



TRANSNATIONAL AIDS/STD PREVENTION AMONG
MIGRANT PROSTITUTES IN EUROPE / PROJECT

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NETWORK MISSION STATEMENT

At the present time prostitution in Europe should be seen as a transnational phenomenon with common issues and common features. Typical characteristics are: the rapid development of prostitution, the specific forms in which it is organised, the presence of local and mobile sex workers, the extreme mobility of the various groups of migrant sex workers and the presence of local or foreign criminal organisations that organise and control the market. These features do not differ completely between Western, Eastern, Southern and Northern Europe (which came out very clear from the results of our questionnaire).

It is therefore important to introduce a European co-operation model among the various geographic regions and particularly TAMPEP's working techniques, which had already been developed and implemented as a model in other European countries.

TAMPEP's results proved that HIV/STI prevention/intervention among migrant sex workers is feasible, especially when the local structural influences (sanitary, prostitution and alien policies) are being considered. While working simultaneously in all European countries it is necessary to recognise and integrate this aspect in the prevention strategies and in the common issues which public health authorities face across Europe. In the situation of internationalisation of prostitution, the work and co-operation on an European level seems to be the only efficient and logical approach towards migratory prostitution which is characterised by a high national and transnational mobility.

The network has directly contributed to primary prevention through facilitating access of migrant prostitutes working across Europe to appropriate services. The existing experiences and expertise are brought up together and strengthen up through the countries belonging to the Network. The Network facilitates exchange of knowledge and models of good practice among social, health and civil rights projects for sexworkers. The Network has worked in the strict co-operation with relevant international agencies involved in the area of health and human rights for sex workers in order to harmonize the strategies and to give recommendations for new policies.

The direct and active participation of NGO and GO programmes from associated and candidate countries in our project have made it possible to work in the real European dimension. Also, we involved in our Network the countries from CEE, NIS, Central Asia as our counter partners in various activities. The same concerns the so-called "observer countries" Norway and Switzerland who participated in all activities of the Network. We also cooperated with other relevant networks and sex workers' organisations and human rights organisations.

PROJECT TAMPEP

TAMPEP (Transnational AIDS/STI prevention amongst Migrant Prostitutes in Europe Project) is an international networking and intervention project operating in 22 countries in Europe, including 8 countries in Central and Eastern Europe.

The project's aims are:

- to advocate for the human and civil rights of migrant sex workers,
- to facilitate the sharing of knowledge, experience and good practice amongst the members,
- to develop and implement effective strategies of HIV and STI prevention amongst migrant sex workers across Europe.

PROJECT'S ACTIVITIES

The role of TAMPEP project is to organise, co-ordinate, facilitate and carry out the following activities:

- continue to implement HIV/STI prevention among migrant sex workers in Europe based on TAMPEP methodology
- train the members of the network in:
 - basis principles of outreach work
 - setting up of a local network of services
 - developing instruments of social mobilisation
 - techniques of production of information/education materials
 - application of peer education programme
 - techniques of mapping of prostitution scene
 - methods of integration of social support for trafficked women within the outreach activities and health services
- facilitate the participation of CEE countries in the network
- organise lobbying and advocacy activities at the national, regional and international levels
- promote and organise international forums and platforms in order to carry out monitoring activities, formulate recommendations concerning the protection of health and well-being of sex workers, identify the barriers to their access to medical and social services in Europe and co-ordinate these activities with other international organisations and agencies
- carry out the research concerning prostitution and migration in the countries of the network with the help of questionnaire that is updated every six months. The co-ordination centre collects the data, works them out and spreads the results as soon as they are ready.

ACTION POINTS OF TAMPEP PROGRAMME AND NETWORK RESULTS

1. Introduce and implement a common working philosophy of the intervention for migrant sex workers in Europe among the members of the network.

Network result: identification of needs of migrant sex workers and of barriers to the protection of their rights and the employment of multidisciplinary strategies in the interventions of the services belonging to the Network where the needs of women form a central point.

2. Creation of a wide network of social-health care services (GO and NGO) for hard to reach groups of sex workers.

Network result: identification and sensibilisation of medical and social services among the countries belonging to the Network, empowerment of NGOs on the national level, creation of a national networks, proper use of local resources and possibilities, cooperation with medical services providers.

3. Creation of region-wide capacity to implement HIV/STI prevention among migrant sex workers in Europe in the framework of health promotion (within the structures of the 3 Regional Commissions).

Network result: exchange of experience, knowledge and good practices amongst the member countries, identification of common gaps and the review of the situation of prostitution, working together on specific issues, carrying out of common training.

