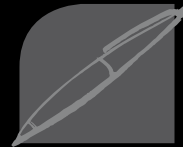


02

UK NETWORK OF
SEX WORK PROJECTS

GOOD PRACTICE GUIDANCE



Working with Sex Workers: Outreach

Acknowledgments

As part of work funded by The Big Lottery Fund, the UK Network of Sex Work Projects (UK NSWP) undertook to produce a series of good practice guidance documents for sex work projects and agencies working with sex workers. As with all resources developed by the UK NSWP, members from across the UK have played a critical role in identifying the issues to be addressed and in developing the materials. The good practice guidance is based on the collective experience and knowledge accumulated by the working group, which was drawn from the UK NSWP membership.

The working group comprised Kalynka Cherkosh (Bristol Drugs Project, Bristol), Graham Dobkin (MASH, Manchester and Board of Directors UK NSWP), Martin Fenerty (Armistead Centre, Liverpool), Geraldine Flanagan (UK NSWP), Sally Fox (Matrix, Norfolk), and Effi Stergiopoulou (CLASH, Camden).

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UK NSWP aims

To promote the health, safety, civil and human rights of sex workers, including their rights to live free from violence, intimidation, coercion or exploitation, to engage in the work as safely as possible, and to receive high quality health and other services in conditions of trust and confidentiality, without discrimination on the grounds of gender, sexual orientation, disability, race, culture or religion.

Disclaimer

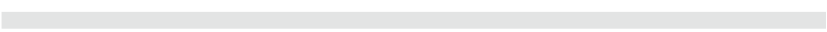
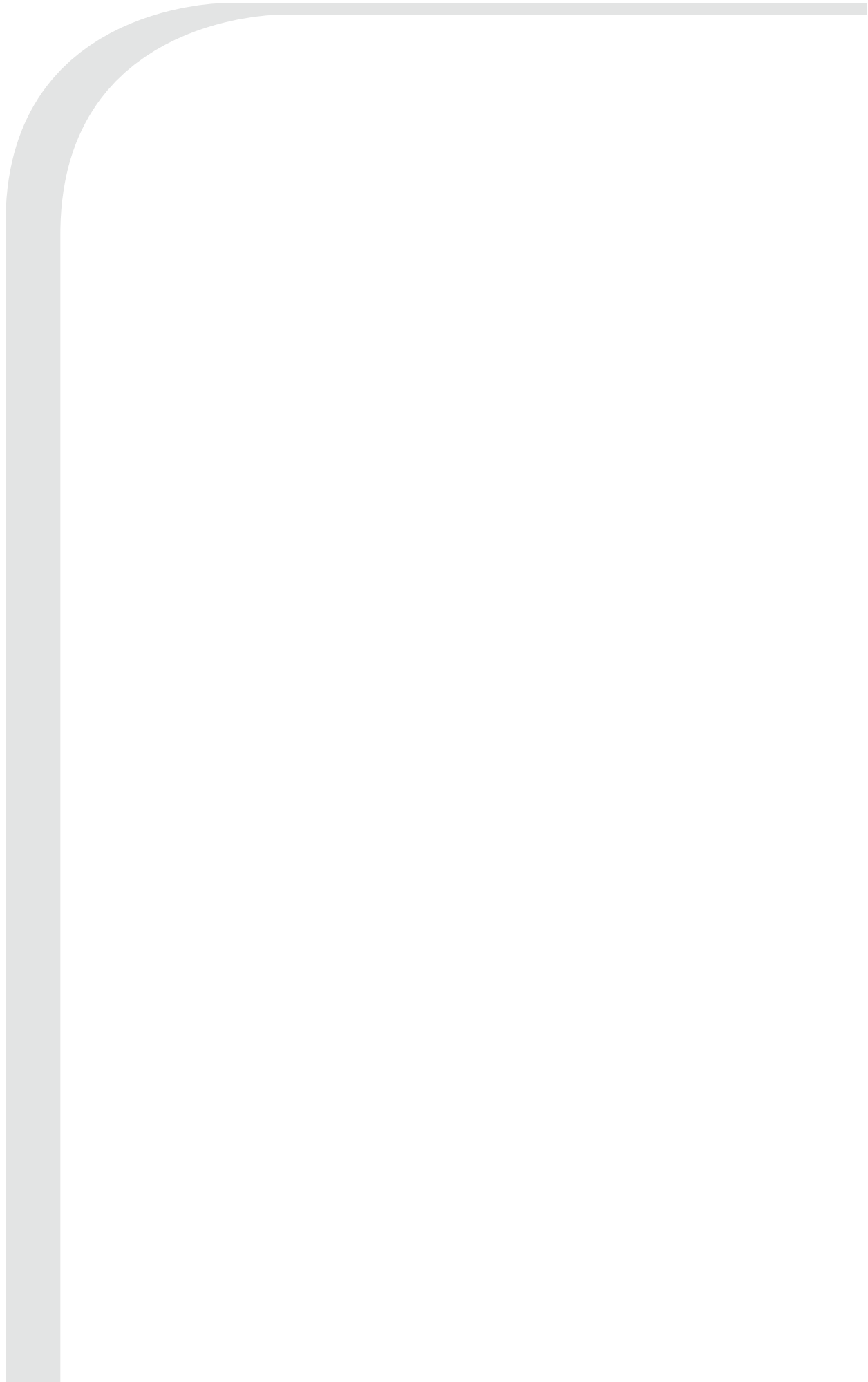
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Introduction

This document aims to:

- Promote good practice
- Provide projects with a reference tool for collective use
- Improve knowledge and understanding of outreach and associated issues
- Assist projects to identify the policies which need to be in place to support outreach
- Assist projects which are expanding or developing their service
- Assist projects to implement changes and new initiatives
- Ensure that sex workers receive a comprehensive outreach service which meets their needs
- Ensure that the diversity and equality needs of sex workers are met

The term 'assertive outreach' was first used in Wisconsin, U.S.A (Williamson, 1970) to describe an approach to working with people with mental health problems who live in the community. In the UK, this approach was later broadened to other 'hard to reach groups' facing barriers when accessing 'mainstream' services.

Over 20 years ago, non-government and government organisations began to tackle

the barriers to engaging effectively with sex workers in an attempt to make services more accessible. They achieved this by taking services to sex workers: on the street and in massage parlours. Since then, outreach has developed considerably, and is now offered in many settings including clubs, bars, public sex environments and the internet.

EUROPAP, 1998, describes outreach as: 'actively making contact with potential or existing project users on their own territory, or wherever else they may be found, and not waiting for them to seek out project workers. It is a service as well as a method of service delivery. It puts the project firmly on sex workers territory and as such is about taking resources to sex workers' (pg 19).

Sex work projects across the UK have used outreach successfully to engage with sex workers. Outreach works because it fits with the lifestyles of sex workers and removes barriers such as prejudice, stigma and fear of judgemental attitudes, which make services difficult to access.

Projects offering outreach have to consider many issues to keep sex workers engaged and to provide dynamic, relevant and holistic services. The right conditions must be in place to ensure that the service meets the needs of sex workers.

This guidance has been written to help you provide a good quality service to sex workers. It encourages good practice and provides information to help workers as well as projects thinking about setting up an outreach service in their area or in a new environment.

Projects within the UK NSWP are autonomous. This guidance provides information, which you can use and adapt to suit the needs of your project and service users.

Terminology

The diversity of our membership is reflected in the broad range of language and terminology used by projects. We have tried to use language and terminology which is universally understood. Explanations of terminology and language can be found in the glossary on page 39.

What is outreach?

Aims

Outreach aims to:

- Make contact with people involved in sex work, who can be a hidden population, and who do not necessarily access mainstream services due to a wide range of factors including stigma, criminalisation, fear of judgemental attitudes and lifestyles (EUROPAP, 1998, Faugier & Cranfield, 1994, Hester & Westmarland, 2004, Hunter & May, 2004)
- Sustain ongoing relationships with people involved in sex work to ensure they have access to services
- Deliver a wide range of frontline harm reduction, information, health and other initiatives/services, e.g. addressing violence against sex workers, raising awareness about legal rights
- Facilitate improvement in health and reduce the risks associated with sex work, and to work with sex workers to achieve this
- Advertise and promote wider services offered by a project
- Provide a referral and support gateway to other services
- Identify cases of sexual exploitation of young people, and other forms of exploitation, provide appropriate support and make appropriate referrals and interventions

Outreach services should be part of a holistic approach to sex work. Hester and Westmarland, 2004, found that outreach was a critical part of a holistic service. They identified outreach as a significant prerequisite for building sustainable relationships between project workers and those involved in prostitution before they could access other services. They confirmed the vital role of frontline outreach to enable any level of support, and stressed that it is essential for making contact, building trust and enabling uptake of follow-on services. Outreach was also found to be effective in channelling those people involved in sex work with problematic drug use into drugs programmes.

The Home Office, 2006, Coordinated Prostitution Strategy for England and Wales describes outreach as 'indispensable' (pg 47) as part of holistic, dedicated support for people involved in sex work.

