

What Happens When Sex Workers Actually
Need Mental Health Support?

Sex Work and Mental Health

Access to Mental Health Services for sex
workers in Germany, Italy, Sweden, and

UK

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Research by: Dr P.G. Macioti, Dr Giulia Garofalo Geymonat & Prof Nicola Mai

Research Team: Yigit Aydinalp (UK), Aura Cadeddu (IT), Ophelia Eglentyn (SE),
Antonia Filipova (DE), Liad Hussein Kantorowicz (DE), Olga Wennergren (SE)

SWMH Background & Methods

- Research based at Hydra e.V. and funded by OSF public fund
- Participatory research involving peer researchers and research assistants from diverse backgrounds
- 118 in depth purposive interviews with diverse sex workers with mental health needs
- 10 in depth interviews with mental health services and practitioners

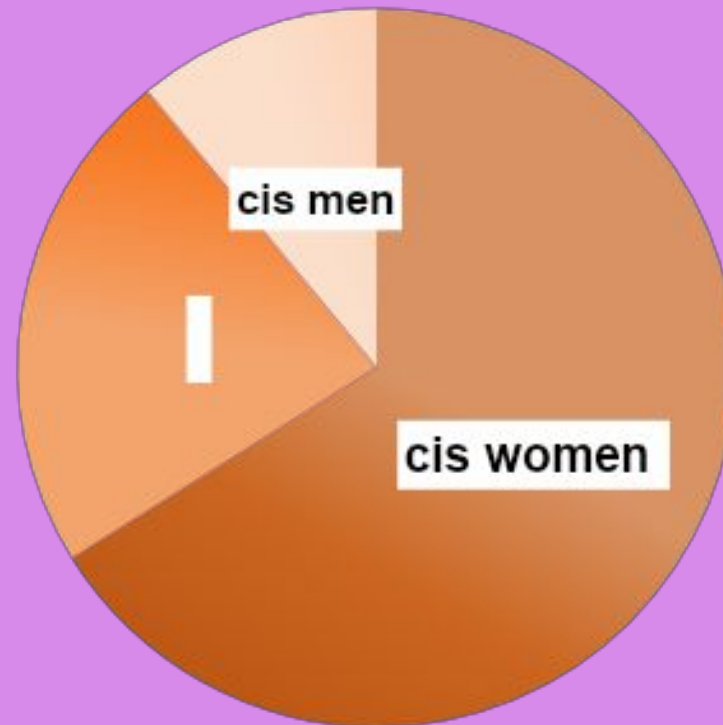
SWMH Aims

- Explore sex workers' own understanding of their mental health needs
- Understand if and how sex workers access and experience mental health support
- Compare sex workers experiences of mental health support in countries with diverging legal approaches to sex work
- Explore how structural barriers affect sex workers' experiences of mental health and access to (quality) mental health support
- Produce policy making and best practice recommendations for the improvement of sex workers' mental health and access to care

SWMH Overall sample demographics

Note: These are aggregated data. Recruitment strategies (e.g. through RAs personal networks/outreach orgs) and the diversity of the samples varied in each setting.

