



# **Health impacts of the criminalisation of sex work**

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RESEARCH ARTICLE

# Associations between sex work laws and sex workers' health: A systematic review and meta-analysis of quantitative and qualitative studies

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- **What are the health effects of sex work laws and policing?**
- **Lack of evidence outside field of HIV**
- **Broad definition of health**
- **Community advisory board**
  - sex workers and academics across Kenya, UK, USA and Canada

# Review methods

## Aim

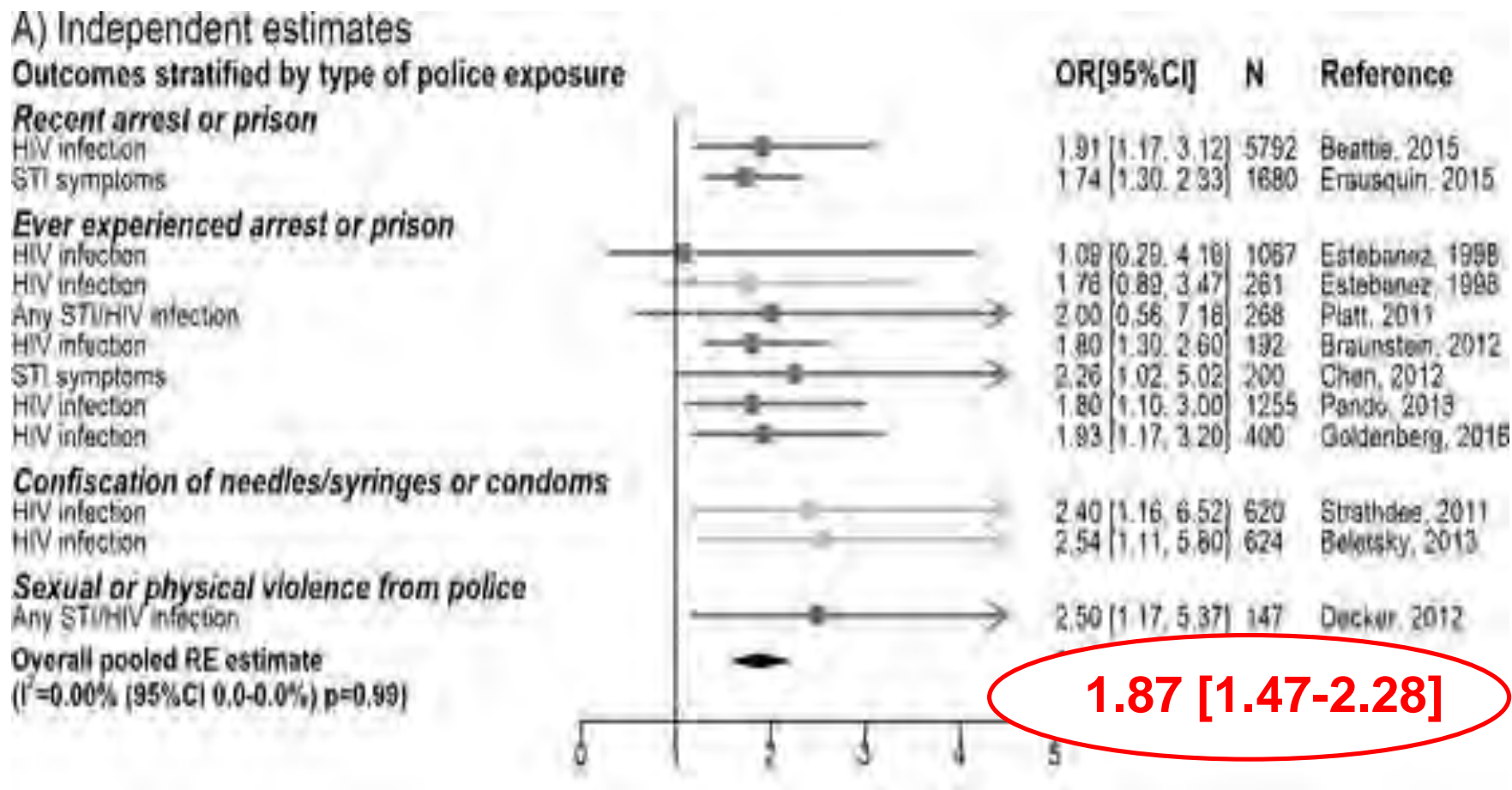
- Measure the magnitude of associations between (de) criminalisation and sex workers' health, safety and access to health & social care
- Understand the processes and pathways through which this occurs

**All sex workers:** cis and trans-men and women, who have ever or currently exchanged sex

**Policy models:** Full criminalisation, Partial criminalisation, Criminalisation of clients, Regulation, Decriminalisation

- Mixed method review
- Public health and social sciences database (1990-2018)
- 9148 records, we included 86 studies across 33 countries
- 40 Quantitative -> Meta-analyses, narrative synthesis
- 46 Qualitative -> Thematic analysis across 2199 interviews

# Associations between repressive policing actions on HIV and STIs

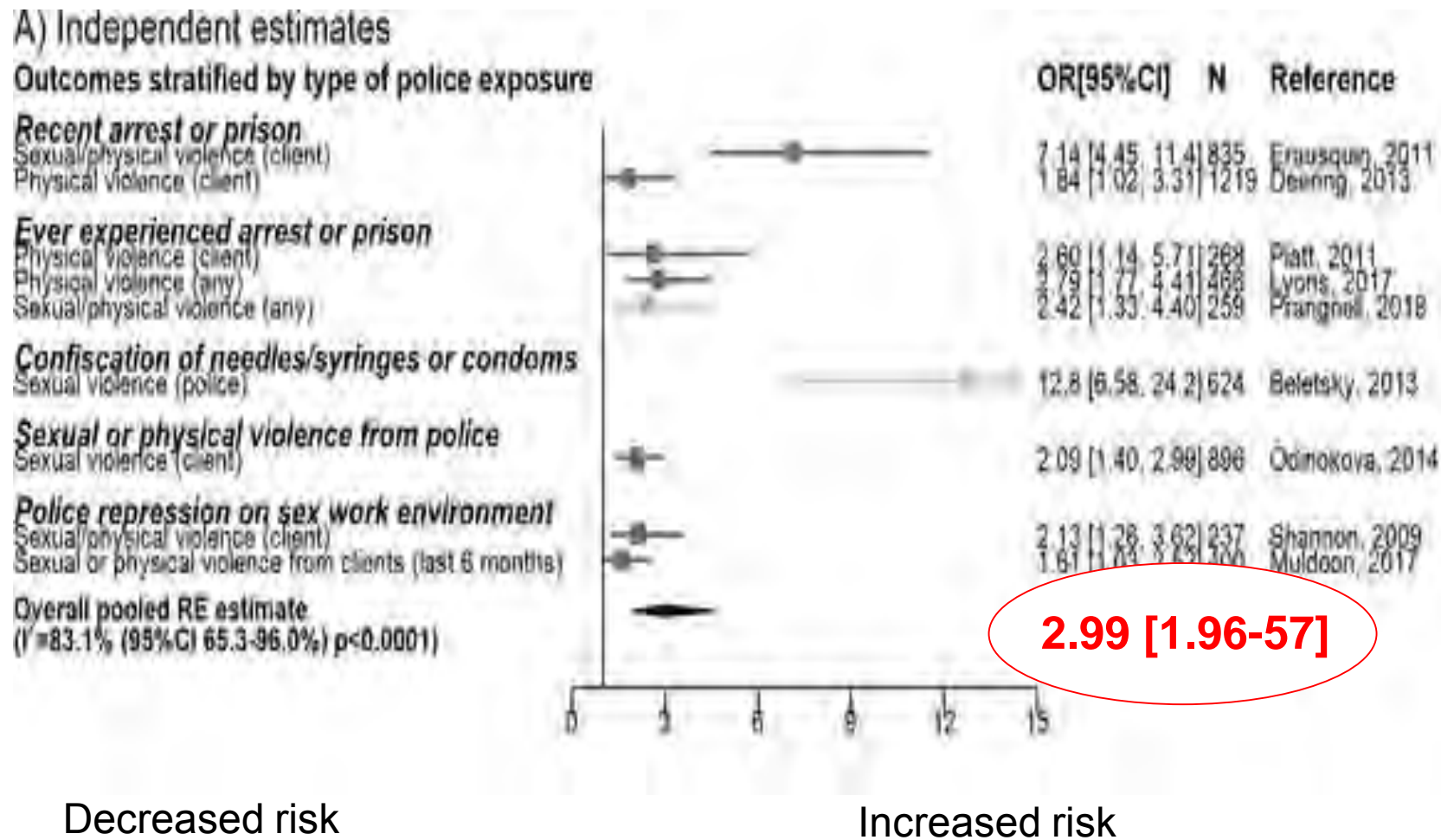


Decreased risk

Increased risk

12 studies, 12406 participants

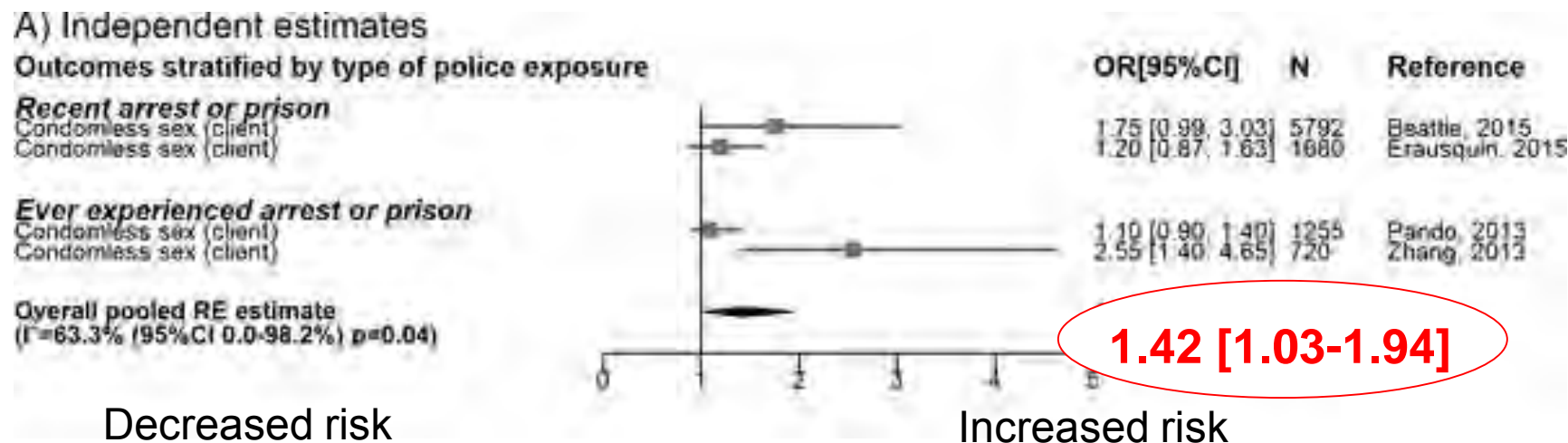
# Association between repressive policing actions and sexual/physical violence from clients, intimate partners, and others



9 studies 4290 participants



## Associations between repressive policing actions and condomless sex with clients across 4 studies



**4 studies 9477 participants**

**Mental health**: 3 studies, India and Canada both found (un)lawful arrest and recent incarceration to be associated with poor mental health outcomes

**Drug use**: 5 studies in Canada, Iran, Mexico, Russia  
 Non-prescription opioid & excessive alcohol use  
 Public injection; injecting in the groin

# Displacement



‘Sometimes the guy will drive up and just sort of wave or point to go down the alley or something like that somewhere else where he can pick me up.’

*[How does that affect your safety?]*

**‘You never know who it is, right? And you can’t really see his face, can’t really see anything they could have a gun in their hand or. You know what I mean they could be a little drunk or something if you can’t really see them very clearly, you know. And you don’t you can’t say hi or whatever before you get in. You have to just hurry up before the cops come.’**

Cis woman, street, age unknown, Canada

Krusi et al, 2014

- **Displacement to isolated areas**
- **Rushed screening and negotiation**
- **Discourages carrying condoms**

# Institutionalising violence



‘One night a client went off with a girl, and after their encounter he beat her. The next day she recognised him in the bar and told the bar owner who told her to go to the police. **When she got to the police station the officers didn’t believe her—they said she didn’t have any proof. The police don’t give us any help at all.**’

cis woman, working in a bar with registration, age not specified, Senegal

Foley et al, 2010

- **Police violence, extortion and discrimination was ubiquitous**
- **Across diverse political and economic contexts**



# Reproducing inequalities



‘Sometimes a man will take you and after fucking, he says, “You are gay, where can you report me? **I’m not paying you and you can do nothing about it.**”’

Cis man, age and sector not specified, Uganda

Scorgie et al, 2013

‘Because it wasn’t a trial of rape, **it was a trial of me being a heroin addict, me being on methadone.** It got thrown out of court. . .’

cis woman, street, age unspecified, Canada

Shannon et al, 2008

- **Increasing stigma and inequality**

# Access to services



‘Since the new law was passed, fewer women access health care and prevention services because we live at different places nowadays and NGOs could not find us. In the past, women live in one place at the brothel. **We also want to contact NGOs but we don’t know the location of the NGOs. . .So we could not access to prevention services. . .Since the brothel was closed I have never contacted it again.**’

Cis woman, brothel, age 22 years, Cambodia

Maher, 2018

- **Disruption of peer networks**
- **Hindering collective organization and outreach delivery**

# Policy models



## **Criminalisation of clients**

- No reduction in violence
- No increased access to services

## **Decriminalisation**

- Better able to refuse clients
- Better relationship with the police

## **Regulatory models**

- Enable access to safe working conditions for some
- Two tiered system - exclusion of the majority

# Conclusions & Recommendations



- Limitations -> little evidence from decriminalized settings or where purchase of sex is criminalized alone, among trans women, cis men, none among trans men
- Most (quantitative) studies don't explore how criminalisation/policing interact with other issues (e.g. stigma, immigration, austerity, working conditions, community organising) to affect sex workers' safety and health
- Full decriminalisation, with policies to address structural inequalities
- Criminalisation normalises violence
- Changes in law alone not enough
  - Wide action to tackle stigma, discrimination and exclusion
  - Anti-discrimination, anti-hate crime, inclusive housing, welfare and immigration
  - Addressing cultures of stigma within broader society and institutions
- Specialist and sex worker-led projects and initiatives– sustained funding
- Participatory research to inform locally relevant interventions and legal reform

# Acknowledgements and links



Funding for the study was provided by **Open Society Foundations**, and by the **UK Department for International Development** as part of **STRIVE**, a six year programme of research and action to tackle the structural drivers of HIV.

