



TAMPEP 7

FINAL REPORT

European Commission for Health and Consumer Protection / DG SANCO

DC - Public Health and Risk Assessment

C4 - Health Determinants

Agreement Number – 2004320

ACTIVITY REPORT

This is a part of the TAMPEP VII Final Report, which is composed of the following documents:

European Overview of HIV and Sex Work

(Specifically: Bulgaria, Czech Republic, Germany, Lithuania, Poland, Romania and Ukraine)

Gap Analysis of Service Provision to Sex Workers in Europe

TAMPEP VII FINAL REPORT – Activity Report

Skills, Training and Good Practice Tools

TAMPEP International Foundation March 2007

The TAMPEP Network

AUSTRIA

Maria Cristina Boidi
LEFÖ
Kettenbrückengasse 15/4
1050 Wien
tel.: + 43 1 581 1881
fax: + 43 1 581 1882
office@lefoe.at
www.lefoe.at

BULGARIA

Violetta Kandjikova
Health and Social Development Foundation
17, Macedonia Blvd.
Fl.4, App. 21
1606 Sofia
Tel: + 359 2 95 02 815
Fax: + 359 2 95 33 455
prohealth@hesed.bg
www.hesed.bg

CZECH REPUBLIC

Hana Malinová
Rozkoš bez Rizika
Bolzanova 1
11000 Prague
tel: + 420 22 42 34 453
fax: + 420 22 42 36 162
rozkos@volny.cz
www.rozkosbezrizika.cz

DENMARK

Ann Maskell
Danish Center for Research on Social Vulnerability
Suhmsgade 3
1125 København K
tel: + 45 33 170 900
fax: + 45 33 170 901
anm@vfcudsatte.dk
www.vfcudsatte.dk

ESTONIA

Juri Kalikov
Aids-I Tugikeskus
Kopli 32
10412 Tallinn
tel/fax: + 372 64 13 165
aids@tugikeskus.ee

FINLAND

Jaana Kauppinen
Pro-tukipiste
Vilhonkatu 4B 20
00100 Helsinki
tel: + 358 9 7262 877
fax: + 358 9 7231 0250
toimisto@pro-tukipiste.fi
www.pro-tukipiste.fi

FRANCE

Camille Cabral
P.A.S.T.T.
94, rue la Fayette

75010 Paris
tel: + 33 1 53 24 15 40
fax: + 33 1 53 24 15 38
pastt@noos.fr

Floriane Buisson
Autres Regards
3, rue de Bône
13005 Marseille
tel: + 33 49 14 24 290
fax: + 33 49 14 27 523
autres.regards@numericable.fr

GERMANY

Veronica Munk
Amnesty for Women
Grosse Bergstr. 231
22767 Hamburg
tel: + 49 40 38 47 53
fax: + 49 40 38 57 58
info@amnestyforwomen.de
www.amnestyforwomen.de

GREECE

Chrysoula Botsi
ACT UP
Nikitara 8-10
10678 Athens
tel/fax: + 30 210 33 055 00
tatiana@hellasnet.gr
actuogr@in.gr

HUNGARY

Judit Forrai
Sex Educational Foundation
Nagyvárad tér 4
1089 Budapest
tel: + 36 1 209 603 700
fax: + 36 1 325 5311
forjud@net.sote.hu

ITALY

Pia Covre, Carla Corso
Comitato per i Diritti Civili delle Prostitute
Casella Postale 67
Pordenone 33170
tel/fax: + 39 0434 55 18 68
luciole@iol.it
www.luciole.org

LATVIA

Tatjana Kurova
Genders
Caka 91/93
LV - 1011 Riga
tel/fax: + 371 73 15 899
gender@parks.lv
www.gender.lv

LITHUANIA

Svetlana Kulsis
Lithuanian AIDS Centre
Nugaletojun St. 14 D
2016 Vilnius

tel: + 37 05 23 00 125
fax: + 37 05 23 00 123
sveta@aids.lt
www.aids.lt

LUXEMBOURG

Carmen Kronshagen
Dropin / Croix-Rouge
Luxembourgoise
31, rue de Bonnevoie
1260 Luxembourg
tel: + 352 48 90 011
fax: + 352 48 90 0120
dropin@croix-rouge.lu
www.croix-rouge.lu

THE NETHERLANDS

Licia Brussa
TAMPEP International Foundation
Obiplein 4
1094 RB Amsterdam
tel: + 31 20 692 69 12
fax: + 31 20 608 00 83
tampep@xs4all.nl
www.tampep.com

NORWAY

Liv Jessen
The Pro-Sentret
Tollbugt. 24
0157 Oslo
tel: + 47 23 100 200
fax: + 47 22 410 544
prosentret@sby.oslo.kommu
ne.no

POLAND

Tatiana Duklas
TADA
Ul. Malkowskiego 9/2
70-305 Szczecin
tel/fax: + 48 91 433 44 58
info@tada.pl
www.tada.pl

PORTUGAL

Ana Cristina Ismael
M.A.P.S.
Av. Cidade de Hayward
BL C1 / D2 Caves
Vale de Carneiros
8000-073 Faro
tel: + 351 289 88 71 90
fax: + 351 289 88 71 99
faro@mapsida.org
www.mapsida.org

ROMANIA

Marian Ursan
ARAS
Intrarea Mihai Eminescu,5
Sector 2
020079 Bucuresti
tel: + 40 21 210 0771

fax: + 40 21 210 2077
aras@arasnet.ro
www.arasnet.ro

SLOVAKIA

Katarina Jirešová
Odyseus
Ukrajinska 10
83102 Bratislava 3
tel: +421 903 786 706
fax: +421 2 524 94 344
odyseus@ozodyseus.sk
www.odyseus.net

SPAIN

Javier Fernandez Lopez
Cruz Roja Española-Asturias
c / Martinez Vigil 36
33010 Oviedo
tel: + 34 985 20 82 15
fax : + 34 985 22 92 80
jfl@cruzroja.es

SWITZERLAND

Marianne Schweizer
Aspasie
Rue de Monthoux 36
1201 Geneve
tel: + 41 22 732 68 28
fax: + 41 22 731 02 46
aspasie@aspasie.ch
www.aspasie.ch

UKRAINE

Olexandra Sluzhynsa
Regional Foundation Salus
P.O. Box 320
29000 Lviv
tel: + 380 322 34 32 85
fax: + 380 322 72 57 38
salus@mail.lviv.ua

UNITED KINGDOM

RuthMorganThomas
SCOT-PEP
70 Newhaven Road
Edinburgh EH6 5QG
Tel: + 44 131 622 7550
Fax: + 44 131 622 7551
manager@scot-pep.org.uk
www.scot-pep.org.uk

General Coordination Centre

Licia Brussa
TAMPEP International Foundation
Obiplein 4
1094 RB Amsterdam
The Netherlands
Tel: + 31 20 692 69 12
Fax: + 31 20 608 00 83
tampep@xs4all.nl
www.tampep.com

Editor: Licia Brussa
© 2007 TAMPEP
International Foundation

Table of Contents

SECTION A

Summary of the Project

Description of the Work

Work package n° 1

European Coordination

Work package n° 2, 3, 4, and 5

Regional Coordination, national coordination, international and regional exchanges

Work package n° 6, 7, 8 and 9

National mappings, legislation on prostitution, and migration from the assigned countries

