

# APPENDIX A

EIA and Report of Public Health

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## Equality Impact Assessment and Consultation

Approved

Approved by Johnston Annemarie

### Equality Impact Assessment

#### Introductory Information

**Reference number**

556

**Proposal type** Budget  Project**Project name**

Sex Establishment Policy - Incorporating Sexual Entertainment Venues, Sex Shops and Sex Cinemas

**Decision Type****Type of decision**

- Cabinet
- Cabinet Committee (e.g. Cabinet Highways Committee)
- Leader
- Individual Cabinet Member
- Executive Director/Director
- Officer Decisions (Non-Key)
- Council (e.g. Budget and Housing Revenue Account)
- Regulatory Committees (e.g. Licensing Committee)

**Lead Cabinet Member**

Johnson Robert (LAB- CLLR)

**Entered on Q Tier** Yes  No**Year(s)****EIA date**

21/03/2019

**EIA lead**

Johnston Annemarie

**EIA contact**

Bower Claire

**Lead officer**

Crofts Michael

**Lead Corporate Plan priority**

Strong Economy

## Portfolio, Service and Team

### Cross Portfolio

Yes  No

### Portfolio

Place

### Is the EIA joint with another organisation (eg NHS)?

No  Yes

### Brief aim(s) of the proposal and the outcome(s) you want to achieve

VERSION 5 – POST 2nd ROUND CONSULTATION

Local authorities, by adopting Schedule 3 of the Local Government (Miscellaneous Provisions) Act 1982, licence sex establishments.

Sex establishments are:

- Sex cinemas
- Sex shops
- Sexual Entertainment Venues (SEV's).

This EIA refers to Sheffield City Council's draft policy document that conveys to its users how Sheffield's Licensing Authority proposes to deal with applications for sex establishment licences whilst giving the assurance that all applications will be dealt with on their own individual merits.

The Council does not take a moral stance in the draft policy and recognises that Parliament has made it lawful to operate sex establishments.

The Council takes its obligations under the Public Sector Equality Duty seriously and understands that premises covered by this draft policy have the potential to have an adverse impact on people with protected characteristics under the Equality Act 2010

The legislation provides a framework to assist applicants and decision makers in considering applications, ensuring all relevant factors are given proper attention and the draft policy goes beyond the legislation and sets out the local expectations of Sheffield.

The policy was originally drafted throughout the latter part of 2016 and during 2017 and was approved at Licensing Committee on 23rd November 2017 with a commencement date of 1st January 2018.

However, the policy was subject to a judicial review where it was accepted that Sheffield City Council:

- failed to properly discharge the public sector equality duty as contained in s149 Equality Act 2010 in respect of its decision of 23rd November 2017 and
- failed to take proper account of the consultation responses in respect of its decision of 23rd November 2017.

As a consequence of the Consent Order (a judge-approved order confirming a legally binding agreement between parties) the Council undertook that:

- the policy dated 23rd November 2017 will be the subject of a public consultation; and
- the draft Sex Establishment Policy that is to be presented to the licensing committee thereafter shall be subject to an Equality Impact Assessment.

This process, taking place in line with the Consent Order, includes fully re-consulting, taking proper account of the consultation responses and constantly monitoring and updating this EIA throughout the process.

This version of EIA 556 considers all comments received during the consultation in relation to the three equality Aims of the Public Sector Equality Duty. These are to pay due regard to:

- Eliminate Discrimination, Harassment and Victimisation
- Advance Equality of Opportunity
- Foster Good Relations.

### Impact

Under the [Public Sector Equality Duty](#) we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

More information is available on the [Council website](#) including the [Community Knowledge Profiles](#).

Note the EIA should describe impact before any action/mitigation. If there are both negatives and positives, please outline these - positives will be part of any mitigation. The action plan should detail any mitigation.

#### Overview

Overview (describe how the proposal helps to meet the Public Sector Duty outlined above),  
Supporting Evidence (Please detail all your evidence used to support the EIA)

The Licensing Authority has used the following sources of information in order to identify what impact the licensing of sex establishments may have on people with protected characteristics:

1. The draft policy has been subject to a public consultation process between 14/4/19 and 31/10/19 in order to gather information and engagement with stakeholders, representative groups and service users.

160 comments were received during this time, the majority of which are against the licensing of, specifically, sexual entertainment venues.

Comments were also received from United Voices of the World Union on behalf of dancers at Spearmint Rhino and key partners in the licensing of sex establishments in Sheffield; the Sheffield Safeguarding Children Board and the Office of the Director of Public Health.

2. The draft policy was amended and a subsequent round of consultation was carried out between 28/1/2020 and 23/2/2020 with an updated draft being circulated to all those that made comments during stage one.

3. The Health Improvement Principal from the Office of the Director of Public Health, Sheffield City Council report entitled "Sex industry and Sexual Entertainment Venues and health evidence summary" produced in January 2018.

The report provides an evidence summary of peer reviewed journals from the past 5 years using the search terms sex industry + health and sexual entertainment venues + health. The evidence summary is attached to this EIA and is referred to throughout as the "health evidence summary".

4. The House of Commons report by the Women and Equalities Committee entitled "Sexual harassment of women and girls in public places", published in October 2018 (<https://publications.parliament.uk/pa/cm201719/cmselect/cmwomeq/701/701.pdf>), detailing an inquiry into sexual harassment in women's daily lives outside of work.

5. The 2019 National Student Money Survey by Save the Student (<https://www.savethestudent.org/money/student-money-survey-2019.html>), an independent survey of 3,385 UK students about the costs of university.

6. The report by the University of Bristol's Centre for Gender and Violence Research entitled "The nature and prevalence of prostitution and sex work in England and Wales today", published in October 2019 ([https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/842920/Prostitution\\_and\\_Sex\\_Work\\_Report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/842920/Prostitution_and_Sex_Work_Report.pdf)).

7. An article from the Plan International UK website dated 4th September 2018 with the title, "Two Thirds of Girls Have Been Sexually Harassed In Public, New Survey Finds" (<https://plan-uk.org/media-centre/two-thirds-of-girls-have-been-sexually-harassed-in-public-new-survey-finds>).

This EIA and all comments received during the consultation will be subject to consideration by Members of the Licensing Committee when the draft policy is put forward for determination. Further amendment to the policy may be made at the point of determination.

It is important to note that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

## Impacts

Proposal has an impact on

### Health

Does the Proposal have a significant impact on health and well-being (including effects on the wider determinants of health)?

Yes  No

#### Staff

Yes  No

**Impact**

Positive  Neutral  Negative

**Level**

None  Low  Medium  High

**Details of impact**

There are negative health risks associated with sex establishments, mainly SEV's.

Should the authority receive evidence of health issues in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

- Mental Health (also relevant to the protected characteristic; disability)

The "health evidence summary" highlights high levels of young age workers, poor mental health, sexual abuse histories, and debt in the sex industry which may make performers or patrons vulnerable.

It found that the most prevalent mental health disorders suffered by women working in the industry (including SEV's) were anxiety and depression (mood disorders), PTSD and substance misuse disorders.

- Physical and Sexual Violence

The "health evidence summary" highlights that those working in the SEV industry and wider sex industry face high levels of workplace violence, including physical violence and sexual violence. The summary recommends that "regulation of such workplaces should include health and safety measures to reduce the risk of violence to staff".

Consultation comments received on behalf of United Voices of the World (UVW) from members working as dancers at Spearmint Rhino in Sheffield state the following:

"We understand, as a feminist trade union, that violence against women and girls manifests itself in many different ways and situations. This is particularly true when there are no protections in place and no legal framework to enforce them."

One comment received during the consultation from a specialist in the prevention of violence against women and girls referred to the concept of such venues demonstrating and encouraging the development of attitudes that are known to be supportive of violence against women as well as sexism more generally.

- Sexual Health

The "health evidence summary" discusses sex work globally as being a driver of sexually transmitted HIV, however, this is focussed on direct sex work and not licensed sex establishments. The summary does refer to the incentives of higher income through riskier practice in a competitive market in the context of lifting the cap on the number of SEV's.

Consultation comments from the Office of the Director of Public Health state "The number or limit of sex establishments (including SEV's) should be based on the capacity of welfare services (drug, alcohol, sexual health, mental health, domestic abuse, sexual violence) and regulatory services (licensing, safeguarding) to proactively support venues."

**Customers**

Yes  No

**Comprehensive Health Impact Assessment being complete**

Yes  No

Please attach health impact assessment as a supporting document below.

**Public Health Leads has signed off the health impact(s) of this EIA**

Yes  No

**Health Lead**

Hird Susan

**Age**

**Staff** Yes  No**Impact** Positive  Neutral  Negative**Level** None  Low  Medium  High**Details of impact**

There is a risk of negative age impacts associated with sex establishments.

Should the authority receive evidence of issues associated with a person's age in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

- Young people and students

The "health evidence summary" refers to a study by Sanders and Hardy (2015) suggesting that 73.5% of people start work in SEV's under the age of 25 with financial factors being the main driving force.

In addition, a recent National Student Money Survey by Save the Student (<https://www.savethestudent.org/money/student-money-survey-2019.html>) indicated that 4% of around 3,000 student respondents have done some kind of adult work due to financial hardship. Note, these statistics refer to adult work as a whole and give examples that include selling intimate photos, webcamming, phone dating and nude modelling. The example of working in a sex establishment (SEV) is not referred to.

Work carried out during the policy consultation in 2017 with dancers at Spearmint Rhino indicated that 5 out of 25 respondents were studying or dancing to fund studies.

It is not an offence for a student over the age of 18 to be employed in a sex establishment.

- Under age workers

The above findings highlight a risk that people younger than 18 may be attracted to working at sex establishments. However, the Licensing Authority carry out inspections of licensed establishments and has not received any complaints regarding under 18's accessing any premises and has not received any information from South Yorkshire Police, the Sheffield Children Safeguarding Partnership or any other such organisation informing complaints or issues in relation to workers under the age of 18.

**Customers** Yes  No**Impact** Positive  Neutral  Negative**Level** None  Low  Medium  High**Details of impact**

There is a risk of negative age impacts associated with sex establishments. These have been considered and mitigated against below. Should the authority receive evidence of issues associated with a person's age in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

It is important to reiterate that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

- Impact of premises on persons under 18

The external appearance of sex establishments has the potential to impact those under 18 negatively.

- Persons under 18 accessing licensed premises

The Licensing Authority has not received any complaints regarding under 18's accessing any premises referred to in this assessment and has not received any information from South Yorkshire Police, the Sheffield Children Safeguarding Partnership or any other such organisation informing complaints or issues in relation to under 18's.

It does, however, remain a risk, as with any age restricted licensed premises.

- Young people and students (over 18)

The "health evidence summary" found evidence that university students (over the age of 18) were key consumers of SEV and sex industry services and debt and illicit drug use were predictive of consumption.

There is no legislative restriction to over 18's accessing sex establishments.

## Disability

### Staff

Yes  No

### Impact

Positive  Neutral  Negative

### Level

None  Low  Medium  High

### Details of impact

There is a potential negative impact on people with a disability if a premises does not meet the standards and make reasonable adjustments to the physical barriers to access throughout the building. Should the authority receive evidence of issues associated with disability in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

The Licensing Authority has not received any complaints in relation to the treatment of disabled people or in relation to the access to a premises in a sex establishment.

Disability encompasses a wide range of factors as set out in the Equality Act 2010 definitions. There may be an impact on the mental health of people working in the venues, with the "health evidence summary" indicating that the most prevalent mental health conditions are anxiety, depression, PTSD and substance misuse disorders.

### Customers

Yes  No

### Impact

Positive  Neutral  Negative

### Level

None  Low  Medium  High

### Details of impact

There is a potential negative impact on people with a disability if a premises does not meet the standards and make reasonable adjustments to the physical barriers to access throughout the building. Should the Licensing Authority receive evidence of issues associated with disability in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

It is important to reiterate that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

Disability encompasses a wide range of factors as set out in the Equality Act 2010 definitions.

The most notable is a potential negative impact on people with a disability if a premises does not meet the standards and make reasonable adjustments to the physical barriers to access throughout the building.

The Licensing Authority has not received any complaints in relation to the treatment of disabled people or in relation to the access to a sex establishment premises.

## Race

### Staff

Yes  No

### Impact

Positive  Neutral  Negative

### Level

None  Low  Medium  High

### Details of impact

There are no statistics on the ethnicity of staff who work within sex establishments in the city. Should the Licensing Authority receive evidence of issues associated with race in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

No comments relating to race have been received in this consultation nor in previous consultations.

