



***“Nothing about us
without us!”***

Situation of sex workers in Europe

Luca Stevenson

**International Committee on the Rights of Sex
Workers in Europe**

www.sexworkeurope.org

Who we are?



- ICRSE: European network of organisations and individuals founded in 2005
- Today: 95 organisations in 33 countries in Europe and Central Asia
- Sex worker led (majority of sex workers on Board and as staff/consultants)
- Three main areas of work:
 1. Communication (list-servs, social media...)
 2. Advocacy (campaigns, resources, public events...)
 3. Capacity building of sex workers (trainings, resources, technical support...)
- Intersectional perspective on sex work: ICRSE member of PICUM, ILGA.



Presentation Outline

- Sex work/ers | who, what, where, why?
- Legal frameworks in Europe
- HIV prevalence, HIV testing and condom use in Europe
- Key pillars of sex worker health programming
- Main threats and obstacles in Europe
- Example of successful mobilisation
- What can you, your organisation and CSF can do?



Sex work/ers who, what, why, where?

- “**Female, male and transgender** adults and young people...**exchange** money or goods in **for sexual services**, either regularly or occasionally..”
- **Sex work varies** ...in the degree to which it is more or less “formal” or organized” and type of working environment (street, brothel, independent..)
- **Economic Activity:** “full-time occupation, part-time, or occasionally to meet specific economic needs”
- Overlap with other key populations (people who use drugs, MSM, trans, migrants, prisoners...). Many EU countries, large majority of sex workers are migrants either from other European countries or Global South.
- This diversity means sex workers have diverse needs which should be considered when developing services.

Joint United Nations Programme on HIV/AIDS. Guidance note on HIV and sex work. Geneva: Joint United Nations Programme on HIV/AIDS; 2009–2012:

http://www.unaids.org/sites/default/files/sub_landing/files/JC2306_UNAIDS-guidance-note-HIV-sex-work_en.pdf



Legal frameworks in Europe

Diversity of legal frameworks in Europe

- Criminalisation or partial criminalisation of sex work
 - Sex workers (soliciting laws, third parties laws...)
 - Clients (Nordic model)
 - Third parties (brothel keeping, pimping laws...)
- “Nordic Model’ in Sweden, Norway, Iceland, France, Northern Ireland, Rep. Of Ireland, Serbia, Lithuania.

- Legalisation:

Various models of legalisation (Germany, Netherlands, Greece, Hungary, Turkey...)
Either coercive legalisation (mandatory testing or registration) or 'back door criminalisation' as system make it impossible to work legally.

Other forms of legal oppressions such as municipal by-laws or immigration raids (under guise of anti-trafficking measures)

At European level,
campaigns for 'Europe free from prostitution'
led by European Women Lobby
and 'Honeyball resolution' in 2014
at European Parliament
calling for criminalisation of clients.





ICRSE core value is 'opposing criminalisation and other forms of legal oppressions of sex work'.

Decriminalisation (New Zealand / NSW Model) is best practice and supported by sex workers globally and WHO, UNAIDS, Amnesty, HRW, TGEU...

The Lancet estimate that full decriminalisation of sex work could avert 33-46% of HIV infections (FSW & male clients over a decade). (Lancet Hors Series on Sex Work and HIV)



HIV prevalence, HIV testing and condom use in Europe (ECDC report)

Remarks:

- **Little nationally representative data** on HIV prevalence, HIV testing, condom use or treatment coverage as few countries have accurate population size estimates and most available data are from surveys that are based on variable sample sizes and use different methods.
- Most countries report **data for female sex workers; lack of data on male, transgender or other subgroups of sex workers who may be at increased risk of HIV.**
- Often focus on street-based sex workers who might be more at risk than indoors

European Centre for Disease Prevention and Control. Thematic report: Sex workers. Monitoring implementation of the Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central Asia: 2014 progress report. Stockholm: ECDC; 2015.



HIV Prevalence

- In EU/EEA countries, reported prevalence up to 22.2% in Latvia (14 countries).
- In non-EU/EEA countries, reported prevalence ranges up to 11.6% in Moldova (15 countries).
- Reported prevalence in the region is above 1% in 20 countries and above 5% in six countries – Latvia (22.2%), Moldova (11.6%), Ukraine (7.3%), Estonia (6.2%), Belarus (5.8%), and Portugal (5.7%).



