

**Layers of Silence* :
Links between women's vulnerability, trafficking and HIV/AIDS
in Bangladesh, India and Nepal**

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Introduction

At the end of 2001 there were over 5 million people living with HIV/AIDS in the South Asia region, according to UNAIDS estimates. Of these, nearly four million were living in India, where the number of new infections is expected to double every fourteen months if appropriate actions are not urgently undertaken. Other countries of South Asia, including Bangladesh and Nepal, also have rapidly growing epidemics. Gender, age and transmission via sex are key elements in the dramatic increase in the epidemic in the region. The fastest rate of new infections is in the age group 15-24, and the epidemic is expanding rapidly amongst women, many below 18 years of age.

An estimated 35 per cent of the HIV positive people in the region are women and girls, and the numbers are growing as a result of their socio-economic, cultural and biological vulnerability to HIV/AIDS. This vulnerability is rooted in the limitations imposed by socio-economic and cultural conditions on the control which women have over their life circumstances and choices, including sexual circumstances. These same underlying factors also heighten the vulnerability of women and girls to being caught in the growing web of trafficking in the region, taking them into situations which remove the last vestiges of choice, violate their human dignity and security, and further increase the risk of exposure to HIV/AIDS. This paper examines the underlying factors of the dual vulnerability of women and girls in India, Bangladesh and Nepal, both to trafficking and to HIV/AIDS, and the particular vulnerability to HIV/AIDS of those who are trafficked into prostitution.¹

Both trafficking and HIV/AIDS occur in South Asia in a climate of denial and silence at all levels. There is a prevailing silence about violence against women and girls, particularly domestic violence, and silence about their circumstances, including the abuse and exploitation they often face in their living and working environments in the process of earning a living. This silence manifests itself in a denial in families and communities and in society at large that trafficking of women and girls is taking place. At the same time there is silence and unwillingness to acknowledge that the HIV/AIDS epidemic is a major development challenge and that HIV positive people are in our midst in increasing numbers and need our care and concern, as well as protection of their rights. There is silence and lack of societal acknowledgement of behaviours that make people vulnerable to HIV/AIDS, and about sex itself, which makes it difficult to address HIV prevention or talk about trafficking into prostitution. This silence is aiding and abetting the epidemic, allowing it to spread, and at the same time perpetuating trafficking.

Voices are being raised across the region to break these layers of silence, and initiatives are being taken to address both HIV/AIDS and trafficking. Women's groups are raising their voices to protest violence against women. There is a People's Forum which addresses trafficking. The commitment from governments is reflected in the SAARC Convention on Preventing and Combating the Trafficking in Women and Children for Prostitution, which has recently been signed.² There are national programmes on HIV/AIDS, and government and civil society organisations are increasingly active in prevention and care and support. However, these voices are not being raised in unison. The effectiveness of responses will be maximised by combined efforts linked with wider programmes addressing the underlying issues of poverty, structural inequalities and women's position in society.

Discussion and analysis in this paper are based on the cumulative field experience, information and data from five NGOs working to address trafficking and HIV/AIDS in South Asia. These NGOs are all partners of the UNDP HIV and Development Programme in South Asia, and have implemented pilot projects on the prevention of trafficking and HIV/AIDS, including rescue, rehabilitation and repatriation, with the active involvement of sex worker organisations. All the pilot

¹ While it is acknowledged that trafficking of men, and especially of boys, is also taking place, and that there are many different sites of trafficking, the focus of this paper, and of the programmes discussed in it, is on women and girls trafficked into prostitution.

² Signed at the inauguration of the Eleventh SAARC Summit, January 5, 2002

projects collect and compile information from girls and women who have been trafficked, as well as from source areas.³

Information was collected through a combination of methods:

- semi-structured interviews with staff of the five NGOs listed in the table;
- focus group discussions with project staff and with women/girls who have been trafficked;
- case studies and preliminary reports provided by the NGOs; and
- secondary data such as statistics and reports.

The Context of HIV/AIDS and Trafficking in South Asia

The socio-economic context

The expanding HIV/AIDS epidemic in South Asia and increased trafficking in women and girls are taking place in a context of rapid economic transition. Changes such as widening social and economic inequality, rural unemployment and increased poverty, new forms of mobility, break up of communities, and erosion of traditional values are increasing the vulnerability of large segments of the population of the region to HIV/AIDS, as well as heightening the particular vulnerability of women and girls to sexual exploitation and trafficking. Gender discrimination in the traditional societies of South Asia seems to have been aggravated by the intrusive impact of the urban world. The anomie and alienation caused by a changing world often affects the least empowered people in a society, which in South Asia includes most women.

South Asia is home to one-fifth of the world's 6 billion people, the bulk of whom –and many of the poorest – live in Bangladesh, India and Nepal. Five hundred fifteen million people in the region, out of 1.3 billion globally, live in absolute poverty, defined as an income of \$1 per day or less. Economic and human poverty, which reduce the power of people to control their circumstances and make choices, remain pervasive problems in the region, with slow growth in per capita income, great unevenness in the distribution of the benefits of growth, and large and persistent gender disparities. Bangladesh, India and Nepal share situations of limited infrastructure for education, health, social services, or facilities such as power, water and sanitation. Rapid urbanisation in each of the countries has led to huge urban slums and squatter settlements, housing 25-60 per cent of residents of some cities without basic facilities.

Table 1: Selected Development Indicators

Indicator	Bangladesh	India	Nepal
Total population (millions, 2001)*	140.4	1025.1	23.6
Urban growth rate (% projected, 2000-2005)*	4	2.8	5.1
Real GDP per capita (PPP \$, 1999)	1483	2248	1237
Human Development Index rank (2001)	132	115	129
Under-5 mortality rate (M/F) (per 1000 live births, estimate for 2000-2005)*	88/97	79/92	91/106
Population not using adequate sanitation (% , 1999)	47	69	73
Population without access to health services (%, 1981-1993)#	26	25	90

³ At the time of compilation of this paper the data collection and compilation was in progress. The paper thus only includes samples of the information available with the NGOs.

Population with access to essential drugs (% , 1999)	65	35	20
Female adult literacy rate (% , 1999)	29.3	44.5	22.8

Source: All data from *UNDP Human Development Report, 2001*, except:
 * *State of World Population, UNFPA 2001*
 # *UNDP Human Development Report 2000*

Livelihoods in the rural areas of the three countries continue to depend largely on agriculture, which is primarily rain-fed in most places. This is particularly true in Nepal, where only about 10 per cent of the population lives in urban areas (UNDP 1998: 175). Most landholdings are cultivated by their owners, but sizes are small. In 1981/82 more than 50 per cent of the landholdings were smaller than 0.5ha (St BA 1989: 42). Originally the hills were settled, but over the years deforestation compounded by the difficult topography which limits agriculture to terraced slopes and valleys has created situations inducing migration to the lower-lying fertile Terai, with better vegetation and forest cover.

A situational analysis conducted by WOREC for prevention of trafficking found that, for the majority of families studied, migration was clearly linked to landlessness or near landlessness. Of the families from the Terai region with at least one migrating member, 61 per cent had only up to 1 Bigha⁴ of land and 17 per cent were landless (WOREC 2001). Despite a decline in agricultural production, over 80 per cent of families in the WOREC analysis define their primary occupation to be agriculture.

Bangladesh, where 80 per cent of the total population of 140 million lives in rural areas, is one of the most densely populated countries in the world. The poverty situation of the country is worsened by frequent floods, cyclones and droughts which repeatedly reverse advances in development. Agricultural production is often below subsistence which leads to seasonal and long term borrowing for consumption and production.

In India 67 per cent of the labour force is engaged in the agriculture sector⁵. However large scale urbanisation and the resultant creation of industrial-based employment has created economic incentives for migration and resulted in an approximately three fold increase in population mobility in the last half century. With increasing pressure on land, resulting from over-population, large number of the rural unemployed move to cities or other rural areas in search of seasonal or permanent employment. While there is a rising middle class, figures indicate that 30 per cent of all urban residents still live below the poverty line⁶, the majority of whom are migrants who live in urban slums.

In addition to entrenched patterns of landlessness, rural poverty has been affected by large-scale economic reforms in the region, Structural Adjustment Programmes (SAPs), and the advent of globalisation. While these have created many opportunities and promoted modernisation and development in countries of both the north and south, at the same time there have been growing economic disparities between and within countries. The countries of South Asia are now witnessing a phase of economic transition which can be seen to have a two-fold impact on the lives of poor rural people. On the one hand, it is leading to transformation of rural-based livelihoods like farming and fishing in a way that is rendering many people jobless, and on the other, it has flooded the market with consumer goods and marketing strategies which increase demands on individuals and societies.

⁴ 1 A bigha is approximately 0.67 hectare

⁵ The World Factbook- India (<http://www.cia.gov/cia/publications/factbook/geos/in.html>)

⁶ Mehta, S. (1990): Spatial mobility in India: Evolving patterns, emerging issues and implications. *Population Geography*. Vol 12, no 1&2. June - December.

