BEYOND THE MANUSCRIPT

Podcast Interview Transcript

Valencia Remple, Soni Thindal, Monique Tello

In each volume of *Progress in Community Health Partnerships: Research, Education, and Action*, the editors select one article for our Beyond the Manuscript podcast interview with the authors. Beyond the Manuscript provides authors with the opportunity to tell listeners what they would want to know about the project beyond what went into the final manuscript. Beyond the Manuscript podcasts are available for download on the journal's website (http://www.press-dev.jhu.edu/journals/ progress_in_community_health_partnerships/multimedia.html). This Beyond the Manuscript podcast is with Valencia Remple of the British Columbia Center for Disease Control and lead author of, "Conducting HIV, AIDS Research with Indoor Commercial Sex Workers Reaching a Hidden Population," and Soni Thindal, program coordinator for Project ORCHID of the Asian Society for the Intervention of AIDS in Vancouver, British Columbia. Monique Tello, Associate Editor and Senior Clinical Fellow at The Johns Hopkins University School of Medicine, conducted the interview. The following is an edited transcript of the Beyond the Manuscript podcast.

Monique Tello:

We loved this project! We were very enthusiastic when we heard about it. Can you provide a brief summary of the project?

Valencia Remple:

Yes, Monique. I can do that. This was a huge project. When I started working with [the Asian Society for the Intervention of AIDS] ASIA, the community-based organization, we found that indoor commercial sex workers comprise about 80% of the indoor sex industry in Canada. Despite them being the largest segment, they're completely underrepresented in research, ignored by health services, educational services, etc, because I think nobody knows what the risk environment is and they're extremely hard to access. So, we actually had a twofold purpose for this project. From the research perspective, we wanted to explore the HIV and [sexually transmitted disease] STD risk environment of this population because nothing was known about it. I think most research on commercial sex workers is done with street-based women and men. We felt that the indoor environment was probably very different. The further purpose of this two-arm project. was to develop a model to gain access to, and to deliver HIV and STD health education and prevention services.

The research results that we found to date and there are many so I'll try to keep it brief. We're finding that condom use, one of the safer sex practices within the community, is pretty good. They're quite high overall. The women who work inside tend to have pretty high knowledge about HIV acquisition risks and transmission. They generally know how to use condoms appropriately and they claim to do so. But their knowledge about STDs is actually pretty low.

What's concerning to us, however, is that they're fairly knowledgeable and they're practicing safer sex behaviors, but we're starting to find that there seem to be subgroups within the indoor sex community, such as immigrant women, recent immigrants, women from certain ethnic or racial or cultural groups, that have never heard of HIV or other STDs. They really know nothing about it. They know nothing about protecting themselves. We're starting to hypothesize that their risk 169

	environment may depend on quite a wide variety of factors such as the cultural context, what country of origin they come from, and different sex establishments as well. There's contextual differences there, for example, the house rules; what the management policies are. We're just now starting to explore some of these contextual factors that would influence decision making or risk practices.
Monique Tello:	That's wonderful. Now this specific project seems to have started from a pilot project by ASIA, the Asian Society for the Intervention of AIDS. Maybe Soni could tell us a little bit about that project that led into this larger project?
Soni Thindal:	That project was the pilot project conducted with a group of women from the Philippines. It was a pilot project that was about connecting with women who were immigrating from the Philippines. So we connected with organizations there, and it was connecting them with services. The trouble was what was happening to them once they came to Vancouver. A lot of the women were not necessarily working in massage parlors on the street, but would be maybe soliciting sex in a bar, and that kind of thing.
	The pilot project was a bit before my time, so maybe Valencia you could speak a bit more to that.
Monique Tello:	Yes. I'm just trying to get at how you started working with this very hidden population that for many reasons is a difficult population to access. There are a lot of challenges associated with developing trust and gaining access—
Soni Thindal:	Yes, definitely—
Monique Tello:	So I'm interested in hearing about how this all started. What were the challenges, and how did you overcome them?
Valencia Remple:	Well, some of the main findings from the pilot project actually created the impetus for us to move on to the ORCHID Project, one overall finding was that immigrant women, primarily from Asian countries, were finding themselves in indoor sex work, like Soni said. Sometimes they worked privately or used more informal means, but a lot of them were also in escort agencies, massage parlors, or these unlicensed brothels. I should tell you it was not a particularly systematic research project. It was conducted by a group of peers within this commercial sex experience. They had a sort of instrument, a questionnaire, but it was really very exploratory.
	Again, the overall finding was that there is a very large community of indoor sex workers. There's a lot of immigrant women and Asian immigrant women represented in these communities and there is a perceived need here. So, partnering with ASIA, with an academic partner, which is what I represent, seemed like the obvious next step to marry sort of novel methods of gaining access, developing trust, and delivering services and education to this population while at the same time conducting systematic rigorous data collection so that we could really get a good look at the context and other factors.
Soni Thindal:	Speak to a little bit of the Challenges that we've had.
Monique Tello:	That would be wonderful.
Soni Thindal:	Okay. Many of the parties in Vancouver are actually legal businesses, but obviously are not licensed for sex work. So, naturally the owners or the managers were reluctant to talk openly about what goes on in their establishment. They were quite suspect of why we were on their doorstep. To alleviate

