

I worked with the guys at Tasintha, they gave me two days to meet the different ladies. They told me all these stories like “It is good they stop it, they start making dresses, like *chitenge* [cloth], all these traditional outfits. They say they are paying for their children’s school fees. They are not doing it anymore.” I got to meet the ladies from the operating sites in Lusaka, that was in 2002, I had a talk with them, they all mentioned “I have stopped. I was in this a long time, now I have changed because of [rehabilitation].” It is always good to mention this to the program.

Jennifer continued to do her research for 2 months and interviewed 40

“rehabilitated” sex workers. She found that almost all of them, despite their continued testimonials of redemption at the rehabilitation program, were continuing to do sex work. A 2002 news article uncovered similar results:

A few years ago, an organization called Tasintha, meaning “We have stopped,” was formed by prominent Zambian women to help prostitutes to stop their trade and learn skills such as tailoring and dress-making....The centre received considerable western support....But most recruits deserted the Tasintha centre and ended up back in their old trade, saying they could not make enough money from their new skills.^x

This is unsurprising from an economic analysis since the vocational skills offered could not earn a large income, certainly compared to sex work. The sex workers Jennifer interviewed wished to continue to benefit from the skills training even as they earned money doing sex work. To do so, the women moved around different spots to avoid being seen by rehabilitation projects. Jennifer explains:

Sometimes if you recruited them from, I give an example, you recruit one from Chez N’Temba. They know your dates, that on such-and-such a date you [the rehabilitation project] are going to be there to check if there are any new girls or something, they change the site.

Sex workers had learned to negotiate “rehabilitation” in a number of ways. Many underwent “rehabilitation” at one centre, and then asked to be “rehabilitated” again at another to learn new skills, or even underwent the same type of tailoring trainings over again. In Kapiri, Jennifer witnessed “rehabilitated” peers from one rehabilitation project finish off their outreach trip by picking up clients. Despite sex workers’ ingenuity, such a reality gap has potentially negative impacts on sex workers. It is unclear how being displaced from habitual locales on a regular basis impacted on their working conditions and perhaps, most directly, how hiding their sex work impacted on their access to appropriate health services – of which the rehabilitation projects are primary purveyors.^{xi}

Such a framework risks severely circumscribing what sex workers feel they can ask and talk about openly.^{xii} The difficulty this imposes on speaking freely can stretch to locales, such as Kabwe, where no rehabilitation projects exist. According to Jennifer, women understood so strongly that they needed to espouse the rhetoric of rehabilitation in order to access health services that when a non-rehabilitation health project opened in Kabwe, women didn’t believe for a long while that they could get health information and VCT without speaking of how they would stop sex work. This is a serious concern given so many sex workers’ lack of accurate information on HIV transmission in my interviews (and the strong desire of many, particularly young women to ask me questions about sex and safer sex when they found out I was non-judgmental). Research in Namibia, South Africa and Botswana found that mixed services that both promoted “rehabilitation” and safer sex and VCT, often resulted in women unable to access the health services since

they had to hide that they were doing sex work or be perceived as having “failed the program”.^{xiii} The necessity to abide by a discourse in order to obtain services also makes it difficult to ascertain what sex workers real experiences of “rehabilitation” are.^{xiv}

None of the sex workers I interviewed spoke of having attended rehabilitation, even those who had worked in cities where it was a mainstay. This was not a question on the questionnaire however and further research could interview current sex workers where they are working about what their experiences have been. Nonetheless, even sex workers who were young and had never seen a rehabilitation project were impacted by the discourse of “rehabilitation” that reified sex workers who didn’t stop as “to blame” for HIV. Veronica explains:

Very few people will talk about being HIV-positive...It is worse for sex workers. People say it is your fault. “We told you, so that’s your fault. The organization is there [the rehabilitation projects] especially for sex workers.” You can be very uncomfortable, unable to have a peaceful life. You just don’t tell anybody because you were doing this, you were a sex worker and for that matter, you were being told not to and still doing it.

Mary experienced how the rhetoric of rehabilitation had been further adopted by personnel within institutions. Mary described accompanying a dying friend to the hospital and being forced to name all of her friends who were sex workers who had died of AIDS.

They showed us pictures of our friends who died and said “Stop sex work.” At counseling, they talked about that: “Stop HIV.” (...) And we looked at pictures [of sex workers who had died]. They said “No commercial friends.” They said our friends are all victims. They said we have to stop. In the hospital, this man did

this. This man he said “I have seen these friends of yours when they are in hospital. You see what they do [sex work] ? Then they died of HIV/AIDS.”

These events were very disturbing to Mary since she was deeply touched by the death of fellow sex workers and feared for her own health. Such interventions did little to provide sex workers with any of the concrete tools they actually needed to address HIV, such as relevant health information, means of preventing transmission, testing or treatment:

My friends, they had died too. They died of HIV/AIDS. And when we left the hospital...My friend, like she had not [taken] the [HIV] test but you could even count her bones. She had been fat. You know she was dying. She said “I’m thin, I’m dying, you know, I’m dying, I’m dying. I need to quit”...I just smiled at her and took her back home. Like that.

Such shamings can provide substantial barriers to sex workers ever accessing HIV-prevention or treatment on a number of levels.^{xv} Sex workers may fear interacting with health personnel or establishments or they may simply delay testing, even respectful surroundings, for fear of the added blame that accompanies being HIV-positive and a sex worker.

The rehabilitation discourse and its blame for HIV impacted sex workers and their working conditions and access to institutions, far beyond the reach of actual rehabilitation projects. It played a significant role in contributing to the widespread stigma sex workers confronted on a daily basis that we examine below.

III Constant Patrolling: Community Life

The stigma sex workers faced was so pervasive that it impacted on their ability to occupy public spaces, live in their homes, get their groceries, get an education, raise their children, earn a living or have a love. While sex workers were blamed for HIV, they also faced attack, repudiation and general exclusion simply for selling sex, for being “bad women”: bitches and whores. In Site and Service, many of the sex workers lived together with family members. In town and in Lusaka, women most often lived on their own or together with other sex workers. None of these arrangements managed to fully shield women from harassment for being sex workers.

Any single woman seen going out at night was likely to endure taunting from neighbours. As Grace, who lived in the single occupancy flats in Kabwe that had previously been the property of Zambian Rails recounted: “If they see you go out late, they say, ‘Oh, you, you are going out to town’. Maybe sometimes they just say ‘Ooooooh, at the windows,’ They say: ‘You bitch^{xvi}!’ ”

Once women had been identified as sex workers, they would be routinely called out as sex workers in the compounds where they lived. Such exposure was often accompanied by exclusion from community activities. As Gertrude recounts:

It pains me. When you go to the market, men take on us. And the wives. Like if you go to church, you hold back [from going]----because you know if you go people will say “even this one !”. So you hold back. They say we are bad people, they call us “dog” “rat” in town.

Charity explains: "It is not very nice. People really hate you . If there's a funeral, if you are there, they will just be pointing at me. Stuff like that." Juliette explains:

There is discrimination. You are not easily accepted into society. At times, they would have some kitchen-parties^{xvii}, they will not invite you because you are a prostitute. You have nothing to tell that person getting married. You are just going to destroy----that is what they believe in. So you cannot be part of them. In Zambia, it is important to be part of it. You feel you are nothing. It is very sad. You see them all gather together. You are rejected for what you do. It makes you feel like you are in a world of your own because you cannot be part of other people because of what you do, your job.

Such exclusion was experienced not only as emotionally difficult but it often cut sex workers off from the communal sharing of food or resources that can act as a crucial social safety-net in very poor communities. Aside from each other, sex workers were at pains to participate in other social relationships. As Tine explains: "When it comes to parties or celebrations. Unless it is a sex worker celebrating, we are never invited."

Veronica felt she could elude such exclusion and tentatively participate in public events if she didn't mind being publicly reprimanded: "People invite us to community events.

They just say "Stop what you do and get married!" Sarah, who had become a sex worker in Lusaka later in life, was the only sex worker who spoke of trying to contest such exclusions:

We are especially harassed in the neighborhoods, people point fingers at you, call you names. They try to exclude us, but we impose ourselves but if a wife is there, then a fight will break out. I had to move several times. Once, because of the court payment [I owed] for marriage interference. Four other times because of too much talk and harassment.

For sex workers who brought clients home for sex, this tenuous relationship with neighbours brought a strain to their working conditions. Disruptive customers could attract unwanted attention and further conflict with the neighbours. For some women who rented their homes, there was the added fear that such scenes could result in their eviction. As a result, if negotiations broke down with a customer, women would generally attempt to placate the situation, even at their own cost. Helen explains:

The landlord doesn't say anything. But our neighbours, it's up to you to control yourself. Where I stay in the flats, we go with a man there. If he doesn't give me money, I don't want to embarrass myself. The neighbours can't find me with those men at home, there will be attention. Also, with what he is there for [sex work]... I let him go. I tell him, just go, to avoid it.

This is similar to Luise White's finding on how community living impacted on the working conditions among sex workers in Nairobi's slums in the 60s.^{xviii} Sex workers tried to deploy a number of other strategies to reduce tensions. A number, for example, were careful not to sleep with the husbands of women in the compound where they lived.

IV Seeking Refuge: Sex Worker Homes

One means of trying to avoid the vigilantism of neighbours and to create their own social world was for sex workers to live together as a group. For many, such arrangements brought them a measure of respite. Strength in numbers served as a buffer against intimidation. Mary of Site and Service says:

We stay with fellow sex workers. No one else will live with us because they are scared people will think they are sex workers. We share rent and live in one house, or some individual housing but not far from each other. If they know that we are sex workers, the neighbours will talk, they will say that we are the ones who attract thieves, but they will not bother us.

Some sex workers such as three sisters I interviewed, were able to live all together with their children in their grandfather's home. He had received a home in Site and Service settlement^{xix} as a pensioner from the Zambia Copper Mines. Since the sisters supported each other, their brood, and their grandparents, they lived together harmoniously and had secure housing. They provided a stable meeting point for many of the sex workers in the compound.

Others such as Becky, who was 18 and who had been orphaned as a teenager, found housing with other girls who were orphaned and on the street. Living together allowed them to collectively find shelter and to share food as a means of surviving and trying to get each other to stay in school:

My father passed away when I was 10, my mom when I was 13, of malaria. I just stayed with my younger sister. I lived with 4 other girls. I started sex work at 14. We made 10 000 K a day and did four men a day. Sometimes one man will give 20 000, 100 000.

I was supporting my younger sister. If they gave me 50 000, I had to pay rent. Sometimes, we wouldn't have food. You have nothing, and your neighbors say "Today, I'm not going to work, can you go to work tonight and get some food?" You go at night and get money to buy food. You find someone near the shops in the compound, maybe you go for 1500. You are a sex worker, they can't give you their hearts, so we just go in the night to get a meal. Oh, ok, it's not good for us. But some of us are good. It's our way. We get meals. That is the bread-winner way, no? Yeah.

