

**COMMUNITY ENGAGEMENT PROCESS ON
STREET LEVEL SEX WORK IN THE
SHERMAN HUB
SEPTEMBER 2012 – JUNE 2013**

OCTOBER 2014

**Prepared by: Deirdre Pike
Senior Social Planner
Social Planning and Research Council of Hamilton**

and

**Rebekah Clause,
McMaster Student (School of Social Work)**



© The Social Planning and Research Council of Hamilton
162 King William Street, Suite 103, Hamilton, ON L8R 3N9
Phone: 905.522.1148 Fax: 905.522.9124 E-mail: sprc@sprc.hamilton.on.ca
Website: sprc.hamilton.on.ca



United Way Funded Agency

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Acknowledgements

This consultation was made possible through the resources of the Neighbourhood Development Strategy Office and the Community Services Department of the City of Hamilton.

Neighbourhood consultations would be impossible if not for the generosity of the residents to become involved in community discussions. The people involved in the Sherman Hub (formerly South Sherman Hub) have been instrumental in ensuring a variety of voices have been heard for this consultation with more to come in subsequent phases.

Thanks are extended to the executive of the Sherman Hub at the time of the development of this process and for supporting it: Steve and Kathy Calverly; Sarah Merritt. David Derbyshire was the Community Development Worker.

An equally important set of neighbourhood voices participated in a focus group at the Elizabeth Fry STARS (Sex Trade Alternatives, Resources, and Services) Drop-In Centre comprised of the voices of women who have been, are at risk of, or are currently involved in street level sex work.

Many thanks for the guidance provided by the Sex Work Engagement Project Team comprised of:

Katherine Kalinowski, Good Shepherd (Chair)
Paul Johnson, Neighbourhood Development Strategy Office, City of Hamilton
Marjorie Walker, Community Services Department, City of Hamilton
Lenore Lukasik-Foss, Sexual Assault Centre of Hamilton and Area
Debbie Bang, Womankind Addiction Services
Leanne Kilby, Elizabeth Fry Society
Linda Blake-Evans, Public Health, City of Hamilton
Hamilton Police Services, Victim Witness (various members)
Carmen Bian, Community Services Department, City of Hamilton
David Derbyshire, Community Development Worker, Sherman Hub

Thank you to all key informant interviewees including many from the team previously identified as well as the Board of Big Susie's, a Hamilton sex worker advocacy group.

Rebekah Clause was an integral part of compiling the literature review and best practices research. Ruth Lewis completed and collated the interviews with key informants.

Pamela Hubbard's skills at developing an inclusive community process and graphically recording the community meetings were instrumental in gathering the best information possible in a succinct and vibrant way.

Thank you one and all.

TABLE OF CONTENTS

1.0 EXECUTIVE SUMMARY	4
2.0 INTRODUCTION.....	9
3.0 CONSULTATIONS.....	10
3.1 COMMUNITY CONSULTATIONS	10
3.2 FOCUS GROUP	14
3.3 KEY INFORMANT INTERVIEWS	17
4.0 KEY FINDINGS.....	20
4.1 PREVENTION.....	20
4.2 TREATMENT	21
4.3 HARM REDUCTION	21
4.4 ENFORCEMENT	22
5.0 SUMMARY	23
5.1 RECOMMENDATIONS.....	23
5.2 CONCLUSION	25
6.0 APPENDICES	26
6.1 LITERATURE REVIEW.....	26
6.2 BEST PRACTICES	29
6.3 GLOSSARY OF TERMS.....	40
6.4 GRAPHIC RECORDING OF COMMUNITY SESSION ONE	42
6.5 GRAPHIC RECORDING OF COMMUNITY SESSION TWO – QUESTION 1.....	43
6.6 GRAPHIC RECORDING OF COMMUNITY SESSION TWO – QUESTION 2.....	44

1.0 EXECUTIVE SUMMARY

For over a decade in Hamilton there have been various tables and task forces established to address the reality of street level sex work and its impact on neighbourhoods from various angles. From The Barton Street Community Partners for Crime Prevention (2003) to the Sex Trade Task Force (2003 – 2008) and now the current Sex Work Engagement Project Team, (2011-present), many community partners have come together in various configurations over the years to address this issue.

More recently, the City of Hamilton has been leading an initiative with the Hamilton Community Foundation and other supporting partners bringing neighbourhoods together for a planning process under the designation of a “Neighbourhood Hub.” The Sherman Neighbourhood is one of these hubs, bounded by Wentworth Street to the west, the escarpment to the south, Gage Avenue to the east and Cannon to the North. There are some people who fall outside of those strict boundaries but still consider themselves part of the Sherman Hub.

The Sherman Neighbourhood in Ward 3 is one of 3 city-defined neighbourhoods located near the Ivor Wynne Stadium site that make up the “Stadium Precinct.” As one of the sites chosen to host events for the 2014 Pan Am Games, the City of Hamilton’s Neighbourhood Development Strategy Office has been hosting regular meetings with residents of the Stadium Precinct over the last two years.

Those consultations resulted in a regular expression of concern by the residents about how the reality of street level sex work in their neighbourhoods impacts them. This led to the creation of the Sex Work Engagement Project Team to begin a consultation process to assist neighbourhoods, including the people involved in sex work, to create safer and healthier communities for everyone.

The committee included:

Katherine Kalinowski, Good Shepherd (Chair)
Paul Johnson, Neighbourhood Development Strategy Office, City of Hamilton
Marjorie Walker, Community Services Department, City of Hamilton
Lenore Lukasik-Foss, Sexual Assault Centre of Hamilton and Area
Debbie Bang, Womankind Addiction Services
Leanne Kilby, Elizabeth Fry Society
Linda Blake-Evans, Public Health, City of Hamilton
Hamilton Police Services, Victim Witness (various members)
Carmen Bian, Community Services Department, City of Hamilton
David Derbyshire, Community Development Worker, Sherman Hub

It became clear to the committee that some form of community consultation focused specifically on the issue of street level sex work in the Stadium Precinct needed to take place and, with the support of the late Ward 3 Councillor Bernie Morelli, the Social Planning and Research Council was engaged to undertake the facilitation of this important discussion.

The first step was to perform a literature search to find best practice models in holding community meetings of this nature and to discover how neighbourhoods in other parts of the province, the country and the world have responded to the need for this conversation.

It was then determined to use the “Four Pillar Approach” originally designed as a drug strategy in Vancouver, B.C., but has also provided a good framework for addressing street level sex work and has been used successfully in this way in the past.

The consultation began with key informant interviews with service providers who work with women who have been, are at risk of, or are currently involved in street level sex work. Interviews were conducted with 6 service providers including Executive Directors at the Elizabeth Fry Society, the Sexual Assault Centre of Hamilton and Area, Good Shepherd, Womankind Addiction Services, as well as a Hamilton Police Officer (Action Team) and the board of Big Susie’s, a sex worker advocacy group in Hamilton.

A focus group was conducted with ten women at the STARS program (Sex Trade Alternatives, Resources, and Services) with women who have been, are at risk of, or are currently involved in street level sex work.

Following these initial steps a community meeting was planned for the Stadium Precinct with the Sherman Hub providing crucial connections to the residents in the area through their website, newsletters and email lists. The Community Development Worker also ensured flyers were posted in various parts of the area.

Working with graphic facilitator and recorder Pamela Hubbard, a process for community engagement was arranged and the first meeting set for March 26. Just over 20 people from various parts of the neighbourhood attended the meeting. (It is important to note that while many street level sex workers likely live in the Sherman Hub, the consultation attendees did not identify as such so that voice was lacking in these resident-led consultations.)

Deirdre Pike facilitated the session and presented information on the purpose of the meeting, the results of key informant interviews to date with service providers, including police, and the framework of the Four Pillars Strategy of Prevention, Treatment, Harm Reduction and Enforcement.

Then residents formed small groups and were asked to discuss what they were currently experiencing related to safety in their neighbourhood. The issues that were raised were documented in the participant workbooks and as part of a graphic recording. (Appendix 6.4)

The second part of the meeting was to assess what can be done in response to the identified issues using the four pillars of Prevention, Treatment, Harm Reduction, and Enforcement as a backdrop.

The following questions guided the conversation:

- What can the neighbourhood do together to address these problems?
- What can the city do?
- What can I do?
- What can others do?

FINDINGS FROM CONSULTATIONS

Prevention

Residents, service providers, and women from STARS, all agreed that poverty reduction needs to be the priority in preventing women and girls from becoming engaged in street level sex work. Ideas to reduce poverty included getting employers to pay a living wage, increasing food security and active lobbying for changes to the social assistance system. An increase in affordable and accessible housing was also noted as a high need.

Participants in each area of the consultation recognized that women engaged in sex work are more likely to have had traumatic experiences in their lives such as sexual abuse. The prevention of sexual abuse or better responses to the victims of it could assist in preventing women from working in the sex trade.

Resident participants noted the stigma associated with neighbourhoods in The Code Red series from The Hamilton Spectator and how young people are impacted by this connotation. They want to see improvements to their neighbourhoods so people feel better about where they live and their potential opportunities.

“Stronger community centres” with more accessible hours for low income women as well as more children’s recreation centres or programming were identified as prevention tools. “Barton Street Place for Women” was suggested as an idea for a women’s centre.

Long-term funding for services that work directly with women in sex work and not just “band aid” funding is necessary for sustainable outcomes. Participants agreed that those services should be across the

continuum of services, not just services that focus on exiting. Services should be provided with a “one-stop shopping” approach where there are many different types of services able to be accessed from one location.

Treatment

Each group of participants recognized that not all women involved in street level sex work are in need of treatment. However, they also all agreed that for those who need them, treatment services are limited and wait times are too long. One area of concern was the lack of withdrawal management programs. A shortage of treatment responses for families with children and, in particular, for children whose mothers become incarcerated, was also identified.

Suggestions for improvement included specialized care geared specifically towards street level sex workers. It is necessary to operate programs that reduce the stigma for women involved in sex work would make it easier for sex workers to access care. Treatment needs to be offered from a harm reduction model that includes women in sex work involved in designing the programs.

Various participants identified the importance of bringing community partners together from addiction services, exiting programs, safety, etc., for a “one-stop shopping” response to the women’s needs. Support is necessary for women who want to remain in sex work in addition to those who wish to exit.