The full publication can be found here:

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002680>

The policy brief here:

<http://eastlondonproject.lshtm.ac.uk/news/>







# High levels of police contact and violence among a diverse sample of sex workers in East London: baseline results from an epidemiological cohort study

Jocelyn Elmes\*, Rachel Stuart\*, MD Sakikuzzaman Sarker, Kathleen Hill, Pippa Grenfell, Lucy Platt and East London project cohort research team

\*Presenting

LEPH Conference 22<sup>nd</sup> October 2019

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# East London project aims and objectives

ELP project aim: To evaluate **how removing sex work related police enforcement could affect** sex workers' experiences of **violence, physical, sexual and emotional health** and **access to** health and social care **services** in East London (Hackney, Newham and Tower Hamlets)

Epidemiological cohort study aim: Measure the association between police enforcement practices and violence, STI/HIV, physical and emotional health and access to services over two time points

- Sex workers experiencing enforcement are more vulnerable to violence, sexual and emotional ill-health. Criminalisation also exacerbates existing problems (e.g. housing & financial insecurity, stigma)(Platt et al 2018; Presentation C13.2)
- Sex work is partially criminalised in the UK; historically women soliciting in public were particularly criminalised and current legislation continues this but also emphasises arresting customers. National Police guidance recommends prioritising safety over enforcement
- Need for UK-specific data on effects of criminalisation on sex workers' safety, health and access to services, to inform policy

As a multi disciplinary study we have used a criminology framework to also examine the social harms that are caused by law enforcement .

The women in this study often experience greater harms as a consequence of legislation and policing than those they are purported to be committing

The legislation and enforcement of sex workers is not being recognised as harmful, rather is positioned as protecting vulnerable women (National Police guidance).

Policy debates and enforcement emphasise violence from clients over interpersonal violence from other perpetrators or the multiple social harms experienced by sex workers especially at street level

This research will demonstrate that women already experiencing high levels of social exclusion and health inequalities are exposed to greater levels of violence as a result of policing.

- Participatory research approach
- Eligibility: all genders, nationalities, work in East London in the previous 3 months and  $\geq 18$  years old.
- Probabilistic sampling and convenience sampling to recruit sex workers across sectors (e.g. street, flats, saunas, NHS-clinics, snowball sampling)
- Interviewer administered and self-administered questionnaires on tablets or online

## Results included in this presentation

- Prevalence of violence stratified by self-reported place of work (street and off-street), levels of police contact and structural inequalities among women who sell sex on the street; independent associations (e.g. relative risk and 95%CI) between recent police contact, and violence by clients and strangers.

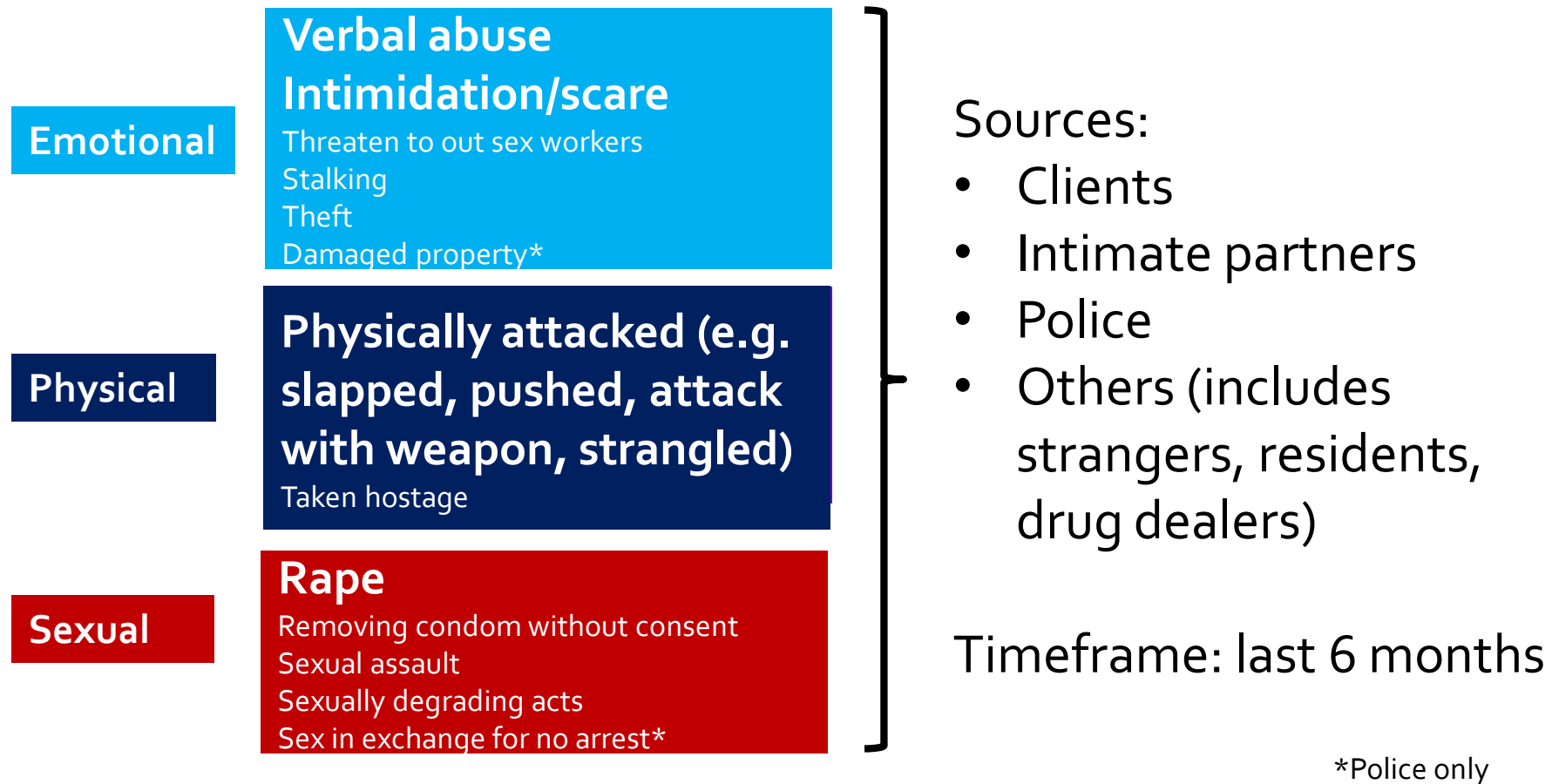


# Baseline results: sample characteristics

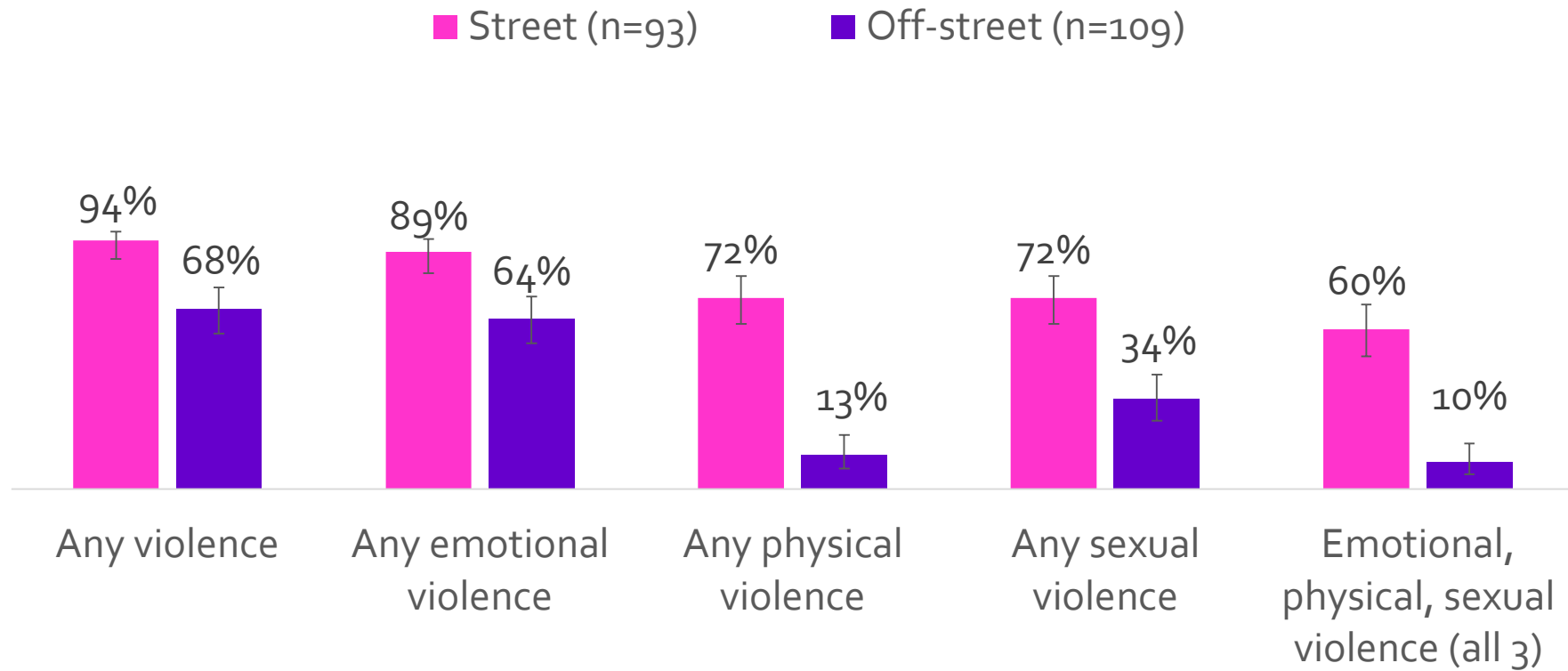
Characteristic		Off-street (n=178) % or median (range)	Street (n=106) % or median (range)
Gender	Cis-female	62%	89%
	Cis-male	29%	8%
	Trans/gender non-binary <sup>1</sup>	8%	<5
Ethnicity	Asian/Asian British	4%	6%
	Black/African/Caribbean/Black British		
	British	4%	17%
	Mixed/Multiple ethnicities	7%	10%
	White	81%	63%
	Other ethnicities	4%	5%
Country of birth (Total 50 countries)	UK <sup>2</sup>	39%	76%
	Europe (not including UK)	38%	12%
	Outside Europe	22%	11%
Age in years		28 (18-63)	37 (18-58)
Duration in sex work in years		4 (0-38)	15 (0-45)

<sup>1</sup>Presented together because of small numbers; <sup>2</sup>UK includes England, Scotland, Wales and Northern Ireland;  
Numbers may not sum to total because of missingness

# Definition of violence from different sources



# Overall violence experienced by women in the last 6 months (any source)

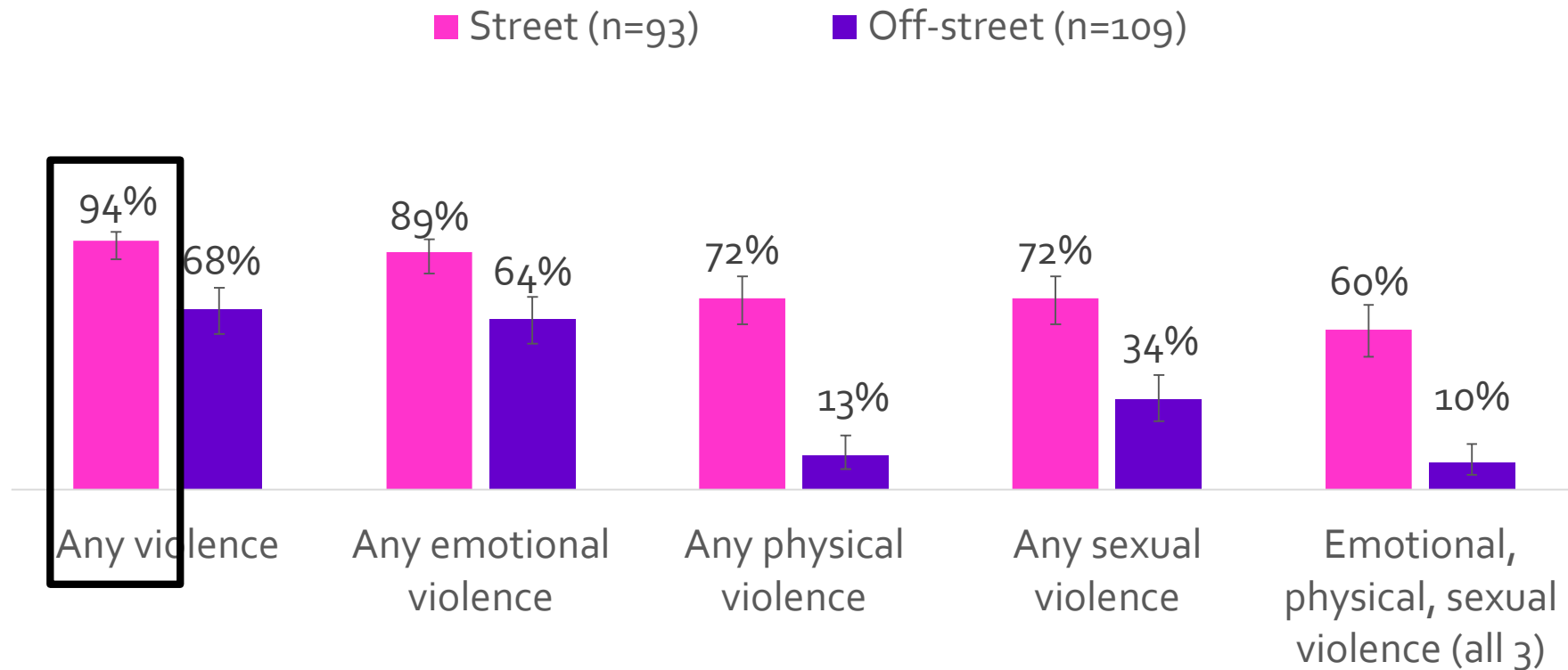


\*Levels of violence based on answers to the full set of violence questions asked

