The Challenge of Change: Improving services for women involved in prostitution and substance use





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Project overview





- Research project exploring policy and practice to address drug and alcohol treatment needs of women involved in street-based prostitution.
- Study comprised of:
 - Evidence and policy review;
 - Interviews with women with a history of substance use problems and involvement in prostitution, conducted by peer researchers (West Midlands; Yorkshire and the Humber)
 - Online survey of services (national) and observational site visits (West Midlands; Yorkshire and the Humber).

Findings: A hidden group experiencing substantial harms

- Drug Treatment Outcomes Research Study (2007): 10% of women commencing drug treatment reported exchanging sex for money, drugs or something else in previous four weeks.
- Reinforcing nature of drug use and prostitution; alcohol also an issue, though not generally as driving involvement.
- Substantial harms experienced:
 - Mental and physical health problems; sexual health risks
 - Very low self-esteem/'double stigma'
 - Violence from buyers and partners
- "I've been raped, I've been beaten up, sodomised, punched, tied up, stripped in the car and thrown out in the middle of the fields and having to walk home and knocking on someone's door because you can't just walk home. How humiliating can it get? Once that happens you don't forget."

Findings: Barriers to accessing support

- **Service hours of opening:** may not fit with women's work schedules; need for 24-hour support when struggling with lapse/relapse
- Inflexibility of some services: especially with missed appointments – some women reported being thrown off script immediately
- Consistency of keyworker: important to help foster trust, but not always in evidence/turnover of staff
- **Stigmatising staff attitudes:** some interviewees reported feeling 'judged' or 'looked down on'
- **Disparities in gender and age:** some reported problems with having a male keyworker unsurprising given histories of violence and abuse
- **Absence of wider support:** some perceived a lack of support beyond a script "they're not too bothered about getting you to move on"
- **Gaps in ongoing support and aftercare:** given longstanding nature of problems, this is a significant issue

Findings: Positive interventions

- Measures to increase accessibility of service: evening opening hours, mobile outreach services, childcare provision and telephone support
- Women-only provision: or, where this isn't possible, women-only groups and spaces
- **Peer support:** from 'real' peers can help to address 'double stigma'/perceived as easier to talk to
- Tailoring of standard drug and alcohol programmes: robust evidence for effectiveness of enhancement/tailoring of programmes for this group of women
- **Integration of provision:** seen as easier and more efficient; can also develop trusted relationships with workers
- Availability of a range of services: women involved in prostitution and substance use have complex, entrenched problems; change and recovery can take a long time. Range of services is therefore needed – from harm reduction and treatment services to exiting/moving on programmes.

Findings: Current provision of services (1)

- Just over half of services (52%) had evening opening hours
- Just over half of services (52%) had an outreach van or similar
- Less than half of services (42%) provided women-only sessions or times
- Less than a third (28%) provided specific sessions or times for women involved in prostitution
- Less than a third of services (30%) said they undertook outreach in prisons
- Less than a third of services (28%) said they provided support around children/pregnancy

Findings: Current provision of services (2)

Tailoring of standard programmes:

 Under a third (28%) of substance misuse services reported providing advice and information around prostitution

Domestic and sexual violence support:

- 16% of providers had **DV services** available in-house; 13% had **sexual violence support** available in-house
- Predominantly in sex work, exiting or women's community projects – rarely in substance misuse services

Peer support:

 Peer support was widely available, but substance misuse services were less likely to have women-only peer support

Wider support/help to move on:

2% of respondents provided housing services in-house;
 12% provided education and employment support in-house

Recommendations: For policy makers, commissioners and services

Policy makers and commissioners:

- Women involved in prostitution and substance use should be considered as a key priority within the emerging 'multiple needs' agenda.
- Their specific needs should be considered in and addressed by **national and local strategies**, including health and wellbeing and VAWG strategies, and Police and Crime Plans.

Services:

- A **range of measure**s can improve accessibility (evening opening hours, support with childcare, drop-in access).
- Tailoring of standard programmes is an effective approach;
 women-only provision is also crucial, as is access to
 domestic and sexual violence support
- Training and development of staff can help to address stigma, as can support from 'real' peers.
- Alongside harm reduction and treatment services, wider support should be available, including with housing and employment.