A high priority for the majority of participants from the STARTS Drop-In was a 24-hour phone line because there is “nowhere to call when I just need someone to talk me out of a situation.” Existing crisis lines were described by some as having “too much rigmarole.”

Safe injection sites and safe inhalation rooms that provide a safe space for people using drugs, where they can be monitored by public health nurses for overdose, safer crack use, safer injection trainings, and for referrals to detox programs and other community supports were also suggested.

Harm Reduction

The majority of participants believed that for harm reduction to be effective, programs need to be specifically tailored to women in sex work and work to reduce stigma associated with the women’s lives. Agencies that offer services to women need to have a true understanding of harm reduction and programs that reflect the philosophy and include women in sex work in the design of such programs.

For residents, there was a strong desire to hear the voices of the women engaged in sex work to increase the understanding and compassion in the neighbourhood and work toward solutions together.

Some specific enhancements to services that would increase harm reduction included: an increase in counselling support for women with hours at more accessible times; increase in hours at STARS Drop-In; better supports for women with mental health issues; transportation to overcome barriers to some of the existing supports; creating a women’s shelter with a lower threshold of access in terms of where a woman is at with drug or alcohol use; a better listing of resources in the community such as where to find hot meals was identified as a harm reduction need; restoring payphones on Barton Street that have been shut down and leave women isolated in dangerous situations; a “24-hour fix site for when the Van is closed”; and an indoor place to work where sex workers can live and bring in their guests under the careful watch of support workers, video surveillance and have harm reduction supplies provided and violence prevention courses offered.

Enforcement

Ideas for better police involvement included: better education for police about responding to people with mental health issues, addiction and trauma; becoming a “crime stoppers community”; creating a community policing station; having a liaison officer in the area who could help educate residents about safety; and faster response times from police when they are called.

While many of the participants knew about the Social Navigator with Hamilton Police Services, they expressed a need for a bigger profile so more women know about the role.

Residents are interested in learning about the difference between decriminalization and legalization of prostitution and entertained the possibility of a “red light district” that would prevent women from being arrested.

Much of the resident discussion focused on the need to “clean up” Barton, Tisdale South, and King and Wentworth areas. Concerns about empty buildings and alleyways could be responded to with a more active enforcement of property standards and would help to deal with run down houses and buildings.

RECOMMENDATIONS

SHORT TERM

PREVENTION	TREATMENT	HARM REDUCTION	ENFORCEMENT
Create more safe and walkable streets	Feasibility study on the expansion of the 24 hour support/crisis lines and strengthening the connections across this area	Develop educational tools for sex workers and residents re: community programs and community safety issues including litter	Identification of police officers who need training to respond to people with trauma and mental health issues
Environmental scan on existing social enterprise and employment opportunities for women in sex work	Assess the need for enhanced operating hours for the VAN	Community education sessions re: sex work realities; community tools (311 number); current legislation in Canada	Bicycle police and social navigator more present in the neighbourhood
Enhance Sex Worker Engagement Project Team with more key stakeholders from across the spectrum	Needs Assessment for enhanced withdrawal management services	Tools for sex workers to assist in engagement with other residents and to connect to services	More active enforcement of property standards for neighbourhood landlords
		Trauma informed training for social service workers/ health care workers	
		Enhanced community support to increase operating hours at the drop-in and other programs and services at STARS (EFry)	
		Photovoice project with women in sex work to build conversation and compassion with residents	

MEDIUM TERM

PREVENTION	TREATMENT	HARM REDUCTION	ENFORCEMENT
Connect to existing youth serving agencies to build early intervention and diversion education programs	Funding for addiction services, housing, vocational training	Satellite locations for STARS Drop-In and other programs and services	HPS explore other alternative models of enforcement like social navigators
Increased support of agencies providing counselling opportunities for youth who experience sexual abuse/violence	Advocacy for enhanced withdrawal management services for women	Advocate for increased supportive housing for women	More officers with expertise in responding to people with trauma, mental health and addiction issues
Engage Skills Development Flagship exploring skilled trades opportunities for women		Organize an anti-stigma campaign in the neighbourhood ("She is your sister...")	
Look at existing structures working with women in the trades and assess how they can work to create opportunities now		Create neighbourhood group of sex workers and neighbours to share, build relationships, generate opportunities for common understanding	

LONG TERM

PREVENTION	TREATMENT	HARM REDUCTION	ENFORCEMENT
Additional affordable housing stock for women	More beds for appropriate withdrawal and treatment models and alternatives	Indoor space for women to live and work with safety	Feasibility study of adding a liaison officer with a community policing station
Adequate income – social assistance; living wage	Supportive permanent housing for women	Safe injection site	
Accessible and affordable child care			
Vocational/employment supports			

CONCLUSION

The community consultation process examining the reality of street level sex work in the Sherman Hub gathered a variety of voices and opinions on the best way to address presenting issues. However, despite the variety there was great unity in the direction to move ahead in many areas.

One set of voices that needs to be heard from more are the women who have been or are currently engaged in sex work. Neighbours expressed a strong desire to build relationships with the women by finding ways to hear their stories in an atmosphere free of judgment.

The results of the consultation indicate a need for short, medium, and long range strategies to address each of the Four Pillars of prevention, treatment, harm reduction and enforcement. The Sex Work Engagement Project Team will continue to ensure community conversations are taking place while working toward making these recommendations a reality.

2.0 INTRODUCTION

The City of Hamilton has been leading an initiative with the Hamilton Community Foundation and other supporting partners bringing neighbourhoods together for a planning process under the designation of a “Neighbourhood Hub.” The Sherman Neighbourhood is one of these hubs, bounded by Wentworth Street to the west, the escarpment to the south, Gage Avenue to the east and Cannon to the North. There are some people who fall outside of those strict boundaries but still consider themselves part of the Sherman Hub.

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Those consultations resulted in a regular expression of concern by the residents about how the reality of street level sex work in their neighbourhoods impacts them. This led to the creation of the Sex Work Engagement Project Team to begin a consultation process to assist neighbourhoods, including the people involved in sex work, to create safer and healthier communities for everyone.

With the support of late City Councillor Bernie Morelli, the city contracted the Social Planning and Research Council of Hamilton to lead the consultation. This report presents the outcomes of that work.

3.0 CONSULTATIONS

3.1 COMMUNITY CONSULTATIONS

SESSION ONE

On March 26, 2013, approximately 20 residents gathered at St. Giles United Church for the first of two community consultations to address the issues identified as impacting neighbourhood safety and what could be done about them based on the Four Pillar Strategy of prevention, treatment, harm reduction and enforcement.

The number of people that attended the evening was small but it was a diverse group of people (e.g. young women, young married women with children, older women, former sex worker, and male residents) and compelling stories were told. (Their illustrated responses can be found in Appendix 6.6)

KEY SAFETY ISSUES IDENTIFIED

Residents were asked, "What are the safety issues you experience on the street in this neighbourhood?"

Safety issues named by the participants ranged from the impact on how people feel just seeing the sex work activity in their neighbourhood to residents the fear of young women being approached for grooming and possibly attacked by the men involved.

Some men identified that they "feel uncomfortable and embarrassed but not necessarily unsafe" when they see women engaged in sex work on the street.

Many people expressed fear for women, in particular young women who some fear are being groomed to become active in sex work. They also worry about the stigmatization of women living in the area who are often approached and propositioned by potential johns. It was also noted that johns have been seen taking pictures of women in the area.

Some residents expressed concern that street level sex work could be connected to drugs, gangs and organized crime. The litter related to drug use is often found by residents and the fact that children are exposed to this danger is identified as a problem. (There is no clear connection between street level sex work and gangs or organized crime.)

Fear was expressed about the possibility of being mugged or having more assaults in the neighbourhood and "vulnerable people being preyed upon."

A few residents reported seeing sex acts take place openly on street.

POSSIBLE RESPONSES TO THE SAFETY ISSUES IDENTIFIED

The second part of the meeting was to assess what can be done in response to the identified issues using the four pillars of Prevention, Treatment, Harm Reduction, and Enforcement as a backdrop.

The following questions guided the conversation:

- What can the neighbourhood do together to address these problems?
- What can the city do?
- What can I do?
- What can others do?

Prevention

Residents identified poverty reduction as key to preventing people from getting involved in street level sex work. Ideas raised included getting employers to pay a living wage, active lobbying for poverty reduction, increasing food security and better housing.

Many residents recognized the high rate of sex workers who previously experienced sexual abuse and therefore identified more counseling support for victims or abuse at a young age as a preventative measure.

Education was seen as an important element in preventing people from engaging in sex work. One group spoke about the need to educate and socialize males differently so to reduce sexism that was seen as connected to the prevention of sex work engagement. Women of all ages were identified as an important part of the solution.

Other prevention ideas included teaching children how to identify potential sexual exploitation in the same way parents often do “bad touch drills” in order to ensure children are aware of potential sexual abuse. A particular emphasis on the early identification of vulnerable children was mentioned.

Treatment

While noting that not all women involved in street level sex work are in need of treatment, residents identified that increased access to addiction services are important.

Harm Reduction

Increased access to addiction and mental health services was identified as essential to reducing the harm associated with street level sex work.

In this area, residents focused largely on the need for education for everyone in the neighbourhood so “we can humanize the worker and live together.” It was emphasized how important it was to “keep the discussion going in the neighbourhood” and “listen to other perspectives.” “Don’t judge, no blame, and no shame” were mantras at the end of the discussion. (See Appendix 6.4)

Enforcement

Some ideas that were presented under enforcement included becoming a “crime stoppers community”, and having a community policing station. Some residents called for faster response times from police when they are called.

SESSION 2

A second community engagement meeting was held May 21, 2013. This meeting involved approximately 40 residents with very few of the same people from the first gathering. The graphic recording of the first meeting was posted for them to observe as well as the flip charts recording the focus group with the women at the STARS program.

Deirdre Pike facilitated the session and presented information on the Four Pillar Strategy as well as sharing what other communities have done in response to similar realities. Collingwood, British Columbia, and their SAFE Community Program was highlighted.