Living together could also have the effect of marking women's households more clearly as targets for harassment, theft, or even attacks. Angela from Kabwe explains:

We move when the insults are too much. Yeah, I have moved twice. I know other sex workers who had to move. Some people steal from us too, because they know our houses are empty at night. Then, we have to move too. People don't want to be friends with us or seen with us. It really affects us because we have friends who are not sex workers and they cannot associate with us because we are. So, a lot of us stay together in groups. Five or ten of us in a house. But then, there is more talking and insulting when you are a group. When the husband sleeps out, wives go straight to the sex workers' house and say that we are the cause.

As Tine recalls, sex workers' homes were marked for exclusion by the community: "They give nicknames to the places where sex workers lives. They call the houses Titanic or *Tasintha* [a rehabilitation project for sex workers]."

Sex workers recounted very similar experiences in Kabwe and Lusaka of life in the compounds and of the exclusion of sex worker homes.

V Exclusion of Children

Persecution in the neighborhoods extended to the children of sex workers when it was known that their mother was a sex worker. They would be targeted and stigmatized by association, often at the behest of adults in the community. As Grace recalls:

Me, I have one daughter. The neighbors, if they see her walking, they say "You are a son of a bitch, a daughter of a bitch." She comes to me and says mommy,

mommy, I hear these people talking so so so so. I say, yeah, forget. Maybe she wants to ask the meaning of this. And I say no no no no, [they] just lied, yeah.

Charity explained how such exclusion left her young sister isolated from other children:

Sex workers' children get it very much. If they go and play with their friends, that mother will say "Your mother is what, what." It is very difficult. My 12-year-old sister who I take care of, she is just at home. She doesn't move. It is very difficult for her. She just stays at home. She doesn't play with friends.

Children were also the subject of harassment from other children in school. As Macey recounts: "When our children go to school, they get bothered. They say "Your mom is just a prostitute what, what, what." And our children feel really bad."

Women experienced a great deal of pain at being publicly hounded in front of their children. As Macey tells:

Sometimes, you would be in town in the pm with you child. Going shopping and someone is like "Hey solola". If you bump into somebody, they call you all sorts of names. Then the child will be like "Hey mommy, why are they calling you this?" And then you feel really bad.

Being dressed down in the presence of one's children was often more difficult to deal with since when a child was directly witness to their mothers' shaming, accusations could

less easily be dismissed. Furthermore, the implications of such shamings were more likely to be fully understood by children.

VI Losing Home

For a large number of the sex workers, the constant harassment and threats to their security in the compounds forced them to leave their homes. In some cases, they decided on their own that they could no longer withstand the mistreatment. Rose remembers: "Some neighbors will say 'Sex worker, sex worker' when you pass by. We moved five times because of this."

In other situations, the neighbours simply ran the sex workers out. Mevis explains: "My friend was forced to leave where she lived. They asked her to leave, the neighbours did. Because she was a sex worker."

The large size of Lusaka meant that moving to another township could make it more possible to have a semblance of a fresh-start than in Kabwe. For sex workers who had access through a relative to a home or who didn't have the resources to find other shelter, staying in a hostile environment meant finding ways to cope. Amora who lived in Site and Service shielded herself from the harassment by limiting any time in public: "I just stay inside my house. Then at 7 or 8 PM I take a cab to work."

Sex workers with children feared both that their children would suffer and feel humiliated from the harassment and that they would in turn be angry with and judge their mothers as shameful. For Helen, the only means to protect her child from the harassment was to never be seen in public with her. This meant sending her to live with relatives while supporting her.

They call us dirt names. In the streets. In the day, they will start shouting...lots of things. You will feel bad. Those prostitutes so so so so so. They call us *solola, ama-ole*. What can I say. All sorts of names. They can call you the name of the dirty medicine used to kill cockroaches. Because we are prostitutes. Yesterday, we were going to the market. And they were shouting. And they know you so they shout at you every day. I won't walk with my daughter. NO ! I'm afraid. That's why I don't even stay with her.(...) But not to the village, they were never saying, you bitch, you-what there.

Losing one's home or facing family separation were very difficult choices for sex workers to face. Repeated relocation further eroded the possibility of communal ties and the protection they could potentially afford. For some sex workers, this displacement positioned them as repeated outsiders and "foreigners" in the communities or neighborhoods, in which they sought refuge .

VII In Town In The Day

The sheer size of Lusaka meant that parts of its downtown could offer a measure of anonymity for sex workers during their off-hours when they were outside the compounds. For Kabwe, given its small size, even the small town centre was a very

fraught site for sex workers. With the exception of one sex worker who felt that compared to the mistreatment in the compound, men had “British manners” in town, most sex workers vehemently feared the harassment and exposure that came with going to town.

The town centre in Kabwe was one of the main places where sex work took place at night, in bars, lodges and along the main road. In the daytime, women felt particularly vulnerable to cat-calling from men who recognized them from seeing them in the area at night. This included bus drivers, taxi drivers, police officers, and men who were small traders in the informal sector (often associated with petty crime, called *caponos*). It could also include bar patrons or frustrated clients (who had been refused). The *caponos* were of particular frustration to the women because they idled about outside shops trying to sell their wares, making it difficult to go in and out undetected. Because they were poor, most of the sex workers would have little to do with them as clients. As a result, they were often unrelenting with their harassment. As Helen recalls: “They say these [insults], especially in town when we are passing. One person just sees you. But those *caponos*...One sees you. Outside *Shoprite*, if they see you it is a problem.” Or as Mevis tells: “They bother us so much, especially in town. Those boys, the bus drivers. They insult us very much.”

To a lesser degree, sex workers in Lusaka were also harassed in town when they were recognized or if they were present in areas associated with sex work. Markets could also be a frequent site of harassment because the people frequenting them knew sex

workers from home or from town. Added to this, some women discretely solicited sex work in the market under cover of selling groundnuts or vegetables, but wearing short skirts or other indicators of their availability. As such they could also be targeted for harassment.

For heterosexual sex workers in Kabwe, this made it quite difficult to find a loving male partner. They were considered “unsuitable” partners in the compounds as much for their being sex workers as for the assumption that they were HIV-positive.

Attempts to evade being marked at such often failed once a potential partner accompanied them to town. Grace recounts:

People have a bad attitude. If they know you are a sex worker, they give you more names... They call you “*Ule*” or whatever in Bemba. If you are walking. Me I stay in Kabwe. I like a man maybe who stays in Lusaka. “Are you a sex worker?” I say: “No I am not.” But that man comes here. He says: “Let’s go to Shoprite” or “Let’s go to to to [somewhere]... we have to”. The *caponos*, those guys who stay in the streets, they start: “*Ule, ule*, bitch. Bitch. Where are you going with that man? You are going to kill that man. If you are married person, please stop walking with that lady. She is sick and she is a bitch!” So if he asks you “Are you a bitch?” You try and explain, you say “No, no, no.” They say: “No I am going.” You never see them again. They say: “She is a sex worker. So she have AIDS, she fucks a lot every time, so she is going to kill you with diseases.” You try, you take a phone, you call that man, he says “No, you are a bitch.”

Carolina recounts a very parallel story:

They insult us. They call us different traditional names. *Insolola. Solola.* Nightmare. They call us such names. *China Mua*, something like that. Different Names. It affects me because I know it is a job I am doing and there is nothing I can do. It affects me because they can embarrass me in front of people. Maybe like with a man, a gentleman, I am walking in the streets, then one of them will come to you, to embarrass you, say something stupid. “She is just a bitch. She

will kill you. And what and what. Leave this bitch. She will kill you, I once picked her. They will say many things. Like here in Zambia, they blame sex workers. I don't understand it because they are people who picked us and then they pretend... They blame us for HIV. That we are the ones spreading HIV and AIDS.

Helen was the only sex worker who recounted using the sex worker label and its HIV-related stigma to her benefit both with clients and potential suitors:

Some people won't use condoms. It's up to you. With all these disease, it's better not to be careless. Even with these boyfriends. I go with people who use condoms. But one simple thing, I have found. When a man asks you: 'You are a prostitute?', better you say "Yes". Because he will fear you will give him diseases. If she is just a girl you are good, ok, he won't want to use condoms. So, just say: 'I am a sex worker'. Say: 'Yes. Where did you find me? In church or in the club!

This quotation echoes findings of a previous study that found that Zambian sex workers who had a professional identity had an easier time enforcing condom use with men.^{xx}

For almost all the sex workers however, being exposed as sex workers and persecuted both at home and out in town left them feeling at the mercy of everyone's whims. In Amora's words:

You go to a friend's house, they say "Don't play with her, she is a sex worker." Someone wants to love you, they say "No, this one is a sex worker, don't love her." Everywhere, they insult you, they expose you, they do what they want.

Amora's quote testifies to the sense of utter untouchability and ostracism many sex workers experienced from those in their community. This public derision remained constant for women during the night as well.

VIII In Town At Night

Women walking alone at night past night-fall in town, particularly in the sex work areas were automatically assumed to be doing sex work. As such, they were easy targets for harassment. This was the case in Kabwe and in Lusaka. The *caponos*, bus drivers, and taxi drivers of the day were sometimes emboldened with alcohol and added to them were bar patrons of all different stripes. And of course, the police, whose treatment of sex workers has already been discussed in depth.

The pervasive persecution of sex workers impacted greatly on their working conditions. It meant that clients and bystanders could intimidate sex workers with impunity. Clients often tried to refuse payment or insulted them. They were also reported to frequently agree to condom use then become aggressive when sex workers attempted to enforce it. Sex workers attributed this behaviour in large part to the derogatory view people held of sex workers. Becky recounts:

Maybe they give you 20 000K to sleep with you. Maybe 3 rounds. 1st round without using a condom, 2nd round without, 3rd round without. They force us and if we don't sleep with them, they do with us. There are streets where they just slap you until you accept to sleep with him. They take you to their home and don't pay you anything. This happened twice to me. Maybe we could protect ourselves if we came with guns or knives then if they try to force us to sleep with them...

According to Jennifer, a social worker and key informant, sometimes sex workers were picked up, beaten, and then left far away in the middle of nowhere. Kinnell has argued that such perpetrators should be distinguished from clients since they clearly don't fit in the client category as they refuse to pay.^{xxi} Regardless of their categorization, altercations with perpetrators in general or with abusive clients were even more dangerous because sex workers not only couldn't rely on police protection but often had difficulty getting assistance from the general public.