Intersection of vulnerabilities:

- HIV prevalence appears to be higher among male sex workers and sex workers who inject drugs
- High rates of **HIV prevalence among male sex workers** (16.9% in Spain, 13.5% in Portugal and 9.1% in Belgium.)
- Portugal: HIV prevalence over 10% in both **male and transgender sex workers** and 47.6% in sex workers who inject drugs.
- High HIV prevalence rates reported among female sex workers in the Baltic States and Ukraine due to higher number of **sex workers who use drugs**.
- Specific subgroups of sex workers identified by as being at increased HIV risk: transgender sex workers in France and Spain, male sex workers in Germany and Spain, **migrants from high prevalence countries** in Luxembourg and undocumented migrants in France



- Scale of HIV programmes inadequate (governments are less likely to report that HIV prevention programmes are delivered at scale for sex workers than for other key populations such as MSM, PWID and prisoners.)
- Condom use: generally high. But economic needs can trump self-care and condom use. (impact of criminalisation of clients)
- Rates of HIV testing vary between countries but very low in some.



Sex work, Health & Human Rights

- Sex workers as **“vectors of disease”**
- Sex workers as **key populations** affected by HIV
- Sex workers as partners in the HIV response
- Sex workers as pioneers of key population health programming: the SWIT
- Important changes at international level (WHO, UNAIDS, Amnesty...) but very little at European and national levels

“Not the Problem, Part of the Solution!!



Importance of sex workers' involvement in HIV response

- Sex workers' groups and organisations should be made essential partners and leaders in designing, planning, implementing and evaluating health services.

(WHO, 2012)

- Sex worker leadership is critical to ensuring that social and structural factors affecting their health, human rights and well-being are understood and addressed in generating and sustaining effective response to HIV.

(World Bank, 2013)

A decorative header image showing a dense collection of red umbrellas, some open and some closed, creating a textured, monochromatic background.

Measuring effectiveness of community-led responses to HIV

- 32% reduction in the odds of HIV infection...
- 39% reduction in the odds of gonorrhoea...
- circa 25% reduction in the odds of chlamydia...
- almost 50% reduction in the odds of syphilis...
- three-fold increase in consistent condom use with clients

(Kerrigan et al., Lancet, 2014)



Main threats and barriers in Europe

Direct threats to sex workers

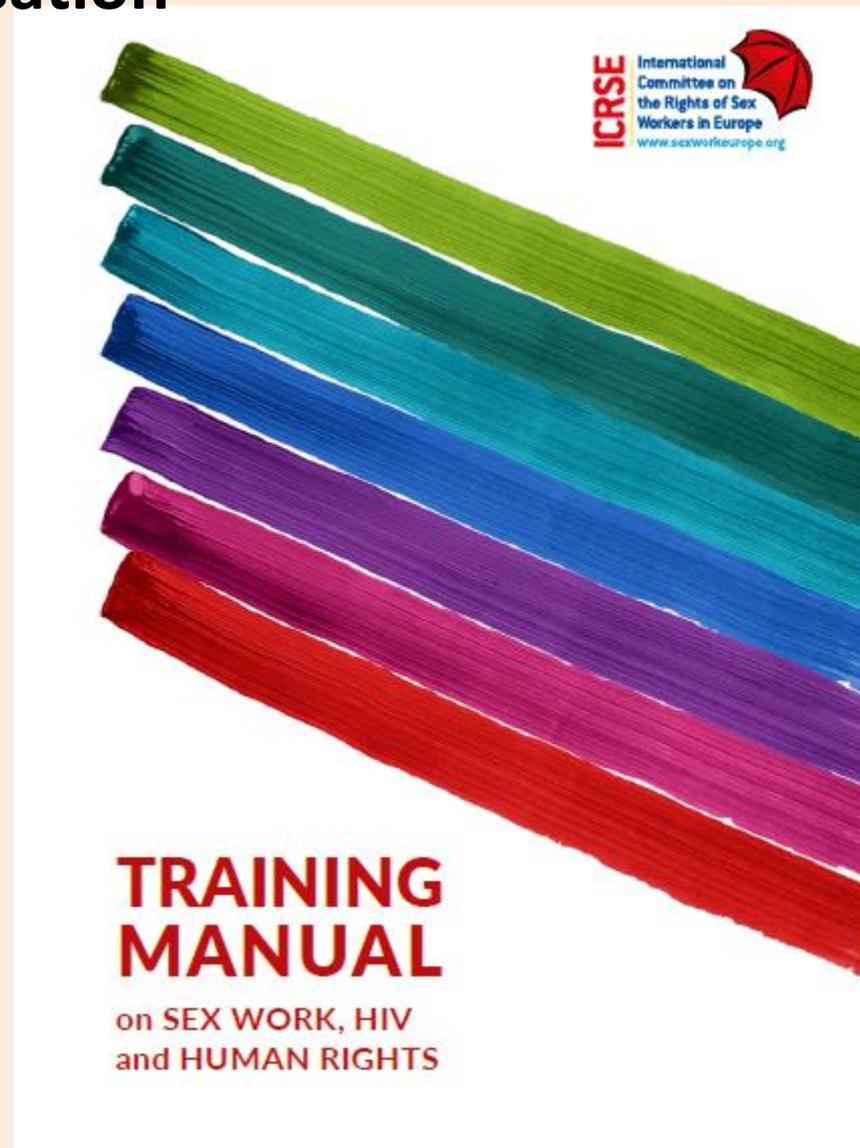
- Criminalisation of sex work: many countries criminalise sex work (either sex workers, clients or third parties)
- Stigmatisation and discrimination – health, housing, justice....
- Intersection of vulnerabilities: migration, male and trans, poverty, drug use...
- Violence and exploitation – impact on mental health