Originally the residents were going to be asked if there was anything missing from the chart from group one and it would be added but because the majority of attendees had not been at Session One, a decision was made by the facilitators to start a new graphic recording and replicate part one of session one. While much of their conversation mirrors group one, there were some unique answers as well. (Their illustrated responses can be found in Appendix 6.5)

KEY SAFETY ISSUES

Residents were asked, “What are the safety issues you experience on the street in this neighbourhood?”

Vandalism, such as auto break-ins, and “all kinds of violence” was identified by many participants as prevalent in the neighbourhood. Concern was expressed about the kind of men who come to the neighbourhood because of the presence of sex workers. The johns were described as “creepy” and participants wondered about the involvement of “pimps.”

The streets were described by some as unsafe because of the alleyways and the smell of marijuana being smoked on front porches. A lack of street cleaners also adds to the sense of unsafe streets being dirty.

Residents expressed frustration that there was no one to talk to when they wanted to complain about these safety issues such as drug use or the presence of johns.

Many expressed concern for the “girls and women on the street with no choice.” “We need to care about them,” one said and another resident wondered, “What’s their story?”

POSSIBLE RESPONSES TO THE SAFETY ISSUES IDENTIFIED

The second part of the meeting was to assess what can be done in response to the identified issues using the four pillars of Prevention, Treatment, Harm Reduction, and Enforcement as a backdrop.

The question, “What does this community/neighbourhood need,” guided the conversation.

Prevention

Poverty was identified as a key issue as to why street level sex work exists in communities. Participants said “City officials” needed to “lift people up from poverty” and “speak positively” about their neighbourhood.

The city was also identified as the partner that could make better use of empty spaces and encourage more shops on major streets to make the area more safe and walkable.

Concern was expressed about the need to end stigma that residents experience since The Hamilton Spectator series, Code Red, identified “poor” neighbourhoods. One group reported the need for school boards to have schools with mixed economic backgrounds to encourage equity.

Residents said more supports for children are needed as a preventative measure along with more sex education for kids that includes messages that, “street work should not be an option.”

Treatment

A lack of support services for women were identified by the group as a problem but there were no specific ideas about the kinds of supports needed.

Harm Reduction

Accessible exit strategies for women who want them were documented as necessary while at the same time the group recognized a need for supports for women who would not be choosing to exit. A community health clinic in the area was one idea.

Education for the residents was seen as instrumental in increasing understanding. Hearing the voices of the sex workers would help “humanize the women” and residents need to learn “people first language” instead of labeling and stigmatizing the people involved in sex work even further.

Finally, residents wanted to know what to do if they saw dirty needles or other litter related to sex work and drug use that is sometimes present with it. Suggestions for a 311 information line or specific place to call were made as well as better information on the city website.

Enforcement

Residents are interested in learning about the difference between decriminalization and legalization of prostitution and entertained the possibility of a “red light district” that would prevent women from being arrested.

Police officers dedicated to the area, such as a liaison officer, were noted as valuable. The officers could help educate residents about safety.

Many enforcement ideas pertained more to by-laws than crime. For example, residents talked about the need to “clean up” Barton, Tisdale south, and King and Wentworth areas. They have concerns about empty buildings and alleyways, which may require a more active enforcement of property standards.

Expressions of interest for a “slumlord strategy” to deal with run down houses and buildings received strong support as people talked about how bad it makes their neighbourhoods look as well as the shortage of safe and affordable housing. A robust program checking for fire alarms was suggested as a way to enforce some bylaws.

3.2 FOCUS GROUP WITH WOMEN AT STARS (Sex Trade Alternatives, Resources, and Services)

With assistance from the staff of the Hamilton Elizabeth Fry Society, a focus group was arranged at the STARS Drop-in on April 9, 2013, from 6:30 – 8:30 p.m. Despite being a very rainy night, approximately 10 women participated in the facilitated conversation for at least some portion of the time. Some women were present for the full two hours.

All of the participants were women who have been, are at risk of, or are currently involved in street level sex work. After some input from the facilitator about the Four Pillar Strategy, two questions were used to frame the discussion:

1) What do you think has been done or is being done to address women's engagement in street level sex work at the Prevention, Treatment, Harm Reduction and Enforcement levels?

2) What do you think needs to happen to address women's engagement in street level sex work at the Prevention, Treatment, Harm Reduction and Enforcement levels?

Prevention – Done or being done

Some of the women had heard about a local campaign called, "How's the Weather," addressing women's homelessness and thought it had made some movement in this key area of prevention.

Prevention – Needs

Addressing income security through a more accessible social assistance system with higher rates was seen as a priority. Some women agreed that being able to access Ontario Disability Support Payments more quickly upon release from a detention centre would be helpful for some.

Help with hydro payments seemed to be a priority in terms of preventing women from "turning to the streets when hydro goes up."

"Stronger community centres" with more accessible hours for low income women as well as more children's recreation centres or programming were identified as prevention tools. "Barton Street Place for Women" was suggested as an idea for a women's centre.

An increase in affordable and accessible housing was noted as a high need as well as creating a women's shelter with a lower threshold of access in terms of where a woman is at with drug or alcohol use.

Participants suggested a need for more counselling support which could prevent girls or women from becoming engaged in sex work. Elizabeth Fry was identified as a good point of access for this type of counselling.

Treatment – Done or being done

Participants noted the following existing supports for women in need of treatment

- Alcohol, Drugs and Gambling Services, City of Hamilton
- Wesley Urban Ministries
- Womankind – in overnight or daytime, 2 approaches
- Elizabeth Fry, STARS Drop-In
- Urban Core – anger management, childcare

It was also noted positively that Ontario Works has addiction workers.

Treatment – Needs

A high priority for the majority of participants was a 24-hour phone line because there is “nowhere to call when I just need someone to talk me out of a situation.” Existing crisis lines were described by some as having “too much rigmarole.”

The women were concerned about a lack of treatment responses for families with children who would also need to access support.

More places with “medically managed women’s treatment” are needed according to some participants, where women can go to address withdrawal symptoms.

More training made available for agency staff so that more women can access local treatment services was also noted as necessary to increase harm reduction efforts.

Harm Reduction – Done or being done

Women identified the following support services as currently assisting in harm reduction for women in sex work:

- STARS Drop-In
- The Van Needle Exchange
- Street health clinics/shelter
- Sexual health clinics
- The Sexual Assault Centre of Hamilton and Area – Ugly Trick List
- The AIDS Network – Clean Sweeps program (picking up used needles/condoms, etc.)
- Addiction groups
- Harm reduction workers – Wesley Centre
- John School

Harm Reduction – Needs

A better listing of resources in the community such as where to find hot meals was identified as a harm reduction need.

An increase in counselling support for women with increased hours at more accessible times was also noted along with increased hours at the STARS Drop-In. “There’s nothing for women with mental health issues,” said one participant.

Another harm reduction tool that was identified was programming for children with incarcerated moms.

The cost of transportation was noted as a barrier to some of the existing supports.

The lack of payphones on Barton Street was clearly identified as something that needed to be addressed. The lack of phones leave women isolated in dangerous situations.

Equipping the Van or other agencies with “crack kits” was identified as needed. A “24-hour fix site for when the Van is closed” was suggested as a necessary harm reduction response.

Enforcement – Done or being done

Participants identified the existence of the following enforcement initiatives that are currently taking place:

- Elizabeth Fry John School
- Jane and John sweeps by Police
- Cop watch (citizens watching police interact/arrest with people)

The Action Team from Hamilton Police Services was identified as a new enforcement tactic. The “bicycle cops” were described by some as having a positive approach. They are helpful in identifying aggressive

johns. The Action Team also uses “Cold Alerts” as an opportunity to speak with the women and make sure they are safe.

Enforcement – Needs

While many of the participants knew about the Social Navigator with Hamilton Police Services, they expressed a need for a bigger profile so more women know about the role.

A top priority under needs in enforcement was education for police about responding to people with mental health issues, addiction and trauma. There was a particular emphasis on women with post-traumatic-stress-syndrome and how important it is that police know how to help de-escalate encounters with survivors.

With regard to response time when women call the police for help, one participant said, “There is no rapid response for sex trade workers.” Women discussed the danger they face on the street without access to pay phones to call police if needed.

3.3 KEY INFORMANT INTERVIEWS

Prior to the community meetings, key informant interviews were conducted with four executive directors of social service agencies that work with women who have been, are at risk of, or are currently involved in street level sex work as well as with a sergeant from the Hamilton Police Services Action Team and with the board of Big Susie's, a sex worker advocacy group. (The board filled out the questionnaire together.)

The interviews were guided by two questions:

1) What do you think has been done or is being done to address women's engagement in street level sex work at the Prevention, Treatment, Harm Reduction and Enforcement levels?

2) What do you think needs to happen to address women's engagement in street level sex work at the Prevention, Treatment, Harm Reduction and Enforcement levels?

Prevention – Done or being done

Some of the key informants interviewed stated there is some work being done in terms of prevention, but not enough. Noting this is a gender specific issue, the need for women's equality was named as essential in the prevention of women entering sex work.

It was identified that poverty is one of the key reasons that women are engaged in sex work and while there is some work being to address this systemic issue, there is nothing being done to address the issue with a gender lens.

One interviewee was not aware of anything that is being done in terms of prevention in Hamilton.

One respondent interpreted prevention to mean prevention of harm to sex workers or disease prevention as opposed to prevention of girls and women becoming engaged in sex work and offered many suggestions related to harm reduction that are happening such as The Van Needle Exchange.

Prevention – Need

Long-term funding for services that work directly with women in sex work and not just "band aid" funding is necessary for sustainable outcomes. Participants agreed that those services should be across the continuum of services, not just services that focus on exiting. Services should be provided with a "one-stop shopping" approach where there are many different types of services able to be accessed from one location.

Interviewees identified the importance of bringing community partners together from addiction services, exiting programs, safety, etc., that make it "so women can flow through these services." There needs to be support for women who want to remain in sex work in addition to those who wish to exit.

In order to develop best strategies for prevention, some service providers said it would be necessary to "identify the pathways" that lead to sex work and the "root causes" of why women may feel that sex work is the best option for them.

One participant suggested that women in sex work are much more likely to have traumatic pasts so addressing sexual abuse and other sources of trauma as a root cause is necessary.

Two of the interviewees also noted that it is important to recognize that not all women in sex work have felt forced to be there and that for them it has been a conscious choice so prevention will not work for every girl or woman.