The "health evidence summary" highlights a report that details there are more prosecutions for trafficking in the sex industry than other industries such as garment, agriculture, domestic service which have much higher prevalence of trafficking.

Should a member of staff, management or a customer have a safeguarding concern regarding potential trafficking or coerced involvement in the industry, there should be an awareness of where to report information.

### Customers

Yes  No

### Impact

Positive  Neutral  Negative

### Level

None  Low  Medium  High

### Details of impact

It is important to reiterate that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

Sheffield is a diverse city and the ethnic profile continues to change. The proportion of residents classifying themselves as BAME has grown from 11% in 2001 to 19% in 2011. BAME adults make up 17% of the population.

There is no known negative impact on any customers with this protected characteristic. Should the Licensing Authority receive evidence of issues associated with race in licensed venues, a full investigation will be carried out and may result in the licence being revoked.

**Religion/Belief****Staff**

Yes  No

**Customers**

Yes  No

**Impact**

Positive  Neutral  Negative

**Level**

None  Low  Medium  High

**Details of impact**

It is important to reiterate that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

In the 2011 Census, 53% of Sheffield people said they were Christian, 31% had no religion and 8% were Muslim.

It is understood that the nature of sex establishments are such that they may offend or be contrary to certain faiths and beliefs.

However, Parliament has made it lawful to operate sex establishments and that such and it is the Council's role as the Licensing Authority to set policy and regulate such premises in accordance with the law.

Paragraph 3.23 of the Home Office guidance on licensing for sexual entertainment venues states explicitly that "objections should not be based on moral grounds/values and local authorities should not consider objections that are not relevant to the grounds set out in paragraph 12".

However, each comment received in relation to the draft policy will be carefully considered.

The "health evidence summary" highlights that there is reasonable consensus of sensitive land use where SEVs would not be appropriate which includes near religious sites.

**Sex**

**Staff** Yes  No**Impact** Positive  Neutral  Negative**Level** None  Low  Medium  High**Details of impact**

There is a risk of negative impacts on sex associated with sex establishments, mainly SEV's.

- Fostering good relations between women and men

On receipt of an annual licence renewal the Licensing Authority receives objections from local residents and other interested parties from around the country about the unsuitability of sexual entertainment venues and the fact that the core activity being sold is women taking their clothes off for men's money.

It is inherent in the business of an SEV that women's bodies are objectified and commoditised; businesses operating as SEV's have legal basis to do so, however, comments received during the first consultation into this draft policy point to a growing body of research evidence about the harmful impact of SEV's (particular reference should be given to objection no's 19; 29; 57; 145 & 153 - attached).

It is the aim of this EIA and the Sex Establishment Policy to minimise the impact of establishments operating in Sheffield.

- Eliminating unlawful discrimination, harassment and victimisation

The report on sex work by Bristol University suggests that consumption of alcohol in sexual entertainment venues increases the potential for assault; one female dancer is quoted in the report as saying "It is also difficult, in an environment where alcohol is flowing freely, to police your own personal boundaries, particularly if you are in a venue where the no-touching rule is not enforced".

The submission by United Voices of the World (UVW) members working as dancers at Spearmint Rhino in Sheffield stresses the need to protect workers and ensure the safety of all in the venue. UVW suggest all workers (including management, door staff, bar staff, DJ staff and performers) should complete training and have access to up to date educational resources on sexual assault, harassment and consent.

- Advancing equality of opportunity between women and men

The current SEV in Sheffield employs female dancers and there are there are occasions each year when the venue hosts a male strip show but this is limited to 2 or 3 events.

Dr Rachela Colosi from the University of Lincoln submitted comments to the Spearmint Rhino renewal application in 2019 and attended the Sub-Committee hearing. Research she had conducted suggested "where the licenses of SEV's are denied or revoked, as well as exposing women to poverty through unemployment, those who wish to continue to work as dancers, but are unable to find work in SEV's, may have no alternative but to seek work in unregulated spaces of erotic dance, increasing their risk of experiencing further exploitation. There is evidence to suggest that those working in unregulated spaces of erotic dance are exposed to more risks, including non-payment of labour, and increased incidents of sexual and physical violence".

Evidence provided at the renewal Sub-Committee hearing for Spearmint Rhino by current dancers suggested that they felt safe working at the club. They choose to work there as it gave them financial security and flexible working hours.

**Customers** Yes  No**Impact** Positive  Neutral  Negative**Level** None  Low  Medium  High**Details of impact**

A study by Plan International in 2018 found that two thirds of young women aged between 14-21 have been sexually harassed in a public place in the UK.

### Sexual Orientation

#### Staff

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

Please refer to the 'sex' impact section.

There is no barrier to performers in SEV premises in respect of sexual orientation and no concerns have been raised with the licensing authority in respect of this characteristic.

#### Customers

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

It is important to note that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

Please refer to the 'sex' impact section.

There is no barrier to customers of any sex establishment in respect of sexual orientation and no concerns have been raised with the licensing authority in respect of this characteristic.

### Transgender

#### Staff

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

There is no specific local data, however the Gender Identity Research and Education Society estimates that about 0.6% of people are trans, so approximately 3000 people in the city (see LGBT Community Knowledge profile).

There is no barrier to performers in SEV premises in respect of gender identity and no concerns have been raised with the licensing authority in respect of this characteristic.

#### Customers

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

It is important to reiterate that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

There is no bar to legal entry, save that for those under the age of 18.

There is no perceived disproportionate impact in regards to this characteristic.

### Voluntary/Community & Faith Sectors

#### Staff

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

There is a potential risk of negative impact on this characteristic in that some that welfare services may be provided by the VCF sector.

Consultation comments from the Office of the Director of Public Health state "The number or limit of sex establishments (including SEV's) should be based on the capacity of welfare services (drug, alcohol, sexual health, mental health, domestic abuse, sexual violence) and regulatory services (licensing, safeguarding) to proactively support venues."

#### Customers

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

It is important to reiterate that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

The legislation gives Local Authorities discretionary grounds to refuse sex establishment licences on the grounds that the grant or renewal of a licence would be inappropriate, having regard to the character of the relevant locality and use of other premises in the vicinity, amongst other things.

### Cohesion

#### Staff

Yes  No

#### Customers

Yes  No

#### Impact

Positive  Neutral  Negative

#### Level

None  Low  Medium  High

#### Details of impact

It is important to note that within this EIA, the term 'customer' is not limited to patrons of the establishments but rather any and all persons that could potentially be impacted – the general public.

The "health evidence summary" highlights a study where participants associated SEV's with undesirable characteristics such as binge drinking, drug using, loitering, noise and other anti-social behaviour. The authors discuss views of customers of SEV's being threatening and risky and contrast this with the low number of reports of serious sexual assault.

The Licensing Authority has found no evidence of a contribution to crime and disorder, public nuisance or anti-social behaviour in so much that South Yorkshire Police (who are invited to make comments as part of policy and applications) have never made representations in regards the applications for sex establishments or policy. SYP have been formally consulted on both rounds of consultation on this policy.

### Supporting Documentation

Objector 29.pdf  
 Objector 57.pdf  
 Objector 153.pdf  
 Public Health\_SEV Evidence Summary v2.docx  
 Objector 145.pdf  
 Objector 19.pdf

### Cumulative impact

#### Proposal has a cumulative impact

Yes  No

#### Cumulative impact

Across a Community of identity/interest

#### Details of cumulative impact

Since the creation of SEV's in the legislation, applications have been declining in Sheffield;

- in 2011 there were 8 premises licensed as sex shops, this has reduced to 2; and
- in 2011 there were 3 premises licensed as sexual entertainment venues, this has now reduced to 2.

There is no desire from the Council to see this area of licensed activity grow; applications for new licences may still be made in line with the legislation and will be considered accordingly however, the Council's policy is that the appropriate number of sex establishments for the Sheffield City Centre is nil.

#### Proposal has geographical impact across Sheffield

Yes  No

#### Local Partnership Area(s) impacted

All  Specific

### Action Plan and Supporting Evidence

#### Action plan

##### Health

There is a risk of negative health impacts associated with sex establishments, mainly SEV's.

In order to mitigate the risks highlighted in the 'health' section above, the draft policy has been updated as follows:

- stipulation that licence holders shall ensure that all members of management and staff attend regular safeguarding training designed to support management and staff to recognise vulnerability in adults who are employees, voluntary workers, self-employees, performers, or customers. The training should include: mental health, anxiety, depression, PTSD, body dysmorphia, anorexia, substance misuse/addiction disorders; mental capacity and learning disabilities.

- stipulation that holders of sex establishment licences must display and make available, without charge, literature on matters relating to:
  - sexual health,
  - the prevention of sexually transmitted infections and HIV,
  - mental health;
  - substance misuse;
  - information about local health services as may be supplied to them by relevant local bodies;
  - debt; and
  - sexual abuse/sexual violence/domestic abuse services.
 This information must be made available to patrons, employees and performers.
- stipulation that relevant individuals must submit a basic Disclosure and Barring Service certificate on application. Where relevant individuals have convictions for violence (including civil orders for domestic abuse as well as convictions for violence (including domestic violence) stalking, harassment, coercive control and other offences against women that may be passed in future legislation) and sexual offences (amongst other things), it is unlikely that a licence will be granted.
- stipulation that licence holders to have in place and comply with health and safety policy measures that reduce the risk of violence to staff. SEV standard licence conditions state that a policy must in place concerning the safety of performers arriving at and leaving the premises.
- the draft policy proposes that the appropriate number of sex establishments for the whole of Sheffield is nil (excluding existing establishments – 2 x SEV & 2 x sex shop). The statement from the Office of the Director of Public Health provides a rationale for this limit.
- SEV Standard Licence Conditions prohibit any physical contact between performers and members of the viewing public.

### Age

There is a risk of negative age impacts associated with sex establishments.

In order to mitigate the risks highlighted in the 'age' section above, the draft policy has been updated as follows:

For staff:

- stipulation that licence holders shall ensure that all members of management and staff attend regular safeguarding training designed to support management and staff to recognise vulnerability in adults who are employees, voluntary workers, self-employees, performers, or customers. The training should include: mental health, anxiety, depression, PTSD, body dysmorphia, anorexia, substance misuse/addiction disorders; mental capacity and learning disabilities.
- stipulation that holders of sex establishment licences must display and make available, without charge, literature on matters relating to:
  - sexual health,
  - the prevention of sexually transmitted infections and HIV,
  - mental health;
  - substance misuse;
  - information about local health services as may be supplied to them by relevant local bodies;
  - debt; and
  - sexual abuse/sexual violence/domestic abuse services.
 This information must be made available to patrons, employees and performers.
- the legislation has offences relating to persons under 18 being employed and SEV and Sex Shop Standard Licence Conditions prohibit licence holders from employing any person under 18.

For customers:

- discretionary grounds under the Local Government (Miscellaneous Provisions Act) 1982 allow refusal where the grant or renewal of the licence would be inappropriate, having regard to the use to which any premises in the vicinity are put.
- reference to having regard to the proximity of schools, nurseries or other premises substantially used by or for children under 18 years of ages and parks or other recreational areas designed for use by or for children under 18 years of age.
- the operational hours of premises licensed as sexual entertainment venues differ to educational establishments.
- The policy stipulates that signage of establishments is considered by the applicant. Signage of all sex establishments is considered on application and will be amended to be made discreet, if necessary.
- Sexual Entertainment Venue Standard Licence Conditions prohibit licensees from advertising outside the premises, in the immediate vicinity, or elsewhere within the city using photographs or images that indicate or suggest that relevant entertainment takes place on the premises.
- Legislation and conditions state that the users of these premises are over the age of 18.
- The operational hours of premises licensed as sexual entertainment venues generally differ to educational establishments.
- Sexual Entertainment Venue Standard Licence Conditions prohibit licensees from advertising outside the premises, in the immediate vicinity, or elsewhere within the city using photographs or images that indicate or suggest that relevant entertainment takes place on the premises.

### Disability

There is a risk of a negative impact on disability associated with sex establishments.

The City Council's Health Protection Service (Health and Safety) will work with and advise applicants regarding accessibility to the premises in line with the Equalities Act 2010. In order to mitigate the risks highlighted in the 'disability' section above, the draft policy has been updated as follows:

- stipulation that licence holders shall ensure that all members of management and staff attend regular safeguarding training designed to support management and staff to recognise vulnerability in adults who are employees, voluntary workers, self-employees, performers, or customers. The training should include: mental health, anxiety, depression, PTSD, body dysmorphia, anorexia, substance misuse/addiction disorders; mental capacity and learning disabilities.
- Stipulation that holders of sex establishment licences must display and make available, without charge, literature on matters relating to:
  - sexual health,
  - the prevention of sexually transmitted infections and HIV,
  - mental health;
  - substance misuse;
  - information about local health services as may be supplied to them by relevant local bodies;
  - debt; and
  - sexual abuse/sexual violence/domestic abuse services.