Outreach takes a variety of forms, with interventions tailored to each person and to the setting. A key part of outreach is adapting services and making them more accessible/appropriate/flexible by taking the services directly to the service user.

Different types of outreach

There are many different environments in which outreach takes place. Outreach may be broken down into five types. This list is not exhaustive:

Detached

Detached outreach takes place outside the agency. Examples of detached outreach settings are on the streets; in public sex environments (cruising and dogging areas); internet outreach; and cold calling flats.

Peripatetic

Peripatetic outreach takes place in off-the-street venues. Examples of peripatetic outreach settings are massage parlours; saunas; clubs; flats; lap dancing bars; and public sex venues (saunas, private clubs, fetish parties).

Satellite

Satellite outreach is when one organisation is located within another. Satellite outreach may be offered, for example, in prisons, day centres or GUM clinics.

Domiciliary

Domiciliary outreach is specific outreach with individuals outside their working environment. Examples of domiciliary outreach are visiting service users in their own homes; hospital and prison visits; and attending appointments with service users.

Internet

'Netreach' is a relatively new form of outreach where projects make contact with sex workers using the internet. See page 10.

Settings where sex is sold or exchanged

There are many settings in which sexual services are sold and in which a project may decide to deliver outreach. Some workplaces may offer more opportunities and time for contact than others. Project workers need a good knowledge of their local sex work scene. Some key sex work settings/venues are summarised below. This list is not exhaustive.

Note: outreach may also be provided in non sex work-based venues. For example outreach can involve court support; home visits; prison visits; or accompanying clients to services including sexual health and drugs services.

There may be regional differences in definitions for settings where sex is sold. For example, in London a sauna and a massage parlour are defined as the same setting. In Bristol a sauna or massage parlour may be defined as a public sex venue.

Parlours/massage parlours/saunas

A sauna is a club known to be a public sex venue. It has facilities and areas available for sex. Sex workers may work discreetly and independently of the establishment.

There are established venues where sensual massages may be offered with extras at the discretion of the 'masseur' in these environments. These premises may have external advertising (on the front of the building or door) and also advertise in local publications, newspapers, magazines, telephone directories and the internet. The number of workers may vary and there may be cleaning/reception staff present.

Private houses or flats

These are often more discreetly located than parlours, and may also be private residences. There are fewer workers, often one or two. Flats advertise in local papers and magazines, and may leave flyers in phone boxes and public areas. Flats may be in a known area of sexual exchange (red light district or beat) and are identified by red lights or other signs. Some projects offer outreach visits to service users' homes (once they have a firm relationship with them), whether or not they work from home.

Street

Street-based sex work takes place in known areas where sex can be bought, often referred to as 'beats'. These areas often change because of housing development, community opposition, local drug markets and police activity. Buyers approach the sex worker on the street and services are provided in the car, in a hotel, or a discreet outdoor area such as a park or derelict building.

Escorts

Escort agencies advertise on the internet and in newspapers and magazines. Escorts often work from an agency and provide an outcall service to private residences and hotels. It can be difficult to engage in outreach with escorts as they work by appointment. Netreach is an important outreach technique that some projects, particularly those working with male sex workers and gay, bisexual and transgender people, have used to contact escorts and other sex workers (see netreach, page 10). Some independent escorts give their phone numbers in their advertisements. You can use these to contact them and offer outreach and support. Projects can also contact escort agencies and build relationships with staff to make escorts aware of local outreach services.

Lap dancing bar

These are clubs or bars where close erotic dance is available. Although management discourages physical contact, it is possible that sex may be negotiated in some lap dancing bars.

Estate outreach

Sexual exchange often takes place on estates, and is difficult to identify without local knowledge.

Crack houses

Sex is sometimes sold or exchanged for drugs or shelter in crack houses. Some street-based sex workers in some parts of the UK frequent crack houses. Entering an enclosed environment where there are unknown numbers of people using drugs can be risky (see page 25 on risk assessment).

Bars/pubs/clubs

Sex may be discreetly sold in public environments such as bars, clubs and pubs, and during specific fetish/themed evenings. Sex workers may not always be easily identifiable. In such settings a community development approach is useful, with projects introducing themselves to bar staff, owners and managers.

Public sex environments (PSEs)

Sex is increasingly sold in public sex environments and venues such as swingers' bars and dogging and cruising areas. PSEs may be frequented by heterosexual couples who want to have non-paying sex. Often, people who like voyeurism frequent these areas. Young gay and bisexual men may use PSEs for non-paying sex and experimentation. Sometimes, people who go to a PSE are opportunistic sex workers. They may have gone into the area to have casual sex and the chance to sell sex has arisen.

Establishing an outreach service

The type of outreach you provide and the setting you provide it in depends on the nature of the sex industry in your area. If you are a project funded to deliver a specific service to a specific group of sex workers, this will shape your outreach and the people you target.

Build up a picture of where and when sex work takes place in your locality. You can use various methods to map the local sex industry. You can speak to agencies in contact with sex workers. You can observe, for example, a street, bar or PSE scene to assess if people are sex working, how many are involved, how it is organised and when it takes place. You can search the web to identify local escort agencies and adverts for independent escorts. Personal columns of local papers may have adverts for massage parlours/saunas/flats and may indicate the number of indoor premises.

As part of this process, consult with sex workers. Some projects may formalise this initial stage of information gathering by conducting action research or a needs assessment.

Remember that your approach is important when making contact with people in the sex industry for the first time (see professional conduct and boundaries, page 13). People involved in sex work may be suspicious or fearful of you and this may be heightened if their involvement in sex work is criminalised or stigmatised. Be sensitive to this, explain your purpose, how you will maintain confidentiality and prove your identity.

When conducting outreach, find the best way to make contact with people, such as introducing yourself by telephone prior to visiting an indoor environment (in an outdoor environment a sex worker may not want to chat); respect privacy when carrying out outreach; and do it at the sex worker's convenience.

EUROPAP, 1998 (pg 21), provide some useful advice on making initial contact:

- Explain who you are and what you want
- Emphasise the confidentiality of the project
- Reassure sex workers and others on the sex work scene that you are not police or journalists
- Do not expect people to fill in questionnaires on first contact or to give any details for some time (some people may choose not to at any point)
- Don't interfere with business, wait until the sex worker is free
- Make an immediate offer of condoms
- Give a card with your name and the project's name and phone number
- Have an official identity card available to show if requested and/or give the name and phone number of someone who can confirm your identity
- Be patient – building trusting relationships takes time
- Be persistent
- Be honest – know your limitations

Projects also need to learn how to relate to the people around sex workers. For example, in massage parlours/flats, receptionists and managers are key influencers. On the street, partners of sex workers may be around in some areas. AHRTAG, 1997, advises that outreach workers should not be seen either to collude with or be hostile to such people or intrude on their privacy.

Projects need to decide how they will deliver their service, for example whether workers will walk around the outreach environment, or use a car/people carrier, or mobile unit. The method you use will be influenced by the nature of your local sex work scene. If, for example, massage parlours are spread over a wide area, staff will need a vehicle to carry supplies and move between premises. Many projects carrying out street outreach use a vehicle, even if staff get out of it during outreach to engage with service users. A vehicle provides a quick 'escape route' for staff in an incident or emergency, and is also a place where service users can talk to staff. Some projects have their own vehicle, in others staff use their own cars. The advantage of a project vehicle is that it will become familiar to sex workers and the police. If the project's name and phone number are displayed on the vehicle, service users can contact the project at their convenience.

Some projects have a purpose-built or adapted mobile unit. This enables several service users to get into the vehicle for services. If you want to find out more about using a mobile unit contact UK NSWP – it can guide you to projects you can speak to. Many projects with mobile units have policies covering the number of service users in the mobile at one time; safety; and service user/staff conduct.

Some services use a mixture of methods in the same location.

Projects should decide how to schedule and advertise outreach sessions. Offering continuity by providing regular times for outreach means sex workers can plan ahead. A range of times means you are likely to reach a higher number of sex workers. Some projects may run street outreach into the early hours to engage with cold contacts or sex workers whom they rarely see. Running a pilot is a good way to find out what is likely to work best.

EUROPAP notes that, as sex worker populations are often mobile and changing, outreach is very important. How often you do outreach will be guided by a range of factors such as the size of the sex work setting you will work in, the number of sex workers, the number of different cultural groups in the area and the type of sex work.

It is good practice to review the service, for example to see whether it is available at the right times. Also, local conditions can change, for example parlours/flats may shift to 24-hour working; new sex workers may move into the area; street sex workers may work later hours or in other areas. Reviews should include consultation with service users and needs assessment.

If other local projects run outreach services, consult with them so you can discuss what's required, coordinate outreach times, and avoid replication. Coordination, communication and joint work mean less fragmentation and confusion for service users. Also gather feedback about street dynamics, for example problematic areas, people, cultures and population. This will help you make accurate risk assessments.

All staff/volunteers should be trained before they are involved in outreach (see training volunteers, seconded staff, students on page 31).

