

RISKY BUSINESS VANUATU: **Selling Sex in Port Vila**



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Risky Business Vanuatu

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EXECUTIVE SUMMARY

In November and December 2010, face-to-face interviews were conducted with 18 women and 2 young men who had had sex for money in the previous 12 months. Interviews took place in and around Port Vila, and were conducted in Bislama and in English. The interviews were designed to investigate the circumstances and context of local sex work in Port Vila.

The study sample is non-random and therefore the results cannot be considered to be generalisable to all sex workers in Vanuatu. However, the type of sex work captured was consistent with the characteristics of typical sex work in Port Vila reported in a 2007 survey¹. The data presented here provides a nuanced description of the motivations for sex work, the conditions under which it occurs and the conceptualisations of client and other sexual relationships in the lives of the sex workers who participated in this study. This information should be valuable to those who wish to provide HIV prevention, sexual health and other services to sex workers in Port Vila.

Participants were aged between 16 and 36 years old. The average age was 24 years. While most participants began sex work long before they were 18 years of age, all the sex work undertaken by study participants had been freely chosen, the sex workers operated independently. Sex work was very informal, and few of the interviewees explicitly self-identified as sex workers, despite regularly exchanging sex for money.

Sex work occurred in the context of unemployment and lack of access to cash. The data also indicated that while exchanging sex for money was considered to be somewhat shameful and was practised covertly, it was also believed to be a common practice.

Two distinct modes of selling sex were evident. In the first, small groups of sex workers frequented bars, nakamals² and nightclubs in the evenings to find clients and the sexual encounter took place immediately after it was negotiated. In the second, the sex worker worked alone and meetings for sex were prearranged. In this second pattern, clients were regulars or had been found during daytime excursions to town and arrangements would be made to meet for sex later. These modes of operation were not exclusive and some interviewees

adopted both. Those who worked exclusively in the second mode were the most covert in their activities and not part of any wider networks of sex worker friends.

Sex work began at a young age. Most interviewees were younger than 16 years old when they began sex work, and some were as young as 11 and 12 years. While friends and peers played a central role in the introduction to sex work, none of the participants had been coerced into sex work.

The money earned from sex work was primarily spent while in town, on consumer goods and also on food, drinks and kava while out with friends. Few interviewees needed their earnings for daily food and shelter; but for most participants, the money earned through sex work afforded them some independence and autonomy along with access to cash.

Sex workers expressed a preference for condom use but were inconsistent in their use of condoms with clients. Condoms need to be free and at hand to maximise uptake. While the quality of condoms was raised as an issue, most sex workers would not pay for condoms. Conditions of privacy and confidentiality were also very important to whether sex workers would pick up free condoms. Privacy and confidentiality are not merely a matter of shame but may have implications for the personal safety of sex workers.

Information about the protection that condom use offered from HIV and other sexually transmissible infections (STIs) had an impact on sex workers' attitudes to condoms. There were many misconceptions about condoms and a poor understanding of the role they play in preventing STIs and HIV transmission. Some sex workers and some clients did not know how to put a condom on a man.

Clients were both foreign and local. Local clients were particularly averse to condom use. Clients' wishes usually determined whether or not condoms were used. Overall, the sex workers in this study were not confident or competent enough negotiators to convince a reluctant client to use a condom. Those sex workers who had accurate information about the role and efficacy of condoms

in preventing HIV and STI transmission did actively encourage clients to use condoms.

Nakamals, bars and nightclubs are common sex work sites, and kava and alcohol drinking and sex work are intertwined. The combination of alcohol and kava and sex work may exacerbate risk as intoxication compromised intentions to use condoms. Drinking was also reported to be associated with lowered inhibitions and more adventurous sex than usual. Watching pornographic films with clients was also associated with sexual experimentation, and viewing usually occurred in the context of a drinking session.

Along with the hazards of excessive alcohol and kava consumption and the elevated risk-taking associated with intoxication, forced sex was another danger associated with sex work. The heightened vulnerability to rape and sexual assault, however, appeared to be a consequence of being publicly exposed as a sex worker.

Sex workers were variously encouraged to stop sex work by their church and also by health service providers. Sometimes families of sex workers beat them to convince them to stop. For those interviewees who had agreed to give up sex work, the undertaking resulted in a more covert approach to sex work.

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1. INTRODUCTION

This report documents the findings of a qualitative investigation into the selling of sex in Port Vila. It is intended that this information will be useful to HIV prevention strategies and programs aimed at serving sex workers. The report is based on fieldwork carried out during November and December 2010 in Port Vila, Vanuatu. In-depth interview data were gathered from 18 young women and 2 young men, who talked about their lives and their personal experiences of selling sex.

The research was conducted by the International HIV Research Group (IHRG) of the School of Public Health and Community Medicine at the University of New South Wales, Australia in partnership with the Pacific STI and HIV Research Centre (PSHRC) of the Fiji School of Medicine. The study was funded through an AusAID targeted HIV social research grant and contributes to a larger regional project investigating sex work, HIV prevention and transmission risk behaviour in the Pacific that is currently being undertaken by IHRG.

Background

Vanuatu is a chain of islands south of the equator in the west of the Pacific Ocean. The population of 243,000³ is young, culturally diverse and there are over one hundred local languages. Bislama, French and English are official languages. While many Ni-Vanuatu (or Ni-Van)⁴ are multilingual, literacy levels are low. Agriculture and tourism are the mainstays of the economy. Unemployment is high, especially among youth.

The nation gained independence from a joint British-French rule in 1980, and this marked a recent period of significant political and social change for Vanuatu. Port Vila on the island of Éfaté lies at the heart of that transition, characterised by rapid urbanisation and the growing importance of consumption that accompanies an increasingly globalised cash economy. Port Vila is the capital of Vanuatu and is the largest population centre, major port, and tourist and commercial hub. Pre-independence, Port Vila was a town of predominantly European residents, and the presence of a local indigenous population was strongly tied to employment. Today, Port Vila is the major population centre for Ni-Vanuatu as a result of internal migration from villages and rural areas of Éfaté as well as from Vanuatu's other islands.

The first case of HIV was reported in Vanuatu in 2007. Vanuatu currently has a low HIV prevalence, with few reported cases, but levels of testing and surveillance are low. Neighbouring Papua New Guinea has a serious epidemic, and Vanuatu's National Strategic Plan contends that the many risk indicators Vanuatu shares with Papua New Guinea give cause for concern⁵. Vanuatu's national response to HIV is founded on prevention⁶. Interventions that target core groups are a crucial and cost-effective approach to HIV prevention, and both the National Strategic Plan and the most recent UNGASS report on Vanuatu identify a need for programs that target sex workers and people who engage in transactional sex⁷. In order to be effective, any interventions aimed at reducing the HIV transmission risk associated with sex work will need to be sustainable and acceptable to sex workers. Program design and policy will need to take into account, and be appropriate to, the conditions under which sex work occurs in Vanuatu and the everyday realities of sex workers' lives.

As sex work involves multiple and concurrent sexual partners, it has been associated with an elevated vulnerability to HIV infection when sex workers do not, or are unable to, negotiate condom use. Where buying sex is common, research shows that HIV transmission can be reduced by increasing levels of condom use among sex workers and their clients⁸. Increasing condom use is central to HIV prevention for sex workers, and for the wider population of Vanuatu.

A 2007 behavioural survey of sex workers⁹ found that condom use was inconsistent and rates of testing were low among sex workers in Port Vila. That survey also concluded that involvement in sex work in Port Vila was largely sporadic and informal, and identified alcohol use and a high proportion of sex workers with a history of non-consensual sex as areas of concern that might contribute to HIV risk for sex workers¹⁰. Beyond this, little is known about sex work in Vanuatu, or about pathways to and reasons for sex work and the meanings that people who sell sex ascribe to their sexual transactions and behaviours.

2. SELLING SEX IN PORT VILA: A QUALITATIVE STUDY

In November and December 2010, face-to-face interviews were conducted with 18 women and 2 young men who had had sex for money in the previous 12 months. The interviews were designed to investigate the circumstances and context of local sex work in Port Vila. The study aimed to advance understandings of factors relevant to HIV prevention for sex workers in Port Vila, Vanuatu.

This research was funded by AusAID through a targeted HIV social research grant to the International HIV Research Group (IHRG) of the University of New South Wales, Australia.

This report is based on fieldwork data collected through the 20 in-depth interviews. It is aimed at policy and program developers, service providers, researchers, civil society and community organisations, individuals and groups who have an interest in HIV prevention in Vanuatu, along with all those who are concerned with the health and wellbeing of sex workers.

This study follows on from work that the researchers have recently completed in Fiji and Kiribati¹¹. It will contribute to a wider Pacific project involving the collection of multi-country data and a mapping of regional issues. The findings to date show that context and conditions of sex work differ markedly from country to country. HIV prevention programmes and policy must be grounded in, and address, the diverse realities of sex work and sex worker circumstances at each location.

