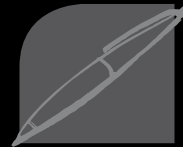


04

UK NETWORK OF
SEX WORK PROJECTS

GOOD PRACTICE GUIDANCE



Working with Male and Transgender Sex Workers

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 Ciarán McKinney (Director of Gay HIV Strategies (Ireland) and UK NSWP Board), Sarah Denison-Hunt and Del Campbell (SW5), Mark Cull (THT Brighton), Justin Gaffney (SohoBoyz and UK NSWP Board), and Mary Whowell (Associate Member and Loughborough University); supported by Geraldine Flanagan (UK NSWP).

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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.

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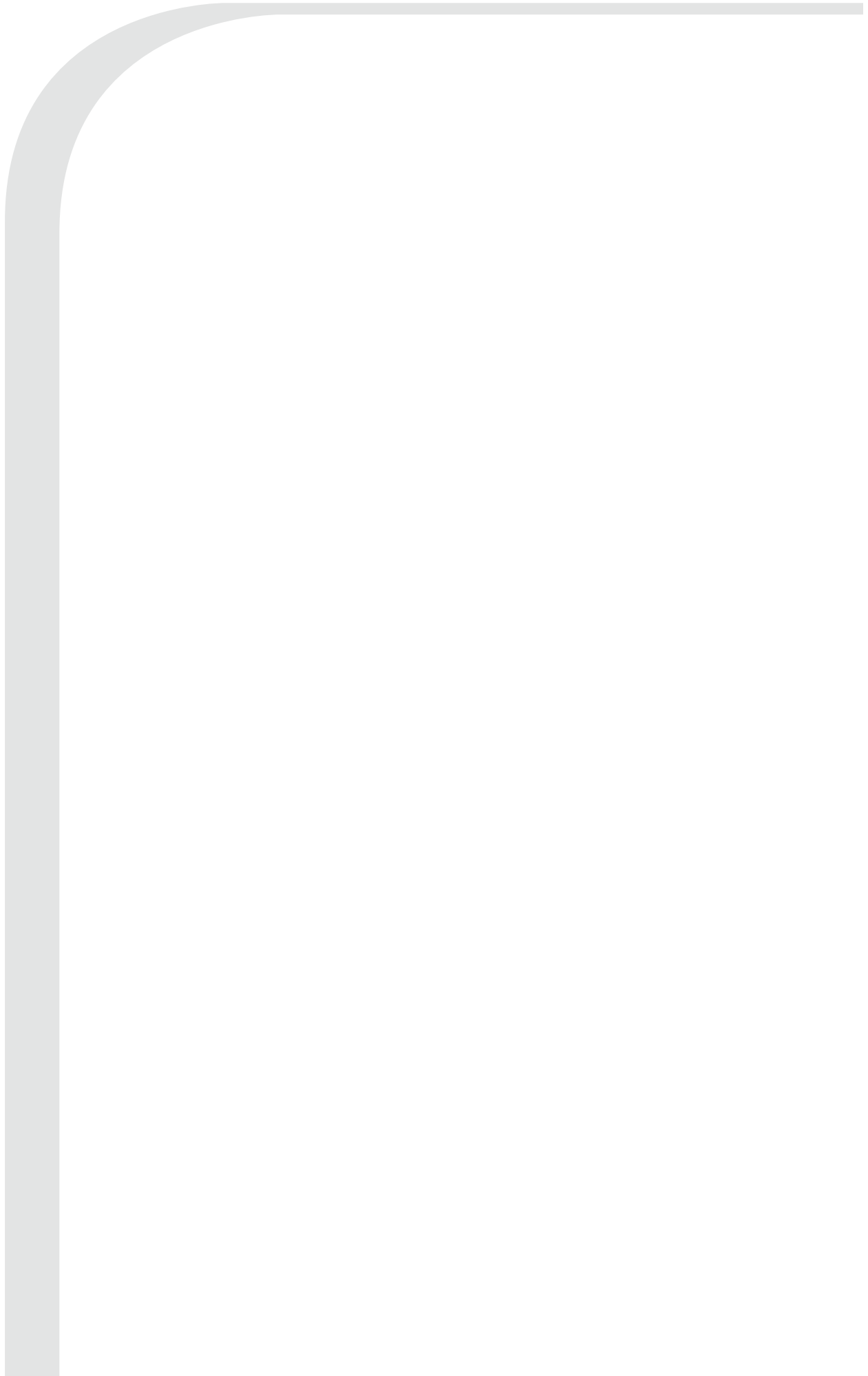
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Introduction

This document is one of a series of good practice guides developed by the UK Network of Sex Work Projects (UK NSWP) for use by agencies providing services and support to sex workers throughout the UK.

Most agencies work with female sex workers but an increasing number are also working with male sex workers, either exclusively, or in addition to their work with women.

One of the reasons for this guide is to address the lack of visibility of men in sex work. Most people tend to know where in their area women sell sex. But many people are surprised to learn that men are involved in selling rather than buying sex. There are numerous reasons for this lack of visibility, some of which we explore in this guide.