Work package n° 10, 11, 12 and 13

Outreach work, special target group, development of new materials and methods, spreading of good practice methods

Work package n° 14

Dissemination of the results

SECTION B

1. Manpower for the execution of the activities

2. Partners involved

3. Countries involved

4. Achievement of the objectives

Annex 1

Summary Work process and Activities summary

Annex 2

Example of a Regional and National reports

- Regional Final Report North Region p.154
- Prostitution Mapping Final Report North Region p.161
- Needs Assessment North Region p.172
- Prostitution Mapping Final Report South Region p.175
- Regional Final Report East Region p.184
- National Final Report United Kingdom p.191
- National Final Report Austria p. 210
- National Final Report Italy p. 226
- National Final Report Germany p. 237
- National Events and Networking Italy Report p. 253

Summary of the Project

Abstract

TAMPEP has been active as a European Network since 1993. It has developed and promoted multidisciplinary models of interventions for health and social care for vulnerable (migrant) sex workers and trafficked women in Europe. The aim of the Network is to promote a comprehensive approach to the related issues of sex work, trafficking in women and HIV/STI prevention, as well as to develop synergy among NGOs and international and national agencies active in this field.

TAMPEP VII expanded the network to 24 countries, integrating HIV/STI prevention projects from eight new EU member countries and two associated countries. The consolidation and expansion of this pan-European cooperation is essential in responding effectively to the rapidly changing European prostitution scene which impacts on the health and well being of vulnerable migrant sex workers and trafficked women. Responding to issues concerning prostitution is considered a high priority by policy makers and has been mainstreamed in EU policies and programmes.

General objectives

The overall purpose of TAMPEP VII was to further develop the models of good practice and current tools to support the planning and implementation of coordinated and comprehensive health promotion and social care services for migrant sex workers and trafficked women in all EU countries, through on-going pan-European cooperation and through expanding the Network by including partners from new EU member countries.

The general objectives were:

1. To consolidate and further develop HIV/STI prevention, health and social promotion interventions for migrant and mobile sex workers in Europe.
2. To promote human rights and equality in public health policies for migrant/mobile sex workers and trafficked women.
3. To facilitate the sharing of knowledge, experience and good practices among service providers and community based organisations on pan-European level.
4. To consolidate and expand the network of 24 countries in Europe, and to strengthen their capacity for effective interventions within a sub-regional cooperation model.

Specific objectives

1. To continue the development and implementation of realistic, comprehensive and innovative HIV/STI intervention models (multilingual information material,

guidelines for outreach projects, multidisciplinary services, peer education and cultural mediation) for migrant and mobile sex workers.

2. To assess the situation in prostitution through gathering qualitative and quantitative data within the network of 24 countries as a European observatory.
3. To educate and sensitise social and medical service providers across Europe in relation to migrant sex worker's and trafficked women's need to access health and social care services based on human rights principles.
4. To consolidate and expand the networks of organisations working in this field across the EU and in associated countries in order to promote risk reduction measures for this high risk and vulnerable population and to seek to integrate recommendations within national and European policies.

Notwithstanding, the fact that the above were goals of the TAMPEP VII project, it must be emphasized that their underlying common thread, i.e. the equitable access to support and services for migrant sex workers, and developing adequate responses to migrant sex workers specific needs, are the founding principles of the TAMPEP Foundation. TAMPEP works on a permanent basis, perceiving our objectives as continuous and executing them through an enduring work process, not solely on project base.

Description of the methods

The stages of the methodology combine national and European mapping of prostitution, the assessment of changes of populations and their situations, actual interventions, a continuous evaluation and the adjustment of interventions in relation to the environmental changes, the adaptation of models of intervention and tools to specific groups and situations in various member countries, the implementation and assessment of the effects of adequate strategies within the whole European context with common indicators. The activities are supported by guidelines/training packages and best practices tools monitored and evaluated by the Coordination Centre and the Steering Committee.

Four Regional Commissions monitor, compare and analyse the data supplied by the National Coordinators concerning prostitution and the different factors which influence the effects of prevention activities and policies within the regions, with particular attention to the sub-regions.

All work packages and deliverables as defined in the contract for this project have been translated into specific assignments, work plans and timetables. All deadlines and products that were agreed upon in the TAMPEP VII contract have been successfully fulfilled, with the exception of the European distribution of the CD. Due to delayed finalising of the production, the distributing took place later than scheduled. This affected also the evaluation process of the CD users. TAMPEP therefore adapted the evaluation procedure accordingly, providing the results of the evaluation based on the reduced period during which we were able to perform this evaluation and based on the limited feedback we did receive during the TAMPEP VII period.

Every country/network member produces a total of seven country reports which correspond to the key activities. All reports are complete with lists of resources and remits of the organisations involved (in total the TAMPEP Network members have reached over 1000 entities). These National Reports are further analysed into seven Regional Reports, with comparison of trends and results. In the Annex we present

examples of summary Final Regional Reports. Additionally as example four National Final Reports can be found in the Annex and one specific activity report, a Final Report on National Events and Networking. We have selected to annex mostly National Final Reports and Regional Final Reports rather than the very numerous specific activity reports of a country (e.g. Prostitution Mapping) as the National Final Reports already contain a summary of the seven key activities of the countries. These annexed documents aim to provide insight into the methodological tools and approach of TAMPEP VII.

As TAMPEP is a network of 24 countries and each produces multiple reports, plus their Regional Coordination Centre elaborate further multiple Regional Reports, TAMPEP has in effect hundreds of specific reports. Any of these is available upon request, yet since annexing them all would turn the current Report into a very extensive document, we have decided to present only examples of reports.

Introduction

This TAMPEP VII Final Report presents an overview of the activities of the Network in the period 2005-2006. The present report has the character of a biannual *Activity Report*, which describes the achievements set out in the contract as TAMPEP VII objectives. The overview is based on the information gathered by the National Coordinators of each member country. Questionnaires were used to collect the necessary data. The four Regional Coordinators each oversaw the mappings and activities of each regional group, serving as a base for this European report.

The report aims at giving broad insight into the project results focusing primarily on presenting key events and accomplishments and making reference to three more analytical and thematic reports: *European Overview of HIV and Sex Work and 7 Case Studies of Country Reports*, *Gaps Analysis in Service Provision* and *Skills, Training and Good Practice Tools*, which cover more in-depth the results and data of the European prostitution mapping, trends per region, a comprehensive description of the situation and service efforts in the seven chosen countries of the Network (as example of National Reports).

Moreover, the results and analysis of the European service mapping in the cross-border perspective and in group of countries perspective with analysis of gaps and barriers to access to social and health care services. The TAMPEP resources and good practices developed these years are assessed and presented in the *Skills, Training and Good Practice Tools*. The four Reports together, along with the multiple annexes of Regional, National, Need Assessment Reports (and other) form the complete work of TAMPEP VII project.

The *Activity Report* follows the structure of the contract, where Section A illustrates the results and activities of the network per regional work package and per deliverable. The aim has been to provide an understandable and concise overview of our work over the past two years. Section B offers more detailed information on our methods, research tools as well as technical aspects of execution of the projects such as: manpower, functional distribution of work, international distribution of work, how achieved results have been made available in each country where activities had been conducted, and finally an evaluation of the results achieved, as well as monitoring, assessment and evidence on which the conclusions were based. Lastly, as all questionnaires, guidelines and reporting forms were attached to the Interim, we are not enclosing these in the Final, but all are available upon request.

