

## **PARTICIPATORY RESEARCH AND ACTION: SHARING CHALLENGES FROM CAMBODIA**

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### **INTRODUCTION**

This paper presents the use of integrated research methods in a participatory community mobilisation project among debt-bonded, young migrant sex workers in Phnom Penh, Cambodia. The study, conducted by the Population Council/Horizons Project, aimed to empower the local sex worker community to enhance solidarity, identify shared concerns and plan appropriate responses to improve their living and working conditions.

We faced serious challenges on two fronts: (1) the project context was characterised by instability, strict constraints, and hostility to “outsiders” and (2) we discovered there were certain inherent contradictions within our integrated research model. A significant focus of the project became negotiating these challenges, making compromises within the study design, and attempting to maintain our commitment to the principles of participation while ensuring rigorous research.

Combining quantitative methods and a wider participatory framework led to considerable understanding of the sex workers’ lives, needs, and desires; ultimately, however, it resulted in recognising that our participatory approach suffered severe limitations in an environment of such powerlessness. The study highlights potential dilemmas in participatory action research, particularly when paired with traditional, quantitative methods of monitoring and evaluation that do not necessarily spring from the same development agenda.

### **PARTICIPATORY APPROACHES: SERVING DUAL ROLES**

Participatory approaches (PRA)<sup>1</sup> already demonstrate integration of methods, as they purposively combine research with action. In the last few decades, a paradigm shift within development has occurred, prioritising redistribution of ownership from large, powerful players to grassroots communities. The concept of *participation* has served as its primary theoretical underpinning. (Cornwall and Jewkes 1995; Zimmerman et al. 1997). Although the interactions between individual empowerment, community mobilisation, and active participation in learning, analysis and decision-making are not well understood, a triangulating relationship does appear to exist (Parker 1996; Campbell and Mzaidume 2001; Speer et al. 2001). Numerous studies indicate that in combination, these appear to produce enhanced self-efficacy, critical thinking, social capital, and cohesive networks, which in turn contribute to an enabling environment for change and reduced social vulnerability (Kalichman and Hospers 1997; Beeker et al. 1998).

The implications of looking through this new lens for the implementation of development programmes have been dramatic. In a wide range of sectors, the call to learn from “indigenous technical expertise” has led to the identification of increasingly appropriate, effective and above all sustainable interventions (Chambers 1994). Development agencies have widely adopted participatory tools, which emphasise group discussions, interactive activities, and visual presentation of findings.

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<sup>1</sup> Participatory approaches now have a nomenclature of their own and include a wide range of classifications such as: Participatory Action Research, Participatory Rural Appraisal, Participatory Learning & Action, etc. For the purposes of this paper, I use Participatory Research & Action (PRA) to refer to all participatory approaches, to focus on the fact that they are used in development for both practice and investigation.

In academic or other institutions concerned with research, participatory approaches have also gained support and credibility (Cornwall and Jewkes 1995; Kesby 2000). Results are open-ended and allow for even greater iterative analysis and reflection than much data from other qualitative methods such as in-depth interviews and focus-group discussions, which often inadvertently restrict exploration through detailed topic guidelines. Proponents of PRA embrace its insistence that a practical, locally-driven application of findings should remain in the foreground. At the same time, there has been recognition that through selection of topics of interest, identification of “sample populations” and ultimate responsibility for analysis and publication, researchers almost always retain a degree of control. Although the philosophy of participation stipulates that communities serve not as passive subjects but rather take a leading role in the research process, in practice, researchers’ interests, funding restrictions, and need for valid and reliable results do not always dovetail with the community’s objectives.

### **PRA AND SEX WORKERS**

We designed our participatory intervention against a rich backdrop of evidence demonstrating that community mobilisation successfully reduces sex workers’ vulnerability to HIV/AIDS. Addressing sex workers’ concerns and focusing on building their self-esteem, life skills, and solidarity have shown impressive impact on behaviour change and infection rates (NSWP 1997; Evans 1999).

In Asia, Thailand, Bangladesh, India, and Papua New Guinea have documented programmes for sex workers based on empowerment and community building that have helped improve sex worker control over working conditions and ability to negotiate safer sex with clients (Ford and Koetsawang 1999; UNAIDS 2000). Perhaps the most famous example is in the Sonagachi red light district of Calcutta, where several years after committed organising and advocacy by sex workers, regular condom use with clients rose from among 2.7% of women to 81.7%. The community was also able to sustain a host of other services including literacy training, creches, and financial co-operatives (Jana et al. 1998). Participatory group work have been key components of these successful interventions.

