

The effects of covid-19 on the lives of adolescent girls and young women in the adult entertainment sector in Nepal

Anita Ghimire, Sharmila Mainali, Fiona Samuels and Shamila Lamichhane September 2021

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1 Background: adult entertainment sector during covid

On 24 March 2020, the government of Nepal imposed a nationwide lockdown to contain the spread of covid-19, allowing only health and other essential services and shops to continue operating at normal capacity. Prior to the lockdown, large public gatherings were discouraged, long journeys restricted, and international flights halted. The falling number of covid-19 cases prompted the government to begin gradually relaxing the lockdown on 14 June and suspend it on 21 July 2020, only to impose it again within a week until September 2020. The country has been in a third phase of lockdown since 28 April 2021. Even during the brief removal of the lockdown, restrictions on educational institutions, recreation centres, religious sites and the entertainment sector remained in place, all of which remained closed or went online.

As of 1 August 2021, 697370 people have tested positive for covid-19 in Nepal (2.3% of the population), of which 94% recovered, 4.4% remain infected (active cases) and 1.4% have died (MoHP, 2021). Actual cases may be higher as not everyone gets tested. The Ministry of Health and Population (MoHP) said that it would implement localised lockdowns where cases exceeded 25,000 (The Himalayan Times, 2020). In total, 74 out of 77 districts had been locked down or had received prohibitory orders until May 2021. Due to a sharp rise in cases in neighbouring India – Nepal's chief vaccine supplier – there has been a shortage of supply and a very low vaccination rate. As of 16 May 2021, 7.4% of the population has received the first dose of the vaccine and 2.5% has received both doses (ibid).

As is the case globally, lives and livelihoods in Nepal have been heavily impacted by covid-19. GDP growth is expected to slow to 1.8% in FY2019/20 from 7% the previous year, while service sector growth will slow to 1% (the lowest since FY2002) and industrial sector growth will slow to 3.2% — a four-year low (World Bank, 2020). An estimated 9 million people (28.9% of the working age population) are unemployed as a result of the pandemic (CBS, 2019). The

mainstay of the Nepali economy, the agricultural sector, has been marred by the lack of timely access to seeds, fertiliser and irrigation facilities. In addition, Nepal's economy is heavily reliant on tourism, trade and overseas remittances, all areas that have been severely impacted by the pandemic — remittances from migrant workers are expected to fall 15-20%, the lockdown has increased trade deficits, and the 'Visit Nepal 2020' initiative's goal of attracting 2 million visitors will be missed by a long mark (GoN and UNDP, 2020). In terms of micro, small and medium enterprises (MSMEs), which include adult entertainment, three in five employees have lost their jobs and businesses have seen a fall of 95% in average monthly revenue (ibid). Moreover, 85% of the labour force in the informal economy, which also includes adult entertainment, faces job losses, with women being the most vulnerable. While there are no gender-disaggregated figures for jobs lost in the formal and informal economy, overall 28% of men and 41% women have lost their jobs (ibid).

The adult entertainment sector (AES) in Nepal comprises venue-based entertainment in hotels, massage parlours, spas, dance bars, small eateries (KhajaGhars), duet singing venues (Doharis), dance clubs and guest houses, and freelance work booked by phone or text. Services range from companionship and entertainment to overseas travel for commercial sex work (OSW) (Ghimire et al., 2020; Dank et al., 2019).

All the adult entertainment establishments mentioned above were closed during the lockdown. Over 50,000 workers (including minors under 18) are directly involved in this business in the Kathmandu valley alone (Dank et al., 2019). While key informants in our study reported a proliferation of adult venues in urban centres and at various points along the east–west highway that runs the entire length of the country, there is no data on the total number of workers.

The adult entertainment establishments listed above represent the semi-formal economy, in that they may be officially registered, but employees do not have contracts or a regular salary. Additionally, freelancing represents a growing share of work in the AES especially in terms of commercial sex work, which is illegal (Ghimire et al., 2020). This has implications for the effects of covid-19 on those working in this sector, which we explore in this paper.

Several studies (Ghimire et al, 2020; Dank et al., 2019; CWIN&ECPAT Luxembourg, 2015) have shown that working in the AES in Nepal is risky. Workers are exposed to economic, physical and sexual exploitation and enjoy less security. They are only paid for days worked (no regular salary or leave), lack basic labour rights, face harassment at work and are often not paid on time. This makes the

women, girls and minors working in the sector vulnerable at the best of times. A rapid gender analysis commissioned by the Ministry of Women, Children and Social Welfare finds that people working in the adult entertainment were among those rendered more vulnerable due to the lockdown (NRI and CARE Nepal, 2020).

This study discusses the impact of covid-19 and the measures taken to address it on adolescent girls and women working in the AES. It focuses on covid-19's effects on food security, shelter, health and employment for girls working in this sector. It also explores coping mechanisms and ends by recommending measures and policies that could be adopted during and after the pandemic to support the livelihoods and broader well-being of women and girls working in this sector.

2 Methodology

The study is a part of the nine-year (2015–2024) Gender and Adolescence: Global Evidence (GAGE) mixed-methods longitudinal research programme exploring gendered experiences of adolescents. It follows the lives of 18,000 adolescents in six countries across three regions of the world: Ethiopia and Rwanda in Africa; Bangladesh and Nepal in Asia; and Jordan and Lebanon in the Middle East. GAGE aims to fill the vast evidence gap on 'what works' to enable poor adolescent girls to emerge from poverty and fast-track social change for themselves, their families and communities, and their countries. The study is a part of a three-year GAGE study on adolescents working in the AES and focuses on the covid-19 lockdown and the immediate aftermath (24 March – 30 September 2020) in Nepal.

The study takes a qualitative approach using indepth (IDI) and key informant interviews (KIIs). Interviews were conducted at the three sites (Jhapa, Sunsari and Kathmandu) where the previous two rounds of qualitative

research were carried out in 2018–2019. These sites serve as prime hubs of AES work, providing access to participants hailing from diverse geographical and ethnic backgrounds and highlighting the international linkages of the AES to India. The age of the girls ranges between 15 and 24. Participants aged 19 or over started working in the AES before they were 19. Twelve per cent of the respondents (except Klls) had one or more children. Table 1 gives further details of the respondents

The initial idea was to follow up with the girls and key informants who were previously interviewed in 2018–2019. However, we were only able speak to 10 (five in Jhapa and five in Kathmandu) because they had returned home or changed their contact numbers. The remaining 35 girls were newly identified study respondents.

We approached the girls through our local partner NGOs Biswas Nepal and Sharmik Mahila Surakshya Sangh in Kathmandu. Both organisations are run by

Table 1: Respondent details

Tools	Jhapa	Sunsari	Kathmandu	TOTAL
In-depth interviews with girls working in the AES	14	10	19	45
Small group discussions	1 (2 girls)		1(3 girls)	
Key informant interviews	4	3	14	21
TOTAL	19	13	34	66



members working in the AES and provide training, legal support, psychosocial counselling and reintegration programmes for girls working in the sector. In Sunsari, we worked through a local facilitator who provides shelter, sexual and reproductive health (SRH) and counselling services to girls in Jhapa. We conducted 35 IDIs (10 each in Jhapa and Sunsari and 15 in Kathmandu) and 21 Klls. seven of which (two each in Jhapa and Kathmandu and three in Sunsari) were conducted over the phone because of the lockdown, while the others were conducted face to face. Key informants consisted of people actively engaged in providing support to women and girls working in the sector, including representatives from NGOs, local government, media and members of the AES and labour associations, among others. The research team had previously conducted an impact study on covid-19 using phone interviews in 12 of Nepal's 77 districts and therefore had experience conducting phone interviews on sensitive topics with girls working in the AES in the study districts. Face-to-face interviews were conducted after the lockdown was eased. The face-to-face interviews adhered to the covid-19 safety protocols of the government of Nepal, the Nepal Institute for Social and Environmental Research (NISER) and partner NGOs.