Presented percentages do not sum to 100 due to overlapping violence

Error bars are 95% CI

# Overall violence experienced by women in the last 6 months (any source)

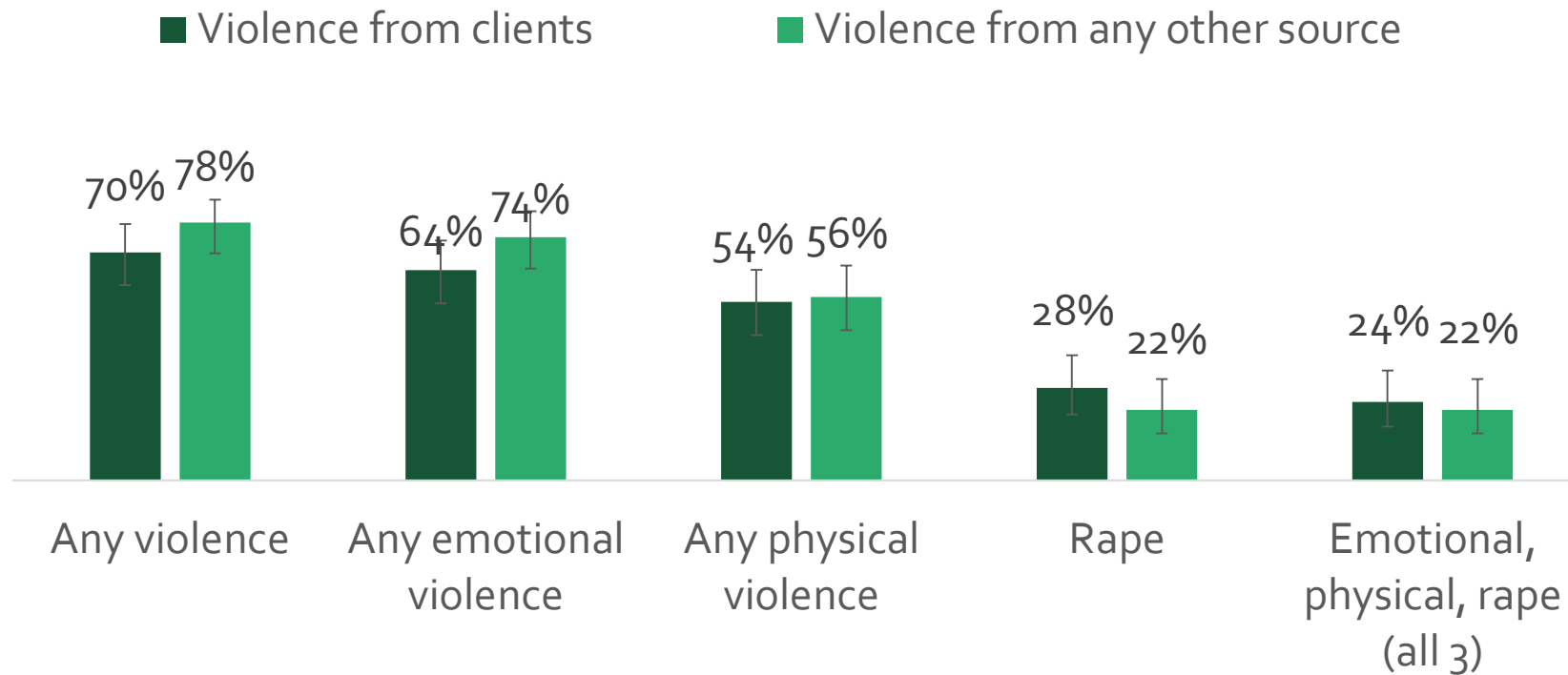


\*Levels of violence based on answers to the full set of violence questions asked

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Error bars are 95% CI

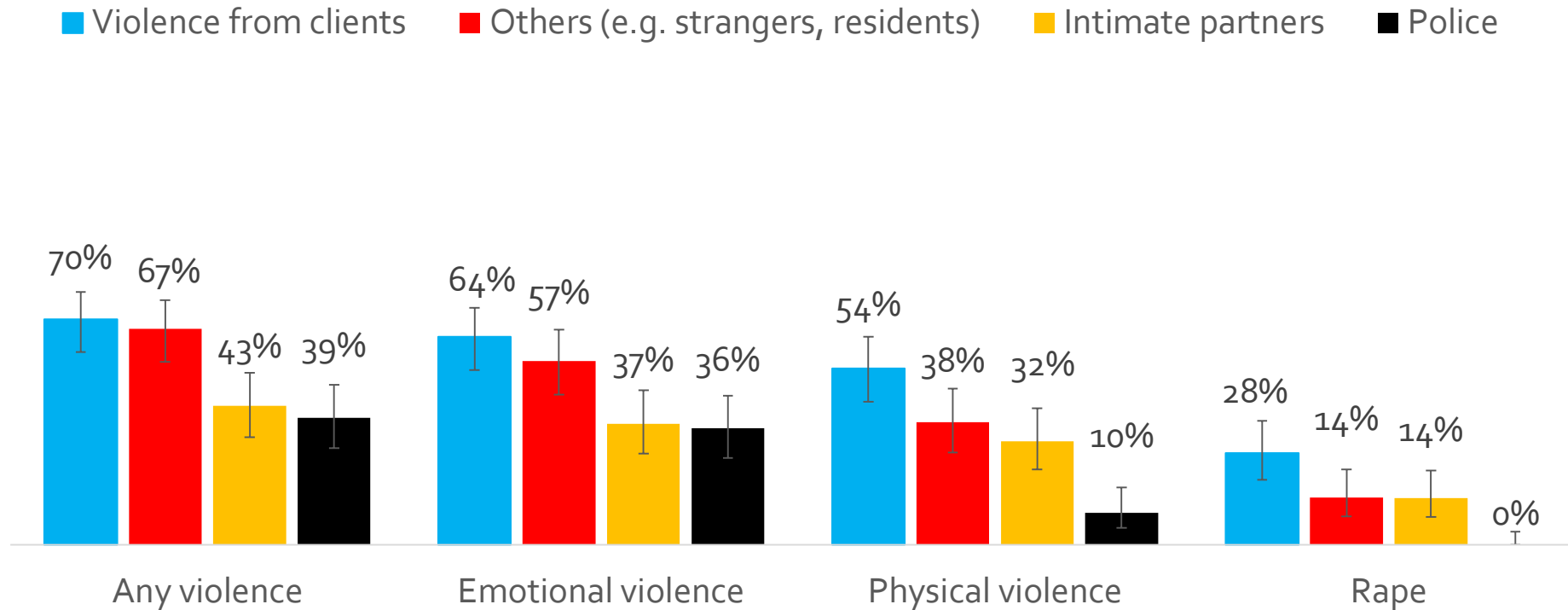
# Sources of violence experienced in the last 6 months by women working on the street (1)



Levels of violence based on answers to comparable subset of violence questions

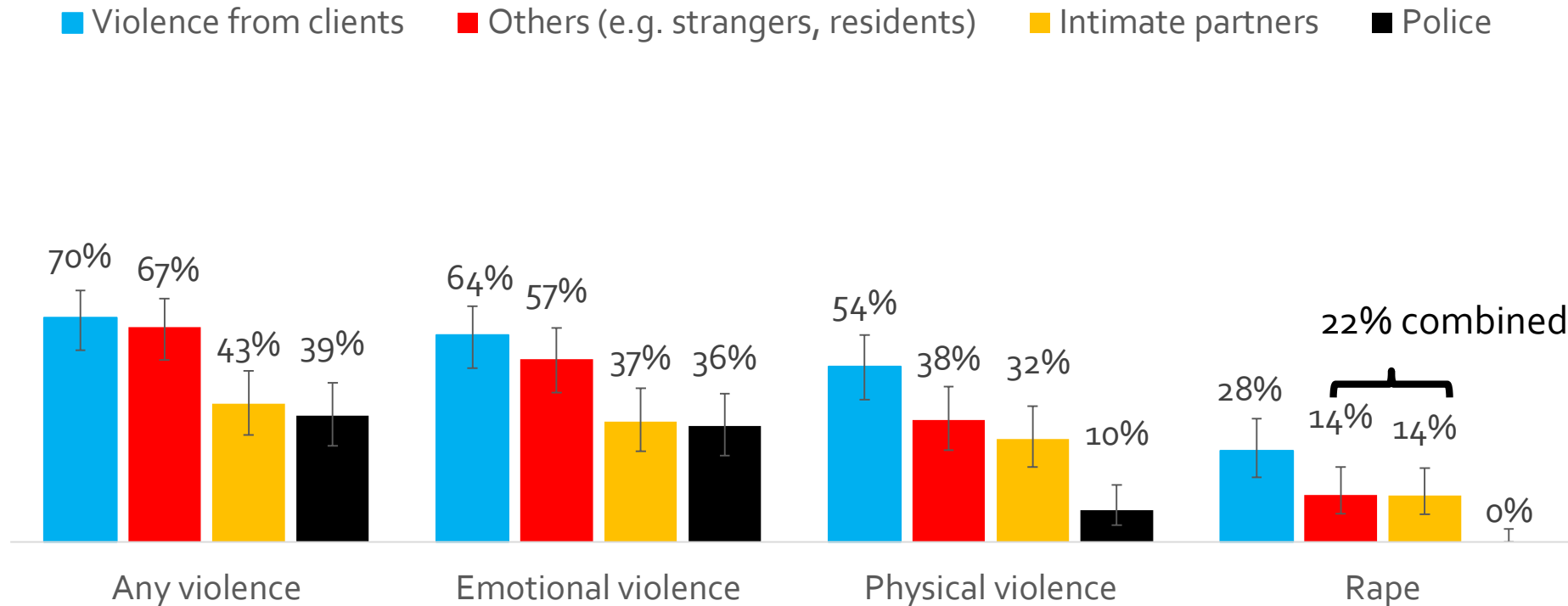


# Sources of violence experienced in the last 6 months by women working on the street (2)



Levels of violence based on answers to comparable subset of violence questions

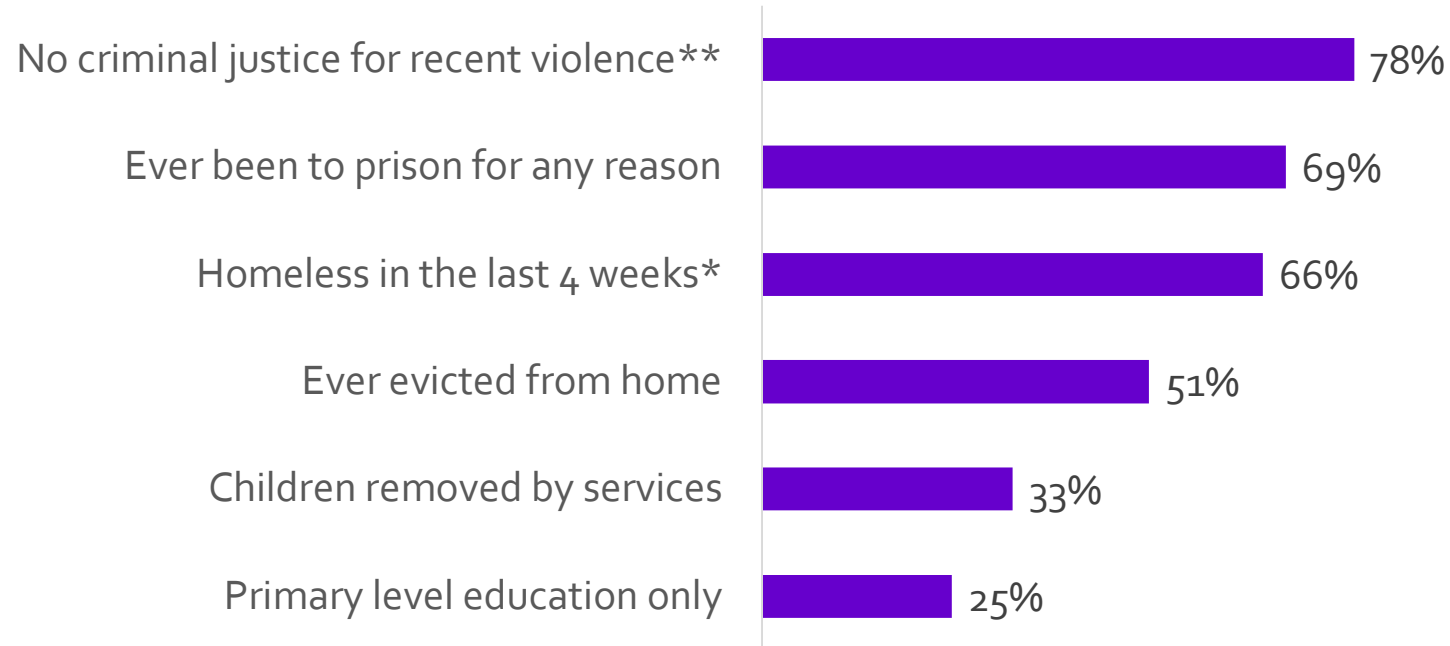
# Sources of violence experienced in the last 6 months by women working on the street (2)