IX Responding to Abuse

Most sex workers, in the day or night, dealt with abuse by ignoring it and trying to keep a low profile. As Helen explains: "Me I stay with Hope, we walked through the market yesterday, so they say all sorts of comments to us. We don't answer." Or as Gloria says: "If they call you bad names, it is better you keep quiet. You just keep quiet." Sex workers had a very keen sense that doing anything other than submitting to the harassment or leaving would result in violence. As Gertrude explains: "The *caponos*, the cold boys who stand along the street, they call after you, a lot of insults and mean things. If you answer back, you will be beaten."

Macey was the only sex worker who spoke of ever having resisted the harassment:

I was arrested one time because on my way to town, this guy called me those names I don't like. And I got really annoyed and then we started exchanging words. From there, he came and hit me on the cheek. And we started fighting. The police came and brought the two of us to the cells.

Macey's experience of further violence and detention as a result of talking back, exemplified other sex workers' fears. As a result, almost all the sex workers practiced a form of defensive acquiescence when faced with verbal violence and aggression.

X Violent Attacks

In Lusaka, it was not unusual to hear of harassment swelling and turning into mob violence against sex workers. Such stories were rarely recounted with much surprise. A taxi driver in Lusaka recounted to me how people in his compound stoned and stabbed a woman to death for being a sex worker. Carolina, in Kabwe had even participated in such mobs:

For me [anti-prostitution actions] are normal. When I was young, where I used stay, prostitutes were passing by to go to the bus. And we used to stone them. I stoned them with rocks and I never dreamed that one day I could be one of them.

According to research in 2001, it was still relatively common practice for passers-by to throw stones at sex workers on the street in Lusaka^{xxii}.

In Lusaka, Beatrice and Sarah recounted mob violence being directed at them in their homes in the compounds. In a quite common patriarchal dynamic, women's

frustration at their male partner's behaviour became redirected at the "bad women" to whom they attributed responsibility. Such a narrative could galvanize the support of both men and women in the community. Certainly, women's sense of vulnerability to HIV transmission in marriage due to difficulties enforcing condom use, domestic violence and men having multiple partnerships is often very real. It adds a potent urgency and anger to the retribution which is often heaped on sex workers. Beatrice and Sarah explain:

-(Beatrice)"Peoples' attitude is terribly bad. People go to our homes to insult us and beat us. Most often when we are beaten, it is because of clients in the bar. Someone rats to their wife and the wife will mobilize the neighbours and the mob comes and beats us up. I have been beaten up several times."

(Sarah)- "Several times, Me too."

Sex workers in Kabwe and Lusaka reported that a number of targeted killings of sex workers were taking place in recent months. These were different from the accounts of mob justice in the compounds as they generally only involved one attacker who posed as a client but they were all believed to similarly target sex workers as a form of vigilante justice. Macey reported murders to be happening in two other towns:

There have been no sex workers killed in Kabwe but I hear some were killed in Luansha and Kitwe. They are targeting sex workers, they are killing them so much. We heard that from sex workers from Kitwe. They are like "Heh, heh, Kitwe is hard. We are scared. We are not operating from there. We are living in fear."

All the other reports concerned Lusaka and a bar and hotel called the Twin Pub which was located close to mid-way along the road joining Kabwe to Lusaka (a two-hour drive). Many of the older sex workers in Kabwe worked out of the Twin Pub, it was a not

uncommon destination when picking up a truck driver in Kabwe who was headed South. Conversely, a number of sex workers from Lusaka would frequent the lodge when a client was driving north. Helen who worked at Twin Pub was the first to tell me about it: "One friend of ours just died at Twin Pub, a young sister was killed there. I was talking with this police and he told me: "Each time there, they kill. Every week, a prostitute must die." Jennifer, a social worker knew of four different women in the past year who had been killed at the Twin Pub.

Did I tell you about the four that died at Twin Pub? Recently, I think last week one died. Since last year, four died, they are usually killed right there by the truckers. The girls were stabbed, they cut them, maybe, the labia minoras, they usually cut. Maybe it is part of some ritual.

The girls say that to me. These girls [in Kabwe] go to Twin Pub. They said the others were killed because of this attitude that sex workers are killers, are responsible for HIV. It is the same attitude. People are bitter about it. They say "You are the one that brought this to me, and we have to bring it back to you and you deserve to die."

According to Jennifer, sex workers recounted instances where money was left on murdered women's vaginas in order to "explain" that she was being killed for being a sex worker.

For Beatrice and Sarah, two older sex workers in Lusaka, there was no doubt that the frequent killings of sex workers, some of whom were their close friends, was a direct and brutal form of scapegoating of sex workers for HIV.

(Beatrice) Our friend went out last month and got a man at one of the guest houses. He killed her and left the lodge door closed for four days. So the hotel

called friends and we said we hadn't seen her. They broke down the door and found her there.

-(Sarah) Many sex workers have been killed at Twin Pub, more than 10 now.

-(B) Our other friend in Sarah's neighborhood. This guy stabbed her in her apartment. He stabbed her in the vagina and left her in the boarding house. The tenants smelled something and they found her after five days. Now they don't allow women to book rooms alone for this reason.

-(S) Sometimes you can have bad clients. But these murders are different. They involve rituals. Like the last one at Twin Pub, they took her uterus away. There are some people who just hate us because they say we spread HIV. So they will pretend to be a client and kill us.

-(B) There are a lot of bars where we are warned in advance, "We will kill you, you spread HIV." We can't walk home alone from them because these men will steal everything and beat us to death. They will do this to us because they say we are the ones spreading HIV."

It is interesting to note an important detail of their narrative: faced with a violent attack on a sex worker, the guest house, rather than institute a system to ensure security for its guests would ban women from renting rooms alone. This logic of protecting women by curtailing their freedoms, rather than impeding their assailants, underpins the inherited colonial prostitution laws that exist in Zambia as well. For most sex workers however, such measures as the landlords' potentially reinforce their vulnerability to attack. If sex workers accompany a client to a hotel where he is paying for the room, should he become aggressive, the hotel staff are far less likely to be of assistance should it mean inconveniencing a customer of their own. They do little to prevent violence against sex workers, but can effectively displace the problem somewhere else.

It is impossible to verify the killers' motives for slaying sex workers. What is clear however, is that the sheer number of sex workers being killed is an indication of the

intense hatred against them and its corollary, a climate of general impunity for violence against them. Sex workers' unwavering conviction that their friends were murdered because they were blamed for spreading HIV may very well be true. In many ways, it might seem surprising if no one tried to murder those who were labeled as "killers" and "disposable". At the very least, sex workers' accounts leave no doubt about the incredible levels of violence that they perceive every time they are blamed for HIV.

Though such an outpouring of hostility may not have been the government's intent in blaming sex workers for HIV, authorities did little to address the discrimination or to put a halt to attacks. In the next chapter, we explore how stigma both from the government and the community at large played a key role in the how many sex workers died of AIDS during this same period.

ⁱ See Literature Review for more information on this subject. Such a framing was so prevalent in fact, that the only way that Health Triangle was able to obtain funding for a safer-sex and volunteer testing project for sex workers, was to evoke the notion of the dangerous "triangle" between sex workers, their male clients, and 'innocent' wives and children.

ⁱⁱ See Quentin Gausset and Hanne O. Mogensen. "Sida Et Pollutions Sexuelles Chez Les Tonga De Zambie (AIDS and Sexual Pollution Amongst the Tonga of Zambia)." *Cahiers d'Études Africaines* 36, no. 143 (1996): 455-476

ⁱⁱⁱ Jane Parpart, "Wicked Women' and 'Respectable Ladies': Reconfiguring Gender on the Zambian Copperbelt, 1926-65," in *Wicked Women and the Reconfiguration of Gender in Africa*, eds. Diane Hodgson and Sue McCurdy (Portsmouth, N.H.: Heinemann, 2001)

^{iv} Gisela Geisler, "Sisters Under the Skin: Women and the Women's League in Zambia." *The Journal of Modern African Studies* 25, no. 1 (March, 1987): 43-66.

^v K.M. Kiremire and Nkandu Luo, "Practical interventions in the prevention of the spread of HIV among Lusaka's female sex workers - the case of TASINTHA program" (Paper presented at the International Conference on AIDS, Vancouver, Canada, July 7-12, 1996)

^{vi} "40 Sex Workers Lobby For Anti-Retroviral Drugs," *The Post Newspaper*, August 13,

2002

^{vii} K.M. Kiremire and Nkandu Luo, "Practical interventions in the prevention of the spread of HIV among Lusaka's female sex workers - the case of TASINTHA program" (Paper presented at the International Conference on AIDS, Vancouver, Canada, July 7-12, 1996).

^{viii} World Bank, *AIDS: Zambia: Transforming the Lives of Sex Workers* (Washington: World Bank, November 29, 2007). *Permanent URL for this page:* <http://go.worldbank.org/GFXJ7V8IM0>

^{ix} Jennifer gave this interview on condition of anonymity so as not to compromise potential employment.

^x "Prostitutes Want Legalization," *News 24*, April 28, 2002.

http://www.news24.com/News24/Archive/0,,2-1659_1174402,00.html (*Accessed March 10, 2010*).

^{xi} Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009)

^{xii} In 2008, in interviews with sex workers who attended a rehabilitation project in Botswana and participated in skills-training as gardeners, women ironically said that one of the best things about the project is that in bringing the women together every few days, it allowed them to trade information on good and bad clients and police activity. See Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009).

^{xiii} Crago and Arnott, *op. cit.*

^{xiv} In Namibia, sex workers at one rehabilitation program secretly whispered to my research partner to meet us on the highway later, where they all gave us very different interviews while they waited for clients than they had at the rehabilitation centre, where they received food and access to VCT. In Namibia, my co-researcher and I couldn't understand why wherever we went along the highway sex workers kept on offering and feeding us candy. We found out that the rehabilitation project had enlisted the women to reform through micro-enterprise by selling penny candy. There was no promise in this market, but the women kept on collecting the candy and pretending they sold it, in order to be able to access other services from the charity.

^{xv} Anna-Louise Crago and Jayne Arnott, "Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa" (Johannesburg: Open Society Foundation for Southern Africa, 2009).

^{xvi} *Bitch* was often used as a derogatory term for sex workers, akin to "whore"

^{xvii} A kitchen-party is a bridal shower celebration, an important event for women in the community.

^{xviii} Luise White, *The Comforts of Home: Prostitution in Colonial Nairobi* (Chicago: University of Chicago Press, 1990).

^{xix} Site-and-Service settlements were originally slum settlements. Beginning in the 1960s, the national government agreed to provide basic infrastructure to some of these communities. Karen Tranberg Hansen, "Lusaka's Squatters: Past and Present," *African Studies Review* 25, no. 2/3 (Jun. - Sep., 1982): 117-136.

^{xx} Sohail Agha and Mwaba Chulu Nchima, "Life-Circumstances, Working Conditions and HIV Risk among Street and Nightclub-Based Sex Workers in Lusaka, Zambia," *Culture, Health & Sexuality* 6 no.4 (2004) 283-299.