This double impact is felt most by the women. For example, mechanization of agriculture and fisheries has reduced the demand for some women's labor, especially those who were traditionally engaged in harvesting and processing. Simultaneously, one sees the entrance of large corporate interests into industry and fundamental shifts in patterns that transfer priority away from production for local markets to production for international export. The emerging scenario is one of growing rural poverty and unemployment, which in turn puts increased pressure on rural communities to move beyond their immediate locations in search of income.

Table 2: Work Participation Rates and Indices of Underemployment in India (per cent)

Status	Males		Females	
	1987-88	1993-94	1987-88	1993-94
Rural participation rate	51.7	53.8	24.5	23.4
Index of underemployment	0.6	5.1	5.9	18.0
Urban participation rate	49.6	51.3	11.8	12.1
Index of underemployment	3.0	2.9	7.6	13.7

Source: National Sample Survey Organisation, 1997; Tables 6.1, 6.8, 7.2

Table 2 demonstrates that following the implementation of economic reforms in India in 1991 (Singh 1998), rural women were less economically active than before. Even though newer technologies of production were being adopted, the benefits failed to 'trickle-down' to rural households, in part because the new technologies required complementary conditions for their effective implementation, which have not been created (Singh 1998). Studies have indicated that aspects of the India's New Economic Policy have resulted in increased urbanization, and fewer job opportunities for women in the formal sector (Upadhyay 2000).

Women constitute the poorest of the poor as a result of gender insensitivity, discrimination, lack of social status and of basic rights, together with arduous domestic responsibilities, which reduce their access to resources, education, training and labour markets. Within families women, and particularly girl children, generally have less access to food and health care as well as to educational opportunities. Anti-female biases are reflected in the fact that South Asia is one of the few regions in the world where men outnumber women. They are also reflected in the Gender Empowerment Measure (GEM), which places the South Asian women at 0.23 - the lowest value amongst all regions in the world. Furthermore, society in Bangladesh, India and Nepal is predominantly patriarchal in nature, and gender division and the *purdah*⁷ system have intersected to confine women in general to a "protected" and segregated role (UNESCAP, 1995) in these countries. Although people follow different religions, it is common to the three countries that religion itself is an important aspect of the everyday lives of people; and it is not uncommon to use religious sanctions to impose discriminatory practices which put women at a disadvantage.

Preferential treatment for boys in this region is reflected in selective education enrolment and drop out patterns. Although, in theory, there is equal access to educational opportunity for both sexes, the participation of girls is significantly lower than that of boys. In a study conducted for life skills development amongst teenagers in Nepal, two thirds of the 700 girls interviewed reported that they faced discrimination at school, at home or in the community. In citing examples of such discrimination, the girls reported that the boys were more important because of their ability to earn money, support parents and bring in a dowry. Nearly 30 per cent of illiterate girls felt that they were powerless and could do little to change this situation. (UNICEF, 2001).

Table 3: Adult Illiteracy in Southern Asia*

⁷ In its most literal sense, *purdah* means a veil or curtain. In its socio-cultural connotation, *purdah* refers to a system in certain Muslim and Hindu societies of screening/ segregating women from men, and more specifically from strangers.

Year	Illiteracy rate (per cent)			Illiterate population (millions)		
	Total	Male	Female	Total	Male	Female
1970	68	54.4	82.6	299	124	176
1980	60.7	47	75.5	345	138	207
1990	53.1	39.7	67.4	389	150	239
1995	49.5	36.6	63.3	409	156	254
2000	45.8	33.4	59	429	161	268

Source: UNESCO Website

* Southern Asia is defined to include Afghanistan, Bangladesh, India, Iran, Maldives, Nepal, Pakistan, Sri Lanka

There is a continuum of violence against women, which ranges from deprivation of resources and lack of access to property, education and health care, to institutional discrimination imposed by religious and cultural sanctions, dowry harassment and domestic violence, sexual harassment and rape. In India, for example, it is estimated that every 26 minutes a woman is molested, every 34 minutes there is a rape, every 43 minutes a woman is kidnapped and every 93 minutes a woman is killed. (UN India, 2001) Incidents of crime against women are on the rise in the region due not only to socio-economic and cultural factors but also to weak enforcement of legal provisions. The reluctance of women to make public their experiences of physical and sexual violence, in part related to ideas around shame and honour as well as fear of further harassment, contributes to the perpetuation of the situation.

- According to the National Crime Records Board of India, a total of 131,338 crimes against women were reported in the year 1998. These crimes include reported cases of rape, abduction, dowry deaths, tortures, molestation and trafficking. It is widely accepted that these crimes are significantly under-reported, and on the increase.
- The UNFPA report, *State of the World Population 2000*, declared Bangladesh second highest in the world in the incidence of violence against women.
- A women's group in Bangladesh has publicised data showing that more women die of burns, suicide, and injury than from pregnancy and child birth (N. Huq, 1997).
- One study from Nepal reports that more than 50 per cent of all victims of rape are girls under the age of 16, most of whom are raped by relatives. (Pradhan, 1996, cited in Sheikh, 1997). A survey in domestic violence found that 13 per cent of the respondents knew about at least one case of sexual abuse of children (Saathi, 1997a).
- In Sri Lanka 60 per cent of women interviewed in a sample survey responded that they have been subjected to domestic violence during the period of co-habitation.

4b).

In this context of discrimination, lack of choice and vulnerability, increasing numbers of young women and girls, many between the ages of 10 and 20, are being trafficked in the region, mainly for the sex industry. The UN Special Rapporteur on Violence Against Women has recently observed that while the failure of states to protect and promote women's human, economic and social rights has created a situation in which trafficking flourishes, trafficking further subjects women to numerous additional human rights violations.⁸ Girls and women who are trafficked are deprived of their personal freedom and security, and of their dignity as human beings. Moreover,

⁸ *Position Paper on the Draft SAARC Convention on Preventing and Combatting Trafficking in Women and Children for Prostitution*: UN Special Rapporteur on Violence Against Women.

their lives are endangered by violence and illness, and they are at risk of contracting HIV from sexual exploitation and abuse. In addition, a distinctive element of trafficking is the transportation of the victim to an unfamiliar milieu, where she is culturally isolated and marginalised and may be denied a legal identity and access to justice, thereby placing her at even greater risk of abuse, violence and exploitation.

The phenomenon of human trafficking has increased significantly over the past decade both globally and in the South Asian countries, though its illegal and clandestine nature makes it exceedingly difficult to establish accurate figures of the numbers of people trafficked. Globalisation, the professionalisation of traffickers' syndicates and the extension of modern transportation, as well as sex tourism, the feminisation of poverty and the changing nature of prostitution, have all worked towards increased demand for, and supply of, bonded or unfree labour – especially that of young women. Not all women are trafficked for prostitution. Many are trafficked into domestic labour, agricultural and factory work, begging, and other circumstances where they are also vulnerable to sexual and physical exploitation and abuse. The majority of trafficked women, however, find themselves in brothels where they have little or no control over their bodies and lives. Many are physically locked into the brothels, in poor living conditions, facing daily violence, and little or no access to health care. Coercion, an alien environment, fear of deportation and other psychological factors keep them from seeking any kind of help. Sexual exploitation in such conditions makes them highly vulnerable to HIV/AIDS.

Definitions of Trafficking

Trafficking has been defined by the UN General Assembly statement of 1994 as:

“The illicit and clandestine movements of persons across national borders, largely from developing countries and some countries with economies in transition, with the end goal of forcing women and girl children into sexually or economically oppressive and exploitative situations for profit of recruiters, traffickers, and crime syndicates as well as other illegal activities related to trafficking, such as forced domestic labour, false marriages, clandestine employment and false adoption”.

The UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, 2000 defines trafficking as:

“the recruitment, transportation, transfer, harbouring or receipt of persons, by means of a threat or use of force or other forms of coercion, of abduction, of fraud, of deception of the abuse of power or of a position of vulnerability, or of giving or receiving of payments or benefits to achieve the consent of a person having control over another person for the purpose of exploitation.”

Existing studies and information provide only a partial picture of the extent and magnitude of trafficking in the region. While governments and civil society organisations are increasingly making efforts to collect data, there are often discrepancies in the numbers resulting from the hidden nature of trafficking itself. Major sources of statistics are NGOs involved in rescue and repatriation, such as those involved in this study. Despite the variations in data there is an overriding composite picture of an increase in trafficking, including trafficking from new areas and from population groups not previously involved in prostitution. Figures also suggest a growth in demand for increasingly younger girls.

The figures below give an indication of the level of trafficking in the region:

- Between 5,000 and 10,000 girls and women are trafficked to India every year from Nepal. (STOP-India, Maiti Nepal-Nepal, NNGAT-Nepal), i.e. at least 50,000 over the last ten years;
- During the last ten years, it is estimated that over 30,000 women and girls have been trafficked from Bangladesh to India; and this is continuing at a rate of 200-400 women monthly (STOP 2001);

- The average age of girls trafficked from Nepal to India dropped from 14-16 years in the 1980s to 10-14 years in 1994. (Human Rights Watch, 1995);
- In a study conducted by UNICEF among 5000 sex workers in Kathmandu in 1997, over 20 per cent were less than 16 years of age;
- Of the 2 million women in commercial sex work in India, 25-30 per cent are below the age of 18 (National Commission of Women, India);
- NGOs estimate that over 60 per cent of those trafficked into prostitution are adolescent girls in the age-group of 12-16 years.