Levels of violence based on answers to comparable subset of violence questions

**\*7% report sexual assault by police**

# Social harms, women working on the street



\*\* defined as not reporting recent violence to police, or when reported police not taking any action or arresting the respondent


\*Mostly slept in last 4 weeks: sleeping rough, temporary accommodation, sleeping on someone's sofa, someone else's home, homeless hostel, women's shelter, squatting, emergency accommodation

# Recent police enforcement experienced by women working on the street

87% experienced any law enforcement in last 6 months (displacement from place of work, arrest for any reason, caution/warning/notice, confiscation (condoms, money, drugs, drugs equipment))

## As victims of crime

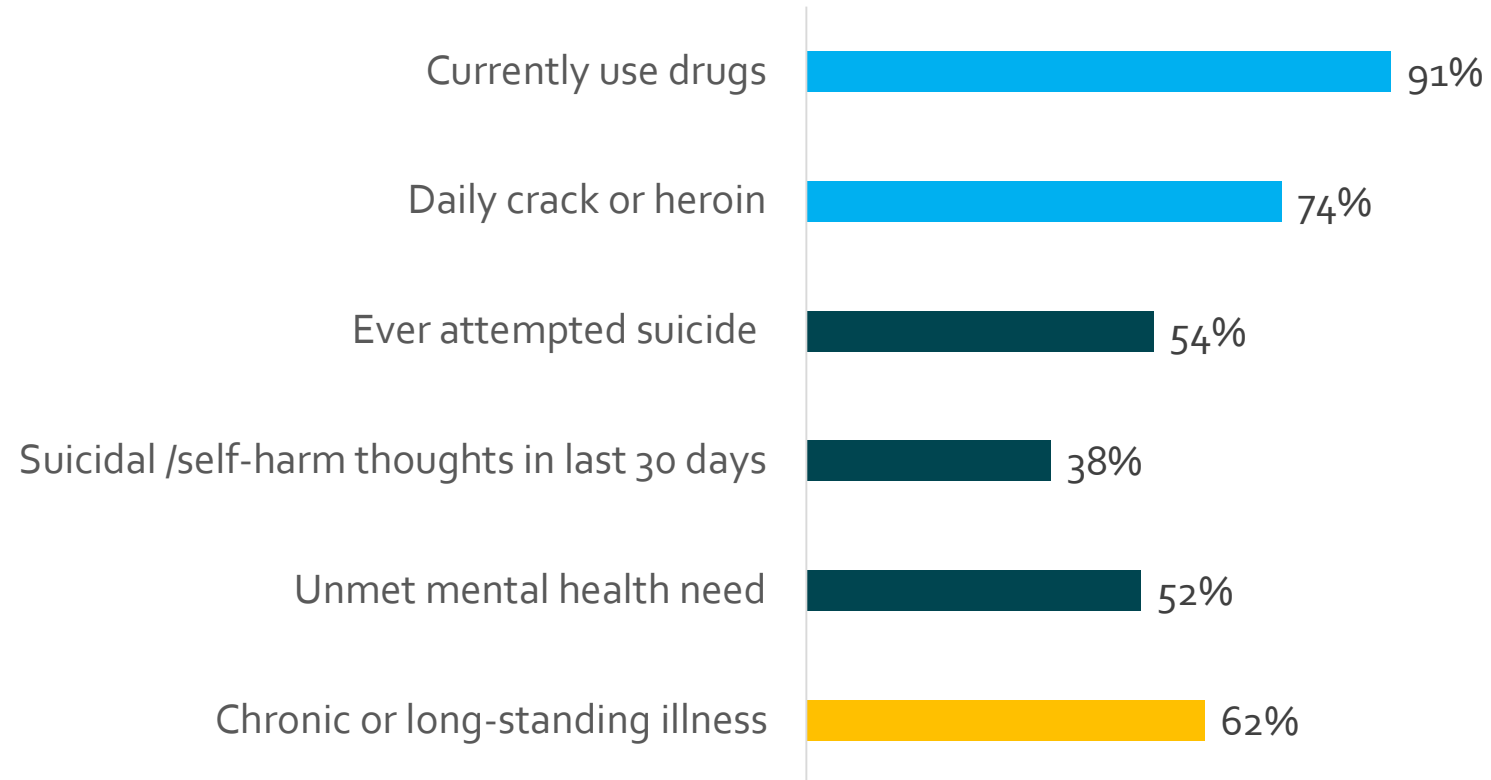
80% did not report No criminal justice for recent violence\*\*



Category	Percentage
No criminal justice for recent violence**	78%

Of those that did report, 31% police took no action, 31% police arrested the respondent

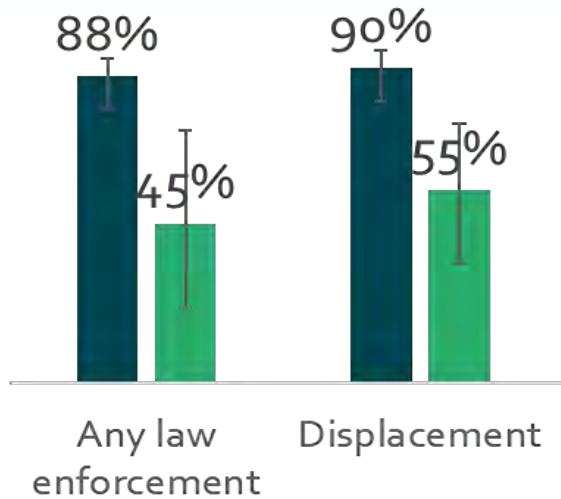
# Health indicators, women working on the street





# Independent correlates of recent client violence

Percent experiencing client violence



■ Experienced enforcement  
■ Did not experience enforcement

Women who had been **moved on by police** had **~50% higher levels of violence from clients** than women who had not been moved on

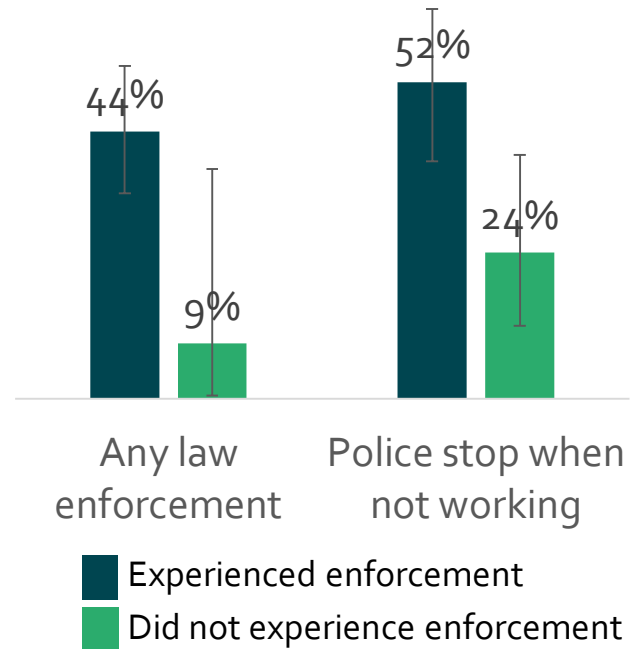
(aRR=1.5, 95%CI 1.0, 2.2 p=0.04)\*

Homeless women (aRR=1.3, 95%CI 1.1,1.5)\* and women with unmet mental health need (aRR=1.2, 95%CI 1.0,1.5)\* also had higher levels of violence from clients than women who were not homeless or who had mental health needs met

\*adjusting for duration in sex work, unmet mental health need and current homelessness

# Independent correlates of recent violence from strangers

Percent experiencing violence from strangers



Women who had been **approached and stopped by police when not working** had **~100% higher risk of violence from strangers** than women who had not been approached

(aRR=2.0, 95% CI 1.0,3.8; p=0.05 adjusting for duration in sex work, self-reported health status)

- This cohort experiences shocking inequalities in housing, mental health, as well as physical health.
- Policing exacerbates these inequalities by increasing violence from clients as well as a number of other perpetrators including police.
- The government approach to sex work fails to address the high levels violence from multiple perpetrators including the police. Instead, choosing to focus on their identities as sex workers fails to recognise them as members of the community with complex needs.
- Tunnel vision legislation pushes sex workers towards rapidly shrinking specialist services configured around sexual health while neglecting all of these other social harms, an approach which in itself is criminogenic.

# Acknowledgements



Thank you to everyone who participated in the study

East London project team: MD Sakikuzzaman Sarker, Kathleen Hill, Chrissy Browne, Paz Hernandez, Keely Tarrant, Venetia Clarke, Carolyn Henham, Sibio Mtetwa, Elesha Vooght, Chelsea Ziegler, Josephine Walker

East London project collaborators and co-investigators: Dr Sarah Creighton, Kim Leverett, Maggie O'Neill, Peter Vickerman, MC Boily

East London project key partners: Open Doors, Homerton Hospital, Barts Royal London Hospital, National Ugly Mugs

East London project advisory group

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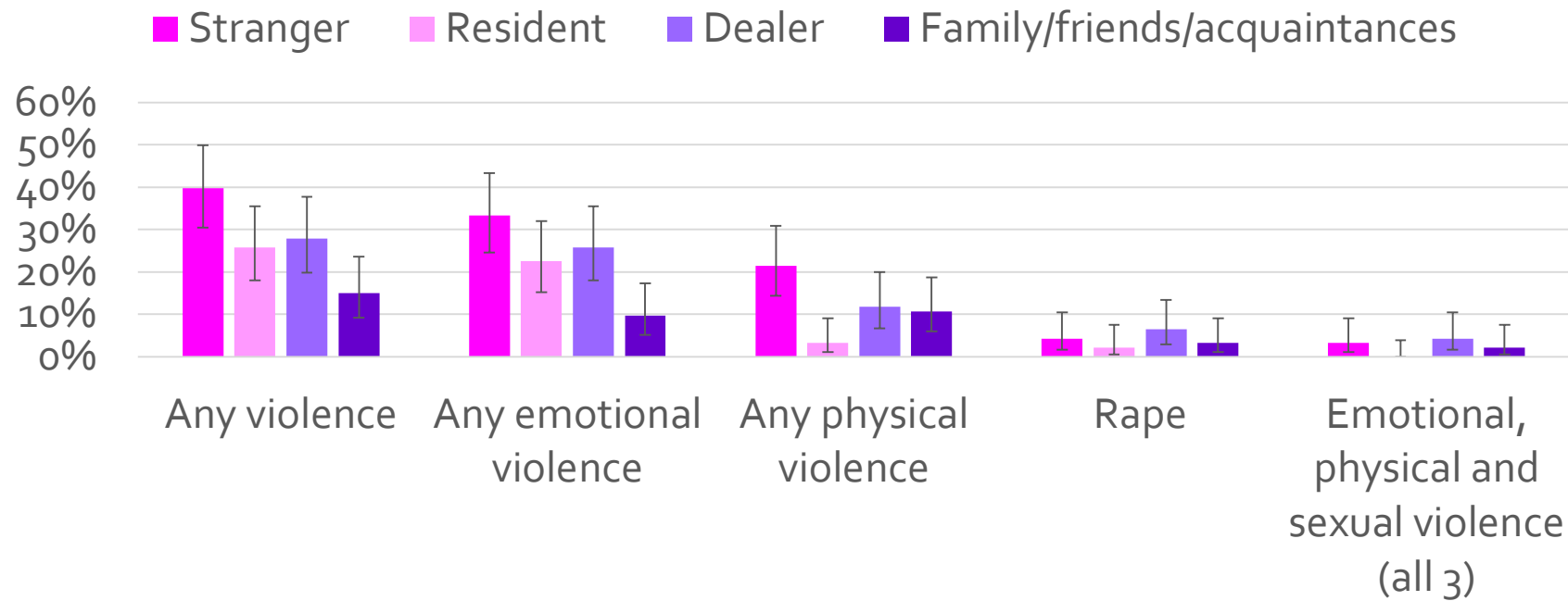
# Extra slides

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# Sources of violence from others

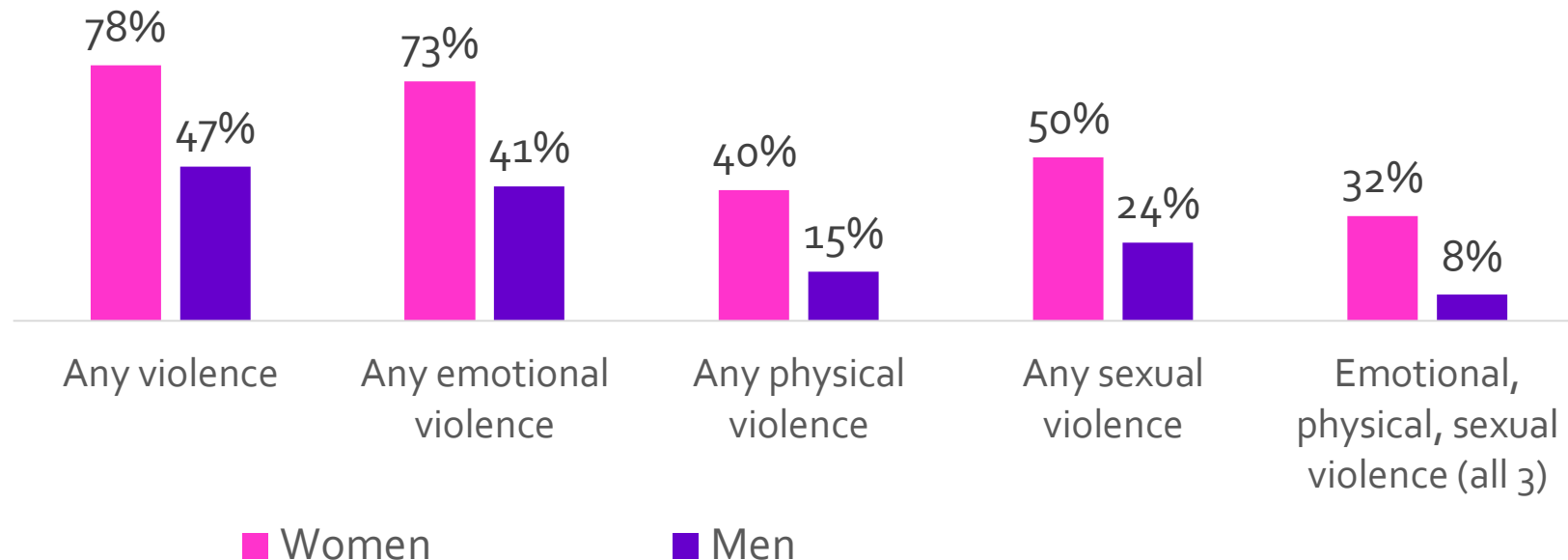
Sources of violence from others\* in the last 6 months reported by women working on the street