Description of the Work

Work package n° 1

European Coordination

D 1.1

Coordination at European level

TAMPEP consists of 23 organisations in 22 countries across Europe, with three guest partners in Belgium, Switzerland and the Ukraine making a total of 26 partners. The most important feature of an organisation this extensive is active and efficient communication and exchange of knowledge and practices. We therefore put much emphasis on communication between all participating organisations. The Coordination Centre encourages multilateral contacts by organizing activities such as the General Meetings and facilitating conferences, national seminars and bilateral visits, etc. This strategy promotes the mutual exchange of experience and expertise for many beneficiaries.

The European Coordination Centre has a facilitating role in planning, organising and overseeing activities across Europe related to the Network's three main areas: research, outreach and advocacy.

The preparation of the project prior to its start has been at least as important as overseeing its implementation. The development of TAMPEP VII's general methodology and tools for research and outreach work was led by the General Coordination Centre with the support of the Steering Committee. The main aim was to prepare the tools in such a way that the data from all countries would be comparable. The tools and methodological guidelines were attached to the Interim, and are not enclosed to the present Final Report, but are all available upon request.

The Coordination Centre takes the lead in preparing position papers such as the one on 'Trafficking in Women'. These are deemed necessary for advocacy purposes, exchanging ideas and clarifying TAMPEP's position within the network and with others in the field.

The development of new and review of existing TAMPEP leaflets and other materials for outreach work, followed by its translation, publication and dissemination has been coordinated by the European Coordination Centre with a view to build a common framework for all TAMPEP activities and make accessible our expertise to service providers in the field.

European coordination of the creation of the new CD

A very important part of the European coordination within the TAMPEP VII project was the coordination of the preparation of the new TAMPEP CD-ROM. Based on extensive evaluation, from numerous respondents; of the first CD we knew the

creation of an enhanced tool was necessary. Not only did the content of the information material require a revision and update, but also we wanted to include new languages and there were various technical aspects we wanted to address and improve in the new product.

The preparation of the coordination of this CD volume II project was a very long and intense process, which involved the cooperation of all our partners and seeking the expertise knowledge of many professionals beyond our Network. The number of languages and cultural aspects which needed to be considered while drafting the work-plan and during the preparing and organising assignments of all involved and finally during the actual carrying out of the tasks was a very arduous and complex project. The efforts were nevertheless very rewarding, as the new CD turned out to be a very practical tool. The most important goal for us was to achieve the principle of creating materials which can be used in all European countries. We believe that we have succeeded although the growing number of nationalities of sex workers in Europe implies that perhaps further translations into new languages will be necessary.

Work package 10 to 13 give more details on the Regions' experience of this process; whereas relevant chapters in work package 14 give more insight into the European coordination efforts and achievements.

D1.2

General Meeting with national coordinators of the network

The first General Meeting (GM) of the TAMPEP VII programme was held from 25 to 27 April 2005 in Budapest, Hungary. Its main aims were to instruct all national coordinators on how to use the new research and activity tools, explain the new organisational structure of the programme and clear up any other queries member countries may still have had. Each National Coordinator gave the plenary an update on the situation and changes in their country thereby sharing the experience, good practices and knowledge among all participating organisations and providing the network with a pan-European overview of sex work today, in order to determine the common factors and trends concerning migrant sex workers and mobility. One specific issue here was evaluating the consequences of the enlargement of the EU. It was also the first opportunity for the Regional Commissions to meet and discuss their group tasks.

The second GM took place on September 25-27, 2006 in Turin, Italy. The Coordination Centre's preparation work for this meeting consisted in 1) overseeing that the partners prepare results of their work within TAMPEP VII in poster form, 2) that they provide updated information for the II Newsletter, and 3) monitoring the presentations of the partners.

The aim of this GM was to present the hitherto key results and trends of European prostitution mapping and of the national situations. There was a discussion held on the political and legislative changes and the impact of these on migration, prostitution and service provision. The second day was used for Regional Commission Meetings where prostitution mapping, service mapping, need assessments, common regional trends and the CD-ROM content and distribution were discussed in regional settings.

The last day hosted a Round Table Discussion on sex work, human rights and policy development. The participants of this discussion were representatives of civil society, governmental and international agencies (Member of European Parliament, Region of Turin Council, United Nations Population Fund (UNFPA), ILO (International Labour Organisation), United Nations Development Fund for Women (Unifem), TAMPEP Network members, *et al.*) The purpose of the round table was to bring the NGO perspective to the policy makers and especially to present the policy and cooperation gaps which need to be addressed in order to achieve proper health and well-being standards. The full agenda and report of the General Meetings is available on request.

D 1.3

Steering Committee Meeting

The Steering Committee (SC) has convened six times in the last two years. The first meeting was held from 6 to 9 February 2005 in Amsterdam and had as its aim to finalize the new working tools and guidelines, determine the agenda for the General Meeting and develop a detailed working plan for TAMPEP VII. This work plan included an overview of the work packages, its output indicators and deliverables, responsibilities and tasks of the various partners and groups and a timetable for their implementation.

The second SC meeting took place just before the GM, i.e. on 23 to 24 April, 2005 in Budapest. Here the preparatory work for the GM was finalized, with a special emphasis on the work for the regional groups.

On 29 to 30 September, 2005 the third SC meeting was held in Vienna. Here the review of the programme and the finalization and SC authorization of the new information materials were central issues on the agenda.

The fourth SC met in Amsterdam from 14 to 17 March 2006. The aim of this SC was the overview of the level of completion of the Interim Report as well as the report on the production of new materials and the CD-ROM.

The fifth SC took place 2 days prior to the GM in Turin, with main focus of finalising the preparation for the GM and on evaluating the draft results of TAMPEP VII. Additionally, there was a discussion about which data needed to be reviewed by the Regional Commissions.

Between November 30 and December 3 2006, the sixth SC was held in Amsterdam with the purpose of a final evaluation of the TAMPEP VII Network activities and of discussing the future function of the Network. Lastly three specific SC working group meetings took place on 4-7 April (preparation of the TAMPEP VIII application), 15-19 October and December 14-17 2006 in Amsterdam, with the objective of reviewing and preparing the structure of the three Final Reports: the European Overview, Prostitution Mapping and Service Mapping.

Work package n° 2

Regional Coordination NORTH

National coordinations, international and regional exchanges

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

In TAMPEP VII a greater emphasis is placed on the Regional Commissions (RC). Each regional group works together in preparing, implementing, comparing and evaluating the work packages. The Regional Coordinators facilitate this process by organising intra-group communication and several meetings. In Section B of this Report more detailed description of the RCs tasks is provided. The present Work package gives a summarised overview of the most important Regional results of the TAMPEP VII project.

D2.1

Coordination of the activities at regional level and delivery of the report of regional activities

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

1. The **first Regional Commission Meeting** (RCM) of the NORTH Commission took place during the first TAMPEP General Meeting in **Budapest**, Hungary, in April 2005. This opportunity was used to look into the legislation regarding migration, prostitution and trafficking in women in those countries as well as into the practical work developed for (migrant) sex workers by each national organisation. The aim of this first exchange was to approach those different issues from a regional, national, and cross border perspective. This provided a better overview of similarities and differences existing in the North Region, but, mainly, the opportunities for possible exchange in terms of experience among the eight partners.