Methodology

In order for policy and interventions aimed at HIV prevention for sex workers to be effective, any measures adopted must be acceptable and appropriate to the sex workers they target. Therefore the everyday realities, concerns and circumstances of people who sell sex must be adequately understood. This study employed a face-to-face, semi-structured interview method in order to give sex workers the opportunity to talk about their lives, the circumstances under which they sell sex, the role of sex work, their relationships with clients, and also condom access and use in the context of these transactions. Interviewees were also asked about their knowledge and use of HIV and sexual health information, testing and treatment services.

The research proposal was evaluated and approved by the Ministry of Public Health in Vanuatu, and ethical approval was also obtained from the Human Research Ethics Committee of the University of New South Wales.

Before any data collection began, two preliminary visits to Port Vila took place for the purpose of observation and familiarisation with Port Vila and its environs. During these visits first contacts with local sex workers and key informants were made, and various sites and locations where sex work occurs were visited. The presence on the research team of a sex-worker peer educator of Melanesian origin greatly facilitated communication with and introductions to local sex workers who were encountered in nakamals, bars, nightclubs and hotels as well as on the streets.

Data collection

Data collection began on the third visit. Recruitment was by word of mouth and was seeded by first contacts and through individuals the research team encountered during site and venue visits. During data collection, any information provided on other venues and sites where sex is sold was followed up and those sites were also visited. Invitations to participate in the study interviews were extended to women and men who exchange sex for money or goods.

Sex work was defined as exchanging sex for money or goods in the past 12 months. While most interviewees sometimes received goods as payment for sex, all interview participants confirmed that they had exchanged sex for money in the past year. There was no age limit on participation¹². Men and transgender as well as women were eligible for inclusion in the study. Participation was voluntary. An information sheet was provided; information on the study was also delivered to participants verbally, and a signed consent was obtained from all participants prior to interview.

A semi-structured interview schedule was used. This schedule was topic focused and provided a general guide rather than a list of questions strictly adhered to. Participants were encouraged to elaborate on their answers, and to talk about what was most important to them. Interviews enquired into:

- Personal background and history of sex work.
- Economic and other functions of sex work.

- Descriptions of types of sexual exchange and the conditions under which sex work takes place, including an account of the wider context of risks and consequences associated with sex work.
- Condom access and use, including negotiation with clients.
- Access and use of sexual health information and treatment services.

Interviews took place in and around Port Vila, and were conducted in Bislama and in English. Bislama to English translation was undertaken at the time of transcription. The two interviewers were both female and Melanesian. Both have extensive HIV social research training and interviewing experience; one having an academic research background, and the other with many years experience in community research collaborations.

All interviews took place at sites where confidentiality and privacy could be assured. Interviews were conducted in an informal, semi-structured, conversational manner and were digitally recorded. Interviews lasted between 45 and 120 minutes. Participants were not offered any financial incentives but were reimbursed for transport expenses.

Data analysis

Individual interview transcripts were read and summarised as cases. Dominant themes and issues were identified and transcript data was then coded, compiled, aggregated and summarised. Individual transcripts were read closely and considered as whole stories. These readings afforded an overview of the interviews, both as individual narratives and collectively. The first coding of transcript data was topic driven, and further thematic code lists were generated, based on repeated and close readings. Coded data was aggregated into code files that were again generalised and summarised. The analysis aimed to identify range, pattern and consistencies and points of difference within these topical and thematic data groups.

3. RESULTS

This section reports on the interview data gathered.

Data on key topic areas are described and summarised. Particular attention is paid to the range of experiences and views expressed as well as to commonalities. Direct quotations are presented in text boxes to augment the summary and to give voice to the participants. The quotations exemplify common experiences and illustrate themes and the variety of ways in which those themes are imbricated. All names have been changed and the names assigned to the quotations are not the participants' real names.

This study sample is non-random and as such it cannot claim, nor was it intended, to be statistically representative of all sex workers in Port Vila. Rather a purposive sampling approach was employed in an attempt to capture sex workers of varying ages and working from a range of sites, and recruitment efforts responded to information on the range of sex work as this information became available during data collection. Data on types of venues and sites where sex work took place in Port Vila achieved saturation. That is to say, the data became repetitive and no new information on venues was gathered.

Throughout the reporting of results, words such as “a few”, “some”, and “many” are used instead of exact numbers. The resultant imprecision is deliberate and intended to avoid misinterpretation or misrepresentation of the data. Otherwise, documentation of exact numbers or percentages of participants who reported the same experience, circumstance, practice or belief could be taken to suggest, erroneously, that the percentages are generalisable to the entire population of sex workers in Port Vila. Thus numbers are used only in the description of the sample captured in this study.

The study recruited only two eligible males for interview. As the data gathered could not achieve saturation on any topic related to male sex workers, the circumstances of both the male participants will be summarised as cases. Those summaries will follow and be discussed in relation to the main body of the reporting in which the results will be derived from the data from female sex workers.

Description of the sample

Twenty sex workers were interviewed (n=20)

The participants' ages ranged from 16 to 36 years old, and ages were evenly spread across this range, with the median falling between 24 and 25 years. The average age of the interviewees was 24 years. Three participants were under 18 years of age.

Eighteen participants were female and 2 were male. Of the two men who were interviewed, one was heterosexual, and the other was bisexual and sold sex to men only. No transgendered people were interviewed. The research team did not meet any transgendered sex workers and were told that Port Vila was a very dangerous place for the open and public expression of a transgendered identity. The female sex workers had male clients only.

All twenty interviewees were Ni-Vanuatu and normally resided in or around Port Vila on the island of Éfaté.

The sample included both married and single sex workers, sex workers who were living at home with parents and those who lived independently, sex workers who had children in their care and those who did not, sex workers who were employed and those who had no other job, sex workers who were networked with Wan SmolBag - knowing about and utilising some of the services provided there – as well as those who were not users of any sexual health or community education services.

Few of the interviewees explicitly self-identified as sex workers, and while most interviewees sometimes received other goods as payment for sex, all confirmed that they had exchanged sex for money in the past year.

Sex work in Port Vila

In Vila we 'stikim nek' like we say. If you give us money, in the night we will come and see you. That's what we do. (Betty aged 29)

I go and meet them at the club and then after we go to their house, stay at their house and then we have sex and they give me money. (Rita aged 16)

Life has gone bad. Young people don't have work and are just at home. Sometimes, some big men, they pay young girls to go and sleep with them for money and some young boys just follow older women. It's just for money. Life has gone really bad. (Janice aged 22)

"Going out", "going around", and "stikim nek" were phrases that the interviewees used to refer to having sex in exchange for money. Few participants used the phrase "sex work", but all interviewees regularly had sex in exchange for money. While "going out" and "going around" were both phrases that could also be used more generally to mean "having sex", the participants in this study used these phrases specifically to refer to seeking and engaging in sex for money. The turns of phrase quite accurately invoke the process of going out to town, and going around the streets, nakamals, nightclubs and bars in order to meet clients and sell sex. The potential slippage between the two meanings also signals the close relationship between casual sex and paid sex in Port Vila. "Stikim nek" more explicitly expresses a sense of exploiting or bleeding the client for money.

"Sex worker" was not a phrase that many of the interviewees readily identified with, so interviewers always asked whether the participants had had sex in exchange for money or other goods. All participants confirmed that they had exchanged sex for money in the past year. Few of the interviewees were publicly identifiable as sex workers and most said that only a very small number of other people knew that they engaged in sex work. The other people who were aware that participants sold sex, were generally other sex workers and friends who also exchanged sex for money.

One participant's view on sex work in Port Vila summarised the experience of other interviewees succinctly:

In Vanuatu currently there are not many jobs so a lot of young people - not just myself - hide what they do. They don't want, like they feel shy mostly about doing this and they can't say it out loud. They have no job and then they are "going around", having sex with other people who give them money. (Liz aged 19)

Here Liz not only situated sex work in the context of unemployment, but also suggested that although exchanging sex for money is somewhat shameful and practised covertly, it is also common.

The study data revealed two distinct modes of conducting and negotiating sex work. One involved making appointments with clients to meet for sex at a later time, and was associated with working alone. The other involved more immediate sex and was associated with working in groups.

Some sex workers worked completely alone and had regular clients who contacted them, or whom they would contact when they needed money, or they would make arrangements with new clients whom they met on the street in the daytime. Some hotel receptionists also had telephone numbers of friends they could call if a hotel guest expressed a wish to buy sex.

I go to town. I meet some boys who ask me for my number. They ask me for my number, I give my number to all of them, and they contact me. (Betty aged 29)

I just go to nightclubs and meet friends, or boys that - I don't know them - I just follow them to their apartment or wherever they sleep. And then when I get a bit of money I just come and buy my food, my clothes. Yeah, so it's really, I know it's bad for me but - it's just my secret, only some of my friends know. I never tell them but they see how I act, dress up, make up. Yeah, we're all the same. (Maria aged 27)

Once in a while we do sex work. When men ask me and I don't want to, I say "you go out with this friend instead of me". (Gail aged 29)

However, it was more typical of the sex workers in this study to work with one or several other friends and for there to be no interlude between finding a client and engaging in sex. Sex workers who operated in this

second mode went out or met in groups in the evenings at places where they might find clients, and sometimes arranged jobs for one another. This mode of sex work was combined with, and often directly functioned to support, social life.