\*Levels of violence based on answers to comparable subset of violence questions

# Violence among women and men

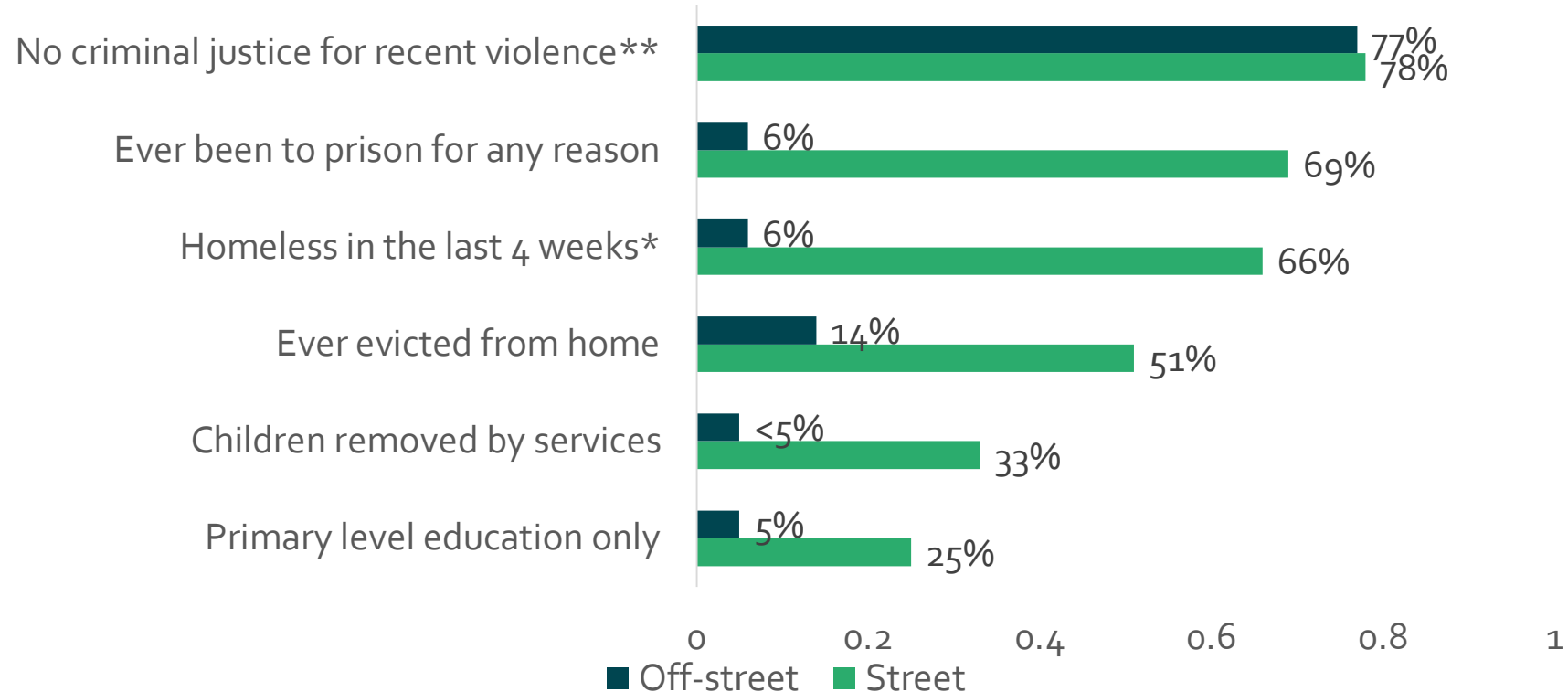
Experiences of violence from any perpetrator in the last 6 months reported by women and men



Presented percentages do not sum to 100 because overlapping violence



# Social harms – street and off-street

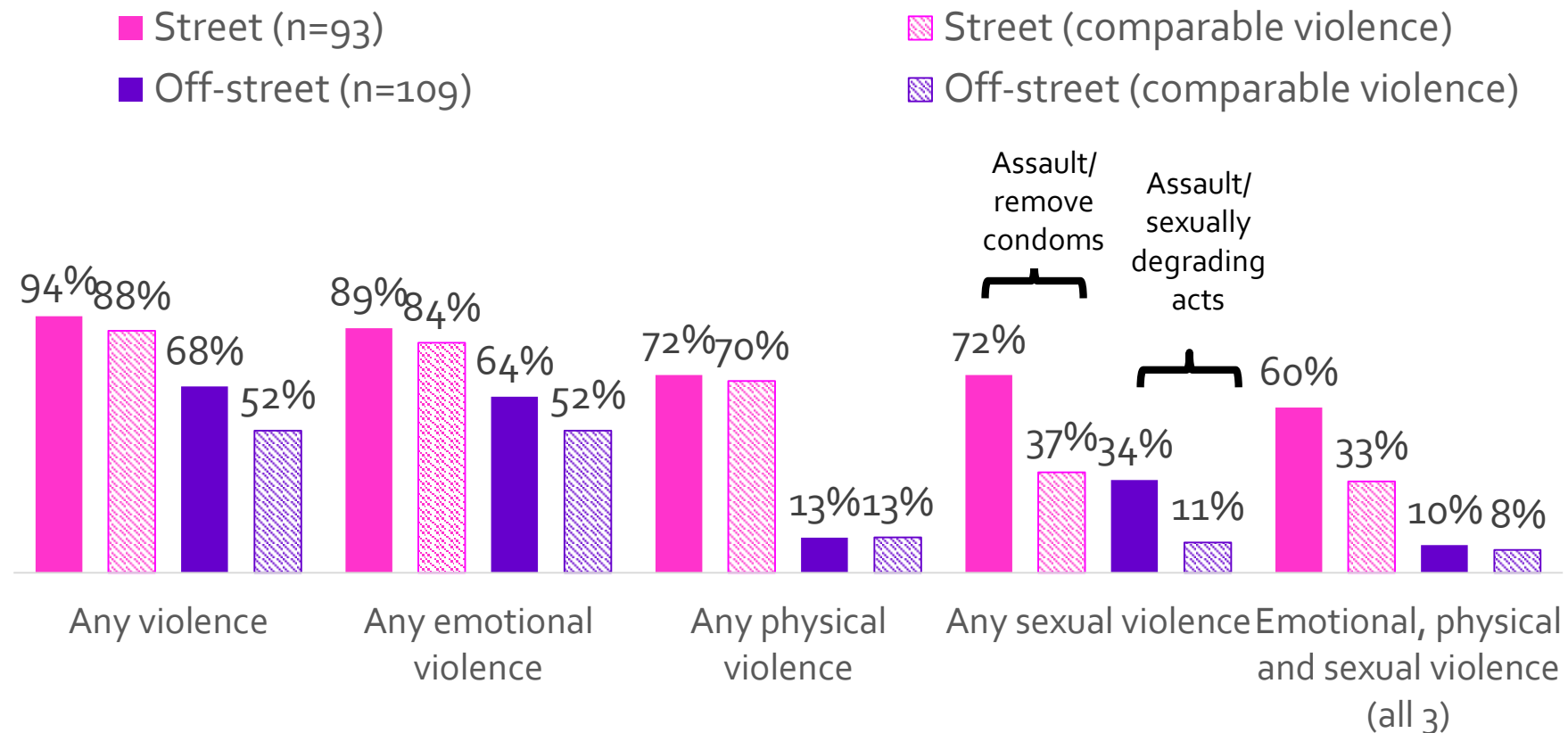


\*\* defined as not reporting recent violence to police, or when reported police not taking any action or arresting the respondent

\*Mostly slept in last 4 weeks: sleeping rough, temporary accommodation, sleeping on someone's sofa, someone else's home, homeless hostel, women's shelter, squatting, emergency accommodation

# Full set of violence questions and subset compared

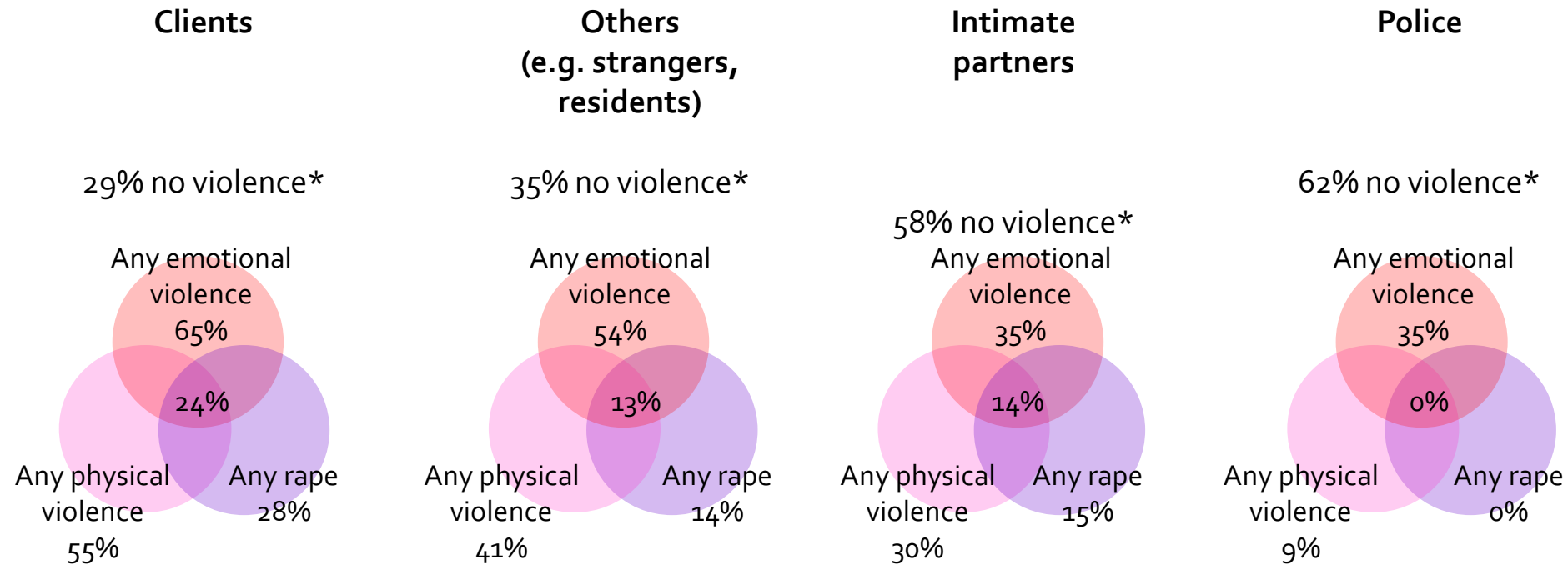
Experiences of violence from any source in the last 6 months reported by women



Presented percentages do not sum to 100 because overlapping violence

# Overlapping violence

Experiences of violence from any source in the last 6 months reported by women working on the street



\*Responded no to all questions asked

Presented percentages may not sum to 100 due to rounding

	Any law enforcement	88%
	Police approach and talk to sex worker while they are working	82%
87%	Displacement (moved on from place where working/raided premises)	78%
	Arrest	49%
	Caution, warning, notice	41%
	Confiscation (condoms, money, drugs, drug equipment)	36%
	Client arrest	33%
	Referral to services	15%

**24% had been talked to while working, displaced, arrested, cautioned, and had items confiscated**

**9% had ever but not recently experienced any enforcement**

# Factors associated with recent client violence

Factor	% violence from clients	Adjusted Relative risk*	95% CI	P-value
Unmet mental health need				
No	71%	1		
Yes	90%	1.3	1.1, 1.5	0.01
Homeless in last 4 weeks				
No	71%	1		
Yes	87%	1.2	1.0, 1.5	0.06
Displacement from place of work in last six months				
No	55%	1		
Yes	89%	1.5	1.0, 2.2	0.04

\*adjusted for duration in sex work, unmet mental health need, homelessness, displacement

# Factors associated with recent violence from strangers

Factors	% Violence from strangers	Adjusted relative risk*	95%CI	P-value
General health				
Fair, good or very good	32%	1		
Bad or very bad	55%	1.6	1.0, 2.5	0.04
Police approach and stop respondent when not working				
No	24%	1		
Yes	52%	2.0	1.0, 3.8	0.05

\*adjusted for duration in sex work, self-reported health status, police approach when not working

# Systemic exclusion over the lifetime detail

Education level, prison ever, daily crack / heroin use, children removed by social services. Recent suicidal/self-harm thoughts, Unmet criminal justice, wanted support fro mental health concern but not received it

