

Supporting women involved in sex work and survival sex

With:

- Chair: Tabz O'Brien, MEAM
- Moya Woolven and Amber Wilson, Basis - Yorkshire
- Laura McIntyre, Changing Lives
- Sarah McManus, A Way Out

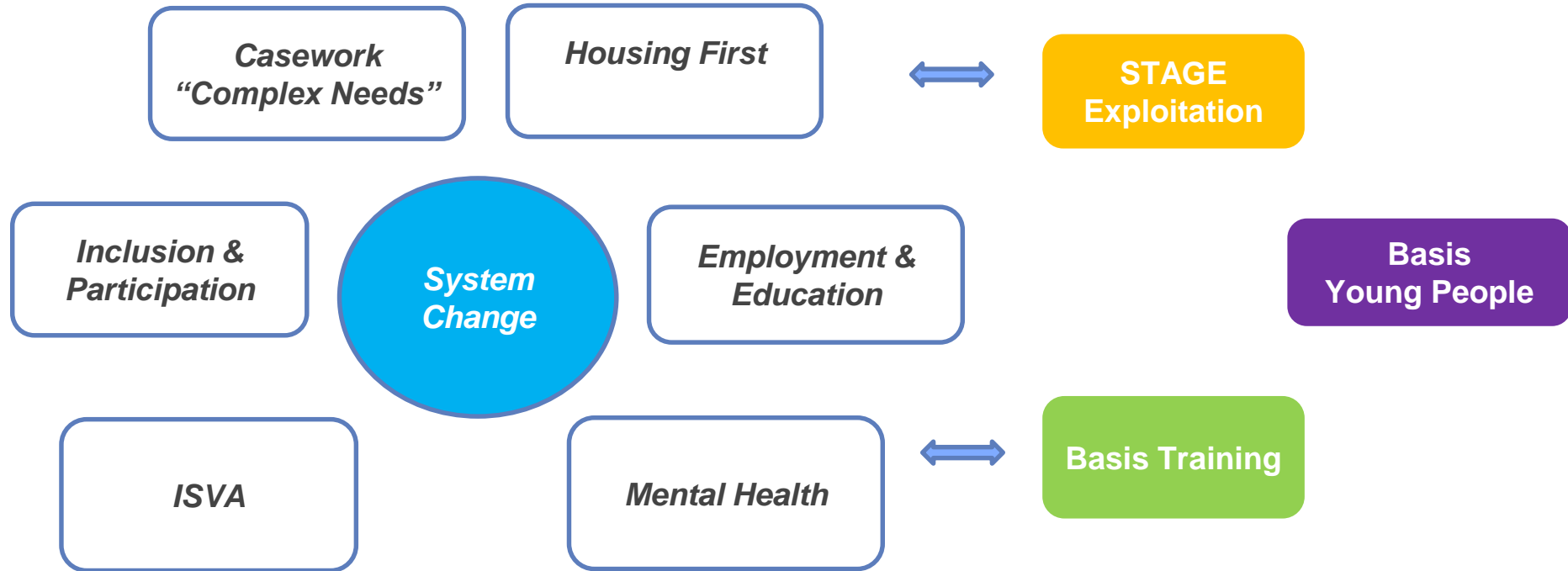
***END STIGMA ,
CREATE SAFETY
AND PROMOTE
EMPOWERMENT***

**Moya Woolven
CEO
Nov 2020**

**Amber Wilson
Bus. Dev. Mgr**

Basis
yorkshire

Basis Yorkshire - SexWork Support Services



The MA



Protection/safeguarding over prosecution

Not arrested for soliciting or kerbcrawling

- In a certain area
- Within 8 pm and 6am

Additional policing, CCTV and cleansing

Police liaison officer

MA – Findings from Independent Review - July 2020

- MA significantly improved women sexworkers health and safety
- Helped support provision become more targeted and holistic

“

...listen it's a Managed Approach down there and the girls are allowed to do it and you need to be careful if you pick them up, it's you that's gonna get in trouble, not the girl and I think that's what's keeping them safe to be honest'.

