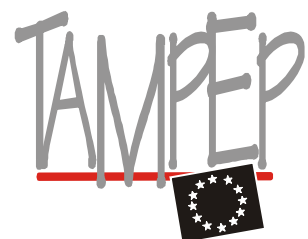
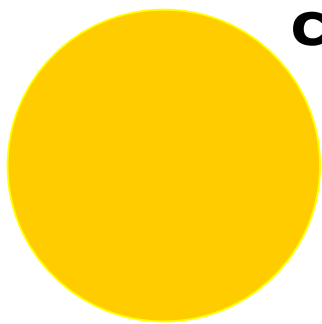


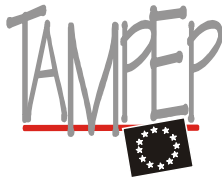
Sex work ● in Europe

**A mapping of the
prostitution scene
in 25 European
countries**



SEX WORK IN EUROPE

A mapping of the prostitution scene in 25 European countries



European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers

Main coordinator: Licia Brussa

TAMPEP international Foundation
Obiplein 4
1094 RB Amsterdam, Netherlands
Tel: +31 20 692 6912
Fax: +31 20 608 0083
tampep@xs4all.nl
www.tampep.eu

This Report is based on contributions from all 26 member organization of the TAMPEP network.

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This Report is part of a series of resources produced by the TAMPEP 8 programme:

Sex Work, Migration, Health | a report on the intersections of legislations and policies regarding sex work, migration and health in Europe

Work Safe in Sex Work | A European manual on good practices in the work with and for sex workers

www.services4sexworkers.eu | an on-line directory of services for sex workers across Europe

All of the above resources are available from the members of the TAMPEP network and at www.tampep.eu

| | |
|-------------------------|---|
| Editor | Licia Brussa TAMPEP International Foundation TAMPEP-Netherlands |
| National Reports | The 25 TAMPEP National Coordinators |
| Text correction | Nine SCOT-PEP TAMPEP-UK |
| Copy editing | Erika Doucette, Petra Timmermans TAMPEP International Foundation TAMPEP-Netherlands |
| Layout | Veronica Munk Amnesty for Women TAMPEP-Germany |



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Introduction

TAMPEP | **European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers** | was founded in 1993 in response to the needs of migrant¹ sex workers in Europe.² It operates a community development and participation model that is rooted within a human rights framework, and seeks to lay a foundation for equitable access to support and services for sex workers.

TAMPEP is an international networking and intervention project focused on assessing the circumstances and needs of female and transgender migrant and national sex workers in Europe and on developing appropriate responses to reduce sex workers' vulnerability to HIV and sexually transmitted infections.

TAMPEP is based on three interdependent pillars:

- RESEARCH** To analyse the living and working conditions of sex workers across Europe.
- INTERVENTION** To develop and implement strategies of HIV/STI prevention among sex workers in order to reduce HIV vulnerability of migrant and mobile sex workers.
- ADVOCACY** To promote sex workers' human rights on local, national and European levels.

This European Mapping Report is one of the products of the TAMPEP 8 project.³

Sixteen years' experience of working with sex workers across Europe and the development of a network of sex work projects currently covering 25 countries in Europe have resulted in TAMPEP establishing an extensive experience and knowledge base. Regular mapping of sex work in Europe has enabled the monitoring and reporting of changing trends within the sex industry and the living and working conditions of sex workers.

¹ Within this context, we define migrants as those not born in the country in which they have come to live and work, including people from EU countries.

² Unless otherwise explicitly stated, all references to Europe refer to the following 25 countries: Austria (AT), Belgium (BE), Bulgaria (BG), Czech Republic (CZ), Denmark (DK), Greece (GR), Estonia (EE), Finland (FI), France (FR), Germany (DE), Hungary (HU), Italy (IT), Lithuania (LT), Latvia (LV), Luxembourg (LU), the Netherlands (NL), Norway (NO), Poland (PL), Portugal (PT), Romania (RO), Slovakia (SK), Slovenia (SI), Spain (ES), Switzerland (CH) and the United Kingdom (UK).

³ For more detailed description of all the components that make up TAMPEP 8, please refer to Appendix 1.

TAMPEP's experience and knowledge have been utilised to elaborate and promote a holistic vision of principles and practices for HIV prevention among sex workers.⁴

An understanding of the current reality of sex work and the situation of sex workers in Europe is critical to strengthening HIV prevention in sex work settings⁵ across Europe. The European Mapping report aims to identify trends and tendencies in relation to the changing patterns of sex work and the living and working conditions of female and transgender sex workers within Europe. In addition, it provides an overview of sex work migration patterns across Europe and addresses the impact of the expansion of the European Union on the situation and migration of sex workers in Europe. This report also provides insight into the ways in which policies on prostitution and migration affect the vulnerabilities of migrant and mobile sex workers to HIV/AIDS, which is also inseparable from a number of other forms of vulnerability (violence, drug and alcohol use, discrimination, social exclusion, stigmatisation, legal status etc) shown in the mapping below.

In seeking to address HIV and sex work in Europe it is also essential that we understand social determinants, working conditions and other contextual factors. In this respect, current legislation and public policies, their impact on sex work settings and the potential consequences for sex workers and HIV prevention are particularly important. The mapping entailed gathering information on legislation and public policy.⁶ Working within a human rights framework, this mapping seeks to internationally recognise effective practices of prevention and to reduce vulnerability.

The **European network for HIV/STI prevention and health promotion among migrant sex workers - TAMPEP 8**⁷ works to reduce the HIV vulnerability of migrant and mobile sex workers through the development, exchange, promotion and implementation of appropriate policies and interventions across Europe. TAMPEP aimed to reduce the vulnerability of sex workers through the strengthening of outreach activities and the further development of effective interventions and strategies for HIV/STI prevention among national, migrant and mobile sex workers and their clients; the development of an Internet directory of health and social care services accessible to sex workers; and the production of a capacity building manual. TAMPEP has informed policy development through qualitative and quantitative assessment of the prostitution scene across Europe, mapping and analysing the legal frameworks regarding migration, sex work, and HIV/STIs.

⁴ The TAMPEP network has extensively documented the results of its activities and produced two Position Papers setting out the network's thinking on the important issues of '**Migration and Sex Work**' and '**Trafficking in Women**'. Additionally, a wide range of resources have been developed, including manuals and multilingual educational materials for sex workers. All the latest documents and resources as well as an archive of previous resources can be found on TAMPEP's website at www.tampep.eu

⁵ As defined by the World Health Organization (WHO), "*Sex work settings are places or social networks in which sexual services are exchanged for money or goods.*"

⁶ The specific legal frameworks are analysed in detail in *Sex Work, Migration, Health*, a report on the intersections of legislations and policies regarding sex work, migration and health in 25 European countries.

⁷ **TAMPEP 8 | European Network for HIV/STI prevention and Health promotion among migrant sex workers**
Main partner: TAMPEP International Foundation, Obiplein 4, 1094 RB Amsterdam, Netherlands.
Tel +3120 692 6912 | fax +3120 608 0083 | website: www.tampep.eu
Partnership: AT, BE, BG, CH, CZ, DE, DK, EE, ES, FI, FR, GR, HU, IT, LT, LU, LV, NL, NO, PL, PT, RO, SI, SK, UK.

In addition to the European overview provided in this European Mapping Report (Volume I), the National Mapping Reports (Volume II) lay out the frameworks and provide an analysis on the national level.⁸ The European mapping of sex work and migration in Europe represents the results and analysis of the quantitative and qualitative data gathered in 2008 and analysed in 2009.

METHODOLOGY

Sex work is characterised by continual changes in demographic composition, migratory routes, and the extent of mobility. In order to keep up with these changes, the continuous compilation and comparison of empirical findings, with common indicators for a European setting, is of fundamental importance. Therefore, data collection is standard operating procedure within the 25 countries where the TAMPEP project is established. In order to acquire a situational profile for Europe, we devised questionnaires that allowed us to gather extensive data, which then underwent further analysis.

The most recent changes were identified by referring to the comprehensive European mapping of 2006.⁹ These comparisons enable the identification of current trends and changes in sex work, particularly on the vulnerabilities, legal frameworks and gaps in provision of services, an analysis of which is essential for overcoming the barriers to providing comprehensive services that respond to the needs of sex workers.

There are two main objectives for the 2009 mapping in 25 EU countries:

To collect qualitative and quantitative data regarding gender, nationalities, origins, distribution, work settings and conditions, mobility, condom use and vulnerability factors of sex workers.

To observe and compare changes and trends regarding the sex industry, working conditions of sex workers, and barriers to accessing services and legislation.

In 2008 TAMPEP worked together with 26 national partners in 25 countries to collect data with the help of questionnaires distributed to NGOs, governmental Health and Social Services, civil servants, law enforcement agencies and sex workers' organisations that work directly with sex workers. The questionnaire was standardised across the 25 countries, which allowed comprehensive data comparison, and a specially developed online database was used.

The national responses were used to draft 25 National Mapping Reports. The approximately 380 responses of the National Mapping Reports then formed the basis for the European Mapping Report.

⁸ Additional reports provide more detailed accounts of the specific issues related to the European Mapping Reports and National Mapping Reports and the Cross-Border Prostitution Report on four regions in Europe, which assesses and reports on sex workers' working and living conditions, mobility, quality and quantity of existing health and social services, outreach activities, women's shelters, etc. Furthermore, the European juridical and policy report *Sex Work, Migration, Health* is a report on the intersections of legislations and policies regarding sex work, migration and health in Europe.

⁹ The European mapping analysis (TAMPEP 7) is based on findings compiled in 2005. All subsequent references to the 2006 Mapping Report regard the analysis based on figures assessed in 2005.

The stages of the TAMPEP methodology combine:

- national and European mapping of prostitution
- assessment of changes in populations and their circumstances
- assessment of actual interventions
- continuous evaluation and adjustment of interventions in relation to environmental changes
- adaptation of models of intervention and tools to specific groups and situations in various member countries
- implementation and assessment of the effects of adequate strategies with common indicators within the European context as a whole.

Four Regional Commissions monitor, compare and analyse the information on sex work supplied by the national coordinators concerning prostitution and the different factors which influence the effects of policies, migration flow, and service provision within the regions, with particular attention to the sub-regions. The groups of countries per region are:

NORTH REGION Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway and the United Kingdom

EAST REGION Austria, Czech Republic, Hungary, Poland and Slovakia

WEST REGION Belgium, France, Luxembourg and the Netherlands

SOUTH REGION Bulgaria, Greece, Italy, Slovenia, Romania, Spain and Portugal

For the interpretation and analysis it is important to note that the division of countries in the Regional Commissions is based on assessment criteria for comparison. The criteria include geographical vicinity and/or common border, Old EU States and New EU States (with the exception of the West Commission, which is composed solely of old EU states), and some of the countries have to form the new external borders of the EU. The picture of the region is particularly important in cross-border migratory and mobility flow and the push-pull factor which determines responses to mobility, vulnerability and working conditions as well as degrees of autonomy of national, migrant and mobile sex workers with regard to their working conditions, safety and safer sex practices. A more detailed account of the regions can be found in four Regional Reports and four Cross-Border Assessments of Prostitution, which are all part of TAMPEP 8.

In each TAMPEP project period¹⁰ we conduct a survey that involves the TAMPEP national co-ordinators in 25 European countries in order to record the changes that have taken place in their region. The principal source of information for this is the national networks of the TAMPEP coordinators. The coordinators distribute the questionnaire to organisations and services dealing with sex work in their countries and/or gather data directly from other national sources.

The mapping results, however, should not be considered as absolute 'data' or as

¹⁰ Previous TAMPEP reports are: *Health, Migration, Sex Work: The experience of TAMPEP*, TAMPEP International Foundation, 1999; *Final Reports of TAMPEP I, II, III, IV, V, VI, VII*, from 1993 until 2007; *European Overview of HIV and Sex Work*, TAMPEP International Foundation, 2007.

entirely representative of the actual situation. This is primarily due to the extreme difficulty of collecting information that accurately quantifies and represents the sex industry and its workers. Even in those countries where the police or public health officials register sex workers or places of prostitution, the findings are still only partial, as clandestine or hidden prostitution is not reported and many sex workers successfully evade controls and registrations.

Systematic collection of information is further complicated by the fact that the sex worker population includes migrants who move from place to place and country to country. In addition, many of the migrant sex workers sojourn in a country in a state of irregularity and often operate in circuits of sex work that occurs within closed settings.

The only reliable source is the expertise of organisations and projects working in the field and/or those in direct contact with the sex worker population. Nonetheless, these information sources are inevitably biased. Most services, projects and organisations focus on a particular segment of prostitution and as a result get a partial view. For example, there is a UdS (mobile street intervention unit) that contacts only sex workers who work on the streets, as well as a UdS that deals principally with drug addicts. Each has a different perspective. By combining estimates from many different organisations in the field we hope to get a general idea of the main trends in prostitution.

Our expert informants also gather their information through direct contact and discussion with the different communities of sex workers in the field. In order to get this type of information, it is necessary to establish a strong relationship of trust with the various groups of national and migrant sex workers. And even if this is the case, women often still only provide partial information about their work and migration.

Another difficulty in achieving our final objectives is verbal communication. In projects that do not make use of linguistic and cultural mediation, operators are often unable to identify the nationality of the migrant sex workers they encounter. In the past, many women from Eastern European countries such as the Ukraine were believed to be Russian, merely because they spoke the Russian language. Additionally, sex workers sometimes give a false nationality for fear of being recognised, arrested or identified. Only with versatile and experienced outreach workers who have knowledge about the individuals involved is it possible to obtain reliable data.

External factors, such as police clampdowns or an increase in deportations, directly result in rapid and radical changes. Therefore, each time data is compiled its validity can only ever be temporary.

Despite the necessity of prudently analysing and drawing conclusions, the information gathered by the TAMPEP network does give indications of the developments in European sex work that form the basis for developing policies and strategies for national and migrant sex worker interventions. It points to trends and identifies policy impact on sex workers in Europe.

The results are based on over 380 completed surveys compiled across the continent. Most respondents are sex work projects and outreach services from different areas of each country. The national coordinators collected data from a minimum of ten and a maximum of 54 key organisations.

The National Mappings are based on data collection from cities or regions throughout each country. Particular attention is given in the analysis to changes and trends since the 2006 National Mapping Reports. The current and previous data are compared before making the final analysis, enabling us to highlight these changes.

Attention was paid to the recent changes in the situation at the border areas. In the National Report analyses, the specific geographical factors of the prostitution scene were considered, for example by focusing on a particular border area, the concentration of migrants from a specific country/region in a particular area, the diversity of sex work settings in the capitals, etc.

In cases where there is only one national sex work project in a country, the organisation was to coordinate outreach services in different cities, and ensure the questionnaire was completed by each outreach unit in each of the other cities. In this way, we could make sure the data collection represented different cities and/or regions and a variety of respondents.

The final analysis of the National Mapping Reports considers differences in the situation of sex workers: for example, differences between the working conditions of street- and indoor-based sex workers, and the specific vulnerabilities of national and migrant sex workers). These factors were also included in the narrative analyses of each of the National Mapping Reports (see Volume II of this report).

In the questionnaire that aimed to assess sex workers' circumstances, respondents were asked to name the main group of migrant sex workers in their area. The narrative analyses of the National Mapping Reports highlight the geographical differences across each country.

The national level reports provide the coordinators of the TAMPEP network with a forum where they can summarise the changes in their national prostitution scene and outline its political and legal context. In the analysis, national obstacles are identified along with their consequences for sex workers, service providers and policy-makers. The findings from the national mappings and their corresponding narrative reports give a good indication of the most important changes on a European level. This puts the Coordination Centre in a unique position to judge the situation of national and migrant sex workers in Europe.

Combining information at micro and macro levels, TAMPEP is one of the only organisations with a genuine Europe-wide overview of issues such as prostitution, migration, the impact of policies concerning prostitution and migration on the vulnerabilities of sex workers to HIV/AIDS, and how these issues are related. This enables the Coordination Centre and member countries to offer sound policy advice to policy-makers (international agencies and national governmental bodies) while at the same time guiding outreach work on a local level.

The European-level mapping is made possible through cooperation on and overarching analysis of the national activities. Using common guidelines regarding the TAMPEP methodology, each national coordinator collected the information and compiled local reports. The European analysis based on the findings from these reports is structured to reflect the questionnaire, which can be found in Appendix 2.

ASSESSMENT METHODS

The continuous assessment of the prostitution scene, settings and conditions and related frameworks is a key characteristic of the work in TAMPEP. This provides essential information for planning and implementing interventions, which are consistently updated to reflect the constantly changing realities. Prostitution in Europe is characterised by rapid changes in the many different forms and contexts of prostitution in addition to the population of sex workers. The primary aims are:

- Collecting and updating of information about each sex work setting and its social and legal context, which is used to guide intervention design and implementation
- Establishing relationships and partnerships with key actors and groups involved in sex work settings, by learning about their perceived needs, attitudes, priorities and roles in the sex industry
- Continuous assessment of local resources, services, organisations and opportunities. This periodical assessment is combined with situational analysis.

After our experience with the mapping process in TAMPEP 5, 6 and 7, TAMPEP 8 has revised and adjusted the mapping techniques, making it a more efficient data collection tool.¹¹ It is important to keep track of how changes in policy on prostitution and migration influence the European prostitution scene, i.e. the composition and behaviour of our target group. These are all significant indicators of the vulnerability of the populations of national and migrant sex workers.

The collection of information on sex work in Europe through the mapping questionnaire was carried out following these steps:

- Identification of key informants (NGO/government agencies) capable of gathering the required data;
- Recording of all informants invited to complete the questionnaire;
- Translation of relevant documents;
- Sending out the questionnaire to the selected informants;
- Review of returned questionnaires and clarification of contradictions with informants;
- Entry of all returned questionnaires into the online database;
- Review of the statistical report from the IT consultant;
- Analysis of the national statistical report and completion of the narrative sections in the national report;
- Reviews and discussion of the national mapping report at the Regional Commission meeting, for regional comparison and analysis.

¹¹ The previous phases of TAMPEP were in 2000-2002 TAMPEP 5, 2002-2004 TAMPEP 6, and 2005-2006 TAMPEP 7.

A total of 600 questionnaires were sent out to selected stakeholders/organisations. Around 380 were returned, representing a response rate of approx. 64%. Some countries collected additional data using other methods, such as panel conversations at national platform meetings which strictly followed the structure of the questionnaire.

Profile of respondent organisations

| | |
|---------------------|-----|
| NGO | 56% |
| Health Services | 22% |
| Other ¹² | 10% |
| Social Services | 9% |
| Law Enforcement | 3% |

The majority of respondents are NGOs delivering specific projects and services to sex workers; the Health and Social Services are public bodies with specific services for the sex worker target group. Only a small number of Law Enforcement agencies (3%) responded but a further 10% was comprised of other organisations (sex workers' organisations, research institutes etc.).

Geographical areas covered by these organisations

| | |
|--------------|-----|
| City | 42% |
| Regional | 33% |
| National | 19% |
| Part of City | 6% |

The majority of the organisations are city-based in their provision of services, followed by a third with regional service coverage, then national. Only a small minority focus on parts of cities, generally concentrating on a specific sector of the sex industry (for example, street-based sex work, etc).

Organisations working with sex workers

| | |
|-----|-----|
| Yes | 91% |
| No | 9% |

The majority of organisations work directly with sex workers, i.e. the knowledge of 91% of the respondent organisations is based on data collected from a source in direct contact with sex workers.

¹² Including ministries, research institutes and academic institutions, and Special Rapporteurs on trafficking.

Organisations working with MIGRANT sex workers

| | |
|-----|-----|
| Yes | 84% |
| No | 16% |

The majority of respondent organisations also have direct contact with migrant sex workers and are aware of the circumstances of migrant sex workers.

The majority of the data was received from service providers which have direct contact with sex workers as well as information on the specific circumstances of migrant sex workers. Moreover, the majority of the data collected nationally comes from organisations which record information about service users and uptake of services in order to provide statistics.

The data collected via the questionnaires was fed into the database and an assessment carried out of information relating to the legal, political and social contexts. This information was gathered through outreach work and qualitative research methods, including interviews with sex workers. The National and European Mapping Reports summarise the results of this work based on qualitative, quantitative and participatory methods.

MAPPING RESULTS: A EUROPEAN OVERVIEW

The structure of the European overview reflects the construction of the 2008 questionnaire. Based on our experiences of former assessments, we were able to tailor the structure in order to cover the most relevant issues concerning sex work and migration in Europe today. The first section answers the question of who is working in sex work and the sectors where they work. Section two is concerned with the sex workers' situation in terms of their working conditions and vulnerability factors, and section three specifically addresses the mobility of sex workers within Europe as a core issue. Section four entails an analysis of the gaps in service provision throughout Europe with a focus on key recommendations to reduce the vulnerability of sex workers.

The 2008 mapping results were compared to those from 2005 as a way of highlighting the most recent changes and trends. In addition, this overview not only places a focus on Europe as a whole, but also pays particular attention to regional differences and cross-border mobility within regions. Finally, the European overview concludes by underscoring crucial recommendations for policy-making and grassroots action to improve the working conditions and quality of life of sex workers across Europe.

Prostitution scene

This section provides an overview of the prostitution scene, mapping **who is working in the sex industry in Europe** on the basis of gender (female, male, transgender) and origin (migrants, nationals) including specifications of the regions and countries of origin. It also maps out the sectors **where sex workers work** (indoors, outdoors) and what kinds of conditions these workplaces offer.

GENDER

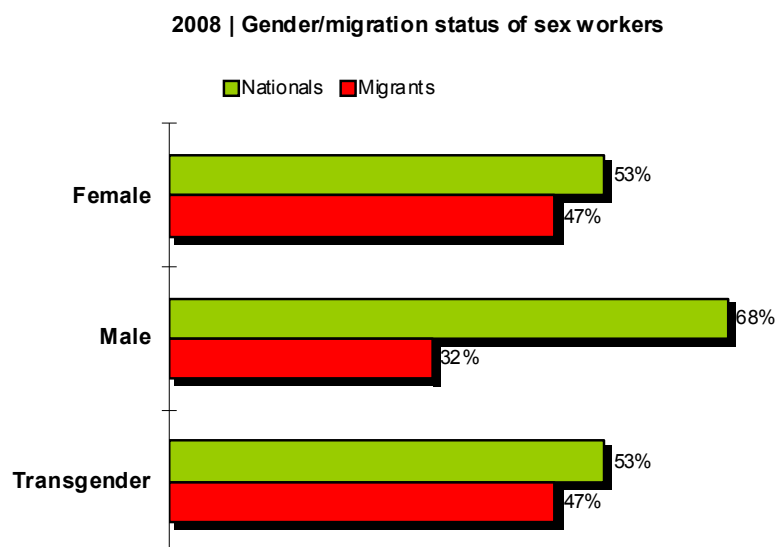
Sex work in Europe is still largely performed by women, who constitute 87% of the entire sex worker population. In addition, men and transgender people have been recorded as part of the sex worker population in all of the countries.

Some Western European countries, such as France, Greece, Luxembourg, Belgium and Italy report a relatively high proportion of transgender sex workers (15% to 25%). Most other countries report that transgender sex workers comprise a maximum of 5% of the overall sex worker population.

