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Sex Workers: Modes Of Transmission
For Public Information On AIDS

By

Howie G Severino
SEX WORKERS: MODES OF TRANSMISSION FOR PUBLIC INFORMATION ON AIDS

By HOWIE G. SEVERINO
Philippine Center for Investigative Journalism

Thank you for inviting me to this important forum. Although back home I cover mostly the environment, AIDS recently has been on my mind.

I just came last week from the 10th annual international conference on AIDS and STDs in Yokohama, where I was one of over 12,000 participants. Before anything else, I'd like to report to you that there were no reported breakthroughs in the scientific search for a cure for AIDS or a vaccine against the HIV virus.

So still the most effective response to this disease is preventive education -- through counselling, schools, peer educators, ... and through mass media. There was much disagreement in Yokohama about policies and approaches, but everyone was in agreement that this disease is going to kill millions of people in Asia and decimate our societies' most productive generation if we don't educate everyone about this disease... and we have to do it now.

It is obvious that the role of mass media in this effort is vital. This meeting is significant because Southeast Asia is a growth area for HIV infection, and governments have barely come to grips with an epidemic which in some countries in the region is still in its early stages. Asia is relatively fortunate because we can learn from the tragic lessons of Africa, North and Latin America, Australia, and Europe where the disease struck first, and has already killed many people in the prime of their lives. But as experts at the AIDS conference reminded us, this window of opportunity is small and is closing very quickly.

Mass media in our region must make sure that those lessons from other countries are not lost on our audiences. One could argue that with mass education the only effective response to AIDS, journalists today are even more important than doctors in subduing this threat. Countless lives are in our hands.

However, we must also be careful that with so much information and excitement about AIDS coming from the industrialized world, we do not play up the importance of AIDS in our societies without compromising the importance of fighting other diseases threatening our publics.

My task today is to talk about the links between sex workers (or prostitutes) and AIDS, how media in my country has covered this issue, and what the rest of us in this room could learn from the Philippines' rather unique experience.

I must caution that I am not an expert on this issue. But I do bring to this topic the perspective of someone who has been involved with this disease in different ways. I was a government health official during the early years of the HIV infection in my country when the government was still groping for a policy. I am a former newspaper reporter who wrote about health and did occasional articles about AIDS, and I am now an investigative journalist who has also been recently appointed editor of the
Asia-Pacific edition of AIDS Action, an international newsletter on AIDS that serves primarily health workers in developing countries.

So although I am not a specialist, I do know enough to say that perhaps nowhere else in Asia except for Thailand has AIDS been more strongly associated with sex workers in the public mind than in the Philippines.

There are inherent dangers in this of course. The danger to sex workers is that as an already poor and marginalized group, they will be discriminated against and deprived of their rights even more, even while society offers few alternative livelihoods for them. Without respect of their rights, sex workers will have less access to public services such as health and become even more vulnerable to threats like AIDS. With increasing infection rates among sex workers, they endanger their clientele as well, and indirectly, the spouses and sex partners of their customers.

But another danger affects the wider population. And that is, people may think that if they do not patronize local prostitutes, they are safe from this disease. Well, I have news for them: the virus lives in the general population. Filipinos, like many other Asians, travel a lot, for work and for pleasure. And they are bringing home the HIV virus, and giving it to their husbands and wives, boyfriends and girlfriends, and other sex partners. These people in turn are giving it to others and so on down the line, most of them thinking they are safe because they did not have sex with a prostitute. In this epidemic, no one is immune, and complacency can be fatal.

So why is AIDS in my country identified primarily with sex workers?

For those familiar with how infection occurs, it seems reasonable to assume that those who are most at risk are those who have multiple sex partners. Prostitutes immediately come to mind.

But I believe the answer is also partly political. It is related to our colonial background, and the early effort to protect Filipino sex workers from infection.

I think it also has something to do with Philippine mass media's tendency to blow statistics out of proportion, sensationalize events, distort facts, focus on the negative, and report simply what is obvious and easy to report.

Like in most other places in the world, prostitution in my country is one of the oldest professions. But as in Thailand, the ranks of the professionals grew exponentially with the Vietnam War. When the war over, the professionals marketed their services to tourists. The difference though between Thailand and the Philippines is that the US soldiers did not leave after the war. We had two huge military bases in the Philippines for more than 70 years, until 1992. US soldiers were loyal customers of the Filipino sex industry. When the Pacific Fleet docked in Subic for rest and recreation, as many as 20,000 lonely men invaded the bars of Olongapo. They were not there simply to sample San Miguel beer.

The US military takes care of its own, so for many years it supported a network of clinics around the bases for sexually
transmitted diseases, or STDs, with a condom distribution program. These clinics were assisted by the US not so much for the good of Filipino women, but to keep their men healthy and fit for combat.

So it was just logical that when the first AIDS test became available in 1985, US military men and the sex workers who serviced them became among the first population groups anywhere in the world to be systematically tested for HIV infections. This was not only to protect US soldiers from a debilitating disease. In time of war, soldiers become walking blood banks, and this blood had to stay clean.

The US military kept its data on infection rates among US soldiers top secret. If disclosed, the information might have revealed that HIV prevalence among them reflected the skyrocketing infection rates then among certain groups in the United States.

But the prevalence rates among Filipino sex workers was not kept secret. In the mid to late 80s, there was much confusion among governments in Asia about how to handle the AIDS issue. Many at that time preferred to keep figures gathered from limited HIV testing secret, to avoid the negative impact on tourism. But the Philippine government decided early on that it would be worse not to disclose information on a disease which still did not have a cure or vaccine. It adopted an open policy about information, with the hope that it would help warn the public about the dangers of infection.