This information must be made available to patrons, employees and performers.

#### **Race**

There is a risk of a negative impact on race associated with sex establishments.

In order to mitigate the risks to staff highlighted in the 'race' section above, the draft policy has been updated as follows:

- Stipulation that literature is available to patrons, employees and performers on the subject of safeguarding concerns.
- stipulation that licence holders shall ensure that all members of management and staff attend regular safeguarding training designed to support management and staff to recognise vulnerability in adults who are employees, voluntary workers, self-employees, performers, or customers. The training should include: mental health, anxiety, depression, PTSD, body dysmorphia, anorexia, substance misuse/addiction disorders; mental capacity and learning disabilities.

#### **Religion/Belief**

The risk of a negative impact on religion/belief is low however, there is a potential for a premises to have a negative impact based on its location.

The legislation gives Local Authorities discretionary grounds to refuse sex establishment licences on the grounds that the grant or renewal of a licence would be inappropriate, having regard to the character of the relevant locality and use of other premises in the vicinity, amongst other things.

The draft policy gives consideration to whether the premises are sited near properties which are sensitive for religious purposes e.g. synagogues, churches, mosques, temples.

#### **Sex**

There is a high risk of sexual entertainment venues having a negative impact on this characteristic in relation to the staff that work at the venues.

It is difficult to mitigate the objectification and commoditisation of women's bodies. Businesses operating as SEVs have a legal basis to do so.

It is possible however, to write into the policy, ways in which licence holders are expected to safeguard the women choosing to work in such venues and raise the operational standards. These practices will then be checked during enforcement exercises and advice given or referral to committee, where appropriate.

The policy has a section focussed on safeguarding with the following headings;

- Policies and procedures
- Support services
- Training
- Age checks
- Literature and signposting

Each of these sections aims to embed improved harm reduction practices in venues, ensuring all staff are aware of conditions in place and how to enforce them.

In addition, further text has been added to the 'Conditions' section of the policy to ensure management are clearly informing all members of staff of the licence conditions, how to adhere to them and the consequences if breaches are deemed to occur.

Since the legislation was adopted in 2011, the number of sex establishments has reduced from 8 to 2 for sex shops and from 3 to 2 for sexual entertainment venues. This policy states that the appropriate number of sex establishments for the Sheffield City Centre is nil with existing establishments being an exception to this number.

This EIA has also highlighted a wider negative impact on the citizens of Sheffield, not just the customers that choose to visit the venue.

As previously stated businesses operating as SEV's have a right to do so and legislation is in place to regulate them, however, the wide consultation exercise carried out and the findings of the EIA result in mitigation to being put in place to reduce the impact.

Evidence referred to in the 'sex' section above mentions that ensuring that women and girls have the freedom to enjoy being out at night, to go to bars and clubs and travel home safely without being sexually harassed or assaulted is the responsibility of everybody and puts the onus on central government, the police, local authorities, bars and venues and transport agencies.

In addition, the "health evidence summary" and comments received during the consultation suggest that women avoid walking near SEV's, thus restricting their freedom of movement.

Licence holders must be aware of what is happening in and around their venues and the following text has been added to the draft policy: "Where reports are received by the Licensing Authority during the term of a licence that evidence harm to women in or around sexual entertainment venues, the licence will be referred to the Licensing Sub-Committee to determine whether the licence holder, manager or beneficiary remain suitable to hold the licence".

In addition, when determining the suitability of an applicant, where relevant individuals applying for licences have convictions for violence, harassment and other offences against women, it is unlikely a licence will be granted.

The Act allows local authorities to impose numerical control on the number of sex establishments within a particular location. Based on the findings of the research above the draft policy proposes a 'nil' limit in Sheffield City Centre for all types of sex establishment. The draft policy makes existing establishments exempt to this limit, however any renewal application will not automatically be granted and will be considered on its own individual merit. This limiting of establishments will restrict the areas in the city centre where women feel threatened.

The Licensing Authority has open lines of communication with dancers at Spearmint Rhino and the United Voices of the World Union submitted comments during the first round of consultation on behalf of members working as dancers at Spearmint Rhino.

The House of Commons report refers to the Government's commitment to eliminate sexual harassment of women and girls by 2030. However, it also states that there is no evidence of a programme for achieving this goal. The Licensing Authority will ensure any emerging guidance is adhered to.

#### **Sexual Orientation**

There is no perceived disproportionate impact in regards to this characteristic.

#### **Transgender**

There is no perceived disproportionate impact in regards to this characteristic.

#### **Voluntary/Community & Faith Sectors**

There is a risk that SEV's could have a negative impact on the VCF sector as providers of some welfare services. This been taken into consideration when setting a 'nil' limit in the policy to ensure that services are not overstretched.

There is a potential for a premises to have a negative impact based on its location, and the draft policy specifically accounts for this in that the following will be considered when applications are received:

- the premises are sited near properties which are sensitive for religious purposes e.g. synagogues, churches, mosques, temples;
- And
- places primarily used for religious worship.

#### **Cohesion**

Where reports are received by the Licensing Authority during the term of a licence that evidence harm to women in or around sexual entertainment venues, the licence will be referred to the Licensing Sub-Committee to determine whether the licence holder, manager or beneficiary remain suitable to hold the licence.

South Yorkshire Police have not made representation in regards to the draft policy.

#### **Supporting Evidence (Please detail all your evidence used to support the EIA)**

Various information sources are cited throughout this document.

#### **Consultation**

**Consultation required**

Yes  No

**Consultation start date**

14/04/2019

**Consultation end date**

23/02/2020

**Details of consultation**

Statutory consultees / previous objectors to licences

The draft policy has been subject to a public consultation process between 14/4/19 and 31/10/19 in order to gather information and engagement with stakeholders, representative groups and service users.

160 comments were received during this time, the majority of which are against the licensing of, specifically, sexual entertainment venues.

Comments were also received from United Voices of the World Union on behalf of dancers at Spearmint Rhino and key partners in the licensing of sex establishments in Sheffield; the Sheffield Safeguarding Children Board and the Office of the Director of Public Health.

The draft policy was amended and a subsequent round of consultation was carried out between 28/1/2020 and 23/2/2020 with an updated draft being circulated to all those that made comments during stage one.

**Are Staff who may be affected by these proposals aware of them**

Yes  No

**Are Customers who may be affected by these proposals aware of them**

Yes  No

**If you have said no to either please say why**

**Summary of overall impact****Summary of overall impact**

Overall it is considered that there may be some potential negative equality impacts, in particular regarding health, young people and women.

The draft policy attempts to mitigate any potential negative impacts of applications and the Licensing Authority will administer and enforce the licensing regime in accordance with the law.

The draft policy does not propose any increase in numbers of sex establishments, as there is a potential risk to health and welfare if more venues are licensed because over-stretched regulatory and welfare services will not be able to respond to concerns.

The policy and this EIA version will now be presented to the Licensing Committee for determination.

**Summary of evidence**

The Health Improvement Principal from the Office of the Director of Public Health, Sheffield City Council report entitled "Sex industry and Sexual Entertainment Venues and health evidence summary" produced in January 2018.

Objection No's: 19; 29; 57; 145 & 153

**Changes made as a result of the EIA****Escalation plan**

**Is there a high impact in any area?**

Yes  No

**Overall risk rating after any mitigations have been put in place**

High  Medium  Low  None

**Review date**

**Review date**

23/02/2020

If a review date is specified, it will appear in the 'Upcoming Reviews' view when the EIA review is within 30 days.

Approved

## **Sex industry and Sexual Entertainment Venues and health evidence summary**

### **Introduction**

This brief and pragmatic evidence summary is intended to support the use of evidence in determining policy on the commercial sex industry, including sexual entertainment venues and/or to facilitate policy makers in placing conditions on operations that are evidence based and/or known to work.

This evidence review can aid the development of Equalities Impact Assessments or Health Impact Assessments.

Public Health does not make moral judgements on sex work or the sex industry but concerns itself with the best evidence and best practice for protecting public health.

### **Methodology**

A literature search was conducted by Public Health using the University of Sheffield Starplus system.

Two search terms were used:

- Sex industry + health
- Sexual entertainment venues + health

For some authors, sexual entertainment is included in the term “sex industry” and for this reason this search term has been used to broaden the available literature as there is only a narrow selection on sexual entertainment. Where sex industry, as opposed to sexual entertainment, articles are considered careful consideration has been given to key messages, if any, that are transferable to wider sexual entertainment.

Only peer reviewed journals, in the English Language from the past 5 years were selected.

No priority was given to quantitative over qualitative or mixed methods approach or over study design.

Articles from the top 50 most relevant articles were considered.

The articles selected for further review were from a similar regulatory context – UK and Europe – or from a similar cultural setting in resource rich countries – North America and Australia. However, similar is not the same and where research is very context specific caveats have been noted about transferring knowledge and applying findings more generally.

Much of the commercial sex industry research is centred in resource poor countries in the Asia-Pacific region. These articles were excluded from further review as it was the view that findings from these articles were less transferable to a UK context.

The literature search was limited by time, access and skill; what is presented is a pragmatic response to consider a fair sample of peer reviewed literature to inform a public health view. This is not a systematic review or critical appraisal of the literature.

In the table below, the articles are coded “SEV B” for 9 articles sourced under the terms “Sexual entertainment venues + health” and SEV for 25 articles sourced under the search terms “Sex industry + health”. Full text of the articles is available on request. Duplicates are shown in the table.

The conclusions drawn from the articles considered (“key messages” and “findings from the literature for policy makers”) are those of the author of this paper. The thematic groupings/codes used are those of the author of this paper. Generally, the notes for policy makers are based on where there appears to be a consensus across the literature, rather than a claim made in a single study. Although the aim has been to objectively present knowledge and evidence, bias is always possible and those intending to use the source are encouraged to explore the full text of articles.

### **Findings from the literature for policy makers**

*Joined up government* – Planning and Licensing both have a role in regulating the environment in which sexual entertainment and sex work takes place and may take differing views. Timings of operation, discreet operation, the local environmental context in terms of sensitive land uses and “fit” of venues within that context are key considerations for Local Authorities. A lack of a joined up approach between Planning and Licensing can make it difficult for sexual entertainment venues to invest and develop their premises (SEV B1, SEV B2).

*Sensitive land use* – There is a reasonable consensus of sensitive land use where SEVs would not be appropriate which includes residential areas, near schools, near universities or colleges, near religious sites, near shops or high streets, sexual trauma services amongst other places. Where land use changes there may no longer be “fit”, for example the opening of the Olympic Legacy Park School in Attercliffe post-dates the proliferation of the sex industry in that area but may make it no longer suitable. Sensitive land use and suitability to the local setting can be used as reasons for refusing a license or limiting hours of operation. (SEV B1-4).

