

BARRIERS TO DISCLOSURES OF SELLING OR EXCHANGING SEX

Service providers' perspectives

March 2024

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INTRODUCTION

Introduction to CSE Aware

CSE Aware is a national project for frontline staff in services across Scotland to share and increase their knowledge and skills around commercial sexual exploitation (CSE).

Research commissioned by the Scottish Government found that women selling or exchanging sex on average seek support for at least seven different needs.¹ Yet, many women have said their needs often go unmet.

CSE Aware exists to break the stigma surrounding CSE and ensure that women involved receive a comprehensive, non-judgmental support that understands how CSE can impact them.

We aim to:

- Raise awareness of the needs of women involved in selling or exchanging sex.
- Amplify women's voices which are often not heard and share women's experiences which are too often misunderstood.
- Create spaces for staff to share practice around CSE and promote inter-agency collaboration to better address women's multiple, interlinked needs.
- Influence change in how services and leadership respond to the needs of women involved through workforce development and strategic work.

As part of our work, we engage practitioners in both mainstream and specialist services. We support discussion on the issues surrounding CSE and the relevant needs of the workers - and integrate learnings into our work.

For more information, visit: <https://www.cseaware.org>.

Introduction to this report

Throughout 2023, CSE Aware has been working on the animation 'Building the Bridges', which highlights the key things that services can do when a woman discloses that she is

¹ Jones, L., Craig, E., & Mentzou, K. (2022). The experiences of people who sell or exchange sex and their interaction with support services: lived experience engagement. Scottish Government. <https://www.gov.scot/publications/lived-experience-engagement-experiences-people-sell-exchange-sexinteraction-support-services>

selling or exchanging sex. This animation was developed by the Women's Support Project in collaboration with frontline staff and women with lived experience.

The animation follows two characters - a woman selling sex and her support worker, and it explores their concerns around disclosures as well as the practical things staff can do to respond to a woman, reassure her and offer support. The animation goes hand in hand with a written guidance which expands on these key points.

In addition to women's voices, we wanted to understand how workers across different services in Scotland perceive the subject of disclosures. After all, conversations surrounding CSE cannot take place if *both* parties - service users and staff - do not feel confident. This report gives an insight into the multiple barriers faced by both women accessing services as well as service providers. It makes it clear that service providers want to be part of conversations regarding CSE and reduce associated harms, but oftentimes they don't know *how* to do it. We hope this report will help services to identify relevant gaps and contribute to positive change.

Methodology

To obtain practitioner insights, we used an online survey as well as a practitioner workshop.

Online survey

Between May and September 2023, we invited contributions from workers in various settings, whether or not they had supported women selling or exchanging sex. It was important for us not to limit responses to those who supported women in CSE so that a wider range of factors was captured. The survey had four key questions:

1. What sector(s) do you work in?
2. What do you think can make it difficult for women to disclose to services their involvement in selling or exchanging sex?
3. What challenges do workers face when facilitating disclosures of selling or exchanging sex?
4. What supports as a worker would you need to feel confident in responding to disclosures of selling or exchanging sex? (Please be as specific as you can. If, for example, you list training - what information would you benefit from the most?)

The first three questions provided several multiple choice responses as well as an option to include additional open comments. Respondents also had an option to share their details; however, for the purposes of this report, all statements have been anonymised. Unless the identification of a particular sector (for instance, housing or substance use) was needed, we left this information out. We agreed that identified challenges are relevant to multiple sectors, and we did not want to create an impression that they apply to certain settings.

A total of 348 service providers responded to the survey. (It is, however, important to highlight that not all of them answered the four questions.) Regarding additional comments to Question 2, we received 51 contributions; 28 individuals reflected on further barriers that workers encounter; and 276 workers responded to Question 4. Figure 1 shows the breakdown of sectors represented. Please note that some workers may have been in a few different roles and therefore counted in more than one sector.

Figure 1. Online survey responses, by sector

Sector	Number of respondents
Healthcare	125
Social work	85
Violence against women and girls (VAWG)	35
Housing	34
Criminal justice	32
Substance use	23
Advice and support	23
Education	7
Police	5
Other	9
Total	378

Practitioner workshop

In July 2023, CSE Aware held an online workshop on facilitating disclosures of selling or exchanging sex. Its aim was to gather more in-depth views of service providers and discuss preliminary findings that emerged from the online survey.

16 workers attended the workshop. They represented the sectors of violence against women and girls, healthcare, housing, higher education, criminal justice, and substance use. In breakout rooms, participants were invited to share their thoughts regarding the three themes

- barriers that women face in making a disclosure, challenges that workers face in facilitating disclosures, and what supports are needed for service providers. The main group discussion and follow-up questions were used to summarise the discussion.

Response analysis

Both the online survey responses and findings from the online workshop were analysed jointly. This was due to the same questions posed, but also to further protect the anonymity of workers who attended the workshop.

As explained above, Questions 2-3 of the survey gave the option for practitioners to select multiple choice answers and include additional comments. Each relevant section will provide a breakdown of the quantitative data of the multiple choice answers.

Open comments - in addition to Question 4 in the survey and the data from the workshop - were analysed using a thematic analysis. We searched for repeated themes, then established several categories to which individual comments could be attributed to. Each category is supported by practitioner quotes. This process is further explained in the relevant sections of this report.

Final note

We wanted this report to represent the voices of service providers. Therefore, in what follows, we present the findings and quotes without offering an interpretation or comments about what was said. Additionally, whilst some comments may not be detailed, together, they provide a rich insight into the subject.

CSE Aware would like to thank all those that contributed to the survey and workshop. Their openness, experience and wisdom help us to better understand challenges that women face and appreciate the ever evolving and complex service provision landscape. From the very first survey responses, the comments received have been informing the CSE Aware team discussions, awareness raising events, and training for staff - and they will continue to do so.

If you have questions or comments about this report, please email us at Enquiries@WomensSupportProject.org.uk.

“CSE overlaps with other forms of abuse, and this is one of the last things that women might want to disclose.”

“I am concerned about the ‘sex work is work’ or ‘sex work is a choice’ ideology. It has affected organisations and a lot of people subscribe to this ideology. Partly because of the prevalence of this ideology, women will not necessarily be able to recognise what they are going through, or if they do, they may be worried of what the service response would be and not supported to leave the sex industry.”