4. Drawing of a detailed updated map of migration movements within the prostitution industry in Europe and assessment of factors that determine the situation of sex workers.

Network result: using a questionnaire as a common instrument for a national mapping in order to get to know what happens in prostitution at the present moment and what are the trends in the prostitution scene, including legislative framework and the analysis of existing health and social systems.

5. Formulating recommendations and advice to the national and international public health authorities concerning health, social and juridical policies in prostitution.

Network result: social mobilisation and lobbying activities on national, regional and international levels.

6. Standardisation and adaptation of already existing information material and manuals produced by TAMPEP for a wide use among member countries.

Network result: spreading of the basic package of TAMPEP's ready to use information material, updating of the basic material, making the material accessible for the members of the network and the services in the countries of the network, production of new material.

TAMPEP's educational material has been distributed among the members of the network who facilitated the further distribution to other organisation in their country. The co-ordination centre gives assistance to the network member countries who wish to adapt TAMPEP materials and who want to make new materials.

7. Diffusion of experience, instruments, training and knowledge for international agencies and organisations dealing with the migrant, mobile and trafficked sex workers.

Network result: participation in strategic meetings of policy makers, giving support and advice to various GOs and NGOs, formulation and spreading of central recommendations to national governments and international agencies. Broad international diffusion of TAMPEP Position Paper and the Network Manifest.

ORGANISATION AND THE STRUCTURE OF THE NETWORK

International Level

The whole network participants have the possibility to exchange experience in a bilateral and multilateral way with the support of the coordination centre of TAMPEP and in common gathering moments like General Meetings, conferences, national seminars and last but not least mutual visits to each other member country. Many members of our Network have bilateral working contacts and cooperation with projects in the mother countries of migrant sex workers. These countries are already involved in our parallel projects.

Regional Level

The member countries of the network of TAMPEP are grouped in 3 Regional Commissions: North, South and Central Europe.

The tasks of these 3 commissions are principally:

1. to observe common problems at region and trans-regional level, to carry out mapping of the prostitution scene and to compare the data
2. to strive to find common models of intervention
3. to organise common implementation activities within the Regional Commissions following the programme of TAMPEP (i.e. training programme for out-reach workers or production of specific material in various languages, etc.)

National Level

The Network members are representatives of the Network in their country.

The tasks of the National Coordinator(s) are as follows:

1. To monitor the situation in their countries
2. To support the creation of the national platform
3. To implement TAMPEP's methodology in their countries and to strive for a better coverage of services for migrant and mobile sex workers
4. To disseminate the experiences and products of TAMPEP in their countries
5. To disseminate information and expertise from the network on the national level
6. To organise one seminar in own country in order to strengthen the development of responses at a national level. The seminar had different forms: practical (for example training for service providers), political (sensibilisation of policy makers) or instrumental (exchange and sharing of experience, knowledge and strategies with local projects).

These three "organisation structure bodies": international, regional and national are not separated from each other, but work as operational instrument for the execution of the programme. In doing so, the Network has become a homogeneous and cohesive and was able to exercise influence in various levels.

NETWORK INFLUENCE AND LOBBYING ACTIVITIES

Through the consolidation and further development of the networks operating at local, national and international levels, TAMPEP offers national and international policy makers the opportunity to understand the complex and rapidly changing environment of international prostitution, and how they can respond most effectively in meeting health and social care needs of sexworkers.

At European level:

Exchange and integrate various intervention strategies carried out in each countries, to inform on the possibility of primary prevention and social support for migrant prostitutes, to observe and compare similar and diverse developments of migrant prostitution, to agree on criteria of joint work with health authorities, to carry out European cooperation work and to structure a joint position in the dialogue with the European Union with other countries in the continents and with international organisms.

At local level:

Involve in each city and/or country the various organisations and public health services that work with migrant prostitutes, to sensitise them to their situation, to coordinate the various areas of work, to carry out joint actions both in direct intervention work and in the elaboration of new political and social proposals.

International networks:

Cooperate with organisations of migrant prostitutes' countries of origin, transit and of destination, in order to exchange information on the cultural and social background, about their migratory mechanisms, about the possible involvement of criminal groups and traffickers as well as the possibilities of protection and aid from their governments.

PREVENTION ACTIVITIES WITH MIGRANT SEX WORKERS

In order to understand and visualise the framework and principles of TAMPEP prevention activities as carried out originally in the four founder countries and the step to the implementation of them in the broad network of 21 countries, we have to recapitulate the main points of our working philosophy and the practices. These basic principles were worked out and adapted to the various realities of the partners in the network. The partner organisations formed a focal point for TAMPEP and they promoted our model, started pilot activities, provided trainings for service providers based on this methodology, introduced new elements (such cultural mediation and peer education) and particularly sensibilised the health care providers and policy makers towards the need to have a holistic approach to the new reality of sex work.

