



## WOMEN & SEX WORK IN GREATER MANCHESTER: 2022 RESEARCH BRIEFING

In 2021, an independent research team undertook a small-scale research project looking at women and sex work in Greater Manchester. This included a review of existing academic and policy research, a survey and/or interviews with 151 women who sex work, and a survey of 56 professional stakeholders.

### PREVALENCE

There are at least 3,000 sex workers in Greater Manchester (GM) and a reasonable estimate is 4,500. Women who sex work are resident and working in every GM borough. Most work in more than one location, and two thirds work in the city centre, travelling in from other parts of Manchester or GM boroughs. It is hard to get accurate figures about sex work because it is so often hidden and taboo. There are likely to be more people involved than we know.

#### HOW MANY WOMEN WHO SEX WORK EXPERIENCE GENDER-BASED VIOLENCE?

**63-80% of women who sex work have experienced violence.** Their experiences affect their physical health, mental health, drug use, and trust in services. Violence is most likely to be experienced by those working outdoors, but rape and sexual assault may occur wherever women are working. Women who sex work are much more likely to experience violence than men. In Manchester, there were 339 reports of violence by sex workers to National Ugly Mugs (NUM) between 2012-2019, which is likely to be an underestimate because of the stigma around sex work. Our survey reached more women than past

research. Of the 151 women who responded, more than 40% say they need help now to be safe, or because of sexual abuse/assault, or because of domestic abuse, or think they will need this help in the future.

### CONTEXT

The experiences of violence of women who sex work are different from men's, and some violence is directed at them specifically because they are women and/or because they are sex workers. Here are some key findings:

**Sex workers' experiences of violence are varied and result in significant harm:** 2-in-5 report physical violence including rape, attempted rape, sexual assault and condom removal; more than 1-in-5 report rape specifically; 1-in-4 report fraud and robbery; 1-in-4 report stalking and harassment. Other types of violence experienced by sex workers include: online harassment (57%); sexual harassment (47%); sexual assault (46%); stalking (41%); the sharing of intimate images without consent (30%); cyber-flashing (29%).

## CONTEXT CONTINUED

### Women who sex work are 12 times more likely to be murdered than other women.

Our primary research added to this existing evidence. 1-in-4 women said they need help to be safe, 1-in-6 needed support because of sexual abuse/assault; and 1-in-9 needed support dealing with domestic abuse. Some experiences of violence are clearly intersectional: 17% needed support because of racism, and 15% needed support because of trafficking or modern slavery. We didn't ask women about some gender-based violence such as trauma, FGM and/or childhood experiences of violence.

**Physical pain is a major issue for many women who sex work due to violence or untreated injuries.** Half of women (57%) reported physical pain due to violent clients. Some women 'self-medicate' pain with alcohol or illegal drugs.

**Violence may lead some women into sex work.** Early experiences may shape women's expectations and choices:

**“Stuff happened a lot when I was younger, so I just thought it was normal”.**

Changing Lives (2016) conclude: *“Childhood experiences of abuse and exploitation demonstrate the potential links between grooming, coercion and survival sex work later in life”* (p12).

**Violence results in ongoing trauma for many sex workers.** Most sex workers have experiences of domestic violence and sexual violence. Some have childhood experiences of abuse and sexual exploitation. 'Survival' sex workers are more likely to experience ongoing trauma. There are links between experiences of violence, ongoing trauma, and substance use and mental illness – see our separate briefings.



**Women use a range of strategies to protect themselves.** Past research shows that women who sex work use a range of strategies to avoid, minimise and manage their risk of harm e.g. a buddy system, using taxis/drivers, controlling (and if necessary changing) the times and places they work, keeping a phone close, avoiding night work, seeing regulars rather than strangers, avoiding drugs and alcohol, sexual health screening, and carrying weapons including tear spray. Women also take steps to protect their children from danger and violence.

## SERVICES AND SUPPORT

### WHAT HELP HAVE WOMEN WHO SEX WORK IN GM BEEN ABLE TO GET?

The figures from our primary research suggest that many women who sex work who need support with safety and sexual or domestic abuse have not been able to access it. 26% say they need help with safety but only 18% have been able to get it; 17% need help because of sexual abuse or assault but only 12% have been able to get it; and 11% need help because of domestic abuse but only 3% have been able to get it. There are additional issues for racially minoritised sex workers and migrant workers: 17% need help because of racism but only 8% have been able to get it; 15% need help because of trafficking or modern slavery but only 6% have been able to get it.

