

Accessible Findings Report: the experiences of people who sell or exchange sex and their interaction with support services

Background

LKJ research was commissioned by the Scottish Government's Violence Against Women and Girls Justice Unit, on behalf of the Scottish Ministers, to conduct lived experience research with people who sell or exchange sex, with a focus on support service provision. The research took place from December 2021 to May 2022.

The specific aims of the research were:

- To map the current provision of services in Scotland for people who sell sex or exchange sex, and to identify any gaps in provision.**
- To understand how people who sell or exchange sex experience engaging with mainstream and specialist support services in Scotland including identifying barriers to access**
- To gather views from those with lived experience on future service design.**

Data Collection

The research consisted of two parts: a mapping survey and lived experience engagement. The mapping survey was completed using two surveys, one for professionals with suitable oversight at a local authority level, and one for completion by representatives of specialist services. The survey questions involved identifying specialist services, information about the specific support they provide including routes in and eligibility. Views were also sought on the levels of expertise in mainstream services in each area, including providing a rating of perceived expertise and brief discussion of positive practices or challenges.

Of the 32 local authority areas in Scotland, representatives from 31 completed the initial mapping survey. From this, 17 specialist services were identified.

The lived experience engagements were conducted through individual online interviews, or through a facilitated survey conducted at a support service. Both the survey and the interview included three sections of open-ended questions focussed around accessing services, experiences and impact, and future service design. All participants also answered some closed questions around service access.

71 participants took part in the lived experience engagement, 62 through facilitated surveys and 9 through interviews. The participants were from across Scotland and included women (n=65) men (n=3) and non-binary individuals (n=3).

Mapping Survey: Findings

The mapping of specialist services revealed substantial gaps in provision of in-person support for people who sell or exchange sex. Whilst some remote support, or assistance with relocation was available, this was only available for those who met strict eligibility criteria; including women who have been trafficked, and those who have already exited from involvement in selling or exchanging sex. In many areas, individuals seeking support around selling or exchanging sex would need to rely on mainstream service provision, or to travel to a service at their own expense.

Professional participants in the mapping survey also provided ratings of the expertise in mainstream services around the needs of people who sell or exchange sex, in their area. The majority of areas were rated as having a basic understanding (n=24), with smaller numbers rated very good (n=4), or poor (n=3). Discussion around this revealed the key practices the professional respondents rated as helpful for improving understanding were joined up and partnership working, clear position statements and the availability of training. Identified challenges were inconsistent responses, a lack of joined up and partnership working, stigmatised views, lack of training options and 'it doesn't happen here' attitudes.

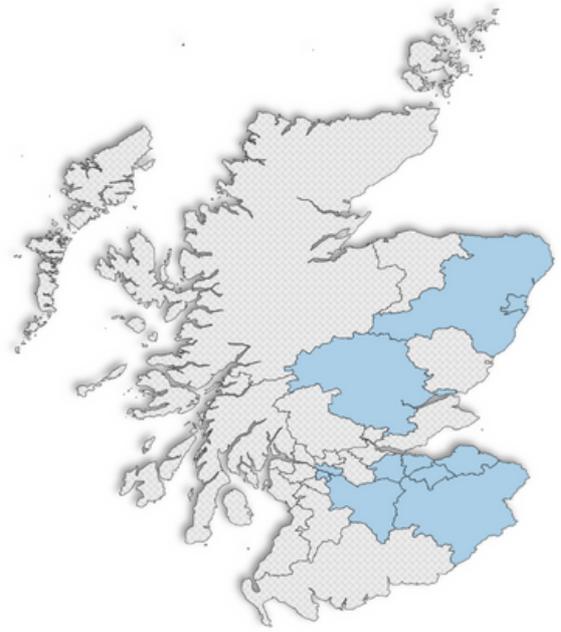
Participants with lived experience also contributed to the mapping survey through sharing the range of mainstream services they had been engaged with (e.g. addiction services or housing). All participants had accessed at least one type of mainstream service, with support being sought for an average of 7 different needs. This finding lends support to the calls for improved joined-up and partnership working, to ensure support is co-ordinated, consistent, and not overwhelming.

Participants were also asked to share whether they had chosen to disclose their involvement in selling or exchanging sex to the services they had engaged with. Out of the 71 participants, the majority had accessed at least some services who did not know they were involved (n=64). Reasons for not disclosing included:

- Services not asking
- Fear of Judgement
- Lack of trust
- No tangible benefits to disclosure
- Concerns about the impact on other service provision

These findings are of particular interest when viewed alongside the finding that mainstream services in some areas do not believe that people who sell or exchange sex access services in their area. This disconnect suggests that scoping studies may be beneficial to gain an accurate picture of where people selling or exchanging sex are accessing services. This would ensure services are equipped to provide both responsive and proactive support as appropriate.