Firstly it was important to agree on common definition of what we mean by health promotion targeted for specific groups and to define the following:

- What do we mean by health
- What are the characteristics of this target group
- What are their needs and expectations
- What role do we assign to that social group in our health project
- What are our objectives
- What is the relationship between our objectives and the social group's needs.

In general, the standpoint that a service provider will take regarding each of these issues will determine the nature of the project, as well as its effectiveness.

Experience has taught us that not every health prevention project considers the subject as such, nor respects the group's specificity, taking into consideration its needs, nor really includes it in the project.

Thus, most projects on HIV/AIDS prevention for migrants and migrant sex-workers are not feasible in practice.

TAMPEP as a European project that combines research and active intervention with migrant sex workers sustains that health is defined taking the subject as the starting point, considering the subject "holistically" and not only as a body or an organ, or as an object of a disease. Health implies an interaction and an adequate balance among psycho-emotional, physical, and social factors.

TAMPEP considers migrant prostitutes as subjects of rights, among them, the right to health, independently of their legal status and understands that the work, social and legal situation of migrant prostitutes have direct consequences in THEIR HEALTH SITUATION.

TAMPEP sustains that the participation of members of the target group in the development of the project is an necessary condition for the effectiveness of its implementation, as well as for a permanent interaction with it.

TAMPEP acknowledges and respects the characteristics and cultural differences of the different migrant groups, which are the basic factor to elaborate a health project within the framework of migration.

TAMPEP understands that a specific Health Project for migrant sex-workers must be based on the acknowledge of their situation as migrants, including them, instead of excluding them from the migratory movement. It must also acknowledge them as migrant sex-workers, regardless of any abolitionist, moralist, or regulatory consideration; including them instead of excluding them from society.

Our first item of analysis in defining a health project is that we are facing a migratory situation. This supposes in itself the experience of culture shock and a great effort to somehow adapt to radical changes in the new social and cultural sphere.

This process frequently generates a great physical as well as psychic tension that has negative consequences for (men and women) migrants' health.

Psychological health has a great significance, added to the risks posed on physical health, due to the difficulties of integration to a NEW CONTEXT – especially when it is aggravated by DISCRIMINATION, and the difficulties in the access to a LEGAL STATUS. This situation becomes even more critical, when faced with the lack of social – cultural sensibility from the officers of health services, and the general difficulty of migrants to have access to them (Wilfried Kamphausen- European Commission – Health General Direction and Consumer's Protection – Seminar "Migration, A Health Risk" – Vienna's Administration – January 31, 2001).

Our second point of analysis is that we are facing sex work and migrant sex workers. This implies that added to the customary marginalisation of migrants in Western European societies, is the stigmatisation as prostitutes.

Sex work, as a result of its characteristics, isolates migrants from any possibility of contact with other social circuits. Added to this is their cultural and linguistic isolation. Such isolation is backed by their lack of legal status, which reinforces their dependence on club owners, pimps, clients, etc.

Migrant sex workers have no chance to gaining access to Health Services. The only existing services available to them - in some European cities - are STI/AIDS control services, which do not respond to their integral health needs.

MIGRATION AND PROSTITUTION

Prostitution in this moment can no longer be viewed as a local or national phenomenon, but as an international one, involving multi-cultural groups and international organisations.

The acceptance of prostitution and the process of internationalisation are important for effective health care and HIV/STI prevention for migrant sex workers. Above all, taking into consideration that, at present, in many areas within the EU and some associated countries, the number of migrant prostitutes is superior to that of local sex workers (see national reports).

This process is not new; it began 20 years ago. However, in spite of the deep transformation of the reality of prostitution in Western Europe, there have been no significant policy changes regarding HIV/AIDS prevention and protection measures for migrant sex workers.

The fact that migrant sex workers are, precisely, **migrant** implies that they are not only affected by marginalisation and stigmatisation, and subject to criminal or prostitution laws, according to the country where they reside, but that they are constantly threatened by the **restrictive migratory laws of Western Europe**.

The paradox is clear and dramatic. On one hand there is the demand for migrant prostitutes. On the other, the sex industry incorporates an increasing number of migrant prostitutes, and simultaneously, not only is there no legal protection for them, but also they are permanently penalised and threatened with expulsion from the country and with permanence prohibition.