^{xxi} Hillary Kinnell, *Violence and Sex Work in Britain* (London: Willan Publishing, 2008), p.85.

^{xxii} Sohail Agha and Mwaba Chulu Nchima, "Life-Circumstances, Working Conditions and HIV Risk among Street and Nightclub-Based Sex Workers in Lusaka, Zambia," *Culture, Health & Sexuality* 6 no.4 (2004), 297.

CHAPTER 7

“It’s Our Time to Die”: The Impact of HIV on the Sex Worker Community

This final chapter documents women’s accounts of the toll of HIV on their community. To trace the history of the impact of HIV, I start with accounts of sex workers’ deaths. I then examine how stigma and blame have mediated the possibility of speaking about deaths in the sex worker community and understanding why so many women were and are dying. This leads into an exploration of sex workers’ access to information, prevention and treatment. Finally, this chapter looks at how many HIV-positive sex workers have been rejected in illness or death and the role that other sex workers play in caring for women who are sick and in marking their deaths.

I Unspeakable Loss: Deaths

This section sits in stark contrast to the institutional record. The only hint at the toll of HIV on the sex work community in the documentary data is the epidemiological snapshot of the prevalence rate in 1998 at 68%.¹ This section explores the human loss hidden behind that one statistic.

Almost all of the sex workers interviewed had experienced the death of other sex workers to HIV or HIV and tuberculosis. The older sex workers, who worked prior to the

greater availability of treatment in 2004, had watched wave upon wave of fellow sex workers die. Tine from Lusaka had known the most: "I've known 188 sex workers who died since I started working [in 1990]. They died of HIV, STDs and TB."

The numbers of deaths she spoke of were comparable to those Sarah, who began working in 1993 in Lusaka, mentioned:

Since 1993, most sex workers have died of AIDS-related issues since, after that, murders, then traffic accidents. In the different townships, I saw about 150 sex workers die of AIDS over the years. They were in their 30s, 40s, 50s. Some didn't die of AIDS but would go for an HIV test, find out they were positive and commit suicide.

Mary from Lusaka also spoke in comparable terms. She, however, remembered a wave of deaths amongst sex workers starting in 2001: "Many, many, many have passed on. In the different places I have been, more than a hundred sex workers have died from HIV, STDs, TB. Most from HIV, HIV & TB. From 2001 to now, they started dying." Beatrice had only been working 6 years, but her quotation alludes to many women having died in the past: "Because I started recently, in 2002, I have only known about 50 sex workers who died of HIV."

By and large sex workers from Lusaka had seen more sex workers die of HIV, very possibly because the community of sex workers in Lusaka is much larger. However, a number of sex workers stood out as having known a lot fewer sex workers who had died of HIV. In some cases, these were the youngest sex workers from Kabwe. They had only been working a few years and their peer group was much younger. Given the time

for HIV to evolve into AIDS, it would be quite surprising if they had known many sex workers who had died. Veronica and Becky, for example, were both 18. Veronica was the only person I interviewed who reported not knowing any sex workers who had died of AIDS.ⁱⁱ Becky had known only one sex worker who had died of AIDS. Claire, who had only worked for two years, reported knowing more:

I knew 3 sex workers who died of HIV. They were 18, 20 and 25. They didn't take ARVs. If they could have taken the medicine, maybe we could have been with them today. They had been tested and they knew they were positive.

Among the older sex workers who stood out were Zanji from Lusaka who had only known 4 or 5 sex workers who died of HIV since 1999 and Grace who had only known 5 since 2002. Jessica from Kabwe, who had worked since 1998 was another such case, although her answer also pointed to a possible factor that other sex workers would raise:

I know 3 sex workers who died from HIV. They died in 2006 and 2007. There was one Vivienne, she used to stay in Lukanga. She was like our boss, the eldest, yeah, she was 39. Then, Thelma and Ellen. Thelma was 24 and Ellen was 26. I don't know any sex workers that died early on from HIV. Oh, but one died in 1999 in Combe. She had TB, some will say it was HIV. You know in those days, people used to fear HIV, so...[they wouldn't talk about it].

It is very likely that the stigma surrounding HIV, and in particular of sex workers dying of HIV, has meant that the cause of many sex workers deaths were mislabeled, described obliquely or buried in silence. Mevis who had worked in Kabwe since 2000 described this: "I don't know any sex workers who have told me they have HIV. But some, after they died, I heard that they had had HIV. Maybe twenty-some."

As I realized that the discrepancy in numbers might be in part due to such mislabeling, I began to probe deeper in the interviews or ask questions about what the causes of death were when AIDS seemed to account for very few. The masking of HIV came to the forefront, and with it, the much larger numbers of women who had died from AIDS, as in the following conversation with Angela who had worked since 2001 in Lusaka:

-Since [I started sex work in] 2001, a lot of sex workers have died. I knew 10 who died of HIV and about 150 who died of STDs [sexually transmitted diseases] and TB [tuberculosis].

-What kind of STDs?

-It was syphilis and TB.

-Were any of those women HIV-positive?

-They all were.

Technically many HIV-positive people in Zambia do die from TB, which may explain why Angela refers to it as an STD even though it isn't. Tuberculosis is the greatest cause of mortality and morbidity for HIV-positive people in Southern Africa.ⁱⁱⁱ It is not uncommon for these deaths to simply be labeled "TB" to avoid reference to HIV. "STIs" [sexually transmitted infections] also emerges again as a reference for AIDS in the following conversation with Amora from Kabwe:

-Do you know any sex workers who have died of AIDS?

-No, I don't know any.

-Do you know any sex workers who have died of other things?

-Yes, STIs. Yes, they do die. I don't know from which STIs, they don't talk about it. Like three of them, they just got sick and didn't go to the hospital. They got waste, "slim" and they died. They were 23 and 25.

-Why didn't they go to the hospital ?

-I don't know why. They just kept it to themselves. Money was not the issue, it is only 2500 to go.

-When they were sick, where did they go ?

-They went to N'dola.

-Who took care of them?

-No one took care of them. Because they didn't tell anyone they were sick.

-Where did they go in N'dola ?

-Their grandmothers. Their parents are dead. That's where they died. My friend Angela came here in Kabwe and told us that they had died. Because of the same disease that she had, STIs. And they didn't go to the hospital, and they didn't even tell their grandmothers... They just kept it to themselves and died.

-Did they ever get tested?

-After they died, the doctor said the reason was STIs.

Sex workers, in their accounts, seemed sometimes to be attempting to deflect not only the stigma related to HIV but the very particular blame that accompanies the stigma sex workers faced when they contracted HIV or developed AIDS. The following example of a conversation with Carolina from Kabwe, illustrates many sex workers' efforts to shield and protect themselves collectively from the blame associated with HIV. Her invocation of "decent people" with HIV and the masking of HIV inform us a great deal about the persecution HIV-positive sex workers face:

-It is dangerous. Many girls, I cannot say girls, my friends, my friends are dying. Those people who are on business [sex workers].

-Of what ?

-HIV and AIDS, syphilis and gonorrhoea, HIV and AIDS. This HIV/AIDS is real, I am scared of it but I can't say I will get it . I have to protect myself. They are not 100%, condoms. But I have to continue protecting myself.

-Do a lot of sex workers have HIV ?

-Decent people get HIV, that's what I can tell you. Prostitutes it is rare. Prostitutes only get STIs and Tuberculosis. HIV is rare.

Hiding the toll of HIV on sex workers is an understandable and important protective strategy. Nonetheless, it comes at the cost of potentially eclipsing the disproportionate effects of the HIV epidemic on sex workers. Gertrude, who worked in Kabwe starting in 2000, recounts the way people talked - or didn't talk - about AIDS-related deaths:

Some sex workers died in 2003, 2004. People suspected it was HIV. But sex workers don't say they have HIV, they say "I have malaria". Of the sex workers I know well, 6 or 7 have died. They all died of HIV. They got tested but couldn't accept it. I think they died of depression. They refused the medication, they were saying "It's not AIDS." People don't accept. They died, those women, in 2005, 2006. Even among the sex workers, we say it though, that they died of HIV.

Gertrude's narrative stands apart as she addresses the masking and inserts the ways in which sex workers have begun breaking the silence in naming HIV amongst themselves. The documentary data provided by sex workers on the impact of HIV on their community highlights crucial gaps and silences in the institutional record and reinforces the imperative of political science research that includes marginalized voices.

II Speaking: HIV, Knowledge and Power

For many sex workers, talking openly about HIV is a relatively new phenomenon. That said, in a context of HIV-related persecution, openly discussing the number of women who are positive feels dangerous to many; to others it may open the door to questioning the conditions which left their community vulnerable to HIV. In Lusaka, Angela spoke about this change: “In 2001, we never used to talk about HIV, now we talk about it openly.” Zanzi from Lusaka explains this silence as due to a lack of information about what was making sex workers sick: “People didn’t know it was was HIV. They still say STDs, malaria, witchcraft.”

Witchcraft or other religious references were often mentioned as the perceived cause of sex workers’ deaths. According to key informant and HIV activist Paul Kasankonoma, such charges were levied at many people dying of HIV who were not sex workers. The illness was stigmatized to such an extent that it was often explained and understood through blame and guilt. Of course, for sex workers such a narrative fit well within existing narratives about their “badness”. It was not hard for people to extrapolate that sex workers were dying because they “deserved to”. Many sex workers easily internalized the idea that because they had broken rules of sexual propriety they were legitimate targets for the hatred of “good women” and their deaths were the natural consequence of the “bad” they had done. Sarah from Lusaka explains:

Even as people were dying in numbers, some people believed it was witchcraft or demon possession. We made no direct link between the deaths and AIDS. Because we were seeing other peoples' husbands, it was easy to believe wives were bewitching us.

Beatrice from Lusaka similarly recounts: "Now, I have some info about HIV-related cervical cancer, but before every one thought it was witchcraft and so did I." This was reported frequently in Kabwe as well, as Amora testifies:

When a sex worker died, we were just saying, like Jesus Christ, it's time to die, it's our time to die, that's all. Some were suspecting that she was charmed: witchcraft because she slept with the husband of a neighbour. Since 2006, sex workers have started to talk about HIV [worked since 2002]. In 2006, some organizations started talking to us about HIV.

As odd as it may seem for a disease labeled "a prostitute disease" early on, waves of sex workers died lacking the most basic information about the disease that was killing them. It wasn't until 2000 that sex workers first recalled beginning to hear of HIV. Though they had started to hear about HIV, sex workers were unsure that it was "true", how it was transmitted – or more importantly, how to stop transmission - and that it could be treated. As Jessica recalls:

In 2000, sex workers didn't talk about HIV. We had started knowing about HIV but only a few years ago we found out it was real. Because in those days if a bitch or a whore was sick, we thought it was an STD like bola-bola or gonorrhoea. We didn't think AIDS was true, we used condoms sometimes, but just to protect from STDs. Sex workers in Lusaka used condoms more than here [Kabwe].