Threats to movement / community building

- Lack of funds for sex worker led organisations
- Limited international donors / Global Fund withdrawing from several countries
- Increased criminalisation and abolitionist discourses restrict funds for rights based services and orgs / sex worker led orgs

Successful community mobilisation

- ICRSE & SWAN
- RCNF funded programme to develop capacities of sex workers
- 2014-2015: Regional training and national trainings on sex work, HIV and human rights
- <http://www.sexworkeurope.org/resources/training-manual-sex-work-hiv-and-human-rights>
- 2016-2018: Regional trainings and national work plans to roll out aspect of SWIT.



- **STAR STAR** (Macedonia) developed two branches in Eastern and Western Macedonia.
- Sensitisation training for medical staff; list of non-judgmental services available, advocacy





Self-organisation of migrant sex workers:
Steel Roses, collective of Chinese sex workers in Paris supported by Medecins du Monde, Lotus Bus and STRASS.



**Kirmizi
Semsiye,
Turkey**

Legal support
for trans sex
workers,
Community
mobilisation
and advocacy,
HIV
prevention.

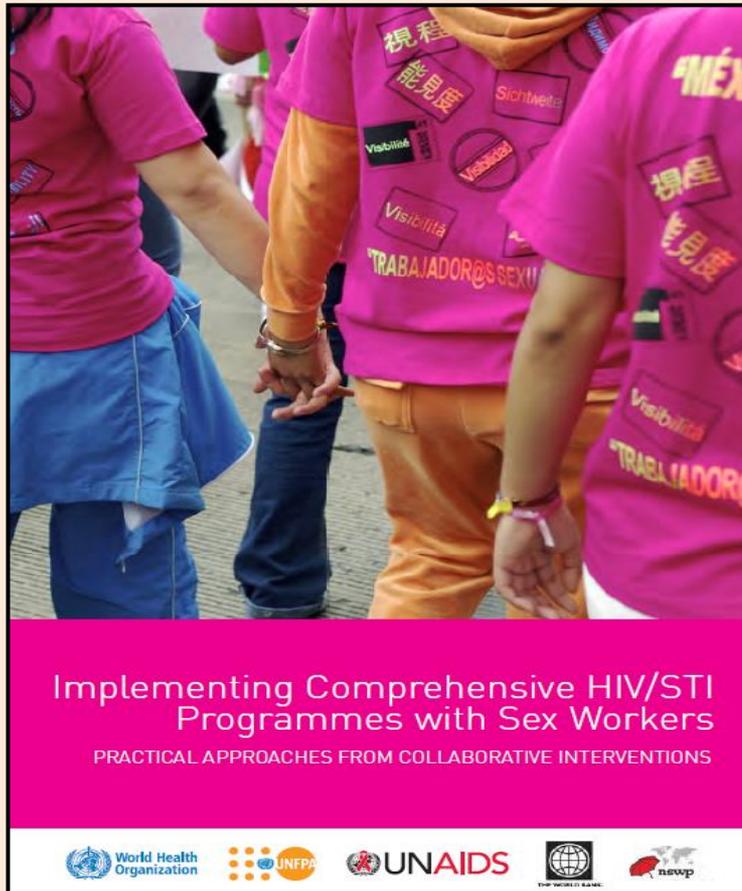




What can we do together?

- Can CSF members support community mobilisation and advocacy? (inclusion of sex workers in programmes and decision making)
- Can CSF be more vocal / active when sex workers' rights are under attack?
- What funds are available in Europe for sex worker-led programmes and organisations?
- Can the SWIT be rolled out? (role of WHO Europe / UNAIDS in region)
- Join ICRSE!