Sex work most often entailed vaginal sex. Several interviewees said they also provided or received oral sex, very few said they performed hand jobs, and none of the women reported anal sex with clients. Group sex (involving more than one man and more than one woman) was cited on several occasions.

Entry into sex work

Most interviewees began sex work long before they reached 18 years of age. While a few of the interviewees told of starting to sell sex after a long-term relationship broke down or ended, most began selling sex shortly after sexual debut. For some, first sex took place as young as 10 and 11 years of age. Few interviewees were older than 16 when they began sex work. While numerous interviewees said that friends had encouraged them to sell sex the first time, and that in some cases friends had even arranged the first client, none had been forced into sex work.

Rita, now 16 years old, took up sex work at 11 years of age after running away from school. She described this as befriending men for money: "I befriend one, then I go to another one. That's what I do" (Rita aged 16). Like many other interviewees Rita insists that sex work was her own idea and no one else's: "it was just my thoughts only. Like, I would try it. My own thoughts made me like this...Me, myself, I wanted to try it" (Rita aged 16).

I was 16 when I started. I left my parents and I went and lived with a sex worker.... The first time she brought a client home and I saw how they gave money and things like that, I saw how they gave necklaces - they were gold! After that time my mind was made up, and the next day and every day I went out [to sell sex]. I found I liked it and I didn't stop. I just kept doing it. (Emily aged 28)

When I was 14 life was a little bit hard, every man had to look for his own food so my big cousin-sister taught me to give my body for sex so I started. I started when I was young and I kept going until now. I am 33. So I have been doing this, how will I say this like, I am special for the men. Like they use me because when one calls – lunch, anytime - just for a short time, just for 30 minutes only I get 5000 vatu¹³ and sometimes I get 2, 3 like this so I make money. I have a partner, but my partner is young, he's 21 years. I work, I have a good job but the problem is money; we don't get it every day from work. But the kind of job like what I do [sex work], this, we can have money every day. And if you are with a man who wants to drink kava, he wants to smoke, so there's no choice, I do this to keep him happy. Like many times we are with friends who pay drinks for my partner, they pay kava, cigarettes and he doesn't know anything. (Deidre aged 33)

A number of the interviewees said that their first sexual experience was paid. Several of the young women described having learnt from school friends that sex provided access to cash that they couldn't get from their families. For some, the information that "boys will pay" was one of the first things they learnt about sex. Violet recalled that her school friends:

were always talking about boys. I asked them, 'why you guys talking about boys a lot?' and they said 'boys they are so, boys they are so good, if you have sex with them they gonna give you money'. (Violet aged 17)

This association of sex and money was reinforced by her first sexual experience. Violet said that she had her first boyfriend at 11 years old and that he paid her for sex:

He was my first boy-friend and he met me and he had sex with me and he gave me money, he took me everywhere. (Violet aged 17)

An early sexual debut sometimes had serious consequences, regardless of whether or not the girls received money. Numerous interviewees explained that if a girl gained a reputation for being sexually active, even if she had been the victim of a rape, and especially if she had been the victim of a gang rape, this equated with being sexually available to anyone and such a reputation would leave her vulnerable to further rapes. Leanne (now aged 25) was withdrawn from school and moved into town after being raped in her village. At the age of 13, Tina (now 29) had sex with a much older boyfriend, which

ruined her reputation in the village. She attributed a later gang rape by village boys and the deterioration of her relationship with her family to this reputation.

Family breakdown was another reason for leaving home and moving to town, leading to a consequent necessity, or opportunity, for selling sex. The death of a mother, or both parents, had left several interviewees vulnerable to abuse by wider family, or alienated and estranged. As a result, they had left school and home and were fending for themselves by the time they were 16 years old. With few other resources available, sex work provided an income and often some fun.

While sex work does occur elsewhere, interviewee narratives closely link selling sex with going to town. Indeed, many of the sex workers said that they started selling sex when they moved to Port Vila, but home and the village was not always a safe place for the women we interviewed. Some had been raped by local boys and some had been abused by family members. Other women said that they had suffered in their village marriages; that they had been subject to beatings, to husband's infidelities and lengthy absences, and were given no money to run the household. Some interviewees talked about the attitudes of men more generally, and said that as they were often forced to have sex by men who would not take no for an answer, then they might as well get paid for it.

My immediate family found a man for me but I didn't want him because his behaviour towards me was too harsh. The guy doesn't help me to do anything. He's hardly around. I have to do everything around the house. He came and stayed with me for a short time... he was too harsh, he used to swear at me. So I told my family "I don't want this guy". My family used to force me to stay with him so I ran away and came and stayed here [in town]... When I was at home I never did this [sex work]. I moved into town so I am doing this. Life in town is hard. At first I used to work but after staying for a while I didn't work. I just stayed... [men] wanted to go out with me. When the man insists and says that he'll give me a bit of money I just accept what he says. The first time I will ask him "are you carrying a condom?" I don't want sex without a condom. I am afraid of disease and of getting pregnant. (Gail aged 29)

Not all the interviewees took up sex work as a response to adverse circumstances, however. For many, entry into sex work was opportunistic and followed an unsolicited invitation or offer of money. Some of the interviewees recalled that the first time they got paid for sex they hadn't asked for money, but quickly saw the advantages of receiving payment. Elsie took up sex work after separation from her husband. She was surprised to be paid the first time she met a foreigner at a bar and went back to his hotel:

I thought maybe we're just going to have fun and drinks, like that. ... then he just gave me money, the next day, like in the morning. (Elsie aged 36)

Many interviewees took up sex work when they began frequenting bars and nightclubs; often they simply noticed that sex work was taking place around them and considered it to be an attractive option. Several interviewees said that they were intoxicated the first time they accepted money for sex. Sometimes friends had arranged the first client, as a favour to provide access to cash and desirable goods, or to provide a quick solution to a financial problem. At every age, friends and peers played a prominent role in learning about the opportunities for sex work.

they [village boys] raped me and they, like I didn't feel good at home because they talk about me as a prostitute and so when I feel like they say that to me then I keep on doing that ... when I was 15 years old, I started going clubbing and I started meeting up with other girls and we started going crazy with men and then that's when I started to accept to sell my body. (Tina aged 29)

I was in the nightclub when one boy, just a staff, came over and asked me 'this one white guy asks if you could go with him to the ship, and then he'll pay you 10,000 vatu', you know, because I'm already drunk I just follow what he says. So, we went to the ship, have sex, after that early in the morning, about 6.30, he dropped me back. (Maria aged 27)

I used to see all my friends and I would follow them. They'll start to drink kava then they'll start to look for men. If there are men then they will go out with the men from the kava [bar], and then the men give money to them. (Gail aged 29)

• Economic and other functions of sex work

The money earned from sex work was primarily used to pay for clothes and relatively expensive goods and to pay for a social life that centred on alcohol and kava. Few interviewees used the money to support others, often because it was difficult to explain where the money came from. As Gail explained: "It's not good to share in case they ask 'where did you get this money from?', when they ask me I'll be embarrassed, and how will I answer them?" (Gail aged 29). Most interviewees said they spent the money they earned very quickly, often on drinks, food and kava for themselves and their friends when they were out or used it for personal items they had planned to buy and which were the reason for seeking a client. Very few interviewees had a bank account, or any plan to save money.

Several interviewees had another job and were variously employed as: a salesgirl, an office worker, a nurse, a community worker, a cleaner, and hotel staff. For those women sex work provided extra disposable income. However, the large majority of the sex workers interviewed said that they were unemployed and that selling sex was their only income. Despite this, few interviewees relied on money from selling sex to pay for daily food and shelter. Only one interviewee said that she currently needed to sell sex in order to afford basic necessities, which in her case were nappies and baby food. For most interviewees the money from sex work was spent in town, enabling them to purchase clothes and other goods, and to drink and socialise and join in the nightlife of Port Vila.