Some notable differences between male and female sex work are:

- The routes into sex work for men
- The ways in which men sell sex
- Sexual orientation
- The overlap of male sex work with the gay commercial scene and public sex environments (PSEs)
- HIV and sexual health
- Migrants
- Invisibility
- Support needs

This guide has been produced by several agencies which specialise in supporting men in sex work. We discussed the draft at two consultation meetings with men selling sex and their contribution was an important part of the process. While primarily focusing on male sex workers, we have also devoted a section to transgender sex workers.

We hope the guide will be a useful resource to agencies considering how to provide services to men and transgender people who sell or exchange sex. Many of the principles involved in supporting sex workers are generic: respect for the sex worker; a commitment to being user-led; facilitating choice-making about remaining in sex work or exiting; and harm minimisation.

Value statement

The UK NSWP has a broad membership ranging from organisations primarily involved in assisting men and women to exit sex work to those which focus on the human and civil rights of sex workers. To assist the process of producing this guide we agreed a set of core value statements:

- We seek to promote the empowerment of male and transgender sex workers including increasing their knowledge of their rights
- We promote choice – including the choice to exit sex work and seek other forms of work

- Sex work is, of itself, not inherently exploitative but individual situations vary
- We note that male sex work is not indicative of the person's sexual orientation
- We recognise the diversity involved in sex work and acknowledge that there are not rigid boundaries between indoor/outdoors and that men move between spaces and venues to sell sex
- We acknowledge that children and young people do not choose sex work; this is child exploitation and may require child protection interventions
- Prevention is also an integral part of the work of the majority of agencies

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 that is universally understood. Where the term 'service user' is used, it refers to sex workers who use the services of an agency. People who pay for sex are often referred to as 'punters' but this guide uses the term 'client'.

Definition of sex work

'Sex work' is a term used to refer to a range of situations where someone may be selling or exchanging sexual acts for money, accommodation, drugs, gifts, protection or any type of goods or service. Sex work encompasses a diverse range of sexual acts and practices including (amongst others) escorting, chat lines, porn, erotic dance, modelling and fetish work.

The diversity of male sex work

The male sex industry is large and diverse, and men enter sex work in different ways. Some men enter opportunistically through exchanging sex in public sex environments (PSEs); some make an independent and informed choice to sell sex; some take advice from friends; some reply to adverts in the paper and on the internet; some realise the money-making potential of their home web cams; and some exchange services to meet basic needs, such as a bed for the night. There are many entry routes into the sex industry.

Although there is evidence to suggest that men do work the streets in some UK cities (perhaps the most common stereotype of a sex worker is the 'rent boy'), the majority pursue different or multiple careers within the wider sex industry. Examples of such career choices include escorting, stripping, pornography work, chat line work, erotic dancing, peepshows, brothel work, fetish work, domination, role play and internet work. There are men working in the sex industry who do not see their work as a career choice, and may sell or exchange sex out of necessity or even against their will (which could constitute exploitation); whilst others work hard to provide a professional and marketable service. Whether sex work is viewed as a career or a means to instant reward is subjective to the sex worker.

As well as the huge range of sexual services available for purchase from men, those selling sex make up an increasingly diverse group. Although there is a view that only younger men sell sex, the average age of male sex workers has increased, and some services report working with men in their seventies. It is certainly no longer the case that male sex workers have to be in their teens or early twenties.

Perhaps because of changes in EU policy, there are now more migrant workers than before, including students who have come to the UK to study and choose to sell sex in order to pay tuition fees and maintain their chosen lifestyle.

As well as money, some men exchange sex for other goods and services, including gifts, food, drugs, lifts in cars or a bed for the night. Project workers need to be sensitive to this economy of exchange as the men involved may not recognise what they are doing as sex work, or identify as sex workers. Such exchange can also be found in institutional settings such as prisons, schools and children's homes, where sexual services may be exchanged for alcohol, cigarettes or drugs which are difficult to get otherwise. The UK NSWP regards under-age involvement as child abuse, not sex work; however, we recognise that some adult sex workers may have had these experiences in the past.

The reasons men sell sex vary, and involve varying degrees of choice. The concept of choice needs to be understood as a continuum. For example, acting in a porn film may not be at the top of someone's list of money-making options but it may provide the opportunity to make a relatively large sum of money in a short time (perhaps days or weeks) which may be more desirable to working in another job for months.

Not all men working in the industry identify as gay or bisexual. There are many heterosexual men selling sex to men and women who may have needs specifically relating to their sexuality that must be sensitively addressed. Hence, heterosexual men have the double stigma of being sex workers and having sex with men, just as gay or bisexual men have the double stigma

of being sex workers and identifying as gay or bisexual. Heterosexual men may feel uncomfortable going to services designed specifically for gay or bisexual men. They may have female partners, and they may need information on women's sexual health and general wellbeing in order to deal with this aspect of their personal life. Agencies and workers should ensure that they do not exclude heterosexual male sex workers by assuming that men who sell sex to other men are gay.

As many male sex workers are not street-based, they are often under the radar of the police and other authorities, contributing to a lack of visibility. Also, many male sex workers overlap with the gay commercial scene, making it sometimes difficult to identify who is selling sex, rather than cruising or socialising.