District staff with fieldwork experience from earlier phases of the GAGE study conducted face-to-face interviews in Jhapa and Sunsari, as five of the new participants were hesitant about phone interviews. In Kathmandu, 12 girls were interviewed face-to-face after the lockdown was eased. We met them at their place of

work, in restaurants of their choice and in partner NGO offices. Both phone and face-to-face interviews required more than one interaction with some respondents. Out of 66 interviews, 15 were not recorded either due to technical problems or because the respondents were uncomfortable with their interviews being recorded (see discussion below).

The proposal and questions were approved by NISER's and ODI's ethical review board and the partner NGOs. Ahead of the interviews, partner NGOs' staff explained the research to respondents and talked about data protection, anonymity protocols and consent. Researchers also obtained consent before the interviews, explaining why the study was being carried out, how their participation would help, and that they were not obliged to participate and that non-participation would not affect their relationship with the NGOs. NGO staff were not present during the interviews. Before each interview, we reiterated the research objectives, what we were going to do with the interviews and the conditions of participation (for example, that they could opt out at any time).

After the fieldwork had begun, three girls in Jhapa dropped out of a group discussion at the last minute after a friend told them that she was previously recorded and exposed on YouTube by a reporter. The girls feared that we would do the same. Despite explaining about anonymity and data protection, they chose to give face-to-face interviews as they would not be recorded. Where girls felt unsure about phone interviews in Jhapa, we mostly conducted face-to-face interviews. All the names in this paper have been changed to protect participants' identities.

3 Findings

This section starts with a summary of girls' lives in the AES sector before covid-19 to help readers understand the context. It then describes how the pandemic changed patterns of work, affected girls' ability to pay for basic needs, such as food and shelter, and impacted gender-based, economic and intimate partner violence. This is followed by a discussion on the coping strategies used by girls. The report concludes by reflecting on ways to address the challenges faced by girls in the AES both during and after the pandemic.

Pre-pandemic life of girls in Nepal's AES

Women and girls working in the AES can be broadly categorised into three groups based on their economic status and clients. The first group come from middle-/upper-class families, are educated (usually to high-school level and above), and have high-profile clients who take them on all-expenses-paid trips abroad. Since they have greater financial freedom and less economic pressure, they can choose who they work for.

The second group includes girls and women educated to secondary/college level with a stable family background and some assets to fall back on. They typically earned around 40,000-60,000 rupees a month (336-500 USD) from their work in the AES before covid-19. This group also includes girls who have dropped out of lower secondary or secondary education to work in massage parlours, spas, dance bars and discos or engage in phone-based commercial sex work. Their clients are middle-class businessmen, politicians and bureaucrats. Services are generally provided in the above venues, in high-class/more expensive hotels in Kathmandu or involve all-expensespaid domestic travel.

The third group includes poor and uneducated women and girls who work on the streets to support their families, mostly small children, elderly parents or dependent siblings. They are usually the main breadwinners in the family. Their client base is made up of labourers and those on low incomes (transport workers, porters, petty traders, soldiers and low-level police personnel). This study is based on respondents from the second and third groups. In all cases, their families are either unaware or disapprove of their line of work.

There are several reasons for choosing to work in the AES, despite the associated stigma. Most women and girls in all three groups get involved through acquaintances or friends. Unable to earn a living through other means, women and girls turn to the AES as a last resort, often falling prey to the popular misconception that the work is not difficult and the financial rewards are quick and substantial. Similarly, many girls can earn much more than they could in other sectors due to their low level of education and skills and poor social networks. Once they get caught up in the sector, it is difficult to leave as they become dependent on an income that enables them to meet their and their family's basic needs. Many girls who are single mothers or who have financially dependent parents or younger siblings enter this sector because of pressing economic needs. As discussed in other studies (Ghimire et al., 2020; Dank et al., 2019; Frederick et al., 2010), sometimes girls enter the sector without realising that they will ultimately have to provide sexual favours, as shared by a girl who recently started working in a massage parlour:

'Have they told you about the other activities you have to do there?'

'No, they haven't told me.'

'In other places, clients visit for purposes other than massages. Are you not told about that kind of activity?' 'I have not faced that kind of situation yet.'

(IDI with a 19-year-old girl working in a massage parlour in Kathmandu.)

Once they enter this sector, girls are at high risk of physical, sexual and economic exploitation by clients and employers. The third group of women working for survival are particularly at risk of exploitation because they are less able to choose their clients and assignments.

Owing to the discreet nature of their work and often limited awareness of how to protect themselves, the majority of the women and girls (particularly in group three) engage in risky behaviour and have limited or no access to sexually transmitted infection (STI) tests, contraceptives and medical abortions. They are also vulnerable to violence outside of work. The threat of legal repercussions, stigmatisation and social exclusion, ostracisation from family support and the weak emotional situation the girls themselves are in makes many girls vulnerable to physical and financial abuse by male colleagues, police and partners/boyfriends.

How patterns of adult entertainment work changed during the lockdown

As discussed in section 1, AES venues remained largely closed during the study period and there was a large decrease in the work and income of the respondents. In instances where the lockdown was eased, some massage parlours and spa owners in Kathmandu opened their businesses discreetly, only to close the establishment after a few days due to an escalation in the number of cases and strict monitoring by the government. However, some of the establishments in all three study sites operated covertly for some local clients.

Despite establishments being closed, employers continued to arrange clients for girls in the study sites whenever possible. However, a major effect of the lockdown in all three study sites was a drop in the number of clients from around five to six a day to a few in a week.

'Now we do not have customers. Previously we had three to five customers a day if we wanted. Now we do not get customers every day. We get one to two in three to four days. So, we do not have work.'

(IDI with a street-based worker in Sunsari).



have no one but a small daughter. If anything happens to me, she will be an orphan. She will have no one in the world to look after her. So, I did not want to take any risk.

(IDI with a 21-year-old freelance commercial sex worker in Jhapa.)

Girls and women working as freelance sex workers also reported a significant drop in their number of clients. Similarly to those working in establishments, girls in Jhapa and Sunsari who served four to five clients a day before the pandemic saw the numbers drop to a few clients in a week. In Kathmandu, girls who worked as freelance sex workers in the streets of Thamel and Ratnapark shared that they hardly ever got clients during that period. This resulted in girls working fewer hours, mostly waiting in the streets in the evening as opposed to working full time or later into the evening.

I used to come here at 6pm and stay until 12am. But now the dance bars are closed and there are no clients. So, I come at around 6pm and go home at 7pm already.' (IDI with a 17-year-old freelance commercial sex worker in Kathmandu.)

Not only did demand for commercial sex work plunge, but ways of meeting clients also changed considerably during the lockdown. While previously it was mostly the clients who approached the girls, during the lockdown the girls had to call the clients to see if they were interested. Walk-in clients (for the establishment-based workers) were largely unavailable. Girls whose clients consisted of transport workers visited garages and bus stations in the hope of finding them.