GENDER

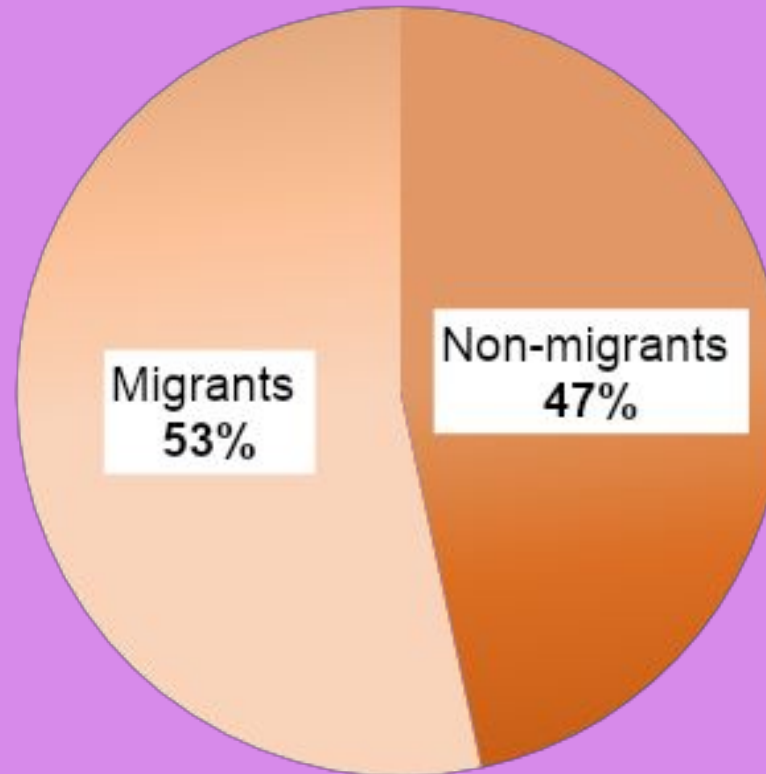


SWMH Other demographics

Age:
between 19-79

Sectors:
street-based,
indoor/brothel,
private/escort, strippers,
porn workers (many had
more jobs in SW)

59% working class
background
41% middle class
background
36% had completed
higher education




40% of
migrants
were BIPOC

7% of
non-migrants
were BIPOC

SWMH Overall key Findings

Mental Health & Sex work



1. Sex work is an important source of income for many SWs with mental health needs who experience intersectional exclusion from mainstream labour markets

"I'm a trans woman of colour with a migrant background, and my mental health stuff doesn't allow me to seek out office-work type jobs"


Andrea (24), BIPOC migrant trans F indoor, Germany

"Lots of people choose sex work because their mental health means they can't work normal jobs. There are lots of disabled sex workers. For me, I have intense depression, it is difficult to motivate myself and do anything different"

Chloe (30), white cis F indoor and escort, UK

"Suffering from mental health issues made it difficult to get a conventional job or to keep it and difficult to obey a boss or be on time and able to work every day. In this sense, sex work was an option available to me that wouldn't make my mental health issues worse."

Thomas (38), white migrant cis M escort, UK



2. Most SWs experience sex work- and intersectional stigma as a main burden affecting their mental health - many talked about double life, isolation and discrimination

Note: stigma is also linked to other structural factors impacting on SWs mental health such as access to housing

“People think sex work like something dirty and bad. That’s not good for the psyche. I do not want to be ashamed cause I have this job”.

Jasmine (24), white migrant cis F street-based, Germany

“ Yes, it does allow you to make money, but it makes you feel bad cause it’s seen as a bad thing“

Calogero (27) white cis M escort, Italy

“My mental health wasn’t perfect when I started sex work but stigma is the thing that gives me anxiety (...) It’s not about sex work but it’s all about the stigma and the bad laws”

Mary (38), white migrant cis F escort, UK

“Of course, if there were no stigma at all... I wouldn’t need therapy”.

Adriana (27) white cis F escort/stripper, Sweden

3. SWs with mental health needs display a variety of problems, yet no particularly recurrent one and most see their mental health problems as preceding engagement in sex work

The context of sex work, including criminalisation (of SW and migration), coercion, individual predisposition and bad working conditions are experienced as harmful to one's mental health.

"I am sure [sex work impacts on mental health], for those who are not suited or who work under bad conditions or don't want to do this job."

Tea (55), white cis F escort, Sweden

"You are alone if something bad happens to you. I mean I could probably go to the police if I wasn't doing this [sex work] but in my case I couldn't and I didn't know where to look for help. It does affect my mental health."

Camila (31), white migrant cis F escort, UK

"illegality and the lack of acknowledgment of our work impact on our mental health."

