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Open Doors

Findings from a Needs Assessment Conducted with Street Sex Workers in the London Borough of Newham between February and April 2013

May 17th, 2013

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Introduction

Between February and April 2013, Open Doors (clinical, case management and outreach service for sex workers in East London) undertook a commission from the Newham Crime and Disorder Reduction Partnership to conduct an assessment into the needs of Street Sex Workers in the borough. The initiative was commissioned in order to understand the scope and types of issues facing Street Sex Workers[1] in Newham and was delivered using an action research methodology. It was anticipated that findings from the work would provide the following information:

- An understanding of numbers of Street Sex Workers operating in LBN within a three month period
- Demographic details of the women
- Analysis of the health and broad social determinants affecting the women's lives
- Clear documentation and analysis of outcomes from case management interventions
- A broader understanding of the male partners and significant associates of the women
- A clear set of partnership pathways and protocols negotiated with key service providers in LBN

Methods

The needs assessment was undertaken using an action research approach. All prospective clients and professional partners were notified of Open Doors presence in the borough for the three month period and agreed to undertake work with us on the condition that the project would end by April 30th.

Data Collection

A mixed method approach was used to collect qualitative and quantitative information. By building on quantitative findings with rich narrative information, the assessment elicits a nuanced understanding of the diversity of needs within the Street Sex Work population in Newham.

Four members of staff were deployed, these were:

Abbreviations & Terms

EU: European Union

UK: United Kingdom

UKBA: United Kingdom Border Agency

NCDRP: Newham Crime and Disorder Reduction Partnership

LBN: London Borough of Newham

British Street Sex Worker: a sex worker who is a permanent resident or citizen of the UK; typically born in the UK, but may have immigrated to the UK as a child

Romanian Street Sex Worker: a Romanian/EU citizen working in the UK sex industry, but without permanent residence in the UK

OECD: Organisation for Economic Co-operation and Development

HMO: House of multiple occupancy

GU: Genitourinary

[1] Street Sex Workers are people who sell sex in public spaces. This group does not include Indoor Sex Workers, who work from

- Open Doors Service Manager – delivering outreach, case management, pathway and protocol development with borough partners as well as leading on strategic partnership development within LBN.
- Open Doors Independent Sexual Violence Advisor – delivering outreach, case management and specific input around sexual violence.
- Open Doors Outreach Development Case Worker – delivering outreach, case management, pathway and protocol development with borough partners.
- Open Doors Romanian Outreach Development Case Worker – delivering outreach, case management of Romanian Street Sex Workers, pathway and protocol development with borough partners.

Other members of the Open Doors team also assisted with outreach and case management as and when required.

Engaging Street Sex Workers Through:

- Assertive night time outreach (usually taking place on a Monday and Thursday for between 2.5 to 4 hours) between the hours of 9.30pm and 4am was conducted twice a week. This involved team members working in pairs traversing the Romford Road in a marked NHS vehicle, stopping and engaging the women to explain the nature of our work and what we could offer as well as giving hot drinks, condoms and sandwiches.
- At least 3 days per week it was possible for clients to drop in to the temporary office space utilised by Open Doors on the Romford Road.
- Assertive case management; procuring ID, setting up rapid, low threshold methadone prescribing, rapid primary care assessment pathways to obtain GP sick notes, benefits claims, obtaining refuge places, supporting women into primary, acute and chronic health care services.
- Production of small gate fold cards in English and Romanian explaining the Open Doors service on offer in LBN during this period.

Engaging Professional Partners Through:

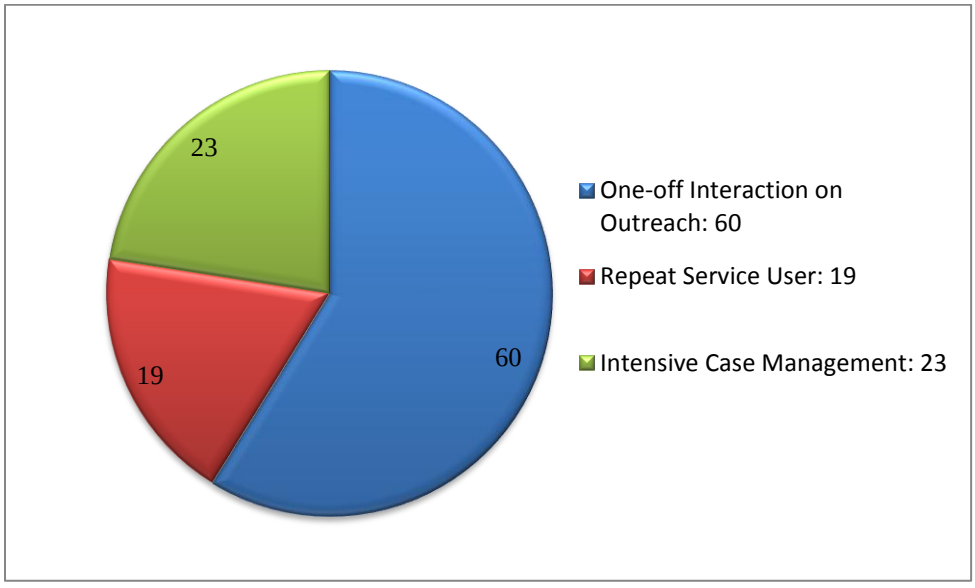
- The production of a short briefing note, introducing the Open Doors needs assessment work in the borough and requesting that prospective partners meet us within the first two weeks of the project inception.
- Early inception partnership meetings yielding both good will and practical solutions to developing effective working relationships and improved services for Street Sex Workers.
- Writing shared protocol agreements outlining terms of services between Open Doors and partner agencies.

Quantifiable Outcomes Summary

Overview of Street Services and Demographic Details

- Aggregate number of interactions with Street Sex Workers in Newham: 315
- Number of Outreach Session: 25 late-night street outreach sessions
- Of 102 unique/individual clients, 55 are British, 44 are Romanian, 1 is Hungarian, 1 is Polish, and 1 is Lithuanian
- Of 44 Romanian Street Sex Workers, 7 are of Roma Ethnicity
- Of the 55 British Street Sex Workers, ethnicity data was captured for 43 of the women: 65% were White (N=28), 21% were Black (N=9), 7% were Mixed Black-British (N=3) and the remaining 7% were White-Italian, British-Caribbean and Chinese (N=3)
- Mean age of Romanian Street Sex Workers: 25[2] years old
- The age range among Romanian Street Sex Workers ranges from 18 to 42 years of age
- Mean age of British Street Sex Workers: 32 years old
- The age range among British Street Sex Workers is from 20 to 48 years of age
- Of 102 unique/individual clients, 60 individuals were seen on a one-off basis on the street. There were 19 individuals engaged repeatedly on the street, and 23 were intensively case managed in a variety of settings (see Figure 1 below).