Increasingly, information is becoming available on geographic patterns of trafficking in the region, involving points of origin, transit and destination of internal and trans-border trafficking. The data has to be treated carefully, because much of it indicates the places of origin of women in prostitution, rather than the places of origin of women and girls who have been trafficked. The table below, compiled by DMSC, is a case in point. Yet just as not all trafficked women end up in prostitution, not all women in prostitution have been trafficked. Thus, for example, the fact that within India, the states of Karnataka, Andhra Pradesh, Maharashtra and Tamil Nadu are “high supply zones” of women in prostitution, does not directly provide information on trafficking from those states. On the other hand, Bijapur and Belgaum districts in Karnataka, and Kolhapur in Maharashtra have been identified as centres of organised trafficking networks. Andhra Pradesh, Karnataka and Rajasthan have been identified by NGOs as supplying the highest number of girls to Delhi for sex work. There is also evidence of trafficking of girls from marginalised migrant communities living in metropolitan slums.

Table 4: Places of Origin of Sex Workers⁹ in Kolkata

Locations of brothel-based sex workers in West Bengal	Areas of origin					
	West Bengal	Madhya Pradesh	Bihar	Uttar Pradesh	Bangladesh	Nepal
Sonagachi	*	*	*	*	*	*
Sethbagan	*		*		*	
Rambagan	*				*	
Bowbazar	*	*			*	*
Tollygunge	*	*			*	*
Khidderpur	*	*	*	*	*	*
Kalighat	*	*	*	*	*	*
Chetla	*	*	*			*
Lakharmath	*	*			*	*
Salkia	*	*	*		*	
Ghoradanga	*	*	*	*	*	

Source: DMSC (Darbar Mahila Samanwaya Committee) 1998

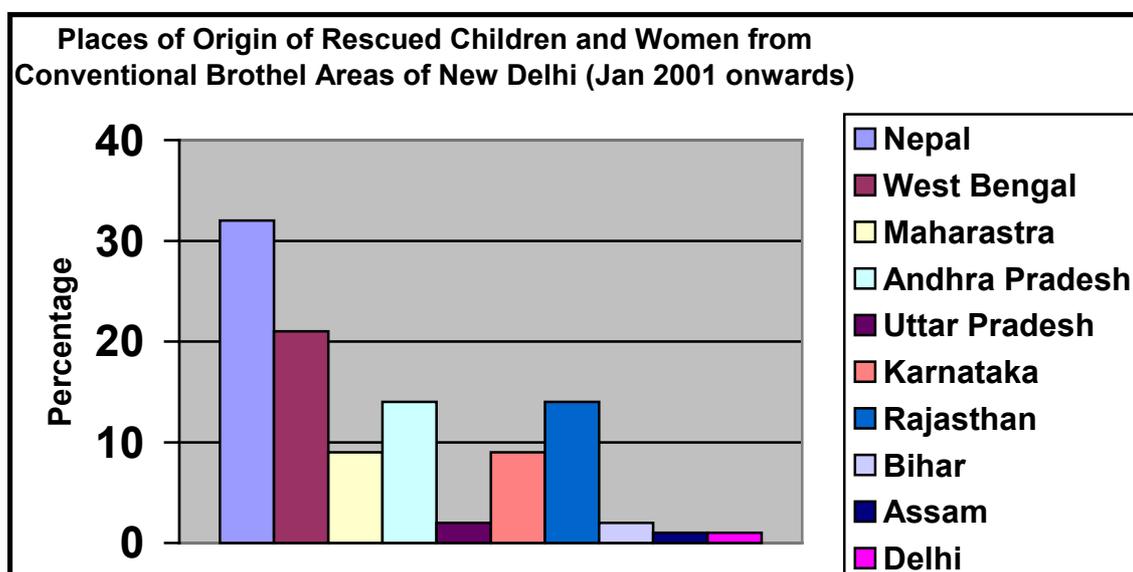
NGOs working with trafficked girls have, over the years, identified the routes of movement and source areas. Subsequently they have worked with police and border security personnel from the relevant areas, held cross-border workshops with other NGOs, and carried out activities at transit and destination points.

For example, from information gathered in brothel areas, as well as from rescue operations, STOP has gained a picture of the geographic provenance of girls trafficked to Delhi. Although some come from India, Bangladesh and elsewhere, most girls trafficked to Delhi are from Nepal; and they are usually transported overland through the areas of Darjeeling, Gorakhpur, Lakhimpur Kheri, and Raxaul on the India-Nepal border. The value of the girls is determined by factors like

⁹ Not all of whom have been trafficked

their physical attributes and virginity. Those considered to be of lesser value do not reach Delhi, but end up in the roadside *dhabas*¹⁰ of Northern India.

Graph 1.



Source: STOP

Women from the hill areas of Nepal have been trafficked more frequently than women from the plains. However, this situation is changing considerably and the network is widening. Ongoing research suggests that this could be related to growing poverty, growing demand for women in the sex industry and lastly, and importantly, to the fact that as community awareness grows, traffickers are moving to new areas where communities are not yet suspicious of them.

(INSERT MAP 1 FROM STOP)

Points of origin of trafficked girls in Bangladesh include Nawabganj, Rajshahi, Lalmonirhat, Jessore and Cox's Bazaar. There is also evidence that Cox's Bazaar is used as an entry point for those travelling through Bangladesh from Myanmar, and that Pakistan is a country of transit and destination for women trafficked from Bangladesh. (see Map 1 for exit points and points of origin). It is estimated that 99 per cent of the girls who are trafficked out of Bangladesh are taken by land routes through Jessore, Satkhira and Rajshahi, along the India-Bangladesh border.

(INSERT MAPS 2 and 3 FROM USAID)

From its field study, CARE Bangladesh has concluded that virtually any point along the border can be used to traffic women and children into India. Nevertheless the major trafficking points are those with access to well maintained roads, river or railway lines, and those which also have good road and rail communication continuing on the Indian side. In Shatkhira district, there are many illegal border crossings. The Benapole border area in Jessore has also become one of the more popular sites for illegal crossing and thus is also a point through which women and girls are trafficked. Along this part of the border, special businesses cater to those wishing to cross illegally. Small houses provide shelter and food, and serve as gathering points for those waiting to be escorted across the border at night – a service for which *dhurs*¹¹ pay 150 to 500 *taka*.¹²

How girls are drawn into trafficking

¹⁰ *Dhaba* is an Indian term which refers to roadside eating places commonly used by truck drivers (but also used by others) for eating and resting.

¹¹ Would-be migrants crossing the border illegally

¹² US\$ = approx 60 *taka*

Girls are lured with promises of jobs in the city, or by pledges of marriage. While many are sent by their families to earn extra income for the household, others are escaping from domestic abuse and violence, and still others are tempted to look for a better life and wider opportunities away from the rural drudgery and the narrow limitations imposed on women and girls in the villages. Lack of education, knowledge of the world and life-skills can make these girls vulnerable. They trust people who dupe them and subsequently sell them, generally into sex work. In many cases the trafficker is a person they know, or a person known to others in the source area.

Many of the immediate causes for leaving home identified by women and girls in the STOP study are related to underlying discrimination against women. These include polygamy, abuse of girl children and child marriage, and dowry. Forty per cent of the trafficked girls in the study had experienced family breakdown, mostly due to the prevalence of polygamy, and sometimes because women were abandoned when they failed to bear children, or to bear sons in particular.

At the same time the socio-cultural climate of the region fosters a high sense of duty in women towards their children, younger siblings and older parents. It is not unusual to find women who resort to lower end jobs and sexual labour in order to support their families, and to pay for the education of male family members. If they are trafficked and end up in the worst forms of commercial sexual exploitation, the majority continue to bear it and do not protest or break away. They feel that it is their 'sacrifice' and duty to provide better opportunities for others within their family.

Table 5, drawn from a source area survey conducted by WOREC in Nepal, suggests a range of reasons why girls leave home and makes it clear that there are many push factors. There is not always a simple poverty-trafficking correlation. False promises of marriage and a better life in the city, magnified by the impact of media—and particularly television and popular films – are factors that influence women/ girls' decisions to "run away" from home, particularly when they live in abusive situations.

Table 5: Perceived Reasons for Migration

Reasons	Per cent families (N=1796)
In search of a better life	48
Insufficient food	37
Lack of employment in the village	28
Lack of land for cultivation	19
Gender discrimination	16
Social discrimination	02

Source: WOREC, 2001

In fact, in the post liberalization period in India, more and more girls and women are moving out of their homes in search of better opportunities. The traditional cultural fabric has undergone a rapid change, associated with modern consumerism, and this has led to the commodification of many elements of daily life. Now every thing has a price, including women's bodies, and the marketplace can determine this price. However, this market dynamic has done nothing to change the status of women. (STOP, 2001)

Girls are sold to brothels for amounts ranging from Rs.6,000/- (approx. US\$ 125¹³) to Rs. 45,000/- (approx.US\$ 950), depending on the number of middlemen involved. The cost is later cited to them as their 'debt-bondage' which they have to pay off by working. STOP's experience in the red light area in Delhi suggests that women do not have access to the money they earn. After paying off their "dues" to the madams and the pimps, sex workers are given their share of the income in the form of "tokens", with the amount due to them written on the token. The amount is

¹³ Exchange rate- Rs. 47.60 per US\$ on January 17, 2002

accumulated on the promise that it will be given to the girls after a period of three years, when they will be free to go back home if they have earned enough to pay all their dues. But in most cases this never happens.