On average, the mapping shows that 7% of sex workers in Europe are male. The percentage, however, greatly varies from country to country. For example, Austria, Finland, Denmark, Estonia and Lithuania report almost exclusively female sex workers, while Poland reports that 15% of its sex worker population is male. Very few projects that work with male sex workers, but these projects report that the male sex work scene is markedly different. Based on this information, the percentage of male sex workers reported here may actually be too conservative.

Transgender sex workers are reported as comprising only 6% of all sex workers in Europe. We believe, however, that this figure may also under-represent the actual population of transgender sex workers, and although they are generally more visible to service providers, the low percentage shown here may be attributed to the same difficulties we face in calculating statistics for male sex workers. We also noted that a majority of transgender sex workers come from Latin American countries.

The gender estimations have changed little since the 2005 mapping, which showed 8% male, 6% transgender and 86% female sex workers.



In comparison, the gender composition of migrant and national sex workers shows that approximately 47% of all female sex workers are migrants and 47% of all transgender sex workers are migrants. However, approximately 32% of all male sex workers are migrants, which points to a noticeable feminisation of the migrant sex worker population.

In terms of regional differences, there are some remarkable variants, particularly in the visible number of transgender people in sex work and their migration status. For example, the East Region reports that only 1% of sex workers are transgender, a little over half of whom are migrants. In contrast, the South shows the largest number of transgender sex workers (8%), of whom only slightly more than one third are migrants. The highest concentration of migration among transgender sex workers is found in the West Region where 70% of the transgender sex worker population are migrants.

The highest concentration of male sex workers is in the South Region (10%), of which 42% are migrants. The largest male migrant sex worker population was found in the West Region, where 46% of all male sex workers are migrants. The West Region also shows the greatest gender diversity within the sex worker population. Here, 78% are female sex workers (in comparison to 92% in the North or 82% in the South), 6% male and 16% transgender sex workers. The high percentage of transgender sex workers here in comparison with other regions can also be attributed to the long-standing presence of transgender communities (71% of all transgender sex workers in the 4 countries of the West Region are migrants, and the majority are from Latin America) and to the fact that street prostitution is, in this region, a site for greater gender diversity in sex work.

However, sex work is still predominantly carried out by females across Europe. There is very little difference in gender between migrants and nationals with the exception of male sex workers, which shows a greater number of national sex workers. Among other things, this can be attributed to specific cultural taboos among migrant communities regarding the activities of male sex workers and concepts of masculinity. However, this does not seem to be the case for transgender migrants, as migration may present an opportunity for some transgender people to escape cultural and social repression in their countries of origin and to begin the gender reassignment process in another (often western European) country. Other factors, such as client demand and/or exclusion and

discrimination in other labour market sectors, may also influence a person's choice of work. This is also true for migrants in general, and for nationals in certain situations.

PROPORTION OF NATIONAL AND MIGRANT SEX WORKERS

The TAMPEP network has recorded that the number of new individuals working in the sex industry within the EU and Norway is constantly increasing, as well as the number of nationalities among sex workers. This is not to be understood in terms of an increase in overall volume, but in terms of new entries and rapid changes within the sex worker population. TAMPEP has observed increased mobility among sex workers in Europe as well as a growing complexity regarding the patterns of mobility (i.e. travel routes). The same applies to the spread of nationalities in Europe. During the first year of the TAMPEP project (1993-1994), the network members (Austria, Germany, Italy, Netherlands) worked with sex workers from 10-12 different national backgrounds. In 2008, the TAMPEP partners contacted sex workers with 60 nationalities within the same geographical areas. This points to the growing diversity among sex workers – regarding the countries of origin and the nationalities of sex workers as well as their social and cultural backgrounds.

Overall, most of the sex workers in Europe — most prominently in the West, South and North Regions of Europe, which comprise most of the 14 old EU countries represented in the TAMPEP Network — are migrants. Throughout the old member states, an average of approximately 70% of all sex workers are migrants, while some countries such as Italy, Spain, Austria and Luxembourg report that migrants comprise 80% to 90% of the sex worker population, or 60% to 75% in Finland, the Netherlands, Belgium, Germany, France, Greece, Denmark and Norway. The greatest balance between migrants and nationals is found in Portugal (56% migrants) and the UK (41% migrants; with the highest level of concentration in London (80%)).

In the new EU countries, there is a far lower estimate of migrants working in the sex industry. On average, only an approximate 16% to 18% of sex workers in Central Europe are migrants. However, while the overall average is quite low, there are significant differences among new EU countries: for example, in the Baltic States the number of migrants among the sex worker population is between 5% and 10%, while Romania and Bulgaria only have an average of 2%, the majority of whom are from Moldova. The main reason for this decreasing number of migrants in the Central European Region is the implementation of harsh legal restrictions for non-EU citizens. In contrast, 41% of the Czech Republic's sex workers are migrants, which is due not only to its geographical position in the heart of Europe and border with some of the old EU countries, but also to its booming economy in terms of international business and tourism. Other Central European countries in the East Region with a slightly higher proportion of migrant sex workers are Poland (33%) and Hungary (25%). The lowest percentage is in Slovakia (2%). These figures may however be underestimated due to gaps in knowledge and contacts with sex workers, particularly those working in more isolated or indoor settings.

With all the differences among the countries considered, the average of migrant sex workers across Europe is currently approximately 47% to 50%.

This European average has been reduced, primarily due to the fact that the majority of sex workers in the new EU countries are nationals.

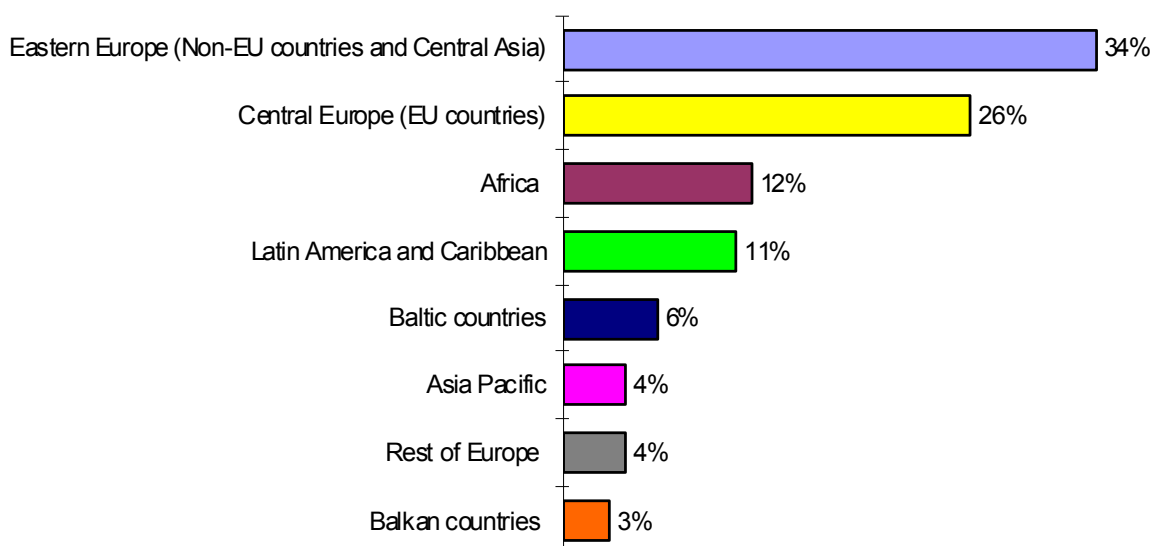
In summary, the differences in numbers between West, South, North and Central Europe shows that:

1. the new EU countries are still not of economic interest for those coming from outside the EU and, in addition, have imposed tight legal restrictions on non-EU migrants entering their countries;
2. for both new EU members and those from outside the EU, Western Europe still offers the best working and earning potential, despite the precarious position of the migrant sex worker population due to the trend towards greater restrictions in EU migration policies.

In addition to a long history of migration and prostitution within Western Europe, its geographical position and proximity to the borders of countries with less economic opportunities are the most obvious reasons for the clear migratory trend from Eastern towards Central and Western Europe.

REGIONS OF ORIGIN OF MIGRANT SEX WORKERS^{13 14}

2008 | Regions of origin of migrant sex workers in Europe



¹³ These figures are derived from 15 Western European countries (13 old EU countries and Norway), and 10 Central European countries (10 new EU countries). ‘Migrants’ are defined as those not born in the country in which they have come to live and work, including persons from EU countries.

¹⁴ The following categorisation of regions, according to countries, was applied in the questionnaire. Central Europe: Bulgaria, Czech Republic, Hungary, Poland, Romania, Slovakia and Slovenia. Eastern Europe (non-EU countries and Central Asia): Belarus, Moldova, Russia, Ukraine, Kazakhstan, Tajikistan, Azerbaijan, Uzbekistan, Kyrgyzstan and Turkmenistan. Baltic countries: Estonia, Latvia and Lithuania. Balkan countries: Albania, Bosnia-Herzegovina, Croatia, Montenegro, Serbia, Kosovo, and the FYR of Macedonia.

The main region of origin of migrant sex workers is Central and Eastern Europe, including the Baltic and Balkan countries which together account for around 70%. The main trend of the migration movement is taking place within the continent itself, from Eastern to Central to Western Europe. We can see that 32% of the total population of migrant sex workers are from the new EU countries and 37% are from non-EU Eastern European and Balkan countries.

The impact of the EU enlargement is another relevant factor regarding this migration flow. This is particularly related to the new EU countries that have come to form the outer borders of a ‘new’ Europe. In terms of internal mobility between new and old EU countries, we must still consider that 64% of the migrants in sex work are non-EU citizens. This means that about two thirds of the sex worker population are impacted by migration policies and face additional barriers due to the fact that sex work is not a recognised form of labour migration.

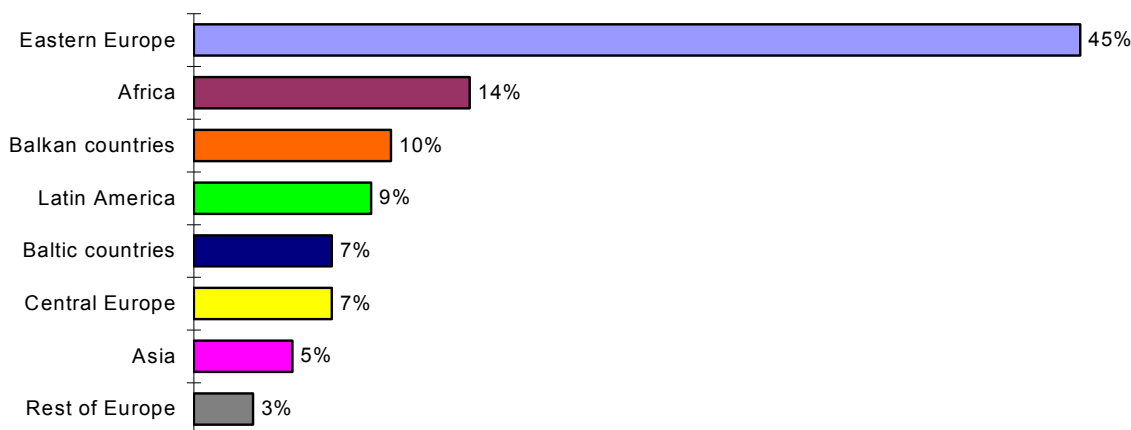
The majority of the non-EU citizens come from Eastern Europe and Central Asia. The rights of sex workers are hugely affected by migration status. Regardless of one’s position as EU or non-EU citizen, the extremely high level of migration flow from Central and Eastern Europe, almost 70%, is testament to the great economic and social inequalities that prompt this movement.

The second largest group of migrant sex workers is from Africa (12%), followed by Latin America and the Caribbean (11%), then Asia-Pacific (4%) and finally other European countries (4%).

The new EU countries have the lowest percentage of migrants in sex work, who are exclusively from the neighbouring countries, a majority being non-EU Eastern European countries. As stated above, within Central Europe, the countries with the highest population of migrants are Poland, Hungary and the Czech Republic. The Czech Republic is an exception within the region, as the diversity among the sex worker population and work settings more closely reflects West and South Europe. For example, in the Czech Republic 7% of the migrant sex workers are from Latin America and 5% from Africa.

For comparison, the table from the 2006 European Mapping (below) is helpful for underscoring the trends and changes in prostitution. A particularly relevant point is that it shows the regions of origin of migrant sex workers in Europe preceding the entrance of Romania and Bulgaria in the EU in 2007.

2006 | Regions of origin of migrant sex workers in Europe



The most significant trend since the 2005 assessment is that the percentage of Eastern Europeans has substantially decreased. This can be attributed to the implementation of new migration policies in EU countries and to an increase in restrictions on obtaining residence and work permits. In 2008, within the new EU countries, Central Europe represents 26% of migrant sex workers. In the past, the Balkan countries were more strongly represented, but have since consistently decreased from 10% in 2005 to a mere 3% in 2008. One major factor here is an increase in general migration restrictions, which have particularly impacted the migratory flow of Albanians to EU countries. This is the main country of origin from the Balkan regions, which is partly the result of a large-scale movement over the past decade, now substantially curbed through the new legislation on non-EU migrants.

Despite the strict limitations posed on migration throughout Europe since 2005, the presence of Latin Americans has increased (from 9% to 11%) while the presence of Africans and Asians has slightly decreased (from 14% to 12% and from 5% to 4%, respectively).

While the overall percentage of migrants from Eastern, Central, Baltic and Balkan countries has remained the same since 2005 (69%), following the accession of Romania and Bulgaria to the EU in 2007, migration from Central Europe has drastically increased from 7% in 2005 to 26% in 2008.

Technically, the non-EU migrants among sex workers are distributed as follows: the largest group (34%) come from the eastward neighbouring countries of the EU - non-EU Eastern Europe and Central Asia. The largest non-European population is from Africa (12%), followed closely by Latin America and the Caribbean (11%), Asia-Pacific (4%) and Balkan countries (3%).

These figures clearly demonstrate that the migration flow between the new and the old EU states is very high, mainly since the enlargement of the EU in 2004 and again in 2007. An additional shift has taken place in sex worker populations within Europe over the last ten years.

The following provides an overview of each region with specifications on the migrants and regional analysis.

COUNTRIES OF ORIGIN OF MIGRANT SEX WORKERS¹⁵

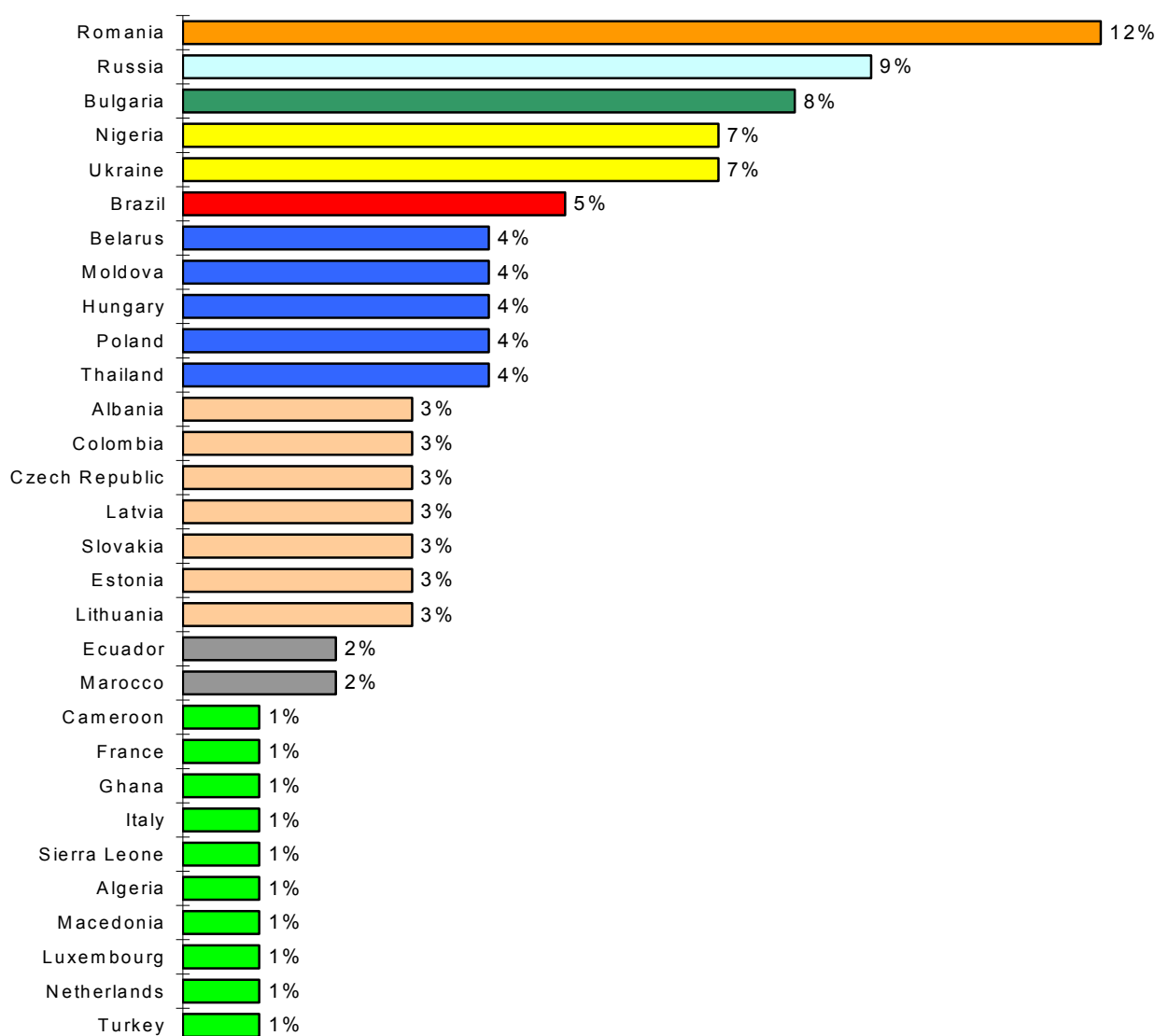
Over 60 countries of origin have been identified across Europe. The figures below represent only one small part of the great variety thereof. This internationalisation, diversity and spread of countries of origin is relevant in considering the barriers to accessing services, and highlights that it is indeed necessary to diversify information and outreach in a culturally appropriate manner.

¹⁵ Note: the figures represent the distribution of nationalities of migrant sex workers within the EU countries and not the actual number of sex workers from these countries. The top countries of origin named do not necessarily comprise the largest group or number *per se*, but have been perceived as the most visible or frequently observed.

The **top ten countries of origin** in terms of those most frequently named by and/or highly visible to the respondents throughout Europe in 2008 were:

| | |
|-----------|---|
| 1 | Romania |
| 2 | Russia |
| 3 | Bulgaria |
| 4 | Ukraine Nigeria |
| 5 | Brazil |
| 6 | Belarus Moldova |
| 7 | Poland Hungary Thailand |
| 8 | Czech Republic Slovakia Latvia Albania Colombia |
| 9 | Lithuania Estonia |
| 10 | Morocco Ecuador |

2008 | The 30 most frequent nationalities mentioned



This illustrates that sex workers from the new EU countries (Romania, Bulgaria, Hungary and Poland) and Eastern Europe (Russia, Ukraine, Belarus and Moldova) are in the majority and are widely represented within all 25 countries.

These figures also show that sex workers from Nigeria and Brazil, although they are among the smallest regional groups (12% of migrant sex workers are from Africa and 11% from Latin America), are found all across Europe, in a majority of the 25 countries.

2006 | Countries of origin of migrant sex workers in Europe

| | |
|-----------|-----------|
| 1 | Russia |
| 2 | Ukraine |
| 3 | Romania |
| 4 | Bulgaria |
| 5 | Nigeria |
| 6 | Poland |
| 7 | Belarus |
| 8 | Brazil |
| 9 | Thailand |
| 10 | Lithuania |

Since the 2006 mapping, there has also been a shift in the top ten countries from which migrant sex workers in Europe come. The order of the most frequently named countries in 2005 was Russia, Ukraine, Romania, Bulgaria, Nigeria, Poland, Belarus, Brazil, Thailand and Lithuania. In 2005, Russia was listed as the foremost visible nationality among sex workers in Europe, while now, in 2008, it has fallen back 4% behind Romania, which again indicates that migration from the new EU states has indeed been affected by their recent accession to the EU.¹⁶ In addition, the geographical distribution of sex workers from Brazil and Nigeria has increased, as they move up in the ranks to almost take the place formerly held by Romania and Bulgaria. The increase in sex workers migrating from outside the Eurasian continent points to a trend towards a higher mobility and distribution — not necessarily an increase in number — due to the specific networks and connections to communities spread throughout Europe where information is shared on opportunities for potential improvements to living and working conditions.

In addition to the factors of one's country of origin and nationality, it is exceptionally important to consider the specific situation of ethnic minorities in the sex industry, particularly within the new EU countries of Central Europe. More than half of street workers are part of the Roma population resident in these countries. In the Baltic countries we also observe that ethnic Russians form the greatest majority among sex workers on the street. The specific situation of sex workers from ethnic minorities entails social exclusion on several levels. Drug use within the Roma community is also connected to sex workers, forming an additional vulnerability factor, as will be shown in the following section on the situation of sex workers, which includes a detailed analysis of vulnerability factors as well as measures to decrease these.

Particularly in South European countries, a significant proportion of migrant sex workers from Romania and Bulgaria are Roma. This has become more visible since the 2007 ascension of Romania and Bulgaria to the EU. It is important to underline the specific position and vulnerability of these groups within the sex worker population and

¹⁶ Regarding the figures on Russian sex workers, the data is potentially inaccurate as some Russian-speaking sex workers from other countries are often assumed to have Russian nationality. Service providers who work without cultural mediators familiar with language differences have particular difficulties in this respect.

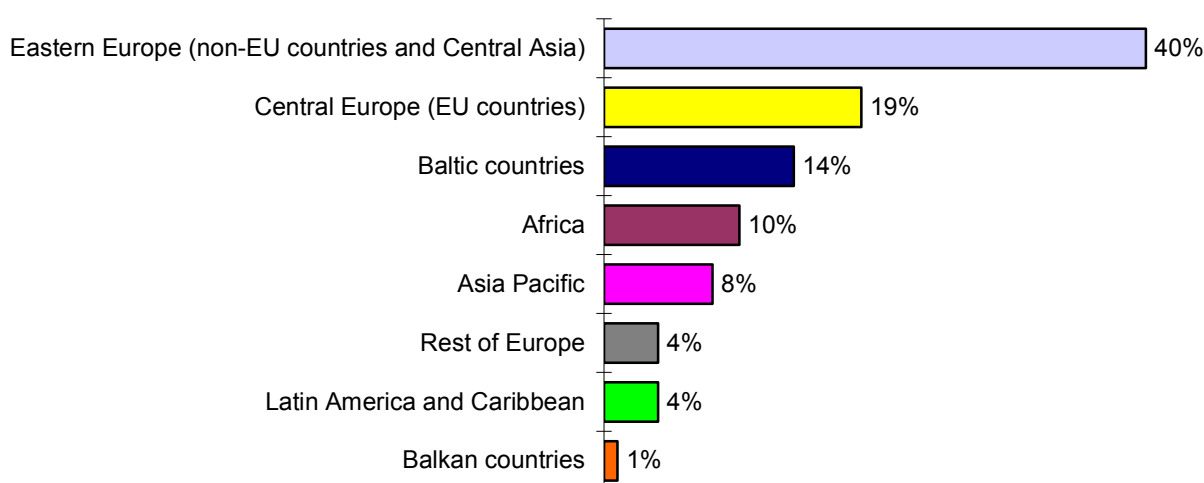
their specific position inside their own community in terms of social exclusion and discrimination.