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those concerns, we provided written materials explaining the work of ORCHID, in their respective language. The materials also ensure that our outreaching has the language capacity of the parlor we're going to. Also, the outreach team members wear a uniform and it consists of a black T-shirt with a printed ORCHID logo. Therefore, whoever opens the door at the parlor, they realize it is the ORCHID Project as opposed to establishing rapport with just those individuals. Another really important thing when you build relationships is to be really transparent and be honest about the work we do. We clearly articulated that we were from a community organization, and we were not connected with law enforcement or city licensing or anything like that. Basically whatever questions they posed us, we answered honestly. As in any relationship, it's about building that trust.

 Monique Tello:
 That is very important. You mentioned that during the community needs assessment, some people expressed concern that the indoor female sex workers could be exploited or stigmatized by the study. It sounds like you went to great lengths to make people feel comfortable, and recognize you. But how did people end up feeling about the way the study was conducted and the results of the study at the end?

Valencia Remple:Well we spent almost a year in establishing the plan and about 4 months actually conducting the com-
munity consultation. There was very little overt resistance. I would say that pretty much everybody
we talked to was at most wary. And with good reason. As the academic representative, I had no
credibility whatsoever in the community. However, the community team leader, Caitlin Johnston,
who's the second author on this paper, had about 10 years of experience with street-based commercial
sex workers as well as injection drug use in communities. She's very well known and respected in
that community.

Some of the community-based organizations that work, with the prostitutes, were very wary. You know some researchers have been guilty of just sort of parachuting in, collecting their data, providing stipends, and then running away with their data and publishing. They were concerned that people like myself, and other academic partners, could be perceived as building a career on the backs of the vulnerable communities. Even some of the service providers that were already doing some services within the community, they were generally supportive in theory, but they did express concerns that we not exploit and introduce harm by publishing or presenting information about this community. We were very concerned about that as well. And we remain concerned. It seemed like there was this culture of protectiveness among community-based organizations and that is specific to commercial sex workers in particular, with a feeling of protecting this population from outsiders. We actually now feel that way as well.

In terms of how things have gone, ORCHID has been in progress now for about 2½ years. I'm going to ask Soni to comment on this, as well. But I would say that so far, so good. I don't think we've had really any negative feedback since we started going. I think the credibility of the ORCHID Project, of the team members, has become extremely, extremely strong. It has been virtually no resistance from the indoor commercial sex population itself other than the initial wariness. There have been some places that have not let our teams in, they just closed the door. No, don't come back. But that has not been the norm. Usually it would take several visits, but they're willing to trust. As Soni said, she did a lot of work, and the other teams did a lot of work spending hours and hours of time developing these relationships. They do just such a wonderful job.