During the first RCM, the reports and discussions made it possible to plan the different tasks the group had to accomplish, to fix the deadlines within the given structure, and to clarify the subjects related to the various questionnaires. The questionnaires were a very important point to discuss at that moment as they were the source, from which the partners could gain information regarding the actual living and working conditions of national and migrant sex workers in each country. Different national inquiries (Prostitution Mapping, Migration Patterns, Needs Assessment of Asian Sex Workers, Services Available for Sex Workers, Materials, etc.) would allow a broader national and regional picture—the reason for having a common understanding and implementation structure within the group.

The exchange of information during the first RCM was very important for the Regional Coordination, specifically because it highlighted the need to recognise from the beginning the differences in the Region, and the necessity to take these diversities into consideration during the process of gathering information, of evaluation, and finally, of comparison of results.

An example of existing differences among the countries of the North Region was, for instance, the variation in number of the organisations dealing with, and supporting

sex workers in various countries. While the Baltic countries still have a very limited group of organisations dealing with prostitution, other countries of the North Region have a long tradition of GOs and NGOs networks working with and for national and migrant sex workers. One of the consequences of this difference would be the amount of responses each different questionnaire would get.

The North Commission had the task to deepen the analysis regarding the living and working conditions of **Asian** sex workers, one of the largest groups among migrant sex workers in this region. This item brought up, from the beginning, another very clear difference among the countries in this region: while in Germany, Finland and Denmark Asian sex workers (coming mainly from Thailand) are the second biggest group among migrant sex workers in the Baltic countries they are not at all present.

Regarding the **migration flow** in the region, the differences were also clear: the Baltic countries, despite the EU enlargement, are still mainly origin countries, Scandinavian countries and the UK are mainly destination countries, while Germany became a very important transit country.

This first common meeting was very successful because of the active contribution of all partners. The Regional Coordination was therefore able to engage in an effective process, which allowed organizing and fulfilling the different tasks in order to get the expected results. The communication between the partners and the regional coordination during projects period was constant and effective.

2. The second RCM of the NORTH Commission took place in **Amsterdam**, the Netherlands, in March 2006. The agenda of the meeting included the following issues:

- **Technical issues**: the Final Report structure, timetable and deadlines, clarifications regarding financial questions. The group also discussed the different strategies that would still be possible to undertake, in order to get some follow up for the questionnaires.
- **Evaluation of the questionnaires**: examples of negative and positive experiences during the process of distribution, follow up and collection of information for the questionnaires lead to two main conclusions:
 - the importance of a network on local, regional and/or national level, when gathering reliable information, and
 - the importance of developing different strategies, adapted to each different reality, when asking for clarification and/or more detailed information.

Examples of solutions to overcome difficulties:

Latvia sent out 10 Prostitution Mapping questionnaires and got only 1 back. They then decided to change strategies and involved university students from the Social Science Faculty to do personal interviews with different organisations. This worked out very well and they got the replies they needed.

Norway sent out 41 questionnaires and got only 12 back in the first round. Their strategy was then to phone different organisations and do personal interviews.

UK has a very well organised network of sex workers projects. However, from the 72 questionnaires sent out, only 4 returned. This is explained by the fact that the majority of organisations work with street sex workers, where very few migrants are involved. They decided to follow the Norwegian example and do interviews by phone, after the Regional Commission Meeting.

Germany is an example of very good networking among the different organisations: 81 questionnaires were sent out, 52 came back, from 26 Health Care Services and 26 NGOs.

It was a very important moment to exchange good practices experiences and to understand the different realities of the eight countries and the consequences of those differences when undertaking a research activity.

- **Activity plan for 2006**: consequences of policy changes, exchange visits, events.
The most significant change regarding policy on sex work during 2005-2006 in the North Region was the introduction of a new law in Finland, the so called "*Finnish Model*", which criminalises the clients of sex workers who are victims of Trafficking in Women. This model is a different version of the so called "*Swedish Model*" which criminalises the purchase of sexual services entirely. The new "*Finnish Model*" was very much discussed because it will probably be adopted, in different variations, by almost all seven other countries of the region.
The exchange visits were defined among the partners of those countries which still did not do any. Those who already had participated exposed their experiences. Due to the great amount of Asian, mainly Thai sex workers, in this region, a special workshop for this target group was planned to be carried out at the German partner, which took place in September 2006. Denmark, Finland, UK and Germany participated in this special workshop.
Lithuania, Denmark and Norway planned to organise events such as seminar and workshops which would include issues of sex work, trafficking in women, cultural mediation and peer education. The other partners had active participation in events organised by members of their national networks.
- **Geo-political overview**: the main points of concern regarding differences and similarities during 2005-2006, within the North Region were:

	Similarities	Differences
Prostitution Scene	In all eight countries, sex work is done mainly indoors.	<u>Latvia</u> : decrease of street prostitution. <u>Norway</u> and <u>Denmark</u> : increase of street prostitution. In both countries: a significant increase of Nigerian sex workers on the streets.
Legislation	<u>Estonia</u> , <u>Latvia</u> , and <u>Germany</u> will probably adapt a variation of the " <i>Finnish Model</i> ".	<u>Lithuania</u> already criminalises sex workers and their clients since 2005. <u>Norway</u> and <u>Denmark</u> are in discussions about adopting the " <i>Swedish Model</i> " or not. <u>UK</u> has a "Zero tolerance" policy to prostitution, where brothels are illegal. In Scotland clients of streets sex workers are criminalised.
EU Enlargement	<u>Estonia</u> , <u>Latvia</u> and <u>Lithuania</u> : no changes. <u>Mobility</u> increased significantly in all <u>eight countries</u> of the region due to the travelling facilities.	<u>Norway</u> , <u>Denmark</u> , <u>Germany</u> , <u>Finland</u> and <u>UK</u> : increase of sex workers from the Baltic countries and Poland.
Services	In <u>Estonia</u> , <u>Latvia</u> , <u>Lithuania</u> , and <u>Finland</u> there is only one specialised service provider for sex workers in each country. In all <u>eight countries</u> , non-insured persons have to pay for medical	<u>Norway</u> has specialised services in three cities. <u>Denmark</u> created a Programme for Sex Workers, with a very large range of offers, but only accessible for nationals or migrants with a legal status. <u>Germany</u> and the <u>UK</u> have a very large network

	services. The exceptions are the specialised services, which however have a limited offer.	of health and social care services for sex workers (GOs + NGOs)
Nationalities	In <u>Estonia, Latvia and Lithuania</u> the majority of sex workers are <u>nationals</u> .	In <u>Denmark, Finland, Germany, Norway</u> and the <u>UK</u> , the majority of sex workers are <u>migrants</u> .

The second RCM was very important to deepen the issues regarding the different legal, social and medical frameworks in which sex work is develop in the North Region countries. One important result of the meeting was the planning of mutual bi-lateral visit in order to increase and improve cross-boarder activities, and a more effective exchange of good practice experiences.

3. The **third RCM** of the NORTH Commission took place in **Turin**, Italy, in September 2006, during the second TAMPEP General Meeting. Main task of the meeting was to clarify final questions regarding the National Final Reports and the Regional Final Reports. New deadlines were established in order to accomplish the different tasks. A last evaluation was done in order to update the Regional Overview and the correspondent Regional Reports.