BARRIERS WOMEN FACE IN DISCLOSING THEIR INVOLVEMENT IN SELLING OR EXCHANGING SEX

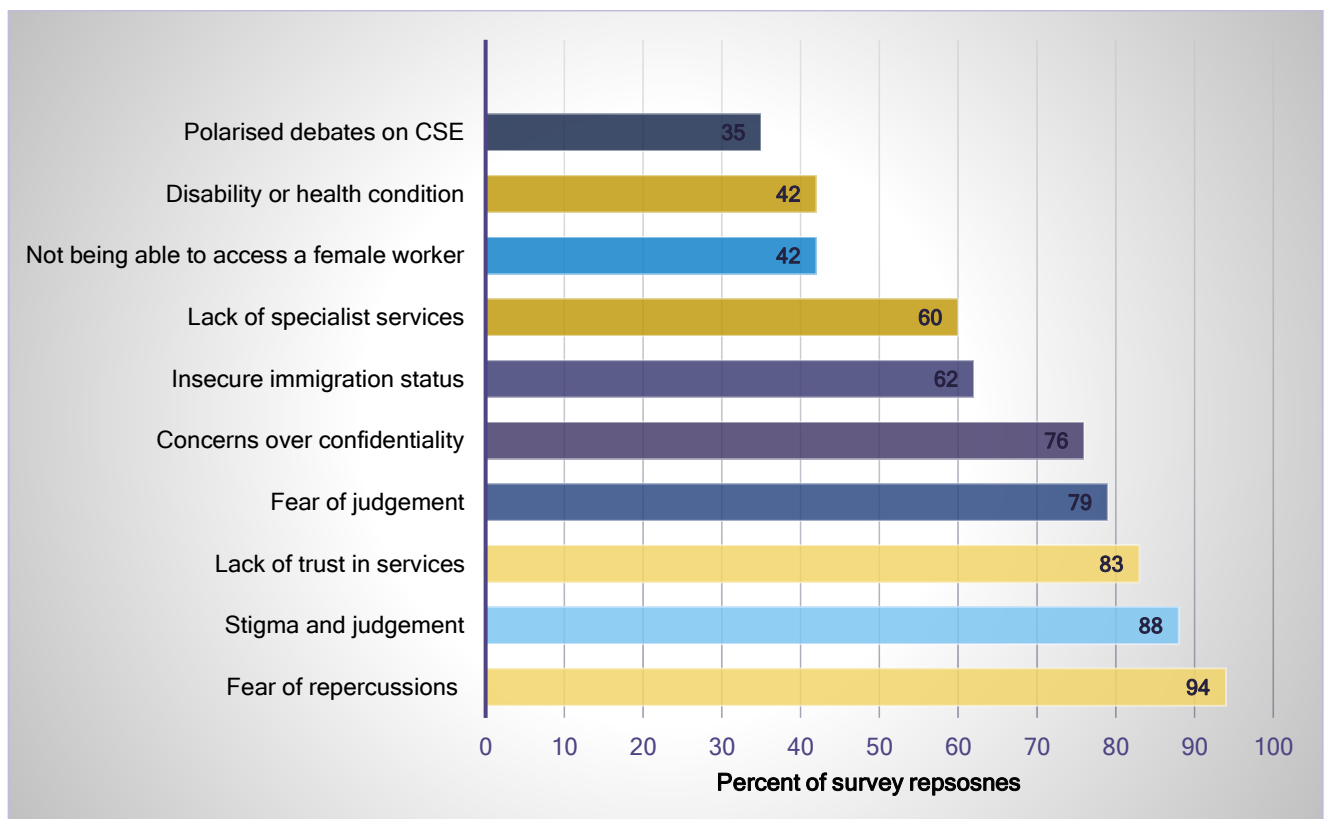
In relation to barriers that women face in disclosing their involvement in selling or exchanging sex, survey respondents were presented with a multiple choice survey. It provided 10 options. There was also an open comment box to include additional information.

The three most selected barriers were:

- **The fear of repercussions** (e.g., removal of children or being reported to the police). This was chosen by 94% of respondents.
- **Stigma and judgement** (88%)
- **Lack of trust in services** (83%)

Women's fear of judgement and concerns over confidentiality received a similar number of responses, 79% and 76%, respectively. Figure 1 provides a breakdown of the multiple choice responses.

Figure 1. Barriers women face in disclosing their involvement in selling or exchanging sex



Based on the open comments and the workshop discussion, we have identified 16 factors that were mentioned by respondents repeatedly. Some of these factors complement and

expand on the multiple choice responses, and some include additional challenges. Following their analysis and interpretation, responses were grouped and assigned to the four larger categories or themes - **individual**, **social networks**, **service-related**, and **systemic** (see Figure 2). The factors or sub-categories and accompanying practitioner quotes are explored below.

Figure 2. Open comments. What do you think can make it difficult for women to disclose to services their involvement in selling or exchanging sex?

CATEGORY	INDIVIDUAL	SOCIAL NETWORKS	SERVICE-RELATED	SYSTEMIC
FACTORS	Not recognising exploitation	Family and friends	Not knowing available services	'Sex-industry'-related
	Past and ongoing trauma	Organised crime	Lack of training	Geographical factors
	Being reported to police	Others in the 'sex industry'	Staff attitudes	Immigration and asylum system
	Financial factors		Service accessibility	
	Removal of children			
	Additional barriers for migrant women			

INDIVIDUAL FACTORS

This theme included encompassed the largest number of factors (6), related to women's past and current history of abuse and exploitation, their identity, the fear of repercussions, and their present circumstances.

Not recognising exploitation

Respondents stated that a lot of women did not recognise their vulnerability.

Lack of understanding that they are being exploited (young people do not understand that they are selling or exchanging sex).

Others observed that some women normalised their experiences of selling sex.

From the addictions' perspective, selling sex is normalised. Women sometimes feel that they do not need to disclose because it is often accepted within this context as a means to survive and to gain access to substances.

It was also noted that cultural and religious beliefs can influence how abuse is framed and normalised.

I met with a woman whose husband wanted her to have sex with another man so he could record it. She was under the impression that it was her religious obligation to do so.

Past and ongoing trauma

Several respondents argued that women's trauma - including early childhood abuse and violence in the 'sex industry' - and its impact can serve as a barrier to accessing services.