Figure 1. Service Use Distribution among 102 Unique Clients



[2] It was not always possible to gather date of birth in the context of street outreach. This data reflects the 16 British and 13 Romanian dates of birth recorded.

Housing for Street Sex Workers in Newham

- Percentage of British Street Sex Workers with stable[3] accommodation: 0% (N=55)
- Percentage of British Street Sex Workers who are fully homeless: 96.3% (N=53)
- Percentage of Romanian Street Sex Workers precariously housed in houses of multiple occupancy: 100% (N=44)
- Number of women living with parents: 2
- Number[4] of women offered interviews for supported accommodation: 2
- Number of women who were supported into temporary accommodation: 0% (N=102)

Benefits Support for British Street Sex Workers in Newham

- Number of British Street Sex Workers supported to make Employment Support Allowance claims: 9
- Number of British Street Sex Workers already on Job Seekers Allowance: 1
- Number of British Street Sex Workers already on Disability Support Allowance: 1
- Number of Birth Certificates ordered to support housing/financial claims for British Street Sex Workers: 7

Summarising Domestic Violence & Sexual Violence and Assault of Street Sex Workers in Newham

- Number of MARACs filed for extreme domestic violence: 4
- Number of domestic violence victims who were supported out of the borough into emergency refuge spaces: 3
- Increasing reporting around sexual violence and assault: 4 Ugly Mugs[5] filed, one of which included a police report
- Of 4 Ugly Mugs, all 4 were relating to assault and robbery
- Number of referrals to Newham Action Against Domestic Violence: 4
- Two referrals to Open Doors Independent Sexual Violence Advisor regarding on-street Sex Workers who have been victims of sexual assault

[3] Stable accommodation would be characterized by an individual holding a tenancy, in temporary accommodation, or in an arrangement that appropriately meets the needs of the client on a long-term basis
[4] Two women were offered interviews for temporary accommodation, but as of yet, they have not been able to attend these appointments
[5] Ugly Mugs is a national strategy where sex workers can confidentially report crimes towards sex workers without having to directly report to the Police. This project emerged from strong evidence that sex workers are far more likely to be victims of violence and other crimes than non-sex workers, and that they are far less likely to report incidents to the police. Further information at www.*uknswp.org/um/*

Criminal Justice

- Number of clients represented in court by Open Doors staff: 2 individuals on 3 occasions
- Number of bail conditions re-negotiated: 1
- Number of instances Open Doors advocated for clients by telephone in real-time (while client was being interrogated/apprehended by police): 3

Medical Outcomes for Street Sex Workers in Newham

- Number of British Street Sex Workers fast-tracked into methadone treatment: 6
- Number of British Street Sex Workers who were already on methadone, but were supported to help maintain their methadone scripts: 4
- Aggregate total number of British Street Sex Worker supported on methadone: 10
- Number of British Street Sex Workers supported to register with a GP: 9
- Number of Romanian Street Sex Workers supported to register with a GP: 2
- Number of Street Sex Workers supported into 21-day detox: 1
- Number of women reporting need for mental health support: 2
- Number of women supported around HIV treatment: 1
- Number of British Street Sex Workers seen by BBV nurse: 2
- Number of British Street Sex Workers given hepatitis B booster: 1
- Number of Romanian Street Sex Workers given hepatitis B vaccination: 9

Sexual and Reproductive Health

- Number of pregnant Street Sex Workers in Newham engaging with Open Doors for antennal support: 2 (one Romanian and one British)
- Number of terminations of pregnancy among Romanian Street Sex Workers: 2
- Number of terminations of pregnancy among British Street Sex Workers: 0
- Number of pregnancy tests among Romanian Street Sex Workers: 7
- Number of pregnancy tests among British Street Sex Workers: 2
- Uptake of long acting and reversible contraception through Open Doors among Street Sex Workers: 1 British Street Sex Worker
- Uptake of Oral Contraception among Street Sex Workers: 1 Romanian Street Sex Worker
- Sexual Health Screenings at GU clinic for British Street Sex Workers: 1
- Sexual Health Screenings at GU clinic for Romanian Street Sex Workers: 10

Drug Use among Street Sex Workers in Newham[6]

- Percentage of Romanian Street Sex Workers using heroin or crack cocaine: 0% (N=44)
- Percentage of British Street Sex Workers using heroin or crack cocaine: 100%
- Uptake of syringes exchange on outreach during the needs assessment period was low (N=3). We were told by British Street Sex Workers in LBN that smoking rather than injecting is the preferred method of consumption. However, it may be that the low uptake of syringe exchange among street based sex workers during this needs assessment can be attributed to pharmacy based syringes exchange programme that operates in the borough.
- Many British Street Sex Workers are combining crack cocaine with strong alcohol the effects of which can lead to highly disinhibited and risky sexual behaviours

[6] Data collected through self-reporting and ethnographic observation

Part A: British Street Sex Workers in Newham

The following section provides a narrative summary relating to British Street Sex Workers in Newham. Information regarding the Romanian Street Sex Workers is provided in Part B. Given that these are two distinct groups, they will be discussed separately in order to clearly illustrate the needs of the respective groups.

Need for Flexibility within Services

It was observed throughout this action-research initiative that British Street Sex Workers in Newham are extremely chaotic, and that they live nocturnal lifestyles. Sex workers in Newham report being entrenched in street life for many years. As a result, life-skills such as time management and confident interpersonal communication have been lost, making engagement into services particularly difficult. To engage this deeply vulnerable cohort services must make accommodation in their service provision that reflect the challenges facing women leading chaotic lives, and their difficulties with time management[7] and communication.

The women who engaged with Open Doors during the three month needs assessment tend not to wake up until late in the afternoon. Given their nocturnal pattern, it was observed that many Street Sex Workers in Newham cannot attend GP surgeries, methadone clinics, and housing appointments during usual service hours of operation. This creates an obvious barrier to making any progress towards improved health and wellbeing. Notably, it was found that many British Street Sex Workers in Newham are keen to engage in services if those services are friendly, understanding of their circumstances, and willing to make accommodations that help support engagement, i.e. offering appointments late in the day. Furthermore, the women reported their discomfort in having to interact in a community service setting when at the same time men who they described as their drug using peers/dealers/customers were also present. This observation is important as it highlights one of the many barriers the women must overcome if they are to avail themselves of suitable services.