*Young People and students* - Evidence suggests most people start work in the SEV under the age of 25 (73.5%) with the average age of entry into the sex industry being 23 years. Students are a key source of temporary labour for SEVs, particularly undergraduates and part-time students. Financial pressure is the main driving force for entering the industry including student debt, debt from benefit changes, and broader economic pressures. However, those working in the industry also perceived relatively high pay, shorter hours and job flexibility as positive factors compared to other employment sectors such as retail. Students were also key consumers of SEV and sex industry services and debt and illicit drug use were predictive of consumption. (SEV B8, SEV B9, SEV 3)

*More venues/performers increase risk* - The literature suggests that the greater the number of premises and performers/workers, the greater the risks that may be taken to secure

sufficient remuneration. The type of risk taking behaviour included provision of “extras” in Sexual Entertainment Venues in private spaces, arrangements to meet clients outside of SEV for the purpose of selling sex, and in the wider sex industry, agreement to condomless sex. The literature also suggests that burnout and turnover in health and welfare professions supporting the industry is high and resources are limited and overstretched. This is pertinent for policy makers in terms of the expansion of SEV and sex industry as to whether support services and staff will stretch to cover a greater number of venues or geographical spread of venues. In one study, dancers were concerned that an increase in venues lowered the quality of such venues, whereas in another study more venues meant more choice about where to work and greater ability to move away from exploitative venues (SEV B6, SEV B8, SEV 2, SEV 3, SEV 19)

*Workers rights, self-organisation and self-advocacy* – Those working in the industry are well placed to make recommendations to improve their working conditions and health and safety. Those involved in sexual labour are a marginalised and stigmatised workforce and although advocacy, rights and self-organised workers’ groups do exist, policy makers may need to work hard to ensure these voices are heard. Work with sex workers on rights based work is seen as a key mechanism for addressing HIV transmission but is underfunded globally. Workers human rights and social justice approaches rather than punitive, rehabilitate or rescue approaches are considered most appropriate in this space and investment in sex worker self-organisation is viewed as crucial. Workers are concerned about basic health and safety at work such as adequate heat, light, ventilation, access to drinking water as well as industry specific concerns such as the way abusive customers are dealt with and safety measures in private areas of premises. (SEV B6, SEV B7, SEV11, SEV 20)

*Physical and Sexual Violence* – those working in the SEV industry and wider sex industry face high levels of workplace violence, including physical and sexual violence. Regulation of such workplaces should include health and safety measures to reduce the risk of violence to staff (SEV B7, SEV 4, SEV 9, SEV 11, SEV 14)

*Historic childhood abuse* – a number of articles note the association between historical childhood abuse and working in the sex industry. In one study, almost 1/3 of a sample of sex workers had prior sexual abuse histories (SEV 4, SEV 14, SEV 18)

*Mental Health* – just over 1/3 of participants in one qualitative study had mental health difficulties prior to entering the industry. Another study described the most prevalent mental health conditions to be anxiety and depression, PTSD and substance misuse disorders with PTSD linked to violence in the industry or historical childhood abuse. Those working in the sex industry reported strain on personal relationships and inability to sustain personal relationships. 1 in 3 sex workers within one study sample of sex workers had prior suicide attempts and 72.3% were unhappy with life (SEV 3, SEV 4, SEV 12, SEV 14)

*Sexual Health* – Sex work globally is an important driver of sexual transmission of HIV due to high partner change. Decriminalisation has the best evidence for HIV prevention and is recommended by a number of global actors on health and human rights. A key policy measure should be not to use condom carrying as evidence against sex workers for criminal prosecution. Partnerships between the sex industry, police and health are key. Working in the sex industry can negatively impact on romantic relationships with non-paying partners

and this can impact on condom use in those relationships and therefore transmission risks for STIs and HIV (SEV 5, SEV 6, SEV 12, SEV 17, SEV 21, SEV 22, SEV 24)

*Drug use* – in one study 53.1 % of the sex worker sample reported crack use and 19.2% reported heroin as their drug of choice. Illicit drug use was also predictive of consumption of sex industry services. Sex working women were considered to require more intensive and tailored substance misuse treatment services. Drug using clients may have lower earning power, may be limited to outdoor work, and may take greater risks (SEV 14, SEV B9, SEV 24)

*Debt and financial inclusion* – debt and financial factors were the main driving force to work in the sex industry in one large study. In other studies, performers were prepared to take risks for higher remuneration. In one study, dancers detailed how “house fees” for performers and fines meant starting their shift out of pocket. In another study, student impoverishment was seen to drive female students into working in the industry and being in debt was predictive of being both a worker and a consumer in the industry. (SEV B8, SEV B7, SEV B9, SEV 2, SEV 3)

*Indoor versus outdoor sex work* – there is a consensus of evidence that indoor environments are safer and where police and health professionals provide supportive in-reach to working women, these conditions are the safest. (SEV 9)

*Human Trafficking* – there is a consensus in the literature that sex trafficking is conflated with commercial sex work against the best available evidence. Although the prevalence of trafficking for sex work is high at around 25%, the majority of those trafficked globally are in domestic and agricultural roles. However, 92% of prosecutions for trafficking are for sex trafficking. There is no disagreement in the literature that sex trafficking is an abuse of human rights and should be rightfully prosecuted, but there are concerns that this focus on the sex trade is used to justify excessive surveillance of immigrant women who are already marginalised, working in this stigmatised and marginalised industry. There is a clear consensus that distinction must be made between non coerced sex work and trafficking. Sex workers have in some settings taken a role as peers in screening trafficked women. Resources and rights rather than criminalisation and rescue are recommended (SEV 7, SEV 10, SEV 11, SEV 16, SEV 20, SEV 23)

*Decriminalisation* - decriminalisation provides the optimal conditions and best evidence for HIV prevention, access to police protection, safe working conditions and access to health services and is supported by global health organisations such as UNAIDS. Zones of tolerance and legalisation have flaws, as do “end demand” policies. However, geographically compact zones of tolerance can facilitate inreach by support services such as health. Conversely, crackdowns and fines and excessive regulation such as mandatory registration can displace the sex industry to less populous, more isolated areas which are more risky for workers (SEV 5, SEV 11, SEV 16, SEV 21, SEV 24).

*Peers* – peer educators were seen as helpful for both sexual health interventions, empowerment, and anti-trafficking interventions (SEV 21, SEV 22, SEV 7)

## **Conclusion**

An evidence based health approach to the sex industry and sexual entertainment venues should be based on:

- Workers' rights and empowerment of sex workers
- Decriminalisation and geographically compact zones of tolerance
- Partnership between criminal justice, health agencies and venues/sex workers
- Tailored in-reach of drugs, alcohol, sexual health, mental health, financial inclusion services to this stigmatised and vulnerable workforce using peer-peer where possible
- Sensitive land use considerations to manage the impact of the sex industry on the wider population
- Sensible limits on the number of venues and zones in proportion to the local resource of support services (addiction, sexual health, mental health, criminal justice and regulatory services)

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**Health Improvement Principal**  
**Office of the Director of Public Health, Sheffield City Council**  
**January 2018**

Code	Source	Summary of article	Key messages for policy makers
SEV B1	<p>Prior, J. and Hubbard, P. (2017) Time, space, and the authorisation of sex premises in London and Sydney, <i>Urban Studies</i> Special issue article: Sex, Consumption and the City 2017, Vol. 54(3) 633–648 Urban Studies Journal Limited 2015 DOI: 10.1177/0042098015612057 journals.sagepub.com/home/usj</p>	<p>This paper considers the different regulatory context in Sydney and London and the role of licensing, planning and environmental control departments in trying to legislate for legal land use for sex premises of various kinds.</p> <p>The authors point to the zoning of land for sex premises by “minor bureaucrats” instead of the police and often acting in silos from the police and each other.</p> <p>The authors refer to a social mainstreaming of sex as a legitimate leisure activity being mirrored in its inclusion in legal land use and therefore its movement from the urban periphery to commercial centres.</p> <p>There is discussion of “time” as well as “space” as many of these premises operate in the night time economy which may be out of kilter with other urban uses nearby. How SEVs should co-exist with other land uses is discussed in the context of a lack of reliable evidence on impact of such venues on their localities.</p> <p>Refers to LB Camden and Hackney which have nil limit SEV policies meaning no more SEVs can be opened despite in Hackney’s case there being no local objections. Refers to other Local Authorities restricting siting of SEVs near other areas of sensitive land use e.g. schools, housing, high street.</p> <p>The authors cite an example from North London of licensing and planning contradictorily awarding and refusing permission within a 2 week period for the same venue for a lap dancing club – planning approved, licensing refused.</p> <p>(The authors’ standpoint is that the legislation is imperfect and this leaves the regulation of SEVs open to “street level bureaucrats” as well as the state.)</p>	<p>Time use of SEVs may conflict with other local land uses and limits can be set of opening SEVs near areas of sensitive land use (Prior and Hubbard, 2017)</p> <p>There is a lack of reliable evidence of impact of lap dancing clubs on their localities (Hubbard, 2015 cited in Prior and Hubbard, 2017)</p> <p>Local Authorities may set a nil limit despite no local objections (Prior and Hubbard, 2017)</p> <p>The legislation is imperfect and unclear and there may be differences of view between, for example planning and licensing (Prior and Hubbard, 2017)</p>
SEV B 2	<p>Hubbard, P. and Colosi, R. (2015) Respectability, morality and disgust in the night-time economy: exploring reactions to ‘lap dance’ clubs in England and Wales, <i>The Sociological Review</i>, Vol. 63, 782–800 (2015) DOI: 10.1111/1467-954X.12278</p>	<p>The authors explore attitudes and reactions to a ‘lap dance club’. The authors suggest that rather than criminal behaviour this type of premise engenders moral disgust and that judgements are subject to social class and gender.</p> <p>The authors’ study revealed that SEVs were not a major cause of distress to local residents, but a significant minority (~1 in 10) claimed to always avoid walking near such venues: women were significantly overrepresented in this group, suggesting the presence of sexual entertainment in the night-time city does have important gendered effects. The study found women were more likely to note, and comment on, the presence of lap dance clubs than men but that this was more related to questions of morality and disgust than fear, with SEVs’ contribution to criminal and</p>	<p>Women may be more aware of lap dancing clubs than men and may consciously choose walking routes to avoid this type of premise.</p> <p>There is a reasonable consensus about sensitive sites where SEVs should not be placed. Not near schools/nurseries 83% Not near universities/colleges 46% Not near religious sites 65% Not near shops 45% Not in residential areas 97%</p>

		<p>antisocial behaviour deemed less significant than that of clubs, pubs or takeaways.</p> <p>The authors debate views about lap dancing and links to gender based violence and exploitation of women versus narratives of female empowerment and social class.</p> <p>The authors debate whether the clubs add to or take away from vibrancy and discuss a “moral geography” of appropriate sites for SEVs. Signage and names were significant here with a view that clubs should be “low key”. However, blacked out windows can also make passers-by feel uncomfortable.</p> <p>Study participants associated SEVs with undesirable characteristics such as binge drinking, drug using, loitering, noise and other anti-social behaviour.</p> <p>The authors discuss views of customers of SEVs being threatening and risky and contrast this with the low number of reports of serious sexual assault.</p> <p>The authors discuss views of staff (dancers) in SEVs as being motivated to work there by necessity or coercion versus it being emancipatory. There were also concerns that women would be asked or pressurised to go beyond dancing and perform sexual acts. There were further concerns about human trafficking associated with SEVs. There was a consensus of opinion that SEVs were exploitative of women.</p> <p>(The authors’ standpoint appears to be that the views of participants are motivated by traditional views of class, masculinity and femininity and “othering” of customers and staff in SEVs).</p>	<p>Signage and names (particularly more explicit) can have a particular impact with a preference for these being low key and discreet.</p> <p>SEV customers behaviour outside the clubs may cause concerns regarding anti-social behaviour.</p> <p>SEV customers may be viewed as threatening and risky. Within the context of very low reporting of sexual assault, the lack of reporting of serious sexual assault may not be significant to dispute this fear.</p> <p>There was a consensus of opinion from participants in the research that SEVs were exploitative of women.</p>
SEV B3	<p>Hubbard, P. (2015) Law, sex and the city: regulating sexual entertainment venues in England and Wales, <i>International Journal of Law in the Built Environment</i> 2015 - Volume 7/Issue 1, 1 April, 5-20</p>	<p>This article deals with the planning and licensing powers held by local authorities which allow discretion to prevent SEVs operating in specific localities, particularly those undergoing, or anticipated to be undergoing, redevelopment and regeneration.</p> <p>This is usually based on site sensitivity/sensitive land uses or future land uses e.g. a university building <i>will be</i> built in this area in future. This can mean that license renewal for an SEV can be refused if local land use changes.</p> <p>Refers to LA s choosing to set a ‘nil limit’ on SEVs through policy due to a view that there are no localities where SEVs are suitable or choosing to limit SEV proximity</p>	<p>Locality suitability and sensitive land use can be reasons for refusing a license.</p> <p>Suggestion that higher rate of criminality around SEVs is due to their location in high crime neighbourhood’s rather than the presence of the SEV per se and ditto being sited in lower value areas rather than directly contributing to lower house prices.</p> <p>A change in the nature of a locality can make</p>