Gertrude tells a similar story:

In 2000, we had heard about HIV in Chindola, Copperbelt. Sex workers were saying that there was no HIV/AIDS. But also saying, if you don't want to get HIV, don't do the [vaginal] drying because of the bruises. Nobody was using condoms then though.

Low condom use by sex workers around that time is supported by existing data.

In 1997-1998, only 28% of female sex workers in Ndola reported using condoms in their most recent contact with a client.^{iv} By 2000, 54% of sex workers surveyed (this time at Livingstone, Chirundu and Chipata) had used a condom with the last client although 17% reported never using one, and 19% did not know that a condom could stop HIV.^v

Sex workers in Lusaka identified a turning point in 2002-2003 when sex workers began to know more about HIV and speak more openly about it. For women in Kabwe, this point came between 2003 and 2006, although it was apparent in my interviews that a number of sex workers in Kabwe still did not have accurate information on HIV transmission.

In 2004, President Mwanawasa began rolling out free treatment first to 10 000 people, then to 100 000.^{vi} According to Paul Kasonkonoma of Treatment Action Literacy Campaign, possible access to treatment marked a watershed in reversing stigma for most HIV-positive people. It created an incentive to test and to speak openly about HIV. This seems to have reached sex workers as well. As Tine from Lusaka recalls: "It is since the time of ARVs, that people started to know about HIV."

A major factor in Kabwe in increasing sex workers' knowledge about HIV was the advent of HIV-prevention services linked to testing directed at the community in general. Rose explains:

Before 2004, like in 1998, when sex workers were dying, we thought it was malaria or TB. Now, we know it's HIV. Before [we knew about] HIV, we didn't use condoms. We started using condoms around 2000. Some, they started to use them. We started to talk about HIV in Kabwe in 2004 when we heard that there is Kara Counselling [through the Health Triangle Project], then we started to talk about it.

In Lusaka, Zanzi explains that testing also meant more space for open conversation about HIV among sex workers: "It has started just changing, we are talking about HIV, now that people are going for tests." Mary in Lusaka was an exception, she had started talking openly about HIV in 2000: "We started talking openly about HIV then, because of all our friends who died of HIV."

The desire to stem the tide of deaths they had witnessed, was also what led both Sarah and Beatrice to be very vocal about HIV and to force a conversation among the sex workers they knew, particularly when treatment became a possibility:

-(Sarah) In 2002-2003, sex workers started to say 'She is dying of HIV'. Now ARVs are there, too late for many. But we've started talking. I go around to all the SW and tell them to get tested. If they are sick, I take them home to my house and show them my ARVs. Sometimes, they smile.

-(Beatrice) I was encouraged by Sarah to get tested and go on ARVs. So, I use my life experience, I tell them, look, I got very sick, it got very bad. But, I am feeling better. I took my ARVs and now I am back in business.

Sarah and Beatrice stood apart by their dogged determination to bring up HIV and treatment with their fellow sex workers by using positive encouragement. They also participated in a support group for HIV-positive people linked to a treatment activist group and so were critical of both stigma and what they referred to as the “self-stigma” with which many sex workers contend.

There was another factor that may also have contributed to their openness. They had both contracted HIV before doing sex work. They had both been married and left by their husbands when they tested positive and subsequently started sex work to support themselves and their children. This was also the case for a number of women they knew. In some ways, perhaps, this protected them from internalizing the shame about contracting HIV as “punishment” for sex work that led to so much silence in the sex worker community. However, when I suggested this, they both disagreed and said that testing positive was worse for women like them who weren’t sex workers and who had been married. They spoke of how their HIV status had been held up as proof that they were “bad women” and that they had been abandoned. Rather than an opposition, I believe this indicates how the stigma that associates HIV with “bad women” and “whores” tarnished Sarah and Beatrice by making them suspect of “being whores”, while sex workers are seen as the very incarnation of the stigma.

Though a number of sex workers are now speaking openly about HIV, this openness still sometimes coexists with narratives about sex workers dying from witchcraft. Sarah and a sex worker from Kabwe told me stories about sex workers in the

community dying from supernatural encounters. They both involved sex workers being lured by greed, acting in transgression (be it sexually or by breast-feeding an animal) and awakening to find themselves in the hospital dying or in a coffin. Though sex workers truly believed the stories, much like urban legends, in my eyes, they contained a larger truth. Both stories bore direct parallels to the earlier witchcraft narratives that blamed sex workers for their deaths. In fact, a sex worker from Mali had told me an almost identical version of the animal story.^{vii} Sarah's story ended with her friend on her death bed, fading in and out of conscience, telling her the story of how she had been cursed and Sarah's efforts to raise money to bury her since her family had not cared to. The stories, to me, showed how even as HIV is being broached, this is sometimes happening alongside a continuing "unspeakability" framed by blame.

Charity from Kabwe shared Sarah and Beatrice's sense of the necessity of speaking about HIV, similarly borne out of seeing many women die and becoming positive herself. She also recounts a shift starting in 2002, when women became aware of HIV. Her account speaks to the difficulties in talking about HIV today:

Back before, we didn't know it was HIV or AIDS, that was making people dying. Nobody talked about HIV until the past five years. Like back, just recently, a few years ago, there was a girl in Chez N'Temba who died of HIV. And a friend of mine we usually go together in the night, she was saying that she was be-witched [by a client's wife] so she would ask clients first "Do you sleep with her and her?" [so she wouldn't also be bewitched by the same wife]. When that girl was dying, no one believed it was HIV, they don't believe it to be real. If a sex worker died, the others would say she is bewitched, and everybody knows.

If someone dies today, they will say, ah yes, at least now she has passed on. They don't care about why. Some sex workers believe in HIV, some don't, just like our parents. People see people die of HIV but they don't take it seriously, you know,

they say maybe it's something else. They've stopped saying it's witchcraft, now they just say "It's TB. It's not HIV, it's TB." Yeah, but it's not just TB...if you are not careful you end up fighting. They are scared. Sex workers don't even like talking about HIV. They hate it. They don't even like someone else talking about HIV. They say: "It's nothing. We'll die. All of us will die. So, ok fine."

In a context in which working conditions put sex workers at particularly high risk of HIV, and in which they are simultaneously persecuted for "spreading" HIV, it is perhaps not surprising that some sex workers feel they still, now, are left with little room to speak openly about HIV, their fears, or those they have lost. Although Jessica herself didn't talk about HIV with her colleagues much herself, she underscored the importance of doing so. In Kabwe, as a result of two workshops with sex workers, the Triangle Project had convinced most of the sex workers to get tested and three quarters had tested positive. Jessica referenced this and the need for positive encouragement: "It is important to talk to sex workers so that they know that HIV is real. I think of the people I know, 75% of the sex workers are positive. It is important to get sex workers to go to VCT [voluntary counseling and testing]. They are afraid they will die of depression."

Two of the younger sex workers from Kabwe, Chilechi and Becky, both 18, expressed a casualness in talking about HIV with sex workers that made them stand apart from all the others. Talking about HIV is normalized in Chilechi's account:

Maybe $\frac{3}{4}$ of the girls on the street have HIV: 18, 19, 20 year-olds. There are usually 50 of us on the street and 15 have told me they are HIV-positive. People say bad words about sex workers with HIV. But them, they don't mind much, they are free.

Chilechi and Becky were too young to have witnessed the onset of HIV among sex workers, and only Becky had known a sex worker who had died of HIV. Their accounts break with those who do not speak openly about HIV, and with those who speak about it out of a sense of duty, if not urgency. In some ways, HIV is made banal. The complicated corollary of this is that so many sex workers are turning positive so young, a fact which is normalized, perhaps seen as inevitable.

Becky's account departs slightly in that she questions and engages with the conditions in which so many of her peers are turning positive. It is interesting in another respect: she identifies intimate and non-paying partners as being a major HIV risk for sex workers.

I know four of them [HIV-positive sex workers]. My friends. They are sixteen, twenty, twenty-five and I'm not sure. The one, I used to work with her. They got it from boyfriends who had HIV. Even me, I had a boyfriend who had HIV. But I stopped, I said "No, I can't keep going with you, you are going with girls without using condoms and they don't know your health." I only know one sex worker who died of HIV. She didn't take ARVs [anti-retroviral medication]. She didn't want to get tested. Me, I've tested three times, I am negative. It's good to be with other sex workers who are positive. We encourage them, we eat together, we sleep together. One of my friends, she is good now. I tell her to go to Kara Counselling so she can get ARVs.

Becky's narrative is also interesting in highlighting how speaking about HIV allows sex workers to break their isolation and offer mutual support. This undoubtedly impacts on HIV-positive sex workers' living conditions and well-being.

III Changing Working Conditions

The overwhelming narrative of blame around sex workers dying of AIDS in Zambia stifled questions about the concrete factors that were leading to it. When sex workers broke from this narrative, they spoke of ways that working conditions needed to change to protect their health. Sarah, Beatrice, and Becky stepped into the gap in access to treatment by bringing treatment information to sex workers. Chastity in Kabwe spoke of the need to organize sex workers for better working conditions: “It would change everything if we could get together, unite the sex workers, at least those coming into it won’t get sick. They won’t get sick like us.”

There is support for such a position in the scientific literature. Collective organizing for better conditions and HIV-prevention enabled sex workers in India, to substantially reduce the HIV-prevalence in their midst and to increase condom use from 2.7% to 81.7%.^{viii} In nearby Johannesburg, South Africa, brothel-based sex workers had adjusted the price structure so that they all charged one price and it was for protected sex.^{ix} The most successful initiatives have taken places in locales where sex workers are closely grouped together, often in brothels. It is possible that the close-knit nature of the Zambian sex worker community, due to their exclusion, would be a strong asset in enforcing condom use. The insistence of sex workers in Kabwe that they would not be interviewed by me for less than the previous aid agency had paid them to attend a workshop, illustrated to me the potential power of collective bargaining that sex workers had.

Older sex workers like Rose tried to watch out for younger sex workers. She gave them condoms, helped them choose what to wear and sometimes gave them small amounts of money to buy a drink or snack at the club. She advised them on what clients were good and which to avoid. She encouraged them to talk about HIV and if sex workers tested positive, accompanied them to get ART.

Mary in Lusaka, who had worked in Congo, also felt such gestures needed to take place on a bigger scale. She felt that high rates of HIV amongst sex workers in Zambia could be reduced by improving working conditions and solidarity:

In Congo, the rate of HIV is low because sex workers and clients really use condoms. Even before she [a sex worker] can produce her own, a man already has one. They never ask for “live” [unprotected] sex in Congo. NEVER “live” sex with a sex worker, only with your husband or steady boyfriend. Also, there they work 24 hours a day, so they do not drink very much. Here we drink too much, we are not careful.

