

## Barriers to Health Services for Sex Workers who Use Drugs: Mapping Violence & Policing

### Background

There is growing evidence that street-based sex workers and people who use drugs, locations and places, and the meanings attached to places, can impact how effective health and harm reduction services are, and how easily people can access them.

### The Question

How do policing and violence impact access to health services and needle exchanges among women in street-based sex work in Vancouver, BC?

### The Study

Researchers from the Maka Project and what is now called the Gender & Sexual Health Initiative (GSHI) conducted a **community-based research partnership and extensive peer-led outreach involving mapping, interviews and questionnaires with 198 women in street-based sex work in Vancouver, BC, over a 6-month period in 2006**. GSHI now carries on this research as part of AESHA (An Evaluation of Sex Workers Health Access), an ongoing study on working conditions, health and safety in the sex industry led by GSHI/BCCfE and UBC in collaboration with a range of community partners.

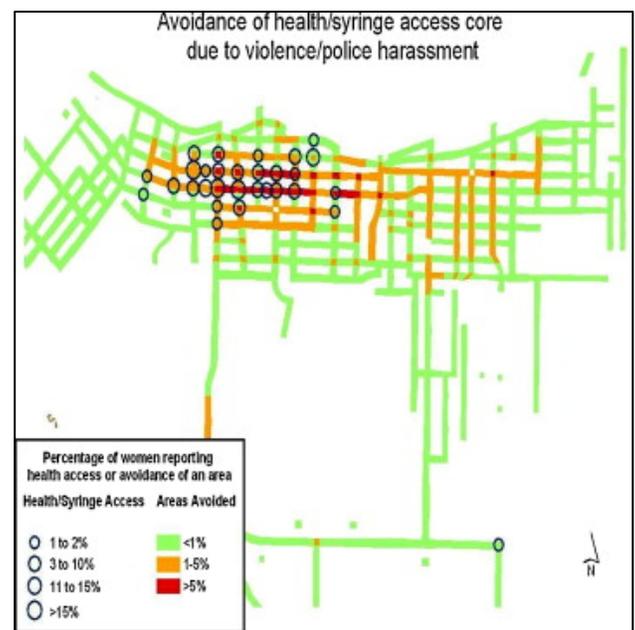
### The Results

The narratives of sex workers interviewed showed a significant overlap between a core area where many health services and needle exchanges are located, and avoidance of this area due to violence and police harassment. This overlap was significantly higher among:

- Younger women;
- Aboriginal women;
- Active injection drug users; and
- Daily crack cocaine smokers.

### The Policy Implications

- Sex workers avoiding violence and police are pushed to industrial areas and side streets away from health and harm reduction services.
- This study offers evidence for HIV prevention and interventions, supported by legal reforms, that allow for safer sex work environments, including peer-based prevention, outreach and mobile resources, and peer-supervised safer sex work settings.



Shannon K, Rusch M, Bright V, Alexson D, Shoveller J, Tyndall MW. Mapping violence and policing as an environmental-structural barrier to health service and syringe availability among women in survival sex work. *IJDP, Special Issue on Women and Harm Reduction*, 2008; 19(2): 140-7.