		<p>near areas of sensitive land use such as schools, religious facilities, shopping districts, "family" housing and any facilities which might routinely be used by children. (Hubbard and Colosi, 2015).</p> <p>Refers to the use of licensing conditions to limit the hours of opening and general operation of the club.</p> <p>Refers to SEVs not being defined in the Use Classes Order in England and Wales therefore a change of residential to business use as an SEV will require planning permission.</p> <p>Licensing and planning are not concerned with morality, but instead only with valid material considerations (i.e. the visual appearance of a development, its impact on the setting and potential environmental nuisance).</p> <p>SEVs are being removed from particular localities where they are "out of place", not because the local authority is opposed to sexual entertainment <i>per se</i>.</p> <p>(The author's standpoint appears to be that legitimate businesses are being de-prioritised for land use compared to other land uses such as universities and that this is unfair. The author's standpoint appears to be that SEVs do not impact land values any more than treatment services for drugs and alcohol for example and therefore are being unfairly targeted. The author is concerned about how elected members on Licensing Committees may be influenced by the views of local people.)</p>	<p>nuisance more likely to be experienced by local residents for example a new school being built in an area with existing SEVs and this can be a reason to refuse license renewal.</p> <p>Licensing conditions can be used to limit hours of opening and general operation – what the author describes as creating a "restrictive environment" for SEVs.</p> <p>Change of use class requires planning permission – an HIA screen should be completed on a request for change of use to an SEV.</p>
SEV B 4	<p>Hubbard, P., Collins, A., Gorman-Murray, A., (2016) Introduction: Sex, consumption and commerce in the contemporary city <i>Urban Studies</i> 2017, Vol. 54(3) 567–581  <i>Urban Studies Journal</i> Limited 2016            DOI:10.1177/0042098016682685journals.sagepub.com/home/usj</p>	<p>The authors argue that attitudes have changed over past decade of how "sexual consumption" is visible in the city and describe how views about what belongs where in urban space can shape local policy. They cite examples of SEV businesses being refused because of wanting to enter into new urban territory with no tradition of SEVs. The authors explore the mainstreaming of sex retailing and emergence of female oriented "high street" shops for lingerie and sex toys.</p> <p>(Authors' standpoint is that sexuality impacts on perceptions of urban space and shapes orientation to urban space)</p>	<p>Makes economic arguments for SEVs etc as legitimate businesses which may struggle to break into urban territory where they are seen as not rightly belonging but notes that social attitudes change over time.</p>
SEV B5	Duplicate of SEV B4		
SEV B6	<p>Sanders, T., Hardy, K., Campbell, R. (2015) <i>Regulating Strip-Based</i></p>	<p>The authors explore how the voices of other stakeholders (community and campaign groups) have been given precedence over the dancers in SEVs and how by involving dancers in policy development and regulation can lead to better inclusion of dancer welfare and safety.</p>	<p>Dancers need to be consulted as key stakeholders and informants on the industry.</p>

	<p>Entertainment: Sexual Entertainment Venue Policy and the Ex/Inclusion of Dancers' Perspectives and Needs, <i>Social Policy &amp; Society (2015) 14:1, 83–92C</i> _Cambridge University Press 2014 doi:10.1017/S1474746414000323</p>	<p>The authors aim is to explore everyday practices in the stripping industry to inform the policy agenda. The authors state that former dancers experience – particularly those with negative experiences of exploitation and degradation in the industry – have informed policy development but that current dancers or collectives of dancers have not been involved. This lack of user involvement is at odds with other arenas of policy development work and further excludes and marginalises dancers.</p> <p>The comments from the dancers include feelings that those making policy were at arm's length from and had no understanding of the industry, concern over the loss of employment/earnings from those who depend on the industry if nil policy is set, and concerns that dancers would be viewed/labelled as sex workers and this would impact on future prospects. There were concerns about clubs/dancers offering “extras” of sexual services which increases pressure on dancers at legitimate SEVS and concerns that the proliferation of clubs would lower quality.</p> <p>The project detailed some financial exploitation of dancers by SEV management – fines for chewing gum, mobile phone use, fees for missing a shift and house fees per shift which left dancers out of pocket.</p> <p>The project sought to ensure that safety and welfare concerns raised by dancers were included in licensing policy with some success, the types of measures requested included:</p> <ul style="list-style-type: none"> <li>- No penalty for sickness, domestic emergencies of dancers</li> <li>- Limit on the number of dancers per club (due to dancers concerns that too many were employed to charge “house fees” where there were not enough customers to earn back house fees)</li> <li>- Adequate changing and kitchen facilities for dancers, heating and air conditioning</li> <li>- Provision of free water</li> <li>- Booths for private dances to have safety measures such as not being entirely screened off, managers having line of sight to booths and having panic buttons;</li> <li>- Measures for dancers safety at the end of late night shifts such as escort to own vehicle or taxi contract with reputable firm;</li> </ul> <p>Some of these measures – particularly measures on booths, fines and changing facilities – were adopted by Local Authorities including Sheffield, Manchester, Birmingham and London Boroughs.</p>	<p>Dancers express concerns that some clubs/dancers offer “extras” and this increases pressure on dancers from customers.</p> <p>Dancers express concerns that a proliferation of clubs will lower quality (bad management, bad practice).</p> <p>Dancers requested welfare measures including:</p> <ul style="list-style-type: none"> <li>- No penalty for sickness, domestic emergencies of dancers</li> <li>- Limit on the number of dancers per club (due to dancers concerns that too many were employed to charge “house fees” where there were not enough customers to earn back house fees)</li> <li>- Adequate changing and kitchen facilities for dancers, heating and air conditioning</li> <li>- Provision of free water</li> <li>- Booths for private dances to have safety measures such as not being entirely screened off, managers having line of sight to booths and having panic buttons;</li> <li>- Measures for dancers safety at the end of late night shifts such as escort to own vehicle or taxi contract with reputable firm;</li> </ul> <p>Some were adopted by Local Authorities.</p> <p>The project created a resource for dancers is available through an Iphone App and website: <a href="http://www.dancersinfo.co.uk/">http://www.dancersinfo.co.uk/</a>. Key ‘top tips’ written by dancers has been translated into Romanian, Portuguese, Spanish, Polish and Russian. This resource has been used by Local Authorities including Manchester, Liverpool and Leeds.</p>
SEV B7	Decker, M. R., Nail, J.E.,	This cross-sectional US study examines intimate partner violence (IPV) and client violence in	In this US cross sectional study, over 1/3 of young

	<p>Lim, S., Footer, K., Davis, W., Sherman, S. G.,(2017) Client and Partner Violence Among Urban Female Exotic Dancers and Intentions for Seeking Support and Justice, <i>Journal of Urban Health</i> 94:637–647 DOI 10.1007/s11524-017-0195-5,</p>	<p>relation to female exotic dancers who have been dancing for 6 months or less. 36% reported IPV and 16% client violence. Both forms of violence were correlated with arrest, sex trade, substance use, and childhood abuse.</p> <p>In the multivariate model, sex trade was the only factor significantly associated with recent client violence (AOR 4.45, 95% confidence interval [CI] 1.59, 12.41).</p> <p>In the multivariate model, sex work history was the only factor significantly associated with recent IPV (AOR 3.13, 95% CI 1.08, 9.03)</p> <p>Female exotic dancers preferred to seek help from the venue management than from police or helplines (mean score 4.51 with a range of 1 to 5; higher score indicative of more likely to seek help from a given source). The study stratifies variations in help seeking behaviour across substance misuse, sex trade, arrest histories and childhood abuse.</p> <p>“Trading sex may enable client-perpetrated abuse in EDC settings in which sex work is illegal. Women who trade sex may be in more intimate and isolated situations with clients in which violence may emerge more privately, as compared with the public spaces within venues where dancers entertain clients without sexual services”.</p> <p>“The regulation of the exotic dance industry makes violence in this setting an occupational health and safety issue”.</p> <p>“Within the work environment, women may make difficult safety trade-offs in the context of economic need or to sustain the biological demands of addiction”.</p> <p>Caveats about transferability of this research to Sheffield: the study is conducted in Baltimore, MD, an urban setting characterized by a high HIV burden [30], a robust drug economy, entrenched poverty, and historic and sustained constraints on accessing justice [31].</p>	<p>female exotic dancers working for 6 months or less 36% reported intimate partner violence and 16% reported client physical or sexual violence in the 6 months prior to the survey.</p> <p>Survey participants preferred to seek help regarding client violence from within venues from club management than from criminal justice agencies and helplines</p> <p>Workplace violence is a health and safety issue and regulators could engage and support club management to know about local resources and allow in-reach and develop violence prevention strategies.</p> <p>“Regulation for exotic dance venues may be able to include provisions for staff training on available violence support resources and passive strategies such as posting relevant information.”</p> <p>“The high prevalence of recent violence in our sample, coupled with the low intentions to seek help, argue for dedicated outreach to adult women involved in the sex industry as exotic dancers for safety promotion and access to prevention and care, particularly those who are also involved in the sex trade”.</p>
SEV B8	<p>Sanders, T., &amp; Hardy, K., (2015) Students selling sex: marketisation, higher education and consumption, <i>British Journal of Sociology of Education</i>, 36:5, 747-765, DOI: 10.1080/01425692.2013.854596</p>	<p>A large Mixed methods study of striptease industry in UK, in two cities one North and one South covering 20 SEVs and survey with 197 dancers (some interviewer-administered and some via striptease website) with a further 70 qualitative interviews with a range of staff including security and managers as well as regulatory staff.</p> <p>1/3 of dancers were under the age of 25 and 73.5% were under 25 when they started dancing.</p> <p>Changing attitudes and the rise of ‘respectability’ in sexual commerce; the ‘pleasure dynamic’ amongst students; and changes in the higher education structure were all factors explored by the authors.</p>	<p>Financial factors were the main driving force to work in the sex industry.</p> <p>A key finding of the study indicated that students were a core supply source providing dancers into the adult entertainment/stripping industry due to the ability to combine stripping work with the demands of educational courses, due to the flexibility it offered.</p> <p>The industry depends on students as temporary</p>

		<p>Cites research from Cardiff, Wales in 2011 of more than half of “escorts” being students and 1/6 of those in off street sex trade</p> <p>Although undergraduate students made up the largest proportion of dancers in education, others were pursuing qualifications and career plans by taking private courses e.g. beauty.</p> <p>The survey found that 34% of dancers reported working in another area of the sex industry (including other dance roles such as freelance and agency dancing).</p> <p>“The empirical work discussed in this paper supports these ideas that students are increasingly part of a culture of sexual consumption: both as providers in the form of sex workers and as consumers in the form of purchasing sex and other forms of sexual consumption through fashion, media, leisure and consumer goods. Stripping as a form of consumption and labour is increasingly acceptable because there is arguably less stigma attached to the industry”.</p>	<p>workers who provide a key source of labour when clubs are at their busiest.</p> <p>The competition between dancers, because there were so many compared with the level of custom, meant that dancers were reducing the standards and breaking the rules persistently. More clubs/dancers could lead to pressure on women to provide extras. This is a pertinent finding in relation to issues of caps on the number of SEV premises licenses in any area.</p>
<p>SEV B9</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 58</p>	<p>Ron Roberts , Amy Jones &amp; Teela Sanders (2013) Students and sex work in the UK: providers and purchasers, Sex Education, 13:3, 349-363, DOI: 10.1080/14681811.2012.744304</p>	<p>A cross sectional survey of a sample of 200 full and part time students (predominantly full time students) from 29 UK universities indicated that around 6% (2.7%–9.3%) of the sample was currently working in the sex industry – in erotic dancing, stripping or escorting, with significant numbers of both male and female students also involved in purchasing and using sexual services.</p> <p>Students engaging in sex work as a flexible income generator whilst studying has increased over the past decade.</p> <p>Small numbers from the sample were involved in sex work of any type with sexual entertainment (pole/lap/table/topless/erotic dancing) 4% (n=8) being the most common occupation followed by stripping 2.5% (n=5). Of the 12 respondents who reported engaging in some kind of sex work, all bar one were female. The male responder reported stripping.</p> <p>There was some indication that those involved in sex work were more likely to have experienced childhood sexual abuse and to have a current alcohol problem.</p> <p>Prior debt was statistically significant to predict engagement with sex work of any kind after controlling for variables.</p> <p>A logistic model, comprising full-/part-time status, debt status, amount of debt and degree of illicit drug use, was constructed to predict sex-work consumption. This model was significant and had an acceptable fit with the data.</p>	<p>There is agreement that student debt and impoverishment is contributing to the growing involvement in the sex industry. The study adds weight to previous studies which show financial factors as being a major driving force behind student participation in the sexual economy. Those engaged in sex work were more likely to be in debt prior to their studies and to be part-time students, with part-time status once again no longer significant with debt controlled for.</p> <p>“Findings from studies of students and the sex industry have implications for policy, which must take seriously the relationship between debt in students and supply routes into the sex industry”. The authors reiterate the role of those that have a duty of care and benefit from their presence (the universities)’.  Debt and illicit drug use were predictive of student consumption of sex work.</p>
<p><b>SEV 1-25 below are sourced from search terms “sex industry + health” through Starplus</b></p>			