Alice (48), white cis F street-based/indoor, Italy

[Because of police] *"You constantly need to be alert and careful, you can never relax, and this makes you feel bad in the long term."*

Stella (24), BIPOC migrant cis F street-based, Italy

4. Some SWs (including migrant) experienced sex work as beneficial to their mental health.

All SWs who felt coerced and wished to leave the industry (including non-migrants) saw sex work as detrimental to their mental health

“I feel much better since I do sex work. Mental health is tied to finances in many ways”

Helga (58), white cis F escort, Sweden

“Sex work is a healing process. With sex work I can determine myself what I want from my body”


Emilia (47), white trans F escort, Germany

“What we have to endure can lead to problems in the long term”

Amalia (34), white cis F street-based, Italy

“You have to behave as if you were acting in a movie all day, then you get confused and you don’t know who you are anymore. You think of what you are doing, and you are doing it for the money, but you don’t like it and you’d rather not do it, but you do because you must eat”

Linda (33) BIPOC migrant cis F street-based, Italy



5. SWs displayed several coping strategies, peer support and social connections were seen as fundamental

"I found the support I was looking for through peers and friends. I needed solidarity and insurance that if anything bad happens to me there'd be people to go to."

May (25), white migrant cis F escort, UK

"[Peer support is] Lifesaving. When we do jobs that are stigmatised and isolating, we especially need to find people to share our lives and experiences and troubles with"

Dani (31), BIPOC migrant non-binary escort, Germany

"A lot of mental health support has come from my peers"