While every effort is made by Open Doors staff to arrange for appointments late in the day, despite the client's best effort, they nonetheless tend to arrive one or two hours late for appointments. In order to address this barrier, Open Doors used an assertive outreach strategy, in combination with the development of flexible and fast-track options for accessing services. The impact of this strategy is that it enables 'quick wins' for the women, thereby increasing their confidence and motivation, saving time and money for both Open Doors and other professionals. Evidence of the effectiveness of this strategy is that three services users who

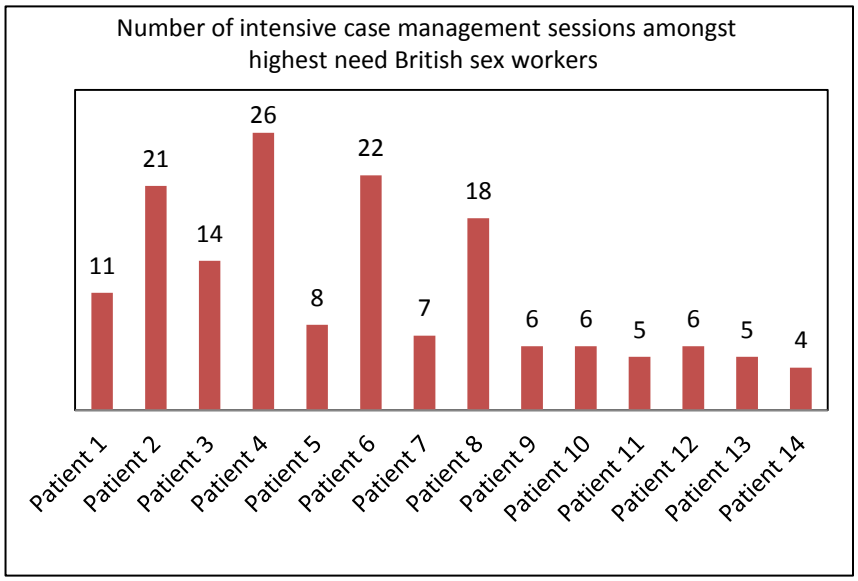
[7] Ultimately, the development of time management skills would be an aspect of a long-term care plan. However, prioritizing time management amongst street-homeless individuals fails to address the pressing needs in the patient's life, and suggests an inability of service providers to accommodate the needs of this marginalized group.

were being intensively case managed reported that it would take them weeks to achieve objectives that Open Doors completed with them in just one afternoon.

Intensive Case Management

During the three month needs assessment, it was established that Open Doors is the only service operating in Newham for Street Sex Workers that provides Intensive Case Management. Although several organisations provide 'signposting'—which is when a client is instructed on how or where to go to get support around a given need—there are no service providers who step out of their offices and into the community with clients. Open Doors observed that clients who are given referrals to intimidating appointments, such as court sentencing, HIV treatment/diagnosis, housing interviews, and police station interviews to report violent crimes will simply not attend if not supported by a Case Worker. Additionally, by accompanying patients to appointments, The Open Doors team were able to intervene and advocate on behalf of clients in ways that further enhance and coordinate care plans.

Figure 2. Intensive Case Management Sessions

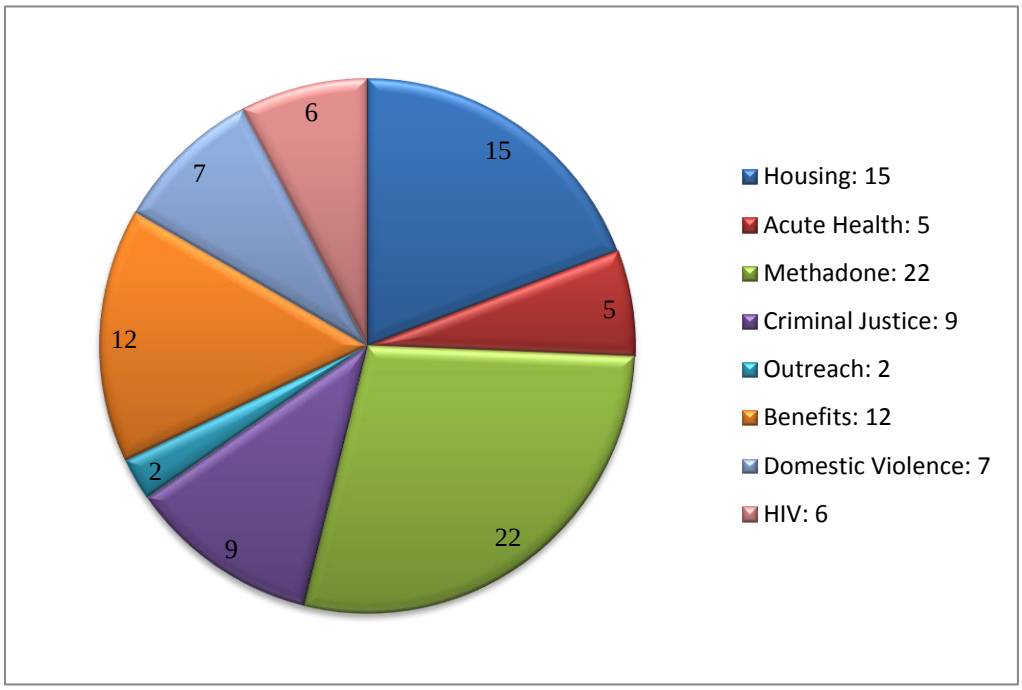


Letter written to Open Doors staff by Patient 2

"No one has ever supported me and gave me the help your team have in the short space of time we have been working together. Your team have made me realise that I am not alone and have made me want to fight my issues! Drugs, mental health, housing and my family situations! I know that there is always somebody on the other end of the phone if I feel like I can't cope no more and I'm grateful for all you's are doing for me! I know this is your job but to me I feel like you have offered me a new start, a proper lifeline.

Thanks for supporting me to all my appointments as I have no patience and never get the correct help which I need. I'm so happy we are working together and I'm truly grateful. I don't think you as a team realise what you have done for me. So much more than I can ever explain. I was at rock bottom, couldn't go no lower and you have made me see light at the end of the tunnel now"

Figure 3. Patient 6: Breakdown of 78 Needs Addressed within 22 Intensive Case Management Sessions[8]



Housing for British Street Sex Workers in Newham

It was observed through this needs assessment that 100% of British Street Sex Workers in Newham had no stable accommodation. Of the individuals being Intensively Case Managed, many reported sleeping rough during the cold winter months in sub-zero temperatures, and that there was no cold-weather shelter provision during this time. Through discussions on outreach and throughout case management sessions, it was reported that the women were living in derelict buildings, bin chutes, crack houses, abandoned vehicles, building sites and on the floors of other vulnerably housed people. In one instance, a heavily pregnant woman was found to be living in a stairwell yards away from the Romford Road.