The types of clients also changed. Respondents noted that married men did not want to risk catching covid-19 in case they passed it to their families or raised suspicions about their infidelity. College girls and women with digital skills who had set up profiles on web platforms to interact with clients also saw a decline in online client interaction. They shared that clients would not call, send messages or chat online as often as they did before as they spent more time around family members who may

have overheard or seen something. Some clients stopped answering phone calls. Some respondents also did not want to risk contracting the virus until they deemed the risk absolutely unavoidable. Women and girls living with children or family said that they restricted themselves to a few well-known clients or stopped working altogether due to fear of transmission.

'I am not doing any work now. I have no one but a small daughter. If anything happens to me, she will be an orphan. She will have no one in the world to look after her. So, I did not want to take any risk.'

(IDI with a 21-year-old freelance commercial sex worker in Jhapa.)

The lockdown was strictly imposed; people were only allowed to come out of their houses for a few hours in the mornings and evenings. Hence, clients were only available at these times during the lockdown and not in the afternoons/late at night as before. Respondents also reported that since clients did not want to raise suspicion among family members, they made fewer visits. Girls found that those who came to them had made excuses of taking morning/evening walks, but that they did not come regularly. Therefore, respondents had to adjust their work schedules according to the needs of the clients. This was difficult for respondents with childcare duties or for those living with family members to manage.

As the lockdown period continued, financial desperation pushed many AES workers out of their traditional establishments, leading to increased competition and a decrease in the price of street-based services and freelance sex work. Women and girls who worked through establishments but did not have a regular client base of their own struggled as a result of the pandemic and had to turn to street-based commercial sex work for survival, adding pressure to the workers who were already competing for fewer clients there. Girls who used to get clients through employers in hotels, dance bars and massage parlours and had never previously sought out clients on their own had to find new clients in all three study sites. According to key informants who help girls working in the AES in Kathmandu in particular, African, Chinese and Malaysian women² who were working illegally in sex work through venues also resorted to street-based commercial sex work. This increased competition for

² Since there has been no study on Chinese, Malaysian or African people involved in the AES in Nepal, we do not have information on them including their numbers.

I had not imagined it would last so long. When my employer called saying the dance bar was closed, I was happy. I thought it would last around a week at the most and I could take the rest I badly needed. However, now after so many months, my savings have been spent and I am very stressed.

(IDI with a 19-year-old girl working in a dance bar in Kathmandu.)

Nepali AES workers who had moved into street-based or freelance commercial sex work. Key informants shared that some girls had not been very visible in the industry before the lockdown, but that during the lockdown they could be seen in groups, particularly in the Thamel area in Kathmandu. Before the lockdown, Chinese and Malaysian workers were involved in commercial sex work through high-end hotels and casinos and had not posed much of a threat to the livelihoods of Nepali AES workers. Likewise, African sex workers were freelancers who operated discreetly through online contacts while staying in hotels, and did not pose much competition for Nepali workers. These new foreign groups offered strong competition on the streets as their looks were considered desirable and they offered lower rates (especially the African women), which provided an incentive for men to go to them instead of Nepalis.

'Now there are 16–17 women who have come from Africa. Since they were staying in hotels and giving service from there before the lockdown, it was not a big challenge for our girls. But now, they have come to the streets. You will see them at night in Thamel in groups. They charge around \$5–\$6 (500–600 rupees) only. So, it's been difficult for Nepali girls and women.' (KII with an NGO representative in Kathmandu.)

Indian men who regularly travel to Jhapa and Sunsari for work or leisure or live in Kathmandu represent an important client group in all the three study sites. Indians – even if living in Jhapa, Sunsari or Kathmandu – were perceived to have a high potential of spreading the disease, as the number of covid-19 cases in India was

high and the first few cases in Nepal were detected among those who had recently travelled to India. Respondents shared that they deliberately kept themselves distant from their regular Indian clients because they knew that families of Indian origin living in the border area were also mixing with extended family members from other parts of India.

As with the rest of the Nepali population, most of the respondents found out about the lockdown only a few days in advance. They did not have time to collect their salaries or what they were owed from their employers or make the necessary preparations to return to their home-towns. After the lockdown, the government gave people a week to return home and arranged free vehicles to drop people off in their respective districts. However, as most respondents assumed the lockdown would be similar to the short strikes that are common in Nepal, they did not think of returning to their homes. Some respondents said that because they did not know that the lockdown would extend for such a long time, they were initially happy to finally get some time to rest and study in their otherwise hectic lives.

'I had not imagined it would last so long. When my employer called saying the dance bar was closed, I was happy. I thought it would last around a week at the most and I could take the rest I badly needed. However, now after so many months, my savings have been spent and I am very stressed.'

(IDI with a 19-year-old girl working in a dance bar in Kathmandu.)

A few respondents who did not have a good relationship with their families preferred to stay with their friends. According to key informants, girls did not stay in their places of origin for long, if they went at all. A month after the lockdown, they began to call the key informants asking for help in getting a travel pass so that they could come back to Kathmandu. According to key informants, some girls even paid truck drivers in sexual favours to get transportation back to Kathmandu. Throughout the fieldwork, we were only able to speak to two respondents who had permanently returned to their origin villages. One, who had married just before the lockdown, decided to remain in her husband's hometown as she was pregnant. The other planned to return to Kathmandu soon.

As will be described in the following section, service demands changed for girls engaged in commercial sex work. Clients started demanding new services and lower



rates, perhaps because there were more sex workers and fewer clients creating greater competition.

Implications of lockdown on vulnerability

As discussed in section 1, while men also engage in the AES, women and girls are more vulnerable to economic, physical, sexual and emotional exploitation and abuse due to pervasive discriminatory norms against women in Nepali society. The pandemic and lockdown increased their vulnerability. Below we identify the main challenges that the respondents faced.

Vulnerability to covid-19 infection

It is impossible to follow social distancing protocols when conducting AES work, as it is based on physical intimacy. According to the respondents, Nepali clients could be incredibly stubborn and adamantly against wearing face masks and taking safety precautions, especially the clients of the third group of workers who tended to have a casual attitude towards transmission and disease or were unaware about the gravity of the risks.

'They [Nepali clients] don't care about corona or HIV or other things. They don't care at all.'

(IDI with a 20-year-old spa worker in Kathmandu.)

This put the poorest workers at further risk. While respondents said that they would wear face masks and use sanitiser before, during and after an encounter, they had no way of knowing if their clients were infected with covid-19 and had no means of testing themselves either.

I have heard the test is done only in some place and there is a long line and that the test costs at least

I have heard the test is done only in some place and there is a long line and that the test costs at least 5,000 rupees. I do not have that much money. If I had that money, I would stay in my room and not take the risk of doing this work during covid.

(IDI with a 17-year-old AES worker in Ratnapark.)

5,000 rupees. I do not have that much money. If I had that money, I would stay in my room and not take the risk of doing this work during covid.'

(IDI with a 17-year-old AES worker in Ratnapark.)

Similarly, key informants in all three sites said that demands for oral sex surged exponentially during the lockdown. They were not able to share why this was, but those who worked in the health sector were anxious about the high covid-19 transmission risks. Some of our key informants who worked on SRH for girls engaged in commercial sex work shared that they had a hard time trying to protect the girls in this case. Conventional protection mechanisms, which included handing out contraceptives, masks and sanitiser, did not protect girls providing oral sex from covid-19. Though health workers tried to make the girls aware of the risks, the girls often succumbed to demands for oral sex as they had pressing monetary needs. Before the lockdown only older women provided oral sex, perhaps because they were perceived as less desirable. However, during the lockdown financial distress caused adolescent sex workers to increasingly give into the demand. Key informants in Jhapa and Kathmandu noted that young girls providing oral sex increased exponentially as a result of the lockdown, which they observed, will likely increase risks of viral transmissions and other diseases for these girls.