When I was staying at home I had no clothes, and since I started having sex with men like this I have a bit of money to buy my clothes...I buy clothes, hair product, earrings, nail polish, that sort of that stuff. When my money is finished I have to come back to town. Come back to town to have sex with a guy again to give me money, and I can go get things. (Rita aged 16)

I have looked for work but I haven't been able to find any work and I don't know how I will find vatu [money] to feed my child. I started doing this cause I saw that it was easy for me to make money in this way. When I asked for work they didn't accept me. This is one good way for me to make money. (Betty aged 29)

My life has been rough... I saw that life was too hard. [My man] was too hard on me. I thought that I was with a good man but he was not a good man. He is a man that has many women. He has children everywhere, and when I was with him I used to cry. He used to beat me. (Janice aged 22)

Like Sarah who said "I wish I could have a good job so that I can make money out of it instead of going around" (Sarah aged 18), many interviewees professed that they would like a regular job. They felt, however, that there was little opportunity for this in the current economic climate and also many said that the previous positions they had held did not pay enough, or were insecure, or were exploitative, and frequently working conditions were not what they had arranged. Maria acknowledged the independence that sex work allowed her when she said: "it's sweeter than the other work because I don't want anybody to be the boss of myself." (Maria aged 27)

As well as providing an alternative to unavailable or unsatisfactory employment, sex work offered a way of evading the dissatisfactions of past sexual relationships. Interviewees talked about disillusionment with previous partners because of experiences of male infidelity and the failure of their men to provide financial support. Maria was heartbroken and left her village after finding out about her husband's longstanding affair, but the behaviour of men in Port Vila that she had witnessed to date did not leave her optimistic about prospects for another long-term relationship. In her experience, as of numbers of other interviewees, she had found that men were unreliable and uncommitted:

Maybe in my future I'll never get married. Because I found out that here in Port Vila town, honestly, the boys they just give girls babies, get them pregnant and then they run away and change girls. So I don't trust any boys. (Maria aged 27)

Many of the women favourably compared receiving money for sex to non-paying sexual relationships in which they were disempowered and vulnerable. Aside from the financial rewards, other advantages of client relationships were identified as those of maintaining independence, having fun, avoiding the need for jealousy and competition with other women, and not having to worry about being cheated on. Moreover, some of the women said that clients treated them better. Eighteen-year-old Sarah described her older client as gentle and considerate, in comparison with her young boyfriend

and father of her child who she described as selfish and unsupportive:

The first time I had a boyfriend, I stayed with him but he never used to work ... the problem with [the next boyfriend] was that he was too young so when he worked he used to take the money for himself and he didn't give money for me or my family. He used to drink, enjoy life and forget about me, that's what he used to do... The young men don't look after us properly. The old man looks after me ... We don't stay together but he gives me money. (Sarah aged 18)

The failure, or inability, of past and present partners to provide financial support was a common complaint, and selling sex was seen as a solution to lack of money, a way to become autonomous, and sometimes even as redress and retribution. One interviewee, 27-year-old Rosie, said that she would go out and sell oral sex when her husband didn't give her money for the household, when she resented having to ask for money, or after an argument. For her, sex work was an assertion of her ability to act independently; it also functioned as a form of revenge or as an expression of her anger towards her partner. She said about her involvement in sex work:

I do this when I need money. My husband sometimes gives me money if I ask him. If I don't ask for it, he won't give it to me. Sometimes when I'm at home I think of things that I need and that he doesn't provide for me. I have to go out... When we are having good times everything is alright. But when he's bad tempered I think "if you want to be like this to me, you'll see". So I go out and do it when I'm angry. (Rosie aged 27)

Eighteen-year-old Sarah described a similar logic behind her decision to take up an older man's offer of money for sex after she was subject to beatings from the young boyfriend who failed to look after her financially.

Given the connections between sex work and unfulfilled financial expectations within intimate relationships, it was unsurprising that for some of the interviewees, the client relationship sometimes evolved into a more permanent non-paying relationship. One interviewee talked about the plans that her older client had to marry her. Numerous others referred to boyfriends who had started out as clients. Gail described assessing her potential clients and seeking the same qualities as that of a man she previously loved:

I look at his behaviour and study his life. Will he be a good man or not? Is he like the one that I loved that has left? I think back to him and wonder if he will come back or not so I look around to find one that will be like him. (Gail aged 29)

A clear distinction between the norms of paid and unpaid casual sex appeared difficult to sustain, especially when it came to expectations of financial contribution. Furthermore, for sex workers who operated in groups and picked up clients from nakamals and nightclubs and bars, social and pecuniary motivations frequently converged. An expectation that sex would be paid for was described as commonplace by the interviewees, who asserted that many men, both local and foreign, regularly assumed that they could convince a girl to have sex with them by offering to pay her. Similarly, Emily's description of going out with an ex-boyfriend indicates the way in which the client/boyfriend distinction was blurred, even when they were a couple:

We used to be together. Sometimes I wanted the money and sometimes I just wanted to have sex. After I have sex with him I feel that he must go and get something for me, and if I don't ask he should still do it. So if I am with him and he doesn't give me money, he should buy me cigarettes or kava so we can drink. (Emily aged 28)

I have so many friends that do this [buy and sell sex]... all those men that have money they like to go around with many girls, they use it to sleep with girls. (Sarah aged 18)

I know many in town, most of the girls now are sex workers. There are lots of girls now that are sex workers especially the teenage girls and not only teenage but my age, about my age I know lots. We meet in the street and when we meet we go to nightclubs, go in nakamals, and we have to go there and enjoy ourselves. (Tina aged 29)

While interviewees expressed a desire for both steady employment and for a steady relationship, they believed that in the current economic and social climate these aims would be difficult, if not impossible, to achieve, also past experiences of jobs and relationships had largely been unsatisfactory. Sex work helped overcome some of the problems associated with a lack of, or inadequate, employment and relationships. It was conceptualised as a response to, and way out of, adverse circumstances

and also often an interim measure or path to a more regular and secure situation. Liz, for example, a 19-year-old who was orphaned in childhood and brought up by relations, raped in the village at 16 and consequently beaten by family, said that she is looking for money in the short term and a boyfriend in the longer term:

Some people say that it's bad, but me I think that if I go around and have sex I can see what partner that I want. So from there, to my way of thinking, I can see who will be my real partner. (Liz aged 19)

I don't have any kids yet. I am in a place where life is hard so I must manage properly first. (Vera aged 25)

I want to find a good man for myself 'cause I see that if I continue to do this [sex work], there will be no end of it. (Betty aged 29)

I'd just like one good husband to look after me, so I can like stay quiet so I'm not doing something stupid... I want to find one good job so that I can find one good husband to look after me, so yeah, that's it. (Liz aged 19)

I'm gonna find a good man and marry him and stay with him. (Violet aged 17)

Despite citing bad experiences with partners and husbands and describing a distinctly self-preservationist approach to relationships, most interviewees expressed a desire for a steady relationship with one man as well as secure work. Liz expressed it succinctly when she said that she just wanted “one good job” and “one good husband”. Until this happy situation eventuated however, Liz intended to enjoy kava and alcohol with her friends and was pleased to be able to pay for the drinks with money that she got from high-paying foreign men.

Many interviewees described the decision to sell sex as arising from an inescapable choice between having sex for love or for money, and felt that sex for money worked out better for them. While being generally positive about selling sex, the interviewees expressed an ambivalence towards sex work. Many said they enjoyed sex work; the issue of the various advantages of sex work over non-paying relationships was repeatedly raised, and all the interviewees felt that sex work suited their purposes well. However, nearly all the interviewees also expressed a

belief that sex work was bad in some, largely undefined, way. Thus the sex workers' beliefs about sex work and what selling sex meant on an abstract level, appeared to be at odds with their actual experience of selling sex, and with their behaviour.

Several interviewees described having been encouraged to stop sex work by their families and their church, others by health service providers. Within the family, this encouragement was often delivered by way of beatings and threats. While these interviewees had undertaken, and told of a genuine intention to give up sex work, their pledges ultimately resulted in a more covert approach to sex work. Betty said that once people knew she was selling sex: “I felt ashamed. My parents too saw that people started saying bad things about me. They told me to stop doing the things I do” and that she now sells sex more discretely: “in private. Not all the time” (Betty aged 29).

I'm seeing that it is not my time to do this sort of behaviour so I'm slowly starting to change, but I know that one day if my husband dies or he leaves me I will do it again... I started it when I was in high school and all my close friends do this too and their daughters also do this. So I changed because I was afraid of my husband ... but then I went back and did it again but I started doing only oral sex. (Rosie aged 27)

I know that is not a good thing to do and I spoil my family's name and the village where I come from ... They know what I'm doing, they talk to me but I don't listen. So they usually punch me and throw me out of the house. So, I decide to stop it. So I stop and they accept me back into the house again. Now I just do it in a quiet way. I don't let them know. I just hide that I'm doing it. (Leanne aged 25)

• Conditions of sex work

Among the sex workers who were recruited to this study, all sex work was casual and informally organised and the sex workers operated autonomously. Two distinct patterns of selling sex emerged. In the first, small groups of sex workers frequented bars, nakamals and nightclubs in the evenings to find clients, and the sexual encounter took place immediately after it was negotiated. In the second, the sex worker operated alone and would go

to town during the day to find a client, or would make arrangements with a regular client over the phone. The sexual encounter seldom took place immediately but arrangements would be made to meet later. Sometimes the arrangement was non-specific and rested on the provision of a phone number so that the client could phone when he was ready to set a meeting time. These modes of operation were not exclusive and some interviewees adopted both.

Betty's description of meeting clients on the street was fairly typical of sex workers who worked alone and made prior arrangements with clients:

when I walk in town and one sees me and says "I like you so I'll meet you today". He takes my number and says he'll call me at six o'clock... I say alright and he asks me how much I want and I tell him ... if there are three today that need me, I'll go and see one first, then the other one, then the other one. That's what I do. If the other one says six o'clock, I'll tell the other one I'll meet him at eight o'clock... All the ones who have my contact number, when they need me, they contact me. After they name a place, I go and meet them. (Betty aged 29)

Similarly, Tina said that when she needed money she would "go to town" where she could find clients:

in the market house, in the street, everywhere. When I walk around I find them, when I meet them and they talk with me, that's the right place. I meet them anywhere. I meet them in the nakamal - in the kava bars. But most of the clients I meet them in the street ... if I need money for something now, then I have to do that. I have to look for it, and I have to find one and start talking with someone like, um "I need some money, if you wanna have sex then you'll have to give me that". (Tina aged 29)

Other sex work took place in groups; women went out to bars and clubs to meet up with one or several friends, usually friends who also sold sex. In this way, sex work was combined with socialising and with drinking and dancing. Sometimes hotel and bar staff would also pass on invitations from a customer. Friends often procured clients for one other, and would go out with men in pairs or groups for safety and convenience. The interviewees reported that girls in nightclubs and bars who are looking for a client can be very direct, but just as often it is the clients who make the offer. Sex would then take place in hotels, motels, the client's home, the beach or a dark place nearby.