Self-neglect - not 'caring' anymore about safety and wellbeing after extensive trauma and/or poor mental health.

Importantly, some practitioners added that social perception of traumatic experiences played a significant role. Women were said to be aware of some services' interpretation of CSE as non-harmful or that they were afraid of not being believed.

So many traumatic experiences that CSE is not always the prioritised disclosure or not recognised by the women as abuse or exploitation due to previous abuses in their lives and impact of these (CSE viewed by society as a choice and not abuse).

Additionally, it was acknowledged that women were more likely to initially open up about other forms of violence. This speaks to the importance of the trust building process and having sufficient time to do so.

CSE overlaps with other forms of abuse, and this is one of the last things that women might want to disclose.

Being reported to police

Being reported to the police was included as a specific repercussion that women feared. This sub-category of factors also included a lack of knowledge as to whether selling sex was legal, the impact of criminal records, and lost connections to community.

Lack of understanding about what this is - especially whether exchanging sex for something is illegal.

A respondent specifically referred to losing links with services after a woman has been in prison.

In our area the repercussion of a custodial sentence will necessarily involve serving out of area (likely 150-200 miles distant) and resulting in loss in communications with agencies and /or social networks.

Financial factors

For some women, as suggested, a major barrier for approaching services is their reliance on selling sex as the main source of income, and it may be assumed that support provided by services is conditional on exiting. Debt and the cost of travelling to agencies can be additional negative factors. Significantly, money from selling sex was also said to support those in women's immediate circle.

Seeing this as their only means of income - they maybe have to support themselves and children and/or an addiction, while giving money to a 'boyfriend'/pimp.

Potential removal of children

Child protection was raised as another barrier - women may not disclose due to the fear that social work will become involved and their children may be consequently removed.

Additional barriers for migrant women

Language barriers, cultural factors, no recourse to public funds (NRPF), fewer opportunities to formal employment, misinformation by perpetrators and traffickers, concerns over the family in the country of origin, and the risk of deportation were highlighted as an additional layer of complexity for women with an immigration status.

Fears for family in another country, perception of being deported, and the shame of others knowing their plight.

SOCIAL NETWORKS

The theme of social networks was concerned with the role that other individuals can play in preventing women from accessing services and disclosing. It mainly included women's family, organised crime, and others in the 'sex trade'.

Family and friends

Respondents mentioned women could face potential negative responses - such as the lack of support or further abuse - should those in their immediate circle find out about their involvement. This included family and friends; yet most responses related to the critical role that partners can play.

The influence of coercive control initiated by their partners or individuals that surround them. Not identifying their actions, behaviour, and experiences as problematic or exploitative.

Organised crime groups

It was expressed that organised crime groups could also create barriers for women's engagement with services. It is important to note that it is not clear from the comments how women related to these groups - whether they were part of them, or whether their involvement in the 'sex trade' was influenced by their partner or pimp who was a member of organised crime. However, women were said to fear them, especially when members of these groups threatened with retaliation should they be reported to the police. Women were also said to doubt that disclosure of links with organised crime would result in police action against the perpetrator.

Fear that disclosure will not result in a positive outcome or any repercussion for the perpetrator, negating the point of going through the difficulty of disclosing their story. Along with the fear of the danger they might then be in after they seek help.

Others within the 'sex industry'

Pressures by those involved in the 'sex industry' were also mentioned.

Pressure from others within their own industry not wanting to be known or reported.

SERVICE-RELATED FACTORS

This section included four factors: not knowing what services were available to women, lack of training on CSE, workers' attitudes towards selling or exchanging sex, and service accessibility.

Not knowing available services

Respondents emphasised that women might not be aware of the support available to them.

I don't think women selling and exchanging sex realise that Women's Aid organisations are able to support them.

Lack of training

It was further suggested that there was an insufficient training that raises awareness of CSE and equips practitioners with the skills needed to support women with multiple needs.

I feel also that a big reason is the lack of training around selling or exchanging sex which means that frontline staff are not equipped with the right tools to know how best to approach and support our women who are involved.

Staff attitudes towards selling or exchanging sex

Some women were believed to have received a negative service response, which included a 'why bother' attitude, complacency, and the assumption that women did not require support on the issue of CSE.

Importantly, some respondents referred to the sociocultural debate of whether transactional sex was exploitative or a legitimate form of employment. The proliferation of the latter narrative was described as negatively affecting some women's engagement with services.

I am concerned about the 'sex work is work' or 'sex work is a choice' ideology. It has affected organisations and a lot of people subscribe to this ideology. Partly because of the prevalence of this ideology, women will not necessarily be able to recognise what they are going through, or if they do, they may be worried of what the service response would be and not supported to leave the sex industry.

Respondents further elicited two opposites of how CSE can be approached by service providers. On the one hand, they may feel unconfident about this issue and not ask CSE-

related questions. On the other, staff may attempt to 'rescue' women - that is, they may encourage them to leave the 'sex trade' at the expense of women's agency.

Fear or concern of being patronised - their worker trying to 'save' them from selling or exchanging sex.

Additional complexities were listed for women from ethnic minorities.

Fear of being discriminated against, particularly for those from minority backgrounds, may create added shame to their experience due to religious or cultural expectations.

Service accessibility

Finally, respondents highlighted the need for women to engage with services when they most need them. The lack of services that are open outside of regular working hours and the cost of travel to services were also listed.

Services may not be available at the time the women need this.

SYSTEMIC FACTORS

The final theme of systemic factors covered the themes of sociopolitical, legal and geographical context. It encompassed barriers related to the 'sex industry', geographical location as well as the immigration and asylum system.

'Sex industry'-related

Some noted that involvement in the 'sex trade' can be portrayed as an exclusively positive experience.

The 'sex work is work' ideology can make women feel that they aren't being exploited and that instead they are being 'empowered'.

Barriers linked to different aspects of the 'sex industry' - on-street, indoors and online - were further explored. For example, it was articulated that women selling sex on street may have more opportunities to engage with services as outreach workers will make them aware of supports available. Regarding involvement in online 'sex industry', it was observed that, unlike selling sex on street, this aspect of CSE is not criminalised and women may perceive it as less risky and thus not looking for support.