'I am sitting outside of a hotel here in Birta. I know the girl who has just gone with a client is giving oral sex service. Young girls are now involved in this kind of work and I don't know how to protect them. Clients also demand this highly now and are ready to pay more for this. Girls have lost income so will do whatever it takes to earn money. They are new to this work and we don't know how to protect them from covid-19. Once she comes out, my intention is to counsel her and try to make her understand the risks.'

(KII with a SRH service provider in Jhapa.)

Some respondents, however, shared that by using the right reasoning strategy (for example, reminding them of the risks they would be causing to their family and children back home), they were able to convince clients to use contraceptives, wear masks, wash themselves or use sanitiser before and after an encounter as covid cases escalated, even if the clients did not want to use these at first. However, some clients remained adamant about not using contraceptives and masks. The girls

Yes, at first they have this attitude — we give you money, do what we say. And they do not want to wear masks or contraceptives. But I first listen to them, speak to them kindly and remind them of their families back home.

(IDI with a 17-year-old AES worker in Ratnapark.)

were aware that even if they took these precautions, it was not enough to protect the clients or themselves from potential covid-19 infection. To protect themselves, both respondents and clients reported engaging only with clients that they believed had lower infection risks; respondents said that they made decisions based on their gut feelings and the travelling habits and the numbers of potential sexual partners of the clients.

A few respondents who were working on the street shared that they were able to convince clients to take precautions against covid-19 by speaking kindly, listening to them and reminding them of people who were dependent on them at home.

'Yes, at first they have this attitude — we give you money, do what we say. And they do not want to wear masks or contraceptives. But I first listen to them, speak to them kindly and remind them of their families back home. When they cool down, I put on the masks

and contraception on them myself. It has worked so far. They are fine.'

(IDI with a 17-year-old AES worker in Ratnapark.)

While respondents said that they had not had covid-19, we understood that they were not being tested since tests were unavailable in in their vicinity. Some of their friends had been infected and were staying in quarantine, hospitals or self-isolation arranged by NGO workers³.

Vulnerability to pregnancy and sexually transmitted infections

The current economic crisis has left women with even less negotiating power than before and, as already discussed, many were forced to agree to providing unprotected sexual services because of increased competition for clients. As a result, the risks of getting pregnant and contracting STIs have increased. All seven of the respondents who reported being pregnant said it was an unplanned pregnancy, and key informants noted a significant surge in pregnancies among girls compared to other times. Moreover, key informants believe that a large proportion of girls working in the AES have also become vulnerable to forced pregnancy during this lockdown period. There are three probable causes of this, as suggested by the study participants: girls who have been staying with their boyfriends spend longer hours with them than usual because of the lockdown; girls are more likely to succumb to the demands of unsafe sex services than at other times owing to financial stress and restricted mobility (see Box 1); and transport services have worsened and financial barriers have increased, rendering girls unable to access medical counselling and abortions.

Box 1: Pemba's pregnancy

Pemba is a street-based sex worker in Ithari in Sunsari district. She was living in a guesthouse where she worked for the owner before the lockdown. He closed the guesthouse and went to his village but allowed her to stay in one of the rooms. In his absence, she had to find clients on her own and started meeting them through friends. One of them was an older man, 27 years her senior. He told her that he was in the army, paid her well and provided extra money for food each time he came. Once he became a regular visitor he insisted on not using a condom. Initially Pemba refused, but after he said he had fallen for her and would look after a child if she fell pregnant and marry her, she believed him. After she did fall pregnant and told him, he insisted that he would take care of her and the child and would make arrangements. However, when she was six months into her pregnancy, the client disappeared. We interviewed Pemba while she was staying at the rehabilitation centre shortly before she was due to give birth. Her upkeep and check-up costs were being paid by the centre, but she knew that would not continue for long. She said she felt very stressed about her own and the baby's future.

The government of Nepal started in-country covid-19 testing on 27 January 2020. Testing was largely free in government-designated hospitals for people who fulfilled certain criteria (such as having come into contact with another person who tested positive for covid-19), except for a short period in October 2020.



The lockdown also affected SRH services that are usually provided to these girls for free. The closure of public and private SRH services and restricted mobility made it difficult for health workers to reach adolescent sex workers and distribute sufficient contraceptives. Girls were also unable to access contraceptives from public and private health centres, as they were closed during the lockdown. Key informants who work on SRH issues or who are involved in medical counselling reported a higher number of pregnancies than usual.

Lack of access to abortion is a problem that will have a long-term impact on the lives of the girls (particularly unmarried girls) in this sector. According to the respondents, they were either deceived into keeping their child by their partners or were not able to access abortion services in time as a result of the lockdown. They are now past the safe abortion time limit and some are living with NGOs with no option other than to have the baby, and no food, shelter, support or livelihood once they move out of the NGO. According to their house rules, in general NGOs only host girls for 45 days. They do not have sufficient resources to keep them for longer periods and they also need the space to offer shelter to new arrivals. However, during the lockdown they began to host girls for longer. Such pregnancies have serious implications for girls. First, it is very difficult for unmarried girls with children to reintegrate into their communities and second, the lack of steady income and loss of family support makes it difficult for them to take care of their children.

Key informants were of the opinion that the increase in unsafe sex had also increased SRH-related infections and that the issue would present a serious problem in the future.

Food insecurity and increasing food costs

Food insecurity in general was high among AES workers during the lockdown but the most severe impact was on women and girls who had no savings to fall back on and children to feed.

The local government and NGOs such as Biswas Nepal distributed food aid in the community, targeting those who were the most vulnerable such as migrants and girls working in the AES. The government collected information

on migrants in each of the ward offices through the elected ward committee members. However, initially people had to show their citizenship certificates to get food aid and so respondents who did not have citizenship were unable to access food rations. However, after NGOs and civil society protested against this, the government removed the condition of citizenship, making food aid accessible to all. Thereafter, the girls could access aid from their wards or in designated places in their community. Besides the local government, NGOs such as Biswas Nepal and Rakshya Nepal also set up a targeted food aid programme for girls working in the AES. Girls who were in contact with the organisations were informed about the service by phone and could collect aid from designated distribution centres in their community. For girls working in hotels and guest houses in Jhapa and Sunsari, employers provided food and shelter. However, since the lockdown the venues have been closed and girls have either been forced to move out or, in cases where the employers were benevolent, allowed to stay in their accommodation but obliged to find their own food. Girls who became addicted to drugs during the course of their work4 were not accepted back by their families. According to key informants they are usually the youngest sex workers and the most food-insecure groups in our study (see Box 2).

Girls who had brought their parents to Kathmandu for medical treatment just a few weeks or months before lockdown; girls with children; girls who had just joined a new employer; and those who were sick or had spent savings on medicine immediately before the lockdown also faced food insecurity. Some respondents who had no male breadwinners or assets at home had brought their mothers to the city in the hope of finding a job (domestic work, giving traditional massages to newborns and new mothers 'sutkeri siharne', or work in small factories) so they could send the income home. However, due to the lockdown, the mothers were unable to earn and girls often had to bear the additional responsibility of feeding them.

'It had been a week that my mother started to work in a soap factory. But it closed down. So, now I also have to feed her.'

(IDI with a 21-year-old massage parlour worker in Kathmandu.)