Characteristics continued	Indoor	Ind %	Outdoor	Out %
I receive state benefits		24	13	52
To what extent is your household able to make ends meet		97	54	71
With some to great difficulty				
Have ever had children removed by social services	2	1	26	27
Suicidal/self-harm thoughts (last 30 days)	31	17	34	35
Receiving support for mental health concern	43	24	34	35
Wanted support for mental health concern but not received it (last 6months)	40	22	46	47
Served a prison sentence	3	2	16	16
Daily crack / heroin use				
Lack of access to criminal justice*				



# Independent correlates of recent client violence

Any client violence was ~50% higher among women who were displaced from a place of work by police than women who had not been displaced (RR=1.5, 95%CI 1.0, 2.2 p=0.04) (adjusting for duration in sex work, unmet mental health need and current homelessness)

Any client violence was also higher in those with unmet mental health need (RR=1.3, 95%CI 1.1,1.5) and who were homeless (RR=1.2, 95%CI 1.0,1.5)

Independent variables	Any client violence				Any physical or sexual violence from clients			
	Odds ratio (95%CI)	P-value	Relative risk (95%CI)	P-value	Odds ratio (95%CI)	P-value	Relative risk (95%CI)	P-value
Black ethnicity (ref = white)					0.2 (0.03, 1.1)	0.06	0.7 (0.5, 1.0)	0.06
Asian, mixed or other ethnicity (ref = white)					0.1 (0.02, 0.6)	0.01	0.7 (0.5, 1.0)	0.04
Unmet mental health need	6.8 (1.6, 38.2)	0.02	1.3 (1.1, 1.5)	0.01	6.3 (1.8, 27)	0.007	1.4 (1.1, 1.8)	0.008
Homeless in last 4 weeks	4.2 (1.0, 20)	0.05	1.2 (1.0, 1.5)	0.06	6.1 (1.7, 26)	0.008	1.5 (1.1, 2.0)	0.01
Displacement from place of work in last six months	5.5 (1.4, 23)	0.02	1.5 (1.0, 2.2)	0.04	6.7 (1.7, 31)	0.01	1.7 (1.0, 2.8)	0.03

# Independent correlates of recent violence from strangers

In multivariable models women who had been approached and stopped by police when not working had ~160% higher risk of violence from strangers than women who had not been approached (adjusting for duration in sex work, daily crack or heroin use)

Independent variables	Any stranger violence			
	Odds ratio* (95%CI)	P-value	Relative risk* (95%CI)	P-value
Currently on drug substitution	0.25 (0.05, 1.1)	0.07	0.5 (0.3, 1.2)	0.12
Bad or very bad health (ref= fair to very good health)	5.3 (1.4, 23)	0.02	1.8 (1.1, 2.9)	0.02
Police approach and stop respondent when not working	5.9 (1.3, 34)	0.03	2.6 (0.9, 7.2)	0.07

# Independent correlates of recent client violence (comparable set)

Any client violence was ~60% higher among women who were displaced from a place of work by police than women who had not been displaced (RR=1.6, 95%CI 1.0, 2.5 p=0.07) (adjusting for duration in sex work, unmet mental health need)

Any client violence was also higher in those with unmet mental health need (RR=1.3, 95%CI 1.1,1.7) and ~30% lower in those who had been in sex work longer than 15 years (RR=0.7, 95%CI 0.5,0.9) than those who had been in sex work for 15 years or less

Independent variables	Any client violence			
	Odds ratio (95%CI)	P-value	Relative risk (95%CI)	P-value
Duration in sex work longer than 15 years (Ref= 15 years or less)	0.25 (0.08,0.7)	0.01	0.7 (0.5,0.9)	0.01
Unmet mental health need	2.6 (1.0, 7.4)	0.07	1.3 (1.0, 1.7)	0.08
Displacement from place of work in last six months	3.8 (1.2,12.6)	0.02	1.6 (1.0, 2.5)	0.07

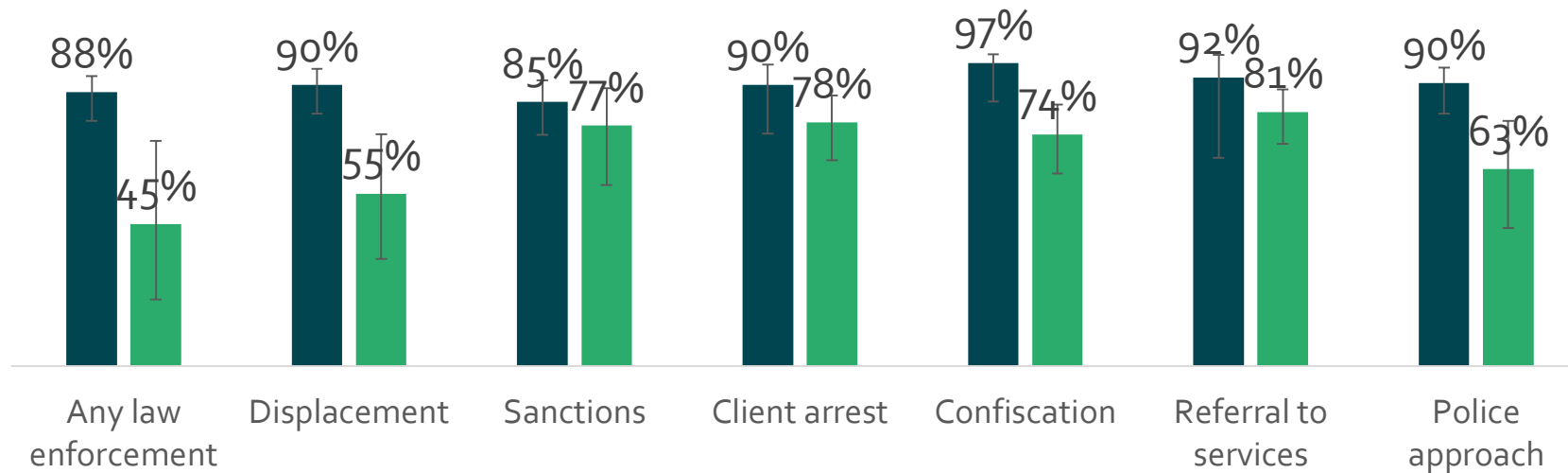
# Independent correlates of any others

In multivariable models women who had been given a sanction by police in last 6 months had ~40% higher risk of violence from any other perpetrator than women who had not (adjusting for duration in sex work, daily crack or heroin use and lack of access to criminal justice)

Independent variables	Any other perpetrator			
	Odds ratio (95%CI)	P-value	Relative risk (95%CI)	P-value
Duration in sex work longer than 15 years (Ref= 15 years or less)	0.7 (0.3, 1.9)	0.5	0.9 (0.7,1.2)	0.5
Unmet criminal justice	3.1 (1, 10)	0.05	1.6 (0.9,2.6)	0.1
Daily crack or heroin use	2.1 (0.8,6.0)	0.15	1.3 (0.9,2.0)	0.18
Sanctions (arrest, caution)	2.6 (0.9,7)	0.07	1.4 (0.9,2)	0.09

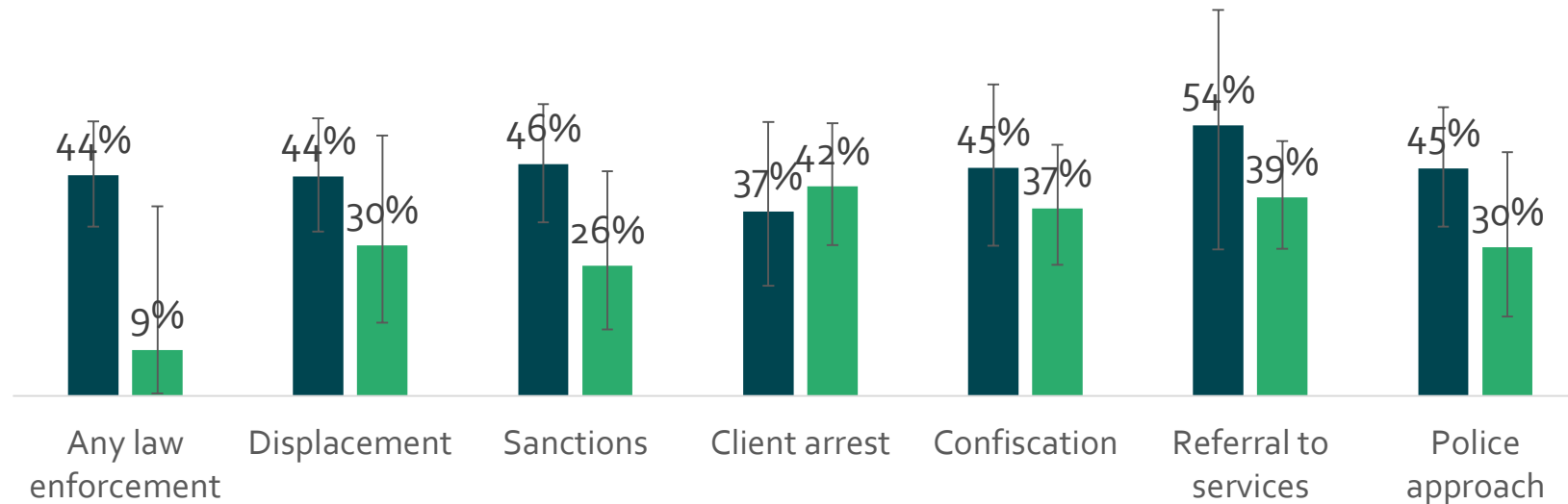
# Prevalence of violence by police enforcement

Any client violence in last 6 months experienced by women working on the street across different types of police enforcement experienced in last 6 months



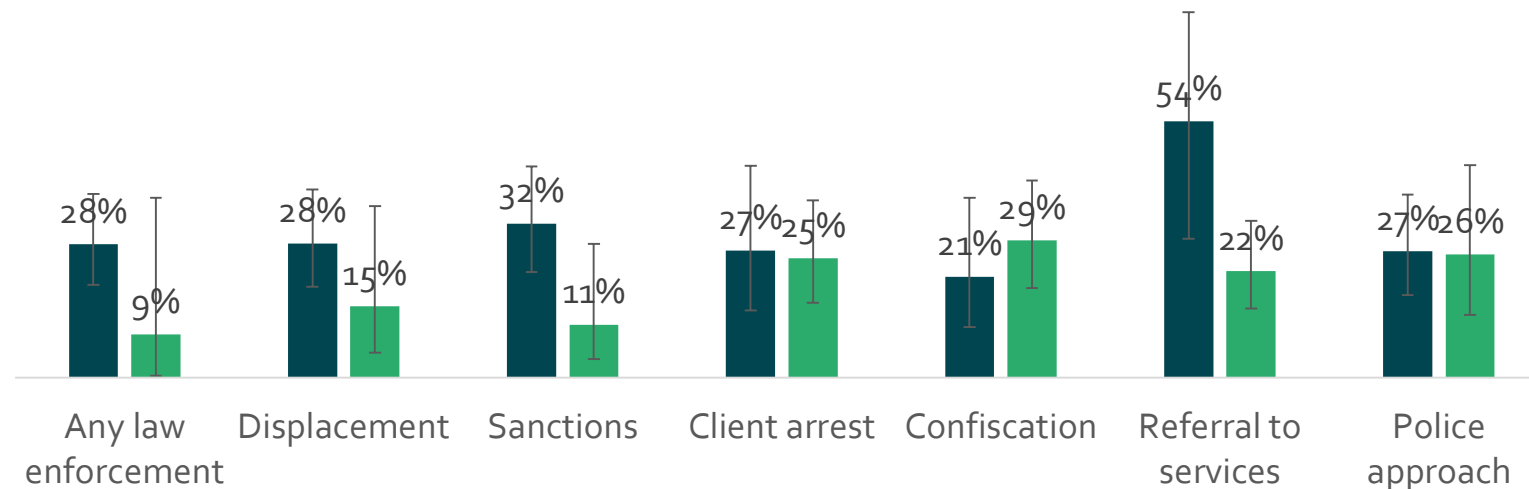
# Prevalence of violence by police enforcement

Any violence from strangers in last 6 months experienced by women working on the street across different types of police enforcement experienced in last 6 months



# Prevalence of violence by police enforcement

Any violence from residents in last 6 months experienced by women working on the street across different types of police enforcement experienced in last 6 months







Safety, health and social (in)justice: emerging findings of a participatory qualitative study exploring sex workers' experiences of enforcement, violence and access to healthcare, support and justice, in East London

Pippa Grenfell, Rachel Stuart, Janet Eastham, Aisling Gallagher, Jocelyn Elmes, Lucy Platt, Maggie O'Neill

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Law Enforcement & Public Health Conference,  
Edinburgh 22<sup>nd</sup> October 2019

**Aim:** To understand how sex work-related **laws, police enforcement** and **other issues** (e.g. *housing, financial situation, migration status, work environments, peer/social support, outreach*) **affect sex workers' safety, health and access to services**, in East London

## Background

- Criminalisation and enforcement undermine sex workers' safety, restrict access to justice and reinforce structural inequalities (Platt et al, 2018); intersecting role of health/support services and wider institutions less documented
- In UK, sex work partially criminalised, but ongoing discussion of legal reforms, mirroring international debate; national police guidance urges officers to prioritise women's safety over enforcement (Vajzovic, 2019)
- Extensive cuts to sex worker health and support services with increasing prioritisation of 'exiting'-focused approaches (Grenfell et al, 2016)
- Social justice requires *redistribution* of resources, *recognition* and *representation* of marginalised communities (Fraser, 1996; O'Neill & Laing, 2018; Grenfell et al, 2018)

- Participatory approach
- Qualitative interviews with sex workers (26) & other stakeholders (21)
  - Recruited via sex worker support services/clinics (14), direct/community networks (10) and snowballing (2); selected for maximum diversity
- Thematic, 'inductive' analysis