We meet in the clubs, at the kava bar, at the wharf, in town, at x nakamal, y nakamal. (Rita aged 16)

There are a lot [of sex workers] in town and some of them are my friends. I have lots of friends with who we do sex work together and make plans. Like when my friends have a man who needs a woman, they'll call me and say "there are two men who need two women" and they'll come and get me and we'll go out and do sex work together. (Betty aged 29)

The places where we are based from are near where we live. The sex worker that I live with has a small kava bar and so every afternoon businessmen come and park in a small parking area at the side of the kava bar and they come and drink and this is where we meet. So we get ready, and she'll come and say, "Hey, there is a man who says he wants you". "OK wait, I'll go and wash". After washing, I come back to the kava bar and meet him. Sometimes we go to the sea, to the beach but one time we went to the sea and someone caught us doing it, so me, I'm not comfortable going to the beach, so we just hang out at the kava bar. There is a table that's our spot, we do it on top of the table. We spread some material or something and then we have sex on it. (Emily aged 28)

[A man] will come and tell us, "Hey some friends they want to have company with some girls". So OK, but not me by myself, I just call for some more girls. (Liz aged 19)

Within both lone and group modes of sex work, client numbers and regularity of sex work varied. Some sex workers had many clients and others just a few. Some restricted their clientele to regulars and had longstanding arrangements with particular men. Sixteen-year-old Hayley had a list of regular clients about whom she said "when I want money I go and see them and have sex with them". Linda described her arrangement with her main client thus:

He is someone who has my number on his phone. After he calls me, I'll tell him come and see me at this time... I don't know him that well, and whether he has a woman or not, but he gives me money. (Linda aged 26)

Clients are both foreign and local. While some sex workers expressed an exclusive preference for local men because they were familiar, others said they preferred foreigners precisely because there was less connection or chance of romantic attachment. Elsie explained that the risk of getting caught up in relationship problems with Ni-van clients and any ensuing jealousies or fights with other women could be avoided by selling sex to foreigners:

the expatriate, for me I don't care if he goes out with another, or I saw him with another one, me I don't care because he's not mine. He's not my real husband and he's not my boyfriend too, I just like passing time with him. (Elsie aged 36)

There was no fixed price attached to sex work. Most interviewees adopted a sliding scale, depending on what they thought the client could afford. Even so, the rates were remarkably consistent across the interviewees and were also high in relation to wages in Vanuatu. Tourists, especially those from cruise ships, would be expected to pay the highest rates, followed by expatriates living in Vanuatu, and then local professionals. Blue-collar workers were charged the least. Few interviewees ever sold sex for less than 3000 vatu in cash, but several interviewees said they accepted small gifts of little real value, or sometimes even just kava, when a client could not afford more.

All of those who give five or six thousand vatu are the ones that have jobs. Some work for the government, good jobs... the three thousand vatu, all of them work in construction or the shops. (Betty aged 29)

There's different levels of salary, so sometimes we look at people like, if someone we know that has a nice job, then we just ask big money, you know, 10,000 upwards but if we know that he hasn't got money then we will just say something simple to give. (Tina aged 29)

They give me money, sometimes they don't give money, and they give rings, hand bands when they don't give money. (Rita aged 16)

The relationship between kava/alcohol and sex work is reciprocal: sex work provides a way of paying for drinks, and kava and alcohol venues are easy places to find clients. Nineteen-year-old Liz explained that when she

was employed she could afford to go out with her friends and buy her share of kava and other drinks, but that changed when she no longer had a job. For her, as for others, sex work enabled her to continue drinking and socialising with friends in the evenings. Furthermore, while sex work provided the means to drink, intoxication from kava as well as that from alcohol also reduced inhibitions about sex work:

I could see that people buy them kava and then they have sex with them. I am shy but after I drink kava I'm no longer shy and I'll have sex with them... maybe one comes and asks, or maybe sometimes three so I go out with three people. (Liz aged 19)

Along with the opportunity to have fun with friends, there were other advantages to working in groups. Friends would set up clients for one another, and for safety women could go out in pairs if a client suggested going to an unknown or new venue. A client could be passed on if a sex worker was not in the mood for working, and interviewees also pointed out that sometimes a client would buy drinks for everybody in the group if just one girl would undertake to have sex with him.

The combination of alcohol and kava and sex work introduced particular risks, as intoxication compromised intentions to use condoms. Furthermore, according to some interviewees, drinking was associated with more adventurous sex than usual. For instance, Liz pointed out that "if they get drunk two girls can go out with one guy" (Liz aged 19). She cited an occasion when she and her friend engaged in paid group sex after drinking heavily with clients, admitting that: "I don't know if we used the condom or not, cause all of us were drunk so I don't know". Liz's drunken group sex experience was not unique in this study and illustrates the way that risk can be compounded.

Pornography was also associated with sexual experimentation with clients. Some interviewees said that when they drank and watched pornographic movies with clients they would try out some of the positions that they saw. These interviewees cited instances of watching pornographic films in the context of a drinking session, usually in a room that the client had rented for the purpose.

While accepting money for sex is described as a common practice, interviewees clearly felt that it was important to maintain some discretion about their activities because gaining a reputation as a sex worker

would put them at risk. Not only would people gossip about them, but the young women believed that such a reputation would leave them vulnerable to sexual abuse and that they would then lose their ability to decline a client or to negotiate terms. This was explained on the basis that men would think that they were available for anyone to use sexually. A number of the interviewees had been past victims of sexual assault, and had attributed these assaults not to selling sex but simply to their sexual activity becoming common knowledge. For example, Tina had had sex with a much older boyfriend when she was 13 years old, this ruined her reputation in the village, which in turn resulted in a gang rape and also the deterioration of her relationship with her family.

My boyfriend, my people know. They don't like it. I hide it and do it so they don't know. (Gail aged 29)

I see that in Vila there are so many of us, a lot of them, doing the same work like I do. There are a lot of them but they don't reveal themselves. (Betty aged 29)

I buy my clothes with it...my Mum and Dad don't know, when they ask me [about the new clothes] I tell them that my boyfriend gave it to me. (Rita aged 16)

Seventeen-year-old Violet also worried about gossip because she believed that if she gained a reputation as a sex worker it would leave her open to rape and sexual abuse from young men who could justify raping her on the grounds that she was available for anyone to have sex with. Maria said she didn't "go out" with Ni-Vans and that nor did she have real girlfriends (friends who she could talk to openly and share her experiences with) because of the risk of gossip:

I never want my family or my friends to see me. To tell you the truth, I don't have any friends. I have friends, like girls, but we only meet at the club. But to walk in the street back here – I never walk with, I never want to have girlfriends, because if I do something during day time, then they gonna blah-blah. (Maria aged 27)

Indeed, most interviewees were not open about taking money for sex, and their engagement in sex work was a secret shared among one or two, or a small group of friends. Those who always worked alone were the most secretive about their sex work. While some insisted that their families did not know that they sold sex, others said that the families or partners they lived with did understand that they engaged in sex work but chose not to see it. This ignorance, whether wilful or otherwise, was enabled by keeping sex work activities covert and spending earnings 'in town'. Several interviewees also explained that their sex work had to be hidden because they had promised others – family, husband, church and even peer education groups that they would stop.

• Condom access and use

I tell them to use condoms 'cause it protects us from a lot of things... Most of the boys just don't like condoms. (Tina aged 29)

I was too shy to ask and that's why no condom. I thought if he had a condom then we would use a condom – but at that time there was no condom... I was too scared to ask for a condom. (Sarah aged 18)

Most interviewees said they used condoms with clients, even though some of those who used condoms did not know they offered protection from HIV. Condoms were important for contraception. Sixteen-year-old Rita for instance said "when I go out with these sort of men [clients] I always use a condom" because "it helps you so that you don't have children". However, this "always" appears to be more a statement of intent than fact, given that she later describes her condom use as being contingent on availability:

When I don't have a condom I still have sex. When I have it I use it, but when I don't have it I don't use it. (Rita aged 16)

Most interviewees reported that their own preference was to use condoms, but many also claimed that Ni-Vanuatuan men do not usually like to use condoms. Rita explained that "men who have an interest in them, they will use a condom but those that do not want it, they will not use condoms", indicating that it was the clients' wishes which largely determined whether or not condoms were used. Elsie said that she only took foreign clients because of difficulties convincing local men to use a condom. Betty

described a situation where she refused to have sex with a client who didn't want to use a condom and he punched her. While men were often averse to condom use, those sex workers who had accurate information about the role and efficacy of condoms in preventing HIV and STI transmission encouraged clients to use condoms.

