



## Programming for Young Women Who Sell Sex

### Background

As the *Sisters with a Voice* programme evolved and expanded from its inception in 2009, routinely collected programme data were used to help guide future developments. Research was also conducted in partnership with the Sisters programme, contributing a growing body of evidence about sex workers in Zimbabwe. Through reviewing these sources of data, it became increasingly obvious that the Sisters was not adequately reaching younger sex workers. For example, surveys conducted in 2011 found that 16% sex workers reported that they had first started selling sex before age 18 years. Yet among sex workers attending Sisters clinics, fewer than 1% were under 18 years old and just 23% were aged 18-24 years (compared with 28% of the survey sample).

Younger sex workers tend to be at high risk, however, and data from different contexts around the world show that sex workers are most vulnerable to HIV in period shortly after they have started working. In Zimbabwe, HIV prevalence studies among sex workers have found high HIV prevalence (50-70%), and among sex workers aged 18-24 HIV, over one third have already acquired HIV (36% in 2011). Younger sex workers are less likely to engage with HIV prevention, treatment and care services.

In response, in 2014 the Sisters programme conducted a needs assessment and designed a pilot programme for young women who sell sex (YWSS) in three initial sites: Mutare, Hwange and Victoria Falls. Formative research was conducted first in order to understand YWSS' needs, perceptions of existing services, and preferences for activities targeted to them. Consultation meetings were held with small groups of YWSS in each location, identified by Peer Educators. YWSS described barriers to using Sisters clinics, including not wanting to mix with older sex workers due to fear of being bullied and/or publicly recognised. They also did not necessarily recognise their levels of risk, although they also reported finding it difficult to negotiate with clients about condom use and their payment terms. YWSS expressed interest in accessing services but were apprehensive.

As a result, the YWSS programme was launched in January 2015 in Mutare, Hwange and Victoria Falls. Fourteen young peer educators aged 16-19 were recruited and trained, using the YWSS Activity Pack developed for the programme. The Activity Pack consists of 21 participatory activities to be conducted at least monthly. The activities aim to encourage YWSS' active participation and interaction with each other and with Sisters staff, to build their trust, confidence and skills, and encourage uptake of Sisters' clinical and social services. Discussion of and links to other available services for referrals were also included in the package.

Unlike in the main Sisters programme, young Peer Educators do not manage the participatory sessions alone. Outreach Workers are responsible for organising and conducting the YWSS activities, although the young Peer Educators support them by identifying YWSS in the community, encouraging attendance, and helping to deliver activities. The experience of the Sister programme has been that Outreach Workers are more acceptable to YWSS than adult Peer Educators, whom YWSS sometimes feel patronised or dominated by.

### Pilot Phase

Over the first year of YWSS programme implementation, a process evaluation was conducted to assess both YWSS and staff experiences and views of this new component. During that time, a total of 143 YWSS participated in sessions. The average number of participants attending an activity was 13-16, although sometimes no one would turn up and at least once 31 YWSS participated. Importantly, participants attending the sessions were eligible YWSS, with staff estimating that most were aged 18-19, with some 16 and 17-year olds. Due to the sensitivity of YWSS, facilitators do not ask their exact age to avoid exacerbating their anxiety around admitting to selling sex underage.

Young women across all three sites highlighted that they liked the fact that Sisters services were free of charge, as they had to pay to get similar services at public institutions near them. They particularly appreciated receiving condoms, family planning, and STI treatment. Another common positive comment was that clinic staff were friendly and they thus felt comfortable attending. For example:

*"They treat us well here despite our age. At other facilities they will start asking questions like why are you doing this? and why you have an STI? or why do you want condoms at such a tender age?" (Vic Falls)*

*"Our nurse is good. Even when you get here when she's going home, she attends to us." (Hwange)*

*"The love we get from the staff here is awesome!" (Mutare)*

YWSS talked about being able to work together amicably as a result of the programme, and being less likely to denigrate each other. YWSS participants also highlighted that they were starting to look out for each other and warn each other about clients such as those who are violent, don't like using condoms or don't pay. YWSS also reported feeling more confident to seek health services elsewhere if the Sisters clinic is closed because they know that they have the right to health despite being sex workers. During this time, numbers of YWSS attending Sisters clinics increased.