⁴ For further details on this please see Dank, M., Vincent, K., Hughes, A., Dhungel, N., Gurung, S. and Jackson Orla (2019) *Prevalence of minors in Kathmandu's adult entertainment sector.* London: The Freedom Fund.

Box 2: Pooja has nowhere to live

Pooja is a 17-year-old employed in a guesthouse in Birtamode, Jhapa. Apart from providing sexual services to the guests, she also helped with cleaning and kitchen work in the guesthouse in exchange for food and accommodation. After the lockdown, the employer decided to return to his home town, which was far away from Birtamode. Fearing people might break into the place if Pooja was alone, he asked her to move out and closed the guesthouse. Pooja had nowhere to go. Her parents had abandoned her and she only had contact with her two siblings who were unable to help. Landlords and friends were also not receiving new tenants because of their fear of covid. At first she sold her mobile phone to the employer for 7,000 rupees and was able to buy food. She roamed around the market during the day and lived under the bridge at night. She became friends with other girls who also lived under the bridge and they helped each other out. They collected food aid given by the local NGOS and shared it among themselves. Her money lasted for around three months. By that time, the NGOs had also run out of food rations and were closed. She could not get government relief since she lacked citizenship. Since she has no earnings, Pooja now lives by providing sexual services to transportation workers in exchange for meals. She usually eats only at night when the workers buy food for her. The food she is offered is not enough – according to her, it is usually a plate of noodles or just a glass of local beer.

Some respondents had to provide support for unemployed siblings and their children due to the death of family members. This was usually the case in Kathmandu but not in Jhapa or Sunsari, as family members tended not to migrate there.

Girls who were single parents or taking care of younger siblings faced increased demand for food from the children, who were staying at home after their schools were closed. As a result, they had to reduce the quality and quantity of their own food intake. Respondents also shared that food relief, which would have been a great support, was not available initially due to citizenship requirements mentioned in 'Food insecurity and increasing food costs'. In some cases, local people who were also in line to access food aid complained that the girls led lavish lifestyles before the covid-19 pandemic (e.g. they were wearing jewellery and carrying expensive gadgets) and hence should not receive food aid. While the distributors did not discriminate and gave them their share, this discouraged the girls from going to stand in line for food.

Because they are involved in such profession, the people in their locality said, 'Why are you asking for relief when you earn money from such sources?'.

(Key informant Interview with a Social Mobilizer in Jhapa.)

Because they are involved in such profession, the people in their locality said, "Why are you asking for relief when you earn money from such sources?" (KII with a Social Mobilizer in Jhapa.)

In all the three sites, there were cases where girls had never cooked at home before the lockdown and so did not have the utensils and stoves to cook food in their rooms. This was particularly the case with girls who worked through establishments such as dance bars and Doharis where the employer also provided them with food. Initially, these girls could not cook their food despite receiving food relief. Local NGOs in all three sites later provided them with cooking stoves and some utensils.

Inability to pay rent and lack of shelter

Inability to pay rent for months was a common problem for all our respondents. Most girls had not paid their rent since the lockdown started. In some cases, landlords were considerate and did not ask for rent, while in others, landlords started growing anxious and demanding rents as the lockdown continued. In some instances, girls had paid for their rent out of their savings in the first few months but after their income stopped they were unable to pay. There were expectations of rent exemptions, particularly after the government's initiative to exempt rents for small business, but none of our respondents had received exemptions.

Similarly to the food-insecure groups, girls who worked on the street were the most vulnerable to eviction. While their monthly rent was low compared to others, they had no savings or assets to pay for rent. However, girls who



were living in high-class flats or in multiple rooms also faced challenges as their monthly rents were high and their available income was significantly less. Additionally, landlords did not allow newcomers, which meant the girls were also unable to sub-let or share flats with their friends. Respondents who had gone home for a short time but had kept rooms to store their belongings in or those who had recently separated from their friends to live alone and were now solely responsible for paying rent were anxious about finding the money to do so when their source of income was uncertain.

As shared in Box 2, many girls in Jhapa and Sunsari, who were living in the hotels, restaurants and guest houses where they worked lost accommodation as these venues closed following the lockdown. This was particularly the case for younger girls in the AES who had no family support since their families refused to accept them because of the stigma associated with their work. They could not stay with friends either since this was forbidden by their landlords so they had nowhere to go. They therefore resorted to sleeping in groups in public places such as under bridges, or in front of shops or public buildings. Some were able to access shelters run by NGOs while others took refuge with transportation workers, sleeping together with men in trucks and vans.

'You do not need stay outside alone as you go with the clients every night. But where do you stay if you do not go with them?'

'I sleep inside the truck.'

'Do other people sleep there too?'

'Yes, the driver and the conductor also sleep inside the truck and I also sleep with them.'

(IDI with an 18-year-old street-based sex worker in Jhapa.)

In Kathmandu we only found one girl in this situation, though key informants commented that many girls had been evicted and had resorted to sleeping in the streets. The numbers might be lower than in Jhapa and Sunsari because in Kathmandu, except for those working in the guesthouses, employers do not provide accommodation as they do Jhapa and Sunsari. This meant that girls often already had their own accommodation.

According to the respondents, had they known how long the lockdown would last, they would only have kept enough space to store their belongings and would have left for their home towns. The government had called upon landlords to partially exempt tenants from paying rent, particularly rents for business venues. Some landlords followed this guidance and reduced rents or exempted the respondents from paying a few months of rent, but this did not apply to any of the girls we spoke to . The government was unable to enforce this as it had no scheme to compensate landlords who themselves were facing financial challenges resulting from the loss of their income.

Increased vulnerability to gender-based violence:

The study found that the lockdown had increased the vulnerability of girls to gender-based violence (GBV) which included economic, physical, emotional and sexual violence. Key informants who ran psychosocial counselling classes for girls believe that the gravest problem of the lockdown facing those involved in the AES has been the exponential rise in GBV. Since many girls were on the verge of depression during the lockdown, psychosocial counsellors started online counselling and made their services accessible 24/7 through a hotline number. An increase in GBV or the risk of it emerged strongly in the interviews and also in our observations; the risk also extended to the children of AES workers.

Economic violence

This was largely perpetrated by employers and friends. Employers who used lockdown as an excuse to not pay salaries, speaking rudely or refusing to pay when they were contacted, was a common problem faced by the respondents. Of those who were paid, the amounts they received were reduced on the grounds that their performance was not good enough.

Respondents engaged in street-based commercial sex work shared that clients refused to pay them after they had provided the service, often making the excuse that they did not have any money or they were not satisfied. Girls were also forced to serve multiple clients even though the initial deal and payment had just been for one. As described in Box 2, clients took advantage of the desperation of the AES workers – girls were offered a small amount of food in exchange for their services or were purposefully intoxicated by the clients so they could obtain the services for free.

Girls without bank accounts⁵ who had trusted their employers or friends with their savings also reported being cheated out of a year's worth of savings. When they approached the employer or friend for their savings, they found they had absconded with the money during the lockdown. Girls also shared experiences of extortion from their partners, such as this girl's story shared in an SGD among girls working in a Dohari in Kathmandu: 'He came home drunk and asked me to buy goat meat and prepare a nice meal for him. I did that hoping he will stay at home. But as soon as we had our dinner, he wanted to go out and have fun in a Dohari. He took my money and paid for all his friends who were there.'

