



What research tells us about sex work and health inequalities and the importance of participatory approaches

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At: Excluded even within inclusion health? The importance of exploring and addressing the health & wellbeing needs of people selling sex across Yorkshire and the Humber.

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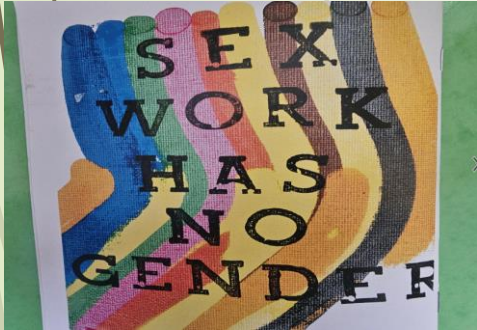
What is Sex Work?

➔ *“Sex work involves the exchange of sexual services between consenting adults (aged 18 years and over) in return for money, goods or other agreed benefits or needs (e.g. a place to sleep). There is a broad spectrum of people involved in sex work and not all people who engage in these practices will identify as sex workers”. (ADPH Yorkshire and Humber 2024)*



- ➔ Coined as an alternative to stigmatised language (Leigh 1978)
- ➔ Contested term.
- ➔ Debates often centre around matters of choice/coercion agency/control.
- ➔ “Constrained agency” (Berg 2014, Brouwers 2022)

Sex Work and Diversity



- ▶ Multiple factors shape peoples entry into sex work – economic predominates.
- ▶ Identities and intersectionality: race, gender, age, sexual identify, disability.
- ▶ Gendered landscape of sex work (Cooper et 2024) – but people of all gender identities sex work.
- ▶ Varied forms of sex work with varied legal/socio-spatial regulation.
- ▶ EG online sex work (in person/full service e.g. escorting) and indirect/remote (e.g. web camming), indoor (brothel/parlour, bar), street, stripping.
- ▶ Increased fluidity across sectors (Sanders et al 2019)
- ▶ Duality recognised (Bowen 2021)
- ▶ Incidental sex work (Morris, 2021)
- ▶ Sex work has been conflated with trafficking (Mai et al 2021, Raguparan et al 2024): trafficking has been the focus of policy this has meant sex workers needs are ignored.
- ▶ Sex workers continue to be excluded and marginal in society, policy and research.
- ▶ Highly stigmatised (Ahearne 2015, Pheterson 1993) & partially criminalised in UK.

Stigma, silencing and stereotypes (O'Neill and Campbell 2002)



"Sex workers are everywhere we are your neighbours. We brush past you in the street. Our kids go to the same school as yours. We're behind you at the self service checkout...when we are visible on the street, in signposted brothels in digital spaces our presence provokes disquiet."

(Mac and Smith, Revolting Prostitutes 2018)

What research reveals about sex work and health inequalities

- ▶ Inequalities are widening – note the challenges with a lack of robust data
- ▶ Still gaps in research and knowledge base with inclusion groups – male sex workers, trans. Often ignored in policy initiatives further exacerbating inequalities and social exclusion (Laing, Pilcher and Smith, 2015)
- ▶ Street sex work identified as the most marginal: positioned at the intersection of structural inequalities heightened by stigma and quasi criminalisation – heterogeneous group.
- ▶ Not “hard to reach” - been excluded, underserved and need to remove barriers.
- ▶ Studies show stigma and professional attitudes shape barriers and exclusion.
- ▶ Whole system response essential to address needs across the life course. Wider determinants of health and access to these are beyond health and what shapes and further entrenches health inequalities

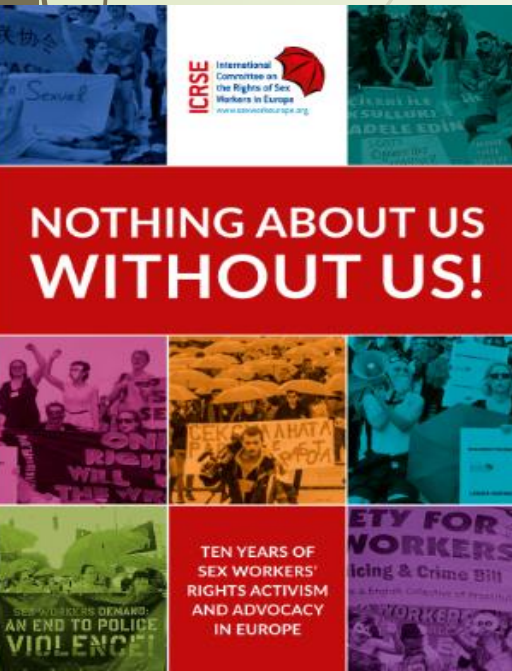
What research reveals about sex work and health inequalities