## SERVICES AND SUPPORT CONTINUED

Although there are “in excess of 2000 organisations in Greater Manchester working to protect people from gender-based abuse”, research found that most women experienced problems getting the support they need to deal with their experiences of violence, particularly the long-term effects – e.g. 83% needed support with mental health but 69% did not get it or experienced significant delays. Past research also shows that sex workers did not include ‘involving the police’ in their risk management strategies. The police note that although 80% of sex workers have experienced crime in the past five years, only 23% of these have reported it. Women – especially racially minoritised sex workers and migrant workers – say they fear stigmatisation and criminalisation, and do not always trust the police. Women are further impacted by intersectionality such as race, gender identity, age or disability status. A person-centred, trauma-responsive approach is needed to address these, but currently, many local organisations provide services with a single focus, addressing only housing / homelessness or addiction or food poverty or mental health.

Women who have accessed MASH reported overwhelmingly positive experiences; some said that MASH had literally changed or saved their lives. However only 1-in-5 women surveyed (21%) had used MASH and those resident or working outside of Manchester city were less likely to have accessed MASH.

### WHAT SUPPORT DO WOMEN RECEIVE FROM MASH?

MASH provides one-to-one support for women who have experienced gender-based violence, from helping them to access emergency accommodation, to visiting the Sexual Assault Referral Centre (SARC), to reporting violence, to support with their wider physical and mental health needs. Our outreach provides support and safety on the streets, including at night. MASH provides attack alarms, safety advice and supports women to report into and access information from the NUM Dodgy Punters Scheme. Last year 89 victims of gender-based violence were supported holistically by MASH. Women tell us that having a MASH presence on the street on an evening gives them reassurance and a sense of safety. Women tell us they value our support:

**“It’s awful out there at the moment. Knowing the MASH van is out there just helps us to feel a little bit safer and that there’s someone who will believe us and put our safety first.”**

MASH is already part of multi-agency partnerships to tackle gender-based violence in Greater Manchester. We are contributing significantly to the priorities of the [GM Gender Based Violence Strategy](#).

### WHAT ARE THE BARRIERS TO ACCESSING SERVICES?

Women report that concerns around confidentiality is the most significant barrier to accessing services (21%). Other barriers include services not being available locally (16%) or being inaccessible due to transport (9%); and women not knowing how to access services (15%) or what is available (12%). Some women also talked about language/ cultural barriers, which compounded issues around stigma and lack of trust in services.

### WHAT WORKS FOR WOMEN WHO SEX WORK?

Approaches that take account of, and seek to address, trauma and stigma are vital. We also have robust new insight about what types and patterns of delivery work best. Most women who sex work specifically want face-to-face support via drop-ins (57%), outreach services (48%) or regular (weekly) sessions (38%).

Overwhelmingly, women want services that are available all days of the week including the weekend and evenings. 34% of women also said they needed practical help like transport to appointments. Trusted relationships are very important. Women who sex work want female support staff, and someone they know who will not judge them.

Very often, how support is provided is at least as important as what is offered: *“Sex workers report needing non-judgmental, sex worker friendly services. Some services that aim to support workers can add to*

## SERVICES AND SUPPORT CONTINUED

*the stigma they experience, and respondents requested that they 'Stop shaming us', citing the difficulties in discussing issues with support services that hold strong ideological positions against sex work"*

## RECOMMENDATIONS

### HOW COMMISSIONERS CAN USE THIS INSIGHT

The majority of GM stakeholder organisations (67%) recognise there are gaps in services for women who sex work. They suggest:

- Comprehensive, multidisciplinary services like MASH and women-only drop-in services for sex workers across Greater Manchester
- Gender-based violence outreach in all GM boroughs for women sleeping rough who may be exploited sexually

- Accessible counselling for victims of gender-based violence without a home or digitally excluded

In addition, we believe that hosting an Independent Sexual Violence Adviser (ISVA) at MASH would significantly improve our ability to support women who have experienced violence and to improve rates of reporting to the police. We would like to deliver training to third and public sector professionals on supporting women who sex work with gender-based violence. We would also like to more dedicated police resource, such as the GMP dedicated rape unit which was previously in place. In addition, we believe that ensuring that the experiences of women who sex work and experience gender-based violence are shared with leaders and policy makers, will improve systems and services for women.

If we can secure adequate resources to expand our services to Greater Manchester and host an ISVA, we will be able to contribute further to the priorities in the GM Gender Based Violence Strategy (see page 11). Particularly supporting victims and survivors, and mobilising Greater Manchester.

▶ **To discuss this briefing in more detail, and partnership opportunities, please contact Annie Emery, CEO: [annie@mash.org.uk](mailto:annie@mash.org.uk)**

**Notes:** The independent researchers were [Kerry Swain](#), [Julie Wrigley](#) and [Fiona Weir](#). These briefings have been prepared by Fiona Weir and MASH. Throughout these briefings, we define women as anyone identifying as a woman. You can find further information, including sources for all the points in this briefing, in the research report.

**To read the full report including sources please visit [www.mash.org.uk](http://www.mash.org.uk)**