Sex Worker Implementation Tool



Good practice recommendations

1. All countries should work toward **decriminalization of sex work** and elimination of the unjust application of non-criminal laws and regulations against sex workers.
2. Governments should establish **antidiscrimination and other rights-respecting laws** to protect against discrimination and violence, and other violations of rights faced by sex workers in order to realize their human rights and reduce their vulnerability to HIV infection and the impact of AIDS.
3. **Health services should be made available, accessible and acceptable** to sex workers based on the principles of avoidance of stigma, non-discrimination and the right to health.
4. **Violence against sex workers** is a risk factor for HIV and must be prevented and addressed in partnership with sex workers and sex worker-led organizations.

http://www.who.int/hiv/pub/stisex_worker_implementation/en/

Key Components of the SWIT



Community empowerment is a holistic approach based in human rights framework and combining variety of behavioral, community and structural interventions.

Community Empowerment



“Community empowerment includes working towards the decriminalisation of sex work and the elimination of the unjust application of the non-criminal laws and regulations against sex workers, and recognising and respecting sex work as legitimate occupation or livelihood.”

(WHO, 2013)

- Assuring **meaningful participation** of sex workers in the design, implementation, monitoring and evaluation of HIV programming
- **Sustaining** sex workers’ movement
- Shaping **policy and creating enabling environments**
- Struggling for the **recognition of sex workers’ human and labour rights**
- Advocating for **decriminalisation of sex work** and other legal reforms



Addressing Violence against Sex Workers

Interventions preventing and responding to violence against sex workers are critical element of community-led HIV programming



These might include:

- gathering data on violence and other human rights violations experienced by sex workers
- advocacy for law reform and change in law-enforcement practices
- sensitization workshop for the police and other law-enforcement agencies
- promotion of safety and security among sex workers
- provision of legal, psychological and other services for sex workers facing violence

Community-led services

- Community-led outreach
 - Strong link between organisation and sex worker community
 - Best strategy to reach the most marginalised, invisible and hard-to-reach sex workers
 - Effective way to promote HIV-services and prevention education
- Safe spaces (drop-in centers)
 - A place for sex workers to socialize and relax
 - Platform for community mobilisation
 - Asylum and shelter for those fleeing violence or facing homelessness
- Telephone and Internet support



Condom and lubricant programming

1. Establishing accessible supplies

- Forecasting
- Procurement
- Quality assurance
- Warehousing and storage
- Distribution, logistics management

2. Multi-level promotion

- Community-led condom promotion
- De-stigmatizing condoms in the broader environment

3. Creating an enabling environment

- Supportive policy, legal and regulatory frameworks
- National policies
- Local strategies



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Clinical and Support Services

All services must be provided as part of a rights-based approach.

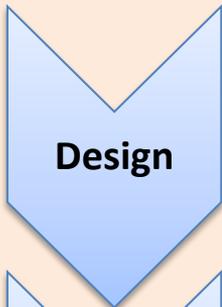
A holistic package of services for sex workers would include:

- Voluntary HIV testing and counselling
- Antiretroviral therapy
- Treatment for tuberculosis
- Harm reduction services for sex workers who inject drugs (needle & syringe programmes, opioid substitution therapy)
- Sexually transmitted infections
- Sexual and reproductive health
- Mental health

Highlights key operational principles:

Voluntary, with informed consent
Confidential
Appropriate
Accessible
Acceptable
Affordable

Building Organizational Capacity



- Define programme and standards
- Establish a data monitoring system for management
- Plan the programme evaluation



- Define the management structure



- Prioritize
- Implement in a staged manner
- Establish a supervision system
- Progressively ensure full sex worker participation



Best practices in sex worker-led HIV programming

- Offer services that meet sex workers' actual needs!
- Recognise the diversity within the sex worker community and ensure inclusion of all sex workers in your programming!
- Raise sex workers' awareness about their rights and applicable legislation on sex work and HIV!
- Support community empowerment and mobilisation!
- Address social and structural factors which contribute to sex workers' vulnerability to HIV and deter them from accessing HIV-related services!
- Exchange of knowledge and experience with other sex worker collectives, organisations, and networks!
- Be flexible and creative in determining tools and strategies of action!

Best practices in sex worker-led HIV programming

- Run services effectively and smoothly!
- Build coalitions and alliances with stakeholders who support sex workers' rights and can contribute to the reduction of their vulnerability to HIV!
- Engage with the government, policy-makers and law-enforcement agencies!
- Engage with media and make sex workers' voices heard in the public sphere!
- Ensure that funding sources have sex workers' best interests at heart!
- Don't give up!



Thank you !

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