You need good monitoring systems to assess clients' changing needs, provide a picture of project activity to commissioners and enable project development. Outreach contacts are usually brief, so projects need to decide what to ask service users and what might get in the way of recording, such as the sex worker being busy or intoxicated. If there are no such barriers, you should be able to record (confidentially) brief details such as: initials, ethnicity, date of birth, area seen, home area, time of contact, outreach resources given, referrals. Many projects have recording systems in which outreach workers write more detailed notes on the outreach session, interventions undertaken and further follow up action required, after the session and often back at base (see confidentiality on page 17). Recording can be difficult at first because clients may be wary, but once trust is established, a project should not encounter any problems. The main benefit of keeping records of client contacts is to help evaluate the service. It can also assist with funding, and if police or other agencies are trying to find a missing sex worker.

When establishing an outreach service, projects should be fully informed about national and local strategies about sex work. National and local strategies may or may not shape your service. However, commissioners/funders of your service may want to discuss these with you when considering service provision.

Projects need to plan what resources they need for outreach and how these will be organised and carried so staff can get them quickly for clients. This will be shaped by factors including the needs of local sex workers, funding and storage space.

Note: project managers need to establish systems to ensure outreach supplies are

readily available. Projects using mobile units or people carriers can often carry more resources. For outreach on foot, you need suitable bags to carry resources around.

The following resources are typically carried by outreach teams (these vary across projects and type of outreach):

- Staff identification
- Outreach monitoring sheets
- Promotional materials for the sex work support project including business cards with project contacts
- Condoms, lube and other safer sex supplies distributed (e.g. dental dams, sponges)
- Condom demonstrators
- Needle exchange supplies (for projects offering drug-related harm reduction services)
- Wide range of information leaflets e.g. law and legal rights, safety, drugs harm reduction and drug treatment/support services, sexual health, housing/accommodation options, leaflets from other local support services
- Personal safety alarms
- Personal hygiene products
- Pregnancy test kits
- Wipes
- Underwear for emergencies
- Referral forms: for referrals staff can make immediately from outreach venues
- Ugly mugs alerts/newsletters and ugly mugs report forms

Such resources help outreach workers to be ready and prepared.

Tell local police if you are planning to offer outreach. Forces vary in their approach to prostitution, so speak to your local force at the planning stage so you can develop partnership working. Inform them about the project and when you are carrying out outreach. This reduces the possibility of police interfering with project activity and can bring benefits. If projects are part of multi-agency partnership groups the police are likely to be aware of the development and establishment of the service (see section on partnership working page 29).

Some areas have multi-agency partnerships which bring together agencies working to

coordinate approaches to addressing sex work. Sex work projects and other support agencies are generally members of such forums. (See working in partnership, page 29.)

Before offering outreach services, make sure you have policies and guidance for staff and volunteers. This booklet suggests the main policies you should have. (See confidentiality, page 17, risk assessment, page 25, and lone working, page 26.)

Have procedures to protect the safety of outreach staff (see health and safety, page 23).

Netreach

The internet

The World Wide Web (www), chat rooms and portals are the latest and most rapidly expanding medium through which sex is sold globally. So, many projects are using these to establish contact with sex workers. Correlation has produced an online resource which gives guidance on developing this (www.correlation-net.org/products/cd/loader.swf).

There are a few points to note about using the web in outreach.

Many independent indoor sex workers advertise themselves on the internet. Many have their picture and/or details registered with, and hosted by an escort service which is web-based, or have their own websites for their sex work.

Many male sex workers are now cruising for business in chat rooms, areas of commercial websites and community sites/portals which have discussion rooms that facilitate 'real time' text-based debate between registered users. Such sites tend to be gay, and whilst most Internet Service Providers (ISP) and community websites regulate (through their terms and conditions of use which most members agree to when registering with the site) against any form of prostitution within the chat forums, it occurs constantly. In fact a number of sites (such as Gaydar and Gay Romeo) have become so tired of trying to regulate against escorts

chatting for clients online that they now provide escort specific areas on their sites.

Projects and services need to consider their political positions, often influenced by the nature of their funding, before considering whether this is an area of outreach that they wish to explore. The internet remains unregulated, and most of the sites providing chat rooms or escort areas that would be used for the selling of sex, are linked to and will have what are called 'hyperlinks' (a direction connection which allows the web user to click an on screen button and be navigated directly to a different web site) to more hardcore (and potentially illegal) websites.

This needs to be considered if staff are using project/service IT facilities to access such sites, as often this will contravene the IT security policies of larger umbrella organisations, which will prohibit the viewing of sexually explicit material on work PCs. It also has resource implications, in that the outreach team must have access to a PC, which is internet compatible, and ideally, a secure digital connection for faster connection to the web.

Trawling through websites and chat rooms can be very time consuming, and yet yield little or no results. So in terms of gathering statistics, such as numbers of sex workers contacted on an outreach session, this can be difficult to substantiate.

Yet, the internet is one of the most rapidly expanding media resources available, and so new outreach methodologies are being created and explored. A simple way to get started is to construct an email message. This can be sent to all the sex workers who use an email address in their newspaper advertisements, and sex workers with websites (get these through an internet search). This is an excellent way to establish connection and perhaps enter into an email dialogue with sex workers.

Using a search engine (a web-based device which allows the internet user to look for sites using key words or topics), you can look up words such as male prostitute, escort, sex worker, rent boy and so on. This will often yield websites which are escort services or those of individual sex workers, which often have links to other related sites.

It is a good idea to develop (using existing expertise, the support of an IT department, or buying in expertise) a website for your own project. Give the address (URL) in your email. This allows the sex worker to gain more in-depth information about your project.

When establishing contact with sex workers in chat rooms, be aware that (as with PSE or bar/club outreach) the sex worker might be in the chat room because they are looking for work and/or private casual non-paying sexual contacts. Therefore, interventions may need to be brief and precise. Having your own website to refer to allows you to quickly send the URL, so the sex worker can get your details later.

Many sex workers have obvious screen names (such as dick4rent, etc.), but a few are generic, and it only by observing the conversation in the general chat area

that the sex worker can be identified by the outreach team as potentially working. Security for health workers is an issue in chat rooms. Screen names of outreach workers should be obvious, and not appear as though they are selling sex or a customer wanting to purchase sex. To avoid accusations about any improper online discussions with a sex worker, you may wish to invest in scripting software. This monitors the chat and transcribes the dialogue as it occurs, which can then be stored securely and confidentially as a report of the session.

Outreach workers should also avoid using their own person screen or user names, especially if this is a site that they may use personally when not at work. This could compromise their professional position.

Finally, there is no way to validate information given to users of the internet. Just as you may be a customer pretending to be an outreach worker, so might the sex worker be a client (or someone else) pretending to be a sex worker. Outreach staff, therefore, need to be very cautious when undertaking this type of outreach. The purpose of outreach to chat rooms also needs to be decided. Is it to raise awareness of your project and facilitate access? Is it going to be 'outreach' in a virtual cyber environment, establishing dialogue with men selling sex so you can begin to counsel one-to-one in order to meet the health promotion and harm minimisation aims of your service? These are key issues, which teams need to address and resolve before commencing this type of outreach.

Useful resource

For projects interested in exploring how to use new technology for e-health or e-counselling with sex workers, see the Correlation resource '10 Golden Rules' (www.correlation-net.org/products/cd/loader.swf). This resource contains new strategies for e-health, examples, guidelines and methodologies to professionalise, software and good practices for e-health and e-outreach. The 10 Golden Rules enable projects to start electronic outreach and e-counselling to serve groups which are difficult to locate, difficult to recruit into services or difficult to retain within a service, such as sex workers.

Professional outreach conduct and boundaries

All staff /volunteers who are to deliver outreach need to have undergone training before embarking on outreach. This should include training on the practicalities of delivering outreach as well as familiarisation with all project codes of practice/guidance and policies on outreach. Some projects, as part of the induction process, ensure staff have shadowed experienced staff before working on outreach teams.

Professional working standards are important for the smooth running of an outreach service and the safety of everyone concerned.

All service users should be treated equally and non-judgmentally, recognising and respecting a person-centred approach and diversity (see also page 16). AHRTAG, 1997, advises that project staff should not be patronising.

Cold contacts: the first contact a sex worker has with you will determine if or how they will interact with you in the future. Be polite and friendly; explain who you are, why you want to speak to them, and what you have to offer. Take the lead from the sex worker and don't be pushy as they may want to distance themselves from you. Remember, they don't know who you are. If they don't want to speak with you the first time they meet you, they may do so next time. Carry official ID.

A trusting relationship has to be developed with sex workers before they will engage. Service users need to understand the aims of your project. Developing and maintaining this can take time but is essential for enabling contacts. Often, sex workers engage with projects through personal recommendation. Other service users often act as referees or gatekeepers and help in building relationships. (see the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers).

Be proactive: try to talk to people, let them know who you are, and spend time with them. Some people may seem unapproachable. Developing a relationship over time may be more effective than trying to talk to people who do not want to speak to you straight away. At the very least, you should smile, and be friendly and approachable.