SEV 1	Christina Mancini a,□, Amy Reckdenwald b, Eric Beaugregard c, Jill S. Levensond (2014) Sex industry exposure over the life course on the onset and frequency of sex offending Journal of Criminal Justice	<p>“Broadly, results suggest that adolescent exposure to the sex industry was associated with a younger age of onset sex offending among sex offenders. Findings indicate less consistency for the models examining the frequency of sex offending; some adult exposures influenced greater frequency in offending, but three were not predictive. Not least, results from an ancillary set of models suggest that adolescent exposure affected the “start” of sex offending careers, but not necessarily the duration of offending”.</p> <p>“In short, two competing bodies of scholarship examining the sex industry exist. One finds support for the social learning theory, or the “imitation” effects of the sex industry. The other literature suggests null or cathartic impacts. To be clear, both bodies of research are underdeveloped.”</p> <p>Caveat: US Context – may not be directly transferable to Sheffield or UK. This was a retrospective design with convicted male sex offenders (n=616)</p>	Exposure to the sex industry is associated with a younger age of onset of sex offending but not necessarily frequency or duration of offending.
SEV 2	Gillian M. Abela* and Lisa J. Fitzgeraldb ‘The street’s got its advantages’: Movement between sectors of the sex industry in a decriminalised environmentHealth, Risk & Society Vol. 14, No. 1, February 2012, 7–23	<p>This article deals with perceptions of risk and trade offs between risk and earnings in choosing street work/unmanaged sex work with higher earnings possible through street work. The article advises that stringent regulatory practices on street work are unrealistic and will place this vulnerable segment of the sex worker population at greater risk.</p> <p>Caveats: The findings are drawn from a survey of 772 sex workers and in-depth qualitative interviews with 58 sex workers in New Zealand. New Zealand, where prostitution is decriminalised may not be transferable to Sheffield or UK context</p>	Article excludes sexual entertainment and focuses on direct sex work so has less to offer in terms of key messages. However, motivation for street work of maximising income retained may be relevant in understanding motivation for outdoor work compared to indoor work. Further, the incentives of higher income through riskier practice in a competitive market is transferable in the context of lifting the cap on the number of SEVs. The preference of some workers for higher earnings in a deregulated market is also notable for policy makers.
SEV 3	Fairleigh Evelyn Gilmour (2016) Work Conditions and Job Mobility in the Australian Indoor Sex Industry Otago University Sociological Research Online, 21 (4), 14 < <a href="http://www.socresonline.org.uk/21/4/14.html">http://www.socresonline.org.uk/21/4/14.html</a> > DOI: 10.5153/sro.4166	<p>This study conducted 14 in depth interviews with female sex workers and former sex workers. The article focuses on indoor direct sex industry – brothel work.</p> <p>The study explores the concepts of job flexibility and mobility in the sex industry and argues that the availability of increased options in a decriminalized setting leads to greater potential for workers to negotiate improved working conditions.</p> <p>Financial need was the main reason for entering the industry.</p> <p>The average age of entry into sex work was 23.</p> <p>Women valued what they perceived as better pay and working conditions from sex work compared to traditional job roles for women.</p> <p>5/14 participants (just over 1/3) in the study had mental health difficulties prior to entering sex work and saw flexibility of the job as a benefit.</p>	<p>Job mobility and flexibility within the industry emerge as the key benefits with single parents and students particularly viewing flexibility of working hours as key. Mobility allows staff to move away from poor working conditions with relative ease.</p> <p>Financial need (due to benefit changes and broader economic pressures) was the main reasons for entering the industry with more traditional jobs such as nursing, hospitality and retail being either unavailable because of lack of experience and references or conditions considered to be poor.</p> <p>The average age of entry into sex work was 23.</p>

		<p>Participants perceived the rise in high-risk services (no condom) being offered as being due to increasing competition of both more women and more brothels.</p> <p>There was some discussion about self-employed status of women being a means of brothel managers avoiding employer responsibility for superannuation and sick pay.</p> <p>There was some discussion of pressure to perform unsafe practices by managers and the difficulties in refusing particularly for migrant women or drug using women.</p> <p><i>Caveats:</i> The study is set in Australia in the direct sex industry and therefore is not completely transferable to SEV in the UK.</p>	<p>1/3 of study participants (n=5) had mental health difficulties prior to entering the industry.</p> <p>Participants perceived that competition between premises and individual workers for income led to more high risk services.</p>
SEV 4	ANKLESARIA, A., and GENTILE, J.P (2012) Psychotherapy with women who have worked in the sex industry <i>Innov Clin Neurosci.</i> 2012;9(10):27–33	<p>This article focuses on the use of psychotherapy with women working in the sex industry, whether indoor (such as strip clubs and cabarets) or outdoor (such as prostitution and escort services).</p> <p>The authors describe the most widely prevalent mental health conditions to be anxiety, depression, PTSD and substance misuse disorders. The authors describe the literature of violence against indoor and outdoor workers in the context of sex industry trauma related PTSD.</p>	The most prevalent mental health symptoms of women working in the industry (including SEV) were anxiety and depression (mood disorders) alongside substance misuse addiction. PTSD is widespread in this group and linked to childhood abuse or sex industry trauma.
SEV 5	Victoria Powell and Eva Karlsen (2017) Sex industry regulation, Sex Worker Health and STI/HIV prevention, <i>Sex Transm Infect</i> , 93: A6 doi: 10.1136/sextrans-2017-053264.14	<p>Decriminalisation of the sex industry provides optimal conditions for STI/HIV prevention.</p> <p>Under decriminalisation New South Wales sex workers have better access to healthcare and STI/HIV education and prevention tools including free, confidential and anonymous sexual health services as well as peer-led services. Higher rates of safer sex, lower rates of STIs and improved Workplace Health and Safety were also evident, while in other jurisdictions sex workers continue to face barriers to treatment and other health services and often work outside legal frameworks.</p>	<p>Decriminalisation of the sex industry provides optimal conditions for STI/HIV prevention and improves workplace health and safety and access to health services. Peer led services were positive in this context.</p> <p>Decriminalisation is the optimal regulatory model and is supported by the UNFPA, UNDP, UNAIDS, WHO and Amnesty International as critical to HIV prevention and for human rights.</p>
SEV 6	A Reeves, S Steele, D Stuckler, M McKee, A Amato-Gauci and JC Semenza (2017) Gender violence, poverty and HIV infection risk among persons engaged in the sex industry: cross-national analysis of the political economy of sex markets in 30 European and	<p>Using income data and violence data from 30 countries in Europe and Central Asia to test the theory that poverty and fear of violence were structural drivers for HIV transmission. The violence data was for violence against women as most sex workers are female and included partner and non-partner physical, sexual and psychological abuse.</p> <p>The countries with the highest violence against women had the highest HIV rates amongst sex workers and those with the lowest violence against women had the lowest HIV rates amongst sex workers.</p> <p>“Our results are consistent with the theory that reducing poverty and exposure to violence may help reduce HIV infection risk among persons engaged in the sex industry.”</p>	<p>Reducing poverty and exposure to gender violence may help reduce HIV infection amongst people involved in the sex industry.</p> <p>Countries with higher violence against women may have higher HIV rates amongst female sex workers (there is an association between the two). HIV prevalence among sex workers was most closely associated with the experience of violence in the last 12 months.</p>

	Central Asian countries DOI: 10.1111/hiv.12520 HIV Medicine (2017), 18, 748—755, © 2017 British HIV Association	The authors look beyond individual factors and interventions e.g. educating and empowering sex workers to carry and use condoms, to structural factors e.g. condom carrying being used as evidence that a crime is being committed or economic pressures impacting on condom use as condomless sex carries a higher price.	HIV prevalence amongst sex workers was lower in countries where the income of the poorest was comparatively higher.
SEV 7	Kathleen Ja Sook Bergquist, (2015) Criminal, Victim, or Ally? Examining the Role of Sex Workers in Addressing MinorSex Trafficking, Affilia: Journal of Women and Social Work, Vol. 30(3) 314-327	“This article explores the silencing effect of conflating prostitution with sex trafficking, the ways in which sex workers might contribute to addressing the commercial sexual exploitation of children as “allies,” and the ethical responsibility of social workers in anti-trafficking work.”  Caveats: The article is from a US context	Notes the importance of distinguishing between forced involuntary prostitution and voluntary commercial sex work. Notes the positive role of peers in screening for trafficking.  The takeaway message for policy makers is to be clear about what type of activities in the commercial sex industry your policy is designed for and be clear when using evidence from one context about whether it is transferable – particularly, not to use evidence of sex trafficking when speaking of all commercial sex work.
SEV 8 Page 61	Sharon Pickering and Julie Ham (2014) HOT PANTS AT THE BORDER <i>Sorting Sex Work from Trafficking</i> BRIT. J. CRIMINOL. (2014) 54, 2–19 Advance Access publication 29 October 2013	Not relevant to SEV and Sheffield as predominantly focussed on interactions of immigration staff at the border and women.	
SEV 9	Andrea Krüsi, MSc, Jill Chettiar, Amelia Ridgway, BSW, Janice Abbott, BA, Steffanie A. Strathdee, , and Kate Shannon, Negotiating Safety and Sexual Risk Reduction With Clients in Unsanctioned Safer Indoor Sex Work Environments: A Qualitative Study American Journal of Public Health   June 2012, Vol 102, No. 6	This article concerns the use of a supported housing programme for women which included an approach of harm reduction for women in the sex trade, including the ability to use the building to see clients during managed hours of operation as well as health in-reach services including for addiction and ARVs.  “Women’s accounts indicated that unsanctioned indoor sex work environments promoted increased control over negotiating sex work transactions, including the capacity to refuse unwanted services, negotiate condom use, and avoid violent perpetrators. Despite the lack of formal legal and policy support for indoor sex work venues in Canada, the environmental-structural supports afforded by these unsanctioned indoor sex work environments, including surveillance cameras and support from staff or police in removing violent clients, were linked to improved police relationships and facilitated the institution of informal peer-safety mechanisms.  This study has drawn attention to the potential role of safer indoor sex work environments as venues for public health and violence prevention interventions and has indicated the critical importance of removing the sociolegal barriers preventing the formal implementation of such	This study supports other studies which demonstrate that indoor work environments are safer and that indoor environments where police and health professionals are allies to working women provide the best structural support for women’s safety.  The takeaway message for policy makers is that indoor work environments where in reach from police and health can take place are generally safer than outdoor sex work.

		<p>programs.”</p> <p>(Caveat: Canadian policy and cultural context may be different from UK)</p>	<p>This study is interesting because the indoor environment is a supported housing complex for working women rather than a sex industry setting.</p>
SEV 10	<p>Lerum, K., Brents, B. G., (2016) <i>Sociological Perspectives on Sex Work and Human Trafficking, Sociological Perspectives</i> 2016, Vol. 59(1) 17–26 © The Author(s) 2016 Reprints and permissions: <a href="http://sagepub.com/journalsPermissions.nav">sagepub.com/journalsPermissions.nav</a> DOI: 10.1177/0731121416628550 <a href="http://spx.sagepub.com">spx.sagepub.com</a></p>	<p>Discussed the evidence about the sex industry and policies on sex work and human trafficking and urges activists and policy makers to listen.</p> <p>The article argues not to conflate sex work with trafficking and to view sex work, like all paid employment as a complicated continuum of power, coercion and agency.</p> <p>“One quarter (~25%) of estimated trafficking victims globally are in the sex industry, but constitute nearly all of the convictions (92%) for human trafficking” – prosecutions over-represent sex industry victims compared to the 8% convictions concerned with the 75% working in domestic or agricultural labour. The authors argue that this is an anti-sex work bias.</p> <p>Argues that any form of criminalisation and aggressive policing can lead to harm for those in the sex trade. Argues for resources and rights rather than rescue and criminalisation.</p>	<p>The authors explore the evidence base around trafficking and are concerned by the lack of rigour of some studies – the takeaway message for policy makers is that not all evidence is equally valid, reliable and robust, and that over-generalisations particularly should be avoided.</p> <p>Sex work is over-represented in trafficking convictions compared to its prevalence (25% of trafficking prevalence and 92% of convictions).</p> <p>Argues that policy should focus on resources and rights for workers and sex work be viewed in the same moral space as other paid work, avoiding a moral bias.</p>
SEV 11	<p><i>Michele R Decker, Anna-Louise Crago, Sandra K H Chu, Susan G Sherman, Meena S Seshu, Kholi Buthelezi, Mandeep Dhaliwal, Chris Beyrer</i> (2015) Human rights violations against sex workers: burden and effect on HIV <i>Lancet</i> 2015; 385: 186–99 Published Online July 22, 2014 <a href="http://dx.doi.org/10.1016/S0140-6736(14)60800-X">http://dx.doi.org/10.1016/S0140-6736(14)60800-X</a></p>	<p>The authors reviewed evidence from more than 800 studies and reports on the burden and HIV implications of human rights violations against sex workers.</p> <p>There were widespread abuses of human rights perpetrated by both state and non-state actors and these directly and indirectly increase HIV susceptibility, and undermine effective HIV-prevention and intervention efforts.</p> <p>“Violations include homicide; physical and sexual violence, from law enforcement, clients, and intimate partners; unlawful arrest and detention; discrimination in accessing health services; and forced HIV testing”.</p> <p>Abuses occur across all policy regimes – the article looks at both Iran where selling sex carries the death penalty, partial criminalisation in Brazil and “end demand” policies in Sweden - although most profoundly where sex work is criminalised through punitive law. Where sex work is legalised this is associated with mandatory testing regimes for STIs and some workers evade these and resist registration creating a two tier system where only registered workers can access health and support</p>	<p>Criminalisation of sex work provides “ideal conditions” for human rights violations to occur and the least desirable conditions in which to address HIV transmission. However legalisation and zones of tolerance also have flaws.</p> <p>Rights based responses for sex workers provide the best conditions for HIV work with this marginalised group. The article refers to reforms to policy and practice to assure safe working conditions, access to police protection instead of abusive and discriminatory treatment, and equality and non-discrimination in accessing health</p>