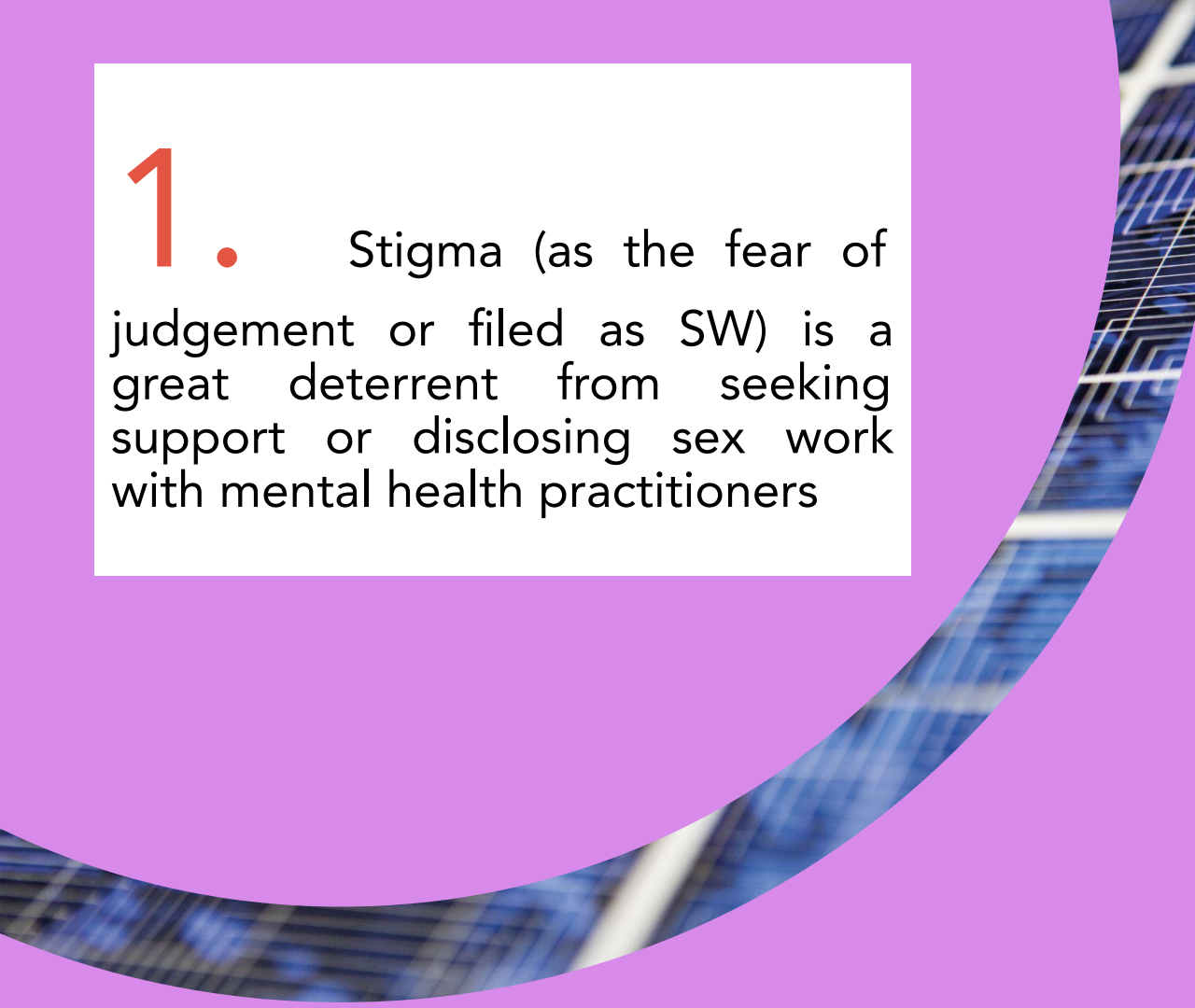
Wily (31), BIPOC cis M escort, Sweden

"We all have individual experiences, but there are similarities, and being with your girlfriends makes you feel better"

Kira (45), white cis F indoor, Italy

SWMH Overall key Findings

Access to Mental Health Services



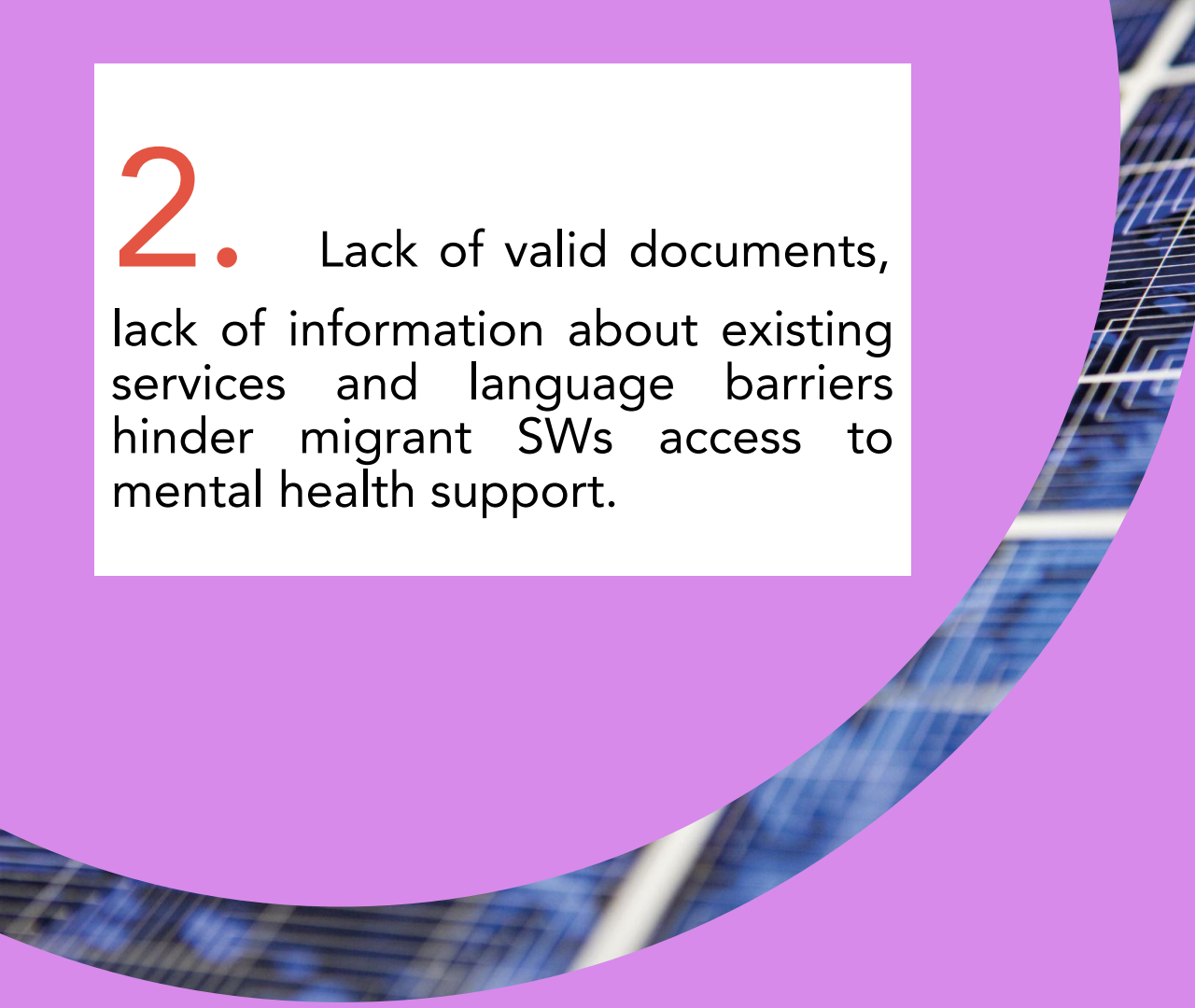
1. Stigma (as the fear of judgement or feared as SW) is a great deterrent from seeking support or disclosing sex work with mental health practitioners