Support needs of male sex workers

Men enter sex work for different reasons, come from different backgrounds and have different life experiences. Not all male sex workers have support needs. Some simply need information about personal safety and risk minimisation. Others need support for one or more areas of their life, which may or may not be intrinsically linked to their work. Many male sex workers, who have male customers, identify as heterosexual.

Housing

Men who find themselves homeless or in insecure housing may sell or exchange sex in an effort to resolve their homelessness. Research suggests that homeless gay, bisexual and trans men are a particularly vulnerable group [Cull et al, 2006].

Some men, particularly young men, may end up exchanging sex for accommodation. This can be temporary for the night or longer term but may involve a degree of coercion. Resolving homelessness does not mean that the person stops selling sex. He may decide to continue selling sex but from a less vulnerable situation.

Mental health

While many male sex workers do not have mental health problems, low self-esteem, depression, self-harm and suicide attempts are common. Mental health issues may be aggravated by drug and alcohol use. Some

male sex workers may have experienced negative reactions because they are gay or bisexual.

If referring someone to a service, project staff should make sure that the mental health practitioner is able to provide a service to a sex worker in a non-judgemental manner.

Drugs and/or alcohol

Many male sex workers sell sex on the commercial gay scene, and some may use alcohol and drugs with clients. There are health and safety issues for the sex worker, and projects may wish to address harm minimisation strategies with these service users.

Some agencies have noticed that some [often heterosexual] male sex workers use crack or heroin, and are more likely to work outdoors and offer sex for money in an ad hoc way.

Being stoned, high or drunk affects judgement, risk-taking and an individual's ability to have sex. Some clients may offer the sex worker drugs or alcohol, and some may even 'spike' a drink.

Sex workers may be asked to bring drugs to clients. They should be aware that they risk being charged with supplying offences if caught, and the penalties are more severe than for possession alone.

Viagra

Some men use Viagra or Cialis before having sex with a client. Frequent use can lead to dependency. Projects should advise service users that it may be dangerous to use Viagra or other erection drugs with poppers as they both lower blood pressure.

HIV Combination Therapy

Some HIV drugs interact with drugs such as GHB (Gamma Hydroxy Butyrate) and Ecstasy and can cause dangerously high or life-threatening levels of these drugs in the body. It is advisable for someone on HIV medication to discuss these issues with their HIV doctor and pharmacist.

Sexual health

Agencies working with sex workers should create good links with their local sexual health services and GUM clinics. Some GUM clinics have special provision for sex workers, which might include fast-track appointments or specialist drop-ins. Sex workers should be encouraged to have regular sexual health screenings and HIV tests, dependent upon the types of sex they are having and any sexual risk-taking behaviour. It is also advisable for sex workers to have Hepatitis A and B vaccinations.

[See also next section.]

Domestic violence, sexual violence and sexual abuse

Younger men may be a target for older, exploitative, predatory men, who might attempt to 'groom' them for sex or sex work. Project staff should ensure that male sex workers are offered the opportunity to talk about situations in which they are vulnerable to violence or abuse.

Experiences of domestic violence, sexual violence and sexual abuse are generally under-reported. Male sex workers may benefit from support and advocacy to report these incidents. Men are often regarded as perpetrators, rather than victims, of domestic violence. Broken Rainbow supports people experiencing same-sex domestic violence: www.broken-rainbow.org.uk

If the perpetrator is a client, developing or reporting to a 'dodgy punter' or 'ugly mugs' scheme might alert other male sex workers to avoid him. See also the UK NSWP Good Practice Guidance, Ugly Mugs and Dodgy Punters.

Exiting

Support for sex workers should focus on improving health and other needs. It should not be driven by an agenda or targets on exiting the sex industry.

The issue of exiting is very complex. A sex worker may not be ready to successfully exit until some or all of his support needs have been met. It is, therefore, important that ongoing support is available to those men who do not yet want to exit the industry.

Sex workers who have limited or no other work experience, and few or no qualifications, may find it difficult to find alternative employment, particularly if they have gaps on their CV or a criminal record. They may need support to get into training and education schemes, and to look and apply for work. They may also benefit from continued support once they have found alternative employment.

Sex workers who have other part-time or full-time work may have less difficulty in leaving the industry. Men may exit and return to sex work over many years.

For further information please see the UK NSWP Good Practice Guidance, Working with Sex Workers: Exiting.

Other support needs

Debt advice

Some sex workers may be in debt. Most Citizens Advice Bureaux offer free money advice services.

Legal advice

Some sex workers may need legal advice, for example about asylum applications, involvement with the police, eviction proceedings and so on.

Personal Safety

Refer clients to the UK NSWP resource: Keeping Safe: Safety Advice for Sex Workers in the UK.

HIV and sexual health

The risk of acquiring a sexually transmitted infection (STI) during sex work varies, and is influenced by various factors. Epidemiological research for HIV shows a low prevalence of HIV in sex worker populations in the UK. The exceptions are intravenous drug users, where the risk lies in sharing contaminated injecting equipment, and migrant sex workers from HIV endemic countries, who mostly acquired their infection in their country of origin.