Physical and sexual violence

Both physical and sexual violence was inflicted by clients as well as husbands or partners. Respondents shared that their boyfriends hit them when they were unable to give them money or questioned them about their infidelity. Forced pregnancy by partners was mentioned both in interviews with girls as well as with key informants. Girls living on the streets or in public places (such as under bridges in Jhapa and Sunsari and on the streets in Kathmandu valley) were often the victims of rape during the lockdown. Men who worked in the transportation sector and those who lived on the streets preyed on these girls for sexual favours. Key informants shared numerous incidences of transportation workers purposefully intoxicating girls who lived on the streets in the evening and gang raping them at night. Some girls were also made to exchange sex for shelter in trucks and vehicles. Key informants reported that girls who lived on the streets were too mentally and physically exhausted to care about risks and that was what made them more vulnerable to such violence.

Key informants who gave the girls legal advice also noted the increased surveillance and physical violence inflicted by the police on these girls during the lockdown.

In the AES sector, addiction and substance abuse are a result of both peer pressure/influence and the circumstances of their profession. While immaturity and gullibility push some young girls towards addiction, some – despite being resolutely against drug use in the beginning – begin using drugs because clients force them to or because their peers or boyfriends pressure them to. These girls were at high risk of violence from their partners during the lockdown because they had not been able to earn much and were spending their earnings on drugs.

For the few girls who were able to return home, being there did not give them solace from the exploitation they faced in their workplaces. Some of the girls were asked for free sexual favours by relatives who had come to know about their engagement in the AES. Girls who had returned home also reported facing physical violence (beating) from women in the community who thought that their husbands were having secret affairs with them. In addition, some women found by chance that their clients were also living in the village and faced sexual exploitation from them (see Box 3).

The study also found that the pandemic has pushed the children of women working in the AES sector into CSW, particularly through the mothers' clients.

While most children would be away at school before the lockdown, now with schools being closed and their mothers entertaining guests in their homes or rooms, interactions between children and clients have increased. Clients who came into contact with children when the mothers provided services at home, were often found to have secretly lured the adolescent daughters, by giving them recharge cards and cash, into having physical

Box 3: Kanchan is threatened with exposure

Kanchan, who works in a massage parlour, lives with her disabled husband and her son in Kathmandu. Her husband, in-laws and people in her home village believe that she works in a cooperative. When the massage parlour showed no sign of opening, she went to her in-law's home in Sindhupalchowk district hoping to work in the fields and bring home some food. After a few days in the village, she encountered one of her massage parlour clients. She discovered that he was a member of her husband's extended family. He threatened to expose her if she did not give him free sex. She found him hovering around her house frequently and had to go with him to a nearby forest whenever he asked. Early one morning, she ran away on foot to escape him and started living in Chautara, the district headquarters which was several hours travel on foot. She returned to Kathmandu as soon as vehicular movement resumed.

⁵ One needs a citizenship certificate to open a bank account in Nepal. Citizenship certificates are obtained either from the husband or parents. Girls who do not have support from either of these groups are not able to get citizenship certificates and so are also unable to open a bank account.



relations with them. Key informants noted occasions when they had rescued young children from their mothers' clients. Single mothers in our interviews also shared this problem with us.

In our fieldwork in Jhapa, we also found adolescent sex workers who were fully dependent on previous clients for their food and accommodation (see Box 4). Such situations have the potential to make girls more vulnerable, including to economic violence and trafficking.

Emotional violence

Both economic and physical violence inevitably leaves deep emotional scars on our respondents whose lives even before the lockdown were filled with stories of betrayal, violence, abandonment, families where one of the parents does not live with the family, poverty and struggle. Emotional violence is perpetrated by employers, boyfriends, friends, colleagues at work and parents. Most respondents were already estranged from their parents and received updates about what was happening at home through their siblings. Some came from single-parent homes, living only with their mothers. During the lockdown, some respondents could not go home because they were not accepted by their parents. A 19-year-old girl working in

They don't like me. They don't want me to come to the village because the villagers will gossip about my family if I go there.

(A 19-year-old girl working in a restaurant in Jhapa.)

a restaurant in Jhapa told us her experience: 'They don't like me. They don't want me to come to the village because the villagers will gossip about my family if I go there. My parents don't speak to me but I call my younger brother and sister when I miss home and they speak to me. I called them when the restaurant closed. I wanted to go home. They told me "elder sister, you take care of yourself, but don't come home. Our parents will be angry.'

Girls said that they were hurt by the unfair payment system in the AES industry, which has worsened during the lockdown. Employers are fearful of boys and give them their salaries on time, but they do not pay the girls at all or speak rudely to discourage the girls from asking for their salaries in the first place. The realisation that their vulnerability comes from being women in the AES and the fact that this vulnerability is likely to continue to invite exploitation has made girls reconsider their relationship with peers and employers. This realisation has grown stronger since the lockdown. A 22-year-old respondent who works as a Dohari dancer in Kathmandu said: 'Since those two were close to the stage leader [the leader of dance/singing group], they got it [salary]. If we call him, he either keeps it [the respondent's phone number] on the blocked list or says that he is in the village. When we

I wanted to go home. They told me "elder sister, you take care of yourself, but don't come home. Our parents will be angry.

(A 19-year-old girl working in a restaurant in Jhapa.)

Box 4: Pooja and Roshani are dependent on their clients

When we reached the address to interview Pooja and Roshani, we sensed something strange. Two men opened the main gate and spoke to our local facilitator. They then took us to see Pooja and Roshani in a room that was locked from the outside. The men and our local facilitator stayed in the corridor talking to each other while we conducted the interview. On speaking to spoke to Pooja and Roshani, we came to understand their living situation. The men would give them food and paid for the rent and they lived together with the men in the room. The men would also bring customers for them. Pooja and Roshani neither received money from the men nor asked for it. They said that they had not gone outside the house due to the lockdown, but had kept in touch with some friends over the phone. The men were their clients at the guesthouse where they had previously worked. When the guesthouse closed due to lockdown and they had nowhere to go, the men had brought them there. The interview could not continue for long because one of the men came into the room and lay down on the bed. When we followed up with our local facilitator two weeks after the interview (she visits the girls to provide contraceptives and check-ups), she said that the girls were still there.

tell him to do IME⁶ for the money, he tells us that he does not have any."

Verbal abuse, intimidation, unjust arrest, threats and other forms of exploitation and mistreatment by the police has not only hurt the women physically but also scarred them emotionally, as described by a 19-year-old respondent in Kathmandu who tried to open her spa when the lockdown eased for a few days.

'We are constantly scolded and threatened (by the police). We are asked to move from the place we are staying. We aren't treated as humans. It doesn't matter even if we apologise. We hadn't done any damage. When I tell them that I won't open the shop, they threaten to call women police on me. People who can revolt and have means didn't get caught. Some bribed the police to get released.'

(IDI, Spa worker, 19 years, Kathmandu)

Some of our respondents broke up with their partners during the lockdown. The most common reasons were partners' infidelity and financial abuse (for example, blackmailing girls to pay for their and their family's upkeep – such as funding their tuition fees, travel and entertainment expenses, paying for parents' medical treatment, remitting money to parents, and forcing girls to support their previous spouse and children). Their partners were also reported to be living with new girls during the lockdown. While the respondents put on a brave face in the interviews and said that they had become stronger, they showed a willingness to have long conversations about these issues and wanted to share their stories in detail. Interviews with psychosocial counsellors attested to the emotional violence these girls experienced.

We are constantly scolded and threatened (by the police). We are asked to move from the place we are staying. We aren't treated as humans. It doesn't matter even if we apologise.

