



Youth Who Sell Sex: The Need for Housing and Supports Just for Youth

Background

Street-involved youth (under age 24) are more likely to have experienced abuse, are often stigmatized and marginalized, face a higher risk of substance abuse, are at greater risk for HIV and have difficulty accessing health services.

The Question

What factors, risks and barriers shape the experiences of young women in sex work in Vancouver, BC?

The Study

The Gender & Sexual Health Initiative (GSHI) research team gave **questionnaires and interviewed 56 young women in sex work in Vancouver, BC between 2005 and 2008** asking about their experiences with sex work. This project is part of AESHA (An Evaluation of Sex Workers Health Access), an ongoing research 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, with ongoing outreach to street and indoor sex work venues (by both experiential and non-experiential team).

The Results

Compared to older women in sex work, youth were more likely to:

- Spend fewer years in sex work;
- Be of Aboriginal ancestry;
- Be homeless.

Homeless youth in sex work face higher HIV risks and are:

- More likely to service clients in public spaces;
- More likely to inject heroin on a daily basis;
- Significantly less likely to access methadone maintenance therapy.

There is a need for prevention, treatment, healing and housing services specifically for young, Aboriginal women: More than half of the 56 youth who participated in this study were of Aboriginal ancestry

The Policy Implications

- The criminal law against communicating for the purposes of prostitution should be removed as it pushes youth outdoors and to isolated environments away from health and social supports, where they face higher risk of HIV..
- Youth in sex work face elevated risks of HIV, and require age and gender-specific interventions such as supportive housing models, methadone treatment and access to 24-hour safe spaces.
- Resources should be directed toward Aboriginal communities. Health authorities should develop prevention, treatment, healing, and housing services specifically for young Aboriginal women in street-based survival sex work.

Miller CL, Fielden SJ, Tyndall MW, Zhang R, Gibson K, Shannon K. Individual and structural vulnerability among female youth who exchange sex for survival. *J Adolesc Health* 2011 Jul; 49(1): 36-41.