For other STIs there is less consistent data, but several studies show that the risks for an STI in sex workers is more related to unsafe sex with their private non-paying sexual partners, rather than from clients. Condoms do not protect against all infections (herpes or warts) or infestations such as scabies or pubic lice, so STIs are, therefore, an occupational risk. Outreach and project staff should have a general awareness of the following information if discussing sexual health issues with men who sell sex:

- New genital symptoms particularly after recent sexual contact
- Sexual assault or rape
- Signs or symptoms of classic STIs
- Lower abdominal and pelvic pain/symptoms
- Pain/discomfort when passing urine

- Painful testicles (swelling and acute pain) in men under 35 years
- Lumps, lesions or growths in the genital area

Practitioners should recognise that sudden onset of conjunctivitis (acute, red, sore eye); blisters or sores around the inside of the mouth or on the lips; sore throat; swollen lymph glands; spots, rashes or lumps and bumps around the genitals; pain when passing urine or increased frequency of passing urine; discharge (leaking) from the penis, and/or rectal pain, discomfort or discharge, may all indicate of the presence of an STI.

During discussion, practitioners should estimate potential risk to individual sex workers. Any screening should be done with their full consent and understanding. Deciding to test for STIs is agreed with the sex worker, and implies individual risk assessment so they can make informed decisions about risk taking. Some sex workers are reluctant to report anal sex but research shows that many sex workers have rectal infections. You could tell the sex worker about this, and suggest that screening should include rectal swabs.

If your service does not provide sexual health services, you should establish links with your local sexual health or Genito-Urinary Medicine (GUM) clinic to facilitate referral. You may be able to negotiate fast-track services for sex workers.

HIV-positive sex workers

Disclosure of HIV status is becoming contentious as case law emerges and guidelines are developed. Health professionals and project workers are not sexual or moral police. Practitioners should be familiar with case law and recommendations in their area, and should inform HIV-positive sex workers of this, providing correct and accurate information to help them make informed choices. Neither the sex worker nor the public health service can take away the reality of risk that clients take when buying sex.

For guidance on HIV transmission and the law and up-to-date information on case law and case reviews/summaries, see www.aidsmap.com

Access to PEP

Post Exposure Prophylaxis (PEP) is a treatment to prevent a person becoming infected if there is a chance that HIV has entered the blood stream, such as a condom breaking at the point of ejaculation. The key facts about PEP are:

- It could stop someone getting HIV
- It must be started as soon as possible after unsafe sex or a condom breaking and within 72 hours (three days)
- It involves taking anti-HIV drugs for four weeks
- It has side effects which can be severe
- It is not guaranteed to work

Studies have shown that by taking anti-HIV medication (anti-retrovirals) within 72 days of an exposure risk to HIV, there may be an opportunity to prevent infection by stopping the viral replication of the virus and preventing it taking hold.

PEP is likely to be considered if a sexual partner is known to have HIV or is from a group or area of high risk and one of the following sexual acts has occurred:

- Receptive anal intercourse
- Insertive anal intercourse (active role)
- Insertive vaginal intercourse
- Oral sex and taking ejaculate (cum) in the mouth

If the sexual partner is of unknown HIV status, but not known to be from a high-risk group or area, then PEP is only considered when receptive anal sex has occurred.

High-risk groups for the purpose of PEP assessments include men who have sex with men (MSM); intravenous drug users; and recipients of blood transfusions in the developing world. High-risk areas include countries with a high prevalence of HIV.

Projects/services should be familiar with the accessibility of PEP locally, and be able to advise sex workers about this. For more information on PEP see www.tht.org.uk

Anogenital health

Some male sex workers wash themselves too often and may use harsh chemicals. Repeatedly washing the genitals, but also the skin and hands, can cause damage to the natural protective properties of the skin and mucous membranes, and may lead to conditions such as dermatitis, which can increase the risk of infection. Frequent showers (e.g. in between customers) can cause skin to dry. Outreach and project staff should advise male sex workers to replace highly perfumed products such as soaps and shower gels with pH-balanced products, which help maintain the natural flora of the skin.

For all men, but particularly those who are not circumcised and still have a foreskin, over-washing the head of the penis and under the skin can cause irritation, and may destroy the natural protective environment of the glans, leading to conditions such as balanitis.

Using creams or sprays to increase sexual prowess or the strength and duration of an erection is not advisable. As with herbal or alternative forms of Viagra, such products are often unregulated and the exact nature of their active ingredients may be unknown. Practitioners should, therefore, warn male sex workers not to use these.

Cock-rings or bands may be safer alternatives to help sustain an erection longer, rather than pharmaceutical or chemical means. However, men using such products should know how to use them safely. Practitioners may need to educate men about safe application and duration, and what to do when something goes wrong, such as swelling preventing removal.

Men who have receptive anal sex should always use a sufficient amount of lubricant. They should avoid causing little wounds or fissures of the anal sphincter, as these do not heal easily, which creates discomfort, and more risk of infection. When touching the anal area with fingers, good hand hygiene is important (wash with soap) to avoid transmitting intestinal infections. Anal douching is widely used but carries the risk of damaging the rectum. Practitioners should know about these practices including use of suppositories and enemas, and offer

practical advice to sex workers to prevent risk of infection and/or rectal trauma. This includes advising sex workers that the anal and rectal lining is a highly absorbent mucous membrane, and substances placed inside the anal passage during sex play (such as alcohol or cocaine) are quickly absorbed into the blood stream in a concentrated form.