”

MA – Findings from Independent Review - July 2020

- Improved relationship with the police and increased reporting
- The MA was found to be more effective at dealing positively with problems associated with on-street sex working than any other policing approaches
- There is currently no alternative model or approach that promises to be more effective and which fits within existing UK laws.

“

... “[Before] Police were like ‘oh you’re a working girl you deserve it’, now it’s a Managed Area and things are put in place, people aren’t getting away with as much as they were getting away with”

”

COVID Impact on Sex Workers

- Loss of income (or choosing between COVID risk and money)
- Lack of access to government support schemes
- Reduced access to services (health, housing etc.)
- Fear of losing housing
- Mental health (isolation)
- Stigma enhanced with COVID

“

I'm struggling until my universal credit is paid

Never knew support like this existed for people like me, everyone else has written me off

I would have been without lighting and heating all weekend if it wasn't for you.

”

Service Changes due to COVID

DURING CRISIS

STARTED

END (OR REDUCE) – Crisis only
Food Parcels/Vouchers
Utility Payments

AMPLIFY – new practice
Emergency accommodation
Prescribing Changes /Flexibility
Closer partnership
GP Outreach Van service
Increased real time comms with police on women in MA
IT access

STOPPED

LET GO
Hostel type emergency accommodation
Stakeholder meetings in person

RESTART – Old Practice
Drop in
Outreach in Van
In person visits
Face to face group work
Face to face counselling
Sexual health outreach

STOPPED

POST CRISIS

STARTED

System change needs: housing and health

HOUSING

Improved emergency capacity but still shortage (in particular for those with significant mental health needs)
Referral pathways unable to accommodate emerging, crisis needs
Lack of housing capacity for move on
Need for increased understanding of trauma informed, person centred way
Housing First has been effective but resource intensive (long term)

HEALTH

Judgement (particular mental health) – crisis and generic
Perceived and real stigma in accessing and engagement
Assumptions made about health need
Booking systems often online and don't accommodate night time working
Lack recognition of complexity of surviving while engaging with multitude of agencies
Mistrust based on previous experiences

Changes needed in benefit system

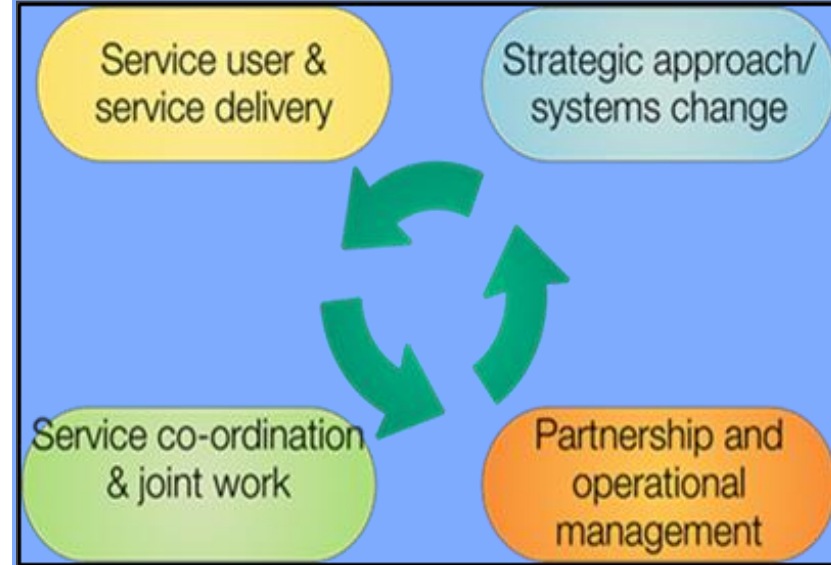
- Increase amount to reflect disproportionate costs of low income (utility etc.)
- Enable non-digital engagement
- Unconditional on job centre visit
- Clearer communication on potential for flexibility
- Not restricted to 1 phone number
- Improved communications about payments
- Improved access to trained support staff
- Longer repayment periods of loan
- Back payments in instalments
- Listen and act on lived experience, including sexworkers