(IDI, Spa worker, 19 years, Kathmandu.)

The research also found that because girls face emotional violence so frequently from their clients they have become desensitised to it and it could explain why not all respondents mentioned it. Girls described their clients as 'good' and 'bad' according to whether they were forceful, made girls do things they did not want to, tried to get them to provide free services, expected them to be available for free outside work hours, stole their money or possessions or tried to cheat them. Though some clients are sympathetic and tell the girls that they will find them other work, the majority of the girls explained that they do not become emotionally involved with the clients except for a few 'good' ones. When asked about the differences between their regular and 'good' clients, the girls said that they kept in touch with the latter, saw them as friends and discussed their daily lives with them.

Finally, emotional violence was also experienced by single mothers who were anxious because of their inability to provide enough food for their children. Key informants reported that some had even tried to kill the children and commit suicide themselves. The women would sometimes ask NGOs to provide them with the money to buy poison. An NGO worker in Sunsari explained: 'We are flustered too.' We have limited resources but the situation here is out of control. We have women who come to us crying asking us for a little money to buy poison. They say we cannot see our children constantly crying for food. We want to poison the child and ourselves because there is no better option. We have given them rice bags, salt and oil and lentils so that it lasts longer.'

We have limited resources but the situation here is out of control. We have women who come to us crying asking us for a little money to buy poison. They say we cannot see our children constantly crying for food. We want to poison the child and ourselves because there is no better option.

(An NGO worker in Sunsari)

⁶ This stands for International Money Express, which is a popular method of sending money by bank transfer.



For single mothers, carrying on with the job posed not only major practical challenges, but also caused them considerable anxiety, remorse and anguish. Before the lockdown, the children would go to school and the girls would work during the day and so had no fear of their children knowing what they did. After the lockdown, they were in constant fear of their children finding out about their work and clients walking up to them or calling them when their children are around. Moreover, as discussed in 'How patterns of adult entertainment work changed during the lockdown', their working hours became more erratic and they were forced to meet clients mostly in the morning and evening. They could not reject clients because they needed money to feed their children, but having to lie to the children (for example, when children asked where they were going to or how they knew the client) every time they went to meet clients weighed heavily on them.

Coping mechanisms

While emotional and social fulfilment are important aspects of life, girls in the AES sector are primarily worried about food, rent, medical and childcare expenses; consequently, most of their coping strategies are economic.

Taking loans from landlords, acquaintances and neighbours and borrowing food items from local shopkeepers were the most common ways they had found of meeting their needs. With supplies and savings drying up, some women even had to cut down on nutritious food and basic hygiene routines.

'Sometimes there was no money for buying shampoo and soap and I did not bathe for many days. Similarly, when I did not have money to buy vegetables I ate plain rice and pulses.'

(IDI with a 22-year-old Dohari singer in Sunsari.)

Adopting alternative livelihoods was another common coping strategy. Women who had the means to source and resell vegetables from the fields, jungles or wholesalers saw this as a sustainable alternative to get them through the pandemic. In Jhapa and Sunsari, respondents had turned into vegetable peddlers, while in Kathmandu,

making necklaces, earrings and bangles out of beads was a common alternative. However, when asked if they would continue with these new ways of earning income there were mixed responses. Some women utilised their free time to undertake skill development training from NGOs such as Biswas Nepal, for example to learn how to make ornaments from beads locally known as 'crystal training', or to work as tailors or in beauty parlours.

Reducing the cost of services or tailoring services to the demands of their clients so they did not lose them was another coping strategy. Due to the shortage of clients (see also 'Increased vulnerability to gender-based violence'), AES workers were compelled to accept whatever price they were given for their services.

'They do (haggle over payment). They want to give less money.'

'Do you negotiate with them?'
'Well, I need the money, so I just go'.
(21-year-old, street-based worker in Sunsari.)

Similarly, as described in 'Vulnerability to covid-19 infection', some girls have adopted other coping strategies such as providing oral sex, staying out throughout the night for the price of a few hours of service, entertaining multiple people for the price of a single client, and turning to street-based and freelance sex services are other coping strategies.

The circumstances forced some girls to sell their mobile phones and exchange labour work or sex work for survival. While some women cleaned, cooked, washed clothes in hotels for food, others had to offer sexual intercourse in exchange for food and shelter. A social mobiliser explained: 'They didn't have condoms, some place to stay or anything to eat. Men took them to garages or trucks to sleep in exchange for food.'

In the pre-covid context, job opportunities as household workers and masseurs for postpartum mothers and newborns 'Sutkeri Siharne' were easily available to AES workers. However, in a situation where domestic workers were being laid off by employers and asked to stay on (largely unpaid) leave on the grounds that they were covid-19 'carriers', AES workers – who tend to come from similar socio-economic backgrounds and stay in

Massage of post-partum mothers and newborns is a common job taken by many illiterate women who have the skills. In Nepal, it is taken as a part of domestic work, but the masseur needs to have specific skills (of traditional Nepali oil massage for the mother and the newborn). The work usually is for 1–3 months per client and involves massage (twice every day), bathing the baby and washing clothes of the newborn and the mother. The workers would not do other domestic chores, however. The pay is usually much higher than for a domestic worker (15,000–35,000 rupees and a set of new clothes for a month of work for a masseur compared to 3,000–5,000 rupees on average for a domestic worker per month).

similar housing conditions – were highly unlikely to be able to find new work. Hence, covid-19 reduced the chances of women working in the AES finding alternative work locally.

Single mothers who had to continue to work to feed their children as discussed in 'Increased vulnerability to gender-based violence', used several coping strategies to deal with the fact that they had to engage in commercial sex work with the children at home. Firstly, when they have to bring the clients home, they are selective of clients and invite only long-term and trusted ones who they believe will not divulge information about their work to the children or take advantage of the situation. Women who have older children send them off to shops to buy something or to their friend's house nearby to play or study and invite their clients home. If the client is staying for a longer duration - such as when they expect to have food as well - they introduce the clients as distant relatives. In cases where they have toddlers, women either provide services in rooms or if the clients want to meet in hotels, they ask a fellow AES worker to take care of their baby and return the favour if need be.

Living together with friends to save rent and resources and not sending money home was another coping strategy. While only two of our respondents had gone home, according to key informants, 40% of women and girls went back to their home towns within the first two months of lockdown. This would have been an important way to cope with the expenses in Kathmandu. However, key informants found that they could not stay at home for long because of the lack of employment opportunities

and the violence discussed in 'Increased vulnerability to gender-based violence'. They were also dissatisfied with the food since they were used to eating a variety of food in their workplaces but had to eat the same vegetables and rice every day in the village. These limitations were also reflected in interviews with girls as shown below:

'What is there in the village too? A person needs a good amount of land if he/she wants to rear goats or do poultry farming? Working in the village won't yield any achievement/productivity.'

(IDI with a 21-year-old spa worker in Kathmandu.)

Food and other services from NGOs have been the biggest source of support to respondents. Many respondents who thought we were from the partner organisation reported how important the food aid was for them. A 19-year-old dance bar worker in Kathmandu told us: 'Biwas Nepal' maam called me and said they are bringing me food. It was a great support for us. I got 30 kgs of rice, pulse, cooking oil beaten rice, salt and sugar. It would last for a month and so helped me survive when there was no other means.'

The lockdown also brought about critical changes in the way girls viewed their social relationships and their personal lives. Many respondents said that they had now learnt the importance of saving, which they did not do before, and of learning new skills. They said that they had had time to reflect on how they use their leisure time and realised the importance of being engaged in learning (such as participating in training given by NGOs) and interacting with NGOs and other girls for their psychosocial well-being.