There, there is a group in the neighborhood to educate the women in sex work. There are old women who have done sex work a long time, they own their own houses from sex work when they retire. They go tell the younger sex workers: “If he does not use a condom, let him go.” The group is sponsored by different people, France, Italy. Last time in Congo, many people my age were given money for businesses, to retire, so there are less sex workers [fighting over clients]. You need a group of sex workers to campaign to insist on condom use. 100 sex workers, let’s say, then clients have to get used to it. It has an effect, if we as sex workers start it.

Gertrude spoke of how she wished for income-generating programs that could supplement women’s sex work and give them something to fall back on so it would be easier to refuse unprotected sex.

IV Treatment

Many sex workers had died before treatment became available. However, once access to it increased in 2004, sex workers were among those who began to receive it. Amora explains: “The first sex worker I knew [in six years of working] to take ARVs was last year in 2007. There are many sex workers who have HIV, I know five now and they get ARVs, they all take.”

However, according to most women, many if not most, of the positive sex workers were still not getting treatment. Sarah explains:

The biggest number of women [out of women Sarah knew who died] died before ARVs were available. ARVs only came in 2004, 4 years ago. So, maybe about 40 would have had the chance to have ARVs. But a lot still died [since then] because it was very late when they accepted to get tested and then it was very late when they got the ARVs. Some were co-infected with TB, so they passed on. And then, again a number have still died because they were on treatment but drank heavily or were in denial and didn't get tested or ARVs.

The fact that sex workers only accessed testing when it was too late, was a constant refrain in both cities. Rose recounts: “[Of the 15 of my friends who died], they didn't take ARVs, any of them. They couldn't by that time.” Grace tells a similar story:

Five of my friends died in the past six years. Like my friends don't want to go to VCT. Some go but it is too late. They get medicine, then in two, three weeks, they are dead. Only two got medicine. One was TB with HIV. They started TB

medicine for three months. The other one HIV and Cancer. Two weeks and she died.

In some cases sex workers were not accessing testing because of a combination of fear of being sick and of a lack of accurate information about HIV and treatment possibilities. Many feared that one could never consume alcohol on ART or that one needed to eat expensive food. This reflected the dearth of outreach and prevention services to the community. For example, Angela explains: “They [the sex workers I knew] didn’t take ARVS. Some would drink, others didn’t have money for [proper] food so didn’t take.”

Stigma was a crucial barrier. The persecution sex workers faced for HIV limited the chances to speak openly about the disease in ways that would have presented treatment and testing as options. Groups in Lusaka that did outreach and testing specifically for sex workers were rehabilitation groups, and most women intended on continuing to work. Furthermore, being identified as HIV-positive sex workers opened them up even more to being targets of attack and risked compromising their ability to earn an income. Though these may seem like relatively small things, to a large number of sex workers, they were substantial enough that they ended up costing them their lives.

Charity explains:

Usually, sex workers go for tests when they are very sick. When it’s already too late. They refuse to go before because of the fear of being stigmatized and the fear of accepting it. It’s the fear of stigma and stigma is everywhere. The place to get ARVs is in an isolated room, so people know why you are going. People are scared of their customers knowing and losing their market. People are afraid of

telling even their close friends because maybe they will tell and everyone will know and they will have no market.

None of the girls I know who died [40], got ARVs. I encouraged them, I even told some I was HIV-positive but no one believed me. We are 40 working at N'Temba now, and more than 30 are HIV-positive. Sometimes, we will talk about things. (...)So, you say let's go for a test and she won't go. "I know I am positive, I don't want to die, I can't take it." (...) And people will believe that if you are on ARVs, you cannot drink alcohol, this is a big problem.

Despite these very real barriers, with their two two-day workshops in Kabwe, Health Triangle had encouraged all the women who participated to test and had given them information on treatment and prevention. Non-judgmental services led by a sex worker and social worker, linked to medical services, were able to quickly surmount some of the barriers. Unfortunately Health Triangle had been funded for a small project and the funding ran out and it was difficult to find more funding. Precious, the sex worker who ran the project (and housed me in Kabwe), died the year after my field research at 27 of HIV-related complications. In Lusaka, TALC had applied for money to offer services to sex workers, but these had yet to come through. What remained was a number of the sex workers like Charity, Sarah, and Beatrice who soldiered on trying to encourage women through to testing and treatment, despite feeling like they were winning battles but losing a war.

V Illness, Dying and Taking Care

The HIV epidemic created a mass of ill and dying people who needed care. Much of that labour has been taken on unpaid, by women.^x The privatization of health services

through Structural Adjustment Programs in the 1990s had already created a significant transfer of the burden of providing care services to women.^{xi} For sex workers, stigma often cut a hole through that last safety net. Sarah explains how this played out in Lusaka:

Before treatment [2004], before there was anything to cushion the impact, there was high stigma. No one would take care of you. Before home-based care, you were just left to die in your house if you were an HIV-positive sex worker. Now stigma is a bit down and there is some home-based care.

According Paul Kasankonoma, a key informant from Treatment Action Literacy Campaign, the advent of home-based care has meant that at least sex workers can usually depend on palliative care, if they are linked in to services. The majority of care work, however, is still provided by female family members. Some sex workers were able to receive family support, but these were the minority. For them family care often meant negotiating stigma around their circumstances by hiding the fact that they have AIDS. Jessica tells one such story:

[Of my 3 friends who died of HIV in the past two years], their families took care of them. (...)But people don't talk openly when she is dying of HIV. They don't. They don't say this person died from HIV/AIDS. They say, no, she died from malaria.

When a sex worker's HIV status was open, for some, taunting and blame for their condition was a constant reality. Macey from Kabwe explains how this impacted a friend's ability to adhere to treatment:

I have known a lot of sex workers who died of AIDS. A lot. My neighbour, when I was small. Today, again, they were just burying one of our friends. So many.

Even more than a lot. The one who just passed away was 25. I think she was on treatment but she couldn't accept it. Even the times she used to go for medication, her family members used to stigmatize her. So I think that also had an impact on her death. They stigmatized her for being HIV-positive and a sex worker. They would say: "This is what you wanted. We used to tell you this was bad but what what what..." It contributed to her dying fast. She wasn't supposed to die so early. She had started taking the medication. But there was no proper love.

In some cases, such as the one Juliette describes, a sex worker's role as the income-provider could mean that her family would take care of her out of loyalty:

Yes, a lot of sex workers died. I used to get along together as a group with 4 of those who died. They were in their early 30s but I saw them get sick and die. Like the one who died this year, she was the breadwinner of the whole family, so they have to take care of her because she was always feeding them. But others were just abandoned. It's a case of where you find out your family are against you for being a sex worker. You get the virus, you get sick, they abandon you.

In the cases where family took care of sex workers, sex workers would often provide part of the care to their friends. Mary from Kabwe explains: "The parents took care of [my five friends who died]. But we would go make her porridge, sweep her house, sweep their [her parents'] house, wash their clothes and go back home."

In the few cases, where families were willing to provide care, the fact that many sex workers worked far away from their hometowns as a strategy to mitigate stigma, or to earn more money, made it difficult to locate them. Far more commonly, going home was not an option, due to the rejection sex workers faced for their work and for being HIV-positive.

Sex workers believed the lack of care played an important role in hastening the deaths of many women, particularly when they were no longer able to earn money for their own food and keep. Mary from Lusaka explains: “A lot died because they didn’t have food or someone to take care of them and their families were away, like in Kitwe. Nobody wants to take care of you because they say ‘You asked for this yourself’.”

These tails of abandonment were common. For some women, they meant being left on their own to die with no care and support. The development of hospice care has meant that fewer sex workers are dying at home alone without medical care^{xiii}. However, even in public settings, the lack of emotional support and the isolation many sex workers face is stark:

For sex workers who do not have that support, they are often left to die on their own. Sex workers’ families do NOT support them. They will just say: “We were telling you to stop this.” They won’t even look after you. It is difficult when sex workers are sick. There is even one in hospital now. I went there yesterday. The nurses are the ones who are taking care of her. The older sister was at her bedside, she said: “We can’t be looking after her, she was a sex worker. Let the men who were sleeping with her come...”. So, she is just alone in the world. [She will die.] The government will bury her and the sex workers will go [to her burial].

Sex workers often did what they could to palliate this by offering assistance. Rose describes her experience in Kabwe:

[Of my 15 sex worker friends who died of HIV in the past years], No one took care of them when they were dying. They took care of their own selves. Some had families but they couldn’t go to them because they were women who used to stay alone. They used to rent themselves. We used to help our friends when they were sick. To my side, I used to take care of them, to take them to the clinic.

Angela in Lusaka told a similar story:

It is rare that family helps, because we come from far. If family finds out you are a sex worker, they will not touch you or come near you. They say "You deserved this." So, mostly when we are sick, our friends take care of us. Sometimes, those who are sick now, some who have a little bit of strength work for medicine and food. Some who are very sick go to NGOs. Others are helped by fellow sex workers. We go visit during the day and take care of them.

Beatrice recounts how sex workers tried to step in for sex workers living far away from their families:

I have taken care of 5 sex workers. Four died even after we tried to take care of them. We tried so hard to find money to send them to their relatives. One woman I took care of was in denial and had a big leg tumor. We convinced her to get help, got the money and sent her back to her relatives and got her treatment. Now she is better and back in business.

Sarah described bringing dying sex workers to hospice so they could at least pass away in circumstances that allowed for some dignity: "We all take care of each other. I have taken care of 9 sex workers. Often, we can't locate the family. When they are from other provinces, we take them to the hospice so they can stay there. There, the government buries them."

Tine alluded to sex workers' role in providing economically for each other during illness: "When sex workers are sick, fellow sex workers take care of them because we come from far and relatives cannot afford to." Many sex workers had often assumed the care-taking work for significant numbers of women, and often, for those women's

children. This sometimes presented a major economic burden as Sarah and Beatrice explain:

-(Sarah) My challenge now is that sometimes colleagues, other sex workers are sick, or their children are sick, but they live far away. I need money for transport to get from point A to point B and then I need to get back home or it can be the whole day walking. I need to balance taking care of them and looking for my own food.

-(Beatrice) Oh, it is the same for me.

Angela found it difficult to provide financially for other sex workers when they could no longer provide for themselves. She wished sex workers would be funded for all the care work they do. "Some are sick now, and it is hard to do sex work when you are sick, we need food for sick sex workers." Charity, who also provided and cared for her orphaned 12-year-old sister, describes the difficulties sex workers faced in trying to provide care and food:

My aunt, she was a sex worker, she died of HIV last December. I wanted to stay with her but I couldn't because we wouldn't have eaten if I stayed there. I had to get money to buy her some food. So, I used to leave her to go work and that time she died, I wasn't there. I just came in the morning and she was dead. But there was nothing I could do, if I stayed at the house, we wouldn't eat.