Use the name that the sex worker gives when they introduce themselves to you. Abbreviations/nicknames may not be welcome.

Do not give information or advice if you are uncertain about the facts. Say that you are unsure and will find out the correct information.

If possible, approach sex workers when they are alone – do not interrupt when 'business' is taking place. AHRTAG, 1997, advises outreach staff to be considerate when contacting sex workers, developing ways that do not intrude on work time, frighten their clients away, or cause friction with other sex workers or managers.

If you suspect criminal activity is going on, don't be a part of it and distance yourself from the scene.

When sex workers are interacting with the police, try to avoid intervening unless necessary, and then only enquire what is going on and whether you can be of help. Do not obstruct the police in the course of their duty.

Make sure supporting a sex worker doesn't involve breaking the law. Don't 'look after' sex workers' possessions or let sex workers prepare/use drugs in your car or outreach vehicle.

If a sex worker is incoherent if under the influence of substances, it may not be the best time to discuss issues or make appointments.

Confidentiality: do not reveal that somebody is a sex worker, even if they are with another sex worker, unless you are sure they are comfortable with it. Be discreet and take the lead from the sex worker. Also, never discuss a sex worker with other sex workers. This breaches confidentiality, and can also make the service user lose trust in you and the service (see page 17).

Maintain honest and genuine communication with sex workers at all times, within a professional context, and be sure not to promise something you cannot fulfil.

Use self-disclosure appropriately with sex workers. Stick with their agenda and not yours.

Language: be careful when addressing sex workers; whilst friendly teasing/name-calling may be acceptable among friends, this is not the case when talking to service users.

Set and maintain boundaries: whilst developing good and friendly working relationships, remember that a service user is not your friend. Overstepping work relationships can compromise a sex worker, the project worker and the service. Therefore, staff should not fraternise, socialise, have sex/relationships with, buy sex from, or buy drugs/alcohol for or from sex workers who are their service users.

Staff should not buy, sell, exchange or receive, lend or borrow money, goods or services to/from sex workers nor buy goods from 'sellers' (who sell stolen goods, such as clothes, make-up, sunglasses).

Take care not to infringe the law.

Giving or receiving gifts can affect the power-balances of relationships. Organisations should agree on how this should be dealt with.

Be aware of the power relationship between workers and service users, and develop professional relationships accordingly.

Emotional safety: ensure the emotional and mental wellbeing of workers. There should be procedures to allow them to express how they feel and deal with issues that arise. Projects need to be aware of vicarious trauma and ensure there are procedures for serious events such as the rape, murder or death of service users. This should include procedures for supporting staff as well as arrangements for additional support for service users.

Maintaining emotional boundaries is essential. Empathy will enable a worker to understand a service user's perspective and build rapport. However, workers should be careful not to over-identify or strive to 'fit in'. It is vital to be clear about role, limits, policies and procedures.

Remember the difference between empathising and identifying.

When a delicate situation occurs and your training or code of practice does not help you decide what action to take, call a manager for advice. If managerial support cannot be obtained, remember the golden rule: if in doubt, get out.

Staff should be encouraged to talk openly about boundary issues, to use supervision and team meetings to explore personal issues about service users and to challenge and support each other as appropriate. Counselling should also be available for all staff if required.

Staff must **NEVER** be under the influence of drugs/alcohol while on shift.

Problematic drug/alcohol use by staff can have an adverse affect on your service. The use of illegal drugs by staff or volunteers could seriously affect credibility with actual and potential service users, funders and the general public. Consequently, discussing current drug use with work colleagues or service users during working hours; bringing illegal substances to work; or prosecution under the Misuse of Drugs Act, should result in disciplinary action.

If sex workers have complaints, criticisms, disagreements or comments about your service, advise them to contact the manager and refer to your organisation's complaints procedure. If the complaint relates to the manager, this should be raised with the next line of authority or your organisation's governing body, if you have one.

In order to protect the interests of service users, and the agency as a whole, it is the responsibility of every individual within the agency to ensure that inappropriate or unprofessional behaviour is notified to the project manager or the next line of authority at the earliest opportunity. (Refer to your organisation's complaints and whistle blowing procedure.)

Diversity and equality

Diversity and equality issues are at the heart of outreach, which by its nature brings services to those who might not otherwise contact them; addresses gaps in provision; and promotes access.

Recognising and valuing the diversity of sex workers and others involved in the sex industry is key to successful outreach and ensuring equal access to information and support. Avoid stereotypes and remember that differences of gender, sexuality, sexual orientation, race, culture, age and disability found in society will be found within your service user group. The needs and requirements of each service user will vary regardless of any similarities.

As service providers, there are legal obligations with which you must comply. However, best practice suggests that addressing indirect and direct discrimination and adopting anti-oppressive practice should extend beyond the law. The nature of discrimination and oppression is ever changing, and legislation frequently only covers specific areas, for example employment as opposed to goods and services.

Projects should have standards of good practice to ensure that their project addresses diversity and equality issues. Policies and statements should demonstrate the project's commitment to identifying and meeting the diverse needs of their service user group. These should be regularly reviewed. Staff should have training in diversity and equality issues and this should be kept up to date. Diversity and equality issues can shape the delivery and development of services. Staff should report any gaps in services resulting from diversity or equality issues. For instance, an influx of migrant sex workers on the street could require a different response such as resources in different languages or in pictures.

It is good practice for projects to share their expertise. For instance, some projects will be experienced in working with male and transgender sex workers or female sex workers. Sometimes projects may find that they offer services to both male and female sex workers, particularly in street sex work environments. Projects can benefit from joint meetings and sharing information to ensure that all service users' needs are met.

Confidentiality

All staff should work to a high threshold of confidentiality, and should adhere to their organisation's confidentiality policy. Service users should understand how you will protect their confidentiality. So, discuss your policy with them so they can be confident about sharing information with you. Display a clear summary of your confidentiality policy in your project's promotional literature.

Definitions of confidentiality vary. Experience tells us that migrant sex workers may be distrustful of services because confidentiality may be defined differently in their home countries. It is particularly important to be explicit about what confidentiality means in the UK (see the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers). If necessary, get confidentiality statements translated into different languages.

There are circumstances when workers have a statutory obligation to breach confidentiality:

- When someone under 18 years of age is involved
- If by keeping confidentiality, the service user or another person is likely to suffer injury or harm
- If information disclosed relates to the Prevention of Terrorism Act (1990)
- If a court order is made to reveal information (subpoena)

If any of these circumstances apply, every effort should be made to inform the client

of the disclosure, and to encourage them to take appropriate steps themselves. If any member of staff has concerns about whether or not confidentiality should be breached, they should discuss this with their line manager or team.

Meeting service users outside work

Staff should be sensitive if they meet a service user unexpectedly in public/social situations and take the cue from the service user as to whether or not some form of acknowledgment is appropriate. If staff encounter friends or social acquaintances as service users, they should reassure them of the confidentiality policy and their role as a worker. If possible, further contact should be through another member of staff. However, if you are a lone worker with no colleagues to refer to, seek support and guidance through supervision. Staff should ensure that previous contact with service users in other settings is always disclosed to colleagues.

Disclosure of personal information/workers' rights to confidentiality

Outreach workers should not disclose any personal information about their colleagues to service users e.g. addresses, personal details about their home lives and so on. (See page 13 on professional conduct and boundaries.)

Information sharing/ making referrals

Personal information about service users should only be given to other agencies with the service user's permission (e.g. when making referrals), and it should only be **relevant** information. Service users should sign a consent to disclosure form.

When making a referral, information about service users should be as accurate as possible. Information which may affect the referral such as history of violence or drug use should be discussed with the client first. Service users should be made aware that projects have a responsibility to pass on information about risk. Projects must never withhold information or collude with service users (AHRTAG, 1997). Colluding or withholding information is not helpful to service users or your project. If a service user has difficulties, this should be addressed. There should be written protocols to inform staff when it may be necessary to breach confidentiality or pass on relevant information.

Partnership working

When working in partnership with other agencies, e.g. joint outreach, satellite service and so on, it is advisable to have a joint confidentiality policy. If a service user specifically asks that information is not shared, this should be agreed at the time and then discussed with line managers to ensure that this does not undermine joint work.

Data protection/record keeping

The extent and nature of the work with a service user will determine the format of record keeping (e.g. stat sheets, outreach log, clinic file, case file). If names/identifiers are recorded, workers should always seek consent for written or electronic records to be kept. This could be difficult with migrant workers as language barriers, lack of knowledge of the system in the UK and illegal immigration status already require trust to be built (see the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers).

When asking someone their name, respect their identity and the name they would like to be referred to by your project, as sex workers tend to want anonymity. You could assure them that a pseudonym is fine (until trust is built up) or that you will know them by their 'working name'.

Note: don't let service users see the monitoring sheet/outreach log as this could breach other service users' confidentiality.