"I always rather not talking about it because how stigmatizing it is. And I have this idea because my friends had horrible experiences. Although my problems were related with sex work too I didn't want to talk about that. Because they would focus about that rather than the topics I'd really like to talk. They would try to 'fix' that although it wasn't the problem itself."

Agnes (27), white trans F escort, UK

"If I wanted to seek help the stigma might stop me. I can't even imagine seeking help for something related to my sex work (...) If I were seeking help for something unrelated I might but I wouldn't talk about sex work. I am scared of being judged and it being recorded in some kind of records that I'm a sex worker "

Maggie (28), white cis F escort, Sweden



2. Lack of valid documents, lack of information about existing services and language barriers hinder migrant SWs access to mental health support.

"I would have accessed help with addiction if I had them [documents], maybe"

Ina (39), BIPOC migrant cis F escort/indoor, Italy

"I do not know where such services exist. Maybe more information can be passed on where exactly and whether one should only speak German, or there are translators there. (...) No one comes to us and explains us how everything works. How can I be satisfied?"

Jasmine (24) white migrant cis F indoor, Germany

"I can't access to services here because I don't have an insurance, I am not covered by the NHS [because undocumented] and I don't have money to see a private counsellor or something. I don't think I can deal by myself with my mental health problems"

Hatice (31), BIPOC migrant trans F escort, UK

SWs Experiences of Mental Health Services

1. 86% accessed some form of mental health professional support. 14% had no access because of lack of trust, documents, or information.
2. 88% of SWs who accessed support disclosed sex work to at least some support service/practitioner
3. 58% of SWs who disclosed sex work had judgemental and stigmatising experiences and found it detrimental rather than helpful. *The vast majority of negative experiences were within the public health system.*
4. 42% of SWs who disclosed sex work experienced good mental health provision. 73% of them accessed non-judgemental, specialised projects for sex workers; for LGBTQI people; drug users or for people living with HIV. 15% paid for private practitioners themselves and 12% received helpful public psychiatric care.

SWMH ◦ Germany

SW legal framework prior to 2017: progressive form of legalisation without compulsory registration

- 25 out of 30 SWs had access to some useful non-judgemental professional support, including specialised outreach projects and private counsellors (covered by insurance or self-financed).
- Most had access to the support of peer sex worker communities and found it crucial
- Structural barriers linked to economic resources, migration, housing, race and language and, more generally the privatisation of the health system greatly affect SWs (in particularly migrant SWs) access to services and information in the German context.