In relation to accessing services, the participants with lived experience valued being able to use a range of remote methods including telephone support, video calling, text messages and instant messaging, however face to face contact remained vital for a large number of participants who did not have access to technology, or did not feel comfortable engaging this way. Referrals from other services, proactive outreach, provision of drop-in support and the option of self-referral were all utilised regularly as routes into services.



The local authority areas covered by identified specialist services (excluding remote support)

Lived Experience: Findings

Participants shared that when it was successful, support had the potential to be life changing. Important elements for impactful support included a clear service offer with tangible benefits including a combination of practical and emotional support. Before they were able to engage with services, participants often reported not knowing what services were available, where to find them, or whether they were eligible for support (based on sex, gender, and also the type of involvement they had in selling or exchanging sex)

Once a service was identified, the main facilitators of engagement were individual worker approaches. Particularly important were the worker being knowledgeable, consistent, non-judgemental, working in a person-led way and ensuring those engaged with the service feel they are 'treated like a human'.

One participant spoke about her worker in a way that illustrated the positive practice identified. She said:

'She has always made me feel comfortable and since day one I knew I'd made the right choice reaching out to [service] for support because we clicked right away and there was no judgment or pitying me, we just got on with it...I can speak to my worker about anything because I know she will just take it as it is and come up with a plan. She gives me a kick up the arse when I need it and I know she is always just a text or phone call away and she will get back to me. I've never had to chase her up or felt like a burden for getting in touch in the first place.' [Survey 29]

Barriers related to individual workers were feeling they were not knowledgeable, not feeling heard, and being judged. Participants additionally cited difficulties trusting services, sometimes based on past negative experience. For some, their concerns were particularly strong around the impact of accessing specialist support around selling or exchanging sex on their other support such as benefits, or eligibility for supported housing. One participant gave an example:

'When you're staying in homeless hostels and stuff, these specific supported accommodations, if you have any sort of income, the rent you have to pay is extortionately high and nobody could afford it. And then, you'd be on the streets homeless, which nobody wanted to be. So, you can't talk to the support staff there or anyone.' [Interview 6]

Additionally, there were a number of identified practical barriers to accessing and successfully remaining engaged with support services. These included the need for services to be open at evenings or weekends, waiting lists, difficulties getting appointments and services not being easily accessible by public transport.

A number of participants further reported that peers or others in their lives had a negative impact on service engagement. This included the impact of individuals who may either be accessing the services, who the participants did not want to see, and the barriers presented by partners and coercive others exerting control over their movements.

Conclusions

Research Aim 1: To map the current provision of services in Scotland for people who sell sex, and to identify any gaps in provision.

The mapping survey identified significant gaps geographically in provision. Whilst these areas are covered by the availability of limited online support, limited eligibility criteria prohibit access for many. Participant experiences identified that it is essential that in-person support is also made available in order to improve access for all. Ensuring good practice in partnership working, and improved consistency through the increased availability of uptake and training for those in mainstream services were indicated as practical steps to improve support provision.

Research Aim 2: To understand how people who sell sex or exchange experience engaging with mainstream and specialist support services in Scotland including identifying barriers to access.

Across all of the barriers and challenges shared in the research, there was existing evidence of good practice and reported instances where the same engagement had been achieved successfully, leaving the participant feeling supported and able to achieve positive outcomes. The strong conclusion to be drawn from this is that good practice already exists and is happening across Scotland. The main challenge therefore is not in creating a new style of good practice, but rather addressing the lack of consistency in understanding and response to people selling and exchanging sex, the lack of clarity and certainty around legality, and challenging commonly expressed stigmatised and judgemental views. Central to any service design is ensuring that it is well advertised, clearly outlines what support it will and will not provide, and that it is individually tailored to meet the needs of the person seeking support. Flexibility in approach is central, both in anticipating that some people may disengage and re-engage with support multiple times before they are able to engage reliably, and in understanding that the range of experiences of selling or exchanging sex is substantial, and support needs will vary significantly within this.

Research Aim 3: To gather views from those with lived and living experience on future service design.

A core element in designing future services must be consideration of partnership and joined up working. All the evidence points to the value in clear referral routes and assistance with disclosure. Benefits of this coordinated approach include streamlined access to the multiple services individuals may require, and ensuring they do not have to keep revisiting trauma experiences in repeating their stories. Relationships with individuals within services are important, and adequate funding to allow consistency of provision is vital to any service success. Areas particularly highlighted for improvements are support with addictions, mental and physical health, and housing, as well as a system of benefits which fosters a sense of stability and security.