If consent has been obtained for records to be kept:

- Do not mention third parties in records, as this could breach their confidentiality
- Keep accurate records, stick to facts, not opinions; concerns can be raised
- Service users have the right to see their files, so long as doing so would not lead to harm either to themselves or another person. They do not have the right to see other agencies' information held by a project. Service users, therefore, do not have the right to **immediate** access to their files. Workers should refer to their organisation's policy on service user files and how to access them

- **Remember:** a service user's individual file is a legal document and can be subpoenaed by the courts. Write clearly, using appropriate language and do not put other service users' names in, as this could breach their confidentiality. Do not use correction fluid if you make a mistake, but simply cross it out
- When not in use, all files should be kept securely locked away. All computer systems should be password protected, and records stored on computer in accordance with the Data Protection Act
- All organisations handling data have to register with the Information Commissioner. Guidelines are set down in law about how information about clients and employees is handled, how it can be accessed, and by whom. For more information see:
 - www.ico.gov.uk
 - www.opsi.gov.uk/acts/acts1998/19980029.htm

Media and publicity

Protecting the confidentiality of service users is of paramount importance, but projects should also appreciate the merits of giving service users a voice in the media and a chance to speak about their experiences.

On **NO ACCOUNT** should any confidential information be given to journalists.

No pressure should be put on service users to pursue media requests. They may regret it if they speak to the media. Project workers should highlight the pitfalls, especially confidentiality. You could encourage service users to read the full guidelines produced by CLASH (see appendix 1) or develop some of your own.

Child protection

All agencies, which meet young people under 18 involved in prostitution, must link with appropriate agencies and child protection teams for advice. However, it is not always clear what the best way of doing so is, and how to provide support without scaring the young person off and risking disengagement.

All workers should know and follow their project's child protection procedures and protocols and know whom to contact if they have any concerns about a child's welfare. All workers should have child protection training and managerial support.

General points if there is a child protection issue are:

- Don't shoulder all the responsibility on your own. Always consult a line manager first
- Consult your local child protection team. They are experts in dealing with these issues. Sometimes social services child protection teams and the police can give useful advice without workers having to make a referral. If you encounter a young person 'out of hours', seek police advice. You can do so without disclosing the service user's name
- Before informing the police or social services, think about the intended outcome. This may help clarify whether you need to do so and the urgency (is the young person in immediate risk of harm or can it wait until later/tomorrow?). See table on page 22
- Discuss any concerns and differences of opinion with a manager, colleague or child protection adviser. If you still have concerns you could also discuss it with your peers in other agencies (without identifying the young person). **This can be an important process for understanding the reasons for your concerns about the child's welfare**
- Remember that reporting a young person constitutes breach of confidentiality, therefore, your organisation's procedures apply. If possible, speak to the young person beforehand, so they feel involved in the process and continue to trust you. However, if there are concerns about a child/young person, refusal of or inability to obtain consent should not stop you from taking the necessary steps to safeguard their wellbeing
- Take each case on its own merits. Some under-18s are more mature than others and every case is different
- If you are unsure about the age of a young person try to maintain contact or get them to come to a clinic or drop-in where a worker could have a (more structured) one-to-one with the young person and might be better able to determine their age
- If you are concerned about someone, try to maintain regular contact with them
- It is important to involve all agencies concerned to ensure the child's safety

- When providing services to someone under 16, consider whether they are 'Fraser competent' (whether they have the intelligence and understanding to consent to the services provided). Although targeted at sexual health and contraception services, Fraser guidelines are useful for all services in touch with children (see appendix 2)

Pregnancy

First be sure that the service user is pregnant. An assessment based on a service user's appearance or monthly cycle is not sufficient, and you may need to encourage the service user to go to a clinic for testing.

If a pregnant sex worker is not linked in with antenatal services, the worker should encourage and help them to do this. If needed, workers should accompany sex workers to appointments. If a sex worker

does not want to engage, workers should try to stay in regular contact with them and continue encouraging them.

If a pregnant woman's lifestyle may be affecting the development of the unborn child, it constitutes medium risk for the child under child protection guidelines. If pre-birth assessment has shown that the unborn child is at significant risk of harm, it constitutes high risk under child protection guidelines. In both cases, you need to work with relevant agencies to get advice and support for the prospective parents and the unborn child. Child protection proceedings will not commence until the child is born. However, in the meantime, you can put things in place to ensure the safety and wellbeing of the child and to support the service user. The following table suggests possible responses. If in doubt, seek guidance from your line manager.

Tool for assessing level of risk or harm

LEVEL OF NEED/RISK	INDICATOR	POSSIBLE RESPONSES
<p>HIGH RISK</p> <p>Is there IMMEDIATE THREAT OR DANGER to a young person?</p>	<ul style="list-style-type: none"> ■ Being abducted ■ Caught in a fight ■ Life or death ■ Suspected that they may be trafficked/exploited ■ Suspected emotional, physical, sexual abuse ■ Has no carer ■ Parents unable to care for them ■ Their own behaviour puts them at serious risk ■ Living with high levels of domestic violence ■ Pregnancy: pre-birth assessment has shown unborn child to be at serious risk of significant harm 	<ul style="list-style-type: none"> ■ If in immediate danger call 999 ■ Discuss with child/family if possible first ■ Discuss with manager immediately ■ Discuss with child protection adviser ■ Inform police ■ Inform social services
<p>MEDIUM RISK</p> <p>Is there URGENT CONCERN for the safety of a young person?</p>	<ul style="list-style-type: none"> ■ With mother out working ■ Involved in substance misuse ■ Child's parents are unable to meet their needs due to physical/mental illness or drug/alcohol use ■ Homeless families ■ Child of prisoner ■ Living in domestic violence/crisis/breakdown in family relationships ■ Pregnancy: woman's lifestyle may be affecting the development of the unborn child 	<ul style="list-style-type: none"> ■ Discuss with child/parent if possible ■ Discuss with manager /colleague ■ Discuss with child protection adviser ■ Phone police child protection team ■ Phone social services duty desk ■ Make appropriate referral ■ Discuss with the team
<p>LOW RISK</p> <p>Are there OTHER CONCERNS about a young person?</p>	<ul style="list-style-type: none"> ■ Out late with mother not working but in red light area ■ Appears neglected ■ Affected by difficult family relationship ■ Affected by low family income 	<ul style="list-style-type: none"> ■ Try to engage family about finding additional support ■ Discuss with manager /colleague ■ Phone local child protection team for advice ■ Discuss with team the next day

Health and safety

Services have a statutory responsibility to address health and safety issues for workers and service users as set out in the Health and Safety at Work Act 1974 and Management of Health and Safety at Work Regulations 1999.

Health and safety allows you, colleagues and service users to manage day-to-day risks and unforeseen events. This should encompass both physical and emotional/psychological safety.

Health and safety is about anticipating, protecting from and minimising risk and its impact (see page 25 for more on risk assessment). Developing appropriate protocols and procedures will assist in this. It also involves responding to incidents or identified risk. Examining incidents through debriefing and supervision, and reviewing procedures and learning lessons from this can reduce the likelihood of re-occurrence or provide more effective responses to specific hazards.

Health and safety measures should be developed in consultation with those affected by them and those who use them.

Someone in your workplace should be responsible for devising or ensuring health and safety. Outreach staff should know about health and safety to minimise risk to service users and themselves.

Health and safety issues for outreach include:

- Recruiting staff with appropriate skills, knowledge and attributes
- Ensuring that time for thorough preparation is allowed before outreach sessions
- Outreach staff having a working mobile phone to ensure easy contact with their base and supervisor
- Procedures which involve workers contacting line managers at the start and end of the session. As part of this, there are clear actions to be taken if the workers do not call in at the agreed finish time
- Informing and seeking support from police about outreach activity
- Establishing protocols and ground rules for outreach and providing services for sex workers e.g. outreach teams remain in sight of each other at all times during sessions. Outreach workers need to trust their colleagues to look out for their own and co-workers' safety
- Recording incidents as they occur and reviewing the incident record regularly to shape risk assessments and protocols
- Providing professional supervision for outreach workers and clinical supervision to enable reflective practice and ensure emotional wellbeing

- Establishing clear links with partners and stakeholders such as drugs agencies, police community relations, safeguarding children services, local councillors, local residents
- Having arrangements for contacting the local police if any incidents occur
- Considering the best way to establish credible and genuine relationships with the groups or individuals you are serving and targeting
- Addressing issues of competitive risk-taking within outreach teams
- Establishing exit words for outreach sessions or venues which staff can use to communicate with each other privately to terminate sessions or leave situations immediately which are perceived as unsafe
- Familiarising workers with outreach routes and venues before service provision commences. This should include safe exit strategies to leave the area/premises if outreach workers feel threatened or unsafe – know your exit routes!
- Encouraging debriefing at the end of sessions between colleagues and with on-call supervisors

Risk assessment

Risk assessment is the means to ensuring health and safety at work.

The nature of outreach means that staff work remotely from their central base, often in isolation and in environments where control of safety is easily lost or compromised.

Consequently, risk assessment is essential for planning and preparing for outreach.