Soliciting on the street is illegal, whereas it is not criminalised online. Maybe women involved online feel they have more control and are protected by this online 'wall'. Maybe they do not feel that there is anything to disclose because they don't have STIs [sexually transmitted infections] or are not aware of other risks and dangers.

Geographical factors

It was noted that those living in smaller cities and rural areas face additional challenges, both logistically and socially.

As we are a service that supports women with any form of sexual violence, some women may come to us to discuss CSA [childhood sexual abuse] or rape and not view CSE as a form of sexual violence until it is explored in support. Some women have exchanged sex for rent and don't know that they have been exploited, so it might not be disclosed in the early sessions. I think that stigma in the smaller cities is a huge barrier to women accessing support, due to lack of confidentiality in smaller places and rural areas.

Immigration and asylum system

In relation to human trafficking, it was stated that the UK asylum system can prevent women's engagement with services. Specific issues around disclosures were identified for organisations that are part of the National Referral Mechanism (NRM):

The ethics of the support available to women. The NRM forces women to disclose quite quickly after they've been referred which is too soon in their recovery journey. It can be very difficult for women to articulate at that point but not doing so means they cannot access the NRM. This is why, some women disengage for a while and then return to [a service] when they feel more ready to talk about what they went through.

Some shared particular challenges for women with the NRPF immigration condition.

If a woman is on NRPF and a spouse visa, and leave their partner, they are left with little to live on and feed their children. This inevitably leads to what employment they can get. Even if they qualify for destitution via a domestic violence visa route or receive the support for migrant victims, it is almost inevitable that somebody will turn to selling sex.

Others addressed the barriers that the UK's new Illegal Migration Bill - passed in July 2023 - is creating for survivors of human trafficking.

It will make anyone's asylum claim inadmissible should they arrive to the UK by what the Home Office deems as illegal means - that counts almost all victims of human trafficking. Women are very fearful to disclose at the moment because of what implications for them would be from the Home Office perspective. Even more so, when the Bill passes, perpetrators and traffickers will prevent women from fleeing - we will have more women underground. Even with the opportunity to flee, they will be afraid to do that because of the fear of detention and deportation.

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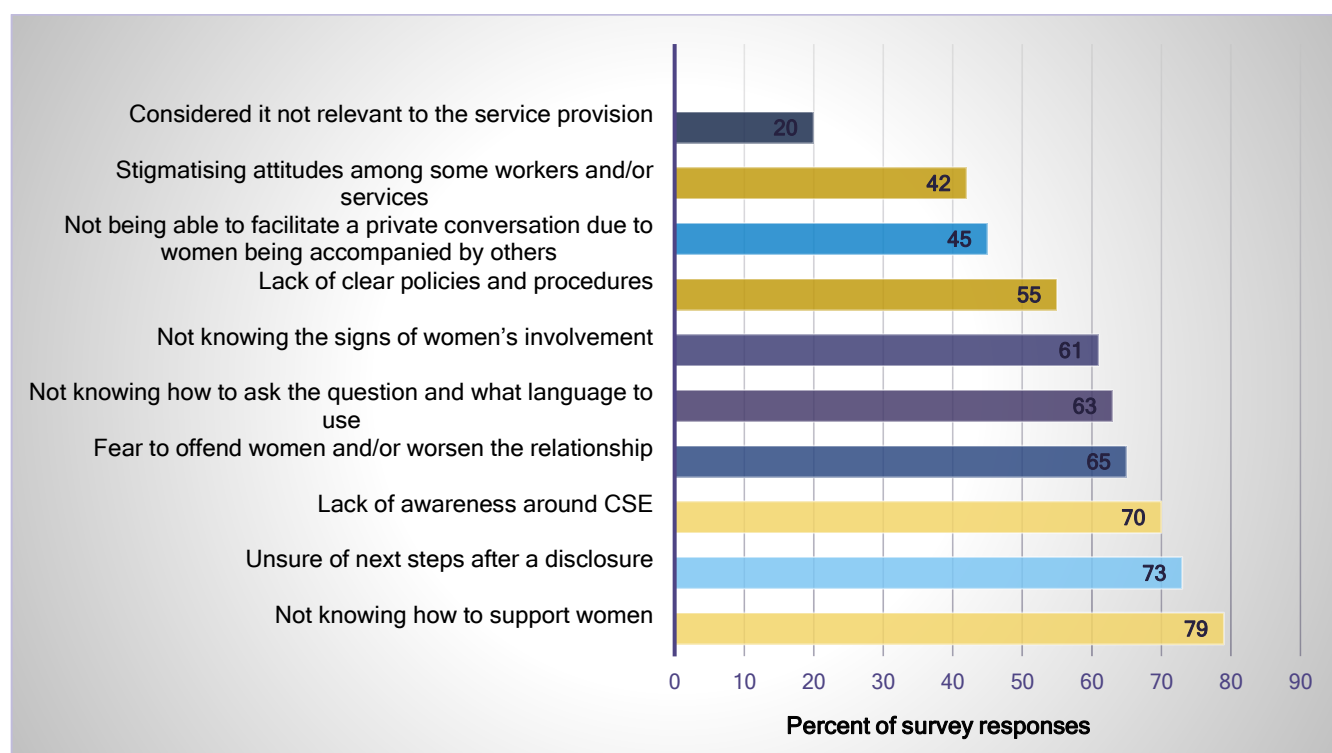
CHALLENGES WORKERS FACE IN FACILITATING DISCLOSURES OF SELLING OR EXCHANGING SEX

Regarding challenges that practitioners face when handling disclosures of selling or exchanging sex, respondents were able to select one or more options from a list of 10 barriers that we have identified. Most common barriers were thought to be:

- Not knowing how to support women in relation to their involvement in selling or exchanging sex (79%)
- Unsure of next steps after a disclosure (73%)
- Lack of awareness around commercial sexual exploitation (70%)

Figure 3 illustrates the other challenges staff selected.

Figure 3. Challenges workers face in facilitating disclosures of selling or exchanging sex



Similarly to the previous question, we analysed the optional open comments left in the 'other' field, along with the workshop participant discussion. They were assigned to the three categories - **information and knowledge-related**, **support and service-related**, and **systemic** (see Figure 4). We have identified 12 barriers which are presented below.