To prevent urethral irritation and potential bladder infections, men should drink sufficient amounts of clear liquid and pass urine after ejaculation. Certain fruit juices (such as cranberry juice) have also been shown to have a preventative and treatment effect against bladder infections. Catheters can increase the risk of infection or urethral trauma if not used with care and adequately sterilised. This is the same with 'sounds' or 'probes' which are becoming increasingly popular (a long thin solid tube which can be made of metal, plastic or silicone, that is inserted down the urethra via the meatus of the penis; novelty ones are also available which light up to give a 'glow in the dark' erection) and men should be warned about the risk of possible urethral stricture or increased risk of developing non-specific urethritis (NSU) due to urethral irritation. If practitioners are aware of men using such devices, either on themselves or with customers, they should advise them about the risks of infection and proper application/insertion. Sharing such devices without adequate cleaning in warm soapy water between insertions with different partners, will increase the risk of transmission of STIs and HIV.

Outreach

Your agency should already have an outreach policy outlining reasons for outreach, the nature of the work and guidelines for staff. If this is not the case, you may wish to consult the UK NSWP Good Practice Guidance, Working with Sex Workers: Outreach.

This section is not a 'how to' guide to providing outreach to male sex workers, but identifies some issues specific to male sex work.

Outreach to men may take place in various settings: street and public sex environments (PSEs), bars/clubs and the gay commercial scene, saunas and massage parlours, brothels and private clubs, private houses and flats, escort agencies and the internet.

How sex work is organised in an area depends on the visibility of the men selling sex: the more hidden the sex worker population, the harder it is to reach through outreach and intervention services. It also depends on local conditions and history. Before starting any outreach or interventions, you should have a clear idea of how sex work is organised in your area, and how you will reach the different sectors of the sex industry.

The following are examples of how sex work is organised in different working environments, and how outreach can be planned. It is not an exhaustive list.

Street work and other public sex environments (PSEs)

Examples of PSEs include toilets in parks, lay-bys, shops, theatres, town centres and rural communities; back alleys near gay bars and clubs; paths by rivers and canals; beaches; car parks and truck stops; saunas and swimming pools; trains, coaches and train/coach stations; backrooms in bars and porn cinemas, and of course the street. In short, the list encompasses any location which offers willing participants and opportunity. Many people who frequent PSEs expect sexual encounters that are free of charge, rather than to meet sex workers.

Project workers should examine their personal views on people who use PSEs. It is not helpful to think of them as sordid places, exclusively inhabited by 'dirty old men'. Sex work at PSEs may be opportunistic. A man may be looking for casual sex and end up being paid for sex but may not consider himself a sex worker.

PSEs sometimes attract younger men who are exploring their sexual orientation. Workers may need to judge whether it is necessary to involve social services or the police or whether to engage with a young person to establish dialogue and trust, which may lead to the young person engaging with your service.

Reporting to the police or other agencies may cause conflict about your role in the PSE/on the street. This may be resolved by having a clear policy and procedure, and ensuring that workers are skilled and confident in their application.

If the outreach is taking place at a public toilet ('cottage'), it may be safest and most appropriate to work only with men outside the cottage, rather than with men at a urinal, washbasin or in a cubicle. The latter might cause confusion about your role, or lead to your arrest.

Well-known cruising areas also attract the attention of people seeking to attack gay men.

Bars

By targeting outreach at the places sex workers go, you can reach a significant number of sex workers. Depending on how supportive managers/owners are, it may be worth talking to bar staff first. Outreach in bars can be challenging because:

- Sex workers may be off duty and not interested in engaging
- Outreach workers might use the bars in their free time (and, especially in the case of gay bars, there might be few alternatives in the area)
- Bars are often noisy and limit the interaction; be clear what your aim is
- Bars may have 'darkrooms' where clients have sex on the premises: is it appropriate for outreach staff to be there?

Given the nature of the commercial bar/club scene, this type of work is best undertaken in pairs. Some gay venues (especially those where sex occurs on venue premises) are men-only, so the outreach team will have to be all men. In generic venues, with a mixed clientele, women staff may do this work.

Saunas and massage parlours

There is a difference between working in an overtly gay sauna and a regular private or municipal sauna. In gay saunas, it may be possible to come to an arrangement with managers/owners so that your outreach work is explicit, has their official blessing, and can stretch to putting up posters or providing free condoms and lubricant. In regular saunas, it is highly unlikely that this will be possible.

Outreach in non-gay saunas is likely to be covert and conducted with great sensitivity. The notion of sex being tolerated as long as nobody makes an issue of it may extend to overtly gay saunas, which fear official/police interference.

It may be stating the obvious, but it is challenging to hand out condoms and leaflets to naked individuals. Approaching men in an unambiguous way, while simultaneously deflecting the advances of other men (in some saunas, especially those in which your outreach work is discreet and without the knowledge of the managers/owners) is clearly not easy.