Systems Change



Basis Training – capacity building
Regular partnership review/SLAs
Working group for practice improvement
with key stakeholders supported by
ongoing evidence from service users
Strategic engagement with homelessness
and health inequalities agenda
Multi-stakeholders meetings: MA
outcomes, Social Care, DV, Housing Health



Thank you!



www.basisyorkshire.org.uk



Basis Yorkshire



@BasisYorkshire



@BasisYorkshire

Basis
yorkshire

Basis
sex work project

Basis
young people

Basis
boys

Basis
Bespoke training from
the Social Issues Specialists

CHANGING LIVES

Presenter | Laura McIntyre

Date | 25th November 2020



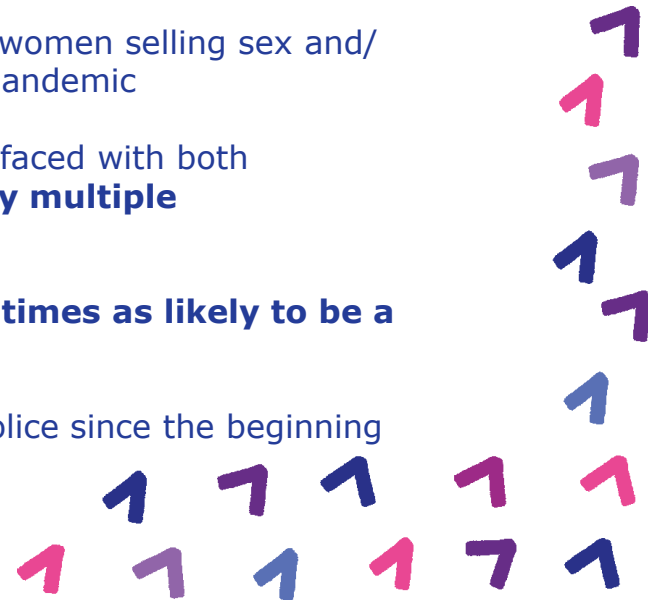
Women, people, individual, person.....



Impact of Covid-19

'Nowhere To Turn' Research, Changing Lives, October 2020

- The Covid-19 pandemic has had **devastating consequences** for women facing abuse and violence
- There has been a **sharp increase in sexual violence** among women selling sex and/or experiencing sexual exploitation since the beginning of the pandemic
- Women selling sex and/or experiencing sexual exploitation are faced with both **intimate partner violence** and **repeated sexual violence by multiple perpetrators**
- Womens reported that perpetrators of sexual violence are **five times as likely to be a stranger** rather than someone known to the victim
- **zero convictions for any sexual offences** reported to the police since the beginning of 2019.



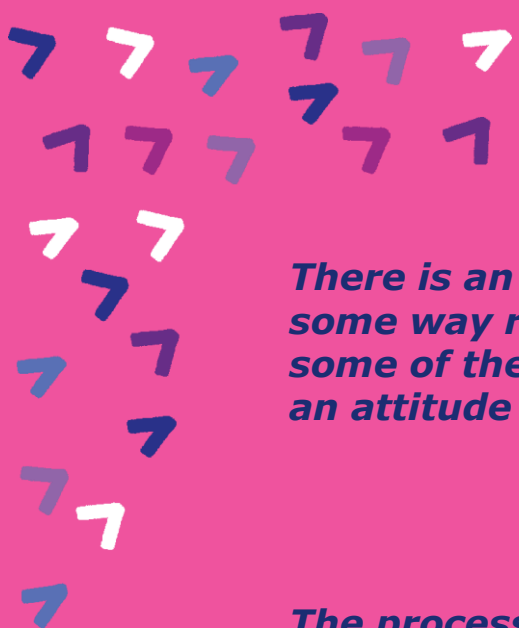


Impact of Covid-19

'Nowhere To Turn' Research, Changing Lives, October 2020

- The introduction by the Minister for **Safeguarding of a statutory duty on local authorities** to ensure that staff working in statutory services are trained to understand and respond to the complexity and interrelated nature of women's existing vulnerabilities
- Adequate, sustainable **and long-term funding for trauma-informed, specialist services** to support women selling sex and/or experiencing sexual exploitation.
- Provision to ensure that women selling sex and/or experiencing sexual exploitation receive adequate **protections under the law.**





There is an assumption that [the women we are support] are in some way responsible [for crimes against them]. In part due to some of the dangerous situations the women put themselves in, an attitude of 'what do they expect?'.

