

The tide can not be turned without us

Cheryl Overs

The following is a brief summary of points made in a plenary presentation at the International AIDS Conference held in Washington DC in July 2012.

For sex workers, AIDS 2012 is very different from previous International AIDS Conferences, because of US immigration law that prohibits sex workers from entering the US and the Sex Workers' Freedom Festival in Kolkata it created. The publicity about sex workers' rights generated worldwide and the support within the HIV community are historic.

The conference is also historic because it takes place at the dawn of the new era of prevention. Recent scientific developments in anti-retroviral-based microbicides, pre-exposure prophylaxis and HIV treatment as prevention have been rightly described by Michel Sidibe of UNAIDS as 'game-changing'. The optimism about them at the conference is palpable. The message is clear: these products can end the global HIV pandemic.

But alongside that hope there is tension between those who want to shift resources away from education and community responses to biomedical approaches and those who are concerned that scientific advances may be wasted when people are denied access to services or cannot access them safely. Although these new medications and technologies are touted as female-controlled, some of us question whether any product or medicine can change power balances, including between sex workers and clients.

The risks to sex workers of all genders will be enormous if condoms are replaced in commercial sex by HIV-prevention methods that are only partially effective: they do not protect against unwanted pregnancies or sexually transmitted infections, which now include incurable gonorrhoea.

It is good to talk about an extra tool in the prevention toolkit, but the fact that sex workers will still have to get clients to use condoms raises serious concerns. Sex workers know their clients, and they know there will be increased demand for sex without a condom. Clients in Internet chat rooms are already talking about the 'liberation from rubber' that the 'pill for HIV' will bring. Sex workers also understand that they work in an

industry where market forces and workplace practices determine what happens – not negotiations between individuals. They also know that just as it was for the 'old' HIV-prevention methods, the cost and responsibility for using the new methods will fall on them, not on their clients.

When peer educators hear about new prevention technologies, they immediately realise that they will have to learn and share new and very complex information, including with clients, who have consistently proven to be a hard-to-teach population. HIV testing is more important than ever, because anti-retrovirals (ARVs), as either treatment or prevention, can only be used by people who already know their own HIV status.

But for sex workers, taking the HIV test continues to carry potential for discrimination, violence, lack of access to treatment and loss of livelihood. Instant HIV tests may be seen as a solution by some, but the possibility of on-the-spot testing of sex workers on the street, in the brothel or in the police station raises predictable threats to both human rights and public health. Sex workers cannot expect confidential HIV test results, especially if they are tested at work or while under arrest or some other kind of pressure. Results showing workers are HIV-positive can and do lead to criminal prosecutions, and positive results are often shared with brothel owners, authorities and even the public. It is therefore not unreasonable to worry that HIV testing and medical prevention could be thrust on sex workers or that health services would be provided only to sex workers who agree to take the test.

Law and policy will be key factors in the success or failure of new prevention technologies. Much has been written about the human-rights abuses caused by 'raids and rescues' and the impact of anti-trafficking laws on sex workers. But even without actual raids and arrests, criminal law shapes the sex industry. The HIV industry is very fond of talking about the need for a legal framework that enables female sex workers to be found by 'prevention services'. But this is folly while the law treats large numbers of sex workers as non-people and creates inherently dangerous workplaces that cannot be made safe



Cheryl Overs at IAC 2012, © IAS/Steve Shapiro/作者参加2012年世界艾滋病大会

by any pill, gadget or service. The main point I want to add to the discussion of law is:

We don't need a legal framework that aims to get prevention services to sex workers in dangerous places. We need law that gets commercial sex out of dangerous places and into safe ones.

For decades sex workers have been saying that the way to do that is to make sex work fully legal and govern it with the same mix of labour regulations and criminal law that applies to other workers and businesses. The inventor of the term sex work, Carol Leigh, is here at the conference, which is a great reminder that the change of language from prostitute to sex worker illuminated the path to the solution: accepting sex work as work. Recently the Global Commission on HIV and the Law agreed, calling for full decriminalisation of sex work, including sex businesses. The International Labour Organisation has at this conference affirmed its support for sex workers' labour rights.

I am convinced that this is the moment to take the discussion on sex workers' rights forward, to put the oppressive and often irrelevant model of public health behind us and to move forward with a strong labour-rights agenda that carries the potential not just to reduce HIV but to make sex work safe in every way.