Staff who facilitated these early sessions reported that they were easy to conduct. Although Outreach Workers felt some initial apprehension about starting to work with younger women, they soon became comfortable with them and were touched by YWSS' appreciation for "learning new things" and for being listened to and cared about. According to staff observations, YWSS enjoyed most activities from the Activity Pack, particularly those that are active and fun or involve singing and dancing. When activities touch on more serious or difficult content, some women have compared it to "schoolwork" but nonetheless staff confirm that these are often the sessions that engender the most productive discussions.

In 2016, the multi-donor DREAMS initiative (Determined, Resilient, Empowered, AIDS-Free, Mentored and Safe) initiated a wide range of health, educational, and economic interventions for young women in Zimbabwe. This provided an opportunity to extend the YWSS programme to new provinces and towns and it became an integrated component of the broader Sisters programme.

### **Specific Challenges of Working with YWSS**

YWSS are more than just younger sex workers, they are also adolescents and young women in the process of developing their personalities, aspirations, and planning their futures. While some will choose to engage in sex work longer term, others are looking for opportunities to finish education and/or find alternative sources of income. Many do not self-identify as sex workers, and prefer not to mix with adult, professional sex workers. As a result, they may not perceive themselves in need of specialised health services or consider what they do to be "high risk." They are also fearful of being identified by community members, particularly if they continue to live with parents or other guardians.

Creating "safe spaces" for YWSS to meet and address their own concerns and priorities is likely to reach a greater number of YWSS than inviting them to activities in which adults make up the majority. Furthermore, YWSS will benefit from basic skills-building and efforts to bolster their confidence and self-esteem, as many will not have learned the "tricks of the trade" or developed the same levels of resilience that older, more experienced sex workers may have. YWSS may also require referrals to a wider range of social services, such to school subsidies, vocational training, assistance obtaining birth certificates or other documentation, and in some cases child protection. It is therefore critically important for the Sisters programme to be aware of existing support, and to create a functional referral network to help YWSS access services/ assistance that cannot be realistically offered as part of *Sisters with a Voice*.

### **YWSS Materials**

The materials for conducting YWSS programming consist of the following:

- YWSS Activity Pack
- Training Guide (for use training Outreach Workers and young Peer Educators)

- 2 Training PowerPoint Presentation embedded into the Training Guide and 1 set of cards in PPT format for use in Traffic Lights activity in the YWSS Activity Pack

There is also a **participatory monitoring activity** provided below. This is in addition to the sessions in the YWSS Activity Pack and should be used for engaging YWSS participants in providing feedback on the programme. This tool helps to integrate YWSS' voices in future adaptation and planning of targeted activities and provides regular information about aspects of the YWSS programme that are more or less useful. It also collects a few very basic demographic and behavioural indicators that can be used to track characteristics of participants.

## YWSS Participatory Monitoring Activity

### Introduction

Remind the group that the community mobilization activities for young women who sell sex has been running for almost a year, and explain we are trying to evaluate it, to make sure that it is meeting their needs. Also, the people who paid for the development of the manual would like to know how useful it has been, and then we can share it with other projects that also want to work with young women who sell sex.

We would like to find out what the positive and negative parts of the project are, and what we can do better in the future. This set of activities are specifically to learn about their perceptions of the project.

Even if some of the women in the group have never come to one of these sessions before, that's OK. They can still help us evaluate it by telling us what they have heard about the project and what they would like from the project in the future, even if they don't know very much about it. We are interested in hearing *many* and *different* opinions.

**Materials:** Flipchart paper, coloured pens (enough for each participant or to share between participants)

If there are more than about 8 participants, it might be better to divide into small groups.