Figure 4. Open comments. What challenges do workers face when facilitating disclosures of selling or exchanging sex?

CATEGORY	INFORMATION AND KNOWLEDGE-RELATED	SUPPORT AND SERVICE-RELATED	SYSTEMIC
FACTORS	Lack of awareness of the issue	Knowing how to support women	Politicisation of the issue
	Lack of information about specific populations	Lack of specialist services	The law
	Lack of training	Negative experiences with services	Geographical factors
		Policies and procedures	
		Practical barriers	
		Staff wellbeing	

KNOWLEDGE AND INFORMATION-RELATED FACTORS

This theme entailed barriers related to workers' knowledge of CSE, as well as access to relevant information. It was divided into three sub-categories - lack of awareness of the phenomenon, lack of information about specific populations, and lack of training for practitioners.

Lack of awareness of the issue

It was noted that some practitioners did not have enough knowledge of the issue of selling or exchanging sex, especially of its prevalence in different local authorities, or how it related to other issues such as organised crime.

Understanding pressures such as county lines, domestic violence, and addiction.

It was also shared that due to the lack of this knowledge, some practitioners may struggle to meet women where they are at and rely on their assumptions of women's circumstances.

Some workers might have a preconceived idea of the woman's situation, but they need to not make any assumptions and challenge possibly their own biases.

Lack of information about specific populations

Some argued that there was insufficient information on how CSE affected certain populations, such as young people and women with disabilities.

Lack of resources, particularly for young people who are victims of CSE, to safeguard and support.

Lack of available resources for women with learning disabilities.

Lack of training

It was highlighted that if workers did not receive training on CSE and were not supported to develop skills to deal with disclosures, then this could create a cycle where practitioners would not ask women about their involvement, and women would not feel confident in coming forward or would disengage.

If workers don't have enough additional training on CSE, they may not be able to deliver the right support to the client which in turn might lead to the client feeling judged or ashamed and they may not return.

SUPPORT AND SERVICE RELATED FACTORS

This category entails the most expansive list of barriers. It addresses support-related aspects, such as knowing how to support women, the lack of dedicated specialist services and negative experiences with services. Finally, it discusses policies and procedures, practical barriers, and the negative impact on workforce wellbeing.

Knowing how to support women

Staff highlighted the importance of explaining the reasons to women as to why they are being asked about their involvement in selling sex. As one practitioner stated:

Women don't want to disclose unless it is necessary. They just want their kids to be safe while they are out.

Some service providers may not know how to react to the disclosure, or how to strike a balance between not displaying too much emotion and being empathetic. Furthermore, concrete examples of how to create an environment that would be conducive to open interactions, were also valued.

I actually saw something about this recently about how sitting next to someone rather than across from someone creates a more relaxed space to open up rather than across the table from someone, less direct eye contact.

There was an expressed need to understand how to support women holistically and address both practical (e.g., harm reduction) and psychological (being non-judgmental) aspects.

It's the knowing the specific challenges or issues that people who have been involved in sex work face and how to best support that - the practicalities, the conversations, the help of other support that's out there.

Relatedly, workers appreciated the complexity of women's lives, which can make it difficult for them to engage with services consistently, build a relationship with workers, and reach a point where practitioners can enable conversations surrounding selling or exchanging sex.

Data protection laws were also mentioned.

There are some areas where without the specific consent of the person workers are not able to share the information. In those circumstances, it can be difficult to encourage a woman to talk about selling sex.

Finally, the absence of alternative methods of communication and support with service users (for example, phone, text or webchat) can also make it more difficult for women to come forward.

As a helpline worker, I find that usually women who are being exploited or involved in CSE tend to disclose through webchat rather than the phone. This might be because it's easier to share it in writing rather than hearing a verbal response.

Lack of specialist services

Some practitioners said they faced a challenge of the lack of services dedicated to the issue of selling or exchanging sex.

No specialist local services to refer on to so workers feel there is not enough support for women.

Negative experiences with services

This sub-category included the factors of not being able to refer women to services due to NRPF, the lack of interpreter services, and services declining to support women based on limited remit. Problematically, as one practitioner shared, women with more pronounced vulnerabilities can be treated differently.

We do notice that there is a more elaboratively disappointing response if a woman is migrant or ethnic minority, has a criminal record, or has a mental health issue. Any vulnerability that woman has seems to be held against her in some way.

Policies and procedures

Some raised concerns that the lack of relevant policies and procedures could prevent service providers from facilitating the disclosures. This could also include a lack of knowledge as to how they should be operationalised.

Paperwork doesn't have a question. Or has a question in a poor place within the assessment form - and it's never broached again, i.e., only asked when there is no relationship. And woman says no involvement, as no trust. And never followed up.

Practical barriers

The time constraints of service-user-worker appointments and specific service settings were also described as important barriers. As one practitioner in the healthcare sector noted:

Not being able to facilitate a private conversation is a big issue. Some may want to speak in private, but staff need to be protected from any false claims towards them at the same time.

Don't want to open can of worms - not enough time to effectively respond.

Staff wellbeing

Some practitioners drew attention to the staff wellbeing - how their own distress about women's circumstances, the risk of being too emotionally invested, and the lack of organisational support and opportunities to collectively process challenging interactions, may prevent them from being able to respond to women's needs.

Guilt for not helping sooner.

Danger in getting too emotionally involved, feeling like you want to fix all this person's problems but needing to create boundaries.

SYSTEMIC FACTORS

This final theme was concerned with sociopolitical, legal and logistical barriers: politicisation of the issue of selling or exchanging sex, the law regarding prostitution-related offences, and geographical factors.

Politicisation of the issue

Similar to the previous question on what barriers women face, workers agreed that they were affected by the sociocultural polarisation surrounding women's involvement in selling or exchanging sex.

The debate/myths/misconceptions may have led to people being anxious about taking the 'wrong' approach and facing backlash from both service users, public, and the media.

In a similar vein, one respondent stated that practitioners felt it was not their '**role to interfere with women's choices**', showing that women may be assumed to have unconstrained agency.

The law

The contradictory nature of the law for prostitution-related offences - which permits certain activities but prohibits others - was listed as a barrier.

I feel that the law is unclear and contradictory at times which can make it difficult for staff to know how best to support our women involved in selling or exchanging sex.

Geographical factors

It was articulated that some rural communities may believe that the phenomenon of CSE was not applicable to them.