D2.2

Coordination of the activities on national levels and delivery of the report of the national activities

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

The National Coordinators (NC) are responsible for gathering information about the prostitution scene in their country, passing on their reports to their Regional Commission and its Coordinator and implementing the work packages in their country. In Section B of this Report more detailed description of the NCs tasks is provided. The following chapter gives an overview of the most important national results of the TAMPEP VII project.

Of the eight partners of the NORTH Commission, only two – Estonia and Latvia – were newcomers in the TAMPEP Network. Those two countries have already had a long experience with the topic of prostitution and migration in their countries. There was, thus, no difficulty for the group to accomplish and implement the different tasks they were expected to do within their own countries.

The process of distributing the first and biggest questionnaire, the *Prostitution Mapping*, was done, as foreseen in summer 2005. The translation of the questionnaires was organized by each of the partner countries, when necessary. Apart from the UK, also Norway and Denmark distributed them also in English.

The questionnaires were distributed through the different networks existent in each country. Targeted were GOs (health care services and the police), NGOs dealing with sex workers, migrant sex workers, migrant women, men, and transgender, and academics. The result was a first overview of the legal, social, and labour situation of sex workers in each country.

The similar questionnaires and the templates for the reports facilitated and made the task of collating and evaluating the data possible, but mainly, their comparison on the regional level.

The national networks served different purposes: as source of information regarding the different questionnaires (*Prostitution Mapping, Needs Assessment, Migration Patterns, Services*), as target for implementing, distributing, and the diffusion of TAMPEP methodology and information material, as participants of trainings and events as well as target for advocacy activities.

National events

Each country carried out or organised training and/or events on local and/or national level, and/or participated on local and/or national level in events organised in cooperation with other institutions. The issues of the different events were related to either one or more of the following issues: migration, sex work, trafficking in women, health, and sensitisation of social and medical services providers on sex workers' matters, peer education, outreach work, advocacy, and human rights.

Most partners of the North Region organised an event on national level, and all of them participated in a number of regional and national events to promote the needs of migrant sex workers, TAMPEP resources and methodology.

Denmark organised two national seminars:

- *Defining Trafficking in Women and Contacting Sex Workers in Escort*. The aim of the seminar, held in April 2006, was to define Trafficking in Women within a migration and sex work context. The second issue was due to an increase of sex workers working as escort, and the need to develop methods and new strategies to contact them.

- *Thai Women: Mobility, Cultural Traditions and their Involvement in Sex Work in Denmark*. The aim of this seminar, held in November 2006, was to deepen the knowledge about the living and working conditions of Thai sex workers and to improve services offered to them.

Estonia organised in May 2006, in Tallinn, the seminar "*The Legal Situation of Sex Work in Estonia: Challenges for Sex Workers and Health Service Providers in the Enlarged Europe*". The seminar helped to map the present situation of sex work in Estonia and facilitated the networking of service providers.

Finland organised a national *Peer Education* training in April 2005 in cooperation with the TAMPEP Coordination Centre. Apart from different Finnish service providers, organisations from Russia and Estonia attended the training as well. The aim of the training was to encourage service providers to start peer work projects and to establish a network among those who work with hard to reach, very mobile and/or isolated groups. Another aim was to encourage the offer of low threshold services based on harm reduction approach.

Germany made, among other, the following presentations at different conferences, seminars and exhibitions related to sex work, migration and health in: *Umdenken Foundation* (November 2005), *Stiftung Leben und Umwelt* (March 2006) the *Hamburg Museum for Labour* during its exhibition "Sex Work" (March 2006), the *International Soroptimist Group* (April 2006), the *German Women's Ring* (April 2006), for the different local political parties (June 2006), the Research Centre Soffik (January 2005), the WHO/Work Health Organisation Conference on HIV/AIDS

(October 2005), the Women's Group from Niedersachsen, and the 36th (September 2005) 37th German Prostitutes' Congress (August 2006).

Latvia hosted a national Seminar in May 2005 called "*New view on the Problem of Human Trafficking*". The main aim of the seminar was to present the research results about immigration process in Latvia, to share information and best practices, and to build up networks among NGOs and GOs in the country.

Lithuania: The TAMPEP project was presented during the seminar "*Methods and Results of Social, Medical, and Psychological Services for Women at Risk*", organised by the *Association of HIV/AIDS Affected Women and their Intimates*, in June 2005 in Vilnius. The Latvian partner was also present.

Norway hosted a national event in November 2005 in collaboration with TAMPEP-Onlus (Turin, Italy) on migration patterns of African sex workers coming from Italy into Norway, which included peer support and education topics. After this event there was much more awareness on the issue regarding sex workers and willingness to give legal rights to victims of trafficking.

UK: in 2006, the UKNSWP organised a national conference '*Working Within and Challenging: Critical Reflections on the National Strategies*' which included both plenary, roundtable discussions and workshops highlighting the needs of migrant sex workers. The TAMPEP-UK Coordinator was present to promote the needs of migrant sex workers, TAMPEP resources and methodology.

D2.3

Lessons learned report of the exchange visits

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

The exchange visits were a very useful opportunity to exchange methods and experiences. The first and the second RCM served to highlight the different interests of each country and to make up a work plan and timetable for the bilateral visits.

Denmark visited on 3 to 7 September 2006 the partner organisation **in Germany**, *Amnesty for Women*, during the special workshop on Thai sex workers. The activities included discussions, exchange of experiences and outreach work.

Interests: how local and national policies and ideologies influence and reflect on the approach to prostitution, and indoor outreach work strategies, mainly for Thai sex workers.

Lessons learned: it was interesting and useful to compare and to exchange experiences about the work other organisations are developing in Germany, UK and Finland, and compare them to the Danish reality. It was also very useful to better understand the cultural and social backgrounds characteristics for Thai sex workers, in order to improve the services offered to this group, mainly regarding the importance of employing cultural mediators.

Estonia visited in May 2006 the partner organisations **in Norway**, *Pro Sentret* and in July 2006 the **Czech Republic**, *Roskozc bez Rizika*. The activities included meetings with different organisations and outreach work.

Interests: to get an overview regarding the living and working conditions of sex workers from the Baltic States in those countries, to exchange experiences concerning outreach work, to meet with sex workers from the Baltic countries in

order to inform them about the services in Estonia. Other goals: to have a clearer and detailed picture about the range of services for sex workers in Norway and Czech Republic, which sex workers from the Baltic countries can visit when they go to work abroad, outreach work strategies, and different structures of prostitution.

Lessons learned: The exchange visits were very important to get to know and better understand the situation of Estonian sex workers abroad.

In Oslo, with the help of the cultural mediator Irina Polyakova, it was possible to do outreach work on the streets and talk to sex workers from Baltic States, particularly from Estonia, and to spend several hours in the drop-in centre, which gave a very clear picture about their needs while they are in Norway, as well as their needs when returning to Estonia.

The visits proved once more the necessity of services to work with cultural mediators, in order to be prepared to deal with a migrant population.

Finland visited the partner organisation in **Germany**, *Amnesty for Women*, in September 2006 during the special workshop on Thai sex workers. The activities included discussions, exchange of experiences and outreach work.

Interests: The aim of the visit was to get ideas and support, to start outreach and cultural mediation among Thai sex workers working in massage parlours.

Lessons learned: Germany, Denmark and UK exchanged information about the Thai sex workers situation in each of the countries, the use of cultural mediation by GOs and NGOs, and different outreach work strategies. It was possible to learn practical tips which *Pro-tukipiste* can apply in their activities. It was interesting to see that also municipal or governmental organisations can go out of their offices or clinics, do outreach work and use cultural mediators.