### **SVAY PAK, CAMBODIA**

Located on the outskirts of Phnom Penh, the Vietnamese village of Svay Pak has one of Cambodia’s most notorious commercial sex districts. The approximately 300 sex workers who live and work in 22 brothels are economic migrants from southern Vietnam. Most women are younger than 20 and have a few years of education, although some are illiterate. The turn-around in the community is high. New women arrive usually with a family member or other intermediary, and are entrusted to a specific brothel, which pays the family an advance ranging from US \$50 to US \$3000 (Baker et al. 2001). The woman then works in the brothel to pay off her debt, which takes between six months to two years with a weekly average of around 15 clients.

Brothel managers retain strict control over sex workers. Each sex worker is considered to “belong” to her brothel and expected to spend the day waiting for clients, with severe limitations on her mobility. The women require permission to leave the brothel in order to visit shops, beauty parlours, and cafes, or to seek medical attention, and are discouraged from socialising with women from competing brothels out of fear they may defect to a more lucrative establishment:

*We don’t have relationship with sex workers from other brothels. The brothel owners don’t allow us to interact with each other because they are afraid that we may change brothels.*

The women themselves avoid wandering too far from the protection of their brothel, as they are at risk of harassment and arrest from various police authorities, who often rely on bribes, extortion and bail money from raids to supplement their incomes.

Lack of control over working conditions puts the women of Svay Pak at risk of many dangers including HIV/AIDS. Cambodia has had one of Asia's fastest growing epidemics; in 2000 Cambodia's national surveillance programme calculated that one third of all sex workers were HIV infected (National Centre for HIV/AIDS 2000). Although the government has implemented an official 100% condom use policy for sex work, anecdotal evidence demonstrates that women in Svay Pak cannot always insist on safer sex practices.

### **WORKSHOPS AT THE LOTUS CLUB**

As awareness of a burgeoning HIV epidemic grew in the mid-1990's, Medecins Sans Frontières (MSF) opened a clinic in the midst of the brothels. Initially offering only clinical services, the clinic soon added outreach activities, peer education, and counselling services. In 2000, sex workers helped establish the Lotus Club, a social space and drop-in centre located upstairs from the medical services.

At the same time, MSF and the Population Council jointly launched a community development operations research study as part of Horizons, a USAID funded research initiative on HIV. Titled "Building Community Identity among Debt-bonded Sex Workers in Cambodia," the study aimed to strengthen sex workers' sense of community as a first step toward collective action. Although we hoped to reduce barriers between sex workers from different brothels, develop critical thinking skills, and build social networks, the process itself was designed to be open-ended and to encourage sex workers to analyse their own priorities, identify objectives, and choose specific activities for implementation throughout the project. Daily participatory workshops were held, attended by 6-10 women from several brothels at a time, emphasising sharing experiences, learning from one another, recognising common interests, and having fun.

The intervention ran from April 2000 through March 2002, during which time approximately 25 different types of workshops were held, attended by over 300 women. The PRA sessions were extremely popular. The project objectives set by sex workers closely mirrored our own:

*We come here to know each other. ... We are just women here and we have the same job. If we have experiences or something makes us not feel good we can talk together, then we can share on how to solve it*

The Lotus Club has now been handed over to a local NGO working for women's rights in Cambodia. A different local organisation has assumed responsibility for the medical services downstairs.