Many of interviewees said that they regularly carried condoms or knew where they could be found free in nightclubs and nakamal toilets. The opportunity to pick up free condoms in private and without being seen was described as particularly appealing. Condoms that are both free and can be accessed without others knowing were attractive to sex workers, nearly all of whom said that they would not pay for condoms themselves. Some interviewees simply stated a belief that if condoms had to be paid for, then it was the men's job to pay. Others said their reluctance to buy condoms was due to concerns about being seen and the resultant gossip and damage to reputation. A number of interviewees who conducted daytime sex work said that they relied on clients to provide the condoms.

Condom access for sex workers appeared to be more problematic during the daytime when there were no sources of condoms in town that were free and immediately and anonymously accessible. Numerous interviewees cited a community clinic as a source of free condoms but noted that because it was a bus ride away from the centre of town, and also because it was not always possible to take condoms without being seen, they were deterred from picking up condoms from there.

Ultimately, sex workers' preferences for condom use did not necessarily result in condom use. Sometimes they were too scared or shy to insist on condoms against a client's wishes. Some were reliant on the client buying or carrying a condom, and sometimes sex workers' ability to negotiate condom use with a reluctant client was compromised, or their intention forgotten, due to their intoxication. At other times, condoms were not used simply because they were not at hand.

Familiarity with condoms and accurate information about the protection that condom use offered from HIV and other STIs had an impact on sex workers' attitude to condoms. Nineteen-year-old Liz, for example, said she had not liked condoms and had refused to use them until she understood that they could protect her from sickness. Numerous interviewees said that they didn't use condoms

when they first had sex and were averse to condoms until they became familiar with them. The interviewees who were the most confident about insisting on condom use were those who said they were networked with Wan SmolBag and had participated in HIV awareness training. At least one sex worker interviewed said that she did not know how to put a condom on a man.

I have to go and tell lies to the doctor that I have headache or something like that. When I get inside they can give me Panadol and then I can ask them "Do you have condoms?", "Oh yeah of course". ... I feel embarrassed to ask, like people will say "Hey, she's going to get condoms, maybe she wants to have sex somewhere." (Liz aged 19)

I keep them using the condom because I need them to know that there's HIV in the country and STIs. So, before I go out with them I speak with them about this and inside my bag there's lots of condoms in there and there's lots of pamphlets that I keep to give to them about STIs. So, every time I met up with a client I just pass them out. (Tina aged 29)

I give it to them and they put it on themselves ... with my true boyfriend I will tell you honestly I don't use a condom with him. My heart is with him and we trust each other. I really love him. In my thoughts I am close to him, but with some other men I will be scared of them and I will use it... the first time I used it I was not satisfied but after I used it for a while I got used to it. When I got used to it I started forcing the men to use it... Sometimes the men accept to use it and sometimes they don't. I don't stay with the ones that don't want to. If they don't want to accept [condom use] I don't go out with them. (Gail aged 29)

Even those who were aware of HIV and STIs and regularly used condoms with clients, said they seldom used condoms with a sweetheart or non-paying partner. Tina, a 29-year-old peer educator, made a conscious effort to educate her clients. Yet despite knowing about the need for condoms and worrying about STIs, she admitted: "sometimes we use condoms but sometimes we don't use condoms" (Tina aged 29). She described how condom use was compromised when there was a slippage between client and potential boyfriend – or at least someone she was attracted to:

I went out with someone I admired, I liked, and that's when I didn't use a condom. That's crazy, isn't it?... if I like someone, it's different than if I don't like someone. If I like someone, it's like I want his whole body to be in me and I just want him, you know ... It's risky. I know it's risky but, I don't know, I just don't know why I didn't use a condom when I went out that day. Sometimes I know that the condom is good for me but, I don't know, I just – if I like someone that's it. (Tina aged 29)

A few interviewees said they preferred female condoms because they are something that a woman can control herself. Maria explained that she liked the female condom because if she inserted it before she went out it would protect her even if she got drunk, or was raped.

In order for condoms to be picked up readily by sex workers themselves, it was important that they were free and could be accessed discreetly and anonymously. A number of interviewees further remarked on the need to enhance sexual experience and therefore that the quality of the condom – the smell and the feel – was important to decisions about condom use. However, while some sex workers expressed a preference for particular brands which had to be paid for – none said that they would pay for those condoms themselves.

We weren't even aware of condoms and what they were, what their importance was, what they did. I didn't use them. (Emily aged 28)

I used to be afraid to use condoms...I used to be scared of them. I used to be like that until I learnt my lesson. I became pregnant and I regretted it, I was too young to have a baby. (Sarah aged 18)

• Access and use of sexual health information and treatment services

The quality of HIV prevention information that sex workers received also had an effect on condom uptake and use. There was a lot of misinformation about condoms and HIV circulating, and on occasion a clinic nurse or a peer educator was said to be the source of that (mis) information. One interviewee thought a female condom could get lost inside a woman. Other sex workers relied on the withdrawal method when condoms weren't available, or tried to clean sperm out of their vagina after sex in the belief that this would protect them

from disease. A number of sex workers interviewed – particularly the youngest ones – had little knowledge of HIV and STIs or how to protect oneself from them. Several interviewees used condoms for contraception rather than HIV prevention. Sixteen-year-old Rita, for example, said “The first time I had sex I didn't use a condom. However, after I heard them say that if you don't use a condom you can get pregnant, I started using condoms”. Later, when asked about HIV, she admitted: “I don't even know what sort of sickness HIV is” (Rita aged 16).

Some interviewees only gained relevant HIV and STI prevention information after receiving treatment for an STI. The sources of information on condoms and HIV that were named by the sex workers interviewed were: sexual and reproductive health clinics, outreach educators, community classes, and also other sex workers.

We have a lot of peer educators going around and they talk with us and we use condoms now ... I found out about the services 'cause I live close to them, to Wan Smolbag clinic, and the peers they keep on coming around to talk with us and, like we were fed up of it and then we have to go [to the clinic]. We have to go because they'll keep on coming, so we go and next time if they come we'll say “yes, we're okay now”. (Tina aged 29)

I have never been for a test... I think if it happened that some friends said “we go for a test” then we could go. It's good if we go for a test. But me, I just haven't gone. (Vera aged 25)

I didn't want to come to the clinic because one time I came and it was so full. I was scared so I just went past it. (Sarah aged 18)

We're ashamed to go to the hospital... they are kind to us but sometimes if we know some of the nurses they started to talk with us, like counselling, they talk with us and it's a little bit hard to, um, like even if I'm sick I won't, I, I don't want to go to the hospital because I'll be, you know, frightened. (Rosie aged 27)

Few interviewees had ever tested for HIV, and most said they wouldn't because they were concerned about privacy. Several interviewees who knew there was a

clinic that would provide free testing, were too shy to go in because they felt it was too public. Similarly, Rita said that, despite knowing that there was a local clinic where HIV education and sexual health information was available, she hadn't utilised the services because she was uncomfortable with the delivery to a group:

They had classes for the sicknesses [STIs]. I didn't go to those classes. I was afraid of taking them...I get scared of them checking me, so I would go to the hospital [because at the hospital] you go, only yourself you go into a room. At [the community clinic] two people go in at a time, that's why I get scared. (Rita aged 16)

On the other hand, other interviewees thought that they might be more likely to go for an HIV test if they went with a group of friends. Many who hadn't tested had thought about it and some thought they would take a test if they got a bit of encouragement.

Other interviewees were frightened to test for HIV in case the result was positive. Thirty-three-year old Deidre had used condoms with clients consistently for the past two years, but believed that she was likely to have HIV because she had been a sex worker since she was 14 years old. Deidre explained:

I prefer that I don't know 'cause I have my children. Maybe when they are a bit older I will go and do a blood test because now they are still babies. My thoughts are like that, like I have it ... So I want to be strong, if you are strong, you overcome everything, whatever comes. (Deidre aged 33)

In her mind, testing positive for HIV equated with the illness and weakness of AIDS and she needed to stay strong while her children were young. She also hints at the stigma and discrimination that might be attached to a diagnosis as she adds:

Our understanding of AIDS is that it is a sickness of sin, that is clear. We say AIDS comes from sin... Because we have to have one partner and if we don't, it is sin. It [AIDS] is a punishment from God. (Deidre aged 33)

Many women talk about having stopped or given up sex work at some stage, and for some of the interviewees a promise to give up sex work had been elicited in the context of a sexual health or support group specifically targeting sex workers. But, at least for those sex workers who continued with sex work, such pledges resulted in making them more covert and secretive about their sex work.

I went to a sex workers' workshop... it helped me change. But then I went back and did it again. Now I just do it quietly. I don't know about the others, but I heard rumours that they haven't changed, they are still the same. (Rosie aged 27)

Male sex workers interviewed

Information from female sex workers, which appeared to be supported by researchers' observations around Port Vila town, indicated that young men also engage in sex work, some selling sex to male clients, both local and foreign, while others sell sex to female clients who are predominantly foreign. However, this evidence remains either anecdotal or based on observation and supposition.