While poverty was identified as a key area where preventative measures could be effective, only one respondent made a concrete suggestion about the need for a living wage at \$14.95 an hour.

Treatment – Done or being done

All interviewees identified felt that treatment issues are being dealt with poorly. They indicated that women in sex work are extremely marginalized, even in institutions that are meant to help them such as hospitals. A lack of resources presents a huge problem for treatment programs.

Although one participant identified management centres and methadone programs that exist in this area, “There is virtually no drug treatment programming available that prioritizes harm reduction and is sex-positive.” Alcoholics Anonymous and Narcotics Anonymous was identified but a respondent said, “those abstinence-based programs do not work for many people, and have a very low success rate.”

The majority of participants pointed to barriers and access to care that women in sex work face if and when they decide to seek treatment.

Treatment – Needs

Many respondents raised the issue that not all women in sex work need treatment. However, for those who do, it is necessary to create safe spaces for women to go with specialized care geared specifically towards street level sex workers. It is necessary to operate programs that reduce the stigma for women involved in sex work would make it easier for sex workers to access care.

The lack of treatment responses result in homelessness for many women because, as one participant explained, “if a women is actively addicted, she can’t get shelter. This is not because she is a sex worker, but because she is using. This is an example of how women feel barriers in accessing mainstream agencies.”

All of the participants identified the need for treatment programs to follow a harm reduction approach. “Treatment needs to be from a respectful model, not pretending that they are helping women and then trying to force them to exit. Women need to be involved in designing the programs and more than one woman needs to be involved.”

One respondent said, “Methadone does not work for everyone, and there needs to be community support for research into other options. Safe injection sites and safe inhalation rooms provide a safe space for people using drugs, where they can be monitored by public health nurses for overdose, safer crack use, safer injection trainings, and for referrals to detox programs and other community supports.”

Harm Reduction – Done and being done

The majority of the interviewees identified the following harm reduction services that already exist in Hamilton:

- Elizabeth Fry, STARS Drop-In
- Van Needle Exchange Program
- “Ugly Trick List” at SACHA
- Free Condoms
- Education

One participant mentioned the “Active Users Group” at Elizabeth Fry as a good example of a harm reduction response.

With regard to mainstream social service agencies, a few participants noted the need for more staff training. For example, “In the use of housing outreach workers, their expertise is in housing and not sex work. An area for improvement could be to provide training on the specific issues of sex work.”

Harm Reduction – Needs

The majority of key informants believed that for harm reduction to be effective programs need to be specifically tailored to women in the sex trade work. One participant said she “would like to see safe spaces where sex workers don’t feel stigmatized”. Others spoke about creating programs that fit the needs of the women as opposed to expecting them to fit into existing programs. “Harm reduction needs to be used with its true intention and not be used as a way to get women in the door,” said one interviewee speaking about local service providers.

Another participant voiced, “Outdoor sex workers clearly would benefit from an indoor safer place to work.” Models suggested were The Vivian Transition House and Sereena’s, both in Vancouver, where sex workers can live and bring in their guests under the careful watch of support workers, video surveillance and have harm reduction supplies provided and violence prevention courses offered.

Enforcement – Done and being done

The responses from the interviewees were mixed on this question. While one respondent said they “oppose the use of law enforcement as a response to sex work,” others felt sometimes police can be helpful and compassionate toward women in street level sex work. One participant indicated there has been some improvement in recent years in how law enforcement deals with incidents involving sex workers.

Another key informant said there has been “some effort by some officers” when it comes to responding well to women who have been sexually assaulted on the job. She also identified that there are barriers for both the sex workers and the police themselves when it comes to helpful law enforcement. “Many of the activities that these women engage in are illegal, making it difficult for them to contact police, but also making it difficult for police themselves.”

On the other hand, another response said the role of treatment centres should be to advocate for the decriminalization of drugs.

Enforcement – Needs

The majority of participants identified the need for more training for officers so they can continue to better understand and feel compassionate toward women engaged in sex work as members of the community.

Some participants identified the need for more social navigators with Hamilton Police Services so there are more wrap around services available for the women.

4.0 KEY FINDINGS

4.1 PREVENTION

1) Poverty Reduction

Residents, service providers, and women from STARS, all agreed that poverty reduction needs to be a priority in preventing women and girls from becoming engaged in street level sex work.

Ideas to reduce poverty included having employers pay a living wage, increasing food security and active lobbying for changes to the social assistance system. An increase in affordable and accessible housing was seen as a priority in this area.

2) Sexual Abuse and Trauma

Participants in each area of the consultation recognized that women engaged in sex work are more likely to have had traumatic experiences in their lives such as sexual abuse. The prevention of sexual abuse or better responses to the victims of it could assist in preventing women from working in the sex trade.

Some preventative measures that could be taken include more counseling support for victims of abuse at a young age; educate and socialize males differently so to reduce sexism and possibly reduce the amount of sexual abuse and assaults; teach children how to identify potential sexual exploitation in the same way parents often do “bad touch drills” in order to ensure children are aware of potential sexual abuse. Residents said more supports for children are needed such as sex education for kids that includes messages that, “street work should not be an option.”

3) Safe and walkable streets

Resident participants noted the stigma associated with neighbourhoods in The Code Red series from The Hamilton Spectator and how young people are impacted by this connotation. They want to see improvements to their neighbourhoods so people feel better about where they live and their potential opportunities.

The city was identified as the partner that could make better use of empty spaces and encourage more shops on major streets to make the area more safe and walkable.

There was support for the concept of creating schools with mixed economic backgrounds to encourage equity.

4) Community Services

“Stronger community centres” with more accessible hours for low income women as well as more children’s recreation centres or programming were identified as prevention tools. “Barton Street Place for Women” was suggested as an idea for a women’s centre.

Long-term funding for services that work directly with women in sex work and not just “band aid” funding is necessary for sustainable outcomes. Participants agreed that those services should be across the continuum of services, not just services that focus on exiting. Services should be provided with a “one-stop shopping” approach where there are many different types of services able to be accessed from one location.

4.2 TREATMENT

1) Quantity

Each group of participants recognized that not all women involved in street level sex work are in need of treatment. However, they also all agreed that for those who need them, treatment services are limited and wait times are too long. One area of concern was the lack of withdrawal management programs.

A shortage of treatment responses for families with children and, in particular, for children whose mothers become incarcerated, was also identified.

2) Quality

Suggestions for improvement included specialized care geared specifically towards street level sex workers. It is necessary to operate programs that reduce the stigma for women involved in sex work would make it easier for sex workers to access care. Treatment needs to be offered from a harm reduction model that includes women in sex work involved in designing the programs.

Various participants identified the importance of bringing community partners together from addiction services, exiting programs, safety, etc., for a “one-stop shopping” response to the women’s needs. Support is necessary for women who want to remain in sex work in addition to those who wish to exit.

A high priority for the majority of participants from the STARTS Drop-In was a 24-hour phone line because there is “nowhere to call when I just need someone to talk me out of a situation.” Existing crisis lines were described by some as having “too much rigmarole.”

Safe injection sites and safe inhalation rooms that provide a safe space for people using drugs, where they can be monitored by public health nurses for overdose, safer crack use, safer injection trainings, and for referrals to detox programs and other community supports were also suggested.

4.3 HARM REDUCTION

1) Increase understanding and commitment to harm reduction

The majority of participants believed that for harm reduction to be effective, programs need to be specifically tailored to women in sex work and work to reduce stigma associated with the women’s lives. Agencies that offer services to women need to have a true understanding of harm reduction and programs that reflect the philosophy and include women in sex work in the design of such programs.

For residents, there was a strong desire to hear the voices of the women engaged in sex work to increase the understanding and compassion in the neighbourhood and work toward solutions together.

2) Enhance current harm reduction efforts

Some specific enhancements to services that would increase harm reduction included: an increase in counselling support for women with hours at more accessible times; increase in hours at STARTS Drop-In; better supports for women with mental health issues; transportation to overcome barriers to some of the existing supports; creating a women’s shelter with a lower threshold of access in terms of where a woman is at with drug or alcohol use; a better listing of resources in the community such as where to find hot meals was identified as a harm reduction need; restoring payphones on Barton Street that have been shut down and leave women isolated in dangerous situations; a “24-hour fix site for when the Van is closed”; and an indoor place to work where sex workers can live and bring in their guests under the careful watch of support workers, video surveillance and have harm reduction supplies provided and violence prevention courses offered.

4.4 ENFORCEMENT

1) Policing

Ideas for better police involvement included: better education for police about responding to people with mental health issues, addiction and trauma; becoming a “crime stoppers community”; creating a community policing station; having a liaison officer in the area who could help educate residents about safety; and faster response times from police when they are called.

While many of the participants knew about the Social Navigator with Hamilton Police Services, they expressed a need for a bigger profile so more women know about the role.

Residents are interested in learning about the difference between decriminalization and legalization of prostitution and entertained the possibility of a “red light district” that would prevent women from being arrested.

2) By-law enforcement

Much of the resident discussion focused on the need to “clean up” Barton, Tisdale South, and King and Wentworth areas. Concerns about empty buildings and alleyways could be responded to with a more active enforcement of property standards and would help to deal with run down houses and buildings.

