



Missing a trick

The government came within hours of introducing a 'get tough' policy to force street sex workers off drugs. Diane Taylor talks to those on the frontline and discovers that few lessons have been learned in the wake of the Ipswich murders.

A collective sigh of relief was breathed by street sex workers when the government dropped plans for their compulsory rehabilitation in March.

Proposed amendments to the Criminal Justice and Immigration Bill, opposed by street sex workers and many of the projects which work with them to provide support and referral to drug treatment programmes, would have introduced powers to force them into drug treatment.

If they missed three sessions of their 'rehabilitation' programme they could be arrested and held for 72 hours and then taken before a court. There was also a proposal to change the definition of soliciting to make it easier for police to arrest women.

The plans were apparently ditched to speed up the passage of the Bill, not because the government suddenly thought better of their new blueprint.

Women involved in street sex work have even more complicated problems than other drug users, and some observers say that forcing them to do something they do not want to do is a policy doomed to failure.

"Compulsory treatment has a very poor efficacy record and the concept of coercion is offensive to the concept of treatment as understood by medical practitioners," says Emily Crick of Transform Drug Policy Foundation. "When something is coerced, by definition you shouldn't call it treatment – which is by definition something which is agreed between patient and doctor."

One of the most important factors in whether someone ends an addiction to drugs is the desire to kick the habit. If that vital motivation to change is lacking then however many targets the government hits in terms of 'getting bums on treatment seats' the success is likely to be hollow. Many of those dragged kicking and screaming into treatment are likely to drop out before the end of the treatment programme or relapse very soon afterwards.

Current provision is patchy and waiting lists vary across the country.

Rhea Coombs, women's support and outreach worker at Spires Streetlink, a south London project which offers a range of support services for sex workers, says that a '999-style'

referral into treatment should be available to street sex workers.

"Women on the streets lead very chaotic lives. If a woman approaches us and says: 'I want it all to stop, get me out of here, I need treatment now', it's important to be able to respond immediately to that. There are often 101 hurdles a woman has to jump through before she can get treatment and if she can't access services when she needs them, she feels like she's failed again."

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The English Collective of Prostitutes (ECP) campaigned hard to get the controversial amendments in the Criminal Justice and Immigration bill dropped. "Women drug users must be consulted to ensure that services address their needs," said an ECP spokeswoman. "Some women have had to wait months for a referral to rehab despite their best efforts and pressure from us. One woman was offered an appropriate place only for the offer to be withdrawn on the grounds that it was too expensive."

Rosie Campbell, chair of the UK Network of Sex Work Projects, who works for a sex work project in Liverpool, says that the network hears different stories of drug treatment provision up and down the country.

"There's a lot of support for making drug treatment more accessible but it depends on where you live. There are varying treatment arrangements in different places. Some areas have really taken on board targeted treatment for sex workers. Some sex work projects employ dedicated drugs workers and have their own substitute prescribing clinics."

She says that the worst case scenario is no availability of a fast-track service for community drug treatment and inflexible daytime appointments. "Street sex workers struggle to make these old fashioned, daytime appointments."

Many street sex workers use crack, either by itself or with heroin, but Campbell says that not all local services are 'stimulant savvy'. Many sex workers also have problems with alcohol and it is important to ensure that there is provision here too.

"If the government is serious about dealing with sex workers it will put more money into detox and rehab," says Campbell. "It is hard to access these services in most areas at the moment and depending on where you live your local area might not be prepared to pay for you to go to detox or rehab."

One woman who works for a London sex work project said it is also important for sex workers to be able to go into women-only detoxes and rehabs. "We need more fast track prescribing and more detox and rehab beds for women," she said.

The tragic murders of five street sex workers in Ipswich focused the government and the media's mind on how to deal with street sex work. The Suffolk town was thrust into the spotlight in December with the murders of Gemma Adams, Tania Nicol, Annette Nicholls, Paula Clennell and Anneli Alderton. After a manhunt involving more than 10 police forces Steve Wright, a local man, was charged with their murders. He was convicted of the murders earlier this year.

In the wake of the murders, new measures have been introduced to end street sex work. Street workers are getting counselling and help to find alternative lifestyles as part of a tough anti-prostitution strategy that is being piloted by the

Home Office. All sex workers now have a "case conference", so that a strategy can be drawn up which is relevant to their circumstances. Each will be given an "exiting package", or phased programme showing the transition they might make.

A Home Office spokeswoman said: "The key objective is to challenge the street-based market in the town, focusing on prevention, tackling demand, routes out, and ensuring justice."

Liz Harsant, the leader of Ipswich Borough Council, said: "We are taking a zero tolerance stance to the kerb crawlers and girls working the streets. The red light district is actually a nice residential area and many of the residents there have had enough of the girls, the needles, the foul language and fights."

But street workers fear this approach could drive women off the streets and into unfamiliar towns or force them to take risks by working alone and unmonitored.

Jill, a young woman who has been working on the streets for more than two years to support her heroin habit, said she was alarmed. "Immediately after the murders happened they were really supportive towards us. The police gave us a number we could text to tell them where we were going with a punter. But that number stopped working. A few weeks later the police started arresting us again for soliciting and loitering. Some have been very abusive."

Jill said the remaining girls on the street were "twitchy", but still the same faces came out night after night. Recently rent boys aged 14 and 15 have appeared on the streets who sell sex in the town's lorry park. "I've had bits of my body broken and I've been treated like dirt by both police and punters," Jill said. "Is it going to take another five murders of working girls before the police realise that heavy-handed tactics against women on the street don't work?"

The Ipswich Crime and Disorder Reduction Partnership conducted a needs assessment of sex workers in 2004. Some of the sex workers who were later murdered took part in the study. Twenty-eight sex workers were interviewed – more than 90 per cent were regular heroin users and more than 80 per cent were regular crack users.

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Many of the women said that their biggest fear was being sent to prison for sex work or drug-related offences because it would lead to them having their children taken away and to their families finding out that they were involved in prostitution. They also said they had to wait too long for detox and substitute prescribing and that drug services had too high an expectation of how quickly long-term users would get clean.

The report concludes that what is needed is a multi-agency approach and a willingness to cooperate with and understand that a move from a chaotic, drug using lifestyle does not happen overnight or without several attempts at change.

The government, with its target-driven, quick-fix policies to 'cure' street sex workers of their addictions and associated problems would do well to heed these sensible recommendations.

■ Diane Taylor is a freelance journalist