		<p>services. Legalisation does not assure rights-based law enforcement practices and does not eliminate violence against sex workers (examples of Switzerland). Zones of tolerance approaches in Hungary facilitated police abuse of sex workers.</p> <p>New Zealand and New South Wales in Australia are the only jurisdictions that operate under full decriminalisation— ie, where sex work is not penalised through punitive laws, and regulation is premised on worker health and safety, and comparable to that for similar forms of labour. Decriminalisation improved police attitudes towards sex workers, and prompted them to notify sex workers of potential attackers. Police liaisons designated to work with sex workers on abuse issues also improved safety.</p> <p>The article warns against the conflation of sex work with trafficking – in global settings this has led to human rights abuse such as mass incarceration. Sex worker rights and anti-trafficking are not oppositional and an example from Calcutta (sic) is given of the involvement of sex workers in screening for trafficked women.</p> <p>Protection of sex workers is essential to respect, protect, and meet their human rights, and to improve their health and wellbeing. Research findings affirm the value of rights-based HIV responses for sex workers, and underscore the obligation of states to uphold the rights of this marginalised population”.</p> <p>Sex worker organising generates some of the most crucial and effective work on health and human rights, yet is severely underfunded. Less than 1% of funding on HIV prevention is spent on HIV and sex work, and even less is directed towards sex workers’ organisations.</p> <p>Caveats: This article takes a global perspective and findings may not be generalizable to the UK or Sheffield.</p>	<p>services. However, Sex worker self-organisation is severely underfunded from global HIV funding.</p> <p>Conflation of sex work with trafficking is inconsistent with the best available evidence.</p>
SEV 12	<p>Bellhouse C, Crebbin S, Fairley CK, Bilardi JE (2015) The Impact of Sex Work on Women’s Personal Romantic Relationships and the Mental Separation of Their Work and Personal Lives: A Mixed-Methods Study. PLoS ONE 10(10): e0141575. doi:10.1371/journal.pone.0141575</p>	<p>Research conducted to understand impact of sex work on women’s personal romantic relationships.</p> <p>“Most women (78%) reported that, overall, sex work affected their personal romantic relationships in predominantly negative ways, mainly relating to issues stemming from lying, trust, guilt and jealousy. A small number of women reported positive impacts from sex work including improved sexual self-esteem and confidence. Just under half of women were in a relationship at the time of the study and, of these, 51% reported their partner was aware of the nature of their work. Seventy-seven percent of single women chose to remain single due to the nature of their work. Many women used mental separation as a coping mechanism to manage the tensions between sex work and their personal relationships”.</p> <p>Findings very pertinent to health professionals, such as the distinction between work-sex and private sexual relationships meaning most women did not use condoms in personal sexual relationships. Other findings of relevance to mental health concern separation of work and home life through manufactured identity, ritual and emotional distance.</p>	<p>Study concerns indoor sex work in brothels, massage parlours and as call girls rather than sexual entertainment so findings may not be transferable but the main finding is that overall sex work had a negative impact on the personal sexual relationships of working women.</p>
SEV 13	<p>Wahab, S., and Panichelli, M. (2013) Ethical and</p>	<p>The article deals specifically with prostitution and diversion from prostitution using forms of coercion such as criminal justice community sentences or orders and access to health services being contingent</p>	<p>Those who develop “exit programmes” from sex work should not make access to</p>

	<p>Human Rights Issues in Coercive Interventions With Sex Workers <i>Affilia: Journal of Women and Social Work</i> 28(4) 344-349  <sup>a</sup> The Author(s) 2013  Reprints and permission: <a href="http://sagepub.com/journalsPermissions.nav">sagepub.com/journalsPermissions.nav</a>  DOI: 10.1177/0886109913505043  <a href="http://aff.sagepub.com">aff.sagepub.com</a></p>	<p>on participation in exit programmes. The article argues that this is not ethical for social workers to be involved in and is a form of structural violence against minorities.</p>	<p>health and support services contingent upon exit.</p>
<p>SEV 14</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 64</p>	<p>Patton, R., Snyder, A., Glassman, M., (2013) Rethinking substance abuse treatment with sex workers: How does the capability approach inform practice? <i>Journal of Substance Abuse Treatment</i> 45 (2013) 196–205</p>	<p>Article argues that sex workers need a different approach to substance misuse treatment than non sex workers.</p> <p>1710 (25.5%) of the sample of 6716 had a history of sex work.</p> <p>20% of the whole sample reported ever having attempted suicide which rose to 30.7% for sex workers (SW).</p> <p>22.2% (44.7% SW) of respondents reported ever experiencing sexual violation and 32.6% (49.8 % SW) stated they had ever experienced physical violation. Within the sample, 64.2% of participants reported they were very unhappy or somewhat unhappy with life which rose to 72.3% of sex workers.</p> <p>Among the sample, 15.7% reported a history of child sexual abuse (30.2 %SW) and 18.8% answered affirmatively to ever experiencing child physical abuse (24.8 %SW)</p> <p>For the subsample of sex workers , 53.1% of the respondents reported that crack/ cocaine was their DOC, 19.2% reported that heroin was their DOC, and 12.4% stated that alcohol was their DOC.</p> <p>“These findings suggest that certain capabilities differentiate between sex workers and non-sex workers within a substance abusing sample; challenges to life, bodily health, bodily integrity, emotions, practical reason, and control over one’s environment were all found to be significantly associated with sex work involvement.”</p>	<p>The article is concerned with prostitution rather than SEV but some findings are similar to other studies in terms of mental health and historical childhood abuse.</p> <p>Addiction in-reach commissioned into SEV and other sex industry should be tailored to the cohort, “they may need more intensive or different services compared to other substance abusers”.</p> <p>Mental health and suicide prevention staff should be aware of the high prevalence of prior suicide attempts (1 in 3) amongst this sample which are three times as high as attempted suicide in the general population of 1 in 15 (mental health.org.uk).</p> <p>Domestic abuse and sexual violence organisations should note the higher prevalence of sexual violation, physical violation and historic childhood abuse amongst female sex workers in this sample.</p>

<p>SEV 15</p>	<p>Minichiello et al. BMC Public Health (2015) 15:282 DOI 10.1186/s12889-015-1498-7 Minichiello, V., Scott, J., and Callander, D. (2015) A new public health context to understand male sex work, BMC Public Health (2015) 15:282</p>	<p>Article takes a global view of male sex work, STIs and HIV, and the role of technology in particular online communities. Considers transactional sex in some economies e.g. wealthy women tourists forming romantic attachments with local men where the men do not consider themselves to be sex workers and women do not consider themselves to be sex tourists as well as the predominantly MSM MSW in global contexts.</p> <p>Information technology has changed the way the sex industry is organised and this can include online negotiation and forums for riskier sexual practices (condomless sex) as well as more co-ordinated affiliations of sex workers in rights advocacy.</p>	<p>Not directly transferable to a Sheffield SEV context other than as regards the use of information technology as a positive means of linking workers with peers for rights advocacy as well as possible negative uses e.g. male customers online reviews of female sex workers' performance or use of online forums to seek riskier sexual practices for STIs.</p>
<p>SEV 16</p>	<p>Roxana Baratosy a, Sarah Wendt (2017) "Outdated Laws, OutspokenWhores": Exploring sex work in a criminalised setting Women's Studies International Forum 62 (2017) 34–42</p>	<p>This article explores the experiences of sex workers living and working in South Australia under laws that criminalise their profession.</p> <p>It was found that working in a criminalised setting raised particular concerns for sex workers including an erosion of workplace protections, outreach services, access to health service and increased policing.</p> <p>Sex workers advocate for decriminalisation as it has a growing evidence base showing it supports and maintains sexual health programs and has an effect on the course of HIV and other STI transmissions for sex workers when compared to other regulatory models.</p> <p>The Joint UN Programme on HIV/AIDS in their Guidance Note on HIV and Sex Work (UNAIDS, 2012) concluded that countries should move away from criminalising sex work and promote the decriminalisation of sex work.</p> <p>Criminalisation can displace sex work into less populous areas which are perceived as less safe.</p> <p>Confiscation of condoms as evidence by police still occurs in Australia and this can lead to reluctance to carry condoms or have them on site. Police also take away condoms from street based sex workers to encourage them to stop working.</p> <p>It has been argued by sex worker groups that decriminalisation and the removal of criminal laws relating to adult sex work is the most effective legislative approach.</p> <p>The authors' literature review revealed that within a criminalised setting sex worker organisations experience difficulties in accessing sex workers on 'outreach' because the industry moves underground due to stigma and fear.</p> <p>The most prominent theme extracted from the interviews was police intervention within the</p>	<p>This article argues that criminalising sex work leads to human rights violations, therefore sex work should be decriminalised to ensure workers are protected. This is in line with sex workers' advocacy organisations views and the best evidence for HIV prevention (UNAIDS). The most common theme was police abuse of power when sex work is criminalised.</p> <p>Article warns about conflation of sex work and trafficking which has shifted attention away from other sectors such as the garment industry.</p>

		<p>industry, where each interviewee expressed concern with the 'policing' of the industry. As sex work is criminalised police enforce laws and it is common for police to take advantage of their power.</p> <p>This article articulates different ways in which the criminalisation of sex work disrupts sex worker safety and rights to health care.</p>	
SEV 17	<p>"Jennifer L. Syvertsen a,1, Angela M. Robertson a,1, María Luisa Rolón a,b,2, Lawrence A. Palinkas c,3, Gustavo Martinez d,4, M. Gudelia Rangel e,5, Steffanie A. Strathdee a,*Eyes that don't see, heart that doesn't feel": Coping with sex work in intimate relationships and its implications for HIV/STI Social Science &amp; Medicine 87 (2013) 1e8 prevention</p>	<p>" Using qualitative data from a social epidemiology study of risk for HIV and other sexually transmitted infections (STIs) among female sex workers and their intimate, non-commercial male partners along the Mexico - U.S. border, we examined both partners' perspectives on sex work and the ways in which couples discussed associated HIV/STI risks in their relationship.</p> <p>Couples employed multiple strategies to cope with sex work, including psychologically disconnecting from their situation, telling "little lies," avoiding the topic, and to a lesser extent, superficially discussing their risks. While such strategies served to protect both partners' emotional health by upholding illusions of fidelity and avoiding potential conflict, non-disclosure of risk behaviors may exacerbate the potential for HIV/STI acquisition. Our work has direct implications for designing multi-level, couple-based health interventions.</p> <p>Caveats: US-Mexico border context, may not be directly transferable to Sheffield.</p>	<p>This article is of importance to those providing sexual health services to SW and non-SW partners of SW around STI risk.</p> <p>The article is specifically exchange of sex for money sex work so not directly transferable to SEVs.</p>
SEV 18	<p>Lutnick,A., Harris J., Lorvick,J., Cheng,H., Wenger, L.D.,Bourgois, P., Kral, A.H., (2015) Examining the Associations Between Sex Trade Involvement, Rape, and Symptomatology of Sexual Abuse Trauma <i>Journal of Interpersonal Violence</i> 2015, Vol. 30(11) 1847–1863 DOI: 10.1177/0886260514549051 jiv.sagepub.com</p>	<p>The high prevalence of rape and sexual trauma amongst women involved in the sex industry is well established. This article looks at a rape and sexual trauma experience amongst women who do and do not trade sex in a community based sample of 322 substance mis-using women (methamphetamine) in San Francisco, California, 61% of whom were involved in the sex trade.</p> <p>The authors found that urban poor women, regardless of sex trade involvement, suffer high levels of rape and related trauma symptomatology.</p> <p>Caveats: article focuses on a very specific sub sample of substance misusing women in the US.</p>	<p>This article deals with a very specific sample, of substance misusing women and found higher levels of rape and related trauma amongst this group regardless of sex trade involvement.</p>
SEV 19	<p>Rachel Phillips<sup>1</sup>, Cecilia Benoit<sup>1,2</sup>, Helga Hallgrimsdottir<sup>2</sup> and Kate Vallance<sup>1</sup> Courtesy stigma: a hidden health concern among</p>	<p>Article explores how stigma associated with vulnerable and marginalised groups can attach itself with those who work or volunteer with those groups, and how this influences turnover in those professions. The article deals with adult sex workers as a specific group and those who work with them and their experience of this form of stigma.</p> <p>Issues such as underfunding of the work and defending the value of the work were key issues of stress</p>	<p>This article provides insight into the role of paid and volunteer staff working with adult sex workers. The difficulty of providing meaningful services with limited resources is a key source of stress for staff and</p>