Khalida,¹⁴ from Bangladesh, was sold to a Bombay brothel by a relative who had brought her to India promising a good job. She worked there for three years, and on average she entertained 6-7 customers a day. She earned lots of money, but she had no control over it. The house where she lived was well protected, and there were always guards standing in front of the gate. Her Malekin (owner of the house) kept condoms, but the condom usage rate was very low. Her perception is that only 5 per cent of all customers used condoms. She was tortured by her Malekin regularly. He did not provide good treatment when she become ill, nor did she have access to good food. (Case history provided by CARE Bangladesh)

The Nexus of Vulnerability, Trafficking and HIV/AIDS

A complex set of socio-economic relations and factors, including those related to livelihood and sustenance, link the phenomena of women’s vulnerability, trafficking and HIV/AIDS. Some of these factors are summarised in Table 6. Gender-related social and economic disempowerment, and unequal access to health and education, are obviously central.

Table 6: Factors Linking Women’s Socioeconomic Conditions, Trafficking and HIV/AIDS

	FACTOR	ASPECTS	THEMES
1.	Individual	Motivation, attitude, knowledge, practices, occupation, family, sense of control.	Lack of self-esteem, patriarchal order of family, low level of literacy and awareness, absolutely no sense of control.
2.	Socio-cultural	Social support, gender, ethnicity, culture, religion, advertising, historical events.	Gender discrimination against girls, reinforced by religious and cultural practices.
3.	Economic	Income levels, cost of service, pressure to work, commercial pressures.	No right to property, low productivity of land, basic survival pressures, feminization of poverty and of migration.
4.	Environmental	Hazards, distances, food availability, transport, water.	Alienation and isolation due to migration.
5.	Political	Sources of power and influence, existence of advocacy groups and vested interests.	Trafficking a part of organized networks backed by police, politicians and other influential sections of society.

¹⁴ The names of all girls in the case studies cited here have been changed to ensure confidentiality.

6.	Policy	Health promoting policies, legislation, incentives or punishments, taxation and implementation.	Level of policy implementation is weak.
7.	Existing services	Access, scope, appropriateness, quality.	Existing services are rudimentary and access is limited for trafficked females.

(Adapted by STOP from Hawe et.al)

Once drawn into the web of trafficking and sexual abuse, a trafficked child or woman has a significant chance of contracting HIV/AIDS, because she has no control over her body or her life. That is precisely why she is in demand. For example, HIV infection has been estimated to be as high as 72 per cent in the brothels of Mumbai, India, with a high incidence in girls under 18 years of age (Salunke, et al, 1998). A study of sex workers in Nepal's Terai region found 4 per cent of sex workers with HIV, of whom 17 per cent had worked in India. STOP's research has shown that almost 40 per cent of women and children who have been rescued from brothels have tested positive for HIV.

Informal surveys across the region have also found that sex workers are at highest risk of contracting HIV in the first six months of their work - probably because customers perceive new sex workers to be low risk, and because of these workers' relative lack of experience and skill to negotiate condom use. One common myth in South Asia is that sex with a virgin girl can cure HIV/AIDS and other sexually transmitted diseases. Consequently, the demand for young Nepali girls in the brothels of Mumbai is high.

Stigmatisation, discrimination and further marginalisation are common societal responses to those affected by HIV/AIDS, and to those who have been trafficked. These responses in turn undermine the basic rights and freedoms of the affected individuals, including the right to mobility and residence, the right to essential services, the right to confidentiality, the right to freedom of association, and sexual and reproductive rights.

The socio-cultural nexus: caste, class and gender

The perpetuation of trafficking and the special vulnerability of women to HIV/AIDS, particularly in some population groups, are embedded in power relationships within society, including those of caste, class and gender. Rajbhandari (2001), in describing the socio-economic complexity of trafficking, says: "Trafficking is the result of a socio-political and cultural imbalance in society. The socio-economic structures in society are set up in such a way that one group of people will always be able to exert their power on the other, lower in the hierarchy. In such situations, where the space to negotiate is practically non-existent, it is sometimes even difficult for victimised women and families to pin-point and say 'he is the trafficker'."

Women and girls who bear a triple burden of exploitation – they are poor, they are from groups which are traditionally marginalised and they are female – are among the most vulnerable to being trafficked. NGOs conducting a study in around 20 villages in Orissa, Maharashtra and West Bengal, in India, found that the communities most affected by trafficking are the so called 'scheduled castes' and 'scheduled tribes',¹⁵ as well as communities in which prostitution is culturally sanctioned. The study also found that, in some districts in West Bengal, it is so-called low caste women who have always been targeted by traffickers. Similar tendencies emerged

¹⁵ Traditional Hindu society is organized around four castes, with those outside the four castes sometimes described as 'untouchables.' To improve the living conditions of this extremely poor and deprived section of the population, the Government of India instituted affirmative action soon after independence in 1947; and this effort was incorporated in a 'schedule' or section of the Constitution. Similarly, tribal populations which have lacked access to education, health care and other fundamental rights were identified in another 'schedule' of the Indian Constitution. These groups are thus known as "scheduled castes and tribes".

from a sociological profile of source areas constructed by STOP (2001): scheduled caste/tribes constituted 46 per cent of the Indian households where trafficking occurred. In seventeen percent of the survey households, girls were described as 'missing' or following the footsteps of an elder sister. In such cases, earlier generations of aunts and grandmothers had also been in prostitution.

Although the picture is changing somewhat, partly due to the demand for different types of girls that attracts new groups into the trafficking net, girls from socially marginalised groups remain highly vulnerable. In addition, the acceptance of sex work within certain communities in India and Nepal as possible livelihood options for women means that young girls can be prepared for and introduced into this profession without being given the right to make an informed choice at an appropriate age.

"My name is Kamla. My family is very, very poor, and we come from a very backward village. Everyone in our village looks down upon us because we are low caste. My mother and my two brothers and sisters work in the landlord's field. When I was about 12–13 years old, I was working in the field one day when the landlord's son and his four friends accosted me and dragged me to a dilapidated building and raped me. When I looked for justice, the village panchayat¹⁶ said that I was concocting stories to malign the landlord's son. I was ordered to leave the village. The son of a neighbour who lived in Kolkota agreed to help me. He offered a job in a lawyer's house. My mother agreed to send me with him. He brought me to Delhi instead and sold me to a brothel. My mother still thinks I work as domestic help. Many girls in the brothel are from my caste and belong to my district and have the same stories to tell." (As documented by STOP, 2001)

Gender biases and attitudes

The gender biases and attitudes towards women outlined above underlie many of the specific factors which directly contribute to their vulnerability both to HIV/AIDS and to trafficking. Neglect, abuse and sexual exploitation perpetuate and continually reinforce the subordinate status of women; and this, in turn, has the dual effect of making society as a whole turn a blind eye to what is happening, while women and girls themselves for the most part do not question their fate, or expect to have the ability to change it. Particularly in teenage girls, the sense of powerlessness and lack of self worth are important elements in their vulnerability to both trafficking and HIV/AIDS.

Women and girls, who are biologically more susceptible to HIV infection if exposed to the virus, are placed at risk of exposure because of the attitudes and sexual behavior of men within societal structures that directly and indirectly discriminate against women and in favor of men. When women and young girls have little control over their daily lives and occupy a subordinate status, it is extremely difficult for them to negotiate for safe sex, even if they know about the need for it. In Nepal, for example, WOREC argues that women with little or no education and few skills, accustomed to early marriage and frequent pregnancies, are caught in a web of dependency that virtually eliminates the possibility of negotiation.

This is even more true for women and girls who have been trafficked. In a focus group discussion with 57 rescued children and women, STOP found that 98 per cent of the participants had never initiated condom use, although they had some awareness about safe sex measures. They had about 4-5 customers on a weekday and 12-18 customers per day on the weekends. Condom use was almost unheard of. It is unrealistic to expect these women and children to bargain and negotiate condom use, given the existing power structure in society and in the sex trade.

¹⁶ Local government body. The Panchayati Raj is a three-tier democratic system of governance which operates at the village, block and district levels, primarily in the rural areas of India.

“The clients don’t like condoms and the *gharwali* (madam) tells me to do what they say. If I refuse, the client can choose any other girl and the *gharwali* will beat me with rods. So I always do what he says”.

Account (from a STOP focus group discussion) of a rescued Nepali child, when asked about safe sex practices.

Furthermore, inequalities in female access to health services heighten the HIV vulnerability of women and girls – for example, through making it likely that sexually transmitted diseases will go untreated. For those in sex work, access to much needed healthcare is often almost non-existent. In fact, health was the last item in the list of priorities of rescued girls interviewed by STOP. Ironically, unregistered medical practitioners are preferred to doctors and paramedical staff, whose attitude towards these women and children is often demeaning. Government mobile medical units often refuse even to step into the brothels. The vicious cycle of the denial of basic rights of women, especially those in prostitution, can lead to destruction of health and at the same time deny access to even elementary health care.