## **Participants' demographics & experiences**

- Aged 18-57; mostly cis-gender women
- Mostly UK (7) or other EU (13) nationals (2 indefinite leave, 3 on tourist/work visa)
- Mostly (17) white or Eastern European ethnic group (9 Asian, Black, biracial, Traveller)
- Worked 2-39 years, range of sex work sectors (outdoor, indoor, managed, independent)
- Almost all (25) had (previous) contact with sex worker health/support service; few (2) were members of sex worker organisations

# Intensity of enforcement

Women working outdoors described constant harassment and enforcement, during and outside of work, with highly disruptive effects on income, safety and daily lives

*They are driving around every 20 minutes, all night until morning, so **you are on the runaway all the time...** I hide beneath a fence, I wave at them [clients]... sometimes they [clients] come but they don't always... **On the corner I don't feel safe because of the police but in terms of work it's better. When I'm behind the fence the police don't see me but... someone can approach me from behind and I can't see him, if I'm paying attention to the street** (Woman, works primarily outdoors)*

*I can be stopped walking down the road four times in a day, name check... If I walk from here to the shop they stop me... **they don't play by the rules...** I'm a known working girl... [when I wasn't working] **they turned round and said to my mum's neighbour, 'You do know she's a prostitute, yeah?'** (Woman, works outdoors)*

# “Creating crime somewhere else”

These operations – often framed as ‘community protection’ – caused frustration to those police officers who viewed them as futile and ‘creating crime somewhere else’, and failed to protect women against violence in these same communities

*If we were to do something [police operation] on Friday night... **the girls still need their drugs, except they can't work for it, so you would see a spike in theft** from motor vehicle or burglary or... somewhere else... Sunday... they'd be trickling back... **it's pointless, because we're trying to reduce crime, but we're just creating crime somewhere else... the only thing** it does is give... high visibility, that **we are doing something... show strength by the police...** to say ‘this is our area’... to the residents.  
(Police officer)*

***I was walking down** [main beat in borough]... I woke up eight days later and I was in [name] hospital... **someone had hit something on my head and given me a haemorrhage...** I told the police everything, and they arrested my boyfriend for it... **they never caught that person that did it.** (Woman, works outdoors)*

# Lack of justice, institutional failings (1)

Singular focus on one aspect of women's lives that drove enforcement in effect meant they were not seen as vulnerable to violence, at and outside of work, but further criminalised

*I got pregnant by a punter, he [man living with me] got a bit jealous... and made me lose my baby... he actually tried to strangle me, he pinned me down, fingered me and opened up my womb... I nearly died... I lost a lot of blood... I went mad, I stabbed him... I got arrested for it, I got three years' suspended sentence, I said it was self-defence... **they looked at my record and thought... 'Oh, she's going crazy because she's got no drugs'.** (Woman, used to work outdoors, now works primarily indoors)*

*A client took me by force to have sex without a condom... I called the police... [they] wanted to arrest me... **They didn't even talk about the young man [client]...** it was all about me. **'Do you pay taxes? Why do you do this work? This work is dangerous'...** **They spoke loudly** on the phone with their boss **so that the neighbours could hear...** **'She is a prostitute, what do I do, arrest her?'**... So, what am I going to call the police for? I don't call anymore. (Woman, works indoors)*

## Lack of justice, institutional failings (2)

Being known to police led to women's experiences of violence being dismissed and/or attributed to their perceived 'aggression', further restricting their access to justice

*They [police at particular station] are... disgusting... racist... I've been arrested so many times now, it's like, 'Oh yeah... **it's her again... she's probably lying**'... one time I was **arrested... this guy [not a client] had attacked me... my scar was actually bleeding on my chest...** there was CCTV, they could see that he had... tried to strangle me... they was just like, '**No... you have to make a report at the front counter**', I was remanded so I **couldn't make a report...** I had to wait until I was released... then... it was too late... by the time... the detective investigated it... they couldn't get the CCTV again... I was still charged with this harassment against him. (Woman, works indoors)*

*I come into work... someone said, '**...someone attempted to murder her**'... Instantly... I **knew... it could be her because she was quite aggressive...** with a male paying for a sexual service if for whatever reason he's not happy... **some women might turn around and say, 'I'm really sorry, do you want me to do something else?'**... knowing her, she wouldn't have said that... it come as a shock but I wasn't that surprised. (Police officer)*



# State intimidation and direct violence

Participants described fear and intimidation during police and immigration operations, including 'visits' to indoor work venues by officers posing as clients

*They [immigration authorities] made an appointment with me as a client... I saw one person, but when I opened the door, I saw that bunch of people... **that scared me... you even think... it's a gang, right?...** I showed them my passport... They searched upstairs... I told them that I work alone (Woman, works indoors)*

One woman recounted direct physical violence by an officer, which she attributes to his frustration at 'being defeated' during efforts to displace her

***I've been punched in the face by one of them [police officer]...** 'cause I tried to run... the other two they were running at me and I thought, fuck it... they're gonna beat me up so I just steamed into 'em, and he... knocked me out... when I got there the doctors and that lot... wouldn't take pictures... and I couldn't prove anything 'cause it's all them against me... **they'd gave me...** some section thing... **like a ASBO... they was getting the hump with me, because I kept finding roads I could stand in... and they don't like being defeated.** (Woman, works outdoors)*



# Wider institutional injustice

Women's social and economic realities being overlooked by police, social services, immigration or other authorities further compounded the level of social harms they experienced

***The social workers made me believe, because he [ex-partner] has family, he's got a job and all that, if I didn't stay with him I wouldn't get to keep my daughter because of my chaotic lifestyle... I was took off the streets and gang raped for four days, I know he [ex-partner] was there, he doesn't have to talk or speak, whatever, I know his smell and I know his touch, I lived with him for long enough.*** (Woman, works outdoors)

***[Two days before] my release date [from prison]... they came with a liable for **deportation order**... I've lived here all my life... I've got a child here, I've got my family here... I've been in care under [name of London borough].*** (Woman, works outdoors)

# Person centred, experience-led services

Services grounded in understanding and respect for women's lives helped negotiate improved treatment by police, and wider access to health and social support services

*First I spoke to [outreach worker]. I made a complaint and described him, Ugly Mugs report... About a year later... he raped a girl, so I agreed to go and identify him [accompanied by outreach worker]... **they [SOIT officers] were very nice. They treated me like I was a normal person** but in [area where I work]... **if I tell any officer** that I've seen this man... who was violent **they say, 'but it's your fault'**. It's a big difference. (Woman, works primarily outdoors)*

*She's [outreach worker] on that phone every day and if I don't answer I'll have about 20 missed calls from her... I think **she understands the lifestyle**... right now she's **helping me out with... claiming for PIP benefit**... she's gonna help me get a freedom pass to get about, **she got me on a script** yesterday... **she's taking me to court... getting my housing sorted**... they're brilliant. (Woman, works outdoors)*

# Tensions and funding cuts

However, such approaches were undermined by funding cuts, reduced outreach, a lack of experience and trust in newer services, and some officers' tendency to misunderstand or disregard the support such services offer

*The ones [outreach services]... out there now... they don't know what they're doing... it's not about just handing a few condoms and a hot drink, 'There you go'... they [previous service] were... out all night till 6 in the morning... [New service], 2 hours maybe a week... **I'm not into talking to people from a textbook... you need... experience... I wouldn't tell [new service] anything... they would go and tell the police on you.***

(Woman, works outdoors)

*The ones [police] that pick you up on the road... [they say], **'What do you want [outreach service] for?'**. I said, 'Because they help ya', **'What, they give out condoms?'**. I said, 'Yeah, well it stops you from getting AIDS... **they help give you housing... support... what do you do? Stick me in a cell and stick me in court and then come back out again, that's the help you give me'**. (Woman, works outdoors)*

- Under agenda purporting to protect vulnerable women, current policing reinforces exclusion, discrimination and violence, sending message that sex workers' safety is not a priority
- 'Community protection' operations endanger women directly through displacement, and by failing to recognise sex workers are part of community - othering that makes them vulnerable to violence from a wide range of sources, not just punters
- Singular focus on one aspect of women's lives (sex work, drugs, immigration status) results in failure to see and address needs for justice, health and welfare
- Cuts to experience-led, person-centred, trusted services that previously supported access to justice, healthcare and welfare leave women even more vulnerable and excluded

Urgent need to:

- stop enforcement against sex workers and their clients
- tackle discriminatory practices in police, social services and other authorities
- (re-)commission experience-led services that respect and respond to sex workers' diverse health and support needs, in support of broader social justice goals

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# The Policing of Sex Work in South Africa



## Introducing the Positive Policing Partnership Approach

International Law Enforcement & Public Health  
Conference, Edinburgh, Scotland, 22 October 2019

Presentation by Donna Maree Evans, PhD Programme RMIT University

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# Sex Work in South Africa

## Who do we mean by “sex worker”?

- ▶ In this presentation we are referring to adults (people over 18 years old) who are consensually engaging in sexual commerce. It does NOT refer to individuals under the age of 18, the non-voluntary selling of sex, or human trafficking for sexual exploitation.
- ▶ Estimated between 132,000 and 182,000 people sell sex in South Africa. (South African Health Review, 2016).
- ▶ The majority of sex workers in South Africa are black and coloured women living in poverty, relying on sex work as a livelihood strategy, supporting multiple dependents. Demographics table from Gould & Fick (2008) Selling Sex in Cape Town publication (p.27).

Table 5: Demographics of sex workers<sup>1</sup>

Race	Proportion of sex workers	Western Cape population*
Black	31%	26%
Coloured	54%	54%
White	14%	18%
Indian	1%	0.9%

## Context of Sex Work in South Africa

- ▶ Sex work is 100% criminalized in South Africa. That includes the buying and selling of sex between consenting adults, and benefiting from the proceeds of sex work. (Sexual Offences Act, 1957 and the Criminal Law (Sexual Offences and Related Matters) Amendment Act, 2007.)
- ▶ Public by-laws and regulations criminalising “loitering” and “public nuisance” further expose sex workers to wide ranging policing powers which often creates a hostile environment (Gould & Fick, 2008; UNDP Global Commission, 2012).



# Violence and Sex Work in South Africa

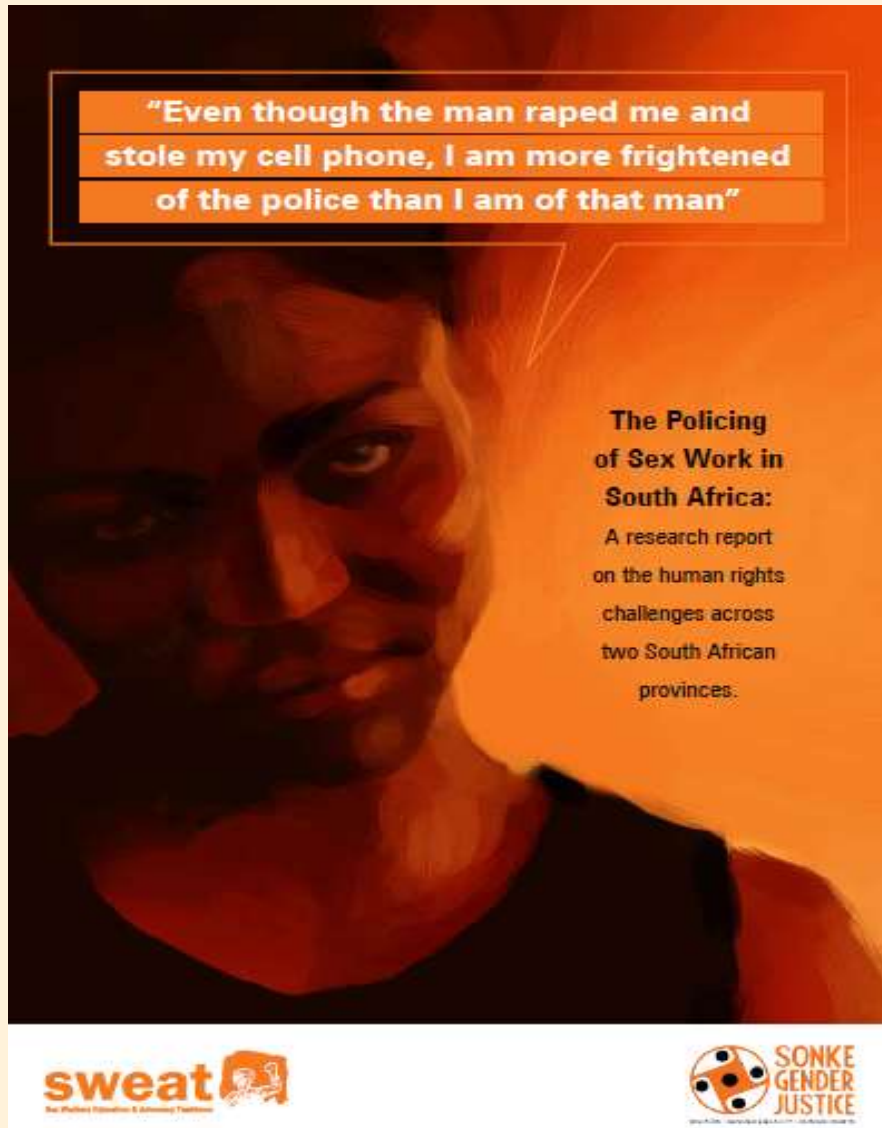
- ▶ Population of South Africa in 2017 estimated to be 56.72 million (StatsSA). UK population in 2017 was estimated to be 66.5 million ([www.ons.gov.uk](http://www.ons.gov.uk)).
- ▶ Crime Statistics for South Africa (StatsSA)
  - 2018/19 21,022 murders and 19,930 attempted murders
  - 2018/19 170,079 assault with intent to cause grievous bodily harm
- ▶ Comparison of murder rates
  - 2017/18 UK = 1.2 per 100,000 (726) (<https://www.ons.gov.uk>)
  - 2018/19 South Africa = 36.4 per 100,000 (StatsSA)
- ▶ A 2004 American study (Potterat et. al., 2004) found the murder rate for outdoor sex workers is nearly 18 times higher than for non-sex workers.
- ▶ Femicide defined by StatsSA as “the intentional killing of females (women or girls) because they are females”. South African femicide rate – nearly 5 times the global average.
- ▶ In 2016 WHO ranked South Africa 4 in the world for female inter-personal violence.
- ▶ Reporting of sexual assault in South Africa – decrease attributed to loss of confidence in law enforcement. Not quoted as the statistics are too unreliable.