The "**illegalisation**" of migrant prostitutes has severe consequences for their living and working conditions:

*In the first place, their " **illegalisation**" leads to:*

- dependency on pimps, club owners, husbands, and other people involved in the sex industry;
- exploitation through underpayment, long working hours, unprotected and unsafe working conditions;
- isolation because of cultural differences, language problems, lack of information on social and legal rights;
- mobility because their temporary visa is expired, because they are taken by their pimps to another place, or because the threat of raids or police control, force them to look for another place of work;
- insecurity and fear, which might cause physical and psychological problems, frequent exposure to dominating and exploiting clients who force them to accept any offer: low prices, unprotected sex, unsafe working places.

Secondly, there is a lack of access to health care services:

- because of their illegal status they not have a valid health insurance, and consequently, they have no access to the health care system and health promotion measures;
- because of their insecure and marginal situation, they have no access to information about their rights and possibilities of getting HIV/AIDS/STI prevention and treatment, even if they are insured. Under those conditions, safe sex practices are not a priority anymore;
- because of the repressive policy towards migrant sex workers, they distrust all kinds of authorities, including health care services. This means that they do not make use of those services;
- because most health care services are not prepared to deal with a multicultural population, migrant sex workers are usually discriminated and misunderstood.

From the above, it might be concluded that migrant sex workers are highly vulnerable and, this vulnerability determines the different levels of damage and risk for their health and for their well-being

One of the examples demonstrating how the vulnerability is connected with health risk is the case that happens often: migrant sex workers without legal papers are deported even if they are sick and under treatment for the STI because it is not recognised as a valid reason to postpone or suspend the deportation process. The continuous fear of deportation limits also the motivation of women to undergo a STI/ HIV test or they are simply not free to leave their working place or they are afraid to move around in the city because they are undocumented persons. This example clearly demonstrates the extent to which repressive policies are an attempt against migrant sex workers, their health and the implementation of STI/AIDS prevention programmes.

TAMPEP carries forward its objective to develop models of health promotion for women and transsexual migrants who work in prostitution in Europe.

The focal point is HIV/STI prevention, but with a view to behavioural change, we are also concerned with the overall health of migrant prostitutes, as well as their social position and working conditions.

How can migrant sex workers attain access to HIV/STI prevention programmes and how can we implement such programmes with them?

OUTREACH WORK/STREET WORK

This is the most effective working technique in initiating and maintaining contact with our target group, which is hard to reach. Street work must be organised according to the characteristics of prostitution in a country or city. The forms of prostitution in which migrant prostitutes most often work are street prostitution, sex clubs, bars, windows and private apartments.

According to our experience, street work must be systematic, frequent and intensive in order to build a relationship of trust with migrant prostitutes. Short-term street work projects have counter-productive effects, which generate false expectations in the target groups, and therefore, distrust.

Street work contributes to having a better overview of each specific situation, promoting safe sex practices, carrying out STI and HIV/AIDS prevention activities in an efficient way, influencing positive behavioural changes, boosting group cohesion and building up migrant sex workers self-confidence and self-esteem.

Street work must not be limited to handing out condoms, lubricating jellies or information material. The outreach worker must try to establish a personal contact with migrant sex workers and guide and support them, in social, legal and psychological issues.

The street work team must carry out regular assessments both of the work itself and of the changes that are being produced in the target group in the field of prostitution. In this sense, street work also has an irreplaceable information source on the reality and the transformations of prostitution.

The direct contact with migrant sex workers and the knowledge of their work world permit the development of grassroots activities tailored to each group and allow us to improve the health and well being of migrant sex workers.

CULTURAL MEDIATORS

TAMPEP's street work is carried out by cultural mediators. According to TAMPEP's definition: "*Cultural mediators are a go-between who know the motivations, the customs and the codes of dominant culture in the host country, as well the conditions, social ethics and the scene in which a minority group finds itself*".

According to our model and experience they should be individuals capable of eliciting trust from the target group, and should be of the same ethnic group or nationality as the sex workers, which enables them to recognise and appreciate the cultural and social mechanisms that influence their behaviour and choices.

Cultural mediators are also educators and trainers, with a mandate to pass on knowledge and experience in the field of STI/AIDS prevention among sex workers.

The function of cultural mediators must not be limited to that of social workers or translator - although they also carry out those sorts of activities.

Cultural mediators are intercultural bridges and, in that sense, contribute to the decoding of cultural codes in order to facilitate their understanding, as well as the interpretation of non-verbal codes

Cultural mediation allows not only a more effective and direct dialogue with the target group, but can and should also function as intermediaries between the migrant and all possible service providers.

Cultural mediators have an important role regarding health care services, through their cultural "translation" of the perspectives and needs of migrant women and the staff.