### Part I: How are we doing so far?

Give each group a piece of flipchart paper and ask them to divide it into three parts. Ask the women to answer the following three questions, one in each section of the paper. They can do this in any way they like – drawing, writing, etc. Ask them to have a discussion as a group first, even if they decide to put down individual opinions.

It is best if every participant has a pen and is encouraged to put something down on the page.

What do you *like* about the activities and the project?

What do you *not like* about the activities and the project?

In the future, what should we *change*? What do you wish for the project to *achieve* in the next year?

These are difficult questions, but encourage the participants to really think hard about how they want the project to proceed.

Leave the group(s) alone while they add the contributions to the flipchart. When they are finished, ask them to present back to you (or to each other) and really probe about the things they like and don't like – ask for details, examples, explanations so that we can really understand. Ensure someone documents the discussion.

If the groups have made several suggestions for changes to different aspects of the programme, ask them to *rank* these in order of importance (this should be done all together in a large group if even if previously they were divided up).

### Part II: What is your favourite activity and why? Scoring

To prepare for this in advance, make sure you have a full list of which activities from the manual have been delivered at each site.

Ask the group to list all the different activities they have attended. They can just brainstorm and shout out the names/descriptions of the activities they remember. Write these down on a flipchart paper. Ask "any others?" to ensure you have written down all the activities they remember, and then check your list of the actual activities delivered. If there are some that were not mentioned by the group, ask if anyone attended them. If so, add them to the flipchart.

**Note:** Be sure that the note taker at this session makes a record of which activities were remembered spontaneously by the group, and which were added from the list.

Now go around the room and ask each woman to briefly state which was her personal favourite activity, and why. Put a  next to the name of the activity each time a woman mentions it was her favourite (as if they are “voting” for best activity). When everyone has had a chance to say what their favourite activity was, add up the marks and highlight an overall Favourite and Runner Up. Now work out which activity or activities received the least votes – does this indicate they were not very good, or is it that fewer women attended them? Try to get a discussion going around what makes an activity better or worse.

“Favourite” might mean most fun or enjoyable. This can be different from other positive criteria. Ask the group to discuss which of the activities were:

Most relevant to their experiences?

Most useful for the future?

Try to get a good discussion going around what makes activities relevant and/or useful – ask for detailed examples and opinions.

### **Part III: Personal opinions**

Some people may have different opinions about various aspects of the project but be unwilling to share those publically. So we also would like to get to know some personal opinions on certain questions.

Hand out copies of the “Happy Face” voting slip (last page of this document) OR pass out blank pieces of paper to each participant and ask them to draw the “emoticon” symbols across the top.

Emphasise that these papers will be anonymous and have no names – stand somewhere where it is obvious that you can’t see what the women write down as their answers. Read out each of these statements and ask them to put a  under the “face” that best reflects their response to each one.

- a) It is easy for me to attend Sisters activities
- b) Sometimes it makes me uncomfortable to discuss the issues in the activities with others
- c) I have recommended the activities to other people
- d) The activities take too much time
- e) I have talked to others about what the topics we have discussed in these sessions in my own personal life
- f) I have gone to the Sisters Clinic at least once

Now read out the following questions. They should put their answer down in the 3 empty boxes. This is a personal exercise and they do not need to show anyone what they are marking down. They should not write their name down. After they are finished, they should fold the paper so no one can see, and give to you. You can put them directly in an envelope or folder so they can see you don’t know which paper comes from which participant.

### **Personal Questions**

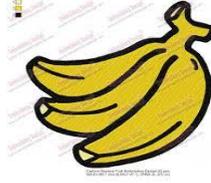
1. How many times have you come to one of these activities?
2. How old are you?
3. How many clients did you have last week?



Disagree a lot



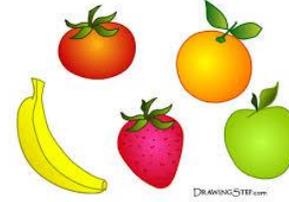
Disagree



Neutral  
(Don't agree or disagree)



Agree



Agree a lot

a)

b)

c)

d)

e)

f)

1

2