Street Sex Workers have typically lost all formal means of identification. Despite being UK citizens, these women are unable to present at Newham Housing because they do not have any identification to help support a claim. Although Open Doors will order new birth certificates for clients, this process can take up to 6 weeks to process. In the interim, there are no options to house these deeply vulnerable Newham residents.

[8] Multiple needs may be assessed within one case management session

Stranger Violence, Domestic Violence and Partner Violence in Newham

At this point, Open Doors has identified three types of violence experienced by British Street Sex Workers in Newham: Stranger Violence, Domestic Violence and Partner Violence.

Given the stigma and fear surrounding disclosing domestic/partner/stranger violence, it is difficult to get a population-wide estimate of the number of street sex working women actually facing violence. This is particularly true when outreach work, by definition, occurs outdoors on the road, meaning that a private conversation may not always be possible. This limits the extent to which Open Doors staff can assess an individual for domestic violence. Furthermore, another methodological limitation to assessing population wide domestic/partner violence is that many Open Doors clients downplayed the extent to which they are experiencing violence. On several occasion, Open Doors staff were only able to assess the true extend of violence after weeks or months of working intensively with an individual.

Stranger Violence against Street Sex Workers in Newham

In late April 2013, a Street Sex Worker was exiting an ally way when she was approach by a man who asked her for "business" [sex]. He asked for oral sex, and money was exchanged. The male client did not let the sex worker touch him with her hands, and he left the condom on after ejaculation. He then revealed that he had a thin leather strap that he threatened to strangle her with. The perpetrator snapped the leather snap several times to intimidate here, while demanding she return the money to him. After the money was returned, he extinguished his cigarette on her forehead, and took his cigarette butt with him. The victim reported that she believes that he is savvy about collecting his forensic evidence, suggesting that he is a repeat offender who knows how to avoid getting caught. Furthermore, the victim believes he strategically approached her in an area where there were no CCTV cameras, and that his choice of traditional Muslim dress is a means to be inconspicuous. According to the victim, when she discussed this incident with her peers, other women reported the same experience with a man fitting the description and modus operandi. This victim did not wish to make a police report.

Stranger Violence against Street Sex Workers in Newham

Between February and April 2013, it was found that 100% of British Street Sex Workers being intensively case managed by Open Doors have experienced stranger violence while sex working[9](N=14). Stranger violence occurs when the victim does not know the perpetrator. In this context, it refers to women being sexually assaulted and/or assaulted while sex working by

[9] Given the sensitive nature around rape/sexual assault/ robbery, we could not ethically collect population-wide data regarding the exact frequency and prevalence of stranger violence Newham. It is not always possible to gather detailed information from victims without causing distress, and thus violating codes of conduct for ethical collection of data with vulnerable populations. For this reason, data on this variable is limited to women being intensively case managed, meaning that Open Doors was able to asses levels of violence in compassionate and respectful ways.

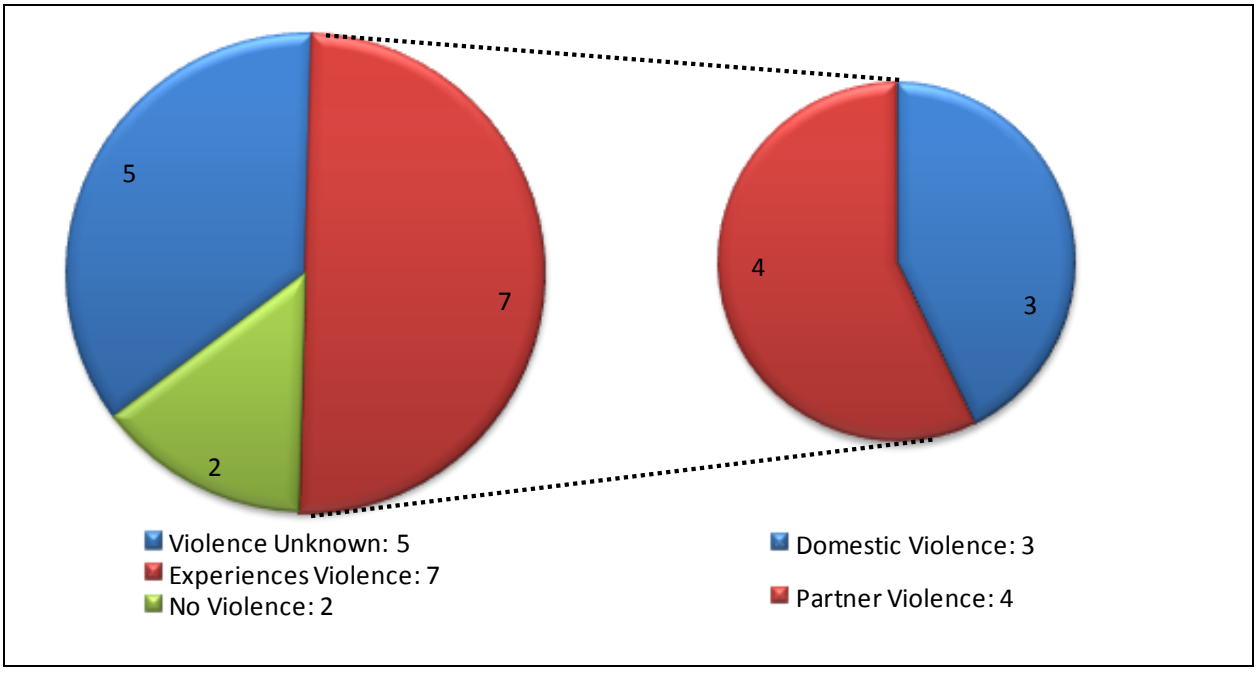
a client, or an individual posing as a client. The overwhelming majority of these instances go unreported.

Domestic Violence and Partner Violence in Newham

It was found that during the February to April 2013 needs assessment period, 50% of British Street Sex Workers in Newham who were being intensively case managed were experiencing acute domestic violence or partner violence (N=7). While initially, it may seem that most British Street Sex Workers who experience violence from a male partner are experiencing domestic violence, this is in fact a simplistic assessment of a woman's circumstances as some are living with friends and/or family in domestic violence situations. However, to reiterate, the chaos and instability in the lives of women selling sex in Newham means that an individual may experience more than one type of violence—variables such as the individual's living arrangements may change daily, therefore blurring the lines between domestic violence and partner violence.