Work in saunas which are exclusively male can only be undertaken by male staff, and in gay saunas, heterosexual male staff members may feel uncomfortable, especially if they have to be naked. Staffing may, therefore, be an issue. As with other forms of outreach, it is best undertaken in pairs, and, ideally, never alone. As with other PSEs, workers need to consider whether it is professionally acceptable to use the sauna for their personal use at other times.

Brothels and private clubs

A significant benefit of providing outreach to brothels and private clubs is the peer network. These sex workers are not working in isolation, and they can relate to and

socialise with other sex workers. This is a useful resource for outreach workers, especially for directing newer, inexperienced sex workers to learn from those who are more experienced. Outreach workers can often facilitate this process.

The ENMP pilot survey (Gaffney et al, 2003) showed that for many young men selling sex in brothels, this is a short-term activity and a higher proportion of men tend to be migrant workers. It may, therefore, be an opportunity to discuss choices with the sex worker and inform them of their rights. If they feel they have no choice but to sell sex for reasons to do with immigration status or finance, you may be able to help the sex worker explore other options and alternatives.

When working in these establishments, you should work in pairs. It depends on the relationship with the managers/owners, but there are no practical reasons why a female worker can't be one of the pair.

Private houses and flats

Men selling sex indoors advertise their services using the gay press or local newspapers, calling themselves escorts or masseurs. Unlike female sex workers, who tend to use 'working flats', the majority of independent male sex workers sell sex from the place they live. This can have implications for physical and psychological health, although violence and/or abuse against male sex workers working independently from flats is very rare.

A sense of isolation and the competitive nature of the business make indoor workers reluctant to access services, especially drop-ins.

There are various ways to establish contact with independent indoor sex workers. Many sex workers advertise in the local gay press.

If you contact these publications, you may be able to arrange to be around on the days when sex workers come in to place their adverts. Their staff may be happy to give out your literature, rather than allowing you into their offices. Alternatively, they may allow you to place an advert for your service within the escort/masseur pages, usually not for free, but at a reduced rate.

If planning to provide outreach to independent indoor workers:

- When cold calling, keep your contact with the sex worker brief. Remember this is their business line and they may not want it blocked in case they lose potential customers. Be clear about your aim: either to tell people quickly about your project/service, or to arrange a visit
- If arranging a visit, just ask for the general area in which the sex worker lives. Do not push for the full address as most sex workers are reluctant to give such details on a first contact. Say you will call (from your mobile phone) when you are in the area. This will give the sex worker time to think and the opportunity to decline your visit. Tell the sex worker how many outreach workers will visit and their gender. This means the sex worker knows what to expect, and allows them to remain in control about the visit
- Have a clear policy about leaving messages on answering machine or voicemail and their content
- Visit in pairs
- With home visits, be prepared for any eventuality. Have a clear outreach policy to guide staff, for example, what to do if they come across an underage child, or drug use or a firearm

Escort services

Most outreach work to escort services will not result in direct contact with men selling sex. The best you are likely to achieve is a meeting with the escort service managers/owners. Tell them about the services you provide and leave information (leaflets, flyers, condom packs and so on) to pass onto sex workers registered with the service. If you are providing outreach from a project/service base, the only way you may be able to monitor how effective this intervention has been is to record how many of the new contacts using your service found out about it from their work with an escort service.

The internet

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

Projects and services need to consider their position, often influenced by the nature of their funding, before considering whether this is an area of outreach that they wish to explore. The internet is unregulated, and most of the sites providing chat rooms or escort areas used for selling sex, are linked to and have 'hyperlinks' (allowing the web user to click an on screen button and to go directly to a different website) to more hardcore (and potentially illegal) websites.

However, the internet is one of the most rapidly expanding media resources and it offers new methods for outreach. A simple way to get started is to email all sex workers who give email addresses in their newspaper advertisements, or who have websites (do a web search to find these). This is an excellent way to establish a connection with sex workers.

If using chat rooms, your service/project may wish to invest in scripting software. This monitors the chat and transcribes the dialogue as it occurs. You can store this securely and confidentially as a record of the session. This can protect you from any accusations about the content of online discussions.

Outreach workers should avoid using their own personal screen/user name, especially if they also use a site when not at work to cruise or obtain potential sexual partners. 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 customer (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 needs to be agreed. For example, is it to raise awareness of the service; or is it to engage with men so you can provide online counselling on health promotion and harm minimisation? These are key issues to resolve before embarking on this type of outreach.

Migrant sex workers

Migrants¹ are now the largest group in the UK sex industry. Migrant male sex workers present challenges for service providers in two main ways.

Firstly, lack of documentation and lack of awareness of services and assistance means that migrant sex workers do not approach services. They may fear being reported to the police or simply not know that help is available.

Secondly, the meaning of 'having sex with other men' varies according to each individual and the socio-cultural setting they come from. This means that issues of gender/sexual self-identification cannot be dealt with in terms of gay or straight 'sexual orientation' as these are by no means universal concepts, even in the UK, and are experienced very differently at an individual level. In some contexts, men having sex with other men for money is coherent with a male/straight identity. In other cases, this is understood as part of a female/transgender/gay identity, usually in relation to the sexual role (active-male/passive-female) conventionally played in sexual intercourse.