	<p>front-line service providers to sex workers</p> <p>Sociology of Health &amp; Illness Vol. 34 No. 5 2012 ISSN 0141-9889, pp. 681-696 doi: 10.1111/j.1467-9566.2011.01410.x</p>	<p>for staff and volunteers whereas meaningful engagement was a key positive. Underfunding of other services which created barriers when referring women for other support was also a source of stress.</p> <p>Not being able to talk openly with family and friends about their job for fear of disapproval or a reluctance to burden others with the tension that surrounds the work resulted in a sense of isolation for some workers.</p> <p>While the participants described the emotional rewards associated with providing front-line services, as well as a high degree of skill discretion and autonomy, the work was also described as very stressful, with stress and fatigue being commonly associated with a decision to leave the organisation. High levels of emotional exhaustion and a low sense of personal accomplishment were recorded.</p>	<p>volunteers and the role is isolating and stigmatised.</p> <p>This is pertinent for policy makers in terms of the expansion of SEV and sex industry and whether those involved in supporting those working in the industry are consulted as to whether services and staff will stretch.</p>
SEV 20	<p>Jackson, C.A., (2016) Framing Sex Worker Rights: How U.S. Sex Worker Rights Activists Perceive and Respond to Mainstream Anti-Sex Trafficking Advocacy Sociological Perspectives 2016, Vol. 59(1) 27-45 DOI: 10.1177/0731121416628553 spx.sagepub.com</p>	<p>Interviews with sex worker rights activists which (1) contest the labelling of sex workers as victims and (2) contest the accuracy and emotionality of stories and statistics used in mainstream anti-sex trafficking efforts. Argues that moral position of US policy is anti-sex work which creates a hostile environment for sex labour rights activism.</p> <p>The article argues that the dominant moral positions in the US are to incarcerate, rescue, rehabilitate or protect women working in the sex industry rather than invest in social welfare empowerment or public health programmes.</p> <p>Rights based activists argue that criminalising and stigmatising prostitution is a greater social problem than sexual labour itself.</p>	<p>Self-organised labour rights groups for sex workers (including sexual entertainment workers in this sample) may be disadvantaged as against other labour rights organisations due to moral views about the industry. Sex workers are marginalised workers in a stigmatised industry. Policy makers should ensure that the voice of workers in the industry is heard.</p> <p>The rights articulated include: the right to work safely—free from arrest, police harassment, and violence; free to report violence or theft; free to remain as a primary caretaker for a child/children; the right to leave sex work without identifying as a victim.</p> <p>Activists insist on the separation of sex work and coerced sex work through trafficking arguing that choice and agency make the difference in consensual sex work.</p>
SEV 21	<p>Tenni B, Carpenter J, Thomson N (2015) Arresting HIV: Fostering</p>	<p>The article argues that criminalisation and regulatory control of sex work, and in particular certain negative police practices, can inhibit progress in combating the spread of HIV globally.</p>	<p>Partnerships between public health, the police and the sex industry are key to preventing the spread of HIV. The</p>

	<p>Partnerships between Sex Workers and Police to Reduce HIV Risk and Promote Professionalization within Policing Institutions: A Realist Review. <i>PLoS ONE</i> 10(10): e0134900. doi:10.1371/journal.pone.0134900</p>	<p>“Decriminalisation is widely regarded as the evidence-based model of sex industry regulation that best supports effective health promotion, public health outcomes, the human rights of sex workers and is the best practice model for the prevention of HIV and STIs.”</p> <p>“The decriminalisation of sex work, particularly legalising the possession of condoms and the provision of managed sex work zones facilitate more effective HIV prevention programs.”</p> <p>The example was given of the Asia Pacific region where apart from NSW and New Zealand, sex work is criminalised and police are often perpetrators of violence against sex workers, using criminalisation to extract bribes or free sexual services or targeting sex workers for arrest to fill arrest quotas.</p> <p>The need to promote partnerships between sex workers and police is also encouraged by various UN political declarations including UNESCAP Resolutions 66/10 and 67/9 but there is limited evidence of good practice in this area. The Ugly Mugs programme is a good case study of joint work between police and the industry to protect workers from abusive clients.</p> <p>“The review found that political and police leadership, civil society strengthening and police reform in relation to HIV, are critical factors and key ingredients in changing the enabling environment in which sex work takes place to ensure that HIV prevention, individual and public health as well as HIV prevention and the promotion of human rights are the number one priority. Further research into this relationship is needed to provide evidence for effective HIV programming with police.”</p> <p>Caveats: global and HIV/selling sex focus</p>	<p>regulatory framework around sex work can inhibit efforts to halt the spread of HIV such as the possession of condoms being used as evidence for arrest for sex work. The decriminalisation of sex work is currently regarded as the best practice model. This can include “zones of tolerance” for sex work where inreach of sexual health services is more easily facilitated. Crackdowns have been demonstrated to displace rather than eliminate sex work and increase risk by pushing sex work into more isolated, less populous areas and away from health services. Fining women was shown to increase debt and increase frequency of sex work. The use of peer educators is viewed as positive in a number of global settings and a good relationship between peer educators and the police.</p>
SEV 22	<p>Steen R, Wheeler T, Gorgens M, Mziray E, Dallabetta G (2015) Feasible, Efficient and Necessary, without Exception – Working with Sex Workers Interrupts HIV/STI Transmission and Brings Treatment to Many in Need. <i>PLoS ONE</i> 10(10): e0121145. doi:10.1371/journal.pone.0121145</p>	<p>“High rates of partner change in sex work—whether in professional, ‘transactional’ or other context—disproportionately drive transmission of HIV and other sexually transmitted infections.” Decades of empirical evidence, extended by analyses in this collection, argue that protecting sex work is, without exception, feasible and necessary for controlling HIV/STI epidemics.”</p> <p>The disproportionate burden of HIV borne by sex workers (globally) calls for expedited and facilitated access to appropriate services.</p> <p>Direct interventions should include peer-based outreach, condom programming and appropriate clinical services, and should be supported by structural interventions to reduce vulnerability, facilitate condom use and promote participation and ownership by sex workers. Programmes should prioritise coverage of overt, high-volume sex work as a first step to interrupting transmission and controlling epidemics.</p> <p>(Caveats: this paper takes a global view and generally focuses on countries which are resource poor and have a high HIV prevalence. The article focuses on selling sex rather than “no touch” SEV)</p>	<p>Sex work is an important driver of sexual transmission of HIV.</p> <p>Direct interventions should include peer-based outreach, condom programming and appropriate clinical services, and should be supported by structural interventions to reduce vulnerability, facilitate condom use and promote participation and ownership by sex workers.</p>
SEV 23	<p>Elena Shih (2016) Not in My “Backyard Abolitionism”:</p>	<p>This article explores a faith based <i>vigilante rescue</i> anti-sex trafficking programme for human trafficking in South Carolina, US. The author argues that “moral panic” about sex trafficking justified surveillance</p>	<p>Conflation of sex work and trafficking can lead to disproportionate surveillance of</p>

	<p>Vigilante Rescue against American Sex Trafficking Sociological Perspectives 2016, Vol. 59(1) 66–90 DOI: 10.1177/0731121416628551 spx.sagepub.com</p>	<p>and policing of working class immigrant women in the state. The use of racial profiling and assumptions about criminal behaviour on the basis of race were noted.</p> <p>The author notes that moral positions about the legitimacy of sex work can assume that all commercial sex work is exploitative and non-consensual and that moral concern about the sex trade has led to a disproportionate focus on sex trafficking compared to other forms of trafficked human labour; this has led to punitive approaches to migrant women.</p> <p>The author raises concern that such non-state organisations as this acting in the state's interest draw resources away from labour rights, social welfare and social housing.</p>	<p>migrant women involved in the sex trade (including SEV) and further marginalise these women. Social welfare responses are preferred.</p>
SEV 24	<p><i>Stefan David Baral, M Reuel Friedman, Scott Geibel, Kevin Rebe, Borche Bozhinov, Daouda Diouf, Keith Sabin, Claire E Holland, Roy Chan, Carlos F Cáceres (2015)</i> HIV and sex workers Male sex workers: practices, contexts, and vulnerabilities for HIV acquisition and transmission <i>Lancet</i> 2015; 385: 260–73</p>	<p>“Male sex workers, irrespective of their sexual orientation, mostly offer sex to men and rarely identify as sex workers, using local or international terms instead. Growing evidence indicates a sustained or increasing burden of HIV among some male sex workers within the context of the slowing global HIV pandemic.”</p> <p>This group as a key population is underserved by current HIV prevention, treatment, and care services (globally). Men who sell sex represent a subset of individuals who have been mostly ignored to date in the context of the global response to HIV/AIDS.</p> <p>Commercial heterosexual sex probably encompasses a small proportion of all commercial sex offered by men. HIV acquisition and transmission risks for men who sell sex only to women are also probably much lower than those affecting other male sex workers.</p> <p>Not defining as a sex worker can be a barrier to male sex workers accessing sex worker specific health services.</p> <p>Male sex workers may have lower HIV prevalence than other MSM due to a higher propensity to use condoms with non-paying partners – but this is a mixed picture globally. In one study male sex workers in Sydney, Australia had lower HIV prevalence than other MSM due to lower propensity for unprotected sex with non-paying partners. In China, similar lower HIV prevalence amongst “money boys” than other MSM is noted.</p> <p>Police abuse of male sex workers and evidence of condoms being used to prosecute complicates safer sex work with male sex workers.</p> <p>Caveats: this paper takes a global view, so findings although applicable and generalizable in global terms may not be specifically applicable to Sheffield or the UK. This paper is focussed on selling sex rather than sexual entertainment.</p>	<p>Evidence-based and human rights affirming services dedicated specifically to male sex workers are needed to improve health outcomes for these men and the people within their sexual networks.</p> <p>Decriminalisation of sex work and access to protective public health and legal structures would probably improve understanding of health issues specific to male sex workers, increase service uptake, and—from an occupational health perspective—foster better working conditions.</p>
SEV 25	<p><i>Maia Rusakova, Aliya Rakhmetova, *Steffanie A Strathdee (2014)</i> Why are sex workers who use substances at risk for HIV?</p>	<p>Sex workers who inject drugs can acquire HIV through unprotected sex or syringe sharing.</p> <p>Sex workers who are alcohol or drug dependent are more likely to engage in transactions while under the influence of substances and might earn less per transaction.</p>	<p>Although empowerment of sex workers has been pivotal to HIV prevention successes in many countries, such programmes have tended not to focus on</p>

	<p>www.thelancet.com <b>Vol 385</b>  <b>January 17, 2015</b>  Published Online  July 22, 2014  <a href="http://dx.doi.org/10.1016/S0140-6736(14)61042-4">http://dx.doi.org/10.1016/S0140-6736(14)61042-4</a></p>	<p>Drug users may feel more pressure to acquiesce to clients' demands for unprotected sex, especially if offered more money or drugs.</p> <p>Sex workers' intimate male partners and clients often engage in behaviours with high risk of HIV infection.</p> <p>Drugs may be used as a form of coercion or control of sex workers.</p> <p>Injecting drug users are more likely to work outdoors exposing them to greater risks as injecting drug use is stigmatised in indoor venues.</p> <p>Injecting drug use is associated with elevated HIV risks in sex workers. In 20 countries worldwide, HIV prevalence was higher in female injectors than male injectors. There is high prevalence of injecting drug use amongst female sex workers in some Eastern European countries (e.g. Russia).</p> <p>(Caveat: article deals with onward sexual transmission of HIV and therefore selling sex rather than non-touch sexual entertainment)</p>	<p>sex workers who inject or use drugs, in part because they are even more marginalised.</p> <p>Policy makers should consider the particular health and support needs of sex workers who inject drugs.</p>
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