PEER EDUCATORS

In contrast to cultural mediators, peer educators are members of the target group, and therefore identify completely with that group. They play the role of leaders and articulate the interests of their peers.

Our experience has shown that there are some preconditions for effective peer education. Generally speaking, peer educators must have a base in the community, and must be recognised as leaders, while at the same time representing the project.

We think that the success of peer educators depends more on their identification with the role, and on their acceptance within the community, than it does on their specific position. They should be able to raise awareness among their colleagues, and to organise and conduct workshops on various themes related to prevention and safer sex practices in the field of AIDS/STI.

Peer educators must also distinguish between their community work and the private lives of their fellow sex workers and themselves. They must also be able to apply the concept of peer education to a community that is extremely mobile. Their primary focus is on mutual support among colleagues with a view to sustaining behavioural changes in adopting safer sex.

INFORMATION MATERIAL

Together with street work and the two "professional actors" mentioned above, the development of specific information material is another essential link of our methodology. Much of the information material for migrant sex workers we know of are produced with a Western mentality, without taking into account the diversity and heterogeneity of the migrant women constituting the target group.

In order for an information material to be effective, it must take into account the fact that women from different cultural and ethnic backgrounds need totally different approaches. The production and use of information materials should be considered as a tool for the work and not an end in itself.

The materials should be created and developed together with the target group during workshops, street work and other kinds of regular meetings.

This involvement of sex workers in production of information materials is necessary in order to:

- improve the learning process, as it is carried out for and with migrant sex workers,
- observe and incorporate the specific cultural differences within the group,
- increase awareness on HIV/STI and safer sex practices.

At the same time:

- their production must be very simple and inexpensive, so they can be modified or adapted, whenever necessary;
- they must be recognisable (logo, size, colour, etc.),
- they must be handy and easy to carry.

All of the above is in reference to the direct intervention methodology, as well as the professional actors necessary to carry them out.

Finally, another fundamental area in our strategy and one of the central pillars of TAMPEP's policy is: the constitution and strengthening of networks, given the extreme mobility of migrant prostitutes, the permanent transformation and the transnational and many-sided character of this phenomenon. As above mentioned, these networks have national, regional and international character.

Combining research and intervention

In recent years the role of women in all the different societies has changed enormously, mainly as a result of world-wide economic changes. The amount of women opting for migration has dramatically increased, giving rise to what is called "female labour migration".

In this new international context, prostitution became an important labour option for a growing number of women, men and transgender persons all over the world. Prostitution has also become a very important economic factor for other people involved in prostitution.

In Europe, the impact of the internationalisation of prostitution can be clearly seen in the radical changes within the new structures of the European sex industry.

These changes are mainly characterised by an extensive mobility of and high turnover in migrants working in prostitution. The two things have led to the appearance of new forms of prostitution with a continuously changing of its population.

Therefore, in order to develop specific methods while working with migrant sex workers, there is a need for continuous evaluation of reality, that means, the changes in the current situation and their effects on the behavioural patterns of the target group.

For TAMPEP, a project whose main objective is to develop and implement effective and realistic HIV/AIDS/STD intervention schemes for migrant and mobile sex workers, the permanent exercise of observing, analysing and evaluating is the basis of its methodology.

TAMPEP has been developing different strategies in this field in order to accomplish its aims. This analytical process has enabled TAMPEP to become an active and wide-spread "*observational body*," keeping a constant eye on the situation of migrant and mobile sex workers in Europe.

TAMPEP's observatory role

Activities

Different activities are carried out simultaneously at different levels with the following objectives:

- To observe and collect data concerning the variations and dynamics of the transnational migration flux
- To investigate about the social and legal situation of migrant sex workers
- To investigate the living and working conditions of migrant sex workers and their degree of access to social and health service providers
- To observe the different power relationships developed between the different persons involved in the context, in order to understand what mechanisms of pressure they are exposed to
- To investigate the impact of external factors, such as: policies on migration and prostitution, working conditions and the mechanisms of trafficking, on the behaviour of migrant sex workers.
- To collect data concerning the needs, knowledge, awareness, attitude and behaviour of the target group with regard to safe sex practices and health promotion.

Ways & Means

These activities are undertaken through two main “instruments”: outreach work and networking.

Outreach work

Outreach work is not only fundamental as an instrument to contact a group which is very hard to reach, but it is, if not the main instrument, one of the most important tools for collecting realistic data on the target group.

Therefore, outreach work has to be done continuously. This allows us to follow the changes that occur in the scenario and to recognise the needs and characteristics of the migrant sex worker population.