The following provides an overview of specifications and points of analysis on the countries of origin of migrants in the North, South, East and West Regions.

NORTH REGION

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

NORTH region | origins of migrant sex workers



Prostitution Mapping 2008 | NORTH Region

| Country | 2006 mapping | 2008 mapping | Countries of origin |
|----------------|---------------|---------------|--|
| Denmark | 50% migrants | 65% migrants | 2006: Thailand, Baltic countries. New: Nigerians on the streets; Polish in massage parlours 2008: Central Europe (EU countries) 40%, Baltic 3%, Africa 24%, Asia 23% |
| Estonia | 95% nationals | 95% nationals | 2006: Among national sex workers, 80% are Russians from Estonia 2008: No changes. 5% migrants are from Russia and other Baltic countries |
| Finland | 60% migrants | 69% migrants | 2006: CEE ¹⁷ 80%, Asia 10%, Latin America 5%, Africa 5% 2008: CEE 90% (Eastern Europe (non-EU) 55%, Baltic states 33%, Central Europe 2%) |
| Germany | 60% migrants | 65% migrants | 2006: CEE 55%, Asia 20%, Latin America 15%, Africa 10% 38 countries in total. 2008: CEE 69%, (Central Europe (EU) 42%, Eastern Europe (Non-EU) 16%, Baltic (EU): 8%, Balkan -(Non-EU) 3%), Asia 15%, Latin |

¹⁷ CEE countries in sub-regional definitions include Central and Eastern Europe, Baltic States and the Balkan region (for further details see national mapping reports).

| | | | |
|-----------------------|----------------------|----------------------|--|
| | | | America 10%, Africa 5% 42 countries in total |
| Latvia | 85% nationals | 88% nationals | 2006: Migrants come from Russia, Belarus, Ukraine, Estonia, Lithuania 2008: Migrants come from 90% Eastern Europe and 10% from other Baltic countries |
| Lithuania | 85% nationals | 90% nationals | 2006: Migrants come from Russia, Ukraine 2008: Migrants come from Russia, Poland, Belarus |
| Norway | 70% migrants | 70% migrants | 2006: Migrants come from Bulgaria, Romania, Czech Republic, and Thailand. New: Nigeria 2008: Africa 43%(Nigeria), CEE 35% (Central Europe 20%, Baltic 9%, Balkan 4%, Eastern Europe 2%), Asia 12% |
| United Kingdom | 38% migrants | 41% migrants | 2006: CEE 50%, other EU countries 25%, Asia 10%, Latin America 10%, Africa 5% 2008: CEE 64%, (Central Europe 43%, Baltic 10%, Eastern Europe 7%, Balkan 4%), other EU countries 16%, Latin America 10%, Asia 7%, Africa 2%, North America 1%. 35 different countries of origin in total |

Migrants in the North Region are divided differently: while in the old EU countries they generally comprise the majority, they are still a minority in the new EU countries.

The trend points towards an increase in migrant sex workers from Central Europe (new EU member states), who now make up the highest percentage of migrant sex workers in Denmark (40%), Germany (42% from Central Europe and 8% from Baltic EU countries); while the percentage of non-EU migrants within Eastern Europe has decreased to 16%. Due to its geographical location, Finland has become a destination for sex workers from non-EU Eastern European countries (55%), many of whom are from Russia, and from the Baltic states (33%), primarily Estonia.

■ Norway's position among the Scandinavian countries is particularly interesting, as there is a new trend in the form of a migration flow of Nigerian women moving to Norway from other EU countries. At 43%, Nigeria is the most common country of origin of West African migrant sex workers. Only 20% are from Central Europe, and Norway is less a destination country for sex workers from Baltic countries, as they only comprise 9%.

■ While the EU enlargements of 2004 and 2007 had no significant impact on the increasing curve regarding the number of migrants, it did however have a remarkable impact on the nationalities of migrants working in prostitution in Denmark, Finland, Germany and the UK. A clear consequence of the enlargement of the European Union in 2004 and in 2007 is increased migration and mobility from the new member states to the old ones.

■ Germany has also become a transit country since the EU expansion due to its vicinity to Poland.

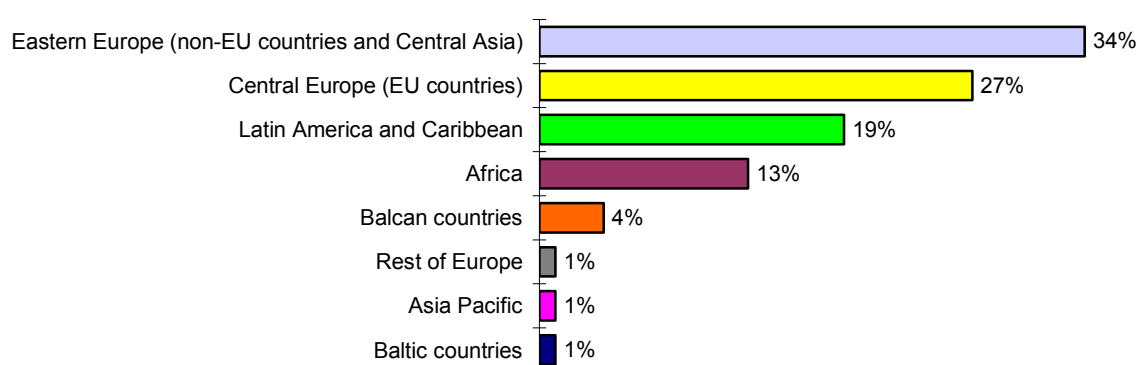
■ The Baltic States are still mainly countries of origin for the North Region. However, they did not become transit or destination countries as expected, because they are of no economic interest to migrants. It was expected that EU expansion would lead the Baltic countries to become *entry countries* or gateways for those seeking to enter the EU, but this has not come to pass. The percentage of migrants from the neighbouring countries is still very limited, at only around 5 to 10%.

■ In the last two to three years, there was a sharp decrease in migrant sex workers from non-EU countries within the older EU countries, with the exception of Norway. In Estonia working conditions have improved. There are more independent sex workers using the Internet. The high percentage of Russian sex workers also includes Russians with legal residency in Estonia and who are considered both Estonian and Russian.

SOUTH REGION

Bulgaria, Greece, Italy, Portugal, Romania, Slovenia, Spain

SOUTH region | origins of migrant sex workers



Prostitution Mapping 2008 | SOUTH Region

| Country | 2006 mapping | 2008 mapping | Countries of origin |
|-----------------|-----------------|----------------------|--|
| Bulgaria | 90% nationals | 98% nationals | 2006: Roma and Turkish minority: 50% of national sex workers. Eastern Europe and Balkan countries 10% 2008 : half of national sex workers are Roma and 10% Turkish minority. Among the 2% migrants many Russians and Ukrainians. |
| Romania | 95% nationals | 98% nationals | 2006: 5% of sex workers were migrants, mostly from Moldova. 2008 : number of migrant sex workers decreased 3%, all East Europeans (Russia, Moldova, Belarus, Ukraine). Large number of Roma among national sex workers. |
| Slovenia | No data in 2006 | 70% nationals | 2008 : Eastern Europe 57%, Central Europe 28%, Balkan 10%, Asia 3%, Latin America 2% |
| Greece | 80% migrants | 73% migrants | 2006: Eastern Europe 40%, Africa 25%, Balkan 20%, Central Europe 10%, other regions 5%. 36 different countries of origin 2008 : Eastern Europe 48%, Central Europe 22%, Africa 15%, Balkan 11%, Baltic countries 3%, Asia 1%. 20 different countries of origin |

| | | | |
|-----------------|--------------|---------------------|---|
| Italy | 80% migrants | 90% migrants | 2006: Africa 34%, Latin America 25%, Eastern Europe 20%, Balkan countries 11%, Central Europe 2.5%, Baltic countries 2.5%, Western Europe 2.5%, Asia 2.5 % 2008: Africa 40% (mostly Nigeria), Central Europe 24% (mostly Romania), Latin America and Caribbean 15%, Eastern Europe 7%, Balkan 6% (mostly Albania), Asia 4% (increase in Chinese women), Baltic 1%, other European countries 3%. Total of 28 different countries of origin |
| Portugal | 60% migrants | 56% migrants | 2006: West Europe 45%, Africa 20%, Latin America 15%, Central and Eastern Europe 10%, Baltic countries 5%, Asia 5% 2008: Latin America 65% (mainly from Brazil), Africa 17%, Central Europe 7%, Eastern Europe 8%, Western Europe 1%, Baltic 1%, Balkan countries 1%. Total of 20 countries of origin |
| Spain | 70% migrants | 90% migrants | 2006: Latin America 70%, Africa 15%, Eastern Europe 15% 2008: Latin America 49%, Central Europe 24%, Africa 18%, Eastern Europe 4%, West Europe 3%, Balkan 1%, Asia 1% |

In Romania and Bulgaria the presence of migrant sex workers from non-EU neighbouring countries (Russia, Ukraine and Moldova) has decreased to no more than 2%. Since the EU enlargement, the obligatory visa for entering Bulgaria and Romania has become a considerable barrier for new migrants.

- A large percentage of national sex workers in both countries belong to Roma or other ethnic minorities.
- After their ascension to the EU, neither country became a transit country; they have however remained origin countries.
- At least half of the national sex workers have worked outside the country, predominantly in Western and Southern Europe. Many sex workers move (or are moved by organisers/pimps) back and forth across borders.
- In Bulgaria, there is a trend of returning. Many of the sex workers who worked in the sex industry abroad have come back and decided to continue sex work in Bulgaria. The economic status of the country is improving and some conditions for prostitution indoors have become more favourable than in the past.
- In Romania, the number of sex workers who have (previously or currently) left the country to work elsewhere is still substantial: 80% of nationals have worked in another country before returning to the sex industry in Romania. The main reasons given by sex workers for leaving the country are: the punishment of prostitution (through the penal code) and the consequent increase in police arrests; opportunities for better earning and better access to health services; better living conditions in other countries despite their migrant status.
- A new trend is an increase in client mobility from Western Europe to Bulgaria and Romania, particularly during the tourist season and from cross-border regions.
- In Slovenia the percentage of migrants in the sex worker population is between 27 and 30%. Three quarters (75%) of migrants and one quarter (26%) of nationals have

worked in another city or country before. Slovenia is simultaneously a destination, transit and origin country. Female sex workers mainly come from non-EU Eastern Europe (mainly Ukraine and Moldova) and the Balkans (particularly Albania). In turn, the Slovenian sex workers mainly go to Italy, Germany, the Netherlands, etc. where women change their place of work (bars, clubs) every few months. This mobility of workers and their work settings is largely coordinated by the organisers in the sex industry.

- In Italy and Spain, the percentage of (mainly female) migrant sex workers has increased over the past two years, as now 90% of all sex workers are migrants. Although the migrants' main regions of origin have remained stable over the years (West African countries in Italy; Nigeria, Latin America and Caribbean countries in Spain, with Ecuador, Colombia and the Dominican Republic particularly represented), in both countries the second largest regional group of migrant sex workers (24%) is from the new EU countries (mainly Romania and Bulgaria).

- In Greece and Portugal the percentage of migrant sex workers has slightly decreased.

- In Greece, the shift of the region of origin since 2006 is considerable: the main group is from Eastern European, Central European, African and Balkan countries. Greece has seen an increase in numbers from the former two regions along with an overall decrease from the latter three.

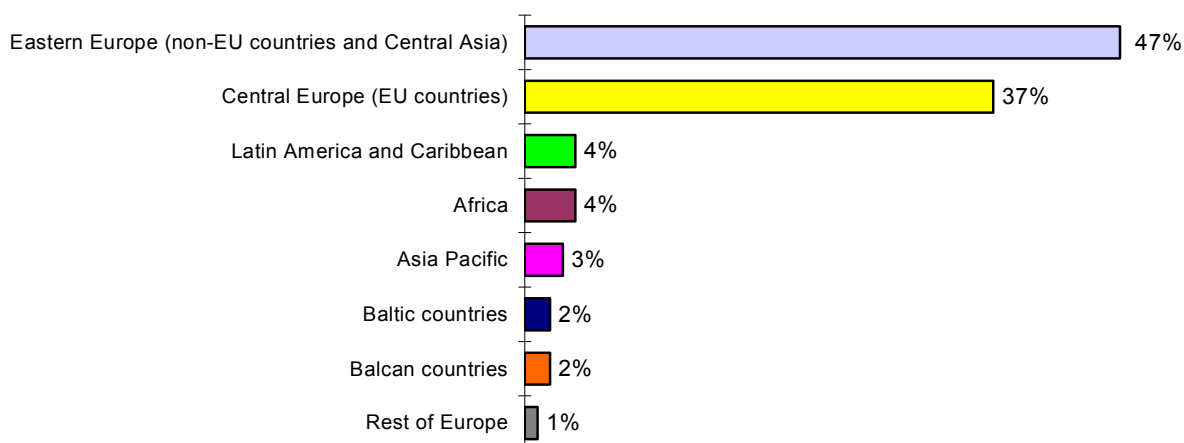
- In Portugal, Latin American countries — particularly Brazil — have increased as countries of origin, as they now form 65% of all migrants in sex work in Portugal. The percentage of sex workers from other EU countries of Western and Southern Europe has decreased. The 2006 mapping shows that the high presence of sex workers from Western Europe was particularly concentrated in the south of Portugal and connected to the tourist industry.

- Cross-border prostitution is a noticeable phenomenon in the border areas between Spain and Portugal.

EAST REGION

Austria, Czech Republic, Hungary, Poland, Slovakia

EAST region | origins of migrant sex workers



Prostitution Mapping 2008 | EAST Region

| Country | 2006 mapping | 2008 mapping | Countries of origin of migrant sex |
|-----------------------|---------------|----------------------|--|
| Austria | 80% migrants | 78% migrants | 2006: Central Europe 70%, Latin America 15%, Africa 15% 2008: Central Europe 50%, Eastern Europe 10%, Latin America 12%, Africa 12%, Asia 10%, Balkan 3% |
| Czech Republic | 65% nationals | 59% nationals | 2006: Eastern Europe 70%, Central Europe 20%, Balkan and Baltic countries 5%, Asia, Africa, and Latin America 5% 2008: Central Europe 50%, Eastern Europe 33.5%, Latin America 7%, Africa: 5%, Baltic 2% |
| Hungary | 80% nationals | 75% nationals | 2006: Balkan countries 50%, Eastern Europe 35%, Central Europe 10%, Asia and Africa 5% 2008: Eastern Europe 50-60%, Central Europe 35-40%, Balkan 10%. There is a high number of Roma among national sex workers |
| Poland | 70% nationals | 66% nationals | 2006: mainly from Ukraine, Russia, Belarus, but also Bulgaria, Moldova, Romania 2008: Eastern Europe 91% (Ukraine, Russia, Belarus) |
| Slovakia | 95% nationals | 98% nationals | 2006: Migrants from Ukraine and Russia. 2008: 50% of migrants from Central Europe, 50% from Eastern Europe. There is a high number of Roma among national sex workers |

National situations in the East Region vary greatly in terms of the extent and diversity of migrant sex worker communities.

Since the EU enlargement, Austria has seen a considerable increase in female sex workers from new EU countries. Despite a slight decrease in 2008, the biggest trend by far is the continued presence of Romanian and Bulgarian women in all regions of Austria. The presence of migrant sex workers from non-EU countries is also decreasing.

- The majority of migrant sex workers in the East Region are from other neighbouring countries of the sub-region (both EU and non-EU states).
- Migrant sex workers are still a minority in the new EU countries. In the only old EU state of the East Region (Austria), migrants still form the majority of sex workers.
- EU expansion has had considerable impact on migration/mobility from the new EU countries within the region to Austria. Due to the informal character of the sex industry in Austria (as it is not part of the formal labour market), citizens from new EU countries now have easier access to work in the sex industry, as they no longer require any kind of visa or work permit as sex workers.
- The new EU countries are being transformed into countries of origin and transit but also of destination – with an increase in different new communities of migrant sex workers. Following the EU enlargement, mobility within the East Region has increased, due to new opportunities to travel legally to other European countries.

- There is an increase in migration in sex work in border regions. There is a lack of support, health and social service provision for the new target groups.
- There is a notable increase in **Roma women** working in the sex industry throughout the region. A new phenomenon is the rising number of African sex workers.

Some country-specific observations

Austria: A clear influence of restrictive policies on migration and sex work in the country is that there is very little new migration from Latin America or other non-EU countries due to legislative changes (in effect since 2006). An exception to this is sex workers from Nigeria who often stay in Austria as asylum seekers and are legally permitted to work in the sex industry. The majority of migrant sex workers in Austria are Romanian and Bulgarian women.

Czech Republic: The Czech Republic is seeing an increase in sex workers from Nigeria, Ghana and Brazil. The majority of sex workers continue to come from Central and Eastern European countries (e.g. Ukraine, Slovakia). The Czech Republic has seen increased mobility of sex workers due to EU expansion. It is also becoming a country of origin, transit and destination. The impact of the restrictive legislation in the Czech Republic is visible in the increased number of sex workers now working indoors.

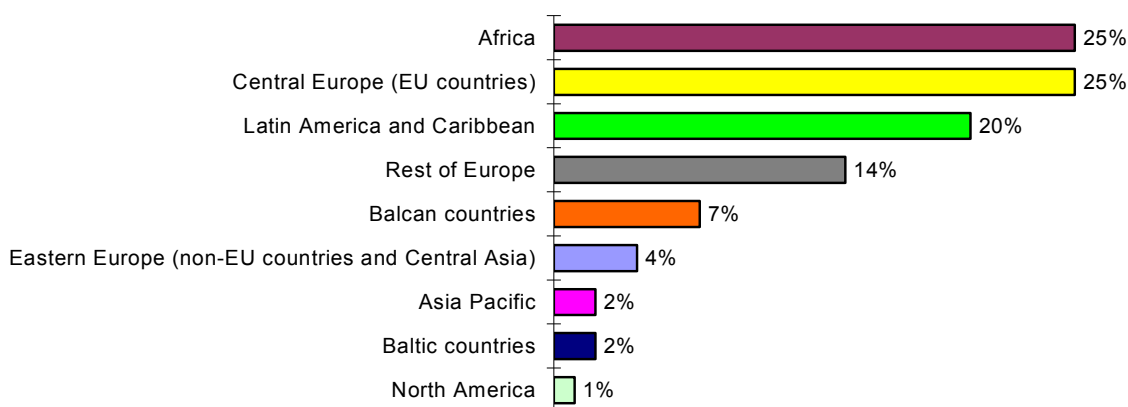
Hungary: Migrants come exclusively from Eastern and Central Europe, with a small percentage from neighbouring Balkan countries. Hungary has also become a country of origin, transit and destination.

Poland: Migratory trends in Poland have changed. Poland has become a transit country for sex workers from Romania and Bulgaria. The biggest group of sex workers in Poland is from the Ukraine. There is also a considerable regional spread regarding migration and sex work within the country. The findings regarding the western part of the country are more detailed, but there is a lack of information regarding the border regions near the Ukraine and Belarus, as well as the eastern part of the country. Poland is still primarily a country of origin, with many Polish sex workers working abroad.

WEST REGION

Belgium, France, Luxembourg, the Netherlands

WEST region | origins of migrant sex workers



PROSTITUTION MAPPING 2008 | WEST Region

| Country | 2006 mapping | 2008 mapping | Countries of origin of migrant sex workers |
|--------------------|--------------|---------------------|--|
| Belgium | 75% migrants | 60% migrants | 2006: Eastern Europe (non-EU) 25%, Baltic countries 25%, Central Europe 15%, Africa 15%, Latin America 10%, Asia 5%, Western Europe 5% 2008: Western Europe 26%, Africa 26%, Central Europe (EU) 15%, Balkan countries 14%, Latin America 9%, Baltic 2%, Asia 1%. Total of 27 different nationalities |
| France | 80% migrants | 61% migrants | 2006: Africa 40%, CEE 30% (non-EU: Albania, Bulgaria, Romania, Ukraine), Latin America 25%, Asia 10% 2008: Africa 40%, Latin America 24%, Central Europe 23%, Western Europe 4%, Eastern Europe 3%, Balkan countries 2%, Asia 2%, Baltic countries 1%, North America 1%. Total of 44 different nationalities |
| Luxembourg | 70% migrants | 92% migrants | 2006: Latin America 55%, CEE 25% (non-EU: Bulgaria, Romania, Russia, Ukraine), Western Europe 10%, Africa 10% 2008: Latin America 25%, Africa 25%, Central Europe 20%, Western Europe 18%, Balkan countries 12%. Total of 33 different nationalities |
| Netherlands | 70% migrants | 60% migrants | 2006: Latin America 35%, Central Europe and Baltic states 32%, Africa 15%, Eastern Europe and Balkan non-EU 8%, Western Europe 5%, Asia 5% 2008: Central Europe (EU) 40%, Latin America 20%, Western Europe 12%, Eastern Europe (non-EU) 8%, Africa 8%, Balkans 4%, Asia 4%, Baltic states 3%. Total of 17 different nationalities |
| Switzerland | 75% migrants | 75% migrants | 2008: L.A. 36%, Central Eur. 17%, Africa 15%, Eastern Eur. 12%, Asia 10%, Western Eur. 10% |

In all countries the majority of sex workers are migrants. Nonetheless, in all countries except for Luxembourg (where the percentage rose from 70% in 2005 to 92% in 2008), the proportion of migrants in the sex industry has declined.

The trend is that there are fewer Latin American and Asian sex workers, predominantly from China and Thailand.

- Another typical trend for this region is high internal mobility between old EU countries, mostly among neighbouring countries. An average of 15% of migrant sex workers in the West region are from neighbouring countries. In Belgium, for example, 26% of all migrant sex workers are from other Western European Countries (France, Luxembourg, Germany, the Netherlands). In Luxembourg this is the case for 18% of all migrant sex workers. In the Netherlands 12% of migrant sex workers are from neighbouring countries.

- There is a visible trend in the shift in countries of origin: from Eastern (2005 data collection) to Central Europe (2008 data collection).

- For example, in the Netherlands sex workers from Central European and Baltic States (new EU countries) form 43% of the entire migrant sex worker population. Although the 2006 mapping revealed the percentage of sex workers from these countries was the highest of the region (32% in the Netherlands), this increase is

remarkable in the face of legislation that seeks to prohibit non-EU citizens from working in prostitution. The increase became particularly visible after Romania and Bulgaria joined the EU. The most significant factor seems to be the enlargement of the EU, as people from the new EU countries no longer require visas to be able to travel within its borders, while stricter conditions for getting visas apply to non-EU citizens. It is also due to the EU policy of strengthening controls for illegal immigration in the border countries.

- African sex workers are a visible part of the sex worker communities in France, Belgium and Luxembourg.

- The migrant sex worker population is highly diverse in this region. For example, France alone reported 44 different nationalities in the migrant sex worker community.

- Of the four regions, the West has the highest percentage of migrant sex workers who previously worked in another country (83%). This includes countries that extend beyond those covered by the TAMPEP regions, including various European as well as non-European countries.

There are various factors that determine this high mobility of migrants in the West region:

- Commonly, the current country of residence is not the first definitive target country.

- There is a constant migration between countries in search of better working conditions.