These considerations are important for services and projects targeting migrant male sex workers because how sexual practices relate to self-identification can impact heavily on sexual behaviour. In fact, some migrant (as well as UK-born) male sex workers can experience deep feelings of ambivalence and shame about their sexual/gender identification and their involvement in sex work. In a few cases, these feelings can coincide with self-destructive and addictive behaviour which can only be understood and addressed in the light of this complexity.

In order to respond to the specific needs of migrant male sex workers, existing projects and services should:

- Make sure that all (particularly non-EU) migrant service users know that they can use them regardless of their legal migration status and without any negative consequences (such as deportation)

¹ It is important to distinguish between EU migrants, who are legally entitled to work and reside in the UK and (with some restrictions) to access social/health services, and non-EU migrants, who often do not enjoy these rights in full.

The need for non-EU migrants to obtain a visa to stay and work in the UK and the restrictive approach to migration means that it is increasingly difficult to obtain and maintain a migration legal status. This may make non-EU migrant male sex workers more likely to accept exploitative terms in their private lives (relationships, housing) as well as professional lives, within and outside the sex industry. This can affect their capability to negotiate safer sex and their general wellbeing.

- Address the needs of migrant male sex work holistically by taking into account their psychological wellbeing as well as their legal migration status
- Offer free and confidential legal and psychological assistance

For more information on migrant sex workers see the UK NSWP Good Practice Guidance, Working with Migrant Sex Workers.

Transgender sex workers

'Transgender' is an umbrella term which includes transsexuals (both male to female, and female to male), transvestites, cross-dressers and several other forms of gender variance.

Agencies working with male sex workers may have contact with clients who are in the process of transitioning. Agencies should consider the degree to which they engage with trans people. Some agencies working with male sex workers also work with trans service users, both pre-operative and post-operative. It may demand a change in the organisation's culture, and will almost certainly require staff training, most appropriately provided by a representative from a transgender support group.

There are organisations which provide information and resources on trans issues, as well as specialist sexual health services for trans people. For more information see the Gender Trust www.gendertrust.org.uk and Press for Change www.pfc.org.uk

Project staff should also be aware of the difference between sexual orientation and gender. Sexual orientation describes whom a person feels sexually attracted to. Gender describes a person's self-conception as being male or female, regardless of their genitalia or other characteristics.

Staff need to familiarise themselves with terminology and technical terms, while recognising that this area is evolving within the trans community itself. People identify in different ways along the gender variant spectrum.

Gender Identity Dysphoria (GID) describes the condition of one's body not being consistent with one's gender. Gender identity departments are located in psychiatric services, and GID assessments are carried out by psychiatrists. Referrals are made through mental health teams, not GPs, but service users will need a GP to refer to the mental health team if your agency is unable to do this.

Trans people may face discrimination such as loss of job when employers discover their trans status, being denied health services, loss of family contact through lack of understanding, harassment from neighbours, violence, threats and lack of appropriate services if homeless. Trans sex workers have the added taboo of being sex workers.

Experiences of marginalisation can mean that trans sex workers are reluctant to engage with services. This may require consistent contact in order to build up trust.

Trans sex workers who have had genital surgery (the vast majority are male to female) may not realise that the neovagina is susceptible to HIV transmission. Your service may need to reinforce safer sex awareness.

The issue of 'passing' is another painful, stress-inducing issue. 'Passing' as a chosen gender requires more than a wig and make-up. Whilst some trans sex workers are indistinguishable from non-trans women (the majority of trans sex workers identify as female), many face humiliation and taunts if they do not meet social expectations of femininity. Workers might consider offering support on make up, nails, wigs and hairstyles, clothing, wearing heels, walking and so on.

Staff also need to be aware of appropriate pronoun usage in relation to trans service users. Referring to a transsexual woman as 'he', for example, could be very hurtful to the individual as well as affecting her confidence in the service. It should be made clear to service users that they are accepted as whatever gender they present as.

You should establish links with police LGBT liaison officers usually based in Community Safety Units, experienced gender specialist counsellors, mental health teams, support groups, homelessness units and hostels.

Some clients sell sex to pay for their surgery; some because they have limited employment options; and some because there is a market for 'chicks with dicks'. These last do not identify as trans but see this as a way to make money for a limited period by having breast implants, which will be removed when they exit sex work.

Agencies might need to consider if they are going to engage in service delivery with trans sex workers as it could require a longer-term focus if the agency has not already established contact with this population. Working with trans sex workers should not be seen as an 'add-on' to current provision, but needs resources and training.

Invisibility

The visibility of male sex workers within the landscape (conceptual or otherwise) has been debated by service providers, policy makers, academics, the media and social communities for decades. This section discusses the (in)visibility of sex workers in different contexts. It does not aim to generalise the complex dynamics of male sex work, but to make general, useful points.

Sex workers who work in public spaces

Public spaces include streets, bars, saunas, toilets and other publicly accessible areas. Some service providers and others in some large cities have noted that identifying street-based sex workers can be difficult. This can create problems especially for new services which want to work with street-based male sex workers, but are unable to identify their client group.