Silence about sex, and particularly about women’s sexuality, compounds the situation. There are several taboos around sexuality and menstruation; and the sexuality of women tends to be misrepresented. It is often equated with sex after marriage for procreation and pleasure of the husband. As expressed by Bhaiya and Dhar,¹⁷ “Passivity begins to define the woman’s role in ‘sex’ and, as a result, it becomes a tool for all the ways in which women are suppressed and subordinated, restricted, intruded upon, violated and objectified” (cited in UNIFEM, 2001). Such underlying attitudes both severely limit the possibility that women and girls can protect themselves from HIV/AIDS and create the environment in which sexual exploitation and trafficking into prostitution take place. They further reduce the chances that a trafficked girl, viewed entirely as an object to satisfy male sexual desire or other needs, can negotiate for safe sex.

Women as property

During a focussed group discussion conducted by the NGO WOREC in the Sunsari district of Nepal, the conclusion reached was that if there is not enough to eat, then the women in the households have to make certain compromises, even if it means selling their bodies. The Musahar community, occupying the lowest rung in the socio-economic ladder of Nepalese society, admitted during the discussion that they themselves “lead” children from their community into a trafficking situation, commonly to serve landlords in the Terai area. Participants in this discussion even termed child labour a form of trafficking – particularly because they perceived no element of choice in such decisions.

Discrimination against women is also associated with psychological violence and emotional deprivation. Existing male bias in this region, including preference for a male child, means that young women and girls may from birth be deprived of the love and affection of family members. They are often abused, sexually and otherwise, and made to bear the brunt of household work. A show of affection and understanding, even from a stranger, therefore elicits an eager response

¹⁷ Discussing the structuring of women’s sexuality in a patriarchal setting, Bhaiya and Dhar argue: “Any construction of women’s identity is a product of specific constructions of gender and the control of female sexuality. There are a very few societies today, where expression of women’s sexuality either inside or outside the marriage is not controlled by the patriarchal project. Often women’s sexuality has gained visibility not for its expression or to celebrate female desire and eroticism, but to contain it with the use of legal and ideological prohibition and denial.”

and easily leads to bonding and immediate trust building. This is easily exploited both by local and by professional traffickers, who pose as lovers and thus lure young women and girl children into the trafficking net (STOP 2001). Some traffickers undertake false marriages with girls, often with the blessing of families grateful for bridegrooms not seeking dowry.

An old man in the Sunsari district of Nepal raped his granddaughter. When she became pregnant, he married her to a man from another village. The old man was arrested but released after some time because of his good contacts. In the meantime, when it was discovered that she was already pregnant, the girl was often physically and verbally abused in the marital home. She eventually ran away with another boy, and the family has information now that she is in Mumbai. (WOREC, 2000)

Vulnerability is also closely related to composition of the household, the number of earning members, the liabilities that the household has and consumption patterns. Large households with less income and high consumption needs create situations in which younger girls and women feel the pressure to contribute to the family's income or to leave so that they do not constitute a financial burden. This can lead them onto paths that involve the risk of sexual exploitation and trafficking. Moreover, such households tend to neglect the emotional, educational and economic needs of girls and women, making them more susceptible to exploitation.

Gender biases in education are also a factor heightening the vulnerability to trafficking. NGOs have noted a clear link between lack of educational opportunities and entry into sex work. In a study conducted with sex workers in six cities in India, the areas identified as high "supply" zones had lower literacy rates, particularly among the family members of sex workers. For example, 92 per cent of the sex workers interviewed in Delhi reported that their parents were illiterate (CSWB, 1991). Similarly, WOREC found that 54 per cent of the women and 26 per cent of men living in the source area it studied in Nepal were illiterate. Low educational enrolment and high drop-out rates are common among girls in Nuwakot in Nepal, one of the project districts known as a source area, which has an overall literacy rate of 25 per cent. In Bangladesh, the enrolment rate of girls, which is 61.4 per cent at the primary school level, drops to 2.3 per cent in high school (UNESCAP, 1995). At least 55 per cent of the girls drop out before attaining minimum educational standards. And in a study conducted in Bangladesh, 95 per cent of the women who were rescued from trafficking were found to be illiterate (BNWLA, 1999).

Ideas about women's work are a further contributing factor to vulnerability. The majority of women in rural areas have lives of physical hardship and drudgery. Studies have shown that women put in many more hours of physical labour than men (Acharya, Bennet, 1991; Asia Foundation, 2001). Young girls are often almost slaves in the service of the family. Coupled with images of city life gleaned from television and movies, and from stories told by returned migrants, the possibility of escaping rural hardship and personal limitations can seem attractive. According to peer educators at *Shakti Samuha*, a collective run by survivors of trafficking in Nepal, for many girls the choice of returning home to the physical hardship of village life is a difficult one. For many who set out to escape drudgery and abuse from a parent or a relative, going back to the same situation is not a favourable option. Some women enter prostitution knowingly, so that they can find a respite from their daily routine. According to members of the DMSC in India, some women have admitted that they preferred engaging in sex work to having to live like "slaves" in their own villages (DMSC 2001).

A rescued trafficked girl from the Pargana district said she left her home because she hated working in the paddy field: "The water was slushy and the sun was too hot. I moved to Calcutta to look for better opportunities. I also wanted to learn to speak better, dress up like a city girl and be able to provide well for my family."

Source: STOP 2001

When women and girls are ill-treated and repeatedly abused within families, with no support mechanisms or safety structures to protect them, it can happen that they will make desperate attempts to change their situations, and in the process become vulnerable to trafficking through placing trust in people who present themselves as being able to help (Rajbhandari 2001). There are also many instances of women being sold into prostitution by their own husbands, who find the burden of providing for a family too much to bear when faced with insecurity of income and untenable living conditions, particularly in urban slums.

The poverty and livelihood nexus

Unequal distribution of wealth and power, structural poverty and lack of sustainable livelihoods have provided the overriding impetus for the rapid spread of the HIV/AIDS epidemic in South Asia, creating and nurturing conditions which increase the vulnerability and susceptibility of people, particularly poor people. The pattern of the epidemic is not random, but consistently affects the poorest and most marginalised in most societies. Exposure to HIV infection is preventable for those who have the necessary knowledge and sufficient control over their circumstances to act upon that knowledge: it is thus those who lack this information and control who are the most vulnerable.

Poor people are forced by economic imperatives into living conditions and occupations in which risks to life and health include lack of sanitation, crowded unhygienic living conditions, poor or non-existent health facilities, malnutrition, and lack of attention paid by employers to the occupational safety of workers. In the day to day struggle with poverty and alienation, people can grant low priority to the risk of HIV infection when compared with more immediate threats to individual or family survival.

The hardships of daily life, combined with prevalent gender stereotypes that view women as sexual objects, and young girls and widows as a household burden, also contribute to placing women and girls at risk of trafficking. In places that have been identified by NGOs as source areas for trafficking, including the Sindhupalchowk district of Nepal, the Jessore district of Bangladesh, and the Nayagarh district of Orissa in India, as well as urban slums like Yamuna Pushta in Delhi or Godia Basti of Calcutta, many people live a hand-to-mouth existence.

NGOs have begun to study the landholding and agricultural patterns in the areas from which girls are being trafficked. In a survey conducted in the Nuwakot district of northwestern Nepal, only 11 per cent of households had sufficient food to last them for 9-12 months, 84 per cent worked for wages and 79 per cent took loans to meet the food deficit (ABC 1999). In the Sindhupalchowk district of Nepal, inhabited largely by Tamangs and known for its high incidence of trafficking, only 5.1 per cent of the land is cultivable.

Research has shown that around 90 per cent of the children and women who have been trafficked have been from families who are either landless or have marginal landholdings. One of the main reasons for borrowing in trafficking source areas was found to be the need for foodgrains (STOP 2001). These borrowings have led to large outstanding loans among majority of the poor families.

CARE-Bangladesh has studied the linkages between debt and the sexual vulnerability of women. Borrowing is largely controlled by the micro-credit schemes of banks. The banks offer loans to most of the villagers on compound annual interest rates ranging from 12 to 20 per cent. Loans are recovered through agents employed by the banks. Agents who are granted commissions on loan

recovery will go to any extent to get this commission. These can be highly exploitative situations and for most families, taking loans is a vicious cycle. When families are unable to pay back loans, they borrow again from a different source in order to repay the previous loan. Studies have indicated that this deficit-induced debt gives rise to mortgaging and sale of assets, and that the servicing of debt is increasingly linked to sexual exploitation faced by women (CARE-Bangladesh 2001).

Debt-related dependencies set off complex socio-economic dynamics at the community level. For instance, in Nepal, in the *terai* region, the *Besi* (moneylender) wields considerable power. Some *Besi* are known to demand sexual favours from the young daughters of their clients, while being fully aware that economic deprivation will make it impossible for debtors to refuse such requests. Studies also find that it is not uncommon for *Besis* to be involved in trafficking nexuses (WOREC 2001, Shakti Samuha, 2001).