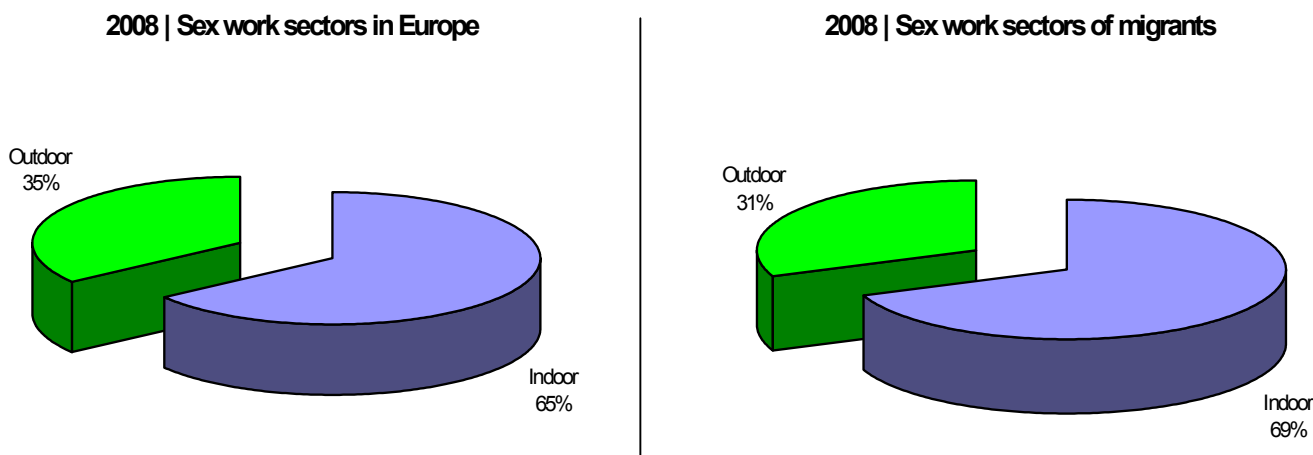
- There is also high mobility between cities, especially among the so-called ‘old groups’ of migrants with their own networks (Latin Americans, Africans).

- In the West Region, 17% of the national sex workers have worked in other (neighbouring) countries. This cross-border aspect of sex work is seen most on the borders between Germany, Switzerland, Belgium, Spain and France.

- The situation in the West Region, which has the highest mobility rate of both migrant and national sex workers, illustrates that in spite of any legal restrictions on migration and sex work, sex workers constantly come and go. The push and pull effects within the sex industry are very strong. There are, however, differences between nationals and migrants, and the migrant sex workers in the West are substantially more mobile. The West has an average level of mobility of transient sex workers within the country.

SEX WORK SECTORS AND SETTINGS IN EUROPE

Since the mapping in 2003, Europe has seen a tremendous shift from outdoor to indoor sex work, following a series of policy and legislative changes that have limited room for manoeuvre in the sex industry. In comparison to 2005, however, the shift in the trend regarding the indoor sector remained quite stable over the last two years.



A little under two thirds of sex workers in Europe work indoors. The more closed character of indoor prostitution and its geographical spread in the major cities make it more difficult for service providers to contact these workers. This includes more rural indoor settings for sex work (in smaller provinces, villages or in the countryside), especially in cross-border areas situated along main trade and transport routes.

New outreach methods and resources are required in order to provide sex workers with outreach services in this more isolated work sector.

Across Europe there have been a significant amount of policy initiatives targeting street prostitution, including restrictions and prohibitions of certain outdoor locations and the criminalisation of both clients and sex workers.

This is one of the reasons for the trend of sex workers moving indoors, even in areas where street prostitution is the dominant traditional setting for providing sexual services. There are, however, differences between nationals and migrants who work indoors. A larger number of migrant sex workers work in fixed venues (where three or more sex workers work) that are more tightly controlled by the owners. However, many owners of fixed venues have become more cautious in allowing migrants to work from their venues, as the tightening of anti-trafficking initiatives and laws means tighter controls on the indoor sex industry.

For this reason, there has also been an increase in migrants working for escort agencies. Working indoors from a window or apartment can involve high overhead costs for newspaper or Internet advertising and in some cases also additional rent fees for those working from their own spaces. Nonetheless, a fifth of all migrant sex workers and a quarter of all national sex workers across Europe work indoors in apartments or windows.

The number of migrant sex workers from the new EU countries on the street has increased as well, as many seek better working conditions and to improve their economic situation through independent sex work on the streets in other countries. The 'new' status of being an EU citizen, less subject to deportation or migration regulations, has made this highly mobile group among sex workers more visible even in outdoor settings.

The overall movement from the street to indoors, however, points to a restructuring of

the entire sector of sex work, with greater autonomy for those working on their own terms from apartments, advertising through Internet or other media.

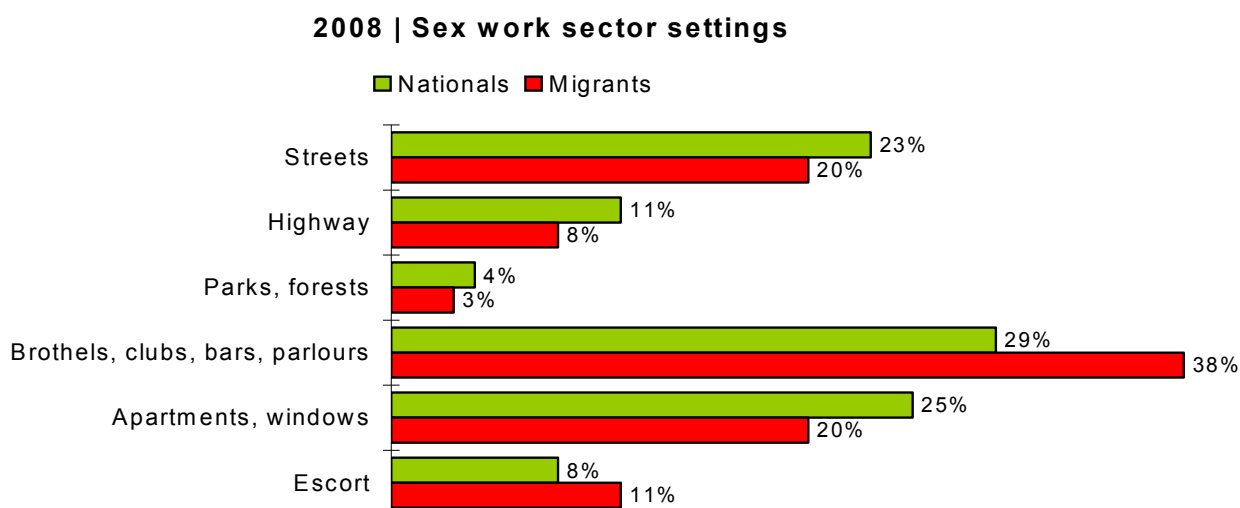
In terms of regional comparison within Europe, the most visible difference between sex workers who work indoors and outdoors is between the West and North Regions where 73% and 72%, respectively, work indoors; and in the South and East Regions where only around half of all sex workers work indoors (East Region 60%; South Region 55%).¹⁸ In the South and East regions it is crucial to note that the percentage of indoor prostitution could indeed be underestimated due to two factors:

- the low coverage of outreach services in indoor settings, because the majority of sex work projects target street-based sex workers and,
- there are rapid changes in the location of the indoor sex industry.

The workplaces are continuously being relocated, for example to apartments and bars, which makes mapping sites of prostitution more difficult. Nonetheless, there is also a clear trend of sex work moving indoors in the South region too: until 2004, outdoor prostitution constituted an average of 80% for the region, while in 2005 this went down to 52%, and in 2008 less than half (45%) of sites of prostitution were outdoors.

For migrant sex workers who are in a socially and legally more vulnerable position, the difference between working indoors and outdoors is often connected to strategies to sustain their living and working situation. This is particularly the case for undocumented migrant sex workers. The above table on sex work sectors in Europe shows that across Europe slightly less migrants work outdoors. However, at 31%, the percentage of migrants now working on the street is higher in comparison to 2005, when only 26% of migrant sex workers were street-based.

Since the accession of Bulgaria and Romania to the EU, many migrant sex workers from these countries are less restricted due to their new legal situation. In addition, street work enables them to work occasionally and change their location when they choose, creating a higher degree of mobility.



¹⁸ The percentage given for the indoor and outdoor sectors in the four regions is the average for countries across each region. It is important to take into account that the differences in percentage between indoor and outdoor are remarkable. For example, in the East region, 85% of sex workers in Austria work indoors, as opposed to around 30% in Slovakia; while in the North region, 90% of sex work in Finland takes place indoors compared to 43% in Lithuania. In the West region, 92% of sex work in the Netherlands is indoors and 39% in France. And in the South, in

■ **Indoors:** 65% of sex work takes place indoors, mainly in brothels, private flats, bars and massage parlours. This chiefly has to do with the fact that the indoor setting renders them less visible. Most migrant sex workers are active in sectors of the sex industry that are more dependent and bound to organisers of their workplaces, such as the owners of brothels, bars and parlours (almost 40% of all migrants) or visiting services (11% of migrants). Within the indoor sector, the most common independently organised and self-employed forms of sex work are those working from apartments or in windows, i.e. locations used by no more than two sex workers. A quarter of all national sex workers — in comparison to a fifth of all migrants — work in this more independent setting.

■ **Outdoors:** Due to the precarious legal situation of many migrants, they often choose to work in places subject to less policing and controls. Although they have a certain amount of visibility in public spaces, there are still slightly fewer migrants working on the streets in urban areas or along the highways outside towns.

■ Only approx. 35% of sex work takes place outdoors, the bulk of which is on the streets in cities and towns (20-23%). There is also a noticeable trend towards an increase in street-based sex work outside urban areas and towns, along highways, in border areas where there is a high mobility of clients and/or transport (for example, rest areas for truck drivers), parks, forests and/or other rural areas. The increase in street-based sex work outside the cities — in the 2006 mapping only 7% of national and 3% of migrant sex workers were active in street-based sex work by highways, roads etc. — is due to the increase in policing initiatives and municipal decrees prohibiting sex workers from working in traditional areas of outdoor prostitution. This has resulted in a significant increase in sex workers working in riskier outdoor locations outside city limits or in parks and forests where there is less likelihood of being discovered by the police.

■ The outdoor sector is often a place where drug-using sex workers are active, the majority of whom were reported to be nationals, a common phenomenon in all of the EU countries. It is common that drug users engaging in sex work also support their partners' drug dependency as well as their own. They are generally less mobile and more bound to their own communities and environments. They are one of the most vulnerable groups in terms of HIV/STIs, the highest-risk group being injecting drug users, as they face dual stigma and discrimination as drug users and sex workers, and most commonly have very little control over their working conditions. Due to a combination of chaotic lifestyles, multiple needs, high-risk behaviour and/or isolation, drug-using sex workers comprise a group in need of very specific services and attention.

Bulgaria 90% of sex work is indoors versus 36% in Romania. For details, see the National Mapping Reports.

Situation of sex workers¹⁹

This section of the *European Mapping Report on Prostitution* provides an assessment of the situation of sex work across Europe and takes a look at the vulnerabilities on many different levels. It is necessary to take a look at the overall findings and trends in order to understand how these factors interact with and exacerbate risk and compromise workplace health and safety.

This section provides an overview of the situation of sex workers in Europe with the assessments of their **work conditions**. It addresses central **vulnerability factors** (control over one's own working conditions, percentage of actual income that goes to the sex worker, condom use and safer sex practices, violence, drug and alcohol dependency) in addition to pinpointing the top five vulnerability factors among national and migrant sex workers, including recommended measures to decrease the major factors of vulnerability.

VULNERABILITY FACTORS AND WORK CONDITIONS

'... In most countries, discrimination remains legal against women, men who have sex with men, sex workers, drug users, and ethnic minorities. This must change. I call on all countries to live up to their commitments to enact or enforce legislation outlawing discrimination against people living with HIV and members of vulnerable groups... In countries without laws to protect sex workers, drug users, and men who have sex with men, only a fraction of the population has access to prevention. Conversely, in countries with legal protection and the protection of human rights for these people, many more have access to services. As a result, there are fewer infections, less demand for antiretroviral treatment, and fewer deaths. Not only is it unethical not to protect these groups: it makes no sense from a public health perspective. It hurts us all.'

Ban Ki-moon, Secretary-General of the United Nations²⁰

¹⁹ For more detailed information on the legal frameworks in each country, please refer to the TAMPEP 8 publication dedicated to the compilation and analysis of this issue called *Sex Work, Health, Migration* (2009). We have, however, included an assessment of the impact of these changes in legislation on the specific behaviour of sex workers since the TAMPEP mapping of 2006.

²⁰ Address of the Secretary-General of the United Nations to the International AIDS Conference, Mexico City, 3 August 2008.

'... Twenty years of experience has shown that effective HIV prevention, treatment, care and support for sex workers is possible with their meaningful and active involvement. However, in many parts of the world, sex workers are amongst the most vulnerable to HIV and STIs. There is an urgent need to expand successful interventions that have been shown to reduce unprotected commercial sex, HIV and STIs among female, male and transgender sex workers and clients...'

The Global Working Group on HIV and Sex Work Policy²¹

Unsafe sex in sex work settings is never context-free. Knowing how to use a condom correctly and protect oneself from HIV does not always empower people to put that knowledge into practice, particularly in sex work settings. A sex worker's degree of autonomy and the conditions under which sexual services are offered directly affect their vulnerability and susceptibility to HIV infection. In favourable environments, a sex worker can have absolute control over clients, safer sex practices and condom use, but in less favourable environments the same sex worker does not have the same autonomy, particularly if **controlled by a third party** or subject to **clampdowns** or **harassment by law enforcement**. It is not the actual selling of sexual services as such that determines the levels of risk — it is the **social determinants, working conditions** and other contextual factors. In this respect the social, legal and economic frameworks are particularly important.

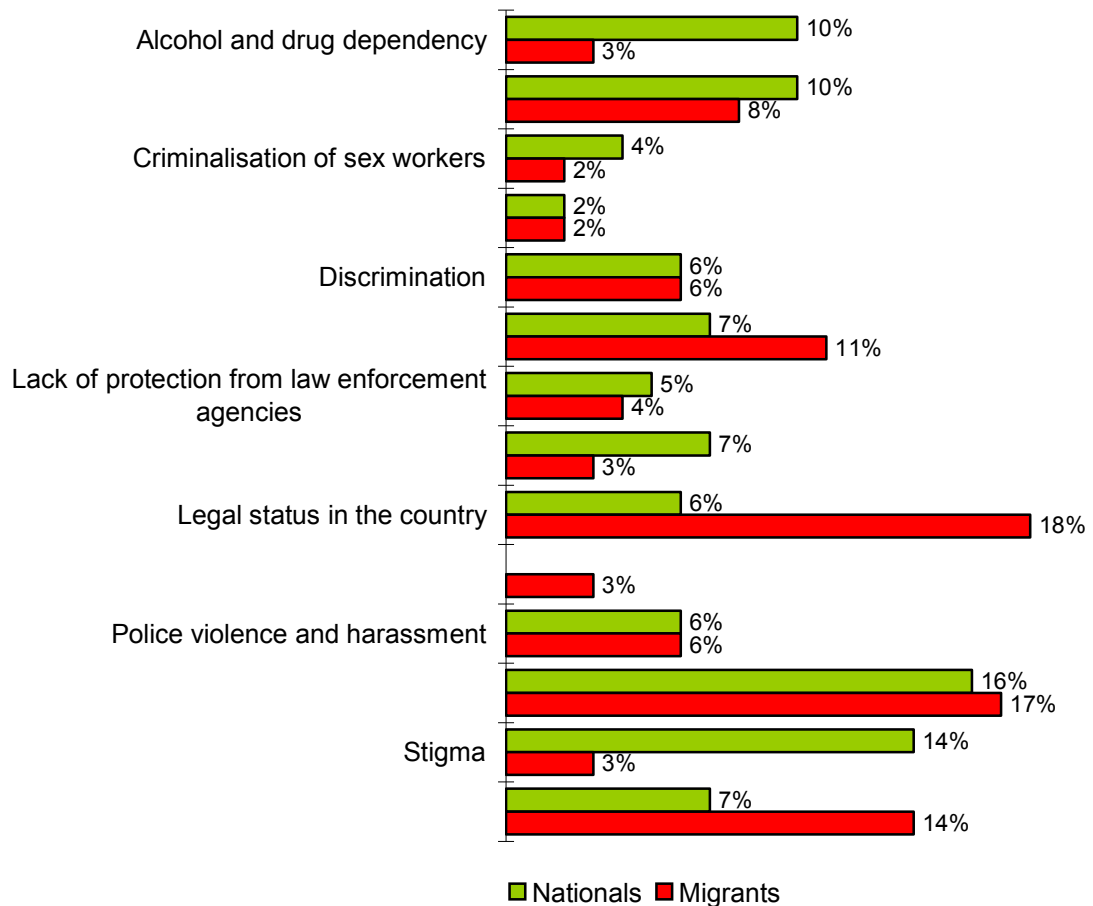
Local attitudes towards sex and sexuality as well as public campaigns and measures concerning sex work also play an important role in shaping the market for sexual services. Services are therefore provided in a wide range of settings, some of which are more stable while others change more frequently. This also creates the backdrop for stigma and discrimination of sex workers in their everyday life and equal access to social and health services and protection from violence. Sex work venues are sometimes highly visible while others are fully hidden. In the section above, it is clear that different work settings (for example, indoor and outdoor) influence the working condition of all sex workers, and the extent to which they are able to take control of their own working environments greatly depends on their work setting.

Stakeholders include male, female and transgender sex workers, their clients and regular partners, business owners and other intermediaries. Sex work settings may involve transient, migrant and mobile populations of both sex workers and clients, or more permanent local communities. While the third section of this report on mobility offers a great amount of information regarding the current trends of mobility and migration in sex work, this section offers a detailed account of the current trends in vulnerability based on the findings in the 2009 National Mapping Reports.

The table below portrays the main factors of vulnerability with a comparison between national and migrant sex workers throughout Europe. This overview of the main factors of vulnerability among sex workers is based on the options selected by respondents to the questionnaire. The picture presented is of global figures of vulnerability and their corresponding figures across Europe. Below are analyses of the greatest factors for both national and migrant sex workers. For a detailed analysis of the situation in each of the 25 countries, see the TAMPEP 8 National Mapping Reports (see Annex 4).

²¹ The Global Working Group on HIV and Sex Work Policy. Inputs to the UNAIDS Guidance Note on HIV and Sex Work, April 2007; Supporting the UNAIDS Programme Coordinating Board recommendation, June 2007; NSWP September 2007

Main vulnerability factors for NATIONAL sex workers



The five most frequently named factors of vulnerability among the respondents were: violence from clients, police and organisers within the sex industry (23%); social exclusion (16%); stigma (14%); drug and alcohol consume (10%); lack of labour rights and lack of access to health and social care services (both 7%).

Violence

A significant number of sex workers — as mentioned by almost a quarter of respondents — are affected by violence from clients (10%), police (6%) and organisers within the sex industry (7%). Violence covers a broad spectrum of threats to a person’s physical and psychological well-being, and ranges from physical attacks to extortion, affecting those working both indoors and outdoors in the sex industry. Many additional factors tie in to the issue of violence, particularly crackdowns on prostitution through new laws that enable increased (legal) discrimination, exclusion, isolation and

criminalisation of sex workers, rendering them easy targets for criminals, robbery, extortion and hate crimes.

Necessary approaches to reduce violence

- Combat the social exclusion of sex workers, first and foremost by decriminalising their work.
- Create programmes that enable sex workers to network, form communities and exchange experiences and information, increasing professionalisation and protection from further isolation.
- Develop and implement remote reporting and early warning systems designed to support and encourage sex workers to report violent incidents.
- Provide training for police on how to deal with reports of violence against sex workers.

Social Exclusion

The high degree of stigmatisation and resulting discrimination against sex workers lead to wide-reaching social isolation and exclusion of sex workers (16%), as many are hesitant to speak about what they do and known sex workers are often ostracised within their local community. Cutting funding to service providers which approach sex work in a non-judgemental manner also reduces the coverage of outreach and support, solidifying the social exclusion of sex workers.

Necessary approaches to reduce social exclusion

- Develop resources, provide and disseminate information on sex workers' rights, and create public campaigns to promote respect for sex workers.
- Empower sex workers and combat exclusion by encouraging or facilitating the formation of networks, communities and alliances that make it possible to circulate information about sex workers' rights.
- Provide long-term funding for sex worker-positive initiatives, with a physical space where sex workers can come together. Establishing places for sex workers to meet and network outside their working environments creates stability outside otherwise constantly changing social and working conditions.

Stigma

Sex workers constantly face judgement for not having made an 'acceptable' decision on how to earn a living through choosing to sell sexual services. Although sex work itself is not a criminal offence across Europe, stigmatisation of sex workers is increasingly socially and legally 'acceptable' in many countries, for instance through discussions on bills or laws that seek to criminalise those working in the sex industry as well as sex workers' clients.

Necessary approaches to reduce stigma

- Encourage policy-makers to recognise sex work as a formal occupation and make laws and regulations to protect sex workers' rights. Within this context, there is a need for governing bodies to listen to sex workers lobbying for their rights, in all their diversity, and particularly to consider their experiences and demands when developing policies that affect them.

Drug and Alcohol Use

Drug dependency among sex workers on the street is very high. Across Europe, one tenth of all respondents said that national sex workers use drugs and alcohol. In addition, many sex workers work to support their partners' drug dependency in addition to their own. Financial pressures due to dependency make them more likely to take risks when engaging in sex work. A great deal of injecting drug users have an increased risk of HIV infection, while mixing different drugs inhibits sex workers' capacity to negotiate condom use and ensure safe working conditions.

Necessary approaches to reduce drug and alcohol use

■ Ensure that drug harm reduction services are maintained within sex work projects working with street-based sex workers. In addition, more drug treatment options must be available to sex workers than simply the provision of substitute prescriptions and abstinence programs.

Lack of Labour Rights and Access to Social and Health Care Services

Since the 2006 mapping, a significant number of sex work projects across Europe lobbying for the (labour) rights of sex workers and providing access to specialist health care services have had to close. Lack of labour rights and access to social and health care services were each selected by 7% of respondents, making them the joint fifth highest factor of vulnerability. There has been a significant restructuring of social welfare systems throughout Europe and limitations placed upon many essential health and social services. Receiving the full range of public health insurance is difficult for sex workers, as their activities are not formally recognised on the labour market or represented in labour rights discussions. Because sex work is not formally recognised as a profession — with the exception of Germany and the Netherlands — there are no programmes or policies that support the health and well-being of sex workers.

The dramatic increase in the privatisation of public social and health care services throughout Europe has created additional barriers — not only economic ones — for sex workers in accessing these services. This is a particularly problematic shift given that the legal trend towards criminalisation has increased vulnerability through its elimination, rather than protection, of sex workers' rights to a safe and secure working environment. Social exclusion and stigmatisation contribute to the inaccessibility of social and health care services.

Necessary approaches to combat the lack of labour rights and increase access to social and health care services

■ Ensure specialist health care services are maintained, properly funded and staffed. It is essential that sex work projects are able to refer sex workers to reliable and safe health care providers.

■ Include sex work as part of the diversity and equality training that is made available to all health care workers, from the administrative to the practical level.