About the author

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Note

Powerpoint of Overs's full IAC presentation: <http://pag.aids2012.org/session.aspx?s=677#2>

没有我们，艾滋病疫情无法扭转

Cheryl Overs

2012年7月，在华盛顿召开世界艾滋病大会。以下是我在大会开幕式上发言的摘要。

对于性工作者来说，2012年的世界艾滋病大会和之前的大会非常不同。因为美国的移民法禁止性工作者入境，因此活动家们转而在加尔各答开展“性工作者自由节”。世界范围内关于性工作者权利的公开讨论，以及艾滋病社区对我们的支持，是前所未有的。

这次会议是历史性的，也因为在其召开之时，新预防时代的曙光即将来临。以抗病毒为基础的杀菌剂、暴露前预防，以及将治疗作为预防等科学技术的新发展，被联合国艾滋病规划署的迈克尔·西迪贝形象地称为“改变了游戏规则”。会议上的乐观情绪显而易见。所传达的信息非常明确：这些产品可以结束全球的艾滋病时代。

但是伴随着这些希望，同时也有紧张的情绪。一些人希望把资源从教育和社区应对转而投向生物医学。而另一些人则担心如果被拒绝获得服务，或者不能安全地获得服务，人们就无法从科学的发展中受益。尽管这些新的药物和技术被吹捧为由女性进行控制，但有人质疑是否有任何产品能够改变已有的权力的架构，包括在性工作者和顾客之间。

如果安全套被替换成只会部分有效的艾滋病预防方式，那么对所有性别的性

工作者的影响将是巨大的：这些艾滋病预防方法并不能防止意外怀孕或性传播疾病，包括现在早就可以治愈的淋病。

更多的预防工具出现，让人们有更多选择，这是好事。但性工作者仍然需要说服顾客使用安全套的事实让人感到担忧。性工作者了解他们的顾客，而且他们知道，对无保护性行为的需求会增加。在网络聊天室里，人们已经在讨论“艾滋病药丸”（指新的艾滋病预防技术）将带来“从橡胶中解放出来”（指安全套）。性工作者也明白，在他们所处的产业，深受到市场力量和工作场所规则的影响，个人之间的谈判并不能决定游戏规则。性工作者也知道，和“旧”的艾滋病预防方法一样，使用这些新方法的费用和责任都要落在他们身上，而非顾客。

当同伴教育员听到新的预防技术，他们立刻意识到，他们将不得不学习和分享这些崭新的复杂的信息，特别是针对顾客群体。顾客一直被证明是一个很难覆盖的人群。艾滋病检测比以往任何时候都更重要，因为抗病毒药物治疗，无论是作为治疗或是预防，都只能被那些已经知道自己艾滋病感染状况的人所使用。

但对于性工作者来说，进行艾滋病检测，仍然要冒着歧视、暴力、缺乏治疗和失去生计的风险。即使艾滋病检测可能被一些人看作是解决问题的方案，但在街头、妓院或者警察局对性工作者进行现场检测，我们能够预见到这样做可



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能带来的人权和公共卫生威胁。性工作者无法奢望获得保密的艾滋病检测结果，特别是如果他们是在工作场所或者被逮捕时，或在某些压力之下进行艾滋病检测。一些研究结果表明，艾滋病阳性的性工作者可能遭到刑事指控，而阳性的检测结果通常会被告知妓院老板、当局、甚至是公众。因此，我们的担心是不无道理的：艾滋病检测和医疗预防的责任往往会加诸于性工作者身上，或者医疗服务只会提供给那些愿意接受检测的性工作者。

新预防技术是成功或失败，法律和政策将会是关键因素。关于“搜查和拯救”行动所引起的人权侵害，以及反人口贩卖法对性工作者的影响，已经有很多论述。但就算没有突然搜查和逮捕，刑事法律也塑造着性行业。在艾滋病领域人们很喜欢讨论让“预防服务提供者”能够找到性工作者。但是这是愚蠢的，如果法律针对大量的性工作者，不把他们当做人，导致工作场所内部变得很危险，那么任何药丸、工具或服务都不能使这些场所变得安全。我关于法律的主要观点是：

我们并不需要一个能够让性工作者在危险的地方获得预防服务的法律框架。我们需要的法律，是能够把性产业从危险的地方拉出来，安置到安全的地方去。

几十年来，性工作者一直在说，要达到这个目的，就要让性工作完全合法，用劳动法规和适用于其他劳动者的刑事法规来管理性行业。发明性工作一词的人，卡萝·蕾，也在这个会议上。从卖淫到性工作，用词的改变提醒着我们解决问题的方法就在眼前：承认性工作是工作。最近，全球艾滋病和法律委员会呼吁性工作的完全去刑事化。国际劳工组织也在这个会议上重申其对性工作者劳动权利的支持。

我相信，是时候推动关于性工作者权利的讨论进一步往前。把惩罚性的公共卫生模式抛在脑后，关注劳工权利。我们不只是要降低艾滋病毒的传播，而是要让性工作在任何一个地方都安全。

Many sex workers and drug users were excluded from IAC 2012 in Washington by US immigration restrictions.
Photo PJ Starr

因为美国的入境限制，很多性工作者和吸毒者无法参加2012年的华盛顿世界艾滋病大会。



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在世界艾滋病大会上的发言全文（幻灯片）：
<http://pag.aids2012.org/session.aspx?s=677#2>