5.0 SUMMARY

5.1 RECOMMENDATIONS

SHORT TERM

PREVENTION	TREATMENT	HARM REDUCTION	ENFORCEMENT
Create more safe and walkable streets	Feasibility study on the expansion of the 24 hour support/crisis lines and strengthening the connections across this area	Develop educational tools for sex workers and residents re: community programs and community safety issues including litter	Identification of police officers who need training to respond to people with trauma and mental health issues
Environmental scan on existing social enterprise and employment opportunities for women in sex work	Assess the need for enhanced operating hours for the VAN	Community education sessions re: sex work realities; community tools (311 number); current legislation in Canada	Bicycle police and social navigator more present in the neighbourhood
Enhance Sex Worker Engagement Project Team with more key stakeholders from across the spectrum	Needs Assessment for enhanced withdrawal management services	Tools for sex workers to assist in engagement with other residents and to connect to services	More active enforcement of property standards for neighbourhood landlords
		Trauma informed training for social service workers/ health care workers	
		Enhanced community support to increase operating hours at the drop-in and other programs and services at STARS (EFry)	
		Photovoice project with women in sex work to build conversation and compassion with residents	

MEDIUM TERM

PREVENTION	TREATMENT	HARM REDUCTION	ENFORCEMENT
Connect to existing youth serving agencies to build early intervention and diversion education programs	Funding for addiction services, housing, vocational	Satellite locations for STARS Drop-In and other programs and services	HPS explore other alternative models of enforcement like social navigators; Feasibility study of adding a liaison officer with a community policing station
Increased support of agencies providing counselling opportunities for youth who experience sexual abuse/violence	Advocacy for enhanced withdrawal management services for women	Advocate for increased supportive housing for women	More officers with expertise in responding to people with trauma, mental health and addiction issues
Engage Skills Development Flagship exploring skilled trades opportunities for women		Organize an anti-stigma campaign in the neighbourhood ("She is your sister...")	
Look at existing structures working with women in the trades and assess how they can work to create opportunities now		Create neighbourhood group of sex workers and neighbours to share, build relationships, generate opportunities for common understanding	

LONG TERM

PREVENTION	TREATMENT	HARM REDUCTION	ENFORCEMENT
Additional affordable housing stock for women	More beds for appropriate withdrawal and treatment models and alternatives	Indoor space for women to live and work with safety	
Adequate income – social assistance; living wage	Supportive permanent housing for women	Safe injection site	
Accessible and affordable child care			
Vocational/employment supports			

5.2 CONCLUSION

The community consultation process examining the reality of street level sex work in the Stadium Precinct gathered a variety of voices and opinions on the best way to address presenting issues. However, despite the variety there was great unity in the direction to move ahead in many areas.

One set of voices that needs to be heard from more are the women who have been or are currently engaged in sex work. Neighbours expressed a strong desire to build relationships with the women by finding ways to hear their stories in an atmosphere free of judgment.

The results of the consultation indicate a need for short, mid, and long range strategies to address each of the Four Pillars of prevention, treatment, harm reduction and enforcement.

The Sex Work Engagement Project Team will continue to ensure community conversations are taking place while working toward making these recommendations a reality.

6.0 APPENDICES

6.1 LITERATURE REVIEW

Four Pillars Drug Strategy

The Four Pillars Drug Strategy is a model that was first implemented in the 1990's through parts of Western Europe and Australia focusing on the following four areas:

Prevention
Treatment
Harm Reduction
Enforcement

It has been used successfully in cities around the world including Geneva, Zurich, Frankfurt, and Sydney.¹ Studies in these cities have shown a dramatic reduction of drug use at the street level, a significant drop in deaths from overdose, and reduction in infection rates of HIV/AIDs and hepatitis.²

Vancouver, British Columbia, has also successfully used this framework to assist in addressing the presence of sex work in neighbourhoods in which it is prevalent, such as the Downtown Eastside. The results have meant well established and resourced community and neighbourhood education and responses to this community reality.

Prevention

Prevention is the first area of the four pillars and is recognized as being fundamental in creating long-term, sustainable outcomes. According to the City of Vancouver's website, "prevention acknowledges that individuals usually make the best choices available to them, but that factors such as abuse, poverty, or a history of addiction in the family may constrain these choices".³ This approach recognizes that an abstinence-based approach creates "unrealistic goals and moralistic messages" that create barriers for individuals rather than help and educate.⁴ An important message of prevention is that it recognizes that, though drug use is not always harmful, it can in some cases lead to harm.

The parallel here is that while street level sex work is not always harmful, it is a high risk occupation and can result in harm.

According to the report, "Towards a Lower Mainland Crime and Drug Misuse Prevention Strategy", there are 6 elements that are essential for effective primary prevention:

- Realistic, achievable objectives
- Identification of who the programming is targeting
- Strong leadership
- Effective coordination among various agencies
- Expertise in evidence-based strategies
- Long-term commitment of funding and resources⁵

It is recommended by the Framework for Action that all of these elements are taken into account for each of the 4 pillars.

Prevention acknowledges the commitment and collaboration over a longer period of time and will have the greatest impact in reduction.

¹ <http://vancouver.ca/people-programs/four-pillars-drug-strategy.aspx>

² Ibid

³ <http://vancouver.ca/people-programs/four-pillars-drug-strategy.aspx>

⁴ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 31

⁵ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 35

Treatment

According to the framework for action, “treatment refers to a series of interventions and supports that enable individuals to deal with their addiction problems, make healthier decisions about their lives, and eventually resume their places in the community.”⁶ Treatments can include, but are not limited to, harm reduction programs, shelter and housing, post-treatment support, medical care, employment, alcohol and drug free housing, supportive housing, and life skills training.⁷ It is important that treatment opportunities are flexible and meet the needs of the clients.⁸

Recommended treatment interventions include:

Offering a range of options that recognize the multiple needs of an individual

Recognize that there are multiple pathways to treatment

Bridge the gaps in services for special groups which include women, youth, Aboriginals, people with HIV and/or hepatitis C, individuals with mental health, etc.⁹

One aspect that the treatment pillar focuses on is challenging “Not in My Backyard” (NIMBY) attitudes, where neighbourhoods do not wish to have any ‘problems’ in their area. The 4 Pillars Approach sees municipalities as having “a significant role in supporting their citizens and advocating services for both those who do not have substance misuse problems and those who do.”¹⁰ This approach bridges the gap between the individual and inclusion in the community.

Harm Reduction

One important part of harm reduction is the recognition that it does not condone activity, nor does it judge; the behaviour just is and there are risks that can be reduced through safer practices.¹¹ In turn, this provides two things: reduction of harm to the community, and reduction of harm to the individual.¹²

There are five guiding principles as outlined by the Federal/Provincial Harm Reduction Working Group, which are the following:

“First, do no harm

Respect the basic dignity of persons who use drugs

Maximize intervention options

Focus on the Harms caused by drug use, rather than drug use per se

Choose appropriate outcome goals”¹³

A harm reduction model looks at a number of ways to work within systems, and with communities and individuals. To begin, harm reduction needs to be made within a hierarchy of achievable goals rather than one big ultimate goal. With that said, harm reduction also recognizes that abstinence may not be “realistic or an achievable goal” for some.¹⁴

Much of the programming that is offered in harm reduction needs to focus on preventative programming, and basic needs to reduce the risk and harms in behaviour. This includes shelter, reduction of illness, death, or transmission of communicable diseases, and improved shelter and supportive housing.¹⁵ This not only protects the safety of the individuals, but the community at large.

⁶ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 40

⁷ Ibid

⁸ <http://vancouver.ca/people-programs/four-pillars-drug-strategy.aspx>

⁹ Vancouver Agreement Draft Comprehensive Substance Misuse Strategy, 2000. As cited in D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 42

¹⁰ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 48

¹¹ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 60

¹² Ibid

¹³ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 60-61

¹⁴ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 61

¹⁵ Ibid

Enforcement

Enforcement covers a large range of “activities carried out by regulatory agencies, licensing authorities, police, the courts, and other sectors within the criminal justice system.”¹⁶ The pillar of enforcement seeks to work collaboratively with the community, and key stakeholders, and different levels of government to improve the lives and conditions of those living in the affected neighbourhoods.

An underlying theme of the many suggestions of enforcement strategies includes community-based involvement in the charging/court proceedings of those who are convicted for drug trafficking. For example, one way that enforcement through the community can be provided is through the development of community courts. This creates immediate prosecution for minor offences which then diverts the arrested into community service, rather than imprisonment, where individuals are able to seek treatment, counseling, and other social supports.¹⁷

Enforcement needs to be creating new ways to improving the reduction of crime and a push towards innovative methods of policing and enforcement are necessary.¹⁸ Enforcement is most effective when used alongside prevention, treatment, and harm reduction.¹⁹

¹⁶ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P.52

¹⁷ D. MacPhearson. (April 24, 2001). A Framework for Action Revised. P. 53

¹⁸ Ibid

¹⁹ <http://vancouver.ca/people-programs/four-pillars-drug-strategy.aspx>

6.2 BEST PRACTICES

Ontario

Sex Trade Alternatives and Resource Services (STARS), Hamilton

STARS is a program that is run through the Elizabeth Fry Society in Hamilton, ON. Their mission statement reads, “The Elizabeth Fry Society Hamilton Branch is committed to providing services, primarily to criminalized women and those women at risk of being criminalized, as well as advocating social change and individual change to reduce the impact of that criminalization.”²⁰

STARS drop-in provides a safe place for women who are involved in sex work, or have been involved in sex work, to relax and find support through numerous services offered which includes the following:

Support

Harm reduction information

Computer services

Clothing

Telephone access

Legal support

Safer-sex supplies

Peer Outreach Training Program

Special events

Diversion

Peer Support

A healthy meal

Personal hygiene supplies²¹

Big Susie’s

Big Susie’s formed out of a 2009 local art show in Hamilton that was entitled “The Hood, The Bad, and The Ugly” which featured photographs taken by a local artist, Gary Santucci. These photographs showed female sex workers in Hamilton, without their consent, on display. This was problematic for multiple reasons. It “outed” the women and put them at risk for their safety. Big Susie’s felt the display “dehumanized, stigmatized, and blamed the women for destroying and making Santucci’s neighbourhood unavailable.”²²

From this, a group of activists, community members, and academics came to protest the event and wrote articles for local papers, soon discovering that there were very limited resources, support, and knowledge on sex work. It was decided that a working group would get together to address the gaps for sex workers and the public, and based their models of empowerment from already established sex worker rights organizations. Big Susie’s main focus is arranging and providing guest speakers to come out to different events to educate the public about sex workers.

Topics include the following:

Sex Trade 101: basic information about sex trade issues including an understanding of sex trade culture and issues affecting men, women and transgendered individuals.