Working outdoors or in unfamiliar situations means that risk may be more likely and more difficult to manage, particularly at times of stress.

So, all involved in outreach should consider and look out for situations where safety might be compromised both for themselves and others. There should be readily accessible support, for example 'on-call' managers in telephone contact.

Routes should be planned in advance. Frequency of leaving or returning to a vehicle should be minimised.

Risk assessments should be carried out on the environments where service users and staff work; property, resources and their use e.g. outreach vehicles, needle disposal, venues.

Formal risk assessments should be carried out regularly. However, all staff should be encouraged to assess risk informally whilst

at work; to be vigilant about danger; and to respond promptly and appropriately. Familiarity with working environments or with sex workers can lead to complacency.

If staff work alone, there should be regular risk assessments to ensure their safety [see more on lone working on page 26].

Issues to consider when assessing risk include:

- Health and wellbeing of workers
- Changes in routine and route
- Where valuables and resources are kept
- If workers are witnesses to incidents
- If workers are followed or feel threatened
- When service users report crimes to workers. Outreach workers need to know that they may be later called as a material witness or have their evidence used as 'hearsay evidence'. They need to know that they have legal obligations if they receive first disclosure of a crime, or witness it. See the UK NSWP Good Practice Guidance, Ugly Mugs and Dodgy Punters, for further advice
- Gut instinct is a valuable form of informal risk assessment which should be encouraged

Lone workers

Lone working is any work activity carried out by an individual in isolation from other workers for any duration and at any particular time. It can include working in offices, in remote locations, at home, separately from others or travelling alone during a shift.

Lone workers are particularly vulnerable to risks such as:

- Sudden sickness
- Accidents
- Violence
- Stress
- Malicious/vexatious complaints against the worker

Wherever possible, individuals should not work alone on outreach. However, after comprehensive risk assessment, projects may consider that it is safe to conduct certain types of outreach alone, for example daytime sauna work. If so, projects should ensure the lone worker's safety. Projects may consider introducing a lone worker tracing system.

Risk assessment (see page 25) is vital in supporting individuals who work on their own. Support can also take the form of strict protocols and procedures for workers to follow.

However, an assessment should be made of whether the work carried out is actually safe for lone working and steps taken to resolve risk wherever possible. Suggestions for minimising risk include:

- Check in at the start and end of each shift
- On-call manager contactable by phone
- Timetable and route for working locations with a procedure for phoning in if this changes and at prearranged points in the session
- Periodic accompaniment and observation for objective assessment of practice and risk by manager or supervisor
- Training for lone workers to enable them to respond effectively to difficult situations. Some projects may find it useful for lone workers to have training in conflict resolution and breakaway techniques

For further information see the Health and Safety Executive leaflet 'Working alone in safety: controlling the risks of solitary work' at www.hse.gov.uk/index.htm

Difficult situations

Outreach workers may encounter difficult situations. These may not arise often, but if they do, workers need to have the skills and confidence to deal with them. Projects are responsible for ensuring that their entire workforce is fully equipped to handle difficult situations. For example:

- A sex worker is in pain, for example for deep vein thrombosis, abscess, stomach pains and asks to be taken to A&E
- You find a sex worker unconscious on the street
- An irate person approaches wanting to know why you are encouraging their partner to work by giving them condoms
- A sex worker approaches screaming and covered in blood after being attacked by a punter
- You encounter two sex workers fighting in the street
- A distressed man approaches saying his friend got in a car with a punter yesterday and they have not been seen since
- A police operation has started and sex workers are being arrested
- You are speaking to someone in a sauna and the police come in and raid it
- You are in a sauna and two men come in and start getting really aggressive with the receptionist
- A sauna owner comes in and tells you to get out as he does not want you giving the sex workers condoms because he sells them

Policy and guidelines

Projects should ensure that comprehensive safety policies and guidelines are in place to support staff in such circumstances. Good policy is good practice and projects should keep this in mind at all times. Sometimes, you may need to make specific policy to deal with an incident which has never occurred before. This is good practice, and projects should try to have policies for every eventuality. Make sure that all staff are aware of any new policy.

The following scenario illustrates a difficult situation which requires attention. Your project may find it useful to discuss how you would respond to such a crisis.

Scenario

An outreach team receives a call from a service user in distress saying that they have taken an overdose. The team calls emergency services and goes to the service user's home. They arrive before the emergency services. The service user begins to cut him/herself in front of them. The outreach team leaves the service user's home. The emergency services arrive and intervene with the service user.

The scenario raises the following questions about the health and safety of the staff and service user:

- What prior knowledge was there of the service user?
 - Could the scenario faced by the outreach team been avoided?
 - Could the prior knowledge of the service user have influenced the actions of the outreach team differently?
 - What existing policy and guidance relevant to this situation should have been followed?
 - Do existing policy and guidance relevant to this situation need reviewing?
- What support was available to the outreach team at the time of the incident?
 - What support and guidance should the outreach team seek for this incident?
 - What other services should have been notified?
 - What was in the best interests of the service user?
 - What are the needs of the outreach workers who have been involved in and witnessed this scenario?
 - What guidance and procedures can be put in place to minimise the risk of this occurring again?

This scenario demonstrates how quick decision-making may be necessary, and that if projects have inadequate guidelines, mistakes can be made. Projects should have safeguards to protect staff from being in situations they are unequipped to deal with. There should be guidelines to ensure damage limitation. For instance, some projects may have a senior member of management on call so that the outreach staff can pass on difficulties and leave crisis decision-making to them.

Working in partnership

Most projects work in partnership with the local police – good liaison with the police is best practice. In some areas, working as part of a multi-agency team is the norm. As well as providing consistency and better services, advantages of partnership working include the following:

- Police are more likely to be sensitive to the work of the outreach teams and are less likely to interfere with outreach activity
- Police can tell projects if special operations are imminent. Some forces give dates and times of operations so outreach workers know when a sauna visit/raid or street/PSE operation is planned. Outreach workers can avoid massage parlours if there is to be a police raid, and street sex workers can be told about street/PSE police operations
- Projects can work together with the police on environmental issues. Police clamp-down operations may be avoided if outreach workers can tell sex workers about community problems and encourage them to move on or change something that police may have been receiving complaints about
- Police can link projects into special units such as sexual crime units or those which deal with exploitation and grooming. This results in improved referral
- Clients can get a better service if you forge positive relationships with the police and others. For example, if police are aware and supportive of an outreach service, they can respond rapidly to concerns about crimes against sex workers and sex worker safety. If police are aware of the outreach service they can avoid disrupting service provision
- Working with other agencies such as young people's workers, drug workers, social services and drug liaison midwives assists service users and it also stops any duplication of work
- Regular meetings can result in improved communication. Through such meetings, channels can be established for raising awareness about any concerns that may arise about the impact of police activity on outreach services

Volunteers, seconded staff and students

Projects should have systems in place before using volunteers, seconded workers and students to conduct outreach services. Such staff are often an asset and some projects find it difficult to operate without volunteers. However, it is essential to have a framework of professional practice to ensure they are fully supported. The following may be useful.

Recruitment and selection procedures

Projects should have a fair recruitment process, which supports the volunteer. Remember that, although volunteers are giving their time for free, it is the project's responsibility to ensure that recruits are interviewed adequately to establish their suitability. The project should have clear aims and be sure about how volunteers will help to achieve these. When advertising for volunteers, be clear what is expected of them. The roles and responsibilities of a volunteer could be displayed on your website so that prospective volunteers are clear before they apply.

Useful tips for recruiting and selecting volunteers

- Ensure that all volunteers complete an application form
- Have an age policy which promotes good equal opportunities. Remember, outreach is challenging so it is important that a prospective volunteer is able to cope with difficult or challenging situations
- When interviewing, ask questions which will bring out any prejudices. It is essential to take on individuals who are sensitive and understanding of sex workers' lives and needs
- Use your interview skills to identify any hidden agenda. It is important that a volunteer wants to get involved for the right reasons
- When interviewing, try to include a difficult scenario so that you can get some feedback on an individual's basic mediation skills
- Seek references. Two is good for all new recruits including, if possible, one from a current employer. You may need to be flexible when recruiting people who have been involved in sex work, some of whom may find it difficult to get employer references
- Conduct Criminal Records Bureau checks

Induction programme

You should plan the induction well as this is the project's opportunity to pass on relevant information to inform and keep volunteers safe and confident. Inductions should be conducted over two days or more, depending on the size of the project and how much information needs to be passed on. Induction should incorporate basic training. After induction, the volunteer is ready to become active.

Useful tips for inducting volunteers

- Give a presentation to inform new volunteers of the project's work
- Inform new volunteers about terminology, language and cultures which they may encounter whilst on outreach. Volunteers will feel more confident if they understand these
- Have rules specific to all aspects of outreach and ensure these are clearly understood
- Ensure all new volunteers are aware of the policies of the project. Get them to sign to say they have read them
- Have a volunteer handbook which has all the relevant information that a volunteer needs i.e. roles and responsibilities, volunteer agreement, project policies, monitoring forms, guidelines and so on
- Provide basic training such as drugs awareness and sexual health training before new recruits do outreach. New volunteers should feel confident about doing the work. If they don't, sex workers they interact with are at risk of being misinformed or not informed at all. It is the duty of the project to train all recruits adequately.
- Organise ID badges. When doing outreach, ID should be shown if requested

Training

Projects should offer all volunteers initial and ongoing training to help consolidate their work and support their personal development. If a volunteer has unmet training needs, this can de-motivate them. A volunteer may become unreliable if they don't feel confident and service users' needs will not be met.