Among the 14 British Street Sex Workers being intensively case managed by Open Doors, 7 of the 14 experienced violence (see Figure 4). Of the 7 women experiencing violence, 4 of the women faced imminent risk of homicide. Of the women at risk of homicide, 3 of the 4 were supported out of the borough by Open Doors, while the remaining individual would not consent to being moved to an unfamiliar area and still remains at risk.

Figure 4. Violence among British Street Sex Workers being Intensively Case Managed in Newham



Lack of Housing Systemically Entrenching Women in Newham in Violent and Chaotic Situations

Domestic Violence

Homelessness and domestic violence often intersect. Open Doors encountered many Street Sex Workers in Newham who are forced to stay in dangerous relationships because they are unable to secure stable accommodation elsewhere. Nationally, there is a lack of refuge space for women who live with addictions. Domestic violence refuges host women with children which means that the nocturnal and chaotic lifestyles of street sex workers are at odds with creating a safe space for mainstream women fleeing violence.

During the needs assessment, Newham Housing refused to consider a woman who was fleeing violence because she did not have the formal identification required by housing, despite the fact she was a child of the care system. A lack of refuge spaces for women living with addictions means that—unless the woman is at an imminent risk of homicide, i.e. admitted for emergency medical treatment—it will take weeks or months to find accommodation.

Through this needs assessment it was revealed that most of Open Doors' clients who face domestic violence/partner violence are refused refuge spaces because they are living with chronic addiction. While many Open Doors clients are engaging in methadone treatment, they are nonetheless refused refuge space because they have not been engaging in treatment for *long enough*. This creates an impossible situation, as many women struggle to maintain methadone treatment while living in such dangerous circumstances, and they cannot leave the dangerous circumstance because they are not maintaining their methadone treatment. In practice, this means that typically Open Doors was unable to secure safe housing for a woman fleeing domestic violence until after the woman had been injured and/or hospitalized as a result of domestic violence.

Simply put, in the immediate and short term, Open Doors was unable to find supportive accommodation for any women fleeing violence, unless the safeguarding risk was considered to be life threatening. Although Open Doors did support three women to flee the borough, the ability to accommodate them so quickly was due to the fact that these women were at an imminent risk of homicide, meaning that emergency pathways, typically reserved for the most

high-risk cases, were able to be used. Additionally, in one instance, Open Doors leveraged professional relationships developed through its work in the London Borough of Hackney with an 'out of borough' refuge in order to stage an emergency intervention. What this meant is that Open Doors was able to circumvent the normal waiting list.

While domestic violence protocols allow for victims to present at any local authority across the UK, for our clients, being relocated outside of London is beyond their social and emotional resources while entrenched in addiction. Furthermore, few—if any—refuges have rapid prescribing pathways developed. This means should our clients even make it to a refuge, they will be several days without either street drugs or prescribed medication, and they will go into withdrawal. Ultimately, most are unwilling or unable to cope in these circumstances, and therefore they often stay in violent situations

Chaotic Drug Use

Even in the absence of domestic violence, homelessness combined with the absolute chaos of a £200 (and upwards) per day crack cocaine and heroin habit is a key factor in preventing the uptake of drug treatment and lifestyle stability. Open Doors staff observed and it was also self-reported that British Street Sex Workers are combining crack cocaine with strong alcohol, the effects of which can lead to highly disinhibited and risky sexual behaviours.

Uptake of methadone treatment for opiate addiction is well received, as it is a medication that addresses the immediate physiological symptoms of drug withdrawal and can be obtained by prescription every day[10]. There is no medical treatment for withdrawal of crack cocaine. This means that withdrawal from crack use is characterised by considerable emotional/psychological distress and agitation which cannot be pharmaceutically mitigated.

Chronic crack cocaine addiction is characterised by sustained and excessive binges during which our clients report the cycle of 'sex in exchange for drugs' that often continues for days at a time. In order to sustain their use women will stay at the homes of known dealers and other users, trading sex for crack until the drugs run out or until they are thrown out of the property. Following this sort of episode, and when they have not slept for many days, clients make contact with Open Doors in order to seek support, drug treatment and detox. However, lack of available accommodation means that whilst we attempt to address these needs women will return to crack houses as their only form of accommodation as there is currently no other option available to them.

During the three month needs assessment period Open Doors did not encounter any street sex workers who reported being able to successfully engage with stimulant use drug treatment

[10] The Open Doors/SSMT fast track protocol was organised to run between the hours of 4-6pm

programmes in the borough. This is because stimulant use programmes operate between 10am and 6pm, and one evening till 8pm. As outlined above, this model is at odds with the realities of their chaotic lifestyle. There is however one late night evening Women on the Streets Project that seeks to engage sex workers into drug and alcohol treatment, and they operate between 8 pm and 11pm once a week.

Partnerships and Development

On-going Service Partners and Rapid Referral Pathways

- Direct referral rights into Newham Specialist Substance Misuse Team with low threshold prescribing and dedicated access slots for Open Doors: Runs every Tuesday from 4pm to 6pm. Arrangement also made for ad-hoc use of their counselling rooms to for on-site meetings with patients.
- Newham Transitional Primary Care Team—Developed fast-track referral pathways, and training for their frontline staff. Have arranged for same-day GP registration and, if appropriate, same-day issuing of medical sick notes to begin Employment Support Benefits. This process would normally take three GP appointments over two weeks, but the Open Doors/NTPCT partnership means that the process has been streamlined into one 15-minute process, which saves both NHS services considerable time and money.
- Newham Action against Domestic Violence team – joint working approved, training and awareness session delivered in March in order for Open Doors and NAADV to understand roles and responsibilities around referring sex workers into domestic violence services.
- Newham police (Safer Neighbourhood Team and Public Protection Teams) – Presenting a 'diversion not enforcement' model for Street Sex Workers; multiple discussions with senior officers at Newham police.
- Newham General—information sharing and referral protocol training delivered to emergency department clinicians.
- Medaille Trust—set up protocol arrangements to support Romanian Street Sex Workers feeling violence and coercion; training to be delivered.
- Rapid access to GU services at the Greenway centre agreed .

On-going Efforts

- Meeting to discuss SLA with Newham Housing in order to provide temporary accommodation for Street Sex Workers occurred in February. As yet, no agreement for joint working protocol has been arranged.

Up-coming Efforts

- My Romania (NGO)—Discussions with this charity regarding English language skills, ready-for-work training, and career guidance for Romanian Street Sex Workers.