Community assumptions - 'it doesn't happen here' in rural and remote areas. CSE not in exchange for money, but in exchange for goods, transport, alcohol, illegal substances. It has been used in remoter isles as currency - normalisation.

“I feel having training specific to sexual exploitation, rather than having it grouped alongside other forms of exploitation would be beneficial. Improved resources and services to support victims of sexual exploitation should be a priority. Increase awareness of the extent of the problem in the communities we work in would allow services who work with the most vulnerable people in our communities to be more alert to the issue rather than assuming it doesn't happen or it is someone else's problem.”

“Better training around language and how to approach particular situations that may occur in services.

Knowing the correct procedure when a woman discloses being sexually assaulted or raped as those first few hours are crucial in getting them justice and ensuring they feel safe and supported.

Selling or exchanging sex should also fall under harm reduction as staff should understand that women they are supporting may be involved, and it is our role to ensure we are providing safety advice.

Also, improving relationships with the Police is imperative. Many women do not have positive experiences with the Police which can make them reluctant to report anything.”

WHAT SUPPORTS WORKERS NEED

Regarding the last question, the survey respondents and workshop participants were asked to share what supports they would benefit from the most in order to feel confident in responding to disclosures of selling or exchanging sex. No pre-determined options were given.

To a large extent, the identified supports reflect challenges summarised in the previous section. Most of them focused on the relevant knowledge and various service provision aspects: training on CSE, including the legality of selling sex; information on available services; the joint-up approach; disclosure-related training; supports to address women's needs; practices to support the staff wellbeing; and policies and procedures. The role of social media was also addressed.

Awareness raising and training

Several respondents required training on CSE in its entirety, for the staff that are new to the subject, but also those who needed a refresher course.

I have had a few training sessions over the years and try to keep up to date, but an annually updated refresher might be useful. I have never had a disclosure in 9 years of working with vulnerable women, so no chance to 'practice' what I've learned which makes it hard to retain.

Would need to have full training in this as I would be unsure of where to go for support for women in this predicament, and how to deal with it if someone approached me in this situation.

More specific aspects that awareness raising sessions could address included a more in-depth explanation of the transactional nature of selling or exchanging sex (i.e., in exchange for shelter, protection or travel), different facets of the 'sex trade', including sex trafficking and online forms of exploitation such as OnlyFans, and emerging trends.

Some information sharing or training with colleagues on sex workers on how exactly the industry works to have an appreciation of the challenges and risks facing sex workers, and how as a health professional I could best support them.

While practitioners appreciated general awareness sessions, some added that it was important to understand the dynamics of the issue in their local area. Moreover, some respondents said that the training on CSE should illustrate how different issues relate to each other and reveal the impact of women's involvement in the 'sex trade'.

Information around the prevalence of CSE, links with substance use, and how services are responding to women's needs around substance use and CSE.

Information on the side effects of selling or exchanging work (sexual and mental health outcomes).

Some highlighted that there was a need to better understand the effects of CSE on certain populations. This included young people, women with disabilities, victims of sex trafficking, and migrant women.

More information about recourse to public funds. How to safeguard the individuals, especially if their immigration status is insecure and/or they are here on a partner's visa.

More specific training for specialised education staff to understand the impact on young people and how this issue may arise.

It was emphasised that the training should incorporate elements of lived experience.

Personal story of someone and what worked or didn't work for them in terms of services and attitudes.

Training with real life scenarios.

Understanding the legality of selling sex

A significant number of respondents shared that they would benefit from understanding the current laws surrounding prostitution. Relatedly, some needed clarification as to whether the information about women's involvement in selling sex needed to be actioned.

Information about whether this must be reported to the Police.

Clarity about legal or criminal implications if any. How to assess risk, particularly if the person has children.

Meanwhile, others said that it was important to support women to report crimes against them.

Supporting women to the police regarding their abuse but ensuring that their selling of sex does not become the focus and addressing this fear.

Information about services

There was a commonly expressed need to have information on what support - both specialist and mainstream - was available to women. Such information should be up-to-date, easily accessible, and specific (for example, detailing support timescales).

Would require a better understanding of the specific services available to support a disclosure journey, including processes and actions required by onward services that could be explained to offer a safe disclosure.

How do I know if they [services] are still open as lots of projects only get short term funding?

Relatedly, practitioners shared ideas on how this information could be accessed. Some would find it helpful to have a single and consistent contact to discuss cases, some raised an idea of a helpline service, whilst others opted for information stored online. Practitioners felt that clear information could also make it easier for women to seek support.

A business card we could leave with a patient in case she didn't want to talk to us, or now, but may consider it in the future.

An easily accessibly FAQ [frequently asked questions] for workers and service users as to the best place to refer to. For example, if there is a housing issue, it may be the housing department at the local authority, but if counselling is required it may be the NHS. But there may also be specialist provision.

Given that women in CSE often face multiple and intertwined issues, workers said that it was important to promote a joint-up approach (see the next section). Yet, some information gaps were identified regarding the role of particular services.

Able to direct to or liaise with relevant agencies RASASH [Rape and Sexual Abuse Service Highland], Women's Aid, MARAC [Domestic Abuse Multi-Agency Risk Assessment Conference]. Less confident as to how these agencies can respond where the victim's lifestyle is sometimes inextricably tied up with homelessness, substance use, poor mental health, and involvement with reliance on those who supply illicit drugs.

Clear pathways to help individuals after disclosure. For example, community support to help with housing, mental health support, physical health support, and if necessary, child protection support. It would also be useful to know the next steps as a clinician regarding informing the Police, for instance, if they have been assaulted, injured, or exploited, and what the next steps are to make sure the individual feels safe and also treated with respect and dignity. It would be good to know if there were specific Social Work or Police department contact details that you could phone for advice.

Finally, some respondents said that it is important to know what support was available to men involved in selling or exchanging sex.

Joint-up approach

As already mentioned, practitioners believed that it was important to work collaboratively. There were, however, some challenges identified, such as practical barriers within particular services that prevent women from accessing effective support or the prevalence of stigmatising attitudes.

Partnership working and approaches to ensure all services have a responsibility and policies which are current joined up and are not a tick box exercise.

A fast-track process for clients to attend sexual health services. A specialist CSE team/nurse for the purpose of liaison and sharing local intelligence.