A poor woman of the *Musahar* community in Nepal, trapped in a debt bondage relationship with a landlord, commented: "I do not know if you call this trafficking, but if I do not send my daughter to the landlord, or question what he does to her, we may end up not getting our next meal."

A young Tamang girl in Nepal was sent to work in the house of a *Besi* when her father was unable to repay a loan. The girl became pregnant after a few months. At this point the moneylender, who in this case was also the landlord, asked the girl to leave. When she pleaded that she had nowhere to go, the landlord offered her the alternative of leaving with a young man who, he promised, would find her work.

Source: WOREC

Poor families send children, including young girls, to work in order to augment household income, and also as a safeguard against the uncertainties they face – the loss of job, a natural calamity like a flood, cyclone or drought, famine, a failed harvest or prolonged ill health. In India, for example, the approximate monthly income of the parents of girls with whom STOP has been working ranges between Rs. 200 to 300 per month.¹⁸ A majority of the parents (66 to 76 per cent) are illiterate, with the rate of female illiteracy higher than that of males (STOP 2001) The death of a family member, family breakdown and other problems easily unsettle households with low incomes, no savings and an inability to borrow for want of collateral. And, in fact, a quarter of the households of trafficked girls in the STOP study had suffered at least one death of a male income earner. Such conditions increase the possibility of girls being sent away to earn money.

Study areas in Orissa (India) and Bangladesh experienced a clear increase in trafficking after natural calamities. For example, the trafficking of girls from Nayagarh increased after the cyclone of 1999 and subsequent floods in coastal Orissa, with 15-20 girls being trafficked from the cyclone-hit areas to Jhansi, Madhya Pradesh on the pretext of marriage.

Tasneem and Farida are sisters from Bangladesh. They have two other sisters, but no brother. When a flood destroyed their house and crops, they joined five other women from different local villages who went to Bombay with a man, in search of work. He asked for 1000 taka from each of them. Tasneem and Farida were engaged in house keeping and sex work in Bombay for about three months, before returning to their home with the amount of 10,000 taka. They repaired their old house and paid 3,000 taka to the money lender. The two women estimated that they had seen about three hundred Bangladeshi girls at brothels in Bombay. Most of them were under twenty years of age. They concluded that although there is lots of work in Bombay, only sex work can provide lots of money. (CARE Bangladesh)

¹⁸ US1 = approx. 48 rupees

For poor rural families, the migration of one of more family members in search of livelihood opportunities is often the only recourse they have in times of need. For example, in a study conducted in Nepal among 714 households in the districts of Doti and Accham, 94 per cent of the households perceived poverty and lack of employment opportunities as important reasons to go to India for work. The study showed that at least 49 per cent of the families in Doti district had one member in India. Another study in Nepal found that as much as 25 per cent of the rural population received a quarter of its income from remittances (NNGAT, 1999). For many households in Nepal the migration of a family member has become a norm, incrementally improving the living conditions of the family and providing for additional benefits all round. In addition, the demonstration effect of increased disposable income attracts new migrants. In this situation families do not tend to ask about the source of the income brought back, thus creating a veil of silence that favours the traffickers of women and girls.

A demand for female labour, often in the garment sector, has provided new income earning opportunities for women, and this has encouraged women to migrate. The number of garment factories in Bangladesh increased from 700 in 1983 to 2,400 in 1996 (Amin, Diamond, Naved and Newby 1998). And, from a half a million in 1991-92, the number of women working in the readymade garment sector rose to 1,263,000 in 1997-98 (Quddus & Rashid, 2000: 54, 233). Women employed in garment factories constitute over 60 per cent of Bangladesh's total female labour force (CPD 1995).

Mobility and entry into the work force have brought benefits to many of these women and their families, narrowing the gender gap in many spheres including social prestige, control over income and decision making (UN-DPCSD,1998). At the same time, the socialization and education of women and girls, especially in traditional societies, does not prepare them adequately for the experience of migration. In comparison with men of the region, women have even less access to information, are hardly exposed to the outside world, and often lack the confidence and independence required to negotiate and make decisions. These factors heighten their vulnerability, as do the uncertainties and irregularities they encounter when trying to find work.¹⁹

The garment factory workers of Bangladesh, for example, first move to the city from the village and then start looking for work. Even if they find employment, many are unsure of actually obtaining full wages. Employers commonly hold back a part of their earnings in order to extract favours from women. The former are able to get away with such blatant exploitation because women have little or no bargaining power: men tend to occupy the supervisory roles while women are largely employed as helpers/ workers (Kabeer, 1991). Low wages and exploitation, combined with emotional and psychological vulnerability and the pressure to earn more for the family, create situations in which women and girls can be duped by traffickers promising new and better jobs.

Shakti Samuh, which is currently working in several areas of Kathmandu –including some of the slums – reports that traffickers, enabled by their networks in the communities and even by contacts with employers in factories, tend to identify and attract women or girls who are physically, emotionally and economically vulnerable and likely to succumb under pressure – such as women who are refused regular and full wages from their employers, women who are physically stressed, women who have family problems, women who need to send remittances home on a sustained basis.

Of course, migration in search of work remains, for many, a critical strategy for fighting poverty and attaining sustainable livelihoods; and it is an important freedom. Migration itself does not lead to the transmission of HIV or to trafficking in women. It is the specific causes for migration, as well as the conditions under which migration takes place, that determine the level of vulnerability. The absence of organised systems of recruitment for women workers, which can provide adequate

¹⁹ A majority of women work in the informal sector in South Asia. In India 96 per cent of all economically active women are in the informal sector; in Nepal 75 per cent are self-employed and 28 per cent are unpaid family workers; while in Bangladesh 75 per cent of women were in the informal sector in 1996-97 (Human Development in South Asia , 2000)

documentation, accurate pre-departure information and safe forms of transport, create the conditions in which traffickers operate. This is even more true when legitimate migration opportunities are denied to women, increasing their dependence on middlemen, heightening their vulnerability to being trafficked and reducing the possibilities of seeking help or redress. Therefore the critical issue is to ensure safe mobility, particularly for women, so that their rights and security can be protected at points of origin, transition and destination.

The impact of trafficking

Many girls and women who have been trafficked suffer emotional and physical deprivation, live in total isolation and suffer from chronic under-nourishment. Girls who have been rescued from brothels report violence, intimidation, rape and torture from pimps, brothel keepers and sometimes even by the law enforcement agents. Sex slavery and servitude is maintained through overt coercion, physical abuse, emotional blackmail, economic deprivation, social isolation and even death threats. In focus group discussions conducted by STOP with 115 recently rescued girls, all of them reported being threatened, raped, tortured and locked in by the brothel owner or manager. All expressed feelings of hatred towards these men. Feelings of rejection, shame and guilt, as well as fear of being stigmatised by the mainstream of society, were frequent.

Psychological problems can include violent behaviour, lack of trust, psychological derangement, very low self-esteem, and aggression. This, in turn, has many implications for the rehabilitation programmes run by NGOs. STOP, which is actively engaged in the repatriation of trafficked women, says it takes many sittings to ascertain details about the girl's family, since her story may change all the time due to her fear and disorientation. Many of the women and girls are also addicted to alcohol or drugs, thus suffering from withdrawal symptoms once removed from the brothel.

Reported health problems include tuberculosis and sexually transmitted infections (STI) as well as complications arising from early pregnancies and frequent abortions. All these factors increase women's physiological vulnerability to HIV/AIDS. There are indications that a large majority of girls working in the sex trade suffer from two or more STIs at a given time. The most common of these are syphilis and gonorrhoea. Tuberculosis, chronic pelvic infections, anaemia and scabies also have very high incidence among prostitutes in Indian brothels, and there is a high prevalence of infectious diseases. Since violence is central to trafficking, physical and sexual abuse lie behind some of the most intractable reproductive health problems, including exposure to HIV.

Girls and women who are HIV positive can need special psychological support in order to face the stigma of HIV/AIDS and to deal with the fear generated by HIV awareness programmes carried out in brothels. Maiti in Nepal, discussing the consequences of trafficking, says that these issues come to the fore only if and when the women are rescued and rehabilitated. For those inside the brothels, however, the situation can be very serious. If women report sick and are tested HIV positive, they are asked to leave the brothel. The fear of being thrown out sick and with nowhere to go leads them to continue to be "in service" and keep silent for as long as they can endure the pain.

"I come from a tribal village of coastal Orissa. I eloped with a boy who brought me here and sold me to a brothel. After 2 years, I was rescued and sent back to my village. My family readily accepted me. However, when it was discovered that I had AIDS they turned against me. I knew very little about AIDS, and my parents knew even less. I moved away from my family and now live in an AIDS hospice in Andhra Pradesh." (STOP)

Responding to HIV/AIDS and Trafficking

Responses to both HIV/AIDS and trafficking in South Asia can be strengthened by integrating them into wider efforts to address the inherent social and economic situations and structural inequalities confronting society at large. Human trafficking and HIV/AIDS bring together many areas of concern, ranging from human rights, livelihoods and poverty, to health and education. They are also cross-border issues requiring co-ordinated and joint responses in order to safeguard the rights, security, health and well being of women and children across South Asia.