■ Recognise sex work as a profession and develop policies that empower sex workers and work towards improving their working conditions as well as ensuring their right to organise.

Main vulnerability factors for MIGRANT sex workers

The five most frequently named factors of vulnerability for migrant sex workers were: violence (28%); legal status (18%); social exclusion (17%); lack of access to health and social care services (11%); discrimination (6%).

Violence

Migrant sex workers are even more vulnerable to violence than national sex workers, as perpetrators often assume that they are less likely to report crimes of violence or robbery to the police. Due to the shaky legal grounds on which migrant sex workers stand, there is a higher amount of violence from clients (8%), the police (6%) and most notably from organisers or intermediaries in the sex industry (14%). The presence of violence from organisers as a factor shows that migrant sex workers are much more likely to be under threat of coercion, extortion and other violent forms of control over their work situation. Undocumented migrants in particular are often the targets of violence on many levels.

Necessary approaches to reduce violence

- Implement an immigration amnesty for migrant sex workers reporting crimes of violence or abuse from the police, in order to afford them the protection of law enforcement agencies, which is their fundamental right.
- Develop multi-lingual reporting mechanisms for filing reports of violence.
- Create opportunities for empowering sex workers through increasing multi-lingual outreach and specialised service providers. Ensure ample opportunities to access important legal information and counselling, as well as networking and community opportunities to exchange experiences and strategies of dealing with violence with other sex workers.

Legal Status

Although many migrant sex workers have legal residence permits in the countries in which they work, sex work is often not a recognised formal occupation and is therefore not largely eligible for applying for a legal work permit. The tightrope between undocumented, documented, and partly legal status (e.g. residence but not work permits, tourist visas but not residential permits) puts migrant sex workers at increased risk of abuse and multiple forms of discrimination, and prevents them from accessing vital services, including health and social services as well as reporting instances of abuse. The trend towards tightening restrictions on entering and residing in any country in Europe in conjunction with the increased criminalisation of sex work puts migrant sex workers in a dually precarious legal situation.

Necessary approaches to reduce vulnerability based on the legal situation

- Across Europe, governments must recognise sex work as an occupation or put a stop on deporting or expelling sex workers without work permits.
- The ILO Conventions around migration and migrants' rights must be signed and complied to, offering full protection to all migrants.

Social Exclusion

Mentioned as one of the top factors, discrimination on an everyday basis due to migrant background, ethnicity, gender, and/or social status, compounded with racist preconceptions that mark migrants from the very beginning as ‘others’, contributes to social isolation and exclusion. This is even more so the case for undocumented migrant sex workers. Isolation within one’s own working environment, particularly those working in closed settings, makes it extremely difficult for migrant sex workers to better understand the social context and environment in which services might be accessed. Language barriers provide an additional hurdle to accessing support, services and social activities.

Necessary approaches to reduce social exclusion

In addition to the measures required to address the social isolation and exclusion of national migrant sex workers:

- Implement public campaigns to promote respect for migrants as valued members of the community.
- Besides translating local information into different languages, ensure that service providers have cultural mediators available to enable migrants to access low-threshold, accurate and concise information and assistance in all areas of their lives.
- Ensure the protection of sex workers’ labour rights, so that they can self-organise as a way of representing themselves on the labour market and in society at large.
- Ensure that networking and community-building opportunities are available and accessible to sex workers.

Lack of access to health care and social services

Although all migrants supposedly have access to sexual health clinics free of charge in almost every country in Europe, many are not aware of these services or are concerned that they may have to provide information about their activities as a sex worker that may not be treated in a confidential manner. Access to specialist public health care and services requires the beneficiary to be within the system, meaning full registration of their personal data, and requires them to have all the proper legal permits if they come from another country. Many migrants are not part of the system and fear any input of their data may endanger their living and working situation in that country, resulting in deportation, expulsion or ban of residence. Additionally, there is a great lack of knowledge about the health care systems and ways of accessing affordable or free services.

Necessary approaches to increase access to health care and social services

- Disseminate information widely, including within informal networks and smaller communities, about free, confidential and/or anonymous health care and social services wherever they are available.
- Provide multi-lingual resources and employ cultural mediators to inform migrants about their rights in relation to accessing health care services in the private sector.

Discrimination

In a similar way that the stigmatisation of national sex workers makes them highly vulnerable, the barriers faced by migrants on a day to day basis in accessing social,

legal and economic equality are disproportionately high. For this reason, many other factors of their lives are compounded through their activities as sex workers, which intensifies discrimination. This factor is closely linked to the lack of access to health and social services and particularly to social exclusion and vulnerability due to their legal status. A discriminatory system lies at the basis of who is permitted residence and work opportunities in another country and who is not.

Necessary approaches to reduce discrimination

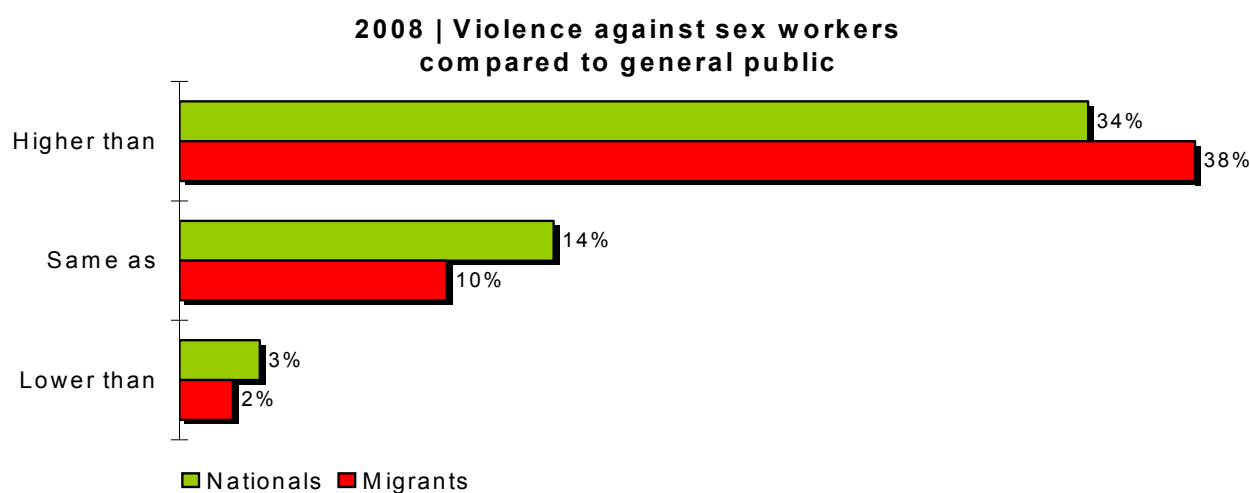
- Counter social exclusion and encourage community building and the formation of networks through supporting self-organised migrant groups and sex worker groups, who have the specific expertise and experience in developing and disseminating strategies to combat discrimination of migrant sex workers.
- Provide specialist services and new opportunities for education, cultural mediation and professionalisation of mobile and migrant sex workers, enabling them to gain access to networks and form alliances to combat discrimination themselves, instead of asking others to act on their behalf.

These top five factors of vulnerability are related to three specific factors that affect the safety and well-being of sex workers. Below, some forms of behaviour were assessed in order to see to what extent sex workers, in comparison to the general population, are impacted violence and other crimes, drug and alcohol dependency, and condom use.

Sex workers' workplaces often entail breaches of a number of rights, including labour rights, the right to personal integrity, protection from harm and violence, the right to a safe and healthy working environment and to the income earned. The professional risks for sex workers in Europe become even higher when external forces, such as legislation, law enforcement and organisers, have control over the work settings.

There is often a great lack of self-determination, independence and autonomy of the individual sex workers, or sex workers organising as businesspersons to decide on their own working conditions are frequently undermined, contributing further to vulnerability. The goal of TAMPEP is to reduce the vulnerability of all sex workers, nationals and migrants.

VIOLENCE AGAINST SEX WORKERS

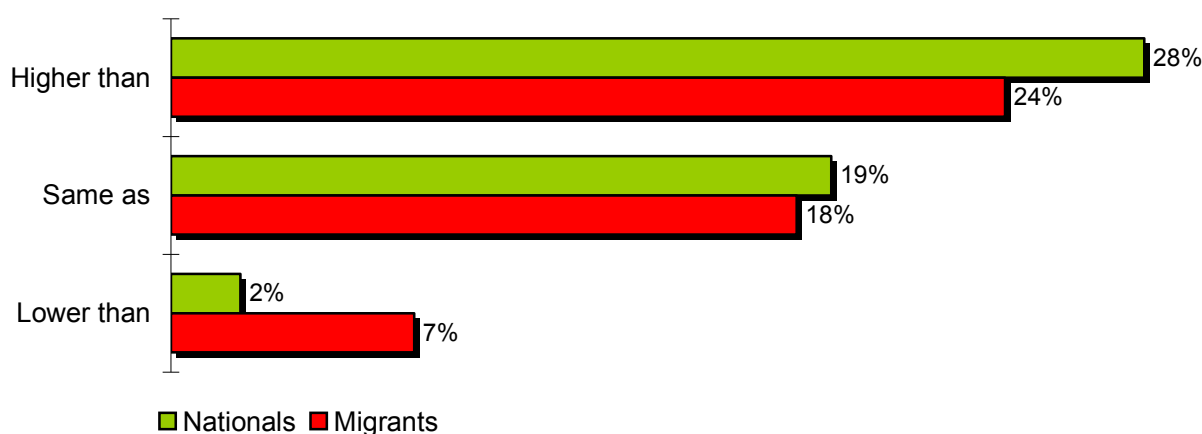


Protection from violence in the workplace is an important issue across Europe, but in sex work, there have been very few improvements in this area. Violence from clients, police and sex industry organisers arises from the control they are able to have over the sex workers, whose power of negotiation is undermined through their fundamental lack of rights and support compounded with, as mentioned above, stigmatisation, discrimination, etc.

According to the respondents, sex workers' working environments, in comparison to those of the general public, are generally over a third less safe. To the knowledge of 38% of the respondents, a disproportionate level of violence affects migrant sex workers. In addition, 34% of respondents believed that national sex workers are also exposed to more violence than the general population.

DRUG AND ALCOHOL DEPENDENCY

2008 | Drug and alcohol dependency compared to general public

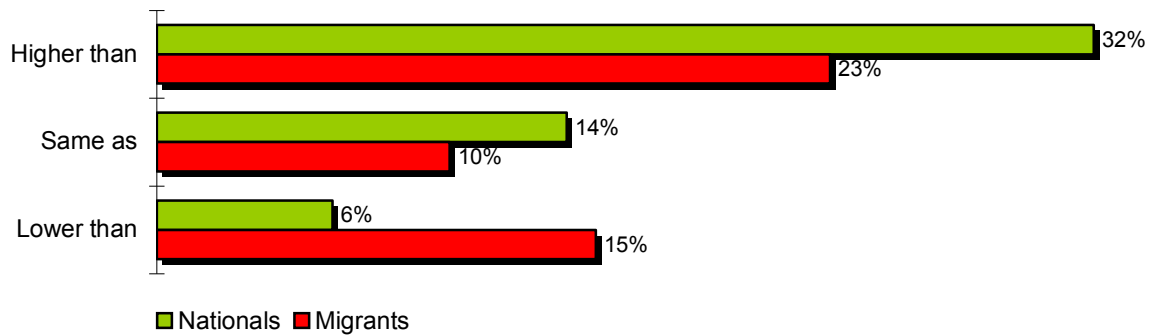


The professional risks of sex work also include a higher level of drug and alcohol dependency. Prompted by clients, pressured by club owners, sex workers are often 'required' to consume alcohol as part of their job, or even join in taking drugs. In an independent working environment, where self-employed persons decide on their own work conditions, it is much easier to determine one's own boundaries; however, when exposed to coercive work conditions controlled by others, as is the case for many sex workers, particularly migrants, the risk of drug and alcohol abuse increases.

Of the respondents, 28% reported that drug and alcohol use is higher for national sex workers than among the general population, and 24% said the same for migrant sex workers. Drug and alcohol use have further detrimental effects on sex workers' ability to earn an income and to negotiate with clients, and can also be used as leverage to coerce them into further harmful situations. In addition to the risks inherent in drug and alcohol use, there is a great amount of social stigma attached to drug users, which, when compounded with sex work and/or migration, makes for increased vulnerability.

CONDOM USE AND OTHER SAFER SEX PRACTICES

2008 | Condom use and other safer sex practices compared to general public



Sex work entails the use of condoms and other safer sex practices. 32% of respondents reported that in comparison to the general public, condom use is much higher among national sex workers. However, only 23% of respondents reported that condom use and safer sex practices among migrant sex workers is higher than among the general public. Condom use is not only an issue of education and willingness; it is also connected to the capacity of sex workers to be able to provide services on their own terms.

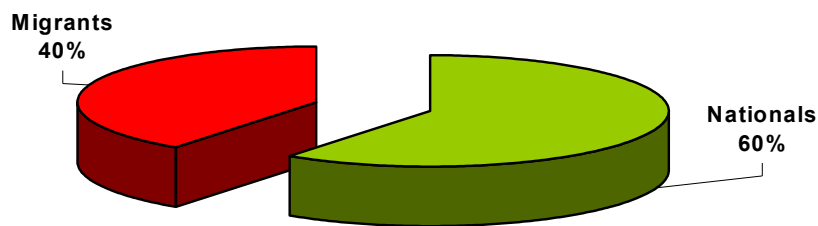
There is also an ongoing demand for unsafe sex and sexual services. Clients, intermediaries and organisers in the sex industry heavily influence decisions and practices of not using condoms or otherwise engaging in unsafe sex. The most vulnerable group here are migrants with an irregular legal status, which heavily affects the safety of the circumstances in which they work. With condom use by migrant sex workers estimated as being 15% lower than the general public, a fundamental risk for this group is clear; it may be attributable to language barriers in negotiating safer sex or condom use with clients, along with financial pressure and/or coercive conditions of their sex work.

The high vulnerability of migrant sex workers regarding condom use and safer sex is also due to contradictions between public health policies and forms of harassment by law enforcement agents, who are known to confiscate condoms from street-based sex workers or to use the fact that sex workers had condoms in their possession as evidence that they were planning to provide sexual services. This not only results in worsening their working conditions, but also in fines or, in cases of undocumented sex workers, sometimes deportation.

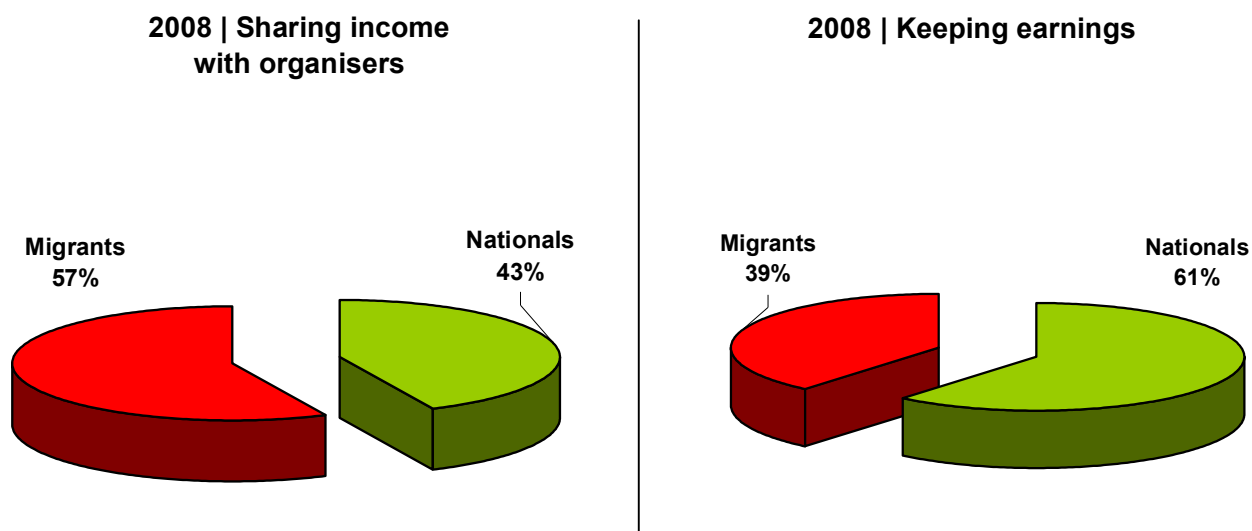
CONTROL OF WORKING CONDITIONS

The safety and protection of sex workers can be further assessed by analysing the control they have of their working conditions, the amount of their income they have to share and the amount of income they are entitled to keep.

2008 | Control of working conditions



- Only about 60% of national sex workers and 40% of migrants have control over their working conditions. This low figure for migrants correlates with high levels of violence from sex industry organisers and intermediaries, as those controlling their working environments often capitalise upon their specific vulnerability.
- This underscores an extremely high level of dependency among sex workers, rendering them more vulnerable to violence and exploitation. Dependency also means a lack of control regarding safer sex practices, less opportunity to negotiate condom use with clients, and very limited scope for changes in behaviour. Compounded by the dependencies arising from controlled work situations, migrants also frequently face significant restrictions in applying for or maintaining legal permits for work and residence.
- Nationals, too, are greatly affected by a lack of control of their own working situations, making this a main issue of critical concern in seeking to improve the living and working conditions for sex workers.
- One aspect of the control of working conditions is the control over income earned through sex work. Less than half of the nationals in sex work were reported to share their income with ‘organisers’, in comparison to almost 60% of the migrants. The fact that a majority of migrants are not in control of their working situation or income underscores a heightened vulnerability on a very substantial level.
- The most highly controlled working conditions are recorded for migrants in the North Region - at 66%, this is slightly higher than the overall European level of 60%. The West Region appears to be the only one where the difference between controlled working conditions for migrants and nationals is fairly balanced (migrants 49%, nationals 51%). Nonetheless, this shows that at least half of all sex workers are not working independently on their own terms, which makes them more vulnerable to exploitation, violence, coercion into use of drugs and alcohol, unsafe sex etc. This also means that they share income with organisers (see table below).



■ Sharing income with organisers and intermediaries means longer work hours to make the same money as those who are not obliged to share their earnings. Those who earn a full income, therefore, constitute a more privileged group among sex workers in Europe, especially among migrant sex workers.

■ Regional differences are quite large. In the North and South Regions, more than a third of nationals share their income in comparison to three quarters of migrant sex workers. Of all the regions, the most balanced picture of migrant and national sex workers is the West Region, where roughly half of each population shares their income with organisers.

■ As the earnings are not in the hands of the (migrant) sex workers themselves, as represented in the pie chart below, even fewer than 40% of migrant sex workers are reported to keep their earnings, underlining the fact that they frequently work in an environment where others are in control of their working situation. This points to high levels of dependency of migrant sex workers on third parties - see, for example, the figures above on the extent to which third parties control migrant sex workers' working conditions. The economic pressures that migrant sex workers face are often high, due to and compounded by a high level of vulnerability in terms of their legal status. For example, migrant sex workers are more frequently the target of exploitative and extortionist intermediaries on whom they rely to find or stay in a workplace. For transit or negotiation with workplaces, intermediaries often demand a high percentage of sex workers' earnings as payment. Besides such circumstances, sex workers often pay a percentage of their earnings to stay in their workplace, particularly within closed settings.

■ However, we cannot compare economic data between national and migrant sex workers in terms of 'net' income or with remuneration for other forms of employment. It could be interpreted as a signifier of more exploitation in sex work, but it depends on working conditions, facilitating services and total income in general. For example, in other labour sectors it is frequently the case that 40% of direct income is overhead cost. Few economic studies are carried out on the volume of the sex industry sector, on all the satellite industries (taxis, advertising, sales of sex industry products, etc.), on the

general economic impact and on the median income of the workers. We cannot truly see how the earnings of sex workers are positioned in comparison to the overall revenues of the industry, as these are unknown or uncounted.

■ A regional comparison across the board shows that approximately two thirds of all national sex workers keep their earnings; for migrants, however, the situation is exactly the opposite. Throughout Europe, only a little over a third keep their own earnings, regardless of the region in which they work.

CHANGES IN VULNERABILITY

The questionnaire included estimations of levels of vulnerability of national and migrant sex workers across Europe, asking the respondents to estimate if it had increased, decreased or remained the same within the last year.

| | DECREASE | | SAME | | INCREASE | |
|--------------------------------------|-----------|----------|-----------|----------|-----------|----------|
| | Nationals | Migrants | Nationals | Migrants | Nationals | Migrants |
| Condom use | 18% | 15% | 54% | 63% | 27% | 21% |
| Drug alcohol use | 8% | 6% | 67% | 67% | 27% | 26% |
| Violence | 11% | 5% | 67% | 58% | 22% | 38% |
| Legal status | 4% | 16% | 86% | 52% | 9% | 32% |
| Working conditions | 9% | 15% | 64% | 55% | 28% | 30% |
| Level of literacy education | 4% | 13% | 86% | 72% | 11% | 16% |
| Living conditions | 9% | 12% | 76% | 64% | 15% | 25% |
| Social exclusion isolation | 8% | 5% | 73% | 55% | 19% | 38% |

Condom Use

The chart above shows that the majority of respondents reported no relevant changes in condom use, for either nationals or migrants. There is a noticeable increase in vulnerability among nationals (27%). The slight decrease in vulnerability, both for migrants (15%) and nationals (18%), can be attributed to improvements in countries where outreach programmes have been successful in their education and dissemination measures, especially for national sex workers.

Drug and Alcohol Use

Sex workers' levels of vulnerability in terms of drug and alcohol use are similar to those regarding condom use. The majority of respondents did not see a decrease or increase. However, there is a new trend towards an increase in alcohol and drug use, as it is now more equal between nationals and migrants, whereas in the past it was more noticeable among nationals.

Violence

While the majority of respondents reported no change in vulnerability in regards to violence, an alarming 22% reported an increase for nationals and an even higher 38% for migrant sex workers. This corresponds with details above on the top five vulnerability factors, where violence (from clients, police and sex industry organisers) was the top factor for both migrant and national sex workers.

Legal Status

Regarding the vulnerability of sex workers due to their legal status, 32% of respondents report an increase in migrants' vulnerability. This particularly refers to non-EU migrants who have been hit hard by increased restrictions on migration, tracking and border controls. Undocumented migrant sex workers are most affected. In contrast, 16% of respondents reported that migrants are now less vulnerable based on their legal situation. Again, this can be attributed to improvements in the legal status of migrants from the new EU countries, which has fundamentally improved since they joined the EU in 2007.

Working Conditions

Vulnerability based on sex workers' working conditions has increased for nationals (according to 28% of respondents) and for migrants (30%). On the one hand, the difference between nationals and migrants is noticeably small, which points to a general vulnerability of all sex workers due to unfair working conditions. For migrants, this is compounded or partly attributable to their legal status. And for the migrants from new EU countries, working conditions have somewhat improved, resulting in a response of 15% who felt that there was a decrease in the vulnerability of migrant sex workers due to working conditions.

Level of Literacy and Education

Levels of vulnerability due to a low level of literacy and education among migrant sex workers are seen by 16% of respondents as having increased, while a majority (86%) of respondents find that nationals' vulnerability has remained unchanged, meaning the situation has only marginally improved. This points to a great lack of outreach programmes that address this issue, causing a huge gap in the provision of literacy and education for sex workers in general.