Useful tips for training volunteers

- Provide ongoing training through refresher courses and updates
- If your local authority or primary care trust provides free courses, negotiate places for volunteers
- If you work in partnership with other agencies, have a reciprocal agreement about places from each other's training programmes
- Compile regular newsletters and use these to circulate info about new legislation, research or documents about sex work

Supervising volunteers

Projects should provide volunteers with support. Supervision should be compulsory. If a volunteer is reluctant or refuses to participate in supervision, they should be suspended until a suitable outcome is reached. Most volunteers will welcome and thrive from professionally conducted supervision. Supervision should focus on individual tasks, issues and personal development, and should enable projects to monitor progress and evaluate individuals constructively.

Useful tips for supervising volunteers

- Provide regular supervision and be available at other times for issues that may arise. Supervision should be confidential, supportive and individual
- Conduct supervision in a private place where you cannot be interrupted
- Keep a record of supervision and ensure there are outcomes for any actions agreed, as this will demonstrate that the service of the volunteer is valued
- Welcome any ideas or suggestions made by volunteers and provide feedback
- Provide regular volunteer meetings so that volunteers can engage with other volunteers, and receive feedback and support from colleagues

Annual evaluation and reviews

Review systems annually. Encourage volunteers to give feedback on the service. Once an evaluation has been completed, disseminate the findings amongst staff, volunteers and stakeholders so that everyone knows how the service can improve.

Tips for evaluating the volunteer service

- Have a suggestion box which volunteers can use anonymously at any time. This provides feedback for projects, and gives volunteers a safe space to make suggestions
- Appoint someone to meet with volunteers and feed back issues to management
- Conduct annual feedback (by questionnaire) on training, support, supervision, meetings, the services of the project, safety issues and so on. Do this anonymously so that volunteers are honest. Give a deadline for returning the questionnaire and enclose a stamped address envelope
- Be approachable so volunteers feel comfortable about speaking to you at any time rather than waiting for meetings or supervision

Seconded staff and students

The above section on volunteers is relevant to seconded staff and students. Additional points are:

- When taking on seconded staff, draw up a service level agreement so you understand their aims and specify what you want from a partnership. Ensure that this will meet the needs of service users
- Before taking students on placement, meet them with the course coordinator/tutor. Discuss what the student wants, and clarify what the project can offer. Be sure that the project can meet the student's expectations. Students can be a great asset. However, if the work they are doing does not meet the course requirements, this can put extra pressure on everyone. Think about what the project will get out of a placement and the staff resources required, as students require considerable support
- Before going on outreach, check out whether seconded staff/students have their own liability insurance. If in doubt, do not take them and, for those who are insured, ask for this in writing

The role of volunteers, seconded staff and students

The role of volunteers/seconded staff/students on outreach depends on the size of the project and the intensity of the work. We suggest that:

- Projects should ensure that new volunteers work for a minimum of six months with an experienced member of the outreach team
- Experienced team members should reiterate anything that a new recruit is not sure about. Explain the culture attached to different types of outreach so new recruits understand the dynamics e.g. of street work. For example, the general public may view the partners of street sex workers as pimps and new recruits may have the same idea
- Experienced team members should encourage new recruits to engage with service users and give constructive feedback on performance
- Encourage new recruits to complete paperwork such as monitoring forms, ugly mug/dodgy punter reports and so on
- Encourage new recruits to feed back anything they are uncomfortable with or see as a problem

Frequently asked questions

What do I do if I suspect someone is under 18?

See table on child protection on page 22.

How can my project get into new brothels to deliver a service?

Often the best way is to be introduced by someone who works there or knows the owner. Good relationships with owners, managers, receptionists are important, as they are the gatekeepers. Call them, introduce yourself and your service and let them know what you have to offer. Free condoms are often appreciated, as are health services, as brothels want to be seen to care about sex workers' health. Something special, such as information in different languages or fast track appointments into clinic services, may provide a way in.

How can I help a trafficked sex worker?

If an individual wants to be taken out of the situation immediately i.e. while working in a brothel or flat, leave the premises and call your manager and then the police. Explain the situation and ask them to 'stage a raid' and get the individual out so that your project is not implicated, as this could make it difficult for you to gain entry in the future. If the individual does not want to escape immediately, there are other ways

of supporting them (see the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers). **Note:** some migrant sex workers are not victims of trafficking but have a range of needs that projects should consider.

What should I do if I suspect someone has been trafficked or forced into sex work?

Try to get them to come to your service, even if you have to get creative to find a reason (e.g. health check, free condoms, information) as you will have more privacy to talk. Work at maintaining a supportive relationship. The following, although not hard and fast signs, can be indicators that a sex worker is being coerced:

- Long working hours
- Working every day, without a day off
- Can't take time off to go to a clinic
- Don't know where they live
- Get taken to/picked up from work
- Haven't seen anything of the city they're in
- Don't go out on their own

If exploitation is evident, try to work with the person to change their situation (see the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers).

How can I help someone who has immigration problems?

See the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers.

What should I do if a sex worker wants to return home?

See the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers.

What does duty of care mean?

Duty of care means the duty a worker or an organisation has towards their service users or potential service users. In a child protection context, it is an organisation's/worker's duty of care to start child protection procedures if they suspect that a child is being sexually exploited.

When can I breach confidentiality?

See page 17.

How can I breach confidentiality without losing the service user's trust?

Depending on the urgency of the situation, try to discuss this with the service user first. Involve them in the decision making process as much as possible, so they feel in control.

What should I do if I meet a service user outside work?

See page 17.

Can I lend a service user money?

See page 14.

What do I need to know about record keeping?

See page 18.

How do I do a risk assessment?

For simple guidance on how to do a risk assessment, see Health and Safety Executive, Five Steps to Risk Assessment at www.hse.gov.uk/pubns/indg163.pdf. This provides straightforward guidance on carrying out risk assessment. If possible, involve other people who are affected for insight into risk and potential solutions.

What constitutes lone working?

Lone working is when someone works on their own, in isolation or separated from others without close or immediately accessible supervision. This can be for an entire shift or part of one such as locking up and leaving premises at the end of a shift or visiting a service user at home alone.

Should men do outreach with female sex workers?

As long as they are professional and adequately supported, never work alone and always work with a female worker, there is no reason why men should not do this type of outreach.

What is the police stance on sex work and how can I work with them?

The management and policing of prostitution is not the same in every area. Some projects have good partnerships with the police and some do not. To find out the stance of the police in your area, you need to meet and discuss partnership working (see section on working in partnership on page 29).

Should I disclose my own previous sex work/drug use history to service users?

Think about why you would do this and whether it outweighs your need for confidentiality/protection. Self-disclosure should not be used for your own therapeutic reasons. Be careful not to isolate or undermine other workers.

Can I accept a present from a service user?

See page 14.

Can a sex worker volunteer at a sex work project?

Different organisations have different policies about this. Some actively encourage sex worker involvement. Consider whether anyone concerned could be compromised and what can be put in place to avoid this. As with all volunteers, ensure appropriate support is in place.

If I need to know what is legal or illegal where should I look?

Seek up-to-date information from Release (www.release.org.uk).

References and further information

References and useful publications

AHRTAG, 1997. *Making Sex Work Safe*. London: ARHTAG/Network of Sex Work Projects.

Campbell, R., & O'Neill, M., (eds) 2006. *Sex Work Now*. Cullompton, Devon: Willan Publishing.

EUROPAP, 1998. *Hustling for Health: developing services for sex workers in Europe*. European Network for HIV/STD Prevention in Prostitution: European Commission.

EUROPAP, 2003. *Practical Guidelines for Delivering Health Services to Sex Workers*. EUROPAP: European Commission DVG.

Faugier, J., & Cranfield, S., 1994. *Making the Connection: Health Care Needs of Drug Using Prostitutes*. Information Pack. School of Nursing. University of Manchester.

Hester, M., & Westmarland, N., 2004. *Tackling Street Prostitution: Towards a Holistic Approach*. Home Office.

Home Office, 2006. *A Co-ordinated Prostitution Strategy and a summary of responses to Paying the Price*. COI: Home Office.

Hunter, G., & May, T., 2004. *Solutions and Strategies: Drug Problems and Street Sex Markets, Guidance for Partnerships and Providers*. Home Office: www.drugs.gov.uk.

Pitcher, J., 2006. 'Support Services for Women Working in the Sex Industry' in Campbell, R., & O'Neill, M., (eds) *Sex Work Now*. Cullompton, Devon: Willan Publishing.