Misidentification of sex workers may be due to factors affected by local dynamics, although some more general points may be:

- The spaces men work in may be public sex environments (PSE), making it difficult at times to identify which men are working and which men are cruising for sex
- The spaces men work in are often used by the public (e.g. bars, train stations, commons) and male sex workers may 'blend in' with the general population. When approached by outreach teams, men may say they are just hanging around in the area, and this may be more plausible than if working on a well known street beat or PSE. This is often an issue for working with younger men who may not want to disclose their sex work status and are nervous of service providers
- Large street beats known for men selling sex to men have decreased because of increased accessibility of mobile phone and internet technology and the move from outside to more transient and electronically organised sex work. This makes it difficult for projects to target men through outreach and means that they need to enter different environments to engage with men

Sex workers who solicit through electronic means

The prevalence of networking sites for men seeking casual sex with men has increased opportunities for commercial sexual activity. Gay contact websites offer the opportunity for escorts to advertise their services, and there are many sites dedicated to the commercial male sex industry. Adverts for escorts and other sexual services are freely available in the gay press and associated magazines. The commercialisation and popularisation of the male sex industry and associated adult entertainment markets have allowed the industry to become accessible to different social groups, especially since more people have internet access at home or work. In some ways, this has increased the visibility of male sex workers.

Male sex work and policy

One of the most noticeable invisibilities of male sex work comes in the wake of the new Home Office (2006) prostitution strategy within which male sex workers hardly feature. The strategy states that there was little research available on male sex work. It also comments that male sex work 'does not, in general, have the same

issues regarding drug use or coercion and so rarely comes to the attention of the police' (Home Office, 2006 p9) despite agencies suggesting that there is localised evidence to the contrary. The now extensive off-street male sex industry comprising pornographic artists, exotic dancers and strippers, telephone sex artists, and the specialist service market (e.g. domination and asphyxiation services) does not feature in the document, implying that those sex workers, despite providing increasingly specialised services, have no requirements for service intervention.

Linked to the invisibility of men in sex work policy, is the notably smaller number of sex worker agencies available for men who sell sex. Within this group, the focus of services is often split between street-based sex workers and escorts with few services working with men who work in the adult entertainment sector.

However, London-based services SW5 and SohoBoyz are exceptions which work with men working in all sectors of the sex industry. See also the International Union of Sex Workers website www.iusw.org for an example of an organisation working with a diversity of sex workers.

Literature on male sex work

There is a dearth of academic work on male and transgender sex work. Although male sex workers are beginning to feature more heavily within literature on sex work, work on transgender sex workers remains largely invisible (although see Aggleton, 1999).

Research into male sex work has progressed alongside what can be considered current societal, academic and political mores. Hence in the 1940s, when homosexuality was still highly stigmatised, much research focused on what were perceived to be amoral sexualities and socially unacceptable sexual activities (Bimbi, 2007). Research then progressed to exploring the life histories of men who sold sex, and sought to group male sex workers into identifiable groups such as the 'street hustler' and the 'call boy'. This lasted until around the late 1980s and early 1990s when the HIV pandemic became the focus of the literature, and workers were constructed as vectors of HIV transmission (Bimbi, 2007). Once empirical research had proven that sex work

was not a common route of transmission, research shifted again to more progressive discourses of theorising 'sex as work', with the most recent research moving into the realms of adult entertainment, dance and spectacle (Jackson, 2007). (See www.uknswp.org for full literature review.)

Clearly, some sex work communities are more visible than others (although the boundaries of such communities are fluid) and this has implications for services and policy. Developments in mobile phone technology and the internet have undoubtedly aided an expansion in male sex work, overshadowing the street beats which still exist. Younger, and perhaps more vulnerable, sex workers are likely to operate in this new environment. Research into the internet as a tool for marketing and selling sex, and other forms of progressive research are just emerging in the academy but much more is needed in order to make visible the needs to men who sell sex, so that services and policy can work together effectively and efficiently.

People who pay for sex

Traditionally, agencies supporting sex workers did not engage with the people paying for sex who were often pejoratively referred to as 'punters'. However, if we accept that many men choose to sell sex then paying for sex is the other side of the equation and not necessarily exploitative.

There are a lot of things they don't teach you in school, and one of them is how to approach an escort! The taboo nature of the work has often hindered both sex workers' access to support and information and those who wish to purchase sexual services.

Agencies which support sex workers can also give clear messages to their service users' clients to promote safer sex and other appropriate behaviour.

A client should understand that a sex worker has the right to refuse a service if he refuses to use condoms, or if he (they are usually men) is rude, aggressive or looking for a service which is not on offer.

Agencies can make information available to clients which promotes respectful practice

when paying for sex. This is only effective if a project worker does not have prejudiced views about all people who pay for sex. Of course, some clients are exploitative, but others are simply looking for a service that they pay for.

Agencies need to be able to discuss what clients can expect when visiting a sex worker. For example: the service they require; whether they are paying per sexual act or by the hour; whether there are shower facilities; rules about drugs and alcohol; how to pay; if outcalls/overnights are available. Agencies could consider producing or providing guidance on respectful behaviour aimed at clients. These could be given to sex workers to give to clients. They could also be used to encourage discussion about how sex workers expect to be treated by clients. If an agency is considering producing a guide, this should be in partnership and consultation with sex workers. Greater dialogue should reduce the stigma associated with both selling and paying for sex.

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