However, since the only systematic testing being done among Filipinos was among prostitutes, the data reported by the government only included new infections among sex workers. The media dutifully sensationalized this information. But in the early years, prevalence was still at a relatively manageable 1 HIV positive case per 1000 tested.

This still allowed some humane measures such as the employment of infected sex workers in government jobs so they would not be forced to do sex work and spread the virus. But in hindsight, this regular disclosure in the media of new infections among sex workers appears to have helped cement the impression in the public mind that the only infections occurring were among those in the flesh trade.

Mass media in the Philippines gave heavy coverage to infected sex workers, and especially to those few who eventually developed AIDS and died. Media explored many angles: there were stories about how infected sex workers disappeared into the general population, and how infected prostitutes were servicing inmates in a national prison.

These helped fuel a growing public paranoia that all sex workers carried the HIV and all HIV carriers were sex workers, even though the first documented cases of full-blown AIDS in the Philippines were either foreign men or US-based Filipino males who came home to die.

But another highly charged issue helped link AIDS with sex workers. The early stage of the epidemic in the Philippines coincided with the height of protests against the US military bases in the Philippines, when anti-bases advocates would seize
any issue they could as an argument against extending the presence of the US military bases in the Philippines.

These advocates were quick to add AIDS to their long list of social problems which were linked to the presence of US soldiers on Philippine soil. The rising infection rates among sex workers were their strongest evidence.

AIDS and HIV by themselves were grist enough for the sensationalist media. Add the bases factor and the media barrage by anti-bases advocates, and there was always something that media could report linking AIDS and sex workers.

The effect of this linkage between AIDS and sex workers is a two-sided coin. On the one hand, the issue was a vehicle for informing the public about the disease. Eventually some reporters did tell the public that there was a difference between HIV and AIDS, a distinction that has always been confused, and that unsafe sex was the principal means of getting the virus.

But on the other hand, this coverage did mislead many to think that the virus only circulated among sex workers, and that it was mostly foreigners who gave it to them. Discrimination intensified: one infected sex worker was shunned from her hometown when she tried to return. Bars and massage parlors would be raided, and women rounded up, their arrests covered by television cameras. The main effect of this was often to drive sex workers underground where it was harder to test and monitor them.

Public fear of infections made it easy for some simple-minded but influential people to suggest that all HIV positive people be quarantined. Immigration authorities for a while had a policy that would test all foreigners coming into the country, a policy deemed ineffective and expensive by the World Health Organization. Most of all, many people thought that once the bases were gone, the danger of AIDS would go back to America as well.

Now the US bases are gone, infected sex workers having played an unwitting role in the lobbying against their presence. Much of the public knows by now that the AIDS virus is in the Philippines to stay, and certain kinds of behavior can put one at risk. But AIDS is still primarily identified with sex workers. Testing is still done mainly among prostitutes; many of those working in massage parlors cannot work without health certificates declaring they are free from STDs, including HIV. Test results are still published, but media does not give them as much attention.

Instead, media in my country has personalized the HIV/AIDS epidemic. At least three former sex workers have come forward to talk publicly about their plight, and became melodramatic media stories overnight. One died and a movie about her life became a box-office hit. Another, Sara Jane Salazar, is alive, has not yet developed AIDS, and has become the country's foremost AIDS educator, talking to large groups of students and television audiences. I interviewed her in Yokohama last week, and she said she was gratified that the attention her illness gave her also enabled her to reach many people with her message to youth: no sex until marriage, but if they can't help it, use condoms.
But her former profession also continues to haunt her. Some in the Japanese media reported falsely that she was going to Japan to return to prostitution, and her arrival for the conference caused a large commotion in the airport.

Nevertheless, her prominent role now in our society, which still has a chance of averting a major AIDS catastrophe, is casting a different image for sex workers. Previously seen merely as a victim of poverty and the HIV virus, the sex worker has been projected by Sara Jane and others as brave, determined and concerned about the public’s welfare.

Today, AIDS awareness is very high in the Philippines, although much misunderstanding persists about how the virus is spread. Sex workers, unwittingly or not, have been partly responsible for this awareness.

But I have two concerns: the first I mentioned before, which is that perhaps media is not doing enough to inform the public that ordinary people are at risk. The ones in danger are not simply prostitutes and their customers.

The second concern goes beyond AIDS and sex workers, and perhaps touches a dilemma facing many developing countries. That is, this tremendous public and media attention that AIDS is causing may also be creating public pressure to divert precious government resources to AIDS prevention at the expense of efforts to contain other, more prevalent diseases such as malaria, tuberculosis, cholera, and many other third world ailments, which do not appear in media even a fraction as often. But while less than 50 Filipinos are known to have died of AIDS in the Philippines, tuberculosis for example kills 23,000 Filipinos a year.

I have heard AIDS activists say that resources invested in prevention today will save many more lives in the future. But the same can be said of other diseases. So it is a matter of tradeoffs. I believe it is up to journalists to carefully weigh these tradeoffs, and give valuable space and time in their media according to what they think are the most important issues affecting their populations. While in places like the United States, AIDS is already one of the leading killers of certain segments of the population, in the developing world, AIDS is not the only threat to public health.

As media practitioners, we have a responsibility to inform our audiences about AIDS in as objective and sober a way as possible. But we have the same responsibility to do the same for other threats to the health and safety of our publics.

The sensationalism surrounding the links between AIDS and sex workers may make AIDS seem like the greatest problem affecting our societies. That may very well be. Or it may only be the most sensational.