Part B: Romanian Street Sex Workers in Newham

Current context: Romanian migrants in the UK

In January 2007 Romania joined the European Union (EU), but without full membership. Temporary work restrictions still apply against A2 nationals (from Romania and Bulgaria). This means that Romanian is half-in the EU and half-out. Restrictions on working and travelling rights in other EU countries will stay in place until December 2013 when the restrictions will end.

While Romanian nationals are waiting for restrictions to be lifted in December 2013, those under these restrictions are currently vulnerable to illegality[11], escalating debts, poverty, abuse, civil charges (e.g. ASBO's against Romanians seeking day labour), prison sentences for breaching conditions and the risk of being in the UK with expired documents.

Demographics of Romanian migrants in the UK

The 2012 report by OECD[12] shows that 289,000 Romanians entered the UK in 2010, of which 24,600 were students. It is impossible to identify how many of these Romanian citizens are also Roma because this data is not collected. The Department for Work and Pensions indicate that from the total number of permanent immigrants that migrated to the UK in 2011 only a small number (12,814) of Romanian migrants were employed or self-employed, and a very small proportion (1,582) were working within qualified positions, i.e. business, financial services or in receipt of vocational training, work experience, and student internships. This disparity between the actual number of Romanians and the small proportion that are on legal work permits is a major issue for the Romanian community in London.

[11] Romanian migrants become subject to a fine when they are in another EU country for more than three months without registering with the local authorities (town hall, police station). Since 2007, this often happened when Romanian nationals documents expired because the ex-UKBA kept their longer than 6 months when applying for accession work permits.

[12] For statistics on how many Romanians have emigrated to work in countries of the Organisation for Economic Co-operation and Development (OECD) see, *International Migration Outlook 2012* (OECD Publishing, 2012).

According to the Office for National Statistics, in December 2011, 94,000 people declared themselves as Romanians resident in the UK, yet for only for 68,000 of these Romanian is the first language spoken in their household[13]. As shown by the 2011 Census, the largest contingent of Romanian people living in London is concentrated in the following London boroughs:

Barking and Dagenham	1,265
Barnet	4,475
Brent	6,182
Ealing	1,028
Enfield	1,698
Haringey	2,374
Harrow	4,784
Newham	**4,816**
Redbridge	1,825
Waltham Forest	4,291

Table 1. Romanian community by London boroughs

Romanians: differentiating between Roma and non-Roma

In the UK misinformation about Romanian Roma is widespread. This misinformation is mostly perpetuated by the tabloid press.

It is estimated that there are two million people living in Romania of Roma ethnicity. However, the numbers of Roma in Europe and Asia Minor are estimated to be between four to nine million, and even as high as fourteen million.

Roma groups across Europe are not all the same in terms of *sense of commonness, autonomy, language and nomadic tradition.* There is not one shared Romani language, but up to five main dialects. There are still some small nomadic communities of Roma in Europe.

However, Romanian citizens (both of non-Roma and Roma ethnicity) speak the same official language and face the same legal restrictions in terms of free movement for workers in the UK.

[13] Romanians may have dual nationalities; also, when they are in a relationship with a partner of another nationality (e.g. British) they tend to use another language in the household.

Qualitative Outcomes Summary

Demographic and migration trends: Romanian Roma and non-Roma Sex Workers

Findings from the needs assessment show that there are no divisions between Romanian Roma and non-Roma Street Sex Workers when at work. Both groups work together and some share accommodation. Both face the same legal restrictions around work.

- The majority of women working on the border between Ilford and Newham are Romanians of Roma ethnicity; whilst in contrast, the ones working on Romford Road are non-Roma Romanians.
- Out of 44 Romanian nationals engaged during the needs assessment period, 7 are of Roma ethnicity.
- The Romanian Roma Street Sex Workers are either married or engaged in long-term relationships, and mostly living with their partners in the UK.
- It was not always possible to collect dates of birth in the context of street outreach. Therefore, the age of the 13 Romanian sex workers from whom dates of births were obtained show a mean age of 25.

Both groups described their reasons for emigrating as economic, i.e. poverty in home country, lack of work opportunities, large families to support financially. None of the women described coercion, force or trafficking as their route into sex work.

All 7 Romanian Roma sex workers described migrating from Spain (where they worked in brothels or on the streets) to the UK. The non-Roma Romanian Street Sex Workers described migrating directly from Romania to the UK either independently or via networks which facilitated this migration process

Housing/Accommodation

Most Romanian Street Sex Workers are living in houses of multiple occupancy (HMO) with either Romanians or people of other nationalities. However, in most cases they do not have proof of address at which they live. This causes problems when trying to register Romanian clients into health services.

Benefit support for Romanian Street Sex Workers

Romanian nationals are not entitled to any benefits in the UK, unless they have a previous proven employment history.

Sexual violence and assault on Romanian Street Sex Workers

During the needs assessment period, Romanian Street Sex Workers reported experiencing violence at work in various forms. In total seven individual women reported six incidences[14] of violence perpetrated against them.

These were:

- One incidence of kidnap – the woman was held against her will for two hours, but was able to escape unhurt. The woman did not want to report this to the police.
- One incidence of kidnap and rape – again the woman did not want to report this to the police. It is likely according to descriptions given by both women that the perpetrator was the same man.
- One un-reported incidence of historic rape and robbery (perpetrated in July 2012). The woman made a report to the UK National Ugly Mugs Scheme.
- One incidence of attempted rape and assault with a knife. The woman reported this to the police.

Case Study: Romanian Street Sex Worker in Newham

A. is 22 years old and a mother of a 3 year old child living with her grandparents in Romania. She is a Romanian Roma sex worker who came from Romania to the UK about three years ago, by bus after searching on the internet for massage parlours and saunas where she could sex work. She tried to work independently in a sauna, but they took half of her money plus other expenses.

On a good day she would earn about £700, but after the owner's charges she was left with £100. She arrived from Birmingham to London one year ago. Since then, she has been sharing the accommodation with her male cousin and selling sex on the Romford Road.

On several occasions, A. needed to defend herself, fighting against other Romanian girls who were protected by Romanian pimps. The same pimps have tried to coerce her to work for them, but they have been unsuccessful.

"I stood out in the street and into the light coming from the lamp post. In my attempt to deter my attackers, I pointed with my finger to the nearest visible CCTV and told them, 'come and get me from here and it will be seen on the CCTV how you took me by force."

[14] In one instance, two woman were involved in the same singular incident

- Four women reported local residents who took to the streets carrying placards against sex workers. The following day the residents returned and threw eggs at the sex workers. The women reported this to the police but no investigation followed.
- Two women robbed and beaten up. An attempt was made to report this to the police in Ilford, but the police refused to take the report.