When Alice was dying, no one was there. Her sister came from Manza. She just stayed about a month. And she left her. There is nobody taking care of you. She didn't send you care. Nothing like that, you are a sex worker. They blame you.

So, I took care of Alice too, and this other girl. She is still alive but she was very sick two years ago. We do, we do take care of other sex workers. But just during the day. If she is really sick, we will try and exchange for each other, in shifts. But in the night, in the night she will be alone because we all have to go to work.

Sometimes care extended beyond when a sex worker died to the care of her orphaned children. Sarah kept a close link to many orphaned children:

I go to see the children of sex workers who have died. If they and their guardians are sick, I encourage them to get VCT. Most often, the children have been positive and were able to get ARVs and later they thanked me.

Sex workers often offered occasional help to the kids of deceased friends who had either been taken in by a guardian or become street kids. In a few cases, they became primary care-givers of orphaned children.

VI Loss, Mourning, Marking

On an individual scale for many sex workers, death from HIV meant the loss of their circle of friends and social, sometimes economic, support. Juliette from Site and Service recounts: "Yes, a lot of sex workers died. I used to get along together as a group with 4 other sex workers. They were in their early 30s, but I saw them all get sick and die." Mary also speaks of how young her friends were when they died: "I saw a lot of sex workers die of HIV. Five of my friends did. They were 22, 21, 20, 17 and 18."

Rose, from Kabwe, describes losing a circle of friends, rebuilding it only to lose it over again:

Several times, I saw sex workers die of HIV. Oh, several times. Many of my friends died. I had about 15 of my friends die. In Luansha, in 1998 two ladies died. Then more died. Three died here last year. Four died in 2005. In all, 15 of

my friends died. The youngest four were 18, four others were 21, the others were 23, 27, 29.

Charity describes losing both her friends and her family and watching her community die around her:

I was the only one who could look after my kid sister [kid sister one at the time] so I started to sleep with men when I was 12 with two of my friends. At the end of the day, they were just giving us about 2000 or 2500 Kwacha. You can't buy anything with that, only vegetables. So we used to sleep with more than 6, sometimes more than 9. We were not able to use condoms. My other friend died about two years ago of TB. The other one is lucky, she is married.

Many sex workers died of AIDS and TB. Many of them. You know, you go to Chez N'Temba, you know someone is a sex worker. Then, you stop seeing her. So you ask "What's the problem?". "Oh, she is sick." Maybe you go to the hospital to see her. Next thing you know, she has died. Many of them have died. So many of them. About 40 sex workers I knew died. Most of them died when I was around 18 [2001]. And still now: My aunt, she was a sex worker, she died of HIV last December.

The grief of so many deaths had impacted the sex workers in different ways. For some sex workers like Gertrude, it was an isolating experience: "It affects us a lot to see close friends or family members die. So you keep quiet and think, should I stop [sex work] or what." For Macey, the deaths opened the door to discussion amongst sex workers, and encouraged them to take action to protect each other:

It is really painful to see the other girls pass on. We feel bad. We feel touched. We talk about it, we encourage each other on safer sex and female condoms and we talk about HIV-negative boyfriends but who have other girlfriends.

Tine from Lusaka recounts how women attempted to preserve the memories of other sex workers :

We really help each other when one dies. We keep photos of the ones who have died. If we used to live with her or if she gave anything to us, we tell the relatives that we would love to keep some thing in memory of her. Someone has a list, somewhere, of all the ones who have died. They were all between 18 and 25.

According to Tine, peoples' reaction to a sex workers' death often depended on how and where she had worked: "If a sex worker dies and she never used to get on peoples' husbands in the city, people will grieve with all of us sex workers. But if she did, they say 'Good riddance!', 'Let her go!' " Tine's account shows how sex workers had to contend with the hostility in the midst of mourning. Gertrude's account is a more severe one of contempt and rejection of sex workers, even in death:

At sex workers' funerals, it is mostly sex workers who are there. And other people too. But the comments that you hear are mean. Even if one of us volunteers to say our prayers for her, they will be shouting: "No, she was a prostitute." "Stop going [to do prostitution]!", something like that. It burns, it burns a lot. I think, even if I die, the same thing will happen to me. I can't sleep sometimes, just thinking about it.

When women were rejected by their families, it was often left to state hospitals or the government to bury them in relative anonymity and in circumstances that did not afford them much dignity. Nothing marked their passing or commemorated their lives.

There is no government record or institutional record of what it meant that so many sex workers died. As long as sex workers are scapegoated for HIV in Zambia, there will be no public reckoning with their loss. When the day comes that people and

institutions contend with their deaths, it will mean contending with how HIV and prostitution policy in Zambia has failed so many young women, so brutally. Given that the Zambian approach to prostitution and HIV in so many ways embodies the current policy directives of UNAIDS and PEPFAR, it paints a cautionary tale.

In the meanwhile, it has been up to sex workers to fight against the erasure of their lives by buying caskets and holding funerals for the women they knew. Sarah and Beatrice had just recently done this when I spoke to them:

-(Sarah) We really do look after one another. The two cases of recent deaths, our friend murdered at the Twin Pub and the satanic death [*a sex worker whose illness was attributed to witchcraft*], the funerals were at Beatrice's.

-(Beatrice) For each of them, we went around to the bars asking sex workers and clients for donations and bought them a casket. Then we raised money to have one of them sent back home to Kabwe.

In Lusaka, organizing sex workers' funerals was an entrenched practice that extended beyond a sex workers' circle of friends, and involved all sex workers. Tine explains: "When they have died, we take photos of the deceased and go around bars and get donations. I have done this for four sex workers."

These accumulated gestures marking sex workers' deaths were a resistance to the negation, not just of individual women's deaths, but of the devastation of a community of young women. Such was the case with Angela:

When one of us is dying, all of her friends, we ask the bar for money for her funeral. If the bar has no money, fellow sex workers will go do sex work to pay for the funeral or if work is bad, and there is no money, we beg our clients to give us money for the funeral. I have taken care of so many and done this for so many. I took care of 15 sex workers' funerals and of so many more [sex workers] when they were sick.

In Kabwe, where such practices were less common, Charity felt acutely how little social recognition there was of the loss of so many sex workers:

There is nothing to acknowledge all of the sex workers that died of AIDS. Sometimes, sex workers don't even realize if it's AIDS or not. I wish for that: something to honour them. I would like it. Some people were very close to me. I was very close to Alice. She was so very sick.

I feel bad sometimes, I feel bad that I am HIV-positive as well. I feel it too, how hard it has been on all of us sex workers. Because when Alice died, there was no one to buy a coffin for her. No casket, no nothing. We were just getting her things. Then she stayed in hospital for two weeks and the parents, the ones who took over, we don't even know how or if they buried her. But myself, I've started saving, I've got an account...atleast to pay for...

If I make 100 000K, I take 80 000K, 40 000K, I take it to the bank, for my kid sister, for myself. Because I know. If I die today, no one will bury me. So, I'm saving up for my funeral and for my [12-year-old] sister's. She is HIV-positive too. So, I'm saving for my little sister too.

Without the assurance that other sex workers would do it for her, Charity was devoted to ensuring that her life and her death would be marked and honoured. She was right in believing that the institutional record had little chance of doing so - indeed from the beginning of the epidemic, it has ignored the colossal human losses of so many female, trans and male sex workers to AIDS.

ⁱ UNAIDS/WHO, *Report on the Global AIDS Epidemic* (Geneva: UNAIDS/World Health Organization, May 2006).

ⁱⁱ She had however known two sex workers who had died at 21 and 24 of illegal abortions.

ⁱⁱⁱ WHO, *Tuberculosis Facts 2009 Update* (Geneva: World Health Organization, 2009). http://www.who.int/tb/publications/2009/tbfactsheet_2009update_one_page.pdf (Accessed March 10, 2010)

^{iv} Family Health International, "Demographic and Health Surveys (DHS): Behavioral and Biologic Surveillance Survey: Zambia Female Sex Workers" (FHI: Lusaka, 1998). http://www.fhi.org/en/HIVAIDS/pub/survreports/bbssZambia/BSS_Zambia_femalesexworkers.htm (Accessed March 10, 2010)

^v Family Health International, "Demographic and Health Surveys (DHS): Behavioral and Biologic Surveillance Survey: Zambia Female Sex Workers" (FHI: Lusaka, 2000). <http://www.fhi.org/en/HIVAIDS/pub/survreports/bbssZambia/index.htm> (Accessed March 10, 2010)

^{vi} See <http://www.avert.org/aids-zambia.htm> (Accessed March 10, 2010)

^{vii} Interview Maryam, December 7th, 2005.

^{viii} B.T. Swendeman et al., "Evidence for the efficacy of the Sonogachi project in improving condom use and community empowerment among sex workers: results from a cohort-control study." (Paper presented at International Aids Conference, Bangkok, Thailand, July 11-16).

^{ix} Anna-Louise Crago and Jayne Arnott, *Rights Not Rescue: A Report on Female, Trans, and Male Sex Workers' Human Rights in Botswana, Namibia, and South Africa* (Johannesburg: Open Society Foundation for Southern Africa, 2009)

^x Hilary Standing, "Frameworks for Understanding Health Sector Reform," in *Engendering International Health: The Challenge of Equity*, eds. Gita Sen, Asha George and Pirooska Ostlin, (Boston: MIT Press, 2002), p. 349; Stephen Lewis, *Race Against Time* (Toronto: Anansi, 2005).

^{xi} Standing, 2002, *ibid.*

^{xiii} Interview with Paul Kasankonoma, a key informant from Treatment Action Literacy Campaign May 10th, 2008.

Conclusion

In the first section of my thesis, I explored a period of severe state repression against sex workers on a national-scale that took place between 2004 and went until at least 2008. This period was characterized by government officials blaming sex workers for HIV and increased arrest, detention and repatriation of sex workers enacted through high levels of verbal, physical and sexual violence. Notably, some of this violence took place in the public eye: many sex workers were publicly beaten, stripped or whipped while being blamed for “killing” Zambians or spreading HIV across the country. The repeated and public nature of such displays is an indicator that government officials were either tacitly complicit or sponsored their occurrence.

A number of factors made such a period of scape-goating possible: the existence of repressive legal mechanisms such as the loitering laws, as well as the new curfew law; police’s incentive to repress for increased extortion; the lack of opposition within existing health policy for HIV; the historical stigmatizing of sex workers as vectors of disease. Finally, as a policy measure, such repression had the potential to accrue benefits to the national government both internationally and domestically.