Germany visited **Estonia** (*Aids-I Tugikeskus*), **Latvia** (*Genders*), **Lithuania** (*Lithuanian AIDS Centre*), (all Baltic countries between 13 to 21 September 2005), **Portugal** (Maps) between 10 to 13 May 2006 and **Luxembourg** (Croix-Rouge) between 10 and 11 October 2005.

Germany organised a special workshop on Thai sex workers which was attended by the partners from Denmark, Finland and UK.

The partners from **Slovakia** (twice: 14 to 18 March 2005 and 26 to 29 June 2006) and the one from **Italy** (3 and 4 December 2005) visited **Germany** with the interest of exchanging about outreach strategies regarding indoor prostitution.

Interests: to get to know the Baltic social and prostitution context due to the increase of sex workers from those three countries in Germany; to exchange experience regarding outdoor outreach strategies in Portugal; and to better observe the situation of migrant sex workers in Luxembourg.

Lessons learned: it was clearer to understand the reasons and motivations why women from the Baltic States come to Germany, and their migration routes. It was therefore possible to improve and develop more effective strategies to work with this group in Hamburg. Through better knowledge of their background it was important to intensify the collaboration with the partners in Riga, Tallinn and Vilnius, in order to develop effective methods of counselling, new materials and other activities done with and for sex workers of the Baltic countries.

Lithuania visited on 28 - 30 September 2005 the partner organisation in **Germany**, *Amnesty for Women*, and the one in **Denmark**, the Danish Centre for Research on Social Vulnerability on 7 to 9 December 2006.

Interests: to exchange experience about strategies for indoor outreach work (because of an increase in indoor prostitution), as well as to observe the situation of Lithuanian sex workers in Germany. To share experiences, programmes and approaches regarding services for sex workers since both organisations, the Lithuanian and the Danish one, are GOs.

Lessons learned: it was especially interesting and useful to observe and learn about outreach work strategies in apartments and brothels, because there is no similar work done in Lithuania for indoor sex work. Following this visit, an NGO in Vilnius got funding to do indoor outreach work for sex workers. Regarding the visit to Denmark, it was important to learn and to exchange about how to gain sex workers' confidence when being a GO, how to avoid misunderstandings with the target group and the authorities, and how service provision should be coordinated between GOs and NGOs.

Norway visited the partner organisation in **Estonia**, *Aids-I Tugikeskus*, 16 to 18 July 2006.

Interests: to get to know and to have a better understanding of the sex work scene in Tallinn as well as the Estonian social context due to the increase of sex workers from this country in Norway.

Lessons learned: networking and study visits often generate new co-operations. The Norwegian partner, *Pro-Sentret*, will probably take part in a project for training services in Narva and Ivangorod, conducted by the National Institute for Health Development. It was important to know about the organisation *Living for Tomorrow*, an established service in Estonia that can be useful when repatriating victims of trafficking. It was also important to see that there are new services being created for sex workers, and Norway expects to co-operate more with those in the years to come, by study-visits, exchange of information and methodology, etc.

UK visited on 3 - 7 September 2006 the partner organisation in **Germany**, *Amnesty for Women*, during the special workshop on Thai sex workers. The activities included discussions, exchange of experiences and outreach work.

Interests: to learn and exchange knowledge about the situation of indoor sex workers and the outreach strategies to reach them, due to an increase of indoor and migrant prostitution in the UK.

Lessons learned: more interactive ways of passing on information were learned, such as the playing cards used by *Pro-Turkipiste* in Finland, which convey information on rights. The issue of cultural mediators which has still not been implemented in *Scot-Pep* was also brought up. In the exchange visit it was emphasised that for some migrants it is really important to be able to speak to someone from the same cultural background in order to establish contact and build relationships – it's not enough to just have someone who speaks the language. *Scot-Pep* decided therefore to look at possibilities for recruiting cultural mediators to join the team of volunteers.

Work package n° 3

Regional Coordination SOUTH, national coordinations, international and regional exchanges

Bulgaria, Greece, Italy, Portugal, Romania, Spain

In TAMPEP VII a greater emphasis is placed on the Regional Commissions (RC). Each regional group works together in preparing, implementing, comparing and evaluating the work packages. The Regional Coordinators facilitate this process by organising intra-group communication and several meetings. In Section B of this Report more detailed description of the RCs tasks is provided. The present Work package gives a summarised overview of the most important Regional results of the TAMPEP VII project.

D3.1

Coordination of the activities at regional level and delivery of the report of regional activities

Bulgaria, Greece, Italy, Portugal, Romania, Spain

1. The **first Regional Commission** meeting held by the South Region took place during the GM in Budapest, 25 - 27 April 2005. On the agenda for the initial session were a discussion about the working programme of TAMPEP, the distribution of tasks, timetable and questionnaire forms: mapping and service assessment, guidelines. An analysis on applicable methodology for the collection and the elaboration of data and information was done. A lot of practical advice was shared, for example regarding how to obtain the maximum feedback from service providers on the questionnaires. Commitment was further asked from all region members to invest in string communication with the Regional Coordinator and regional colleagues.

Italy gave a talk on its experience with Nigerian sex workers, as an introduction to the target group of African sex workers. Subsequently the specificities of Balkan sex workers were also discussed. A preliminary comparison of legal frameworks, migration patterns, political backgrounds, working conditions was made. The language barrier within operators and sex workers was already identified as a key problem. More cultural mediators are needed to facilitate contact during outreach.

Finally a session was held to talk about migration patterns based on the discussion paper sent out and additional information from the members. Various terms such as trafficking, migrants, smuggling were defined and the roles played by international traffic organisers, pimps, traffickers and smugglers were distinguished.

2. Second RCM was held on 14-15 November 2005 in Bucharest – Romania. Here the preliminary results of the mapping prostitution were discussed between partners.

- How to structure the reports and the elaboration of data collected through the questionnaires.

- How to organise exchange visits and establish sufficient time to exchange know-how and good practices.
- Financial report and other activities were discussed and the organisation of the work for 2006 was introduced.

The RC meeting is an optimum means to share and give out clear information on the process of monitoring mapping questionnaire. Of relevance is the fact that through the RCM, a better knowledge of the specific aspects in each country (e.g. receiving and origin countries, especially new and old European countries with socialist and legislative backgrounds that have not been harmonised) was acquired.

3. The **third RCM** of the South Commission was held in Turin-Italy, in September 2006 during the second TAMPEP General Meeting. Main task of the meeting was to clarify final questions regarding the National Final Reports and the Regional Final Reports.

Experience gained in collecting data through the mapping service questionnaire was thoroughly shared among the South Region partners.

D3.2

Coordination of the activities on national levels and delivery of the report of the national activities

Bulgaria, Greece, Italy, Portugal, Romania, Spain

The National Coordinators (NC) are responsible for gathering information about the prostitution scene in their country, passing on their reports to their Regional Commission and its Coordinator and implementing the work packages in their country. In Section B of this Report more detailed description of the NCs tasks is provided. The following chapter gives an overview of the most important national results of the TAMPEP VII project.