Enforcement against Romanian sex workers

- During the needs assessment period a number of Romanian sex workers reported being arrested in both Newham and Ilford for soliciting and loitering. The women told Open Doors that these arrests had happened despite the fact they were given only one formal warning (however we have no way of verifying these claims). Women were kept in cells over-night and on only two occasions were given access to language interpreters. Fines ranged from £15 to £355 with magistrates failing to take into account that the only way for the women to pay them was to continue to sell sex on the street.

- Also during the needs assessment period it became clear that there were potential concerns around coercion, pimping and exploitation of a number of Romanian women living and working on the Romford road. Initial partnership working with Newham police yielded the potential for a discreet piece of work in which appropriate surveillance of perpetrators could be enacted whilst keeping in mind the need for future welfare support for the women. However this work was undermined after a visit from another police unit after which the women and their pimps/coercers disappeared out of the borough.

- The Open Doors Romanian outreach worker went to court to advocate for one Romanian Street Sex Worker.

- On three separate occasions the Romanian outreach worker supported Romanian sex workers with police interviews and reporting of crimes.

Currently all Street Sex Workers in Newham, both British and Romanian, face constant enforcement from police when soliciting on the streets. In the absence of a diversion strategy, this current approach creates a revolving door whereby Street Sex Workers have no option but to leave court and return to the streets to pay their fines for soliciting. Furthermore, this approach creates an antipathetic relationship between Street Sex Workers and police officers—a dynamic which undermines the ability and likelihood that Street Sex Workers will report violent crimes and sexual assault. Given the aforementioned high rates of on-street violence faced by Street Sex Workers, this situation is clearly problematic.

Sexual Health needs of Romanian Sex Workers

The Romanians Street Sex Workers responded very positively to the services offered by Open Doors and attended regular appointments at the Open Doors sexual health clinics at Newham General and Homerton Hospital in Hackney. Following the sexual health and reproductive interventions carried out by Open Doors clinicians, it was revealed that:

- Between February and April 2013 ten Romanian sex workers attended GU services sixteen times
- All ten women had full sexual health screening plus Hepatitis B vaccinations
- Seven women were screened for pregnancy
- Three women were pregnant
- One pregnancy requires on-going antenatal and Children's Social Care support (currently being undertaken by the Open Doors team)
- One pregnancy was unwanted and the woman was supported to undertake adoption proceedings
- One pregnancy has been referred for termination
- One Romanian woman was given the contraceptive pill
- Prophylactic Emergency contraception was given to eight women

Engaging Romanian sex workers into primary care services

GP registration for Romanian sex workers can be difficult because it is unlikely that they will have documents registered to the addresses at which they live. During the needs assessment period one woman was referred to Project London and through them supported to register with the Newham Transitional Care team and one was supported directly by Open Doors into the same service.

Drug and Alcohol Issues among the Romanian Street Sex Workers

Both self-reported and observed use of drugs is low among the Romanian Street Sex Workers in Newham. Romanian Street Sex Workers are clearly wary of the chronic and chaotic drug using patterns of the British Street Sex Workers they come into contact with.

Wellbeing

It was clear from several in-depth conversations held between the Romanian outreach worker and the women that their mental wellbeing is affected by:

- Lack of money
- Police enforcement
- Violence from clients

- Pressure to send money home to support family

Culturally, stigma around mental health prevents Romanians from reporting as well as the fact that many may not be aware in the first place of the symptoms of mental health problems.

Recommendations

- The LBN should move away from the costly, time-consuming and ineffective enforcements strategies around soliciting which further entrench women in Street Sex Work. Instead, they should create a practical court diversion scheme through which to manage problematic Street Sex Work.

- Homelessness among Street Sex Workers in Newham is at crisis point. There must be increased accountability among service providers responsible for providing temporary or supported accommodation in order to address this situation. Like the enforcement model, homelessness further entrenches women in the street sex working environment, and undermines opportunities for improved health and social change.

- There is an on-going need to provide assertive clinical outreach and case management services for Street Sex Workers in Newham. These services must adopt flexible working hours in order to reflect the complexity in the lives of the women they serve.

- Low-threshold methadone prescribing must be continued as a treatment option for opiate users. Increasing accessibility to these services play a key role in supporting individuals towards drug detox and rehabilitation treatments.

- Crack cocaine, alongside heroin, is the primary drug of choice for British Street Sex Workers in Newham. Crack cocaine is often combined with alcohol, which disinhibits individuals, leading to high-risk sexual behaviours. There are currently few proactive options that can meet the needs of street sex working women who are seeking treatment for crack cocaine in Newham. Stable accommodation alongside programmes specifically designed to break the cycle of 'sex for crack' must be developed within the borough.

- Fast track pathways into GU services at Newham General must be maintained.

- Termination services at Newham General Hospital must improve their response when faced with requests for termination of pregnancy from Romanian clients. Powerful bureaucratic delays mean that women seeking termination have carried babies to full term because they could not negotiate existing termination pathways.

- More work needs to be done to address the low uptake of long acting reversible contraction among both Romanian and British Street Sex Workers. Strategies to address

this problem must reflect the diverse cultural and contextual factors limiting uptake of contraceptives in these groups.

- Regular training, awareness and sensitization is needed for professionals working across the LBN with regard to Street Sex Workers.

- Joint working must be scaled up between children's social care and services designed to case-manage pregnant Street Sex Workers. Of particular importance is ensuring that pregnant Street Sex Workers do not continue to sleep rough in Newham.

- There should be an increased ability to negotiate refuge spaces for street sex workers in Newham who use drugs.

- There is a need to strengthen multi-agency referral pathways to ensure that victims of domestic violence who are Street Sex Workers are not failed by the current system.

- This needs assessment has demonstrated that there is extraordinary good will amongst police, local authority, and health and social care professionals throughout the LBN. These groups are highly motivated to address the needs of Street Sex Workers through strategies that are evidence-based and well coordinated.

Project Name	Total Amount Requested:	Project Lead- named lead and agency details:
Open Doors	**£16,000**	**Georgina Perry, Service Manager** **07970956127** **Georgina.Perry@Homerton.nhs.uk**

Problem project is trying to address:

It is widely recognised by all statutory bodies in the borough that there is no effective and comprehensive service provision for the Street Sex Workers of Newham. Whilst it is understood at a national and pan-London level that this cohort represents some of the most socially excluded and unsupported individuals in our communities, the lack of any service provision in Newham translates into the following

- There is no understanding of the number of women currently selling sex from the streets.
- There is no definitive quantitative or qualitative analysis of any of the social or health determinants that affect the women's lives.
- There is no active case management process to document interventions and outcomes
- There is no night-time outreach to encourage the women to make contact with services.
- There are no clear referral pathways to meet the complex needs of Street Sex Workers.
- There is no advocacy or partnership work that develops an understanding in the borough of the women's needs.