4 Conclusion

Like other informal sectors in Nepal, the AES remained largely closed during the lockdown (March to September 2020). Several studies on the impacts of covid-19 have shown that existing inequalities were amplified by the pandemic and the findings of this study on girls working in the AES reflect this. Finding themselves in this sector because of a lack of agency over their lives, the pandemic severely worsened the situation for girls and women working in this sector in all aspects of their lives. The lockdown had a major effect on the patterns of work in the AES including a decrease in clients, declining service prices, demands for extra services for less payment, demands for new services such as oral sex and irregular working hours, as well as increased competition from those who had worked elsewhere before the lockdown. This was particularly difficult for girls who had childcare responsibilities as children were at home as a result of school closures.

Covid-19 exacerbated the vulnerability of all girls working in this sector but pushed girls with the lowest incomes and most difficult circumstances, such as single mothers, girls abandoned by their families or those without economic support, into the most precarious situations.

Due to the decrease in income, some of the most pressing challenges respondents faced related to food and accommodation. The rising price of food and lack of income led to food insecurity among girls. As food insecurity increased, girls had to compromise their safety by providing riskier services, working for less money (such as for just a plate of food), using their savings or selling assets.

The study also found that homelessness was a direct consequence of the current lockdown which was ongoing at the time of writing. Many respondents continued living in the destination city where they work and not in their home villages. Girls most vulnerable to homelessness were those who were staying with employers, girls not accepted at home by their parents and those that could not reintegrate into their home towns upon their return. Girls ended up staying in unsafe places such as under bridges, in front of shops or in public spaces, or were dependent on their clients.

The findings also corroborate other studies showing that violence against women and girls increases during crises (NRI and CARE Nepal, 2020). Girls faced increased

violence from their employers and partners, police, parents and clients, but also fell prey to violence from new groups such as transportation workers. Violence included economic, physical, psychosocial and sexual, and the lockdown exacerbated the violence faced by girls who were the most vulnerable among those working in the AES. Girls who did not have shelter and faced severe food insecurity were at higher risk of exploitation.

Violence from intimate partners also increased during the pandemic. Girls faced economic pressure from their partners leading to separations in some cases, which also placed women and girls at an even a greater disadvantage both materially and emotionally. Girls who had drug addictions were more at risk of physical violence from partners as their incomes were depleted and they had to use their savings to finance their addictions. Increased levels of police brutality towards those working in the AES were also reported during the lockdown, evidencing the need to address the system of impunity and corruption within the police force in Nepal.

Increased violence, homelessness, depleted savings and income, and food insecurity has increased psychosocial and emotional problems among girls. The study found reports of increased depression and suicidal tendencies among girls. Except in some cases where girls talked about their problems with their peers, social support for emotional challenges was non-existent.

While there was some government relief distribution, according to the respondents the process was inequitable and failed to target the people in need. Other forms of support, particularly those provided by NGOs, were invaluable to the girls and women working in the AES. This was because while the government provided aid to the vulnerable population in general, NGOs who had previously worked with women and girls in the AES sector focused their support on them and recognised the additional challenges they would face. NGOs were quick to address some critical gaps in support such as distributing food relief and cooking items when the government was unable to do so by bringing in international support. They provided shelter to girls who faced intimate partner violence or were abandoned when they became pregnant, as well as migrating face-to-face psychosocial counselling services online and opening hotline systems operating 24/7 to supplement the government's hotline.

While the circumstances were very difficult, the lockdown also gave some girls time to reassess their relationships and their jobs. Many respondents reported that the lockdown had given them time to reflect on their relationships with partners and employers, and some had decided to leave abusive relationships. Others learned about the importance of savings and skill training, tending to emotional problems and seeking psychosocial counselling. Some resolved to change their profession as soon as they are able to gather some savings.

We propose six key policy recommendations on the basis of this study:

- 1. Upgrade district-level disaster risk reduction and management (DRRM) plans to encompass the social implications of disasters and include health emergencies as well as natural disasters. In line with the National Disaster Risk Reduction and Management Strategy, provinces and districts now have their own DRRM plans that outline local prevention and response strategies, actions and resources for addressing disasters. These plans currently take natural disasters (such as floods, fires, cold spells) as reference points for targeting actions and resources. The current pandemic has shown that such plans should also take health emergencies into account. Besides this, targeting mechanisms look at vulnerability from a disaster point of view. While they take gender, age and disability into account, they neglect other populations which are vulnerable due to their social position. It is imperative to redesign the current district and DRRM plans to take into account social vulnerability and social implications of pandemics, particularly on poor and vulnerable populations.
- 2. Activate and create awareness on secondary reporting mechanisms to reduce GBV. Currently, reporting for violence requires primary reporting, i.e. the survivor themselves has to report the abuse and violence. This raises critical protection issues especially for adolescent girls who face violence but cannot report due to a lack of awareness, agency and voice, or other social and economic constraints (such as being dependent on the perpetrator for food and shelter). Secondary reporting mechanisms, where

- a third party who feels there is potential violence and triggers protection measures on behalf of a person who does not report, should be put in place in emergencies but also during normal times for vulnerable women and girls.
- 3. Equip child rights committees (CRCs) with the financial and human resources to take prompt action to tackle issues related to the deprivation of children's basic human rights (e.g. the right to food, clothes, shelter and protection), in particular for the children of commercial sex workers. There is provision for each of the 6,743 wards (the smallest unit of government) in Nepal to have a CRC responsible for ensuring that children are protected and that their basic rights enshrined in the Constitution are met. The CRCs consist of government personnel as well as local community members. Due to lack of resources, existing CRCs are largely passive except when working on critical issues such as child marriage. In emergency situations where other vulnerabilities such as food insecurity, homelessness and protection issues are exacerbated, CRCs can be an important resource.
- 4. Collect data on children who are most vulnerable to deprivation, such as the children of single mothers who work in stigmatised sectors such as the AES, and ensure disaster management plans automatically provide such children with social protection allowances during emergencies.
- 5. Remove citizenship conditionality in emergency relief distribution. Disaster relief is humanitarian support and should be made available to the most vulnerable irrespective of their citizenship status. For various reasons, many Nepali women and girls do not have citizenship cards and face challenges in accessing relief support. While citizenship conditions are put in place to reduce issues of double distribution, they exclude those who do not have citizenship. Currently, relief distribution is managed by local units of government in coordination with local NGOs and civil society members and though they are in a better place to understand who is most in need, targeting mechanisms are usually prescribed by provincial or central government. While provincial and central government should take the mandate of



overall monitoring, local relief distribution committees should be given the authority to design targeting mechanisms and should remove the requirement to prove citizenship to access aid.

6. Provide access to savings accounts. Savings should be considered a basic right. Current requirements, i.e. the need for citizenship certificates to open savings accounts, exclude women and girls who do not have citizenship. The process also requires filling out forms that are related to their parents or guardians (which

include their citizenship certificate number and details of the parents), which also deters girls who are ostracised from their families from opening savings accounts. In these cases, girls either do not save or keep their savings in other people's accounts where they are vulnerable to being lost. Alternative ways to ensure these girls can save money, such as through NGO-mediated institutional savings systems where the institution provides guarantees for the girls, should be provided.

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GAGE Programme Office

Overseas Development Institute 203 Blackfriars Road London SE1 8NJ United Kingdom Email: gage@odi.org.uk Web: www.gage.odi.org

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