South Regional countries constitute a group of service providers very active in the field of health promotion in prostitution. As a matter of fact, they carry out activities directly with their target group and promote health prevention campaigns. They also stand as a referral point for health services and work as go-betweens for public services. They are also part of a national network with which they have a solid collaboration and exchange of information as well as working methodology.

The *Health and Social Development Foundation* (HESED) in **Bulgaria** carries out health promotion activities - prevention of HIV/STI and other socially significant diseases - in order to stimulate social development of the underprivileged groups and communities within the territory of Bulgaria. *HESED* is able to cover outreach service for sex workers nationwide. Their participation in the Global Fund and financial support for vulnerable groups in Bulgaria, gives *HESED* a significant role in the HIV/STI prevention among sex workers.

ACT UP in **Greece** does more or less the same with difficult-to-reach populations (migrants, sex workers, transvestites, trafficking victims) and populations with high-risk behaviour (intravenous drug users and homosexuals).

Slightly different is the *Comitato per i Diritti Civili delle Prostitute* in **Italy**, an association that networks with many other associations that perform work concerning

HIV-prevention and general good health, as well as support and sustenance of trafficked women particularly. ARAS is the only NGO in **Romania** who offers healthcare services for sex workers.

MAPS, in **Portugal**, is an NGO working directly with people with exclusion problems due to drug addiction, HIV/AIDS, sex work, poverty and migration. In the drop-in and with the street mobile unit the operators of MAPS are every day in contact with sex workers.

Spain Red Cross in Asturias is a health and social service. Migrant sex workers are one of the target groups they support.

Around 200 projects working in the field of prevention and assisting sex workers have being contacted from the coordinators of TAMPEP and received the questionnaire for mapping prostitution and services in the South Region

National events

Each country carried out or organised training and/or events on local and/or national level, and/or participated on local and/or national level in events organised in cooperation with other institutions. The issues of the different events were related to either one or more of the following issues: migration, sex work, trafficking in women, health, and sensitisation of social and medical services providers on sex workers' matters, peer education, outreach work, advocacy, and human rights.

Most partners of the South Region organised an event on national level, and all of them participated in a number of regional and national events to promote the needs of migrant sex workers, TAMPEP resources and methodology.

Bulgaria: An expert seminar on the main principles of outreach work in Bulgaria was carried out in the period 25-26 of November, 2006. The seminar included a team of consultants of the national network, who are responsible for the training and monitoring of the outreach teams, working with sex workers in the country.

A national network on sex work prevention, carried out a national meeting with the purpose of exchange of information and experience in the period of 11 to 14 of December, 2006

Italy: August 2005, Trieste. As part of the scheduled events of the cultural week, a group of women's associations decided to organise two evenings dedicated to raising social consciousness concerning the themes of female migration and trafficking and prostitution as a condition of life.

August 1, 2006 also in Trieste, for the same cultural month event, a documentary titled *Ni coupables, Ni victimes* (Neither Culpable, Neither Victims) was presented, which was projected at the International Conference on the Rights Sex Workers of Brussels in 2005. On this occasion we also presented the *Manifesto of Sex Workers*.

In Turin and Trieste during the 2006 TAMPEP organized six workshops for training peer educators and to underpin a process of empowering Sex Workers. In total 45 women and transgender participated in Turin and 16 in Trieste.

Greece: ACT UP hosted a meeting focusing on the *Millennium Development Goals*, mainly the combating of HIV/AIDS, malaria and other diseases and promoting gender equality and empowerment of women. The topic together with the involvement of the Prime Minister and the UN made this event a big success which also received extensive coverage in the press.

Romania: On 10-13 November 2005 the European Seminar on 'Sustainable Services for Vulnerable Groups' took place in Bucharest, Romania. It was organized by

ARAS, the Romanian TAMPEP partner and all South Region partners participated. ARAS has local outreach teams involved in a comprehensive training and exchanging experience program in order to increase the quality of the services and to raise public awareness.

Spain: The TAMPEP Spain partner *Cruz Roja* and the *Council of the Youth of the Region of Asturias*, organised a national event in Oviedo, Spain, on 22 and 23 of October, 2005. It was a conference titled “*Jornadas de la Prostitución. Del Stigma a la Propuesta*” dedicated to sex workers’ social exclusion and the need to implement social inclusion mechanisms. The event was attended by various NGOs, GOs and individual experts in many fields. The objective was to give a broad picture of the status of affairs on the fight against stigma experienced by sex workers.

Secondly, in March 2006 the TAMPEP Spain partner organised in Madrid a national meeting for *ROPP (Red Estatal de Organizaciones y Proyectos sobre Prostitución)* which is a the sex work projects network in Spain. The network’s members are multiple (ca. 30) organisations in the field. The meeting was dedicated to discussing the mapping results and the consequences of repressive policies. The participants were members of *ROPP*, of TAMPEP, as well as people interested in the subject. Around 100 people attended.

D3.3

Lessons learned report of the exchange visits

Bulgaria, Greece, Italy, Portugal, Romania, Spain

The **Bulgarian** team visited the **Czech** partner *Bliss without Risk* on 13-16 of August 2005. The purpose of the visit was to assist the local teamwork in reaching the Bulgarian sex workers, establish a cooperation link between the Czech and the Bulgarian team for future exchange of ideas, experience, knowledge etc. The Bulgarian group was impressed by the quick HIV and syphilis tests; specifically, the way these tests are applied in the field and how results are almost instant. The variety of specialists working in the day centre was also a point of great interests. Moreover, the good cooperation with the local authorities, resulting in very efficient work with police and municipality called the Bulgarian visitors attention. The organisation and functioning of this cooperation were a source of inspiration for the work of the Bulgarian organisation.

Due to the fact that the **Bulgarian HESED** is planning to apply and develop a pilot drop-in centre, an exchange visit was organised on 16 - 19 November 2006 to the Red Cross *Drop-in* in **Luxembourg**. The primary focus of this visit were thus the organisational issues of setting up a drop-in centre for sex workers, such as: a clear and detailed set of rules which needs to be developed on how the services are going to be offered, good cooperation with other health and social services, so that all needs of the clients can be met in a well-functioning referral system, good cooperation development with governmental structures: police, ministries, etc in order to secure an effective functioning of the centre. The visit also served for analysing the issue of outreach work as a very good method for establishing contact with sex workers, although *HESED* plans to carry out main portion of the work in the centre.

The main lessons learned from this visit were the awareness of the necessity to: thoroughly survey the locations of such a centre; carry out preliminary work on informing and cooperation with various services (police, municipality, etc.) regarding the specific activities that are going to be carried out in the centre; carry out introductory information campaign among the sex workers regarding the services they can receive in the centre and the conditions they should meet in order to use the drop-in centre; draft a careful plan of how to offer services both to female and transgender sex workers at one place, keeping in mind the specifics of each of the groups.

Italy visit in Spain, Romania, Germany and Portugal

The *Comitato per i Diritti Civili delle Prostitute* visited its **Spanish partner** on 13-15 June 2005 and participated in outreach work in private apartments, met with the project operators and held a public debate on sex work and sex-worker rights.

The **Romanian partner** was also visited on 12-15 May 2005. All the branch teams throughout Romania were met. Moreover, a seminar on peer-education was held.

Finally a visit was paid on 4-6 December 2005 to our **German partner**. The main focus here was experience with outreach work concerning indoor prostitution.

