Transforming Women's Lives in Cambodia: Local Research-driven health promotion interventions, Advocacy, Activism, and Globalizing Policy Change

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With active collaboration of many students and colleagues

Health Promotion by the local grass-roots NGO, SiRCHESI (Siem Reap Citizens for Health, Educational and Social Issues) shown at Angkor Wat. They offer HIV/AIDS Prevention workshops to groups at risk

k Tie €17/$20  Fold-up hat: €12/$15

Silk Clutch bag: €17/$20
Silk Scarves made at Angkor Wat: €20/$25
Extra large Rajana Fair Trade scarves: €30/$40
Change purse: €7/$10

Bracelets: €1.50, 5 for €6.00, $2.00 each, $6 for $10.00

Silk Key Case: €10/$12  Silk Wallets (n/a)
Silk shoulder bag: €20/$25
Cotton carry-all purse: €20/$25
A memorial list of “beer promotion women” and entertainment industry colleagues in Siem Reap, was prepared by Tra Tim, Pan Sophear and Srei Neang. Presented at www.beergirls.org with “life-stories”, obituaries, and case histories

- Srei Phear 30 yr. Cass Beer (Inbev)
- A. Thear 20 yr. Heineken
- Srei Ni 32 yr. Singha
- Srei Neamb 30 yr. Anchor, Angkor, Spy (July, 2002)
- Neang Pha 25 yr. Red wine
- A. Ny - San Miguel
- A. Vuth - Angkor
- A. Srei 34 yr. Night Club
- A. Ran 31 yr. Bar
- Sophal 33 yr. Bar
- A. Ry -- Bar
- A. Line – Bar
- A. Pha -- Karaoke

23/10/2004
Meghan McCourt had first systematically examined the risks of beer promotion women for HIV/AIDS.

Can research data or evidence be eventually used as part of the political process to change policy and government practice?


Student contributions: Jessica Cadesky (University of Guelph) and Lakshmi Ganapathi (Faculty of Medicine, National University of Singapore) first studied alcohol consumption at Angkor Wat: April, May, 2004.

Jillian Schuster (2006) compared Canadian beer servers to Cambodian beer servers in terms of workplace health and safety differences.
Why are beer promotion women at risk?

Meghan McCourt (Hon. BA Thesis, University of Guelph, 2002) found:
- 33% were single mothers,
- 92% supported families,
- mean age=25

Chronic underpayment (2002):
Average monthly income from beer company=$55;
Average monthly income needed = $110.

In 2004-5, Lakshmi Ganapathi (NUS), Jessica Cadesky, Jillian Schuster and Burgandy Dunn (U of G) with SiRCHESI researchers interviewed 143 Beer Promotion women
- Mean age=25.1 yrs;
- Mean No. dependents = 3.9

Chronic underpayment (2004-5):
Monthly income needed to feed family: $108.85
Earned from selling beer last month: $54.13

Total days worked last month: 27.1
Duration as beer girl: 18.8 months
CDAG/Mondol Moy Health Centre Voluntary Walkin (VCCT) and HSS Random Serology Tests (1995-2003): 20% Beer promoters are HIV+
Trisha Pagnutti and Brett Dickson (2006) recruited beer servers and men customers in Siem Reap restaurants for Blood-Alcohol Level tests using a portable Breathalyzer, donated by Australia’s Alcolizer Testing Co.

Demonstration

Debrief and invite to a Workshop on AIDS and alcohol
Forty-two percent of the beer-serving women are divorced; 31% are single women. The women support, on average, 4.29 dependents other than themselves. On average, these women are selling 9.7 litres of beer, but drank 1.38 litres (5.52 standard drinks); this is 14% of sales. The W.H.O. stipulates a maximum of 10 drinks per week for women, with a maximum of two drinks per day and a minimum of two alcohol free days per week. Siem Reap beer sellers work and drink 27 days per month. In Siem Reap in May 2006, 29 beer promoters drank that night 1.45 liters of beer or 5.8 standard drinks (most measurements were taking between 9pm and 10pm, near the end of their shifts). They reached Blood Alcohol Content Levels of .049, and weigh 51.7 kilos on average.
We first looked at the two major globalized industries which were making money from Siem Reap’s tourism boom.

Beer industry: Characterized by slow steps, conflict and recalcitrance, non-unionized, professional association (BSIC) since Nov., 2006

Hotel industry: Positive cooperation, formed community Partnerships, partially unionized, professional association (CAHO)

Problem: How can we prod each industry to become community “vanguards” in providing safe and healthy careers and workplaces for women, at a “living wage” of $110 monthly?

How can health promotion programs be made self-sustaining in a community with few resources?
In Cambodia, beer promotion women are paid, on average, US $55 monthly, either on a salaried contract basis with or without bonus for sales beyond quota; or a “per case” commission. They work an average of 27-28 days per month (Lubek et al, 2004; McCourt, 2002).

In contrast, Canadian beer promotion women are hired, many part-time or on short-term contracts, and paid an average of CA $15 dollars an hour.

Canadian beerservers, selling multiple brands, make approximately $63 per shift in wages and up to $200 in tips.

Singapore beer promoters report receiving about $50 (Singapore) for a 4 hour shift.
Jillian Schuster (2006) found that Cambodian beer servers were underpaid by half; Canadian servers earned twice their needs.

71% of Cambodian servers sold sex to make up their deficit; 0% of the Canadian servers did this.
SiRCHESI midwife Savun Touch with Dr. Mee Lian Wong at Mondol Moi STI clinic where annually 560 behavioural questionnaires are gathered in interviews conducted by Savun. The questionnaires were then taken to Singapore for entry and analysis, but now local staff enter the data in Siem Reap into Excel and SPSS.