As girls are trafficked and the HIV/AIDS epidemic spreads in the region, it is becoming apparent that, unlike programmes and projects, people's lives are not divided along sectoral lines. To ensure the impact and effectiveness of policies, programmes and projects aimed at controlling human trafficking and HIV/AIDS, multisectoral, integrated and holistic approaches are required. These must be grounded in legal provisions, as well as macro-economic and social policies, that protect people's human rights and provide poor people – and especially women – with access to assets, including land. People must have opportunities to live a life of dignity and freedom from bondage. Improved access to social services, including health and education is vital, if the vulnerability of women and girls is to be reduced. So are strengthened poverty alleviation strategies, involving community mobilization and participation.

Responses to trafficking and HIV/AIDS must also be based on longer term strategies to address structural imbalances in society, related to deprivation, inequality and exclusion; and they must empower women and girls through the creation of local income-earning opportunities, so that the decision to migrate in search of work can be based on adequate information and choice. Since mobility can be liberating, it is important that efforts to protect women and girls from trafficking not limit their right to exercise this freedom. Facilitating safer mobility, through education and information campaigns emphasising rights-based responses to gender and HIV/AIDS issues, will reduce their vulnerability in this regard.

An inclusive and participatory approach is essential to ensure the success of multisectoral and integrated responses to HIV/AIDS and trafficking. Affected communities and individuals must be placed at the centre of all analysis and work, and the participation of all stakeholders must be ensured. For example, programmes for ensuring safe and just working conditions will be limited in their impact if they exclude groups that are vulnerable to exploitation, such as those in prostitution or those working in the informal sector.

The UNDP HIV and Development Programme for South Asia has been supporting attempts to control human trafficking and HIV/AIDS, facilitating advocacy and integrated responses, and promoting partnerships among governments, NGOs and community-based organizations in the region. Principal considerations in designing these responses and activities have been:

- combating stigma and stereotypes of those affected by HIV/AIDS and trafficking;
- developing empowering strategies to reduce vulnerability and to facilitate safe mobility;
- promoting and strengthening the self-organisation of sex workers;
- involving the community at large in prevention and reintegration; and
- supporting research and documentation as part of a broader effort to create a culture of learning.

NGO partners working on anti-trafficking and HIV/AIDS activities have organised several cross-border workshops of concerned officials, social workers and local leaders. Some of the areas in which work has been carried out and lessons learned are discussed below.

Legislation and law enforcement

Much of the nexus of vulnerability of women and girls arises from the legal framework of countries and the ways in which laws are interpreted and implemented. While some laws are directly discriminatory, other laws and constitutional provisions which are designed to protect people are not being actively implemented. Value systems and legal regimes, which do not discriminate against women or stigmatise those affected by violence, trafficking and HIV/AIDS will go far towards reducing the climate of vulnerability. To accomplish this may involve reviewing existing

policies and practices, with a view to recognizing and reinforcing the rights, agency and participation of trafficked women and girls, and of people living with HIV/AIDS (PLWHA). A start has been made, for example in Nepal, where the Forum for Women, Law and Development has reviewed existing laws and their implementation for their impact on women, highlighting the lack of women's access to economic resources, such as land, as well as their lack of recourse in case of domestic violence.

The development of minimum standards for the treatment of both trafficked persons and people who are HIV positive could provide a basis on which activities at different levels can be designed and implemented in the best interest of affected persons. Pilot projects that both demonstrate the impact of stigma and discrimination on survivors of trafficking and on HIV positive women, and explore ways of reducing these attitudes, would be extremely useful.

Sensitising relevant law enforcement and border security personnel, as well as government authorities and members of the legal profession, to issues of HIV/AIDS and trafficking is also an important activity. Several efforts are currently under way to build the capacity of law-enforcement agencies to protect rights under national and international law and treaties, and to increase in-country and cross-border co-operation. In a recent two-day workshop in Nepal, senior police officials from five South Asian countries called for increased regional co-operation to combat cross-border trafficking. But in this regard it is important to note that attempts to protect women by placing legal restrictions on their freedom of movement can actually make them more vulnerable to trafficking through clandestine routes and association with unscrupulous middlemen.

Enabling communities

While laws and policies can provide a framework for empowerment and protection of rights, their implementation can be limited without the acceptance and active involvement of the people themselves. The building of community capacity to prevent trafficking and accept returnees, and to care for HIV positive people, is thus a key element of effective responses. This entails the empowerment of women and girls within specific communities, so that they can work against the factors which make them vulnerable to trafficking and HIV/AIDS.

Pilot projects have incorporated a number of strategies which can be effective in this regard. For example, WOREC in Nepal (which has a strong background in areas that empower women) implemented a pilot project that provides relevant information, education and support to community members concerned with trafficking in women and children, and with HIV/AIDS. WOREC encourages organisations working on other development issues to incorporate trafficking into their ongoing programmes and activities. In addition, self-help groups have been set up to help women, and also men – especially young boys – to understand the issues surrounding trafficking. Peer educators have received training on group management, trafficking awareness, HIV/AIDS and home-based care and support for affected persons.

Activities are now being directed towards facilitating safe movement. Migration information centres have been set up to provide information on safe passage, in order to prevent migrating women and girls from falling prey to abusive and exploitative practices. Information booths are run by the border police and by social workers from WOREC to disseminate information kits on the rights of migrant workers and how they can protect themselves and others. These kits also contain contact information for organizations working on similar issues in other parts of the country and across the border.

Initiatives that strengthen the ability of adolescents to deal with the risks of trafficking and AIDS through sensitisation and mobilisation of school students in affected areas are also underway; and these are strengthened through the development of innovative materials in written and audio-visual formats in local languages, to be used by adolescent trainers and peer educators. Maiti in Nepal has also been working on raising the awareness of children *before* they reach adolescence, so that they can be empowered to protect themselves. Educating children, in their experience, has also been an effective method of reaching out to families. It is thus important that schools, youth organisations and informal educators be drawn into the effort to address trafficking and HIV/AIDS.

These pilots projects have highlighted the need to bring local authorities and communities together to enhance the effectiveness of initiatives. To ensure sustainability, it is important for communities to have official support for their efforts. Thus, for example, STOP's community mobilization programmes – carried out in partnership with community-based organisations in Nayagarh, Orissa; Gangakhed, Maharashtra and four community outreach centers in Delhi – are aimed at creating a unified system of policy makers and grass root workers to combat trafficking. WOREC has involved local-level governmental bodies such as Village Development Committees (VDCs) to help strengthen awareness of trafficking and HIV/AIDS within local decision-making bodies and authorities. Orientation programmes for local government officials have also played a role in broadening the space for women's involvement in local decision making processes. NGOs and CBOs that already have the ear of local authorities are very well placed to take up the challenge of empowering communities to respond to the dual challenges of trafficking and HIV/AIDS.

A rights-based approach to rescue and rehabilitation

The rescue, rehabilitation and reintegration of women and girls who have been trafficked is a subject of much discussion and debate in the region. While there is universal agreement that children should not be involved in sex work, much discussion revolves around issues related to the definition of a child, the age of rescued women and girls, and the concept of volition for participation in sex work. A rights-based approach acknowledges the agency of adult women and respects their choices, trying to offer a range of real alternatives for informed choice, as well as care and support for those who need it, especially those who are HIV positive.

A number of lessons have been learned from the work of NGOs, including Maiti Nepal and STOP India,²⁰ which have been networking with each other, and with other organisations, to facilitate the process of repatriation and rehabilitation.²¹ An important aspect of these programmes has been the involvement of rescued children and women themselves in rescuing other trapped women and children from the brothels. Success in forcing brothel owners to return valuables, back earnings and sex workers' children has encouraged and motivated participation. Maintaining proper records of returnees and providing sustained follow up services have also reduced instances of "re-trafficking", which can result from lack of effective monitoring and adequate rehabilitation.

Girls who have been victims of sexual violence and trafficking often need medical attention and psychological support for an extended period. The process of repatriation itself is at times a long-drawn-out one and may not always be successfully accomplished given the stress, trauma, distrust and insecurity women face. Maiti suggests that living for a while in a hospice where girls are encouraged to do some income generating work gives them time to work on their low self-esteem and plan for their future. The building of a new identity takes time, skilled counselling and sometimes professional psychological help. This is an area in which much work remains to be done.

Maiti currently has over 350 women and children staying in its various homes. The shelters not only help victims of trafficking and intercept potential victims, but also provide assistance to women who have been victims of any form of sexual violence and exploitation. Women and girls are given training in life skills to deal with problems of insecurity, lack of skills and low-self esteem, and to instill a sense of security and self-confidence. Maiti also runs a hospice in the Jhapa District of Nepal for HIV positive people, providing 24 hour medical care, which aims at self-sustainability through residents' farming and fishing.

Women who are being repatriated want to acquire skills that open up new livelihood options and empower them to gain some control over their lives. They may also want to stay in cities rather than returning to their villages of origin. Although there are organisations which provide vocational training in different fields, these educational efforts do not always match the expectations of the returnees. The more traditional welfare-oriented programmes involving sewing and knitting provide limited employment opportunities. Organisations are not in a position to

²⁰ 268 girls were rescued from Delhi brothels by STOP during 2001.