Repressing sex work fit well the anti-sex work approach inscribed in American foreign aid, of which Zambia was a major recipient at the time. The period of increased repression began in 2004 as Zambia was put on the Tier-2 Watch List of the United

States Trafficking in Persons Report in large part for its insufficient efforts to combat the “commercial sexual exploitation” of young people. This was also the year during which Uganda was held up by the United States as the star pupil of PEPFAR for its showy implementation of abstinence and fidelity-based prevention programs for HIV. Though there is no direct proof of what impact American foreign policy had on this period of repression, it is clear that by repressing sex work the Zambian government had the potential of averting penalties and gaining support. On a national level, blaming sex workers for HIV allowed the government to deflect responsibility for its failures in fighting the epidemic and to preclude the political costs of these shortcomings.

The scape-goating of sex workers for HIV by state-actors inflamed and gave official sanction to pre-existing stigma. Sex workers were routinely blamed for HIV by people in the public at large. Violent repression by the police further identified sex workers as legitimate targets of aggression forcing them to live with constant public harassment and often, under the threat of violence. Some sex workers attempted to protect themselves by living together, this however made their homes even more likely targets for theft, stoning and attack. Other sex workers secluded themselves in their homes or sent their children away. In both Kabwe and Lusaka, sex workers attributed the recent murders of sex worker colleagues to their being singled out and blamed for “spreading” HIV.

In the final part of my thesis, I have examined the Zambian government’s public health response to HIV and how sex work figured in it. Broadly, this took the shape of

two trends: first, “rehabilitation projects” beginning in the 1990s that aimed to fight HIV transmission by encouraging women to stop sex work by taking up alternate skills. In some instances, rehabilitation projects also provided medical services or condoms. By 2000, confronted with the toll of HIV on male pools of labour and consequently Zambia’s GDP, the American government funded large-scale safer-sex and STI treatment interventions for sex workers and their clients in Zambia. These two approaches are featured in the Zambian National HIV-AIDS-STI-TB Policy which recommends rehabilitation for sex workers and health interventions targeting clients’ health with no mention of sex workers’ health. The 2006-2010 HIV-AIDS Strategic Framework does not mention sex workers as health service recipients either.

This institutional policy narrative stands in stark contrast to sex workers’ accounts of the large numbers of women in their community who died of AIDS. Many sex workers died without basic information about what they were dying of and how they could have protected themselves. Blame and stigma mediated sex workers’ access to protection, treatment and care. Some sex workers broke through the climate of shame and resulting silence, and militantly tried to address the gaps in information and access to ARVs. In both Kabwe and Lusaka, sex workers played an active role in providing care for sex workers who were ill or dying. In Lusaka, sex workers collectively paid for funerals of other sex workers. These actions contested the public erasure of the toll of HIV on the sex worker community.

In this thesis, I have hoped to contribute to the scientific literature in a number of ways. I believe this research adds to the political science and health literature, by creating a record of sex workers' experience of interventions meant to fight HIV by suppressing sex work. Documentation of the outcomes of such policy interventions is of particular current importance given the emphasis on such approaches in both the UNAIDS Guidance Note on HIV and Sex Work and USAID. I believe this research provides added insight into the ways in which national and transnational governance are enacted through interventions into women's sexuality and the connections between repression and "rehabilitation" projects for sex workers.

Secondly, I believe this research contributes to the historical literature on gender in Zambia. Sex workers' narratives of the period allow the illustration of the extent to which periods of intensified state repression of sex work are enacted through high levels of violence and the curtailing of women's access to public space overall. Sex workers' stories also add to existing literature by articulating the ways in which women have negotiated and resisted these conditions of repression and exclusion.

Thirdly, the existing literature on HIV-related stigma has concentrated on analyzing stigma as psycho-social phenomena. I hope to have contributed to an analysis of the ways in which stigma can be and has been politically instrumentalized as part of broader governance.

It is my hope that this research contributes to the development of better sex work and HIV policy. The failures of Zambia's policy approach to HIV must be read by governments, international bodies and donors, particularly UNAIDS and PEPFAR, as a cautionary tale. The damage to health and human rights caused by advancing anti-prostitution approaches in the place of community or rights-based responses to HIV is an unavoidable finding of this research.

I further hope this research helps bring to the fore how sex workers' narratives of prostitution policy and law are crucial to understanding the full scope of their impact. This is particularly true when sex workers are so often robbed of the right to have a say in the crafting of the policies that govern their lives. The primacy of institutional records and outside "expertise" to understand the governance of sex work or the impact of epidemics must be questioned. In the case of this work, they have proven utterly insufficient when not misleading.

Sex workers' voices allowed me to document their persecution as scapegoats for HIV through state and social repression and to record the experience of a community overcome by HIV. Above and beyond the implications of these stories for policy, theory and research, to me, simply the telling of those stories is of profound importance, perhaps what matters most.

Through this work, I hope to have honoured the sex workers I interviewed and what they told me. I hope I have conveyed the resilience, the courage and the creativity of

the women I encountered. Moreover, in the spirit of the sex workers who insisted on marking, I hope to have recorded the horrific, heart-breaking – and avoidable – loss of so many women's lives.

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APPENDIX I

Sex Workers Interviewed

Name	Place	Year Started	Age	From	Places Worked and Contextual Information
Mary	Lusaka	1994	32		All over Zambia: Chirundu, Livingstone, Kitwe, Ndola; Congo (DRC).
Angela,	Lusaka	2001	Older* (30-40s)	Moved from Bala in 1998.	Started in Lusaka, in bars and hotels after her divorce.
Beatrice	Lusaka	2002	30	Zanmuni Township, Lusaka.	Lusaka, Mazabuka, Kabwe, Chirundu, Solwezi N-W Province) 30.
Sarah	Lusaka	1993	42	Mandero Township, Lusaka.	Lusaka, Mazabuka, Kabwe, Lusaka, Chirundu, Solwezi N-W Province.
Zanji	Lusaka	1999	25	Ndola, Copperbelt	Lusaka, bar and street.
Tine	Lusaka	1990	30	Chipata, Eastern Province.	Lusaka, bar and street.
Grace	Kabwe	2002	Older* (30s)		Lusaka and Kabwe: bars only.
Carolina	Kabwe	2008-6 months	Older* (late 20s)		Kabwe, Livingstone, Kitwe, Ndola, Lusaka, Kapiri: bars only.
Helen	Kabwe	2002	Older* (30s)		Livingstone, Chilawambwe, Chingola, Ndola, Kitwe, Lusaka
Becky	Site-and-Service, Kabwe	2004	18	Kabwe	Kabwe. Has a baby. Stopped gr. 11, when she was 17(orphan lived with other orphaned girls).
Macey	Site and Service, Kabwe	2007	18	Kabwe	Selling at the market & in town on the street, Kabwe.
Chilechi	Site and Service, Kabwe	2006	18	Kabwe	Selling at shops in S & S township & in town on the street, Kabwe.
Mevis	Site and	2000	28	Copperbelt	Kitwe, Kabwe. Works

	Service, Kabwe				on streets, bars, lodges, guesthouses. Lives in Riverside Township.
Gloria	Site and Service, Kabwe	2004	20	Kabwe	In town, on the street.
Mary	Site and Service, Kabwe	2002	22	Kabwe	Kabwe, Chindwini at the army base, Kawiba. On the street while "shopping".
Claire	Site and Service, Kabwe	2006	Early 20s	Luansha, Copperbelt	Kabwe and S&S. Street, bars and hopes to start in Congo soon.
Mercy	Kabwe	2000	29		Kabwe in bars.
Charity	Kabwe	1995	25	Kabwe	Kabwe in bars. In shebeens when she was younger. Orphaned with young sister. Stopped school in grade 7.
Amora	Site and Service, Kabwe	2002	19	Luansha, Copperbelt	Around the shops and bars in town. Dropped school in 2005 in grade 9, at 16.
Veronica	Site and Service, Kabwe	2005	18 (19, May 27th)	Kasane	Orphaned, moved to stay with uncle in S&S in grade 11.
Rose	Site and Service, Kabwe	2000	Older*: 30s	Luansha, Copperbelt	All over Zambia: Kabwe, Chirundu, Kazungulu, Livingstone; Congo (DRC). Eldest of 3 sister sex workers.
Gertrude	Site and Service, Kabwe	2000	29	Chindola, Copperbelt	Kabwe, Lusaka, Chindola with miners (\$\$). At 23, moved to Kabwe to get away from abusive husband
Juliette	Site and Service, Kabwe	2000	25		Kabwe. Street and bars.
Jessica	Site and Service, Kabwe	1998	28		Kabwe and Lusaka, bars & street.
Precious	Kabwe	1998	26	Lusaka	Lusaka, through a few private contacts. (no experience of

					regulation)
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* "Older" refers to the first interviews when I didn't ask age. The ages given are my estimates.

APPENDIX II

Interview Guide

Background	
1.	How many years have you done sex work?
2.	How do you work?
3.	Where have you worked?
4.	Where are you from?
5.	How old are you?
History	
6.	Has any part of sex work changed over the years? If so, what?
7.	Is it better or worse than before?
Working Conditions	
8.	Tell me about how sex work is done.
9.	Tell me about prices and money.
10.	Do you face any safety issues in your work? If so, what is the biggest threat to your safety?
11.	Do you face any health issues in your work?
12.	Are you able to access enough condoms?
13.	Are you able to get health information?
14.	Are sex workers able to get anti-retroviral treatment if they need it?
15.	Who takes care of sex workers when they are sick?
16.	Tell me about your biggest concerns or problems in sex work.
17.	Has HIV affected sex workers in Zambia? If so, how?
Law enforcement	
18.	What is your relationship with the police like?
19.	Have you ever been arrested or detained? If so, tell me about it.
20.	Has law enforcement changed over time? If so, how?
Treatment of Sex Workers	
21.	How do people treat sex workers?
22.	Are there people in Zambia against sex work ? If yes, who ? If yes, how do they affect you?
23.	Do abstinence and fidelity campaigns affect you ?
Policy	
24.	What could the government do to make things better for sex workers?
Collective Action	
25.	Do sex workers do anything to watch out for each other or protect each other?

APPENDIX III

Themes and Sub-Themes

Law and Policy Application (Repression)

- Link to Blame for HIV
- Violence
- Sexual Coercion
- Extortion
- Curfew
- Detention
- Justice
- Effects on Working Conditions

Discrimination/ Persecution (Social Repression)

- Link to Blame for HIV
- Ability to be in Public
- Effects on Housing
- Effect on Children
- Effects on Working Conditions
- Role of Rehabilitation and Institutions
- Violence

Impact of HIV

- Deaths
- Lack of Knowledge
- Blame/Masking
- Issues of Care (and Abandonment)
- Treatment and Testing
- Marking/Funerals
- Working Conditions