Newham is currently undertaking a scrutiny review into the health and social care needs of Street Sex Workers in the borough. The three month project we propose would dovetail neatly with the work of the scrutiny committee and would make concrete the nature and scope of the issues faced by Street Sex Workers in the borough. It would assist with further and necessary planning around the needs of Street Sex Workers and also demonstrate an effective clinical and case management model for the borough to consider as it decides how best to commission for the needs of this cohort.

The proposal to undertake this piece of action research comes with a clear endorsement from Newham public health services who acknowledge that this would be an important piece of work to undertake if Newham is to understand and commit to effective interventions around street sex work.

However, it is important to acknowledge the risks inherent in delivering a piece of action research of this nature. The short term benefits are clear but the obvious risk is that a set of responses and effective pathways are developed that would end after only three months as there are no effective support services currently in operation in Newham (hence the need for this piece of work). There are ethical considerations to an approach like this and to ensure that ethical standards were met, the women (and indeed all stakeholders) would have to be made clear of the short term nature of the work. However I believe that the risks are outweighed by the high quality information and set of exemplar actions that will be achieved if the work goes forward. Currently, the needs of Street Sex Workers in Newham are completely un met. This piece of work will at the very least ensure that the borough has a template to work from as it moves forward.

What actions does the project intend to take to address this problem:

Open Doors propose to run a three-month action research initiative in order to understand the scope and issues facing Street Sex Workers in Newham and to address the problems outlined in the previous section.

During this piece of action research, women met and worked with will be monitored to provide a clear understanding of;

- The numbers of Street Sex Workers in the borough
- Demographic details of the women
- Health and social determinants affecting their lives plus clearly documented outcomes of case management interventions
- Male partners and significant associates of the women

Additionally there will be

- Two night time outreach sessions segueing into day time case management sessions.
- There will be clearly documented referral pathways in order to meet the various needs of the women. These pathways will enable women to access rapid methadone maintenance, sexual health screening and treatment, primary care services, chronic health care services, housing (both emergency and supported), support with DV issues, support if women have experienced rape and sexual assault, support to gain benefits, and any other support that may be pertinent to the women such as advocacy around legal and social services related issues.
- There will be clearly documented advocacy and partnership work developed in the borough so that the needs of the cohort are fully understood and appropriate multi-agency responses put in place.
- There will be a summary report of findings and actions at the end of the three-month period.

What will the project achieve:

The project will achieve the following outcomes:

- A three month summary of numbers of Street Sex Workers in the borough
- Demographic details of all the women
- Documented and quantified health and social determinants affecting Street Sex Workers lives enabling planning for care and support pathways to be developed.
  Documented outcomes of case management interventions
- Documented numbers and details where possible of male partners and significant associates of the women and how these relationships interplay with social exclusion issues.
- Two night time outreach sessions segueing into day time case management sessions.
- Documented referral pathways in order to access rapid methadone maintenance, sexual health screening and treatment, primary care services, chronic health care services, housing (both emergency and supported), support with DV issues, support if women have experienced rape and sexual assault, support to gain benefits, and any other support that may be pertinent to the women such as advocacy around legal and social services related issues.
- Documented advocacy and partnership agreements so that the needs of the cohort are fully understood and appropriate multi-agency responses put in place.
- A summary report of findings and actions at the end of the three-month period.

What information will the project use to ensure that the project is responding to local concerns/priorities:

Newham borough council are currently conducting a scrutiny process in order to understand the health and social care needs of Street Sex Workers in the borough. The proposed action research project would be informed by the outcomes so far from this scrutiny process.

As a core element to the project, action research staff will meet with borough police and local statutory health services (such as prescribing, primary care and social services) to seek to understand and address concerns and issues raised. Feedback will also be sought via community CAP panels from local residents. Most importantly, the action research will be informed by the health, social care and criminal justice needs of Street Sex Workers themselves.

A piece of action research could provide an evidential summary that would add value to scrutiny process, it would be likely to support existing findings and unearth additional issues that had not so far been recognised. Findings from an action research initiative would enable the borough to make clear recommendations about the nature and scope of services required to support this socially excluded, highly chaotic and vulnerable population.

What information will the project feedback to partners and how will this take place:

- A three month summary of numbers of Street Sex Workers in the borough
- Demographic details of all the women
- Documented and quantified health and social determinants affecting Street Sex Workers lives enabling planning for care and support pathways to be developed.
  Documented outcomes of case management interventions
- Documented numbers and details where possible of male partners and significant associates of the women and how these relationships interplay with social exclusion issues.
- Numbers of women worked with during time outreach sessions.
- Documented referral pathways in order to access rapid methadone maintenance, sexual health screening and treatment, primary care services, chronic health care services, housing (both emergency and supported), support with DV issues, support if women have experienced rape and sexual assault, support to gain benefits, and any other support that may be pertinent to the women such as advocacy around legal and social services related issues.
- Documented advocacy and partnership agreements so that the needs of the cohort are fully understood and appropriate multi-agency responses put in place.
- A summary report of findings and actions at the end of the three-month period.
- A presentation of findings to partners.

Break down of funding request

This proposal is to provide two senior and highly experienced staff both of whom have a significant track record of running services that support the needs of Street Sex Workers.

The usual staff costs associated with a 3 month piece of development/action research work would be £26,250.00

However, Open Doors believe that this piece of work is imperative in order for LBN to redress the current paucity of knowledge and support around street sex work in the borough. By shining a light on the broad set of health and social determinants affecting the women and by demonstrating that effective action can be taken, Open Doors seeks to contribute to the wider on-going discussion about what can and should be done to successfully support the cohort.

Open Doors is requesting £10k that will be used to buy in 3 months work of bank staff support for the team in Hackney, thereby freeing the two staff members to focus full time on the action research project in Newham. In addition, £6k is requested to support rental costs for a temporary hub that can be used for case management and as an outreach base. It may be possible to acquire a temporary space that is given 'in kind', but in the event that this is not the case, any work carried out in the borough will need a basic infrastructure. Open Doors can provide its own IT, communications and transport as well as the monitoring mechanisms and consumables required, but without a space in which to house the work on a temporary basis, it will not be possible to achieve the anticipated results.

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