- ▶ Multi-faceted drivers shaping entry into sex work (e.g. poverty, exclusion from/discrimination in other labour market sectors, homelessness, fleeing violence and substance abuse) in turn exacerbate health inequalities.
- ▶ Intersecting sources of stigma and bias shape (non) engagement and exacerbate inequalities (Meth, 2023)
- ▶ Seen often only as vectors of STIs, sex work and health research skewed to sexual health. Less research on other areas of health (e.g. Mental Health Mai et al 2021). Yet sex workers experience a host of long-term conditions and co-morbidities which are over-looked and underprioritized in health interventions (Meth, 2023) limited research on sex workers and PLUS5 conditions.
- ▶ Stuart and Grenfell in 2021 reported on enforcement and violence reported by the sex workers in their study carried out in East London.
- ▶ Criminalisation recognised as putting the women at high risk and preventing them from accessing a range of support services, as they constantly weigh up the costs of working together for safety against being prosecuted by the police
- ▶ Evidence also shows that there is a link between models and policies that promote social justice, where sex work is decriminalised, and reducing health inequalities (Platt, 2018)
- ▶ Evidence that models which criminalise sex workers and/or their clients (e.g. in Canada, France and Ireland) create harms for sex work health, safety and rights. (Platt et al 2018, Phipps, 2020)

How can research contribute to our understanding of sex work and health inequalities?

- Identify inequalities for sex workers, in a constantly shifting policy, socio-economic and sex industry terrain.
- Assess how policies/interventions impact on SWs' health, safety and rights and identify/inform replication of good practice.
- Capture/centre lived experience voices.
- Given the stigmatised/illicit status of sex work, 'hidden' and long-silenced voices of sex workers, in an attempt to re-dress power imbalances and ensure lived experience is centred, there is a strong case for participatory action research (PAR)
- “Nothing about us without us” : PAR can play role in meaningful involvement of sex workers in policy development and support voice and advocacy (O’Neill and Campbell 2021). Promote more ethical research (Holt)

Look to sex worker led guidance on PAR: e.g. Respect inc. and Queensland University (2018), European Sex work research network (ESWORN). Global NSWP [Research for sex work \(2004\)](#) [“Ethics in Healthcare”](#)



New PAR Project “Working together to reduce barriers for street sex workers in West Yorkshire”

- Funded by West Yorkshire Integrated Care Board, supported by specialist sex work services.
- Responding to a gap across West Yorkshire: limited pan regional research.
- Street sex work focused (with Cis and transgender women, intersex and non-binary people who are part of on street sex work communities).
- Aim to illuminate current health needs and barriers faced amongst a sector where inequalities cluster and inform health inclusion policy and provision in West Yorkshire.
- Sites: Bradford, Kirklees and Leeds.
- Peer researchers/advisors.
- Qualitative and creative: create spaces where SSWs can share health journeys, barriers to service access they face and what they want from services.

Are you a current or former sex worker who works on street?
We want to hear from you!

Working together to reduce barriers for street sex workers

Who are we?
We are Rosie Campbell (University of Huddersfield), Fiona Meth (University of Leeds) and Daisy Matthews (University of Huddersfield). We have been working with sex workers for many years as researchers and outreach/support workers.

What is the project?
This is a study looking at provisions addressing health inequalities for street sex workers in West Yorkshire. It is looking at projects in Bradford, Kirklees and Leeds.
As part of this study we are asking women involved in street sex work, in these areas, to share their views and experiences, anonymously and in confidence.

What does taking part involve?
Taking part in an interview will involve meeting with one of the research team who will ask you several questions about your health, your experience of using health services generally and of using special outreach and support services.
There are no right or wrong answers, and you do not want to answer anything you do not want to.

Where and how long are the interviews?
Interviews will last around 60 minutes.
Interviews can take place at ADD SERVICE, online, or phone call.



Concluding Thoughts

- Significant diversity in sex work – forms, identities/intersectional positionality.
- Sex worker voices should be amplified in mapping out health inequalities, the socio-political and economic determinants of the health and the impact of the criminal justice system on a health justice approach to reducing these.
- Good practice can be identified, understood in context of the sex workers' lives, and shared to reduce barriers at a place-based level.
- Creative and participatory approaches can impact on those with lived experiences beyond the outputs generated.
- PAR can help us understand and capture diversity, support advocacy and inclusion and can be ethically sound when undertaken effectively and responsibly.



Thanks for listening and our contacts!

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