Regular street work, workshops, training of peer educators and the carrying out of questionnaires are all possible activities of field work.

A good example of one of these activities is a data collection system already developed by TAMPEP. Through this specific registration system carried out during fieldwork, it is possible to get a better overview of the different issues concerning the living and working conditions of migrant sex workers.

Networking

An active network is also a very important tool in understanding reasons and developments of already existent or new situations. Networking is done parallel at local, national and international level. Information is exchanged between NGOs, governmental institutions and international organisms in each country involved, that is to say, in the home countries of the sex workers, the countries of transit and the countries of final destination.

On one hand, networking serves to build up a reliable directory of different services available for migrant sex workers.

On the other hand, it is an instrument that can be used to influence policy makers towards the recognition of prostitution in its international dimension.

It then becomes quite clear that the “*observatory role*” and the different methods of practical intervention complement each other and are implemented simultaneously.

The collection of data provides a formal basis for the development of targeted intervention activities, while data obtained through outreach work will be incorporated in order to extend and deepen our awareness and understanding.

Aims

To act and react

Through the development of a common methodology of evaluation it is possible to compare results, to keep the information updated and to recognise new situations. A good example of such an instrument is the set of TAMPEP questionnaires.

As a result, it allows TAMPEP to draw a quite realistic map of the different situations which, in turn, provides us with the basis for coming up with specific “*reactions*” to specific situations.

These “*reactions*” lead to the continuous development of new strategies in the field of health promotion, through the utilisation of a very flexible and dynamic methodology. This methodology is able to adapt itself accordingly, is able to be compatible with the most different realities and prostitution scenes. And it is able to deal with a constantly changing target group, which has completely different cultural backgrounds and levels of educational.

To advocate

This means that the knowledge of the structure, the movements, the living and working conditions of migrant sex workers also gives us the basis for developing different strategies in the political field.

The information gathered allows us to promote initiatives for the protection of migrant sex workers’ human rights.

It allows us to formulate guidelines for *good practice* regarding public health policies.

It also provides us with the arguments needed to sensitise police makers to improve the social and legal situation of sex workers.

Within the practices of TAMPEP method that had been adapted by all Network members a comprehensive overview of the situation of prostitution in 21 countries of TAMPEP's Network has been produced covering a period from September 2000 till January 2002. The collected data and information are included in the Final Report, TAMPEP5. This first European mapping of the general situation and data collection has been carried out through a questionnaire filled in by all 21 countries participating in TAMPEP network.

As far as the carrying out of this TAMPEP's European research mapping work is concerned, new instruments have been developed. Two versions of the questionnaire have been worked out: one addressed to public medical services and one to NGOs. They collected comprehensive data throughout their own country and diffused them to all organisations that are active in prevention activities towards prostitution and specific services for migrant sex workers. Such mapping provided TAMPEP with a valuable collection of significant and updated data and it was very useful for the partners as country instrument for assessment of services and policies.

The second common instrument of methodology was a database registration. A special registration form records all national contacts realised on the field with migrant prostitutes by outreach projects. This instrument has been made available for outreach projects that use it for the systematic monitoring of activities.

OVERVIEW OF THE RESULTS OF THE ASSESSMENT OF THE PROSTITUTION SCENE IN THE MEMBER COUNTRIES

Prostitution in Europe is in this moment an international phenomenon with common issues occurring in all countries such as: the rapid development and diversity of the sex industry, the presence of local and migrant sex workers, the extreme mobility of sex workers and the presence of criminal gangs that organize and control the sex industry.

Migration & Prostitution

In the majority of the European countries (including CEE countries), female migrant sex workers constitute a significant percentage, in some cases as high as 70%, of the country's sex workers, however, the current legislative frameworks and health and social care services are too narrow and restrictive to respond to this new reality.

The TAMPEP network has registered that the number of new subjects entering prostitution in the Western Europe is constantly increasing as well as the number of nationalities among sex workers. During the first year of the TAMPEP project in 1993-1994, we have recorded the presence of 10 - 12 different nationalities within the EU countries. Last year 40 different nationalities have been recorded though coming from the same geographical areas: Latin America, Central and Eastern Europe, West Africa and Asia. The number of women migrating from Central and Eastern Europe and the Balkans to the EU countries is gradually increasing - in this moment the presence of Eastern European women and from the Balkan region in EU countries is on average 30 - 40% of the total sex workers population. Also, the networks of East European and Balkan women entering prostitution are expanding within these regions. As a result, there is a growing number of new ethnical groups entering prostitution, in the sense of groups of sex workers from various countries of origin or groups with very different starting situation and the context where they operate.