I really think that in terms of other community-based organizations and other service providers, we are very transparent. We've done this as well, and that's very important to feed the information back to the broader community, which includes organizations. We send out newsletters every 6 months. We invite them to comment. We invite their questions. We had a large community consultation this past spring. We're going to repeat that on an annual basis, where we invite all comers to come and we present our research findings. We present any challenges. We solicit feedback and input. We ask them, you know we're planning on publishing that, what do you see as potential pitfalls to doing that? So, we ask for their advice. And we listen to it.

There have been some things that we had initially planned in the research that met incredible resistance from members of the community, particularly members of the original peer pilot group, the women that conducted the study, we originally, well I originally wanted to dive in and do HIV and STD testing on everybody to get a sense for the prevalence and associated risk factors, but they were very much opposed to that. Somebody said to me that doing something like that, so early in the game, before you had any trust and credibility, was sort of like asking for sex on the first date. However, we are now starting to do that, and it has become very well received by the community. So, I think it's really a matter of timing and being really open, transparent, and communicative, not only with the private population, but with the broader community. I think that's critical.

 Monique Tello:
 That leads me into this last question. Do you think that the work, the results that came out of this project, were seen as valuable by most academics as well as community partners involved with the projects?

Valencia Remple: Soni, do you want to talk about the community? Some of the results that we sent back to them—

Soni Thindal:Sure, as Valencia previously mentioned, one of the issues with our project, some of the criticisms
kind of subsided a little bit, once people were understanding the actual project, and once people
understood how strongly we believe in self-determination by the women. A lot of the concerns
have lessened. We really let women determine the level of support they needed from our project.
For example, if somebody required assistance in going to a clinic, that didn't necessarily mean
accompanying them. That could just mean giving somebody the phone number to call the clinic.
One of the things we discovered in this project is the level of support we provide really, really varies.
It could be about just answering a couple of phone calls during the day, or it can be a bit more in
depth; sometimes calls involved transferring someone to an appointment that they have for their
lawyer or immigration. So, the results from the service delivery have been really varied.

Valencia Remple:From the research perspective, and I think this is also part of your question, we're just now starting
to submit manuscripts for publication. We have presented research findings at quite a few inter-
national and national conferences, and they're extremely well received. Like I mentioned earlier,
there's virtually nothing known about this segment of the sex worker population in Canada, and I
suspect the United States as well. There has been work in New Zealand and Australia, but you know
the context varies from country to country. There has been a lot of very keen interest, and I think
some concrete evidence of that is that based on our findings, we've been able to secure substantial
ongoing funding from one of the larger research grant organizations in Canada because they actually
acknowledge that there is a need to explore this community in greater depth.

	For the target population, it's interesting. We tried to feedback the results in more of an informal way on an ongoing basis, and I think there is an example of this in the manuscript. There's a couple of the managers at some of the places we go that are very interested in the knowledge level of the staff. Of course we reiterate that we must keep certain information confidential, but we do provide them with summaries in tabular form that here's the area of weakness in terms of knowledge. The women have very strong HIV knowledge, and the condom use knowledge is very good. There are a few issues around STDs that on the whole they seem to be lacking, and we make recommendations for them, conducting their own education within their establishments. Some of the managers actually do that. That is received very positively. The management, in particular, are very supportive in the places that we're doing interviewing. I didn't expect that. But, it's a really pleasant surprise from my perspective.
Monique Tello:	Just very briefly, because we do have to wrap up, do you plan on continuing the program or do you know some similar program?
Soni Thindal:	We feel really strongly about the work we do, and I think our success with the project proves there are needs for a program like this. I really thing it's just about access and funding basically.
Valencia Remple:	Yes we do have plans to continue. We have 3 years of funding at present for the research. But we are constantly on the lookout for additional funding sources. It really is about money to keep the program sustainable in the long run. So, I think the short answer is, yes. We absolutely do plan to sustain it.
Monique Tello:	With the current partnership?
Valencia Remple:	Yes.
Soni Thindal:	Absolutely, yes.
Monique Tello:	Wonderful. Well, I think that's all the time we have. Again, this was a unique methodology to conduct some incredibly needed and important research with a difficult to reach population, and we were fascinated with this article. We wish you continued success with your work.