Some practitioners drew attention to the information sharing process - that it would be helpful to have a centralised database so that women would not need to repeat their story or be able to identify instances where information sharing may not be desirable.

That as a worker I can accept this information from a woman and not be required to disclose this to other agencies who may escalate or intervene without consent or collaboration by woman - in instances where there is no immediate risk to vulnerable person of course.

Concerningly, some specifically referred to challenges associated with the policing sector.

I have had an experience of Police writing a statement that their officers were at risk from a young person who had self-harmed and there was blood, due to her being on medication for Hepatitis C following a rape (through CSE), as being described as a person who is on

medication because of her sexual activity - where in fact she was provided with medication following the rape.

Advocacy workers for reporting to police as police are often dismissive or rude.

Many police officers are not fully aware of trafficking legislation and where subsequent referrals should be made to ensure appropriate support for the victim (who, in trafficking situations often don't perceive themselves as victims).

Disclosure-related training

A large number of practitioners stated that they needed a training on disclosures. Broadly speaking, support was needed in relation to three phases: pre-disclosure, disclosure, and post-disclosure.

The pre-disclosure stage was primarily concerned with signs of women's involvement in CSE and knowing when to initiate a relevant conversation.

I would need full and extensive training on the signs and how to approach questioning.

Training on how to approach the subject, what and when to ask.

As for the disclosure phase, practitioners shared that they would benefit from knowing how to facilitate challenging conversations. It was clear that practitioners were women-centered and wanted to approach women's possible involvement in CSE in a sensitive manner. Interestingly, however, workers were worried about potential negative outcomes such as alienation, making the woman fearful, or causing offence.

Training in communicating better with the women and knowing the correct questions to ask, to not offend them, but to gain as much information as possible. How best to put them at ease to gain their trust and confidence.

How to ask the question without causing offence. Especially if the woman is not involved in this activity.

There was an expressed need to better understand the most recent terminology - including the meaning of 'exchange of sex' and questions that should be asked.

It would be good to have a clear guideline of how to handle a disclosure and what the common procedures are, but I also think more people need to be aware of what language to use when discussing these subjects and how to handle them sensitively and discreetly.

Understanding the next steps following disclosures as well as women's support needs could be attributed to the **post-disclosure phase**.

Training in how to support women with issues that can stem from a disclosure (for example, CSE, CSA, rape, sexual assault, GBV, trauma etc.).

A flowchart or pathway to follow should a disclosure be made so I know who or what would be my first port of call.

Addressing women's support needs

Practitioners highlighted that they required skills to support women throughout the process. These skills included safety planning, knowing women's rights, relationship-based process, tackling stigma, and using harm reduction strategies.

Having guidance on what workers responsibilities are, if any to safeguard the women, i.e. protection issues for the women.

Any information would be helpful on potential dangers to women locally. Public health issues, personal health issues. Identifying appropriate safe places for women to feel valued, supported, not judged, and to have their health care needs met. Safety awareness to share with the women involved.

Ability to ask difficult questions and to confront stigma. Workers need knowledge and skills on how to give and share information with women - overdose services, safe sex, confidence building, resilience, knowledge on domestic abuse, and how to actually support victims.

Some identified women's support needs related to exiting.

A crystal-clear pathway to evidence-based interventions to support them whether they continue in sex work or wish to exit.

Knowing what is available for women in this situation. From being supported within or out with the sex industry.

Practical barriers such as waiting lists or the lack of tangible and specific supports for women in CSE were also acknowledged.

Ensuring there is support women can be tapped into that doesn't have a wait list as this can add a lot of stress to the workers, especially knowing the women are in an unsafe situation and have nowhere to turn to for safety.

The need for refuge options for women in CSE as in Scotland. Few refuges would allow women in solely because of their experience of CSE, and most others are in England. Sometimes women are terrified because they are unsafe and there is little to no places for them to get that safety.

The importance of trauma-informed care was also noted.

Having a deeper understanding of the cycles of trauma and how offering brief interventions may help to break this.

Trauma-informed training done for each new worker and potentially revisited on a yearly basis to feel confident to have this for practices.

There was an expressed concern that regardless of the training provided, service providers still face significant challenges in supporting women.

I'm not sure what training can be provided for this niche area of work. Most women feel they are making a choice. They do not see themselves being exploited. That fine line between exploitation and choice is something most workers feel anxious about. It doesn't help that platforms such as OnlyFans are seen as 'normal' for young people.

The staff wellbeing

Some practitioners emphasised that in order to stay resilient, they needed to have opportunities to debrief, consider their wellbeing, and connect to their colleagues on an informal level.

Tips on how to manage hearing traumatic stories and different self-care methods.

We have a timer that is set for one minute to allow us all a wee rant! Works well.

Policies and procedures

Policies and procedures - clear and accessible - were listed as another means of supporting workers on the issue of selling or exchanging sex. It was also stated that relevant protocols would help to ensure that women are treated fairly.

I think if there was a clear procedure to follow it would make it easier to ensure the right person was informed at the right time. Meanwhile, the woman sharing the disclosure felt safe enough to do so knowing the correct support would be available without discrimination.

Organisation should have policies around responding to clients who disclose or are suspected of selling or exchanging sex the same way there are policies for other forms of gender-based violence. These policies and procedures should not be based on ideology but rather on the needs and issues a woman comes with.

The local unified position on CSE was said to aid the process of coordinated support.

A local shared response to CSE and how to support women who are involved in this.

Clear policies and procedures that are shared locally.

Social media

Some said that it was important to explore the role that media plays.

Understanding social media better, knowing how to spot and combat misinformation. Possibly to have a toolkit with available support online as it's very dangerous online with the glamorisation of 'sex work'. It would be good to be able to show the realities and have more support online.

CONCLUSIONS

This report has revealed a real breadth of perspectives about challenges that both women subjected to CSE and practitioners face in relation to disclosures of selling or exchanging sex.

The survey and the practitioner workshop exemplified multiple vulnerabilities and adversities that can prevent women who sell or exchange sex from accessing support. These include experiences of trauma, the lack of financial alternatives, pressures by others, and potential removal of children.