Living conditions

Living conditions are also fundamental to one's quality of life and well-being. The majority of respondents have not seen any great changes in vulnerability due to living conditions, while 25% of all respondents reported an increase in the vulnerability of migrant sex workers in this regard. This links in with an increase in harsher restrictions and regulations on migration and prostitution and the increased vulnerability of migrants in terms of their working conditions and legal circumstances. Many migrant sex workers live in their place of work. The overall increase in mobility and sex workers looking toward indoor settings for work result in greater social exclusion and isolation, particularly for migrants. On the other hand, 12% of respondents saw a decrease in the vulnerability of migrant sex workers due to their living conditions. This

also points to the improved legal standing of migrant sex workers from new EU countries, as they now have the right to residence which affords them more options for finding housing and improving their living conditions.

Social exclusion

Social exclusion and isolation is on the rise. 38% of respondents report that migrant sex workers' vulnerability has increased due to their social exclusion. And a mere 5% of respondents reported a decrease. This can be explained along the same lines as the increases in vulnerability due to legal situation, working and living conditions, as they are all interrelated factors that also lead to violence and risky behaviour such as not using condoms, or drug and alcohol dependency.

CHANGES IN POLICY OR LEGISLATION

The vast majority of the 25 countries report that recent policy and legislative changes on all levels have had negative consequences for both migrant and national sex workers, despite the recent improvements for migrant sex workers from the new EU countries.

The changes in policy or legislation here are expressed on the national, regional and municipal levels, which each affect national and migrant sex workers across Europe. The table below shows the estimation of the respondents regarding changes in policy and legislation within the last year and how they impact national and migrant sex workers' working and social conditions.

| | POSITIVE | | NO CHANGE | | NEGATIVE | |
|-------------------------------------|-----------|----------|-----------|----------|-----------|----------|
| | Nationals | Migrants | Nationals | Migrants | Nationals | Migrants |
| Changes in national policies | 11% | 12% | 62% | 59% | 27% | 29% |
| Changes in regional policy | 9% | 7% | 69% | 69% | 22% | 23% |
| Changes in municipal policy | 10% | 9% | 59% | 57% | 31% | 33% |

The vast majority of respondents report no great changes regarding the impact of national-level legislation and policy on national sex workers. However, there is a significant negative impact on migrant sex workers. Both Finland and Norway have enacted national laws criminalising clients, which have had a decisively negative impact on sex workers in general (a reported 30% for migrant and 27% for national sex workers).

The trend is more tangible on the municipal level, as the majority of the countries have chosen to implement prohibitionist measures against prostitution and/or major controls on the legal status of sex workers. Most of these ordinances argue that they are necessary to uphold 'public safety' (for example, in Italy or Spain) and have led to the large-scale removal of undocumented sex workers from their workplaces and of sex workers in general from the streets or other public places.

The repercussions of these measures have also created a shift in the debates, from public health to public order, thereby reducing the scope of action for sex workers' organisations and particularly the funding of organisations with a non-judgemental approach to sex workers. In effect, this has also led to a shift in favour of funding service providers that focus on alternatives to prostitution and entry into 'legitimate' employment. In everyday practice, this shift has meant a decrease in safer sex campaigns and an increase in campaigns aiming to reduce the number of clients who seek the services of sex workers. Instead of funding health promotion and harm reduction programmes for sex workers, there has been a refocus towards funding law enforcement measures to combat and/or prevent prostitution altogether.

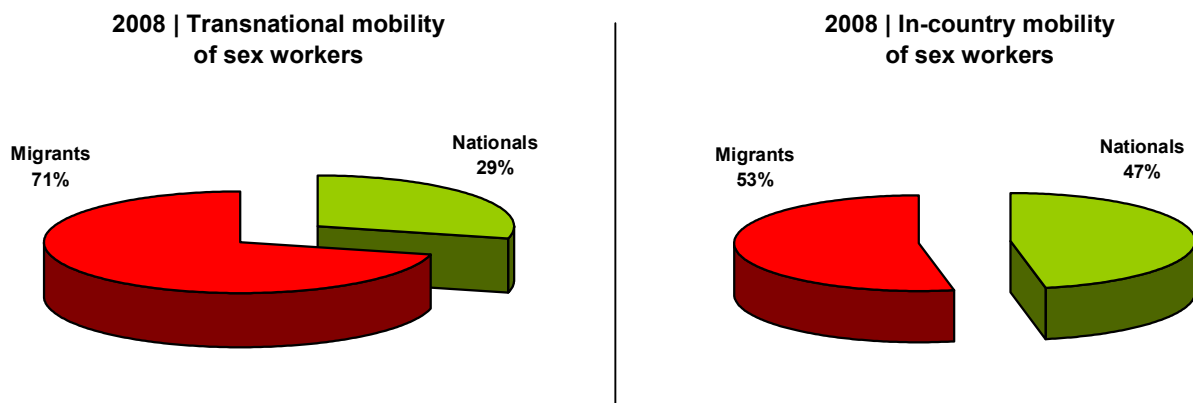
The application of anti-trafficking laws to target prostitution and eradicate sex work on the street (as a way of restoring 'public order'), in conjunction with tighter restrictions on migration throughout Europe and the trend towards criminalising clients, sex workers and activities related to the sex industry, has led to an overall increase in the vulnerability of sex workers. Migrant sex workers have been hit particularly hard, which has also had an impact on their mobility, forcing them to seek work in other countries, while others remain confined to existing negative situations and dependencies for fear of otherwise being controlled.

As we have seen above, the shift in the legal situation has led to an increase in vulnerability due to deteriorating working and living conditions and an increase in internal as well as external mobility, as sex workers are branching out to other networks beyond their local context in search of better working and living conditions.

Mobility

This section maps out the **mobility patterns of sex workers** in Europe as well as the factors motivating sex workers to seek better working and living conditions. In looking at the issues of mobility it is essential to differentiate between transnational (**cross-border**) and internal (**in-country**) mobility. This section focuses on the transient aspects of sex work in Europe today, which is characterised by constant movement across regions, national borders and continents. In addition to identifying these aspects and the reasons for mobility, this section includes an analysis of the push—pull factors in terms of both the negative and positive effects this has on sex workers, as well as comparisons between the East, West, North and South Regions in Europe and the changes in patterns since the 2006 European mapping.

TRANSNATIONAL AND IN-COUNTRY MOBILITY



Sex workers are exceptionally mobile. Almost three quarters of all migrant sex workers and almost a third of national sex workers are believed to have worked in more than one country before. Most of the female migrant sex workers in the EU have lived or worked in at least two EU countries and in three countries within their geographical region. The migration is often to the neighbouring countries, either moving on or going back and forth. Not only does cross-border mobility feature heavily for many sex workers, but they also move (or are forced to move) among various sex work locations within a given country. At least half of the sex workers in a given country will move around and work in several cities or regions.

TRANSNATIONAL MOBILITY: NATIONAL & MIGRANT SEX WORKERS

There is, however, a difference in the transnational mobility of national and migrant sex workers. As was also the case in 2005, currently less than a third of all national sex workers in Europe have worked in another country, in comparison to almost two thirds of all migrant sex workers.

There are also great differences among the four Regions in Europe: in the West, only 17% of nationals are reported to have worked in another country, in contrast to 82% of migrants. Economic necessity, law enforcement actions and clampdowns, in combination with the trend towards criminalising prostitution, are the main reasons for the increase in mobility of migrant sex workers in the West (from 78% in 2005 to 82% in 2008).

Another significant increase in the mobility of migrant sex workers has taken place in the North Region. In 2005, only half of all migrant sex workers in the North had previously worked in another country, and in 2008 it was three quarters. The top reasons given for the rise in the transnational mobility of migrants in the North are protection of anonymity and economic necessity, in addition to law enforcement actions and clampdowns, and coercion by 'organisers' in the sex industry. Norway has also been reported to have a more stressful and unstable market, partly due to the criminalising of clients in Norway and also in Finland.

Although the prognosis for the Baltic countries in the North Region had been that they would become transit or destination countries for those seeking to enter the EU, this has not come to pass, as the percentage of migrants from neighbouring countries remains minimal (5%).

The South has seen a rise in transnational mobility for both nationals (from a quarter in 2005 to over a third in 2008) and migrants (from 33% in 2005 to 66% in 2008). In Bulgaria, at least half of all national sex workers have travelled outside and inside the country for work. In Romania, an overwhelming 80% of national sex workers have worked in another country. According to the 2009 mapping, this is also the trend for migrant sex workers in Italy (99%), Greece (92%), Spain (77%), Slovenia (75%) and Portugal (73%). The main reasons for migrant sex workers in the South to work in other countries are economic necessity, coercion by 'organisers' in the sex industry, law enforcement actions and criminalisation.

The high transnational mobility of national sex workers, most notably in Bulgaria and Romania, has also seen a recent trend of many returning to their country to continue to work in the sex industry, as the economic situation is improving. The primary reason for national sex workers in the South to work abroad is the protection of anonymity, economic necessity and the search for better living conditions and professional mobility.

The East has also seen an increase in the transnational mobility of migrant sex workers, from a quarter a few years ago to 64% in 2009. In Austria and Slovakia many migrant sex workers reported the main contributing factors to be law enforcement actions and clampdowns as well as the search for better working and living conditions, legal conditions and social networks; in addition to these reasons, Poland and Hungary

reported forced moves by ‘organisers’ in the sex industry. Poland is also a country of origin of a large number of sex workers working abroad. In addition, there has been a considerable increase in Roma women in the sex industry in the East, as well as a rise in sex workers from Africa. The East-East migratory trend mentioned in the regional analysis above is characterised by a lack of support, health and social services for the newcomers.

IN-COUNTRY MOBILITY: NATIONAL & MIGRANT SEX WORKERS

Around half of all sex workers in Europe have worked in another region or city within the same country. The North saw a slightly higher figure in 2005 (63%), but in 2008 all of the regions reported around half. In the West region, the analysis is that the search for better working conditions is no less important than it was years ago. This also reflects the effect on working conditions due to changes in legislation that have meant increased dependency on third parties, fines and controls and deportations for many sex workers across Europe. In Portugal, the steady rate of mobility shows that sex workers are a group that is constantly in transit, which increases the challenge of building up stability on many levels.

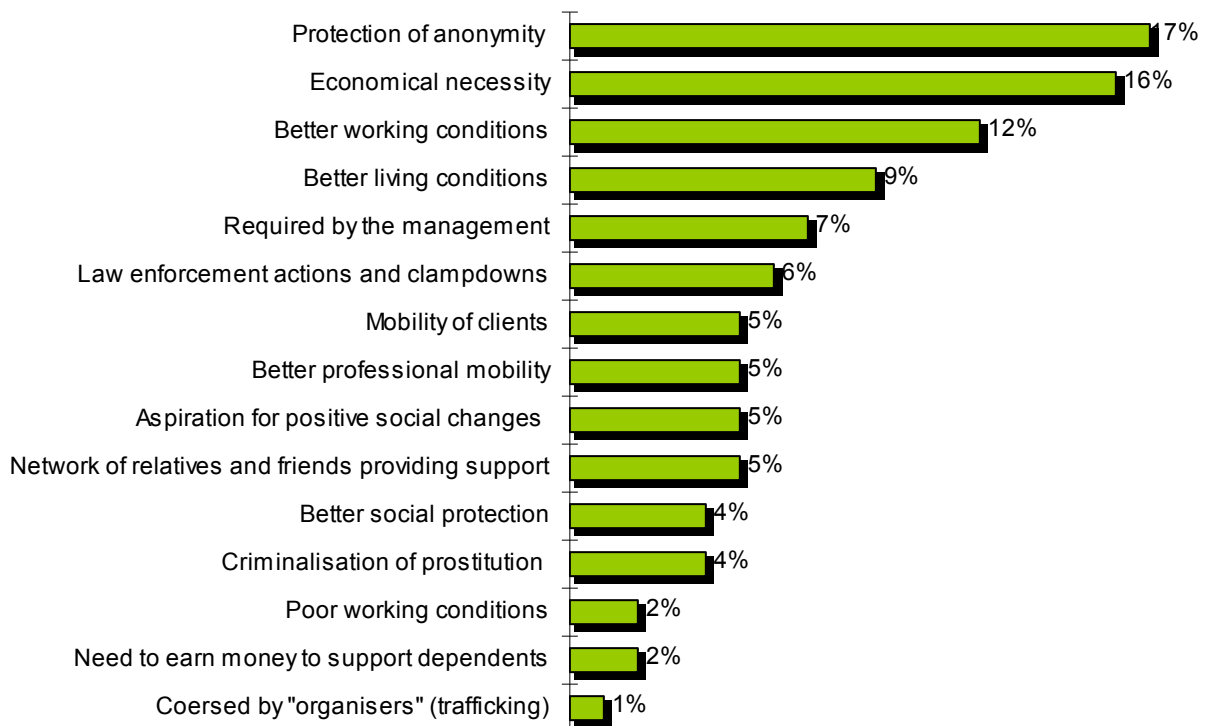
Constantly changing geographical context increases vulnerability, as changing communities and settings also means breaking helpful ties and constantly having to form new connections. In the West, in-country mobility is related to drug use for some sex workers, a trend that has been noted in Maastricht (Netherlands) and Liege (France).

On the whole, mobility among nationals has increased due to changes in legislation, as many seek to improve their working conditions and opportunities for further professionalisation in other regions.

THE 5 MAIN REASONS FOR MOBILITY OF NATIONAL AND MIGRANT SEX WORKERS

This section includes an analysis of reasons for mobility and how it affects sex workers’ vulnerability across Europe.

2008 | Factors affecting NATIONAL sex workers' mobility across Europe



NATIONALS

1. PROTECTION OF ANONYMITY

positive | **negative** impact upon vulnerability

Stigmatisation, discrimination and social exclusion are some of the main vulnerability factors. While taking action to protect one's own anonymity may be seen as a positive, self-empowering strategy to be able to carry out one's work and to prevent exclusion from one's original social contexts or families, it also indicates that the social pressure to hide one's identity as a sex worker is extremely high. Campaigns against sex workers and an increase in media coverage on the dangers, risks and campaigns to criminalise sex work and clients ensure that abolitionist ideology is circulated widely throughout European societies. This trend erases the social aspect of offering sexual services and threatens or even eliminates the rights of sex workers to health care and labour rights.

Ensuring the safety and well-being of sex workers begins with respect. As long as sex workers feel compelled to remain anonymous, they are forced to comply with the policies and law enforcement trends which serve to make them less visible, which has also led to a decrease in outreach and service provision for sex workers (see the gap analysis below).

2. ECONOMIC NECESSITY

negative impact upon vulnerability

Being forced to become transient in order to make ends meet means uprooting oneself from social and other everyday environments in search of a workplace that provides sufficient income. Moving for the sake of economic necessity may open more opportunities for working, but it also makes the formation of stable living conditions and environments more challenging. Throughout Europe the increased crackdowns on prostitution and clients have meant an increase in movement between regions and countries. Many sex workers feel forced to move to other areas to make more money, while lacking important information about the new areas; the lack of overall coverage of service provision for sex workers also makes it difficult for newcomers to find points of contact and access social networks of fellow sex workers. While still becoming familiar with a new area, the vulnerability is much higher, as sex workers are lacking a support network.

3. BETTER WORKING CONDITIONS

positive impact upon vulnerability

Many sex workers go to other cities or cross-border regions daily or for short periods if there are better working conditions to be found. Commuting is therefore a strategy of remaining rooted in one's everyday life while also being able to earn more money through short-term travel. Many view the potential to earn more money elsewhere as a strategy that enables them to reduce their own vulnerability, particularly in terms of their living situation.

4. BETTER LIVING CONDITIONS

positive impact upon vulnerability

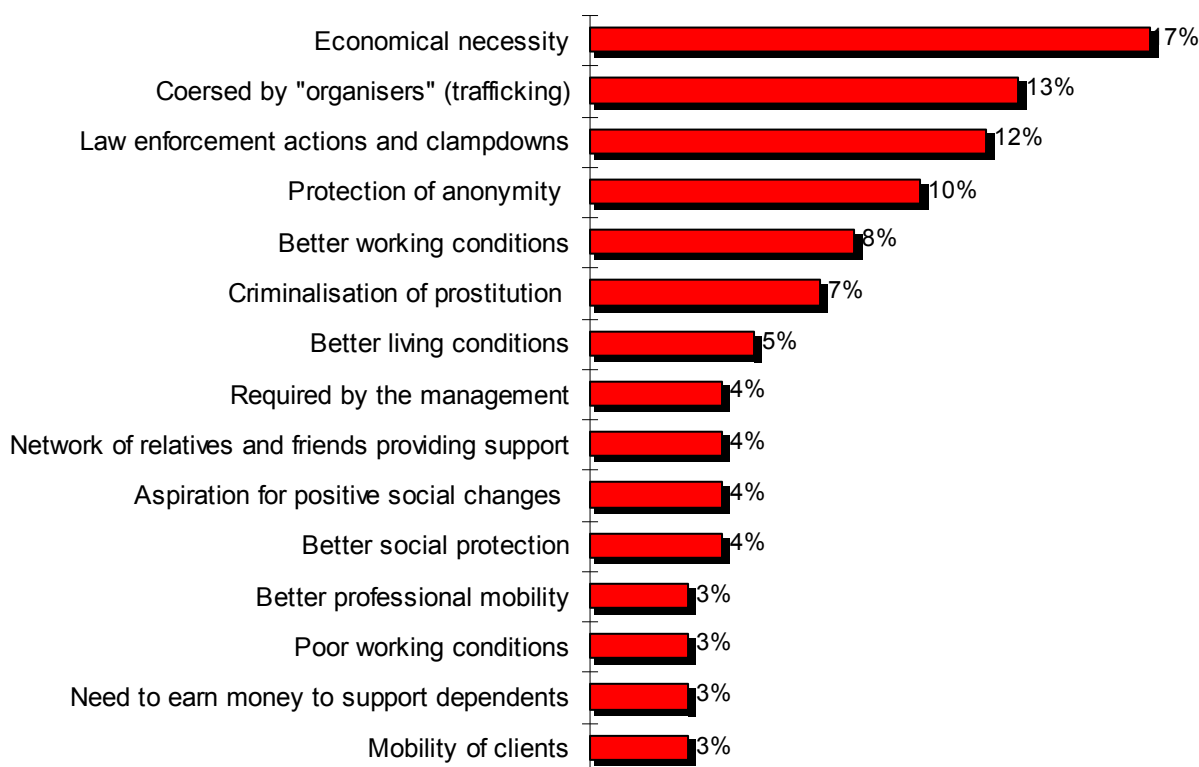
An improvement of one's living conditions can often be realised through mobility, particularly through commuting and short-term stay in other cities or countries which provide greater opportunities to earn more to support oneself and one's family.

5. REQUIRED BY MANAGEMENT

negative impact upon vulnerability

Sex workers' mobility is also impacted by the fact that many are not in full control of their working conditions and are therefore subject to restructuring of the business. While some may be enthusiastic about an opportunity to go to another place, e.g. as a way of protecting their anonymity, the requirement to go to other cities or countries for work has an effect on one's personal life, including ties to friends and family and other support networks. Management is often aware of the increase in control they have over sex workers if they take them to a new context where they need time to become oriented, during which period the vulnerability of the sex workers is extremely high.

2008 | Factors affecting MIGRANT sex workers' mobility across Europe



MIGRANTS

1. ECONOMIC NECESSITY

negative impact on overall vulnerability

Migrants' opportunities for earning are already determined on the basis of their legal status. The increasingly restrictive legislative policies on migration throughout Europe often cut migrant sex workers off from any legal status for working, making them more vulnerable to working under more precarious, controlled and undesirable work conditions. This includes a significant cut in pay, for example when working for establishments. Their cost of living, on the other hand, may be disproportionately high due to the upkeep of extortionary rents for living and/or work premises, cost of living, and money that some also send to their loved ones abroad. A migrant's everyday life requires development of strategies to increase earnings.

2. COERCED BY 'ORGANISERS' (TRAFFICKING)

negative impact on overall vulnerability

While this is not the same as national sex workers' vulnerability factor of being 'required by management' to move, there are many similarities in its negative effects upon a sex worker's overall vulnerability. Coercion entails an element of force, and those in a position to be forced are already vulnerable. This vulnerability is intensified

when connections to a relatively familiar place, people or networks that can provide support are forcibly severed. Organisers use this as a method of maintaining control over sex workers; some also keep the workers constantly in motion, meaning that as soon as they become oriented within a new context, they are sent on to another place. Forced mobility is often connected to indoor work settings which are often isolated, making it extremely difficult for service providers to make contact with and support sex workers in this highly vulnerable situation.

3. LAW ENFORCEMENT ACTIONS AND CLAMPDOWNS

negative impact on overall vulnerability

Law enforcement actions have included raids of indoor work settings of sex workers, as many new legislative measures across Europe do not differentiate between sex work and trafficking. This has led to a number of executive actions that have resulted in the arrest and deportation of countless women, particularly those who were undocumented. Heightened restrictions on migration and work permits for migrants make it exceedingly risky for them to work on the street or in other public areas, for fear of checks and subsequent fines, expulsion or deportation. This has also led migrant sex workers to find other solutions for working, such as increasing their advertising on the Internet and in newspapers. There have even been reports of undercover policemen posing as clients (for example in Finland) and then arresting or fining sex workers who respond to their enquiries. For migrants, finding creative ways to continue sex work often means compromising safety, working conditions or even pay, for in order to evade checks, many must work out of highly controlled zones or take on clients they would otherwise choose not to.

4. PROTECTION OF ANONYMITY

positive | **negative** impact on vulnerability

For national sex workers, this is the number one reason for mobility. The fact that migrant sex workers choose to increase their mobility to protect their anonymity points to a voluntary change of location. This is different from coercion or requirement by managers or ‘organisers’; however it still points to the necessity to protect oneself from discrimination, a main factor of vulnerability for migrant sex workers in Europe. Social exclusion can be a result of not protecting one’s anonymity, and this can therefore still be seen as a self-determined reason for becoming mobile, but one that is rooted in social injustice, bias and discrimination against sex workers and, particularly in rural areas, also against migrants.

5. BETTER WORKING CONDITIONS

positive impact on overall vulnerability

Many migrants set off from within or outside Europe to find better working conditions in another country. Labour migration should be understood as a human right and migrants should have the right to full legal coverage when working in a European country. It is essential that the laws support migrant sex workers, giving them the rights to residency and work enabling them to attain the high living and working conditions of which they have come in search.

Mobility

■ Reasons for mobility vary greatly across Europe. Many sex workers are in a constant state of flux and mobility, which poses great challenges to the creation of stability in their everyday lives and in their communities. On the other hand, many of these networks and contacts specifically provide sex workers with information about opportunities to earn more in other cities, regions, cross-border areas or countries. Information technologies enable quicker communication over borders and aid sex workers in organising and realising a change of location in search of better living and working conditions.

Service provision | Gap analysis

In the National Mapping Reports, each of the 25 countries analysed changes in service provision and identified gaps in the services regarding the quality, coverage and level of response to the needs of migrant and national sex workers. This European analysis gives an overview of the most common gaps affecting the health of sex workers across Europe. The need for change is apparent and there are concrete recommendations included at each level of this analysis.

The gap in service provision can be viewed in conjunction with a legal trend towards criminalising prostitution and the sectors, settings and conditions of sex work across Europe. The shift in policy away from prevention and towards regulation and criminalisation has also meant a significant reduction in funding for those institutions that provide outreach, prevention and other vital services for sex workers.