Sanders, T., 2004. *Sex Work: A Risky Business*. Cullompton, Devon: Willan Publishing.

World Health Organisation, 2004. *Sex Work Toolkit: Targeted HIV/AIDS Prevention and Care in Sex Work Settings*. WHO: <http://who arvkit.net/sw/en/index.jsp>

Websites and useful links

A Coordinated Prostitution Strategy
www.homeoffice.gov.uk

Being Outside: Constructing a Response to Street Prostitution
www.scotland.gov.uk/Publications/2004/12/20410/48751

Children Act 2004
www.opsi.gov.uk/acts/acts2004/40031--d.htm

Commission for Equality and Human Rights
www.cehr.org.uk

Communities Against Drugs
www.crimereduction.homeoffice.gov.uk/drugsalcohol/drugsalcohol23.hm

Correlation European Network
www.correlation-net.org

Delivering Sexual Health Services to Sex Workers in Europe
www.nswp.org/pdf/EUROPAP-GUIDE-EN.pdf

Department of Health

www.dh.gov.uk

Department of Health Northern Ireland

www.dhsspsni.gov.uk/index

EUROPAP: Sex Workers in Europe

www.europap.net

**Every Child Matters: Change for Children
Young People and Drugs**

HMG, 2005

www.everychildmatters.gov.uk

Health and Safety Executive

www.hse.gov.uk/index.htm

HSE Five Steps to Risk Assessment

www.hse.gov.uk/pubns/indg163.pdf

Home Office

www.homeoffice.gov.uk

**Home Office/Tackling Drugs Changing Lives/
outreach research**

<http://drugs.homeoffice.gov.uk>

Information Commissioner's Office

www.ico.gsi.gov.uk

International Network of Sex Work Projects

www.nswp.org

International Union of Sex Workers

www.iusw.org

Joint Council for the Welfare of Immigrants

www.jcwi.org.uk

**National Treatment Agency for
Substance Misuse**

www.nta.nhs.uk

NHS Scotland

www.show.scot.nhs.uk

**Paying The Price: a consultation
paper on prostitution**

Home Office, July 2004,

www.homeoffice.gov.uk

Release: Sex Workers and the Law

www.release.org.uk

**Revised guidance for health professionals
on the provision of contraceptive services
for under 16s**

www.dh.gov.uk/en/

[Publicationsandstatistics/Publications/
PublicationsPolicyAndGuidance/DH_
4086960](http://Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4086960)

**Scottish Executive Guidance on Street
Prostitution**

www.scotland.gov.uk/Topics/

[Justice/criminal/17543/Response/
streetprostguidecons/LAguidance](http://Justice/criminal/17543/Response/streetprostguidecons/LAguidance)

Sexual Offences Act 2003

www.homeoffice.gov.uk

Stonewall

www.stonewall.org.uk

Suzy Lamplugh Trust

www.suzylamplugh.org

Terence Higgins Trust SW5

www.sw5.info/law.htm

The Liberty Guide to Human Rights

www.yourrights.org.uk

**The Sexual Discrimination (Gender
Reassignment) Regulations 1999**

www.opsi.gov.uk/si/si1999/19991102.htm

UK Network of Sex Work Projects

www.uknswp.org

Unison

www.unison.org.uk

United Kingdom Human Trafficking Centre

www.ukhtc.org

**Volunteer Development Agency, Northern
Ireland**

www.volunteering-ni.org

Volunteer Development Scotland

www.vds.org.uk

Volunteering England

www.volunteering.org.uk

Wales Council for Voluntary Action

www.wcva.org.uk

Glossary

Brothel

Any premises used by more than one man or woman for the purposes of prostitution, whether on the same day or different days (in series or in tandem).

DAT

Drug Action Teams (DATs) are Home Office partnerships responsible for delivering the drug strategy at a local level.

Dual diagnosis

The co-existence of two conditions, often mental health and substance use.

Duty of care

The duty a worker or an organisation has towards their service users or potential service users. For example, in a child protection context, it is an organisation's/ worker's duty of care to start child protection procedures if they suspect that a child is being sexually exploited.

Fraser Competency Rule

The rule by which any child below the age of 16 can give consent to medical decisions and interventions when they reach the necessary maturity and intelligence to understand fully the intervention proposed and the consequences (advantages and disadvantages) of their decision.

Gigolos

Male sex workers offering services to female clients.

Importuning

To make persistent, and usually annoying requests of someone, usually about soliciting.

Loitering or soliciting

Any tempting or alluring of prospective clients, through words, winks, glances, gestures, smiles or provocative movements.

Lone worker

When someone works on their own, in isolation or separated from others, without close or immediately accessible supervision. This can be for an entire shift or part of one, for example locking up and leaving premises at the end of a shift or visiting a service user at home alone.

Poly drug use

The use of two or more drugs combined. Most often seen in street-based sex workers with crack and heroin combined as a 'snowball', or used in tandem to alleviate the effects of comedown.

Public sex area

A known public area, usually outdoors, where people actively engage in sexual activities. These are often known as cruising and dogging areas. Although this is a place to go for reciprocal sex with strangers, sex is sometimes sold.

Public sex venue

A known venue, club or building where people actively engage in sexual activities. Sex is sometimes sold but not with the knowledge of management.

Racial discrimination (indirect/direct)

To treat one particular group of people less favourably than others because of their race, colour, nationality or ethnic or national origin. The law in the UK recognises two kinds of racial discrimination: direct and indirect. Direct discrimination occurs when race, colour, nationality or ethnic or national origin is used as an explicit reason for discriminating. Indirect discrimination occurs when the rules, regulations or procedures discriminate against certain groups of people. This can be subtle.

Rent boys or hustlers

Male sex workers offering their services to male customers.

Sauna

A club known to be a public sex venue where men have sex with men. A sauna is also another term for massage parlour (see page 4).

Subpoena

An order directed to an individual or organisation, commanding them to produce documents in a pending lawsuit or to appear in court on a certain day to testify.

APPENDIX 1

CLASH media guidelines

There may be many benefits to appearing in the media – you can have your say, tell your story, put your side of an argument and talk about your experiences. There can also be some pitfalls.

Before agreeing to take part in anything with the media, it may be worth considering some of the following issues:

- 1 Is there anyone who you don't want to know about you? (or to see you, if it will be on TV). For example: family, friends, the DWP (formerly DSS), the Police, Immigration. **Find out if your identity can be protected.**
- 2 Think about what you might be asked and what you want to say. **You might want to discuss this with a member of staff, before you get involved.**
- 3 Find out if you will have any rights over what is broadcast or printed. **In most cases you will have very little control over the finished product.**
- 4 If payment is involved, discuss this beforehand. **Try not to let money become a pressure for getting involved.**
- 5 Remember that although you can speak for yourself, in some ways you will be representing other people: e.g. homeless people, sex workers, or drug users etc. **The image that you put across could have an effect on public attitudes to your peer group.**
- 6 **Try not to do any interviews under the influence of drink or drugs, so that you are aware of what you are doing or saying.**
- 7 If you are going to be very critical about any organisations or individuals, **think about the consequences of this, especially if you may need them in the future.**
- 8 Be aware of not identifying anyone who does not want to be involved. Also ensure that if any filming is done on location (outside) that 'secret' places are not revealed (e.g.: begging patches, sleeping patches).
- 9 **Remember that you can stop taking part at any time.** If any questions are asked that you don't want to answer, you do not have to. **Do not feel pressurised to talk about anything that you have not agreed to.**
- 10 Doing interviews can make you feel quite exposed or vulnerable. **If you need support, or want to talk to anyone about anything you have said or thought about, because of the media contact. Please let the CLASH staff know.**

APPENDIX 2

Fraser guidelines

It is an offence for a person to have sex with someone under the age of 16 (17 in Northern Ireland). However, it is lawful for contraceptive advice and treatment to be provided to young people under the age of consent as long as certain criteria are met. These are known as the Fraser guidelines and were laid down by Lord Fraser in the case heard in 1986 before the House of Lords. The guidelines require that the professional is satisfied:

- The young person will understand the professional's advice
- The young person cannot be persuaded to inform their parents / carers or to allow the professional to do this on their behalf
- The young person is very likely to begin or continue having sexual intercourse with or without contraception / treatment
- Unless the young person receives contraception or treatment their physical or mental health or both are liable to suffer
- It is in the young person's best interests to be given contraceptive or treatment advice with or without parents/carers consent

Since 2004, the Department of Health has issued additional guidance for assisting young people with contraceptive and sexual health needs. This states that the professional should establish a rapport with the young person and provide time and support for them to make an informed choice by discussing the following:

- The emotional and physical implications of sexual activity including pregnancy and sexually transmitted infections
- Whether the relationship is mutually agreed or involved some degree of coercion or abuse
- The benefits of discussing issues with their GP and encouraging discussion with parents/carers or the involvement of another adult to provide support

See www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4086960 for guidance on contraception for under-16s.

Guidelines and legislation on child protection may differ throughout the UK. Refer to the disclaimer in the acknowledgement section.