*** SW regulations tightened since we collected data, this may have impacted on their access to services and needs to be further researched*

SWMH ○ Italy

SW legal framework: form of criminalisation (indoor work, soliciting and profiting)

- 18 out of 28 accessed free support within specific outreach services for SWs, migrants and drug users and found it useful. All but one undocumented migrant had received some form of support
- 3 out of 30 never accessed any support service
- Highest N of undocumented participants, experiencing policing, fines, violence at work, poverty and isolation
- Most SW felt the support was useful but insufficient to address their economic and social well-being needs
- Very little access to peer networks

SW legal framework: form of criminalisation (soliciting, profiting from the earning)

- All but two accessed some form of support. A vast majority (all but one) who accessed specialised services for SWs and private counsellors had good experiences.
- All but one SWs who disclosed SW with NHS had some judgemental experience, 7 did not disclose out of fear
- SWs fear the police, being filed as SWs and judged by NHS (public health services).
- SWs strongly affected by: financial constraints, housing and valid documents, isolation, language barriers
- Most had access to peer support networks and found it crucial to their wellbeing

SWMH ○ Sweden

SW legal framework: client criminalisation

- Sweden was the country where SWs experienced most stigma with practitioners.
- 6 out of 30 SWs did not access any form of service, 4 of which migrants.
- 24 accessed some form of service, only 15 disclosed SW - only 3 had non-stigmatising experiences
- Private, public mental health practitioners as well as specialised projects for SWs display pathologisation towards sex workers, lack of confidentiality, and pressure them to exit SW
- Serious lack of services for migrant sex workers, including in situation of trafficking
- MH providers make a clear-cut difference between local and migrant SWs: for the local SWs they only see needs related to trauma, and not economic, while for migrants they only see issues of poverty and pimping, never of mental health

*** Community organisations and peer networks may have expanded since data collection*



SWMH Sweden end demand legislation linked to the worst outcomes across the 4 sites in access to quality MH support as well as to peer and community networks

"I got "help", but it didn't help. I got medicines and judgments. (...) [The therapist] thought what every PC person in Sweden thinks is true, that we are all victims."

Eleanor (28), white cis F escort, Sweden

"I never told anyone about the depression (...) The best support in Sweden? Not any!"

Ågota (33), white migrant cis F street-based, Sweden.

"One of the biggest mental health issues for me is being isolated in Sweden.(...) If I had peers... I do have support from my friends but I need support from other sex workers! In other countries I could have a safety net of sex working friends".

Valerio (31), BIPOC migrant trans M escort, Sweden

What SW want - to improve MH services

1. Many called for the decriminalisation of sex work
2. Many called for training mental health professionals about SW
3. Many would like the improvement and/or development of peer-led or peer-inclusive specialised services for SWs with multi-lingual information and staff
4. Some suggested incentivising sex workers to train as mental health practitioners

SWMH Conclusions in short

1. Sex work is not per se a cause of mental health problems, yet violence and bad working conditions can be harmful to SWs mental health
2. Sex work may be experienced as beneficial and provide financial stability to people who are excluded from the labour market because of their MH needs
3. Experiencing judgment and stigma by a mental health practitioner (including in the form of being understood as victims) is detrimental to SWs mental health
4. There is a clear link between the (direct or indirect) criminalisation of sex work and the lack of access to quality mental health support for SWs with mental health needs

SWMH In the words of a participant

"A lot of people with mental health issues work in the sex industry because capitalism is very unkind to people who are not compatible with the society it creates. I think sex work can be positive for mental health because a big health concern is loneliness and lack of personal connection and the intimacy that comes with sex work can be very positive for people. And I think the violence and stigma some people face regularly can be really terrible for their mental health."

May, 25 white migrant escort, UK

THANK YOU!

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SWMH full report available here:

<https://www.sexworkmentalhealth.org/copy-of-the-outputs>

Contact: PG Macioti: pg.macioti@gmail.com, Giulia Garofalo Geymonat: gagiulia@gmail.com, Nicola Mai: mainicola@gmail.com