An important change in the prostitution scene results from the enormous migration flows from Central and Eastern Europe towards Western Europe and from the internal migration

flows from Eastern Europe towards Central Europe. The countries of Central Europe play an important role in the prostitution flow in Europe because they are at the same time destination, transit and sending countries. For example many Ukrainian, Russian and Moldavian women come to work in the sex business in Poland, Hungary, Czech Republic and after some time either they move to the EU country or stay in the region of Central Europe. At the same time women from Central Europe leave their country and look for work in EU countries. From our assessment in the CEE countries we concluded that migration movements for the purpose of prostitution within the former Soviet bloc are as high as the ones from these countries towards EU.

That is why it was so important to co-operate closely with prostitution projects in these countries. Therefore TAMPEP emphasise the necessity of structural co-operation between Western and Eastern European Countries and put it in practice.

TAMPEP have observed that there is an increasing mobility of sex workers in Europe and that the patterns of mobility (i.e. travel routes) have become more complex. The same applies to the spread of nationalities in Europe. For example until two - three years ago, Albanian women were to be found only in Italy and Greece. Now, TAMPEP observe that there are less Albanian women in Italy, but in Belgium, France and Germany we see a sudden rise of their number. The similar thing happens to Bulgarian and Romanian women who start arriving in the countries where they had never been signalled before. We register that majority of migrant sex workers worked in at least two - three EU countries and in two - three countries within their geographical region. This pattern of mobility is determined by pimps/traffickers because they place and move the women into and between different countries, because the women are sold to different pimps/traffickers in various countries but also because they escape from their perpetrators. This means that they are exploited by different gangs and pimps in different countries. For example in our programme in Turin, Italy we support 5 Moldavian girls that in the time of 2 years had been sold 5 times. The first time from Moldova to Ukraine, the second time from Ukraine to Hungary, the third time from Hungary to Bosnia and Herzegovina, the fourth time from Bosnia to Albania and the fifth time from Albania to Italy, where they were encountered by our project.

In general the mobility has not only a transnational character but also migrant sex workers move or are moved (by pimps) between various prostitution scenes, cities and forms within one country. On average our teams are able to constantly follow the groups for a period of three to six months. Sometimes this mobility has a cyclic character, sometimes the destination becomes more definitive. The different kinds of mobility are mainly determined by the length of the stay in the first country of arrival, by connections with the prostitution world and by internal networks of fellow-countrywomen or traffickers. Parallely to this TAMPEP observe that this mobility is more and more caused by repressive actions undertaken by local authorities that decide to clean up the prostitution scene in a given place. These actions lead to the creation of new forms of prostitution, territorial spreading and augmentation of vulnerability.

On the other side we observe that the services in Europe are more and more confronted with the following issues: steady augmentation of the number of sex workers, problems of reaching them and the reaction of policy makers and police who choose for repressive policies which means in the first instance the cleaning of the streets.

Regarding changes in legislation

Of course this application of the repressive policies cannot be based only on continuous police operations (in majority of the countries individual prostitution is not a criminal offence), so it is accompanied by the changes in legislation: from abolitionist system towards mixed system of prohibition and regulation. Moreover, this year's ratification of the UN convention of Palermo and of the anti trafficking protocol has obliged the governments to introduce a common anti trafficking article in their national penal codes. This protocol is

very progressive and separates trafficking (as criminal act) from smuggling of persons (as criminal act) and is not against prostitution. But the problem is that the majority of the governments interpret it only as anti-smuggling and/or anti-prostitution instrument and not as a true instrument of the protection of the human rights of the affected women. Moreover, the European Commission defines trafficking in human beings and illegal migration (smuggling in persons) as the same criminal act. This way the specific elements of trafficking for forced prostitution are associated and are defined as a form of illegal migration and not seen as two separate phenomena. The question is: if the objective is to fight against illegal migration, where are the humanitarian aspects of the protection of the rights of the trafficked women as such? And where is the recognition from the side of the EU of this specific form of violence against women?

TAMPEP observed that in various countries the combination of two priorities of policy makers (need of control and reduction of prostitution and combat against criminality) results in the following kind of argumentation: because we have to save the victims, and to combat the trafficking, we must combat prostitution as such and maybe with an alternative to tolerate (under strong control) only these forms of prostitution that the authorities perceive as not public order disturbing. It means that we face a very strange reasoning: all migrant prostitutes are victims and if they are not victims – they are simply illegal aliens. The solution proposed by the state is: either the women have to go out of prostitution (while entering the protection programme for the victims of trafficking), or they should go out of the country. Confronted with this specific reasoning it means that we as an international network concentrate on efforts to advocate within the international agencies and governmental bodies for the protection of the rights and the safety of the women based on the human rights perspective, including the right of self-determination.