Staff member

The process reporting is traumatic and invasive and does not lead to good outcomes for women. She is re-traumatised and inevitably told the case will result in no further action. This invariably exacerbates [women's existing challenges] and diminishes their faith in the services that are supposed to protect them.

Staff member



THEORY OF CHANGE

INTERCONNECTED PROBLEMS



THREE-STAGE JOURNEY



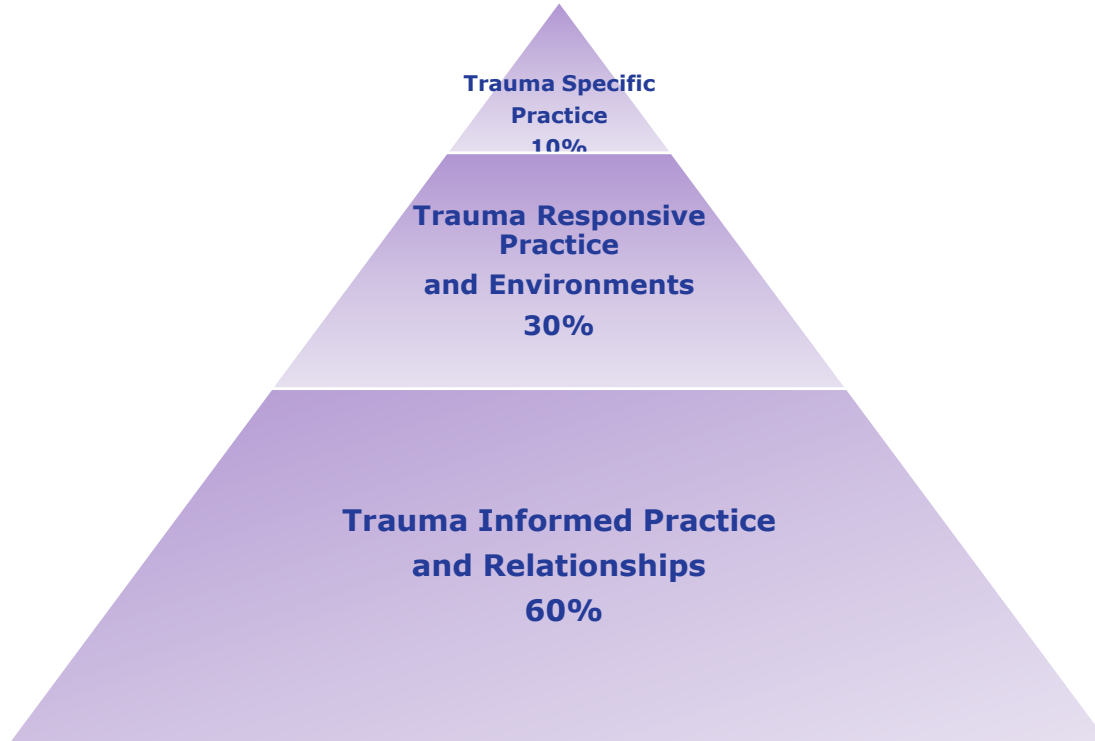
FLOURISHING PEOPLE



CHANGING LIVES



Trauma Pathway Model



- **Clinical Treatment**
- **Structured trauma programmes**
- **Clear expectations of engagement**

- **Arts and Culture**
- **Informal activities**
- **Drop-ins**
- **Outreach**
- **Community based**
- **Gender specific and whole family approaches**