There are service-related barriers, too. Not knowing what services are available, the lack of understanding of CSE among professionals, negative attitudes towards selling or exchanging sex, and attempts to 'rescue' women are some of the challenges that support providers listed. According to the survey, the three key barriers women face regarding their involvement in CSE are the fear of repercussions such as being reported to the police or the involvement of social work, stigma and judgment, and the lack of trust in services. These findings correspond to the 2022 Scottish Government commissioned research which concluded that

"In addition to lack of trust and fearing negative consequences, a number of participants [who sell or exchange sex] reported having had negative experiences in the past which they felt were directly caused by accessing services. This left them not wanting to access services again because they did not trust that the services would act in their best interests, and not worsen their situation."²

These outcomes show that instead of being mitigated, women's vulnerabilities can be compounded following their engagement with services. Many women experienced negative service responses which further isolated them and prolonged their involvement in the 'sex industry.' For some, violated trust - by family members, partners or pimps - serves as a template for wider relationships. As a result, some women may be reluctant to seek help from services as they may fear that the cycle of distrust will be perpetuated.

² Jones, L., Craig, E., & Mentzou, K. (2022). The experiences of people who sell or exchange sex and their interaction with support services: lived experience engagement. Scottish Government. <https://www.gov.scot/publications/lived-experience-engagement-experiences-people-sell-exchange-sexinteraction-support-services>

Against the backdrop of negative women's experiences, this report has shown that workers are aware of factors that can affect women's willingness to ask for help. Moreover, it demonstrated that workers want to be part of collective effort to mitigate harms associated with CSE, but they themselves face various interpersonal, organisational and structural challenges. The strongest theme that emerged from the survey and the workshop was the importance of relevant knowledge. The majority of survey participants (70%) believed that there was a lack of awareness of CSE. Relatedly, there was limited knowledge on the key support aspects such as recognising indicators of CSE, responding to disclosures, and addressing complex needs that women may have.

Workers noted other challenges that can impede effective service response. Fragmented and inconsistent multiagency support was one such challenge. It was highlighted that there is a lack of specialist services, that information is not shared with other agencies, and that the most vulnerable service users receive unequal treatment or substandard service.

Among other challenges such as the contradictory nature of relevant Scots law and unique challenges for services in rural areas, it is worth noting the politisation of CSE. It was shared that some organisations do not bring up the issue because they do not want to adopt a seemingly 'wrong' approach or that some individual workers and services subscribe to a societal narrative of selling or exchanging sex as 'choice' and 'work'. The latter stands in curious opposition to the aforementioned survey finding that, by and large, there was a presumed lack of awareness of CSE among services. It raises a concern that by following a one-dimensional cultural script, support providers risk misunderstanding the dynamics of selling or exchanging sex and overlooking associated harms. This concern is addressed in our recommendations.

Regarding supports for practitioners, it is no surprise that there was a great emphasis on different elements of CSE-related training, particularly on disclosures. Based on the staff comments, we outlined three pillars to this training: pre-disclosure, disclosure and post-disclosure. It includes information on signs of involvement, knowing when to initiate a relevant conversation, language and terminology, and response to women's needs.

The effective individual support response depends on robust organisational mechanisms. Practitioners said that there was a need for clear and consistent policies and procedures informed by women's experiences. They appreciated up-to-date, easily accessible, and specific information about support provided by other agencies. Workers also want to explore ways to stay resilient and connected to their colleagues.

We hope that this report will help service providers and leads to reflect on how well equipped their organisation is to respond to disclosures of selling or exchanging sex. For a long time, this subject has not received the attention it deserved, which contributed to shortfalls in practice and impacted on women's ability to engage with support organisations. However, workers' contributions in this report send a clear message: it is time to restore women's trust. We appreciate that individual practitioners and agencies may feel apprehensive about navigating the complex landscape of CSE. Yet, we hope that the collective voice of support providers will be a source of inspiration and that the recommendations that follow will provide initial guidance on what needs to be put in place so that workers feel confident and skilled to respond to the issue of CSE.

RECOMMENDATIONS

“Having worked with women and men involved in selling or exchanging sex, I think the most important factor is to be genuine and non-judgmental in your communication, build a knowledge base on the subject, and know what services are available. Giving some basic information on safer working practices can be helpful.”

When supporting women who sell or exchange sex, practitioners should ensure that they:

- Are aware of signs indicating women’s involvement in CSE and appropriately following them up.
- Consider multiple factors - individual, relational and structural - contributing to women’s exploitation.
- Build a trusted relationship with women. Oftentimes, women disclose their involvement in the ‘sex industry’ at a later stage, after other harms and issues are addressed.
- Make women aware of their rights and the relevant legislation as the majority of acts associated with selling sex in Scotland are not illegal.
- Assure women of confidentiality and explain its limitations. It should be made clear that selling sex does not by default require the involvement of police or social work.
- Ask women about their involvement in selling or exchanging sex when the time is right. For more guidance, please refer to the animation ‘Building Bridges’ and its resource pack.
- Maximise opportunities for women’s engagement with services. Actively explore what barriers could prevent women from accessing support and how the service could help to reduce them.
- Ask women about their safety plans and if needed, support them to develop one or refer to other organisations for information.
- Explore whether supported women would like to exit. Options and plans for reducing women’s involvement and helping them to move on in the short- and long-term should be discussed. However, service provision should not be conditional on whether or not women continue to sell or exchange sex.
- Are guided by women - their narrative, terminology, and the impact selling or exchanging sex has on different aspects of their lives. Avoid imposing personal interpretations and beliefs of women's involvement in the ‘sex industry’.

Service leads should:

- Enable open conversations with staff about CSE. It is important to recognise that lack of clarity on the organisation's position on selling sex can prevent women involved from seeking support.
- Offer induction and refresher training relevant to staff's needs. It should provide information on different contexts of CSE, including street prostitution, selling sex indoors and online.
- Have clear policies and procedures in place regarding CSE, in line with other forms of gender-based violence.
- Ensure that various communication platforms that service users access (for instance, a service website or leaflets) explicitly state that those engaged in selling or exchanging sex can be supported. There should be further engagement effort to reach women in rural areas and women for whom English is not their first language.
- Consider specific needs and risk factors for particular groups such as young people, migrant women and women with disabilities.
- Develop partnership approaches and multiagency responses.
- Create more diverse opportunities to support staff's wellbeing and resilience.



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