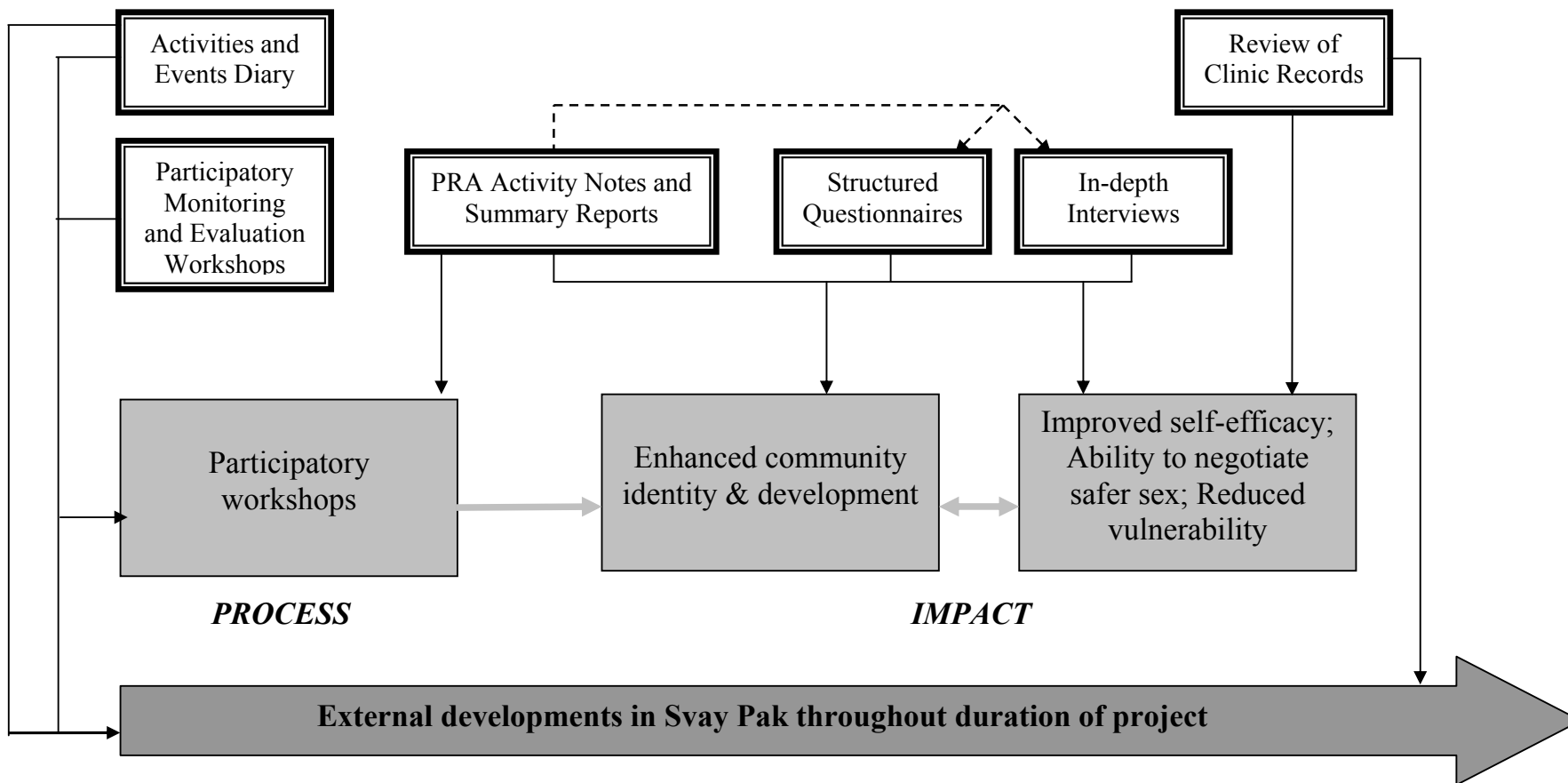
### **RESEARCH METHODOLOGY**

We found we required a relatively complex data collection system, particularly as we did not have a control or comparison population, and circumstances in Svay Pak meant that numerous external factors influenced our project implementation. We needed to include ways of taking account of events such as police crackdowns and consequent brothel closures for several weeks at a time. The data would also need to fit USAID and Horizon's wider research frameworks. We decided to integrate traditional quantitative and qualitative methods into our participatory implementation and evaluation strategy.

Figure 1 illustrates the original monitoring and evaluation framework adopted. The project trajectory at the centre of the diagram illustrates our hypothesis for how the intervention might work to reduce vulnerability in Svay Pak.

**FIG.1: SVAY PAK STUDY MONITORING AND EVALUATION FRAMEWORK**

- White boxes indicate data collection methods used for monitoring and evaluation
- Grey boxes represent the hypothesised project trajectory for the overall intervention
- Dotted lines show how data from PRA tools informed the development of other methods



The PRA activities served primarily to assist sex workers in conducting their own needs assessment and developing small-scale projects. The analysis from group discussions, however, also contributed to overall project evaluation. Throughout the workshops, research assistants noted their observations in open-ended Activity Notes, recording group dynamics, levels of participation, and substantive issues such as topics raised, terminology used, and debates and disagreements. At the end of each activity, the facilitator used a standardised form called a Summary Report to document the group's main conclusions and copy their visual outputs (diagrams, time lines, scoring exercises, etc.) These two tools became central to monitoring changes in both process and impact indicators. A series of special Monitoring and Evaluation Workshops were also conducted for participants to reflect on the intervention process and determine if it was meeting their own objectives.

To support the participatory data and explore issues at the level of individuals, structured questionnaires and in-depth interviews were included in the research design. The PRA activity notes and summary reports informed the development of the survey and interview instruments. We originally scheduled six rounds of the questionnaire and interview, measuring change every three months. We also planned regular reviews of the clinic's medical records to monitor STI incidence. This method was dropped almost immediately due to the inadequacy of the record system, which did not track women over repeat consultations, nor differentiate between those still living in Svay Pak and those who had returned to Vietnam.