Improving Service Delivery: how to provide an increased level of service to sex trade workers by identifying and reducing barriers

Sex Trade and the Law: understanding legal issues connected with sex trade work

Harm Reduction & Sex Trade: understanding harm reduction as it relates to sex trade.²³

²⁰ STARS Brochure, Elizabeth Fry Society Hamilton, from: <http://www.efryhamilton.org/programs.html>

²¹ <http://www.inform.hamilton.ca/record/HAM0568>

²² <http://www.bigsusies.com/>

²³ www.bigsusies.com

Big Susie's hopes to expand what they do including the following:
Supporting, educating, and informing sex workers with a focus on safety
To educate the public through sensitivity training and informing them about the realities sex workers face
To fight stigma and discrimination against sex workers
To promote the decriminalization of sex work
To refer sex workers to sex-positive services, provide informal counseling and peer support
To offer safer drug, HIV&STI, health, education and materials
To provide a safe space for sex workers and activities for them to interact, network, and socialize
To actively maintain and operate with an anti-racist, anti-oppression framework²⁴

Maggie's

Maggie's is a Toronto based organization that provides a place for current and former sex workers to meet and collect resources. Their mission statement reads, "*Maggie's mission is to provide education, advocacy, and support to assist sex workers to live and work with safety and dignity.*"²⁵ There is a drop-in lounge 2-5 pm on Wednesdays where individuals are provided with information on the following:

Laws

Tips/guide for new worker's safety

Male sex worker resource link

Sex workers who work with clients with disabilities resource link

Support and information for phone sex operators

Sex workers of colour &LGBT sex workers resource link

Drop-in lounge for discussion and support (tailored to each individual with no force to exiting)

Maggie's sees sex work as "not intrinsically dangerous, oppressive, or exploitative".²⁶ They understand that there are structural barriers and legal procedures that affect sex workers negatively and want to end these oppressive structures.

A statement on their website reads:

"The oppression of sex workers does not affect everyone the same way. Some face additional oppressions based on racism, colonialism, sexism, transphobia (trans-misogyny in particular), poverty, homophobia, because they have been to prison, use drugs or because they have disabilities. Often these sex workers face much higher rates of violence and discrimination. We centre the experiences of these sex workers who are the most directly impacted by violence and discrimination in our analysis, in building broader and stronger coalitions and in developing holistic solutions that address *all* the issues that affect sex workers' lives."²⁷

Sex Worker's Action Network Waterloo (SWAN)

SWAN's mission statement reads: "The Sex Workers Action Network of Waterloo Region (SWAN) is a non-partisan group consisting of concerned individuals, including those with lived experience, agencies and groups committed to assisting and supporting individuals working in sex work."²⁸

The vision of SWAN is that "Waterloo Region will be a community where sex workers will have a voice, be recognized as valuable members of society, and will have access to community resources that respectfully provide safety, support and choices that foster well-being."²⁹

SWAN began in 2007 with the local police hosting a community meeting, inviting various agencies who work with sex workers. Conversation was around how to support sex workers in area in the Waterloo region and a total of 3 meetings were held. After the meetings not making much progress, a terms of reference was created to guide the process and they became known as the Sex Trade Collaborative.³⁰

²⁴ Ibid

²⁵ <http://maggiestoronto.ca/>

²⁶ Ibid

²⁷ Ibid

²⁸ C. Middleton (personal communication, October 18, 2012)

²⁹ Ibid

³⁰ Ibid

The first official meeting was held in 2007. In addition to creating terms of reference, they began to define their area of focus which included:

- Holding annual symposiums
- How to best support sex workers

SWAN has 5 key principals that guide their participation:

- Acknowledging fundamental systemic issues
- Inclusivity
- Confidentiality
- Safety
- Street involved sex work

The main concern they have experienced with neighbourhood concerns are a “NIMBY” (not in my backyard) approach. Some of these concerns have been addressed through education by developing relationships with residents in the area and redirecting them to proper services rather than relying on police enforcement.³¹

SWAN recognizes the importance of having police sitting on their collaborative. In addition to the police, members at the table include public health, the AIDS committee, Sanguen, Sexual Assault Support Centre, CMHA, and Street Outreach.

Prostitutes of Ottawa/Gatineau Work, Educate and Resist (POWER)

Mission statement:

“**POWER** is a non-profit, voluntary organization founded on February 17th, 2008. Membership is open to individuals of all genders who self-identify as former or current sex workers, regardless of the industry sector in which they work(ed) (i.e. dancers, street level workers, in and out call workers, phone sex, etc.) and to allies who share our vision. We envision a society in which sex workers are able to practice their professions free of legal and social discrimination, victimization, harassment and violence and in which sex work is valued as legitimate and fulfilling work making an important contribution to society.”³²

Power has created multiple reports on sex work rights and issues in Ottawa-Gatineau, and Canada. Their main areas of action include advocacy through community engagement and involvement, and educational workshops for the community.

Sexual Assault Centre of Brant

The Sexual Assault Centre of Brant has completed a series of articles on dispelling myths on sex work which includes some reasons why women engage in street-level sex work, why they support decriminalization of sex workers, and think that a more effective approach would be to focus on the “demand” for service i.e. johns. Additionally, they sit on a committee, Sex Trade Resource Empowerment and Education Team (STREET).

³¹ Ibid

³² <http://www.powerottawa.ca/home.html>

Sex Trade Resource Empowerment and Education Team (STREET)

STREET is a committee that is based out of the Brant, Haldimand & Norfolk counties. They meet on a monthly basis and provide educational presentations to community organizations where the focus is on making local services more inclusive and accessible to formal and informal sex workers.³³ This includes:

- Current laws
- Client preferred language
- Safety issues for sex workers
- Available resources³⁴

In addition to providing these community education services, STREET assists sex workers in their community surrounding information on safety, laws and legal rights, and knowledge on community resources.³⁵

STREET is a collaboration of the following organizations:

- Aboriginal Health Centre – Brantford
- Haldimand & Norfolk Women's Services – Simcoe
- Grand River Community Health Centre – Brantford
- Sexual Assault/Domestic Violence Program – Brantford General
- Sexual Assault Centre of Brant
- St. Leonard's Community Services – Brantford
- Why Not City Missions – Brantford
- Health Unit – Haldimand and Norfolk
- Expressive Arts Therapy – Normandale³⁶

Sex Workers Action Group (SWAG)

Based out of Kingston ON, SWAG's mission statement reads, "Sex Workers Action Group Kingston (SWAG Kingston) is a sex positive group run by sex workers, people with lived experience, allies, and agency members who strive to improve the lives of sex workers in Kingston and surrounding area."³⁷ At SWAG, they provide practical, emotional, community, and legal support to sex workers as well as public education, advocacy work towards decriminalization and stigmatization of sex work.

The values and beliefs of SWAG are:

"Sex work can be consensual, legitimate, valuable, honourable, important, and real work, but SWAG Kingston also recognizes that this is not the case for all sex exchanges.

Sex workers are the experts of the industry and their own lives, and must be actively and meaningfully included in all areas of services and policy development.

Sex workers deserve the same legal, human, and labour rights as any other persons in Canada including, but not limited to adequate standards of living and the provision of social and health services.

Sex workers need to be able to access public services without discrimination or judgment

The decriminalization of sex work is imperative to the health, safety, and well-being of sex workers."³⁸

SWAG provides health information and services such as STI testing, doctor referrals, complimentary health services, bad date listing, distribution of harm reduction materials, counseling and support, and legal information and advocacy.³⁹ Drop in times are Thursdays from 1:30pm-3:30pm.

³³ <http://haldimand.cioc.ca/record/SIM2590>

³⁴ Ibid

³⁵ Ibid

³⁶ <http://haldimand.cioc.ca/record/SIM2590>

³⁷ <http://swagkingston.com/>

³⁸ Ibid

³⁹ Ibid

British Columbia

PACE Vancouver

PACE offers programs and support that are committed to providing sex worker-led and driven programs and services.⁴⁰ The PACE mission states: “PACE is a sex worker led and driven organization offering low-barrier programming, support and advocacy for survival sex workers in Vancouver, British Columbia, Canada.”⁴¹

They provide different programs that include BELLE, a violence prevention program, and public education workshops.

BELLE - The Beautiful Experiential Life Links to Empowerment Program uses asset mapping to determine individual goals which they wish to accomplish of the course of the project by utilizing people’s self-determined strengths, transferable skills, and positive self-awareness to increase esteem and efficacy. This information is taken into one-on-one sessions and then creates manageable goals for themselves.⁴²

Violence Prevention

Teaching and training around violence with survival sex workers (management, conflict resolution, education, harm reduction/safety, etc.)⁴³

Public Education

Done by individuals with experience in sex work

Discuss impacts of survival sex work, including criminalization, poverty and housing issues, addiction and the legacy of colonialism⁴⁴

Four areas of public education for community groups, organizations, service clubs:

Sensitivity training

Outreach training

Sexual assault training

Self-care & vicarious trauma for helping professions safety training for those who work in high risk environments⁴⁵

⁴⁰ <http://www.pace-society.org/>

⁴¹ Ibid

⁴² Ibid

⁴³ Ibid

⁴⁴ Ibid

⁴⁵ Ibid

WISH Drop-In Vancouver

WISH Drop-in is located in Vancouver and their mission states: "To increase the health, safety and well-being of women who work in the survival sex trade."⁴⁶ WISH's vision is "that each woman has access to the opportunity to make her own choices affecting her health, safety and well-being."⁴⁷

The organization is run and operated by women survival sex workers. They provide drop-in services, basic needs (food, showers, hygiene products, clothing, etc.). Additionally, they provide on-site nursing, referrals to detox centers, rehabilitation houses, and shelter for up to 120 women.⁴⁸

WISH Drop-in is founded upon four core values of:

Acceptance
Caring
Dignity
Respect

WISH provides different programs and services which include the following:

Literacy program
Bad Date Reporting
A wellness center
Aboriginal culture and creativity program
AESHA program (**An-Evaluation-of-Sex-Workers-Health-Access**)

The research demonstrates the social and structural barriers to accessing care and negotiating HIV prevention and safety from violence among women working in street-based sex work in Vancouver⁴⁹
Safety nights

Once a month just prior to the issues of social assistance cheques, a group of WISH participants from the Aboriginal Culture and Creativity program assemble care packages and take to the street armed with "bad date" sheets, care packages, harm reduction supplies, coffee and 'warm smiles.'⁵⁰

Peer safety support

It fulfills two commitments – one to our neighbours and one to the women who come to WISH. For our neighbours, the Safety Patrol keeps the areas adjacent to our center clear from debris and any street activity related to the center. For women who come to WISH, it not only maintains a safe and clean route for women accessing the center, but offer opportunity for training and employment in a supported environment.⁵¹

As of right now, the hours have been extended to midnight and they would eventually like to have the center open 24/7.