Facing these facts, TAMPEP Network calls for promotion of holistic approach to this new reality and advocate for anti-discriminatory policies based on human rights protection. Migrant sex workers should be accorded human and civil rights within society that ensure they are not vulnerable to exploitation and abuse by their clients or controllers of the sex industry and traffickers. In addition they should not be perceived as primarily objects for exclusion and/or abuse by police, health and social care workers or immigration officials. It should be recognised that they are part of a process of internationalisation, as a result of the new world economy, over which they have little if any control. It is, therefore, essential to overcome the marginalisation of migrant sex workers and ensure the provision of effective legal, health and social care services that are mindful of their human rights and go beyond focussing on them solely as objects of sexually transmitted infections. Responding holistically to the needs of migrant sex workers is the most effective instrument against their exploitation and thus against trafficking in women.

The undeniable presence of migrant/mobile sex workers, in Europe requires a transformation in the thinking around women's migration, which is inclusive of migrant sex workers and considers them as part of labour migration of women.

TAMPEP has established that a repressive policy both on prostitution and on illegal immigration deeply undermines the prostitutes' chance to implement a strategy of self-protection (for their health and for their well-being) and self-determination in performing their activities as sex workers that makes possible safer sex practices.

The fact that migrant sex workers are, precisely, migrant implies that they are not only affected by marginalization and stigmatisation, and subject to criminal or prostitution laws, according to the country where they reside, but that they are constantly threatened by the restrictive migratory laws of Western Europe.

LESSONS LEARNT

As a conclusion, we state what are the main principles of TAMPEP Network holistic strategy.

It is not only cultural diversity that accounts for diverse attitudes and behaviour of migrant sex workers. As important is the particular context in which migrant prostitutes are employed, the organisation of prostitution in the host country, and the prostitution and migration policies that affect the social and working conditions of a targeted population. The control that sex workers have over their sexual services and over their health in general is determined by the control they have over their working and living conditions, by their legal status in the prostitution and in a given country, and by their economical, cultural and national backgrounds. There must be a constant collaboration with the sex workers, and a space for them to define their own needs and priorities, to create their own materials and activities, and to make their demands within the ambit of European prostitution.

Those who work with migrant sex workers should ideally be of the same nationality and culture as the migrant sex workers themselves. This allows for effective dialogue between the prostitutes and the service providers. Results, implementation, materials and methods, need to be reviewed periodically to make them as effective as possible.

Leaflet distribution alone is not enough to change behaviour. Constant, intensive fieldwork is needed to establish trust. Individual and group counselling (also regarding social, legal and psychological matters) is necessary to facilitate behavioural changes. Helping migrant sex workers empower themselves in other respects, such as improving their living and working conditions, or securing their legal status, must also be part of any intervention, as this will enable them to control their own lives. Collaboration with health services is vital if information on safer sexual practices is to reach migrant sex workers. TAMPEP's role in this should be focused on mediation between the sex workers and the medical services, cultivating and shaping official backing for co-operative models especially adapted to the circumstances in each country.

Promoting safer sex practices alone is not sufficient. Informing migrant sex workers about the safest condoms, instructing them on their use, and teaching negotiations skills with clients need to be supplemented by direct fieldwork - actual assistance in purchasing condoms, or ensuring that they are supplied with condoms that are adequate. Similarly, informing sex workers of the value of regular preventive medical attention must be complemented with referral to addresses of empathic doctors. In other words, campaigns will have no effect unless they are combined with services.

Given the mobility of migrant sex workers within Europe, peer education is essential. This mobility itself can be advantageous: once peer educators have been trained in the fundamentals of safer sex and health promotion, they can function as 'health messengers' as they move through Europe. Ideally, they should be supported by an international network of projects.

Discrimination against migrant women and the burden of restrictive legislation around migration, exacerbated by the marginalisation of prostitution, excludes many migrant and mobile sex workers from legal, social and health care services and support. TAMPEP Network believes that the needs of migrant sex workers, in relation to health and social

care and human rights, cannot be met within the repressive policy frameworks currently operating within Europe in relation to migration and prostitution.

We must consider migrant sex workers as active social subjects and not simply as objects for exclusion, and in so doing recognize the cultural identity of migrant sex workers and the contribution that they have to make in the development of effective policies and interventions.

Cooperation and networking on local, regional and international levels between governmental services and the NGO services is particularly in this moment indispensable in order to understand the complex and rapidly changing environment of international prostitution, and to respond most effectively in meeting the health and social care needs of migrant sex workers