Finally, project facilitators kept a daily Activity and Events diary to monitor the broader environment, particularly occurrences that might affect the project such as police raids, religious holidays, or street violence, as well as all project activities taking place each day. The diary demonstrated the interactions between the two, for example when external events such as police raids resulted in loss of access to brothels. Additions to the diary were routinely elicited from sex workers who used a calendar exercise to report significant events.

## **CHALLENGES OF CONTEXT**

Svay Pak proved an extremely difficult location in which to conduct a participatory intervention. The fact that the population experienced rapid change, with women coming and going from Vietnam, weakened programme continuity. Political instability and local violence limited staff's access to brothels. The brothel owners' restrictions on participation meant that the same sex workers might not return to workshops for several months, so our attempts to develop a sense of community identity over time by building on past experience suffered from a lack of "institutional memory."

### ***What is participation?***

Perhaps the most significant challenge, however, was that a central tenet of participation, that of passing ownership to the community, proved inherently problematic in Svay Pak. The sex workers had almost no control over their daily lives, and within debt bondage, symbolically relinquished ownership over themselves. Gaining permission for sex workers to attend our workshops remained a paramount concern. We had evidence that owners sometimes denied sex workers the chance to participate and at other times forced them to attend, possibly to show goodwill and co-operation to the MSF clinic. Spending any time away from the brothel could cause anxiety:

*I don't like to come for too long because I am afraid that the owner is not happy.*

The first struggle, therefore, was identifying whether participation could have any real meaning in this context, and whether it could facilitate an empowering process or would

result in more coercion. Although the first phase of the project worked to enhance participants' capacity to mould the intervention to their own needs, we never fully achieved this goal as even after two years, between one third to one half of workshop participants were new attendees. The lack of freedom among sex workers also raised ethical implications for ensuring genuine informed consent during data collection, a concern that we addressed through specialised workshops on strategic refusal and risk-benefit analysis, and which we have documented elsewhere (Busza et al. 2001).

Individual sex workers could not realistically take a leading role in the project within the set time frame, due to their lack of mobility, poor levels of self-confidence, and the obvious disincentives within Svay Pak to enhancing social networks:

*...sex workers here do not have any solidarity, as the different brothel owners do not let us to talk to each other*

These challenges, found in other projects with sex workers (Campbell and Mzaidume 2001), are not intrinsic to PRA, of course, but do call into question the feasibility of our attempts to create an autonomous, liberating space for sex workers living in such a deeply disempowering context.

### **CHALLENGES OF CONTRADICTION**

In addition to problems specific to Svay Pak, we faced barriers to conducting the planned research components of the project due to inconsistencies within our approach and motivations. Although committed to initiating a participatory process and supporting community action, we also needed to validate our intervention and prove its effects, an objective that did not mirror those of participants. This dilemma fits into wider debates around control by donors, short-term funding, and the dominance of certain research paradigms, but also points to contradictions in combining data collection methods.

#### ***Whose research?***

In the first survey round, six months into the project, of an estimated 309 sex workers living in Svay Pak, we managed to administer the questionnaire to only 171 women. Yet by that time, almost two thirds of sex workers had attended PRA sessions. Disgruntled brothel owners, as well as some sex workers, registered complaints about the survey. Whereas brothel owners were suspicious of our wanting to speak privately with each woman, the sex workers often felt that giving personal information on a one-to-one basis over a questionnaire was boring or a waste of time. They made an effort to gain permission to attend PRA workshops, however, because they enjoyed the social interaction and entertainment offered:

*I like to come because it is fun. [We] have the opportunity to meet new friends from other brothels.*

When asked in monitoring and evaluation sessions about the programme, sex workers focused their complaints on the questionnaires, emphasising that they found the topics invasive:

*I don't like you to interview me. Sometimes it is difficult to answer some questions because it is about my personal information.*

Sharing personal information in the PRA workshops, however, had also caused anxiety among some participants. Yet reluctance to discuss sensitive topics did not seem to limit participation in workshops in the same way that it affected refusal rates for the questionnaire, particularly in the first round. It may be that this justification for resistance masked other motivating factors, including an overall sense that the research agenda was solely *ours*, and not theirs.