PEERS

PEERS is based out of Victoria BC, and "is a non-profit society established by former sex workers and community supporters and is dedicated to the empowerment, education and support of sex workers, by working to improve their safety and working conditions, assisting those who desire to leave the sex industry, increasing public understanding and awareness of these issues, and promoting the experiential voice."⁵²

⁴⁶ <http://wish-vancouver.net/>

⁴⁷ Ibid

⁴⁸ Ibid

⁴⁹ Ibid

⁵⁰ Ibid

⁵¹ <http://wish-vancouver.net/>

⁵² <http://peers.bc.ca/>

The programs that are created for PEERS are by current and former sex workers and allies of sex workers who hold the core values of this organization. The programs that PEERS currently provides are the following:

Assistance with affordable housing

In-house access to a female doctor

Support in getting to important appointments

PEERS Street Outreach Program:

Outreach done in an RV

Provides harm reduction materials, warm drinks, bad date reporting, referrals, and a place to talk

Elements Life Skills & Trauma Response Program:

Six month program

Incentive of \$5.00 gift cards, 2 bus tickets, and a hot meal for every day attended

The following programs are a part of the “Elements Life Skills & Trauma Response Program”:

“Think Straight: Examines thought processes, their origins, validity/usefulness, and provides participants with the skills and tools to change ineffective thinking and related behaviours. The curriculum includes the following topics: recognizing barriers to potential, communication, planning, motivation, relationships, and understanding the self.”⁵³

“Dare to Dream—Employability and Computer Skills: Includes an examination of the employability issues related to exiting sex work; provides skills and tools for a smoother transition, and includes topics such as self-esteem, intimacy, isolation, independence, budgeting, transferable skills, resume writing, and interview skills.”⁵⁴

“Understanding Abuse—Taking our Power Back: A group focused on recognizing abuse, violence and trauma, and their connection to addictions; provides participants with skills and tools for staying safe when trauma responses are triggered. Based on the “Seeking Safety Manual,” by Lisa Najivits.”⁵⁵

“Employability and Computer Skills Groups: Includes an examination of the employability issues related to exiting sex work; provides skills and tools for a smoother transition, and includes a mentorship component.”⁵⁶

“One to one individualized support: Individualized service planning to best meet participants particular set of needs and barriers.”⁵⁷

“Beauty Day on Friday”⁵⁸

Nanaimo Women’s Resource Society

Nanaimo Women’s Resource Society is a “is an agency committed to respectful and inclusive participation regardless of age, ethnicity, socio-economic background, religion and sexual orientation” that is based out of Nanaimo, British Columbia.⁵⁹ Their vision states: “To provide a safe and inclusive environment for marginalized women whose lives are impacted due to involvement with prostitution.”⁶⁰

Nanaimo provides multiple services, with “Stepping Out” being exclusively for street-level sex workers. They use a harm reduction model for individuals, families, and communities to promote safety and health.⁶¹ Nanaimo looks through a lens of poverty, class, racism, social isolation, past trauma, gender-

⁵³ Ibid

⁵⁴ Ibid

⁵⁵ Ibid

⁵⁶ <http://peers.bc.ca/>

⁵⁷ Ibid

⁵⁸ Ibid

⁵⁹ <http://nanaimowomen.com>

⁶⁰ Ibid

⁶¹ Ibid

based discrimination and other social inequalities that women experience that may have coerced their decision-making process of entering street-level sex work.⁶²

The drop-in services are provided every Monday at the centre from 1-3 pm. They, the women are able to get support, information, basic needs, and any advocacy that they may need.⁶³

Safe in Collingwood

Safe is located in Collingwood, BC, and it's goal is to "The long term goal of SAFE is the development of a sustainable neighbourhood structure that engages community members in planning, development, coordination, and delivery of services in relation to the issues of sex work and sexual exploitation."⁶⁴

SAFE has the following priority goals:

Address the health and safety concerns related to sex work experienced by residents, visitors, and businesses.

Improve the health and safety of sex workers.

Improve healthy lifestyle decision-making of children and youth and their parents.

Reduce sexual exploitation of youth.⁶⁵

Safe has the following guiding principles

Embrace diversity and respect all people

Enable participation of all people

Learn and commit to self-growth as paths to change

Stand against exploitation and social injustice

Create understanding and build community

Be open to listening and understanding different perspectives⁶⁶

Safe's services that they provide are the following:

Kitchen Table Discussions

"A kitchen table discussion takes place when a small collection of people gets together to talk, listen and share ideas on subjects of mutual interest. The environment should be comfortable and have a feeling of informality. Because they are in an informal setting, participants tend to be more willing to discuss issues and listen to and consider different perspectives."⁶⁷

"SAFE coordinates "kitchen table discussions" in order to build a sense of community and shared understanding, and to provide a venue for generating dialogue and engagement with health and safety issues related to sex work. These dialogues are facilitated by trained volunteers and are supported by the presence of ex-sex workers who provide insights into any questions that come up. SAFE has also trained and supported community members to host kitchen table discussion with their peer groups."⁶⁸

Public Education

Public education is provided to both sex workers and the community. For sex workers, information on services and their legal rights are the main focus. For the community responses to sex work, SAFE provides sensitivity training to the residents.

Inclusivity

The main priority under inclusivity is that sex workers are able to access the services that everyone in the community can. Information, through a pamphlet, is given to businesses, community members, and parents which provides practical and useful information that addresses any concerns and preconceived notions people have about sex work.

⁶² Ibid

⁶³ Ibid

⁶⁴ <http://safeincollingwood.ca/>

⁶⁵ <http://safeincollingwood.ca/>

⁶⁶ Ibid

⁶⁷ Ibid

⁶⁸ Ibid

SAFEyouth: Prevention of Sexual Exploitation

This committee promotes awareness towards sexual child and youth exploitation. Their current main project is working towards an urban arts project, focusing on “healthy relationships, positive self-esteem and community involvement as important tools that help prevent sexual exploitation.”⁶⁹

Outreach to Sex Workers

The outreach teams provide confidential support, health and safety kits, and resource information to sex workers. SAFE meets their workers at their level to ensure a strong, supportive relationship with sex workers voices being respected and listened to.⁷⁰ They hope that through these relationships, “sex workers’ health, safety, and community relationships are improved”.⁷¹

Quebec

Stella

Stella was founded in 1995, in Montréal, by sex workers, public-health researchers, and allies and has since grown to have 12 full-time staff members.⁷² They are actively involved with committees, coalitions, research groups, and Board of Directors. They have a strong media presence, often speaking publicly at conferences and have been invited by artists to participate in projects, such as play performances. They are also actively involved in the lobbying for decriminalization of sex work.

Stella’s objectives are the following:

- “To provide support and information to sex-workers so that they may live in safety and with dignity
- To sensitize and educate the public about sex work and the realities faced by sex workers
- To fight discrimination against sex workers
- To promote the decriminalization of sex work”⁷³

In addition to public and community events, Stella provides a drop-in center for sex workers, bad trick and assaulter lists, a floating legal clinic, a bi-annual magazine written by sex workers, and a medical clinic.⁷⁴

⁶⁹ <http://safeincollingwood.ca>

⁷⁰ Ibid

⁷¹ Ibid

⁷² <http://www.chezstella.org/stella/?q=en/>

⁷³ Ibid

⁷⁴ Ibid

Nova Scotia

Stepping Stone Nova Scotia (SSNS)

Based in Nova Scotia since 1987, SSNS works specifically with street-based sex workers from a harm reduction model. SSNS provides a drop-in center in a non-residential housing, staffed with many former sex workers. SSNS works with male, female, and transgendered sex workers.

SSNS takes that stance that “survival sex environment is one that minimizes or eliminates a workers right to refuse work and otherwise imposes emotional, financial or psychological pressure forcing the surrender of will. Survival sex workers have less control over their working conditions due to issues such as poverty and criminalization.”⁷⁵

Four areas of SSNS’ work:

“We support choice”: They believe in the client’s right to self-determination and do not enforce exit strategies but rather support the individual in whatever capacity they can to make safe and positive life choices.⁷⁶

“We protect”: sees SSNS as a “safe-haven” for those who are on the street. They not only provide hot showers and snacks but have community partners coming in like nurses, mental health workers, and Avalon representatives (sexual assault center based in NS). They provide one-on- one peer counseling; workshops on health and legal issues; recreational and personal growth activities; and computer access and educational opportunities. The house is also a community and a home.⁷⁷

“We advocate”: SSNS is actively involved by court support, housing support (to locate and maintain stable and adequate housing), building community relations, and through a harm reduction model.⁷⁸

“We reach out”: Four nights a week the Street Outreach Program connects with clients on the street and in private housing. The workers go to where their clients are to ensure their needs are met to provide them safety. They provide condoms, food and drinks, Bad Trick Lists, crisis intervention, and referrals to in-house staff for further aid. Workers forge “friendly and trusted relationships” with the workers.⁷⁹

⁷⁵ <http://www.steppingstonens.ca/>

⁷⁶ Ibid

⁷⁷ Ibid

⁷⁸ Ibid

⁷⁹ Ibid

National

FIRST

FIRST is a coalition of feminists who support, and are actively involved in, the decriminalization of sex work in Canada. They conceptualize that the criminalization of sex work is a human rights violation and believe that, in order to be an equal and just society, we must do the following:

Live and work in conditions that are free from hate, violence and exploitation;

Have their dignity, autonomy and liberty respected, including the right to engage in consensual sex with other adults without being criminalized; and

Be treated as equal members of society, have equal protection and benefit of the law and not be subject to stigma, discrimination and social alienation.⁸⁰

They view sex work's stigmatization and oppression stemming from issues of gender, race, poverty, sexuality, ability and age. Additionally, they make special mention to the colonization and oppression of Aboriginals in Canada and how history has failed to give them the right to Indigenous self-determination.⁸¹

"FIRST holds that Canada's continuing failure to decriminalize sex work means the federal government implicitly sanctions violence against sex industry workers. We believe that sex industry workers will never truly gain equality, freedom and dignity until the illegal and stigmatized status of their work is addressed. Decriminalization is an essential step: the time for legislative change is now."⁸²

Sex Professionals of Canada (SPOC)

The SPOC is an organization that believes that all forms of adult, consensual sex work is legitimate and that the choice to be in sex work is valid like any other profession.⁸³ They stand against the "rescuing" of sex workers through force and coercion. The SPOC is not a social service agency, but rather a volunteer run social and political group. Additionally, they will provide public talks to communities and organizations.