Only two eligible males were recruited for interview. The circumstances of both the male participants are summarised below as cases, and discussed in the light of the data from female sex workers.

Claude is a 24-year-old student who is originally from one of the smaller islands of Vanuatu and who went to college on Santo before coming to Port Vila for further studies. Claude is an occasional sex worker. While he has a number of girlfriends who do not pay him, he has one regular client who he said is strongly attracted to him. She pays for his school fees and buys him clothes. She contacts him by mobile phone when she wants to meet him for sex. For Claude, this relationship is an interim situation that suits him while he is studying. He expects to pursue a 'true' partner when he has a job and is no longer in need of financial support.

Claude doesn't believe that there is HIV in Vanuatu. He also doesn't like to use condoms, but will use them reluctantly if a woman is concerned about getting pregnant. The decision on whether or not to use a condom, he says, is always up to him.

Frank is 22 years old and has sex with both men and women, but only the men pay him. Frank said that the first time he had sex was when he was 10 years old and an uncle sexually abused him. The uncle started paying Frank not to tell anyone and continued to have sex with the boy. Frank works part time, and the money he earns is not enough to cover the kava and cigarettes to which he is addicted, so he earns money from sex work.

Many of his clients are local Ni-Vanuatu men he meets at nakamals. Other clients are foreign male tourists who he meets at clubs or through a website. Frank sometimes has sex with local men in exchange for kava. He has been disillusioned with Ni- Van men who say that they will be his boyfriend, but do not want to know him after sex. The male tourists pay well, and he is hoping to meet a foreigner one day who will be a stable partner. Frank says he has difficulties in establishing a relationship and puts this down to the sexual abuse in his past and to (what he falsely believes are) the laws against homosexuality in Vanuatu.

Frank is very well informed about HIV and HIV prevention. He will sometimes provide oral sex or masturbate a client when there is no condom, and was one of the very few participants who had any strategies for reducing risk when a client refuses condom use. He sometimes has to help a client put a condom on properly, though, and said that some of his male clients do not know how to use a condom. Nonetheless, Frank still finds it very difficult to request condom use with clients due to fear of rejection.

Frank's story shares different points of similarity with a number of female sex workers: he has a history of sexual abuse, works from bars and nakamals and relies on sex work to afford his drinks, kava and cigarettes. Like many female sex workers, Frank has also been let down in his past relationships with men, but he faces the added problem of stigma and discrimination, and legal and social sanctions against men who have sex with men. In addition, female sex workers felt empowered by good HIV prevention information, but despite being one of the study participants with the best levels of knowledge about condoms, HIV and HIV prevention, Frank was not confident to insist on condom use with his male partners.

Claude's narrative also is not dissimilar to that of numerous female sex workers: he is heterosexual and has a regular client who pays for things he could not otherwise afford. He views his sex work as an interim measure and plans on eventually having a good job and a real partner. The real marked distinction being that Claude feels in control of whether or not condoms are used, and the female sex workers do not. Claude is also the only participant to deny that there is any HIV in Vanuatu.

4. DISCUSSION OF KEY FINDINGS

As described by the participants in this study, sex work in Port Vila is a commonplace occurrence in nakamals and nightclubs. Sex workers also seek clients around the town during the day, making arrangements to meet again later. Interviewee narratives relate sex work to high unemployment, and also with a shift from a village way of life to a more urban existence. Consistent with this, it is also driven by a desire to participate in the nightlife of the town and to be able to afford the consumer goods available in Port Vila shops.

Sex work in Port Vila is informally organised, and freely chosen. Although sex workers often began selling sex long before they reached the age of 18, the sex workers all operated independently, had complete control over their own earnings, and no one was subject to coercion. Two distinct modes of sex work are evident: prearranged sex work where sex workers solicit alone in the daytime; and night-time sex work where sex workers go out in groups and sex takes place more immediately.

While sex work was described as commonplace, discretion was very important to those who sell sex. This need for secrecy underwrote the different approaches and styles of daytime and night-time solicitation. The cover of normal social interaction of clubs and bars and groups of friends enables sex work to be conducted discreetly at night. During the day it is more usual and acceptable for women to be moving around town alone, and sex work that was conducted during the daytime was more usually a solo project. Any programs aimed at delivering condoms, HIV prevention information, sexual health or other services to Port Vila sex workers will need to take account of the two distinct modes of conducting sex work that have been identified here. It is likely that different approaches and strategies will be needed in order to reach the two groups.

Night-time sex workers who tend to gather in smaller or larger groups and find clients at nakamals, bars and nightclubs will be more accessible to peer educators and outreach services that target those venues. However, sex workers who work from bars and clubs need to have ready access to condoms, as sex takes place fairly immediately. They also need to develop sound negotiating skills. Picking up condoms from toilets in nakamals and bars appealed to sex workers as this offers both convenience and privacy. The pervasiveness of heavy kava and alcohol use in these night-time venues could be expected to have an effect on the sexual risk

behaviour of both clients and sex workers, and might also reduce negotiating skills, interfere with intentions to use condoms, and lower any inhibitions about engaging in higher-risk practices such as group sex and unprotected anal intercourse.

Daytime sex workers could be expected to be harder to reach because they operate alone and are less likely to be accessible through peer networks. However, this style of sex work does offer the opportunity for sex workers to be well prepared as meetings for sex are usually arranged ahead of time. While some of the participants in this study used both modes for finding clients, a number only engaged in pre-arranged meetings with clients who were on their phone contact list. These sex workers were the most secretive and covert. Therefore it may be that this style of sex work is more common than it appears to be in this sample, but as it is easier to hide and doesn't involve friends, the sex workers are not part of any networks¹⁴.

Interviewees describe sex work as being financially driven. It is also conceptualised as a predominantly interim measure and a means to longer-term goals, such as finding a good partner and a good job. The rates received for sex work were relatively high in comparison with the new minimum wage in Vanuatu, which is now 26,000 vatu per month. Despite this, few interviewees had a bank account and none had a positive savings plan.

Just as sex work for many female interviewees accompanied a shift from an unsatisfactory or unsafe village life, it was also associated in these interview narratives with failures of non-commercial intimate relationships. Despite many participants having had bad experiences with previous relationships, interviewees generally hoped for that "one good man" in their life. One of the core features of a good man appeared to be his ability and preparedness to provide financial support.

Apposite to this, is a slippage between the roles of client and boyfriend – where boyfriends may also be expected to provide something in return for sex. There is also a suggestion in the data that casual sex is paid sex, and vice versa. According to interviewees, many clients also consider that paying for sex is necessary to access casual sex. The adoption of a sliding scale and the flexible approach to payment exhibited by some sex workers, who would charge wealthy clients up to 10,000 vatu yet accept low-value gifts in lieu of payment from other men, indicates that sex work is not simply about

earning money but also accords to a more general principle of demonstrating that the woman is valued.

In addition, the process of negotiating sex work is similar to that of other social arrangements: dates are made, phone numbers are exchanged, friends provide introductions. Because sex work is so intertwined with social life for most of the women who sell sex, an attraction to some clients is almost inevitable. While no interviewees said that they refused payment because they desired a longer-term relationship with a client, others said that they did not use a condom because they had romantic feelings towards a paying sexual partner.

Many of those who do sell sex do not fully identify as sex workers, and this will have implications for any programs targeting those who sell sex. Locations where sex work occurs may be more central to the effective delivery of HIV prevention resources than the identification of sex workers themselves.

The conditions and locations under which sex work commonly takes place will determine the specific vulnerabilities of sex workers. Excessive alcohol and kava consumption were commonly associated with sex work. Intoxication is associated with lowered inhibitions, and participants specifically connected intoxication with forgetting about condoms, with sexual experimentation and with group sex.

Forced sex and violence against women are wider societal issues that affect condom use and on sex work. For many interviewees, sex work was a way to take some control over their lives and their relationships, whether it meant that they brought in their own money and didn't have to be dependent on the goodwill of family and partners, or whether they felt that if they were going to be forced into sex then they may as well get paid for it. Bulu et al's survey¹⁵ found that many sex workers in Port Vila had a history of forced sex, although it was not clear whether rates differed significantly from the rest of the female population. Forced sex was also one of the dangers identified by sex workers in this study. However, the participants talked about a heightened vulnerability to rape and sexual assault as a result of being publicly identified as a sex worker, rather than from clients themselves.

More generally too, the reputations of young women who are sex workers had an impact on their personal safety and also on the maintenance of positive relationships

with family and others. Confidentiality and privacy are very important in the effective provision of services and resources for sex workers.

Numerous participants described concealing their ongoing involvement in sex work after having promised someone they would stop. Efforts by sexual health service providers to deter women from sex work may be detrimental to HIV prevention as this approach exacerbates the sex workers' need for secrecy and may leave them cut off from important safety supports and networks. It is also likely to discourage those sex workers from using the services otherwise available if they feel their continued engagement in sex work would be evidenced by such use. Interventions that appeal to sex workers' desires to look after themselves and take control in their lives may be a more effective HIV prevention strategy than attempts to discourage them from sex work.