- **Boundaries**
- **Consistency**
- **Empathy**
- **Validation**
- **Understanding Trauma and the Impact it can have on a persons life**

***Assume the people
we serve are
trauma survivors –
we'll be right more
than we're wrong***



A Way Out

Sarah McManus
CEO

A Way Out

- Outreach and Prevention Charity
- Established for 18 years
- Across parts of Durham and Tees Valley
- 4 Services
- Small community based charity
29 staff and 45 volunteers
- Work with some of the most marginalised, vulnerable and isolated client groups
- Christian values and ethos

The Region

- ▶ Predominantly work across Cleveland - 4 different LA's
- ▶ Mix between urban and rural
- ▶ Deprivation v affluence
- ▶ 2 main on street sex work beats
- ▶ Health inequalities
- ▶ Great people, place and passion

On Street Sex Work - Local Picture

- ▶ Caseload 60 women who sell sex on street primarily across Middlesbrough and Stockton
- ▶ Mainly White British
- ▶ 100 additional women access low threshold harm reduction support
- ▶ Average age 37
- ▶ Multiple disadvantages and historic abuse and harm
- ▶ Mental health conditions around depression, anxiety, Bi-Polar, Border Line Personality Disorder
- ▶ Physical health conditions around COPD, poor management around injection sites, effects from drug/alcohol addiction, hepatitis, respiratory conditions

Voices of the Women

“I missed my kids and mam, but the relationship pressure of being locked inside with my partner became strained. My partner’s mood changed he got aggressive. Made me realise I don’t want to stay with my partner”

During COVID I realised that I don’t like myself and I took greater risks. I really haven’t coped very well. I bought more drugs at once because it was risky going out, but then I used more at any one-time vicious cycle “



45% increase
in drug use



68% hidden homeless,
unsuitable accommodation



40% adhered to
restrictions



75% struggling
with loneliness and isolation



25% experience
sexual violence



Movement across to work
with regulars from home

Current Findings



49% have made some changes
that they feel have
positively impacted them



23% increased
wellbeing



88% engagement
with our services



Referral numbers are more or less the same – main referrer is the SARC and Adult Safeguarding



Impact on staff wellbeing



Positive partnership working – scope to think outside the box and be creative



Too early to determine true full impact as current focus upon meeting immediate need



Complexity increasing around issues such as mental health, difficulty accessing health services, increase around drug use, unsuitable and unstable accommodation and sexual exploitation

Current Findings

Voices of the Women

away out

“I had to register with a new doctor during lockdown and was told I had to do it all on the computer....I don't have a computer and my phone doesn't let me do stuff like that. My support worker helped me with this and she sent the forms to the doctor for me. I am not sure what I would have done without her help...I probably wouldn't have had a doctor”

“I kept sex working during Lockdown. I've have arrangements with my regular punters, like I go round to their place on their payday, it's a regular arrangement. I'm only seeing one regular at the moment though. I need to pay my rent and buy food”

Our Service Offer

- ▶ Flexible, meeting where the women are stood - person centred strengths based approach
- ▶ Weekly Community Outreach
- ▶ Meeting clients face to face, conduct welfare checks, safety planning
- ▶ Meeting immediate need
- ▶ Guidance in plain English
- ▶ Digital engagement
- ▶ Partnership and collaborative working
- ▶ Tailored gender trauma informed support
- ▶ Focus upon known health conditions

What now?

- ▶ Community Engagement
- ▶ Increase visibility of the women giving truth to lived experience to inform social change and Justice
- ▶ Advocate for person centred approaches rather than process led ones
- ▶ Collaborative region wide sex work strategy
- ▶ Work in partnership across the region to agree how we record, monitor and use data around sexual exploitation of adults
- ▶ Identify good practice and what worked and use the learning to grow and develop
- ▶ More female only specialist accommodation
- ▶ Longer term funding to address legacy around COVID

A Way Out

- “They’re always there, you can count on them, like I can never count on anyone else You mess up and they are there, not judging you, making sure you are safe, you’ve got food”

LOVE
HOPE
FREEDOM