# South African Sex Workers' Experiences of Non-Human Rights Compliant Policing

Multiple South African Reports outline the policing experiences of sex workers:

- ▶ **Unlawful arrest and detention** (Fick, 2006a; Fick, 2006b; Scorgie, 2013; Rangasami et. al., 2016; Human Rights Watch & SWEAT, 2019)
- ▶ **Corruption through the taking of bribes and/or demanding sex to avoid arrest** (Fick, 2006a; Fick, 2006b; Newham & Faull, 2011; Manoek, 2012; Human Rights Watch & SWEAT, 2019)
- ▶ **Torture** (Evans & Walker, 2018)
- ▶ **Sexual assault and rape** (Fick, 2006b; Gould & Fick, 2008; Scorgie et. al., 2013)
- ▶ **Assaults** (Gould & Fick, 2008; Manoek, 2012; Rangasami, Konstant & Manoek, 2016; Evans & Walker, 2018)
- ▶ **Police officers refusing to believe sex workers when they attempt to report crimes including rape and assault** (Pauw & Brener, 2003; Fick, 2006a; Scorgie et. al., 2013; Evans & Walker, 2018; Human Rights Watch & SWEAT, 2019).

# Research Report – The Policing of Sex Work in South Africa: Human Rights Challenges Across Two South African Provinces



- ▶ Research conducted in partnership by Sonke Gender Justice and SWEAT in 2016/17.
- ▶ 120 sex workers participated.
- ▶ Interim Report published for consultation and expert input into the advocacy strategies and solutions to address the violations described in the report.
- ▶ Final report was published in March 2018.
- ▶ Records harrowing accounts of sex worker experiences during operational policing activities including torture, extreme violence, physical and sexual assault including rape, corruption, unlawful arrest and detention.
- ▶ Concludes that violence against sex workers by police is widespread, pervasive and entrenched.

# Case Study of “The Bush”, Pretoria

## Breakdown in Sex Worker and Policing Relationships

### Condom & Medication Destruction/Seizure



### Public Health Risk Caused by Policing Behaviours

- ▶ Public health services fund and supply condoms and medications including ARVs to sex workers as a risk management strategy to combat HIV/AIDs and STIs.
- ▶ Police at the Bush have seized clothing, condoms and medications from sex workers, and set them on fire.
- ▶ Destruction of medicines cause sex workers to default on their medical treatment regimes.
- ▶ This negatively impacts on government resources, and places the sex workers, their clients and the public at risk from STIs and HIV/AIDs.

# Case Study of “The Bush”

## 1. Michelle’s Story

- In 2008 a sex worker Michelle, 29 years old, was violently raped by a man with distinctive surgical scarring who throttled and choked her during the attack.
- As the offender ran away, Michelle screamed for help and the man was apprehended by people nearby. Police attended, and they all went back to the station.
- Despite Michelle having obvious injury, multiple witnesses seeing the man fleeing from where Michelle screamed for help, and Michelle producing the used condom containing the offender’s DNA, the police let the offender go once Michelle identified herself as a sex worker.

***“The police just let the man who raped me go”.***



## 2. Sipho's Story

- Sipho is a female sex worker, 34 years old. She supports five other people from her sex work – her mother, two younger siblings and her own two children.
- During the daytime in March 2016, Sipho went with a client at the Bush. Once they were alone, the client produced a knife, punched her in the face, threatened to kill her and proceeded to violently rape Sipho twice whilst he choked and throttled her.
- The man had the same distinctive surgical scarring described by Michelle who had been raped at the same location 8 years earlier.
- The offender did not use a condom during the attack. He told Sipho he was going to spread HIV.

***“He took down my trousers and raped me twice. He did not use a condom.***

***He told me he would kill me if he screamed. I was terrified he would kill me.***

***He told me he was a rapist and a killer, he had done it before”.***

- Subsequent to these rapes, Sipho tested positive for HIV.
- When asked why she did not report the crime to police, Sipho described years of harassment, intimidation, violence, threats, unlawful arrest and detention and refusal by police to take criminal complaints from sex workers at the Bush.

***“Even though the man raped me and stole my cell phone,  
I am more frightened of the police than I am of that man”.***

### 3. Buyiswa's Story

- Buyiswa is a female sex worker, 34 years old, who supports her grandmother and younger sister from her sex work.
- Less than two months after Sipho's assault, Buyiswa was at the Bush when she accepted a client. Once they were alone he produced a knife, choked and throttled her and then anally raped her without a condom.
- The man had the same distinctive scarring as the person who assaulted Michelle and Sipho.
- After the assault, Buyiswa said she thought about reporting the attack, but did not feel she could report it because the police at that location do not take sex workers seriously when they try to report crimes.

### 4. Queen Keketso's Murder

- In 2016 a sex worker known as Queen Keketso's mutilated body was found at the Bush in an open grave.
- Sex worker and health clinic staff attempts to engage with police to provide information about the murder resulted in the local Police Station Commander threatening to arrest the sex workers and lock them up.
- This murder remains unsolved, and presumably uninvestigated.

# The Positive Policing Partnership (PPP)

- ▶ The interim sex work and policing report was published for consultation purposes and various South African academics, policing and security experts were consulted on the framing of the final report to
  - establish that crucial initial tone of inclusion and solution-focused engagement.
  - help frame the report to encourage participation by stakeholders – sex work sector, civil society, government, law enforcement and oversight authorities.
  - encourage multi-faceted participation, partnerships and remedial approaches to the identified human rights issues.
- ▶ Sonke Gender Justice, SWEAT and Sisonke Sex Worker Movement stakeholders met in August 2017 for a strategic planning workshop. A priority was to identify what actions the sector could take to more effectively engage with and capacitate police and government authorities to reduce the level of human right violations that were occurring during operational policing.
- ▶ A collective decision was made by this group to move away from more traditional adversarial complaint-based advocacy through forming the **Positive Policing Partnership group as a sector vehicle to drive a more collaborative, inclusive and solution focused model of engagement.**



# The PPP Approach

- ▶ Active capacitation of the sex work sector, civil society, government and law enforcement to work together more effectively on improving policing outcomes for sex workers.
- ▶ Meaningful collaborative engagements and partnerships.
- ▶ Forward-focused advocacy - rather than complaints based and accountability for past actions.
- ▶ It involves three distinct strategies:
  - ❖ Catalysing improved understanding by government and the public on the human rights violations (and public health implications) being experienced by sex workers through the publication of evidence-based research.
  - ❖ Identifying both the challenges and potential solutions to improve human rights compliant policing behaviours.
  - ❖ Consistent messaging and advocacy accurately targeted at senior levels of government, law enforcement and oversight bodies where the capacity to bring about change resides.

# Key PPP Activities

## 1. Ongoing Strategic Advocacy

**From late 2016, Sonke and others on behalf of the PPP have strategically engaged with various sex work sector and external organisations on the research report, police oversight, policing and sex work including**

- ▶ strategic meetings and presentations to the South African Police Service (SAPS) on a draft National Police Standing Operating Procedure on Sex Workers.
- ▶ the Gauteng provincial Department of Community Safety in relation to police oversight and operational challenges at specific hot spots.
- ▶ lodging a detailed submission in response to the Civilian Secretariat for Policing Consultation on the White Paper on Safety & Security in December 2017, which consolidated various strategic recommendations to support the safety of sex workers and effective oversight of law enforcement operations in the sex work context.
- ▶ Institute for Security Studies (ISS) and Corruption Watch events focused on different aspects of law enforcement to make new contacts and leads.
- ▶ the South African Human Rights Commission and African Policing Civilian Oversight Forum annual policing and human rights dialogue events.
- ▶ presentations to higher level executive groups including the South African Expert Panel on Policing, National Civilian Secretariat for Policing and Independent Police Investigative Directorate.
- ▶ roundtable Dialogue on Policing and Sex Work.

# Key PPP Activities Continued

## 2. PPP & Research Launch Event

- ▶ Multi-partner approach leveraging a range of stakeholder policing and government contacts and those of non-traditional civil society partners like the Institute for Security Studies.
- ▶ Acknowledged the difficult role of police in enforcing laws in a country experiencing extreme structural violence challenges across families, communities, government and institutions.
- ▶ Framed as presenting a portfolio of contemporary service user experiences from a marginalised population group.
- ▶ Research presentation focused on identifying the challenges and signposting possible solutions for discussion and action.
- ▶ The report recommendations were left wide as a strategy to prompt conversation and problem-solving solutions.
- ▶ Diverse guest speakers from civil society, police and oversight sectors to reflect different aspects and roles in improving policing outcomes.
- ▶ Comprised individual presentations, a public panel discussion and a closed door dialogue event between key sex work sector, government and policing stakeholders.

# Key PPP Lessons

## 1. Project Approach

- ▶ By working collaboratively, the sector is able to engage and contribute more widely to strategic activities supporting sex worker human rights.
- ▶ Partnering outside the traditional sex work sector partners. By enlisting more mainstream groups, the sector gains access to those who have established power and/or relationships relevant to the changes sought in behaviours, law and policy.
- ▶ A sector vehicle like the PPP enables better co-ordination, sharing of resources and strategic messaging. Advocacy products are utilised more widely across different forums.
- ▶ The PPP approach requires consistent and skilled resourcing to work effectively. Actions need to be timely and proactive, with a consistently visible sector presence, otherwise the efficacy of the group is diluted and reputational damage limits future partnerships.

# Key PPP Lessons Continued

## 2. Issue Framing

- ▶ Reframing challenges can effectively reset relationships and help move them from adversarial to more co-operative interactions. Instead of focusing on what government is not delivering, the challenge can be identifying what the sex work sector advocates can do to inform, assist and capacitate government and police to deliver a different form of policing that is more in line with human rights and legal mandates.
- ▶ Change the narrative from focusing on the illegality of sex work to focusing on human rights-compliant policing behaviours. By directly linking the issues to gender-based violence and human rights, advocates are able to cut through some of the stigma and cultural barriers on sex work.
- ▶ Evidence-based research is a very powerful tool to engage government when it can be directly linked to government responsibilities and deliverables across policing and more general national and provincial government service delivery domains.
- ▶ Presentations and key messages must be in a format that the audience can engage with. Utilise diverse formats such as videos, sharing stories, infographics etc.
- ▶ Package information for the particular target. Sonke produced a short documentary about sex worker and police interactions entitled “Don’t Beat Me About the Bush”, which was formatted specifically for national broadcast by the South African Broadcast Corporation Special Assignment programme to reach the national audience, and uploaded onto their web page which had 359,000 subscribers at the time of broadcast.

# Key PPP Lessons Continued

## 3. Relationship Building

- ▶ Particularly with very protocol driven institutions such as law enforcement, considerable time and effort is required to build relationships with individuals and specialist units and to understand the language used in those environments.
- ▶ Advocates should engage with mid and senior level police, those who have an ability to make actions happen. Come to meetings with strategies that address the problem across shared policing zones and boundaries.
- ▶ Request police appoint a liaison officer. Share details of challenges and feedback good news stories to police. Acknowledge and support good behaviour at the coal face of police operations with individual stations, police commanders and investigating officers.
- ▶ Create opportunities for two-way communication – create the space to hear feedback from police about sex worker behaviour as well as articulate challenges with policing behaviours. Educate police about sex workers, and sex workers about policing.
- ▶ Do not limit interactions only to situations of conflict. Establish a personal connection, check in regularly, demonstrate an element of concern and interest in police welfare. By acknowledging police efforts are recognised and appreciated, it enables a human relationship which helps overcome the stigma attached to sex work.



# Key PPP Lessons Continued

## 4. Sector Skills, Knowledge and Capacity

- ▶ Lack of knowledge of government processes and access points is a barrier to effective engagement. Invest time in studying and understanding the structures you need to engage with.
- ▶ Partnering with non-traditional sector partners enables reaching a wider audience, and targeting of potential new sector champions not usually leveraged on sex work issues.
- ▶ Being present in the space and linking with the police and oversight organisations is key. By attending general policing and security events not quite on topic, introductions and leads to other organisations in the policing and oversight space are sourced which facilitate access to the right meetings and people. This may take some time, and the route might not be that obvious at first.
- ▶ Proactively look for opportunities to engage. Unless you are proactive and in the right spaces, you are not going to meet the powerful people who can bring about the change you are seeking. Advocates need to enlist powerful allies – people who do have voice in that discussion space and are able to champion issues or perspectives.

# Key PPP Lessons Continued

## 5. Media & Accessible Key Messaging

- ▶ Significant first hand quoting of witnesses in reports is a particularly effective strategy to provide vital platforms for sex worker voices and experiences. These statements clearly resonated with readers and audiences, helping to contextualise the sex worker's experience with their co-existing roles of family and community member. Use case studies to position sex workers in their diverse roles.
- ▶ The report and PPP launch event were livestreamed via internet and attracted extensive media coverage. This generated multiple opportunities for the PPP to participate in public and government discourse on sex work issues including sex work models, policy, law reform and police oversight.
- ▶ A short documentary called “Don’t Beat Me About the Bush” was created for broadcast on the South African Broadcast Corporation’s “Special Assignment” to reach the national audience. Tailor and target the advocacy products to reach diverse audiences and educate the public on the issues.
- ▶ The South African Civilian Secretariat for Policing hosts the PPP launch video, research report, submission and other documents on their website <https://saferspaces.org.za/be-inspired/entry/positive-policing-partnership> - making the materials accessible both locally and internationally.



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