Male sex workers were a group that was difficult to recruit. Evidence from female sex workers and from observation indicated that there are young male sex workers providing services to female and to male clients in Port Vila. According to key informants, the young men who sell sex to women tend to work in a similar mode to those female sex workers who find their clients by cruising town streets during the daytime. They were described as working opportunistically, and irregularly, and clients as usually being foreign women. This method of working alone would make them more difficult to locate and contact. Neither of the two young men who did participate in this study was networked with other male sex workers. Furthermore, neither of the two male interviewees worked in this fashion, as one had a local female client and the other sold sex to local men. Stigma and discrimination against sexual minorities are likely to exacerbate difficulties in recruiting men who sell sex to men, and also to affect the men's capacity to minimise risk.

Young girls who sold sex were also difficult to recruit, although not difficult to locate. Many were too shy to be interviewed, or appeared unconvinced that there would be no negative implications for them if they participated. This was because they were often meant to be in school, or were in trouble with family. Before the very young sex workers would be comfortable to speak openly, more time would have been required in order to gain their trust.

Sex workers generally expressed a preference for condom use, but most were rather passive about condoms and very few had any strategies or techniques for convincing clients to use condoms. There was a lack of knowledge about condom use, particularly among the younger sex workers, but even among the older sex workers, and much misinformation was circulating. Some sex workers didn't know how to put on a condom on a man, and some male clients didn't know how to put on a condom either. This naivety renders sex workers (and clients) vulnerable.

In addition, the levels of information about HIV and HIV prevention among sex workers in this study were very uneven. Very few cited school as a source of any information about HIV or other STIs. Adequate sexual health education in schools will be particularly important when sex work is begun at school age, or shortly after leaving school. Some of the misinformation circulating among participants was said to have come from peer educators or from clinic nurses. This indicated either that the health professionals and community educators were themselves misinformed, or that the information they provided had been misinterpreted. It signals the importance of ongoing training to keep educators and information providers well informed and to hone their information communication skills.

Sex work is widespread and the conditions underwriting it, such as gender relations and women's social and economic disadvantage, and discrimination against sexual minorities will not change quickly. Furthermore, the impact of rapid urbanisation in Vanuatu, the effect of the increasing importance of consumption in the lives of residents of Port Vila, and the various ways that unemployment excludes young people from opportunities to participate in town life must be acknowledged.

Programs which appeal to sex workers' desire for autonomy, and ensure uncomplicated and ready access to HIV prevention resources and services will result in more effective HIV prevention than attempts to discourage or deter them from continuing their sex work.

• Limitations of the study

This report is based on qualitative research and therefore it cannot provide numbers of sex workers or rates of sex work and any risk behaviours. However, the sex work that is described in this report is consistent with the central

features of Port Vila sex work as identified in the 2007 survey¹⁶.

The study was limited to Port Vila. There is no indication of how the situation in that town might compare with the circumstances and conditions of sex work in Luganville, or on any of the other islands of Vanuatu. None of the participants had conducted sex work in another place, as this group of sex workers were not highly mobile.

Few male sex workers and few under-16-year-olds participated in the study. Both these groups warrant particular attention due to specific vulnerabilities. Men who have sex with men are considered to be a highly vulnerable group internationally. Early age of sexual debut is also considered to exacerbate vulnerability to HIV.

Study participants asserted that some young local men make themselves available as companions to wealthy-looking, often older, female tourists and that this availability was likely to include sexual activity and the receipt of cash and goods. However, this study recruited only two eligible men, neither of whom had sexual relationships with foreign or tourist women.

5. RECOMMENDATIONS

Areas for further research

Some of the issues relevant to HIV prevention for male sex workers can be expected to overlap with that of female sex workers who dominate in this study. However, there will be important additional vulnerabilities for male sex workers who have sex with men in Vanuatu due to stigma and discrimination and elevated risks of personal violence. Internationally, men who have sex with men are vulnerable to HIV. More needs to be understood about the type and conditions of male sex work in Vanuatu and the HIV prevention needs of male sex workers. This group is hard to reach and any study canvassing male sex workers will need to dedicate considerable time to networking and gaining the trust of individuals and groups of friends.

Similarly, very young sex workers are likely to have added vulnerabilities due to lack of education, distrust of authority and naivety, as well as physiological factors. As many sex workers take up sex work before the age of 16, more information about the specific needs of young sex workers is indicated.

At all ages, peers and friends were very influential and important to the lives of many sex workers in this study. Peer educators and outreach services will be central to the delivery of HIV prevention services for most sex workers. Network research would greatly assist those services to maximise coverage.

Programmatic recommendations

It is important that condoms are free, that they are readily available and that they can be accessed in private. Free condom distribution programs must be expanded to ensure availability of free condoms at a range of sites. As well, there is a need to resource outreach services and condom distribution around town during the daytime and to nakamals, bars and clubs at night.

There needs to be wider promotion of all the sexual health services that are currently available, along with information about conditions of testing. In addition, testing opportunities need to be integrated into other group activities and public events.

Peer engagement is crucial to the engagement of sex workers in programs and the promotion of available services and the dissemination of HIV prevention and sexual health information to sex workers. Sex workers

themselves must be targeted and recruited for peer education and condom distribution work. Peer programs must be adequately resourced so that the information and communication skills of peer educators are ensured.

Condom negotiation skills and workshops would be helpful for both peer educators and for sex workers. Such workshops could be very inclusive and more generally identified as skills for casual sex. Any programs designed to enhance condom use and negotiation skills will need to take account of the pervasive culture of intoxication at sites where much sex work takes place.

Other useful skills for sex workers would include day-to-day financial skills, including how to open and use bank accounts.

To be effective, all programs must be non-judgemental and accepting. Attempts to deter sex workers from sex work are likely to impact negatively on HIV prevention efforts

It is important that sexual health and HIV prevention education is taught in schools. There is a need for information to be presented to 10 to 13-year-olds - through an appropriate medium such as drama or storytelling .

Please Note: Recommendations inevitably implicate service providers. This study, however, was not a survey or evaluation of current programs and services targeting sex workers in Port Vila. The programmatic recommendations that appear here are merely a summary of services and programs indicated by the findings of the research. As such, they do not necessarily reflect a current lack or shortfall, but simply refer to areas where resources should be directed if services do not exist, and continue to be directed if they do already exist.

ENDNOTES

- 1 Bulu S, Gold J and Sladden T. Vanuatu Female Sex Workers Survey. Final Report - September 2007.
- 2 A nakamal is a place where prepared kava is sold by the cup ("shell"). Nakamals are usually outdoor or garden venues.
- 3 2009 Census, accessed from <http://www.vnso.gov.vu/> on 12 August 2011.
- 4 Ni-Vanuatu, and Ni-Van, are words for the indigenous people of Vanuatu
- 5 Ministry of Health, Directorate of Public Health. The Republic of Vanuatu. National Strategic Plan for HIV and Sexually Transmitted Infections, 2008-2012.
- 6 Ibid
- 7 Ibid. See also UNGASS Country Progress Report - Republic of Vanuatu (31 March 2010). Litmus Ltd: Wellington NZ. Accessed 09-08-2011 from <http://aidsdatahub.org/en/reference-librarycols2/item/15777-ungass-country-progress-report-vanuatu-litmus-ltd-wellington-nz>
- 8 UNGASS Country Progress Report - Republic of Vanuatu (31 March 2010). Litmus Ltd: Wellington NZ. Accessed 09-08-2011 from <http://aidsdatahub.org/en/reference-librarycols2/item/15777-ungass-country-progress-report-vanuatu-litmus-ltd-wellington-nz>
- 9 Bulu S, Gold J and Sladden T. Vanuatu Female Sex Workers Survey. Final Report - September 2007.
- 10 Ibid.
- 11 McMillan K, and Worth H. Risky Business: Sex work and HIV Prevention in Fiji. Sydney: The University of New South Wales, International HIV Research Group.2010. Available at: <http://www.sphcm.med.unsw.edu.au/SPHCMWeb.nsf/page/IHRGPublications#McMillan>
McMillan K, and Worth H. Risky Business in Kiribati: HIV Prevention and women who board foreign fishing vessels in Tarawa. Sydney: The University of New South Wales, International HIV Research Group2010. Available at: <http://www.sphcm.med.unsw.edu.au/SPHCMWeb.nsf/page/IHRGPublications#McMillan>
- 12 There is a need for the behaviours and motivations of younger teenagers engaging in sex work to be understood. Sex- worker vulnerability may be compounded by sexual activity at an early age and sometimes also by the circumstances associated with an early sexual debut. Thus it was important that young sex workers were not excluded from the study and there was no age limit attached to participation. In addition, those under the age of 18 who were selling sex were considered 'liberated minors' and parental consent for the interview was not required as it could put those underage sex workers at risk of abuse or other negative repercussions.
- 13 1000 vatu was worth approximately 10 Australian dollars at the time of data collection.
- 14 The 2007 survey of Port Vila sex workers found that the number of people with whom sex workers are networked ranged between 0 and 100, and that the median network size was 5 people.
- 15 Bulu S, Gold J and Sladden T. (2007). Vanuatu Female Sex Workers Survey. Final Report - September 2007.
- 16 Ibid



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