The resulting lack of service coverage makes for a significant increase in vulnerability. Vulnerabilities have not necessarily been reduced, as sex workers are met with less support, outreach and referral services and more social exclusion. This low level of access to services has been highlighted in the reports from all 25 countries and is a significant factor contributing to the vulnerability of sex workers. The consequences are that there is generally less access to prevention and care and essential services, information and community and networking opportunities for sex workers.

In the face of the vast number of sex workers faced with barriers to achieving acceptable standards of living and working conditions, there is a considerably low level of service coverage providing direct contact with sex workers, particularly those working in illegal settings. Because sex workers are excluded in assessments for epidemiological statistics in many countries, national action programmes addressing HIV/AIDS face difficulties in targeting sex workers as a high priority group. This extremely low coverage in terms of contact with sex workers means that many sex workers are not receiving fundamental information on testing and sexual health. It is therefore necessary to address this gap in service provision across Europe.

The specific characteristics of sex work must be taken into consideration in developing a holistic and comprehensive approach to sexual health. The specific circumstances of sex workers must be integrated into the development of services which should be able to meet a wide range of needs. In order to realise this, it is necessary to work together with the target group at all levels of creating services in order to ensure differentiated and comprehensive coverage, to close the gap in service provision and to decrease the vulnerability of sex workers.

The mapping undertaken by TAMPEP identified a number of key gaps which are common across Europe. While each gap presents a threat to effective HIV and sex work programming, it also provides an opportunity for service development.

GAPS IN SERVICE PROVISION

Recommendations

■ Insufficient geographic and sex work settings coverage: HIV prevention services are focused on major cities and/or public sex work settings

Barrier

Lack of resources compounded by a lack of systematic national mapping of sex work and assessment of local sex work settings

Recommendation

National mappings should be carried out on a regular basis, preferably annually, as sex work and sex work settings are fluid and mobile. Services for sex workers should operate at times and in locations where they will be accessible.

■ Lack of communication and partnership between service providers to ensure comprehensive support and services for sex workers

Barriers

Differences in the philosophies of service providers constitute fundamental barriers to broad cooperation and referral practices. Many organisations directly or indirectly target sex workers' issues, and/or HIV/STIs in the sex work community. Furthermore, there are many centres for victims of trafficking and/or organisations which specialise in anti-trafficking and exit programmes. NGOs (and other service providers) on occasion limit the scope of their collaboration to only their statutory activities objectives on the grounds of the ideals behind their organisations. Sometimes the limitations are due to goals imposed by their funders. Many service providers work alone and are unable to offer the social support required for the empowerment of sex worker communities.

Recommendation

When seeking to offer substantial HIV/AIDS prevention, care and treatment, it is vital to work beyond ideological differences. Both service providers and their sponsors should seek common ground for establishing cooperation. Funding institutions should endorse referrals and networking and provide necessary resources to implement such practices. Empowerment should be a key issue for reducing the vulnerabilities of sex workers. An open and non-judgemental partnership of cooperation and referral, focused on the common goal, is essential for ensuring comprehensive support and services for sex workers.

■ Lack of access to health care services for undocumented/uninsured (migrant) sex workers

Barriers

For most, being undocumented means being unable to obtain insurance under the public social security scheme offered by most states to nationals and non-national residents. Undocumented migrant sex workers are excluded from the basic public health care system. For many, private insurance is the only alternative. Because this is usually unaffordable, a great number of sex workers lack access to health services. Extensive restrictions on migration have shaped the legal situation in most countries as to make it impossible for many undocumented migrants to improve their circumstances. These legal restrictions are a key barrier to universal access to health care.

The crackdown on prostitution and law enforcement measures to combat sex work have meant that sex work is not recognised as a legal occupation. This is not only true for migrants, but also applies to national sex workers who all face difficulties in accessing services. Further exclusionary barriers faced by national sex workers in accessing public health services are often a lack of fixed registered residence due to frequent changes of address or being outside the social system.

Recommendation

Government policies must address these issues of exclusion and the health risks of having in their territory groups which are in fact not covered. Sex workers must be recognised as an occupational group and, in turn, the right to work and residence must be made available to migrant sex workers, ensuring residence and work permits and full participation in the public health care systems.

■ Lack of comprehensive and targeted support and services for ethnic minorities and lack of access to health care services

Barriers

In certain Central and East European (CEE) countries, the majority of sex workers are from ethnic minorities, the largest of which being the Roma. The Roma community is an ethnic group which experiences significant social exclusion and discrimination in many countries in Europe and is also a highly visibly minority when working outside their countries of origin. Some of the specific characteristics that make them difficult to reach as a target group include their high mobility, and a lack of cultural mediators trained to work with them. Roma sex workers experience multi-layered forms of discrimination. Their socially disadvantaged position means greater isolation and exclusion, poor living and working conditions, adverse social and economic settings, and a particularly high risk of HIV/STIs and drug use.

Another significant ethnic minority group is Russian sex workers in the Baltic States who often possess an ‘alien’ passport and consequently experience obstacles in gaining equal access to health care as non-nationals.

Recommendation

There is a need for adequate, effective and specifically targeted services, prevention campaigns regarding HIV and STIs, counselling and treatment, as well as space and resources for specific empowerment and networking initiatives for these groups. Community building is a powerful tool in counteracting the effects of multiple forms of discrimination, exclusion and isolation.

■ Lack of comprehensive and targeted HIV prevention campaigns for clients of sex workers

Barriers

There are very few programmes targeting clients with regard to safer sex practices, and few campaigns targeted at clients who seek services in different kinds of sex work settings. The mobility of clients of sex workers (be they sex tourists or mobile due to their profession, e.g. truck drivers) is not sufficiently taken into consideration and there are no campaigns which address different patterns of mobility. Clients, their knowledge, perspective and behaviour are key factors and cannot be ignored in holistic intervention approaches.

Recommendation

Intervention and prevention activities should consider the involvement of clients as key actors. Addressing clients and their mobility is crucial to health promotion and HIV risk reduction. Campaigns that aim to provide information for clients should consider different prostitution settings and cultural contexts and connotations of sex work, taking advantage of specific concentrations of potential clients (sporting events, conventions, tourist resorts, etc.).

■ Lack of communication and partnership between sex work projects and drug harm reduction services, including lack of access to drug treatment and rehabilitation services

Barriers

Levels of drug use and dependency vary greatly among sex workers and are connected to the various sectors, environments and communities of which they are part. Service providers often do not have any knowledge of patterns of drug use in sex work settings. This results in a gap in comprehensive interventions and services tailored to address the particular risks, needs and behaviour of different groups of drug-using sex workers. Outreach programmes for injecting drug users often operate a needle exchange but are not able to provide treatment (substitute prescribing).

Recommendation

HIV/STI prevention and drug treatment options need to be integrated into outreach programmes for sex workers. Furthermore, a greater diversity of harm reduction activities are needed to respond to the types of drugs consumed and to the specific health risks linked to the use of different drugs. Such programmes must also take into consideration the context of the drug use, the drug users' behaviour and the community where it takes place, e.g. specific approaches for dealing with drug consumption among Roma sex workers.

A holistic approach must consider the high level of injecting drug use, disadvantaged living conditions, poor access to health care, risky sexual behaviour, close contact with dealers and controllers, client behaviour, and the ability and/or opportunities for sex workers to negotiate safer sex practice under the influence of drugs, etc.

■ Lack of comprehensive and integrated personal safety and crime reporting schemes for sex workers

Barriers

Sex workers experience disproportionate levels of violence; in some countries a

majority of sex workers report violence from clients, organisers and police. Comprehensive personal safety and crime reporting initiatives have not been developed by all sex work projects.

Recommendation

Violence against sex workers must be included in gender-based violence strategies, protocols must be developed with policy-makers and law enforcement agencies (appropriate to the context in each country), law enforcement officers must be trained, and corruption among law enforcement officers must be addressed by establishing police liaisons and complaints procedures. The violence experienced by sex workers must be recognised as a relevant health risk and vulnerability.

■ Lack of inclusion of sex workers as a target group within national action plans for HIV prevention

Barriers

Service providers and NGOs in particular are funded in a variety of ways. Some are financed by local and national entities and others by external funders. Furthermore, some national policies delegate financing to local authorities that are not prepared to take on the responsibility. Consequently, it is frequently the case that NGO-run projects are short-term. Long-term funding measures for sustaining NGO-level projects are crucial, as NGOs are often the most competent providers of many of the services that have been found to be lacking across Europe. Without sustainable funding NGOs risk closure or interruption of crucial, specialised services, outreach and campaigns. This is particularly a problem for NGOs from CEE countries that receive funds from external donors which provide them with an extremely limited scope and duration of action (such as annual or biannual projects). This constitutes a barrier to continuity of projects and to remaining in contact with sex workers.

Recommendation

Governments must recognise the necessity of providing long-term funding aimed at sustainability and continuity for key organisations providing necessary services — particularly prevention work — to reduce the vulnerability of sex workers on a national level. Local and national funding for prevention, care and support are interlocking elements that must be guaranteed and continuous for a comprehensive approach. Moreover, key organisations need to be involved in the creation of national and local financial plans, rather than being treated merely as recipients of donations. To this end, national financial plans must be transparent.

■ Insufficient services responding to the increased mobility of sex workers

Barrier

The majority of sex workers in Europe today are migrant and mobile. Migration flows within the sex industry (both cross-border and within borders) have intensified since the expansion of the EU in 2004 and 2007, resulting in a substantial increase in migration within the EU countries. Few service providers are seen to respond to the complex push and pull factors of the sex industry, in terms of either their approaches, or services offered. Without cultural and linguistic competence, many service providers are unable to meet the needs of migrant sex workers, who constitute the largest group of sex workers in most European countries. This lack of competence is a great barrier to many

sex workers who do not contact service providers due to racism, discrimination and inaccessibility of their frameworks.

Recommendation

Governments must consider this aspect of increased mobility in the creation of all policies and measures. Service providers must make wider use of cultural mediation (or interpreters) in public health and social care services. Improvements must also be made in maintaining long-term contact between sex workers and service providers, e.g. if the sex worker moves elsewhere, referrals could be made to the organisations and services capable of providing support at the new destination.

■ Lack of representation and involvement of sex workers' organisations

Barrier

There are practical barriers to sex workers' involvement, such as their legal status, discrimination, social attitude, and judgemental views about sex work. These factors limit the empowerment of sex workers and minimise the potential for leadership among sex workers.

Recommendation

Community involvement in prevention and care efforts must be recognised as a top priority in policy-making and funding. It is essential to acknowledge the significance of empowering community members, to create leadership models, to implement peer education and to create funded opportunities for a bottom-up approach and community outreach. In addition, sex workers must be directly involved and represented in the policy development process.

■ Lack of positive images and approaches to sex work in public campaigns and legislative measures

Barrier

Such campaigns and measures construct sex workers as 'victims' or criminals, compounding significant social barriers, exclusion and discrimination. An approach of victimisation and criminalisation results in substantial obstacles to building self-esteem and to improving the public image of sex work. Isolation, exclusion and discrimination of sex workers by the general public, including discriminatory misconceptions, influence the way that law enforcement and clients deal with sex workers.

Recommendation

In order to empower sex workers, public campaigns and imagery — including materials produced specifically for sex workers — must be non-judgemental and respect them and their choice of work in the sex industry.

STRUCTURAL BARRIERS TO HIV PROGRAMMING AND SERVICES FOR SEX WORKERS

Recommendations

In addition to the gaps identified in service provision, a number of structural barriers to strengthening HIV services have been identified. These barriers occur on three different levels:

State level Where legislation or regulation by local or national government impacts comprehensive and effective HIV service provision.

Service provider level Where the configuration or operation of services impacts sex workers' access to support and services.

Sex worker level Where sex workers' internal beliefs and perceptions of service providers impact their access to support and services.

STATE LEVEL

■ Certain services are offered on condition that the person declares her/his will to **exit sex work** or has already exited it. In a majority of countries, social services are accessible to migrant sex workers only if they are recognised by the authorities as victims of human trafficking.

Recommendation

Implement an effective and comprehensive support system to reduce vulnerability to HIV based on equal access to support and care.

■ In the majority of countries **medical and health services** are available only for insured persons and are not anonymous. All uninsured persons must pay for health care. In most countries public health care and social services are rarely provided to undocumented sex workers on the basis of restrictive migration policies across Europe.

Recommendation

Guarantee access to prevention, care and treatment, as it is a universal right and a necessary measure in combating HIV/AIDS. A better network of service providers is important to provide policy-makers with examples of good practice based on the quality guidelines of the VCT (Voluntary Counselling and Testing) protocols.

■ Barriers to accessing public health care services are particularly serious when we analyse access to **HIV/AIDS treatment for uninsured persons**, for whom it is only available if paid for privately. Undocumented sex workers living with HIV are obliged to continue to work in prostitution in order to generate an income that can cover therapy costs. Migrants without insurance lack access to free of charge treatment. In very few European countries it is possible for HIV-positive persons to receive free care regardless of legal status.

Recommendation

Universal access to HIV/AIDS treatment regardless of legal and insurance status.

■ In some countries **medical services** in public health institutions are not anonymous and the legal status of sex workers is known.

Recommendation

Separate medical care data from police (immigration authorities) reporting systems and provide anti-discrimination and awareness training to all health workers and administrators.

■ **Registration systems and compulsory health checks** are unhelpful in the task of HIV/health service provision for sex workers, because they do not fully reflect the reality of the country's sex worker population. They misconstrue statistics which are often used as a basis for assessing the needs of sex workers in a given country: in certain places, check-ups are restricted to the registered population, and registration additionally affects access to these medical checks. In order to benefit from these services, a sex worker must be registered, yet in order to be registered she or he must first have a regulated legal status.

Mandatory testing for sexually transmitted infections results in a two-tier system of registered and non-registered sex workers, the latter having limited access to health care. For example, Greece has very strict regulations regarding mandatory medical screening of registered sex workers, leading most to avoid registration, which then leaves them liable to prosecution. Registered sex workers often complain about the impersonal attitude and approach of health care workers, which undermines confidence and, with it, good medical care. Previous experience in the fight against other sexually transmitted infections has adequately illustrated the limitations of compulsory health screening. Moreover, instead of generating a healthier environment for all involved, compulsory health checks are conducive to clients' abusive demands for unprotected sexual services, thereby derailing basic HIV/STI prevention techniques.

By construing sex workers as the only group in need of health checks, the implication is that transmission only goes one way, and as a result clients may demand unsafe sex with sex workers who are certified disease-free, rationalising that they themselves are not at personal risk. Mandatory health checks also do not cover minority groups, and are therefore not an efficient health prevention measure. The basic principle should be to provide HIV testing that is voluntary, anonymous and free of charge; this must be respected regardless of context or profession.

Recommendation

End the practice of compulsory health checks and introduce instead an anonymous and voluntary system for health checks. Mandatory registration of sex workers is a discriminatory and stigmatising method.

■ There are no **standardised national-level regulations** on the provision of public services for HIV prevention and care.

Recommendation

Ensure that national action plans prioritise the provision of resources, while taking into consideration local and regional contexts.

■ **Reduction of funding** for sex work programmes often takes place due to the shifting of these funds to more anti-trafficking orientated, re-socialisation actions and/or law enforcement measures to combat sex work.

Recommendation

Create partnerships, forums and alliances to guarantee consistent, uninterrupted access to prevention and health care for all sex workers.

■ **Police abuse of authority:** Some instances of mandatory health testing are made possible through cooperation between the police and public health service representatives: police round up sex workers in their workplace and take them for compulsory testing; syringes are used as evidence against drug users; condoms are used as evidence of the intent to sell sexual services; positive results for mandatory STI testing are used as evidence of the intent to sell sexual services.

Recommendation

Deliver awareness training to law enforcement in order to monitor negative effects of public order measures connected with public health schemes.

■ Lack of approach to sex work in terms of **occupational health services**.

Recommendation

Develop a framework regarding occupational health and hygiene. This would force managers of indoor establishments to comply with regulations that protect the health of sex workers in the workplace. It is also necessary to develop a network of general health care professionals to offer a broad range of medical support that is not limited to simply HIV and STIs.

■ Lack of **long-term intervention programmes** on the national level and lack of cross-border partnership between state agencies and NGOs.

Recommendation

Focus on reducing the vulnerability of sex workers to HIV/AIDS in a comprehensive national plan geared towards sustainable long-term intervention programmes that take into account the high degree of internationalisation and cross-border migration within the sex industry. Service providers must also have competent staff who are aware of the push/pull factors and take them into consideration in creating HIV prevention measures. It is therefore essential to strengthen cooperation – particularly cross-border cooperation - between government agencies and NGOs with extensive experience in working with migrant and mobile sex workers.

SERVICE PROVIDER LEVEL

■ **Public social care services** are primarily or solely targeted at recognised victims of trafficking and/or exit programmes.

Recommendation

Improve referral systems between social care and medical care to meet the diverse needs of all sex workers.

■ In some countries there is a **lack of professional training, skills and knowledge** among service providers who work with sex workers, who in turn face judgemental and discriminatory treatment when attempting to access public services.

Recommendation

Anti-discrimination training and awareness-raising courses for law enforcement agents, social workers, medical doctors, and health and social assistance administrators should be organised nationwide, and low-threshold services should be developed together with NGOs and sex worker groups.

■ In the majority of countries there are very few, if any, service providers offering **services specifically aimed at sex workers**.

Recommendation

Improve coverage either through an overarching umbrella structure or increase the capacity of outreach activities of already existing organisations.

■ **HIV Testing:** There is a pattern of improvement in the testing and diagnostic coverage of sex workers including anonymous, voluntary and free testing. Yet the same progress is lacking in terms of pre- and post-counselling, harm reduction programmes or accessible treatment for HIV/AIDS.

Recommendation

All relevant areas must be considered as interlinked and incorporated into measures.

■ **Differentiation between services** offered to migrant and national sex workers.

Recommendation

Anonymous and free voluntary counselling, treatment and STI screening and care should be an integrated part of the health care system in close cooperation with outreach activities, particularly with NGOs and community-based organisations with linguistic and cultural knowledge to meet the needs of migrant and mobile sex workers.

■ Poor level of openness and **cross-cultural knowledge of service providers: no** use of cultural mediators or interpreters.

Recommendation

Training in cultural mediation and working with an international staff; cooperation with migrant sex worker community organisations; peer education programmes targeted to reach key members of migrant sex worker communities; and more staff members with migrant backgrounds.

■ Divergence of the **services needed and the services offered** due to inaccurate or incomplete assessment of sex workers' needs.

Recommendation

Frequent assessment of the needs of the service users and adaptation of services provided. In terms of cross-border, mobile and migrant sex worker populations, it is necessary to network and exchange assessments and information with other service providers across borders.

■ Service provider **responses to the current changes**: In addition to the already complex and diversified nature of sex work, there are currently rapid changes taking place within the sex industry which pose an additional challenge to service providers. They need to develop capacity to adapt to these transformations. It is essential that service providers and outreach workers are able to identify these developments and adjust their services according to the new needs. In addition, the new EU countries are facing intense and new migratory movements in the sex industry. Many of these new trends are also precarious or even illegal, resulting in further difficulties for existing outreach services to reach these target groups.

Recommendation

New and/or additional services are required, geared toward covering the needs of (new) target groups. These services should primarily focus on providing useful (legal) information, bridging language barriers and increasing the self-confidence of sex workers through services aimed at empowerment and support.

■ Lack of adequate coverage and/or cooperation between specific services for sex workers in **cross-border areas**. The Central European region has seen an intensified presence of sex work in border areas. Sex workers work and live in their country of origin but are at the same time essentially isolated. They work with clients from ‘the West’, needing language skills to negotiate with them, and often even the bar owners are from other countries, such as Austria or Germany, and speak another language.

Recommendation

It is important to develop specific cross-border cooperation work to reach the sex workers who work in these regions, as has already been developed in pilot projects along the borders between Germany/Poland, Austria/Czech Republic, Italy/Slovenia and Belgium/Netherlands as part of TAMPEP 8.

■ Difficulty for service providers in **reaching sex workers** (and addressing potentially increased vulnerability to HIV and STI infections) due to their dispersal and displacement caused by local authority and law enforcement actions and crackdowns geared towards eradicating sex work from public places formerly well-known as sites where sexual services were offered.

Recommendation

Service providers should address the topic of conflict mediation and be able to mediate and support the rights of sex workers, particularly the right to protection and safety in their workplace. The voices of the service providers and sex workers must be heard as policy on prostitution is developed at a local level, particularly regarding the protection and safety of sex workers in their work settings — especially during law enforcement actions and clampdowns.

SEX WORKER LEVEL

■ Migrant sex workers often **lack information on the scope of social and health care services** to which they are entitled in their countries of residence, or lack access to sources which could furnish them with this information. Service providers fail to reach all sex workers.

Recommendation

Those providing information for sex workers must work together with them in compiling materials and disseminating information.

■ Migrant sex workers often **lack information on the scope of rights** to which they are entitled in the countries in which they reside, and/or lack access to sources of accurate information. This not only pertains to prostitution laws and regulations, but also immigration laws, information on working conditions/regulations, the asylum process or marriage.

Recommendation

Improve the circulation of information and networking opportunities and forums for sex workers to exchange experience and information amongst themselves. Bear in mind, however, that it is absolutely crucial to include reliable and correct legal information by forming alliances with experts in the field who work together with migrant sex workers.

■ **Stigma** is widespread: the fear of being judged and discriminated, a feeling of insecurity.

Recommendation

Forums for sex workers to exchange experiences, share strategies and connect with each other can function as non-judgemental support structures while also comprising part of a broader movement for the rights of sex workers.

■ **Language barriers** or lack of means of communication with the local service providers affect access to services.

Recommendation

Provide funding and resources for non-judgemental, specialised language classes and study materials (texts, audio and video) tailored to meet the needs of sex workers learning the local language.

■ **Dependence upon third parties** (pimps, brothel owners, creditors, protection racketeers).

Recommendation

Improve sex workers' rights so that they can rely on legal protection if they choose to seek help from the public authorities; increase opportunities for networking, exchange and self-empowerment among sex workers.

■ **Isolation**: lack of integration with the local society and sometimes restriction of free movement.

Recommendation

Grant all sex workers the same rights, regardless of their residential, insurance or work status.

■ **Mistrust of state officials**, leading to unwillingness to contact any public administration authorities.

Recommendation

Include sex work as a focus of anti-discrimination and awareness training for all public officials, including health administrators and social workers; service providers may also offer support, accompaniment and/or training for sex workers to practise and gain information about contacting authorities.

■ **Fear of deportation**, fear of being exposed as sex workers, distrust of organisations that deal with prostitution: Undocumented sex workers who face the real possibility of police raids as part of anti-trafficking interventions face barriers in accessing services. Due to their legal status, fear of arrest, and unfamiliarity with the area and services available, they encounter great difficulties in accessing general information, particularly in circumstances in which their freedom of movement is limited due to trafficking.

Recommendation

Legalisation of all resident migrant sex workers; low threshold outreach programmes with linguistically capable of reach migrant groups.

■ **The high rate of mobility** imposed on sex workers due to difficult circumstances (local policies, change of policies, intensified raids, escaping pimps/traffickers, etc.) creates an obstacle to establishing and maintaining regular contact between sex workers and service providers. It also hinders sex workers from settling into a stable living situation.

Recommendation

Increase information provision online, mobile service provision units, telephone counselling, and the building and extension of virtual networks.