On the other hand, questionnaires became the conduit by which sex workers chose small-scale interventions. Various ideas were raised through workshops, but it was difficult to determine which received greatest support as participant sex workers changed from session to session. Administering the questionnaire to as many Svay Pak residents as possible allowed for individual “voting” for activities, and resulted in the implementation of Vietnamese literacy and Chinese classes, and the establishment of a local commercial telephone service. In this instance, the method was able to meaningfully integrate a community development aim into an otherwise extractive process.

In-depth interviews similarly suffered complete disinterest, and very few were conducted. In one case, after a long conversation with a research assistant on the merits of the female condom, a sex worker subsequently regretted her decision to participate out of concern that she had said too much about brothel conditions. She “borrowed” the cassette with her interview recorded on it and vanished. Despite our frustration at losing an interesting case study, the incident served as an explicit reminder that according to our own principles, data should always remain in the hands of the community!

### ***Which role?***

Hired as both research assistants and PRA facilitators, the three project staff found these two roles did not always coincide. A concise example of this relates to how *refusal* was conceptualised throughout the project.

We emphasised *strategic refusal* as a skill, practised through role-plays during special workshops addressing informed consent issues. These were devised not only out of concern for ensuring we obtained genuine participation, but also to encourage sex workers to exercise personal choice whenever possible within their constraints. Being able to refuse situations, and supporting others to do so, emerged as a theme relevant to negotiations with clients, brothel owners, health professionals, and family members.

As researchers, however, staff also tried to maximise their ability to collect information for our indicators. Having established trust and friendship with sex workers and allied themselves with the community mobilisation approach, staff reported feeling awkward convincing women to complete an initially unpopular survey. They pointed out that in conducting our evaluation we were also compromising our belief that sex workers in Svay Pak should resist activities that did not serve their own needs.

### **ADAPTATION AND COMPROMISE**

In response to the challenges of working in Svay Pak, we engaged in an ongoing process of reflection, adaptation, and compromise. First, on a practical level, we adopted a set of strategies for the daily workshops to mitigate against inadvertently exploiting an almost literally “captive audience.” All sessions took place adjacent to a separate “relaxation” space with floor cushions and magazines available for any women who had come on brothel owner instruction rather than out of choice. Sex workers could also rest in this area if they suddenly stopped wanting to participate in a workshop, such as in the case of those who preferred not to discuss personal issues in a group discussion.

Similarly, we muted the standard PRA facilitation style. Unlike in many settings where good facilitation skills include drawing out “silenced voices,” (Pretty et al. 1995) we assumed the choice not to contribute constituted a self-protection strategy, particularly given the many tensions and competitions between women.

Facilitators devoted much of their time to outreach work with brothel owners, creating links, explaining the purpose of the project, and advocating for sex workers to themselves decide whether to attend. A few workshops, such as introduction of the female condom, were conducted within brothels, so that as many women as possible could benefit from this

new technology provided through the MSF clinic. Outreach to brothel owners intensified after their resistance to the first survey round. By the second round, the community was much better prepared for the questionnaires and the survey reached over three fourths of sex workers.

The research assistants also grew more confident over time and felt better able to reconcile their research and community development roles. They were able to explain the purpose of the surveys more clearly and negotiated with sex workers, suggesting that both the community and the researchers could compromise to fulfil all the programme's requirements. In this regard, our compromises on research methodology included reducing frequency of survey rounds from every three months to every five, and dropping in-depth interviews altogether. Analysis is currently underway, and first indications suggest that survey data in combination with information gathered over two years of participatory workshops will adequately evaluate the project.

## **CONCLUSION**

Many PRA practitioners have described a "participation continuum" (Pretty et al. 1995; Platt 1996; Young and Hinton 1996) comprising ascending levels of participation ranging from a passive role, for example, "co-option" through "consultation," "co-operation," and "co-learning" to the epitome, "collective action". Upon reflection, we decided that over the two years, we remained within the lower levels of participation, perhaps achieving "co-operation" at times.

The intervention was firmly dedicated to moving up this hierarchy, although the context of Svay Pak proved almost prohibitively challenging to our efforts. The PRA activities did remain the domain of sex workers and helped lead them to identify additional workshop topics and other services, but could offer little in the way of meaningful empowerment given the presence of other, over-riding constraints.

Our research framework, however, was selected by us as "outsiders" from the beginning. Despite being a combination of methods, the data collection process existed for our own purposes, and thus could never hope to climb above "consultation" at best. This discrepancy probably appeared obvious to participants from the outset. Ironically, although our aim was to validate the participatory approach, attempts to measure its process and impact ultimately weakened its implementation.

Our experience highlights the need for careful consideration of what participation can feasibly hope to achieve in a given context, and for transparency regarding any competing interests and agendas bundled together under an idealised view of PRA.

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