The SPOC has three main goals:

We stand for the decriminalization of all forms of sex work in Canada. We oppose legalization because it is always exploitive toward sex workers.

Decrease the isolation experienced by many sex workers by organizing sex worker-friendly social events and functions.

Publishing a bad date list so that our colleagues can communicate information about violent and dangerous clients with each other.⁸⁴

Currently, they involved with The Supreme Court of Canada who will be hearing their appeals to their legal challenge for the decriminalization of sex work in Canada. In addition to legal advocacy, the SPOC provides a bad date list on their website.

⁸⁰ <http://www.firstadvocates.org/>

⁸¹ Ibid

⁸² Ibid

⁸³ <http://www.spoc.ca/>

⁸⁴ Ibid

6.3 GLOSSARY OF TERMS

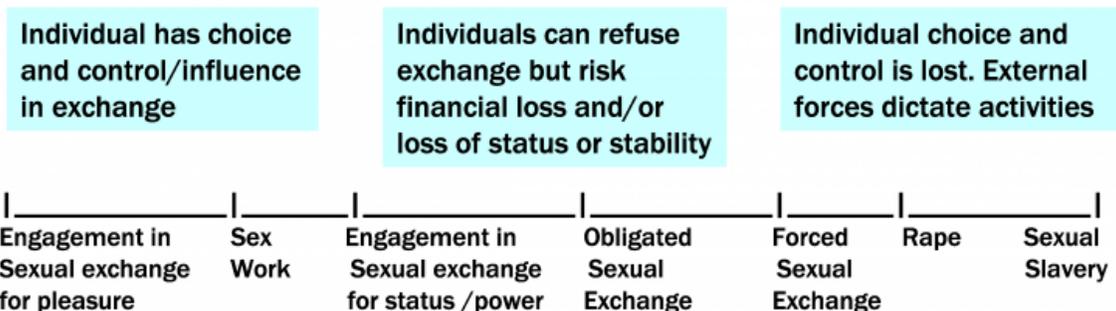
Sex Work: Sex work includes a wide variety of sexual acts in the sex industry, from one person to another, in exchange for money, food, clothing, shelter, housing, gifts, clothes, rides, drugs, immigration or documentation, or other favours. This includes both legal, and illegal sexual activities.

Sex Worker: A sex worker is someone who works in the sex industry which can include engagement in sexually explicit behaviour (prostitution, escorts, professional dominants), pornography models and actors, phone sex workers, live sexual performers (strip teasing, go-go dancing, burlesque performers, peep shows performers). This term is preferred to ‘prostitute’ as it humanizes the individual and sees them as more than what is implied; a “criminal” (as prostitution is a word used in the Criminal Code of Canada).

Continuum of Sexual Exchange: This is a model created by the BC Coalition of Experiential Communities that shows varying scale of sex work when it comes to choice and empowerment. (www.livingincommunity.ca and <http://bccec.wordpress.com>)

Continuum of Sexual Exchange

The BCCEC has developed the Continuum of Sexual Exchange to illustrate the scope of sexual exchange and where choice falls in relation.



Source: British Columbia Coalition of Experiential Communities (BCCEC) 2009

Survival Sex Worker: Recognizing that some sex workers enter the industry by choice, others influenced through external factors which may make them feel that they have no other alternatives including coercion (pimps, friends, family, acquaintances), force, poverty, economic duress, lack of choice, drugs and alcohol, history of child welfare, isolation and enticement. Some individuals enter as a result of being a runaway or a sexually exploited as a young person. Self-determination is subsequently lost. (www.livingincommunity.ca)

Prostitution: Prostitution is one of the branches of the sex industry where one provides sexual services for another individual for payment. The term prostitute is used in legislation which has connotations with criminal activity with the preferred term being “sex worker”.

Migrant Sex Worker: A worker who enters Canada, for whatever reason, with or without assistance, who engages in the sex industry at any point in time while in Canada (<http://www.uknswp.org>). Additionally,

this can be referred to individuals who are Canadian-born, who go province-to-province working in the sex industry.

Sex Trafficking: Trafficking in persons refers to “the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation.” (www.resources.tampep.eu)

Male Sex Workers: Are also known as “male escorts”, “gigolos”, “rent boys”, and “hustlers”.

Rent Boys: This term is believed to be derived from boys that were renting themselves out, or using their earnings to pay for their rent. A man who does not identify as gay but is willing to have sex with male clients for money is sometimes known as “gay for pay” or “rough trade”. Male sex workers who offer themselves to female clients can be known as “gigolos.” (www.bigsusies.com)

Johns: This is a term used for clients, especially those who pick up sex workers on the street or in bars.

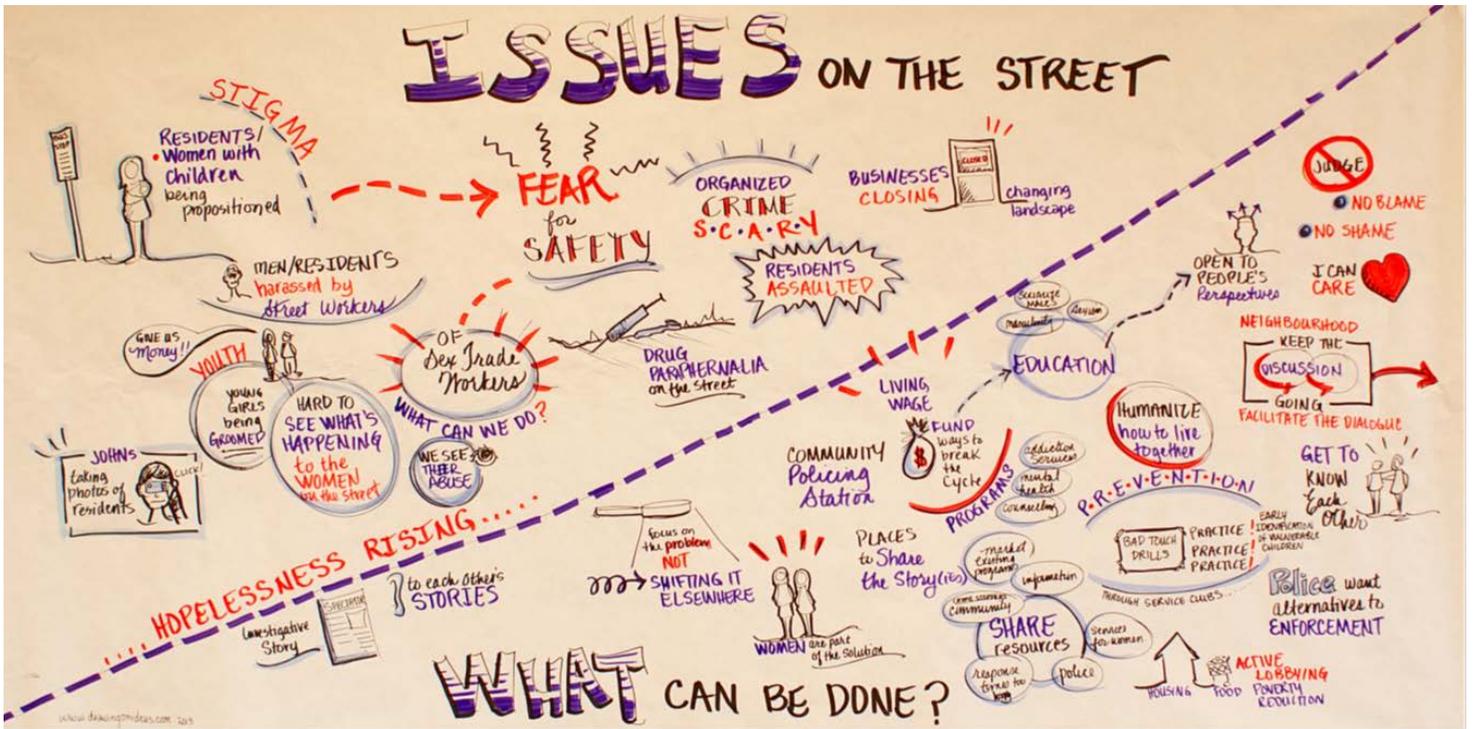
Sex-Positive: Sex-Positive is a position about sex work that affirms sex can be a positive force both personally in a society. It believes that consensual expression is a basic human right no matter what form it takes. It believes that people have the right to access accurate and straightforward information about sexual health. Sex-Positive takes the stance that it is not appropriate to place judgment on the consensual choice on how to have sex, who to have sex with, and how one defines their sexual orientation and identity. It believes that there is an equally important emphasis that needs to be made on positive aspects of sexuality, like pleasure, and not just disease prevention, prevention of sexual assault, and unwanted pregnancy. Lastly, Sex-Positive believes that sexuality is largely socially constructed and that there are few truths, if any, about sex. (www.bigsusies.com)

Harm Reduction: Public health policy wherein agencies and communities take steps to ensure that safety is paramount by reducing risk to the individual who may be involved in high risk activities (ex. Drug use, sex work).

Ugly Trick/Bad Date List: This is a list of clients of sex workers who have been violent, difficult, withheld money, refused a condom, or have harassed the worker in any way (or all of the things mentioned). Sex workers will describe the client, incident, and any other identifying information such as vehicle and license plate, location that the incident took place, or phone number of the client. Ugly trick/bad date lists are a way that sex workers can communicate with one another, from a harm reduction model, to ensure safety and caution when working.

6.4 GRAPHIC RECORDING OF COMMUNITY SESSION ONE

What are the safety issues you experience on the street in this neighbourhood? What can be done?



6.5 GRAPHIC RECORDING OF COMMUNITY SESSION TWO – QUESTION 1

What are the safety issues you experience on the street in this neighbourhood? What can be done?



6.6 GRAPHIC RECORDING OF COMMUNITY SESSION TWO – QUESTION 2

What can the neighbourhood do to address the safety issues on the street? What can I do? What can the city do?