REMOVING STRUCTURAL BARRIERS TO UNIVERSAL ACCESS

Diversity in the sex worker community

The diversity of vulnerabilities to HIV must be addressed by prevention measures, comprehensive methods of social support and schemes against social exclusion. A tailored approach in services is required in order to reach the diverse community of sex workers (in terms of drug dependency, work and residence status, insurance status, gender). From the perspective of outreach programmes, the present services are not sufficient to cover, prevent or empower those who need these services. **Therefore, multidisciplinary interventions are called for, particularly focusing on gender-based violence and sex workers' social vulnerability. Comprehensive efforts are needed in policy and service development. A global approach is essential, engaging multiple actors, local communities, states, international agencies, public and private service providers, and sex workers themselves.**

Human Rights

In the UNAIDS Policy Position Paper ‘Intensifying HIV Prevention’²², seven principles of effective HIV prevention were set out - the first of these being ‘All HIV prevention efforts/programmes must have as their fundamental basis the promotion, protection and respect of human rights including gender equality.’ The ‘Political Declaration on HIV/AIDS’ points out that an essential element in the global response to HIV/AIDS is inclusion in the areas of prevention, treatment, care and support, and recognition that addressing stigma and discrimination are critical to combating the global pandemic.²³

As with all HIV programming it is essential that service provision for sex workers takes place within a human rights framework.

We observe that the current limitations faced by sex workers in accessing support and services are due to the lack of a comprehensive human rights approach. **Decriminalisation on all levels will lift barriers to accessing health services for all sex workers.** HIV prevention policies which overlook the human rights aspect cannot expect to be effective, to have positive repercussions within society or to improve the public health situation. **It is important to develop guidelines and share experiences for comprehensive human rights-based approaches.**

Service providers and migration, mobility and deportation

A more specific approach is needed to address the particular vulnerability of women in the migration process. The identification of these vulnerabilities needs to be a default component of a comprehensive system of services between the country of origin, transit country and destination country. Given that the majority of the sex workers in Europe are migrants and highly mobile (including those who have moved from a different continent), and recognising that in Europe there is a trend towards repatriation and return (voluntary and involuntary), **it is essential to find methods of reaching groups who are liable to migrate, those who are in transit and those who have already migrated. Furthermore, the availability and structure of services needs to be continuous and comprehensive in order to reduce the vulnerabilities of these groups.** Therefore interruption of services due to migration, transit or repatriation needs to be addressed. TAMPEP observes that there is a failure to evaluate and draw conclusions on the effects of involuntary return for migrant sex workers in a situation of dependency and/or HIV+ status.

It is highly likely that individuals will resist involuntary repatriation, seeking to return to the destination country in order to earn a better income, and increasing their vulnerability to abuse and dependencies. Addressing the issue of migration and mobility in sex work in a narrow manner (i.e. only from the perspective of the destination country) is not only irresponsible and lacks international community spirit; it ignores human rights, overlooking the risks and threats imposed by such practices on migrant

²² http://data.unaids.org/publications/irc-pub06/jc1165-intensif_hiv-newstyle_en.pdf

Also available in Russian, Spanish and French.

²³ ‘Political Declaration on HIV/AIDS’ adopted by the UN General Assembly at the 87th plenary meeting on 2 June 2006.

and mobile sex workers. **Comprehensive policies of destination/repatriating countries must address the lack of support mechanisms in most migrant sex workers' countries of origin.**

Linked strongly to high levels of migration among the sex worker community is the issue of how service providers cooperate, i.e. whether they have similar protocols, similar knowledge of cultural values, etc. This is why **an effective referral system must be part of a sustainable/continuous provision of services. International cooperation, integrated services and readiness to work with mobile and migrant sex workers are vital in ensuring proper coverage. The principle of non-refoulement should be fully applied.**²⁴

Involvement in Civil Society

NGOs and CBOs (community-based organisations) involved in sex work projects attempt to meet the needs of specific issues arising in society, but often face shortcomings in the form of staff, funding, expertise, geographical coverage, public recognition, etc. It is difficult for them to involve broader civil society, other sectors and relevant actors and stakeholders. Autonomous sex workers' organisations are dually affected by lack of funding and political resistance to incorporating their voices in policy development. **Although cooperation with government organisations is essential for securing the success of NGOs' and CBOs' objectives, governments must also acknowledge the expertise of NGOs and CBOs by incorporating them in the policy-making process.** TAMPEP still observes a lack of recognition of the efforts of civil society by governmental agencies in the field of HIV/STIs, sex work, health issues specific to sex workers, drug users, and people affected by HIV/STIs. Moreover, most NGOs and government agencies cannot address all relevant issues by themselves: a developed referral system among government agencies and between NGOs and government agencies is vital. **Coverage and networking can only be guaranteed with a well- functioning referral system which works in all directions.**

In relation to the changes discussed above **it is essential to develop and strengthen international cooperation, be it through building of NGO and CBO networks, setting up referral systems, sharing good practices and knowledge, or cooperation between NGOs and other organisations.** Such improvements in international cooperation are vital in order to strengthen and develop the capacity of cross-border programmes.

An integral element in building capacity for the provision of services in reducing the vulnerability of sex workers to HIV/AIDS is ensuring empowerment and community participation of sex workers on all levels.

²⁴ The non-refoulement principle prohibits persons from being deported to a country in which they, based on the fundamental rights of refugees, are in danger of persecution or torture, inhumane treatment or other serious violations of human rights. Non-refoulement is codified within the 1951 Geneva Convention (Convention Relating to the Status of Refugees).

Criminalisation of the Sex Industry and Law Enforcement

The trend of criminalisation of the sex industry is two-fold and involves the influence of criminal organisations as well as policies facilitating actions towards criminalising sex work. Both trends affect the vulnerability of sex workers, sometimes in different ways. Therefore **a comprehensive service provision should involve law enforcement authorities and public and private sector engagement.**

For the provision of a framework to reduce the vulnerability of sex workers to HIV/STIs, provoked by violence and unsafe environments, the following action points are recommended:

More cooperation between those involved in the national platform on HIV/AIDS, civil society representatives and sex workers, to reach synergy and the harmonisation of efforts towards reducing the vulnerability of sex workers affected by violence as a key factor.

The **impact of law enforcement actions on sex workers' vulnerability** is exceptionally important to keep in perspective when looking at issues of criminal activities within the sex industry.

A **policy framework** should be developed **that focuses on the safety and well-being of sex workers,** ensuring equal treatment and protection under the justice system, regardless of their status.

Awareness-raising

Awareness-raising campaigns for the general public are required due to continuous and nearly omnipresent social discrimination against sex workers. These campaigns should therefore address the issue of stigma and discrimination, but might also touch on specific subjects of health and HIV, for example when addressing more specific audiences, such as clients with high mobility. **Awareness-raising in the community should have the ultimate objective of empowering sex workers,** but will additionally result in more peaceful coexistence and enhanced mutual understanding, **and most importantly should reduce the vulnerabilities and violence experienced by sex workers.**

Government responsibility

Policy-makers' attention must be drawn to the vulnerability of sex workers to HIV and STIs, and awareness raised among politicians with regard to ensuring **an appropriate balance between prevention and treatment services and protection of sex workers' (human) rights** to access non-discriminatory health services, including prevention, counselling, testing and treatment programmes. **Moreover, the participation of sex workers should be facilitated, encouraged and supported within a community framework, in all levels of activities developed for them.**

Service provision

■ The efficacy of prevention efforts is directly related to the capacity for developing and implementing comprehensive and multi-sectorial service provision. Strategies and policies need to be based on clear principles: equitable access to support and services; addressing specific needs with a person-centred approach and simultaneously with a community development focus; addressing all key actors in the sex work setting, including managers, clients, controllers, etc. Our priorities include providing quality services, with a professional approach and skills based on knowledge and experience.

Performing outreach is essential in building trust and relationships, but street work and other forms of outreach must be systematic, frequent and intensive. It should not be limited to distribution of condoms, lubricants and information, but should include social, legal and psychological assistance as well. Moreover, it should take into consideration interactions with the police, the judiciary, the media, politicians and policy-makers. With this approach a broad platform can be attained, involving multiple sectors rather than merely health, with the objective of creating and developing comprehensive health promotion and well-being strategies.

The social vulnerability of sex workers is one of the structural determinants of the risks to health and well-being and in particular to HIV and STIs. The often unsafe and violent environment of the workplace and the poor living conditions of sex workers increase their vulnerability. In order to adequately respond to their needs, the provision of health and social services requires strengthening and improvement.

In the civic sphere, existing sex work projects and services may function as both advocates for the rights of sex workers and sources of information. The expertise of community-based organisations and sex worker organisations needs to be recognised. Depending on the needs of the country in question, such work might entail creating a national advocacy platform, collecting and disseminating evidence, providing expertise to ministries and local authorities, creating a protocol for best practice, or increasing public awareness through media work and campaigns.

Most importantly, what needs to be taken into consideration is the protection of the individual human rights of sex workers, which are frequently violated. It is vital to consider the role and impact of service providers and particularly of community-based organisations and sex work projects in the civic sphere.

Final conclusion

One thing common to all countries in this report is their struggle to cover services and guarantee (even basic human) rights for sex workers, regardless of their status. The World Health Organisation notes that ‘in many countries, sex work occupies an ambiguous social and legal status, and sex workers may be severely stigmatised, marginalised or criminalised. Violence, exploitation and the abuse of sex workers’ human rights are common in many parts of the world.’²⁵

Socio-cultural factors, lack of economic opportunities, the low social status of women and transgender people, and attitudes to sex and sexuality contribute to increased vulnerability of sex workers. The stigmatisation and discrimination of sex workers compounded with the criminalisation of sex workers and the sex industry further inhibits access to HIV-related services, legal protection from violence, or other social, health or even educational programmes.

Vulnerability to HIV is highest in exploitative working conditions under which sex workers have limited control over their lives. This is the case for many migrant sex workers. Stigmatisation and marginalisation isolate sex workers and hinder them from organising community action to counteract these vulnerability factors as well as to combat their vulnerability to HIV.

In recent years, the context of sex work has changed considerably. Europe has witnessed a rapid transformation in the sex industry and it continues to evolve with every change in legislation, public policy and law enforcement. We have witnessed an increasing diversity of sex work settings and geographic spread of sex work; a stratification of sex workers, for example in Central and Eastern European countries where national sex workers form the majority, and in the North, South and West European regions where migrant sex workers constitute the majority of those offering sexual services; significant levels of drug use and dependency, particularly among outdoor-based sex workers; and local and foreign criminal elements seeking to control sex work.

In parallel with this, broad political discussions on the legal framework of prostitution have featured in the last few years. Many countries have drastically changed their policies on public order, prostitution, migration and trafficking. Despite this trend towards criminalising sex work, making it extremely difficult to find legal forms of migration, the migrant sex worker population continues to spread and travel across borders. Moreover, some of these policies have the unintended effect of increasing mobility and territorial expansion among sex workers. These and other factors all contribute to varying degrees of vulnerability among the population.

Repressive policies and legislation across Europe have not led to a reduction in prostitution. The findings of the 2009 *European Mapping Report on Prostitution* show

²⁵ WHO *Toolkit for Targeted HIV-Aids Prevention and Care in Sex Work Settings, 2004*

that the actual legal framework on sex work, health and migration harms the very people it seeks to protect. In addition, it is responsible for a number of the barriers faced by sex workers in Europe regarding equal access to health care and prevention measures. In addition to the clearly stated recommendations in section IV in the gap analysis, it is key that further rights-based, qualified, diverse and non-judgemental research on sex work and migration continues to take stock of sex workers' health, legal and social circumstances. Such documentation is not only a constructive tool for informing policy-makers: it can contribute to shifting the focus of services to directly meet sex workers' needs as well as stimulating community mobilisation, which is a significant means of empowerment.

TAMPEP Network

Austria

Maria Cristina Boidi
LEFÖ
Kattenbrückengasse 15/4
1050 Wien
Tel + 43 1 581 1881
Fax + 43 1 581 1882
office@lefoe.at | tampep@lefoe.at
www.lefoe.at

Belgium

Isabelle Jaramillo
ESPACE P...
Rue des Plantes, 116
1030 Bruxelles
Tel + 32 2 219 9874
Fax + 32 2 217 02 15
espacepbj@hotmail.com
www.espacep.be

Bulgaria

Rayna Dimitrova
**Health and Social Development
Foundation**
17, Macedonia Blvd. Fl. 4, App.21
1606 Sofia
Tel + 359 2 95 02 815
Fax + 359 2 95 33 455
prohealth@hesed.bg
www.hesed.bg

Czech Republic

Hanna Malinová
Rozkos bez Rizika
Bolzanova 1
11000 Prague
Tel + 420 22 42 34 453
Fax + 420 22 42 36 162
rozkos@rozkosbezrizika.cz
www.rozkosbezrizika.cz

Denmark

Ann Maskell
The National Board of Social Services
Åbenrå 5
1124 København K
Tel + 45 33 17 0920
Fax + 45 33 17 0901
anm@servicestyrelsen.dk
www.servicestyrelsen.dk

Estonia

Juri Kalikov
AIDS-i Tugikeskus
Kopli 32
10412 Tallin
Tel/fax +372 64 13 165
aids@tugikeskus.ee
www.tugikeskus.ee

Finland

Jaana Kauppinen
Pro-tukipiste
Viihonkatu 4B 20
00100 Helsinki
Tel + 358 9 7262 877
Fax + 358 9 7231 0250
toimisto@pro-tukipiste.fi
www.pro-tukipiste.fi

France

Camille Cabral
P.A.S.T.T.
94, rue la Fayette
75010 Paris
Tel + 33 1 53 24 15 40
Fax + 33 1 53 24 15 38
pastt@hotmail.fr

Lucile Favet
Association Autres Regards
3, rue de Bône
13005 Marseille
Tel +33 4 91 42 42 90
Fax +33 4 91 42 75 23
contact@autres.regards.org
www.autresregards.org

Germany

Veronica Munk
Amnesty for Women
Große Bergstr. 231
22767 Hamburg
Tel + 49 40 38 47 53
Fax + 49 40 38 57 58
info@amnestyforwomen.de
www.amnestyforwomen.de

Greece

Chrissoula Botsis
ACT UP
K. Manou 11
11633 Athens
Tel/Fax + 30 210 330 5500
actuoor@in.gr
tatiana@hellasnet.gr

Hungary

Judith Forrai, Peter Csepe
SOTE | Sex Educational Foundation
Nagyvárad tér 4
1089 Budapest
Tel + 36 1209 603 700
Fax + 36 1 355 9344
forjud@net.sote.hu
www.sexeducatio.hu

Italy

Pia Covre, Carla Corso
**Comitato per i Diritti Civili delle
Prostituite**
Casella Postale 67
Pordenone 33170
Tel/Fax + 39 0434 20 86 36
Tel + 39 040 348 1366
luciole@iol.it
stellapolare.trieste@iol.it
www.luciole.org

Latvia

Inga Upmace
Infectology Center of Latvia
3 Linezera street
Riga, LV-1006
Tel +371 6701 4595
Fax +371 6701 4568
upinga@inbox.lv
www.infectology.lv

Lithuania

Svetlana Kulsis
Lithuanian AIDS Centre | Demetra
14 D Nugaletoju St.
10105 Vilnius
Tel + 37 05 23 00 125
Fax + 37 02 23 00 123
demetralt@gmail.com
www.aids.lt

Luxemburg

Carmen Kronshagen
Droplin
Croix-Rouge Luxembourgoise
31, rue de Bonnevoie
1260 Luxembourg
Tel + 352 48 90 0111
Fax + 352 48 90 0120
dropin@croix-rouge.lu

The Netherlands

COORDINATION CENTRE

Licia Brussa
TAMPEP International Foundation
Obiplein 4
1094 RB Amsterdam
Tel + 31 20 692 69 12
Fax + 31 20 608 00 83
tampep@xs4all.nl
www.tampep.eu

Norway

Liv Jessen
The Pro-Sentret
Tollbugt. 24
0157 Oslo
Tel + 47 23 100 200
Fax + 47 22 410 544
liv.jessen@sby.oslo.kommune.no
www.prosentret.no

Poland

Tatiana Duklas
TADA
Ul. Malkowskiego 9/2
70305 Szczecin
Tel/Fax + 48 91 433 44 58
info@tada.pl
www.tada.pl

Portugal

Maria Cecilia Eira
Autoestima/ARS Norte
Rua do Godinho, 769
4450 Matosinhos
Tel/Fax + 351 229 379 222
autoestima_mato@sapo.pt
www.arsnorte.min-saude.pt

Romania

Veronica Broasca
ARAS
Intrarea Mihai Eminescu, nr.5
020079 Bucuresti
Tel + 40 21 210 0771
Fax + 40 21 210 2077
aras@arasnet.ro
www.arasnet.ro

Slovakia

Lubica Tomoczyova
C.A. Odysseus
Ukrajinska 10
83102 Bratislava 3
Tel/Fax +421 2 524 94 344
podchod@ozodyseus.sk
www.odysseus.org

Slovenia

Evita Leskovsek
CARS
Mestni trg 8
1000 Ljubljana
Tel/fax +386 425 1495
info@ca-rs.org
www.ca-rs.org

Spain

Silvia Garcia
Hetaira
C/ Fuencarral, 18, 4° F
28004 Madrid
Tel + 34 915 232 678
hetaira@colectivohetaira.org
www.colectivohetaira.org

Switzerland

Marianne Schweizer
Aspasie
Rue de Monthoux 36
1201 Geneve
Tel + 41 22 732 68 28
Fax + 41 22 731 02 46
aspasie@aspasie.ch
www.aspasie.ch

United Kingdom

Ruth Morgan Thomas
SCOT-PEP
149-151 Cowgate
Edinburgh EH1 1RP
Tel + 44 131 622 7550
Fax + 44 131 622 7551
ruth.morganthomas@scot-pep.org.uk
www.scot-pep.org.uk

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TAMPEP Resources

TAMPEP General Documents

Flyer on aims of project and network members | English, German

Position Paper on Trafficking | English

Beyond Tolerance and Compassion for the Recognition of Rights | English, Italian

Position Paper on Migration and Sex Work | English, Italian

Policies on Sex Work & Health | English, German

TAMPEP Training Manuals for Outreach Workers

Cultural Mediators in the Area of Prostitution | Transnational Training Manual | Leonardo da Vinci Programme, December 1998 - April 2001 | English

Peer-Educator's Manual | Course of Prevention and Hygiene | Albanian, Dutch, English, Italian, Polish, Russian, Spanish

Manuale del Corso di Formazione per Mediatori Culturali | Italian

Information for Female Sex Workers | TAMPEP CD-Rom 1 & 2

Flyers on:

Condoms & Lubricants
When the condom bursts or slips off
Viral Hepatitis
HIV & AIDS
Contraception & Pregnancy
Protect yourself
Safer drug use
Sexually Transmitted Infections

Albanian, Bulgarian, Czech, English, Estonian, French, German, Hungarian, Italian, Latvian, Lithuanian, Polish, Portuguese, Romanian, Russian, Slovak, Spanish, Thai, Ukrainian

Information for Transgender Sex Workers

Flyers on:

Hormones, silicone, breast development, transformation-operation & epilation
STI, AIDS & Hepatitis B

English, Portuguese, Spanish

Leaflets and booklets

Augusta's Way - Safe Sex comic-strip with general information | **Augusta's Way - Security** comic-strip | **Augusta's Way -**

Sabrina Peer Educator comic strip | English

Love & Care for Myself | booklets and poster | Albanian, English, Polish, Russian, Spanish

Teuta dhe Shoget e Saj, comic-strip on security at work | Albanian

L'AIDS, il virus HIV, la Siero-positività e il Sistema Immunitario | Italian

Everything OK? | Bulgarian, English, German, Hungarian, Polish, Romanian, Russian, Spanish, Thai

Dichos & Diretes | Spanish

Dicas & Jeitinhos | Portuguese

Books and Reports

Health, Migration, Sex Work: The Experience of TAMPEP | TAMPEP International Foundation, 1999 | English

TAMPEP Final Reports from 1993 until 2007 | English, German, Italian

Series of reports on:

Institutional Strengthening and Support for HIV Prevention Activities | **European Overview of HIV and Sex Work** | National Reports on HIV and Sex Work from **Bulgaria, Czech Republic, Germany, Lithuania, Poland, Romania, Ukraine** | **Gap Analysis of Service Provision to Sex Workers in Europe** | **Skills, Training and Good Practice Tools** | TAMPEP International Foundation, 2007 | English

Manuals produced as a result of common projects

Hustling for Health, Developing Services for Sex Workers in Europe | In collaboration with Europap, 1998 | English, French, German, Italian, Portuguese, Spanish

Services in the Window: a Manual for Interventions in the World of Migrant Prostitution | Assunta Signorelli & Mariangela Treppete, 2001 | A Transnet project collaboration between Comitato per I Diritti Civili delle Prostitute (Italy), TAMPEP International Foundation (Netherlands), International Network for the Fight against Social Exclusion, ExclusionNet, Azienda Servizi Sanitari No 1 Triestina (Italy), Rehabilitation Centre for Torture Victims of Ioannina (Greece) | www.lucciole.org | English, Italian

Professional Training for Peer Educators in Prostitution | A 2004 FENARETE project collaboration between Comitato per I Diritti Civili delle Prostitute (Italy), Autres Regards (France), Amnesty for Women (Germany), Lithuanian AIDS

Centre (Lithuania), TAMPEP International Foundation (Netherlands), La Strada (Poland), TADA (Poland) | www.fenarete.org | English, French, Hungarian, Italian, Romanian

Gender Street, a transnational initiative on social and labour inclusion for trafficked women and migrant sex workers | A 2004 Equal programme collaboration between Progetto Strada (Italy), Life (Italy), TAMPEP International Foundation (Netherlands), BLinN (Netherlands), Sila/LEFOE (Austria) | English

Met het oog op de toekomst, De praktijk van schooling voor slachtoffers van mensenhandel, 2005 | A collaboration between TAMPEP International Foundation (Netherlands), BLinN (Bonded Labour in Nederland) | Dutch

Resources for Sex Workers' Health & Rights, a collection of resources by and for sex workers and sex workers' rights advocates to further the health and rights of sex workers

A collaboration between the International Committee on the Rights of Sex Workers in Europe (ICRSE) and the TAMPEP Project (European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers). All the resources in this collection are drawn from actions and tools developed across Europe

The [resources gathered by the ICRSE](#) focus on sex worker empowerment and on combating violence

The [resources gathered by TAMPEP](#) focus on health and rights. The resources are available on CD-Rom and at www.sexworkeurope.org and www.tampep.eu | English, French, Russian, Spanish

TAMPEP VIII resources

Sex Work in Europe, a mapping of the prostitution scene in 25 European countries | English

Sex Work, Migration and Health, a report on the intersections of legislations and policies regarding sex work, migration and health in Europe | English

Work Safe in Sex Work, a European Manual on Good Practices in Work with and for Sex Workers | English

www.services4sexworkers.eu, an online directory of services for sex workers across Europe | English, French, Russian, Spanish

These publications originate from the project TAMPEP (European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers) which has received funding from the European Union, in the framework of the Public Health Programme.

The sole responsibility of this publication lies with the author and the Executive Agency is not responsible for any use that may be made of the information contained therein.

These resources are available under

[**www.tampep.eu**](http://www.tampep.eu)

On request at

[**info@tampep.eu**](mailto:info@tampep.eu)

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