²¹ The STOP network includes Maiti Nepal in Nepal, BNWLA in Bangladesh, and Prajwala along with STREE, RISE and HELP in Andhra Pradesh.

create job markets and the governments are usually unable to step into the gap. More innovative alternatives, such as training and employment in local businesses, like bakeries, offer more realistic income earning possibilities.

One of the primary goals of the NGOs has been to unite women with their families, in those cases where it is a preferred alternative. This requires a systematic process of assessing family circumstances and working with communities to create an enabling environment for women to return home. Families can be reluctant to take back their girls for fear of social seclusion or ostracism from the community, and because this may reduce the marital prospects of other children in the family. Moreover, there are instances in which the family may want the girl back but the community is unwilling to accept them. Returning with some income earning skills and some seed money greatly facilitates the process of reintegration into the community. Still, many women prefer to pursue vocational skills and other livelihood alternatives in the city.

One of the peer educators at *Shakti Samuha* (the collective that has been established with active support from WOREC) reported that, even six years after returning to her country, she preferred working in the city to going back to her village of origin. Her family does not know that she has been rehabilitated by WOREC or that she continues to work with women who have been or are likely to be victimised as she was. In fact, they are unaware that the girl was trafficked in the first instance. She has established contact with her brother, who takes home remittances from her because the family needs her support for survival. The peer educator is quick to add that she was fortunate to have had an alternative (Shakti Samuha 2001).

The stigma associated with HIV is a serious problem confronted by rescued women and girls, as well as by the organisations that assist them. For example, Maiti has had great difficulties in getting the appropriate medical treatment for residents in its homes who have HIV-related illnesses; and it continues to do a lot of advocacy work with health services in order to deal with this problem. Only recently has Maiti been able to link up with a Civil Hospital²² in Nepal which is willing to take up cases of HIV-positive women. Since stigma and fear regarding HIV-positive patients are a common problem across India, Nepal and Bangladesh, addressing trafficking needs must go hand in hand with wider initiatives that ensure protection of the rights and dignity of HIV positive people.

Sex workers as agents of change

Empowering strategies that adopt a rights perspective place the trafficked person at the centre of any analysis. Once this is done, it becomes clear that the people who are best-placed to prevent trafficking are those who have experienced it and thus understand it best. Two pilot projects that support the activities of sex worker organisations in preventing trafficking have been implemented by DMSC and CARE Bangladesh.

Sex worker self-regulatory boards set up by DMSC in a number of red-light districts in Calcutta have been active in dealing with the structural factors that shape the everyday reality of their members, including material deprivation, social exclusion, and the stigma attached to being a sex worker (or a sex worker's child). They have attempted to improve the access of members to health services and education, and to encourage members to exercise their rights as citizens (such as participating in elections). They have also worked to mitigate the everyday exploitation of sex workers, to reduce the violence against them and to increase their economic security through the creation of a consumer co-operative and a micro-credit programme, as well as providing alternative work for unemployed members.

Through such efforts, these organisations have empowered their members to negotiate for safe sex and have taken a strong stand on trafficking: "The Boards stipulate ... like other occupational associations, some minimum standards for working in the sex industry of which consent and age are the two main guiding principles. The members of DMSC contend that their own efforts at regulating the norms within the sex industry act as a much more efficient deterrent to exploitation

²² A Civil Hospital is a general hospital run by the government where patients are usually treated free of cost or at a subsidised/ minimal cost. These hospitals usually have both out- and in-patient wards.

within the industry, be it underage prostitution or trafficking, than state coercion or censure and control by the society at large.” (DMSC)

To reduce the likelihood of trafficking, DMSC self-regulatory boards

- establish channels of information within the red light area, through which board members can monitor whether children are trafficked into sex work;
- identify those who have been trafficked and encourage them to seek help from the board;
- mitigate violence against sex-workers by brothel keepers, room owners, pimps, local thugs and authorities; and
- provide rescued women with trauma counselling and health services, if required.

DMSC also runs STD clinics in the red light areas, where 80,000 visits have been registered to date. On average, 30 women are treated in each clinic every day (DMSC 2001). There are also facilities for HIV testing and counselling. From January 2001 to July 2001, 33 of the 194 persons tested were found to be HIV positive – 13 of them between 25 and 29 years of age (DMSC 2001). DMSC offers care and support to such women within the red light districts; and the proportion of follow-ups is very high because peer educators are assigned the cases.

Mala, a founder member of Darbar Mahila Samanway Samiti (DMSC)

Mala, a founder member of DMSC, describes her experience as a victim over the last six years. Mala was sold when she was 10 years of age. She was initially raped brutally by the police and held captive by them for about 14 days. Being a young child, she only understood the physical trauma she went through; and she retains its horrifying memory. After that she was forced to work as a sex worker at Sonagachi in West Bengal. She began to internalize her helplessness, feeling that “these things happen and one cannot do anything in such an oppressive patriarchal setup”. She thought it particularly unlikely that anything could be done to deal with HIV and trafficking.

Today, Mala is the General Secretary of DMSC. She has worked for over six years with the organization, and she believes in the strength of *sangathna* (people working together). DMSC sponsors the Usha co-operative, which extends loans to other sex workers and supports saving schemes. Economic strength, says Mala, empowers women to negotiate safer sex with their clients.

Research and documentation

As organisations increasingly realize how little information and data are available on the subject of trafficking and HIV/AIDS, they are developing mechanisms for systematic needs assessment and documentation. As part of this effort, all UNDP pilot projects now include needs-assessment of the communities involved, surveys to ascertain trafficking source areas, and qualitative research to understand the factors underlying trafficking.

Action research – based upon sound and creative methodologies as well as reliable and hard data – should look at issues such as the demand side of trafficking, the socio-economic and cultural contexts that encourage or impede it, the influence of laws and legal regimes, and so forth. In addition, better tools for evaluation and impact assessment, and better technical support for a rights-based approach in the context of trafficking and HIV/AIDS, are required. Systematic mechanisms for sharing information and extending knowledge networks will help to improve the effectiveness of responses.

Networking and advocacy

There are a number of networks working on trafficking and women’s rights issues, as well as operational partnerships across the region which link NGOs working in rescue and repatriation. Similarly, there is increasing networking and interaction between government and civil society organisations working on HIV/AIDS. To date, however, there has been little in the way of joint efforts or approaches to address the two issues in an integrated manner. There is a critical need to develop multi-sectoral, multi-stakeholder partnerships, and other creative collaborative

processes, to address issues of trafficking and HIV/AIDS in all their dimensions. For example, collaboration between women's groups and anti-trafficking organisations, on the one hand, and groups working on the issue of HIV/AIDS, on the other, can play an important role in enhancing the effectiveness of collective action to reduce the vulnerability of women and children. Similarly, partnerships can be created by organisations and government agencies working in fields like poverty alleviation, community development and education, both in points of origin and points of destination of trafficked women and girls.

Neither trafficking nor HIV/AIDS can be effectively addressed in isolation. Effective responses will require alliances across many sectors of society, at local, national and international levels. Those whose primary concerns are social and economic policies, human rights and governance have crucial roles to play in reducing trafficking and vulnerability to HIV/AIDS through shaping societies and economies which will protect the rights and dignity of women and children, and provide for decent livelihoods. Thus sustained and well-informed advocacy is needed in all spheres – both to incorporate new voices and to unite the voices already raised against the silence which perpetuates trafficking and the spread of HIV/AIDS in South Asia.

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Appendix: NGO partners whose experiences are reflected in the paper

Bangladesh

CARE Bangladesh, Dhaka, is working on prevention of trafficking and HIV/AIDS, promotion of repatriation and rehabilitation, and support for sex worker organisations. A survey in source areas is also being carried out.

India

Stop Trafficking, Oppression and Protection of Children and Women (STOP), New Delhi, India, networks with organisations across the country, especially in the west (Mumbai²³) and the east (Orissa and West Bengal), and with Maiti-Nepal and Bangladesh National Women's Lawyers Association (BNWLA), in order to obtain the repatriation of rescued girls and to carry out prevention work. STOP is also conducting an extensive survey in the region, some preliminary findings of which have been cited in this paper.

Darbar Mahila Samanvaya Committee (DMSC), Kolkota²⁴, West Bengal, India: This sex worker organisation, with a wide membership base in the red light areas of Kolkota, is bringing its experience in the prevention of trafficking to bear on improving conditions of sex work, the repatriation of girls who are rescued from trafficking, and the care and support of those who are HIV positive.

Nepal

Maiti Nepal, Kathmandu, carries out prevention work in Chitwan, Sindhupalchowk and Sunsari and has a rehabilitation programme for returnees, based in Kathmandu. Maiti also has a centre in Mumbai, which facilitates rescue and repatriation work, and a home for HIV positive women and girls.

Women's Rehabilitation Centre (WOREC), Kathmandu, engages in activities designed to prevent trafficking and HIV/AIDS, and facilitates safer migration. Programmes are under way in the districts of Morang, Dhanusha, Sindhuli, Makawanpur, Sindhupalchowk, Nuwakot and Nawalparasi

²³ Formerly known as Bombay

²⁴ Formerly known as Calcutta