Lesson learned: The Italian partner had little experience in establishing contact with sex workers who work indoors. Therefore, the work methodologies adopted by our German and Spanish colleagues were very instructive. Owing to the tendency of South American women to be highly mobile, with frequent cross-border transfers to work elsewhere, we were familiar with many of those whom we encountered in Spain (because we had already met them in Italy). A large number of Romanian women work both in Italy and in Romania. Therefore, it proved useful learning about the condition of prostitution in Romania.

During the **visit** of 10-13 May 2006 to **Portugal**, the Italian partner witnessed how Ministry of Health has activated, as part of its campaign in the nation-wide fight against AIDS, a mobile medical unit, which contains laboratory equipment and paramedic personnel who perform on-the-spot tests for AIDS or syphilis infection. Sex workers, drug users, and clients can take the test and have an immediate response. The test is accompanied by counselling, which is done by participating NGOs.

Lesson learned: Surprisingly, some of the women that organise indoor prostitution, in effect the controllers accompany or dispatch sex workers to the mobile medical unit to take the test. From the point of view of the Italian partner, this is a practice which highlights the issues of lack of voluntary and anonymous testing.

Romania visit in Bulgaria and Italy

Romania's **visit to Sofia** between 22.10.2006 - 26.10.2006, was an opportunity to study and experience in practice the outreach activities of *HESED*. *ARAS* could compare this experience and context in which Bulgarian outreach takes place with their own outreach methodology among vulnerable population in Rumania.

Lesson learned: collaboration between state institutions and police can be very productive in working with vulnerable population. Collaboration between outreach teams is also essential. The visitors got to know good examples of centres for vulnerable population (IDUs, sex workers, homeless population, Roma etc).

In October 2006 ARAS **visited in Trieste** the project called *Stella Polare*. It is a social protection project aimed to encourage self-determination and to give support to women who wish to escape from slavery conditions and sexual exploitation.

Lesson learned: many experiences were exchanged at the *Stella Polare* project and the team had the opportunity to assist “Violence and Patriarchy”, an international conference, organised by the female politicians from the social-democrat and left parties in Europe. The section dedicated to prostitution was important for the experience of the civil society representatives and the position of the politicians on these issues. It was interesting to see how a project like *Stella Polare* functions together with other state departments and police.

Work package n°4

Regional Coordination EAST, national coordinations, international and regional exchanges

Austria, Czech Republic, Hungary, Poland, Slovakia

In TAMPEP VII a greater emphasis is placed on the Regional Commissions (RC). Each regional group works together in preparing, implementing, comparing and evaluating the work packages. The Regional Coordinators facilitate this process by organising intra-group communication and several meetings. In Section B of this Report more detailed description of the RCs tasks is provided. The present Work package gives a summarised overview of the most important Regional results of the TAMPEP VII project.

D4.1

Coordination of the activities at regional level and delivery of the report of regional activities

Austria, Czech Republic, Hungary, Poland, Slovakia

1. The **first RC** of the East Region was held in Budapest during the GM (April 2005). This was used for a discussion about the working programme of TAMPEP and the national mapping questionnaire. Furthermore there was a distribution of tasks, timetable and questionnaire forms: mapping and service assessment, guidelines. Following, there was an introduction to work in Regional Commissions and TAMPEP VII work plan; presentation and review of materials; explanation of work packages and timetable; discussion of questionnaires/mapping. Agreements were made on communication and deadlines.

2. The **second RC** of the East Region was held in November 2005 in Vienna. The meeting was hosted by *LEFÖ*, the Austrian TAMPEP partner and East Regional Coordinator. The RCM programme included:

- Part I: update on current situation and changes, national and regional overview (country presentations on legal situation/changes, prostitution scene/changes, health and social situation and services/changes; with a focus on CEE sex workers as the special target group of the East Region and regional migration and mobility patterns)
- Part II: reflection on methods (trainings for cultural mediators, peer educators)
- Part III: outreach work
- Part IV: exchange on progress with Work Packages (questionnaires, national event, exchange visit, reports and deadlines)

Common results included the following issues on common needs and gaps in reinforcing the outreach activities:

Needs to cooperation plan on cultural mediation

From the experience of all East Region TAMPEP partners, it is apparent that the issue of language and high number of migrant sex workers is a growing and common theme in the work and within the region. Because of this it is necessary to continue to implement the TAMPEP concept of cultural mediation. The importance of cultural mediation is not solely related to being able to communicate in the language of the sex worker thanks to the translation work. Thanks to having knowledge of the cultural background of a particular nationality, cultural mediation allows to include in our strategy and approach various culture sensitive issues with respect to the specific context of sex work. In each regional group, there are many languages and backgrounds. At the same time, there is the difficulty of not being able to cover all nationalities/languages through cultural mediators, even working with many volunteers. Migration within the EU, however, is increasing and new nationalities appear in countries and regions that, until recently were not present. This calls for a constant revision of approaches, inclusion of – existing – methods (cultural mediation, peer education) and training of staff and volunteers.

Project ideas:

- trainings on a special (common) target group (for example Roma women: Hungary, Slovakia, Czech Republic)
- trainings done by TAMPEP cultural mediators for other TAMPEP cultural mediators (for example: training by Bulgarians in the Czech Republic, Hungary and Poland)
- increased and intensified cross-border co-operations (for example Austria-Slovakia)
- common research

Outreach evaluation

Through the common experience of street work it became evident that there are similarities as well as differences in the organisation of the prostitution scene between Vienna and cities in the other partners' countries. In part, they are due to Vienna/Austria being a country of destination rather than a country of origin or transit. The similarities/differences refer to: organisation of prostitution scene (street, establishments, bars, clubs, brothels, massage parlours, apartments) – which, is also determined by relevant legal regulations, infrastructure of the establishments (rooms, showers etc.), access to establishments/sex workers, presence of migrant women in

sex work, presence of nationalities, distribution of leaflets, cultural mediation. For example in Poland, none of the sex work establishments has a legal status. This causes a translation problem between English and Polish, because everything is called 'Escort Agency.' A list of definitions that includes region/country specific differences was considered a useful tool.

Work Packages

The preparation and distribution of the TAMPEP questionnaires in 2005 showed the importance of targeting the "right" organisations. In many countries within the region, there is a scarcity of NGOs in the field of sex work. In addition, officials are often interested mainly in the control of the sex workers and in health statistics. They show little knowledge in the social and legal situation of sex work and in general on the social determinants of the risk to HIV of vulnerable population. The issue of sex work is not open, but rather it is marginalized. Getting feedback from public authority is a real problem. Organisations that are actually working with the women, know more than the authorities. Women who are not registered do not show up in statistics. In some countries, the police does keep track of unregistered prostitutes, but it is unofficial and not public. In general, data and epidemiological data are underestimated.

Apart from its actual return quota, the mappings can be used as a tool to sensitise other organisations and authorities on this issue. And they can also be used to raise awareness. Some organisations are very happy to hear that someone is doing this type of work, and might contact the sending organisation afterwards to find out more. With the migration and mobility questionnaire, the emphasis was placed on collecting **national case studies that summarize trends** (in order to later combine them and form a regional case study). When migration case studies were not available (e.g. Slovakia), the focus was placed on mobility. It was important though that the case studies did not present individual cases but that they focus on common trends or emphasise typical central aspects.

The conclusions of the RCM meeting was that the small working groups in sub regional setting is an extremely necessary tool in order to understand and see the common work and co-operation as a regional project. It did not only serve to update on the respective country situations but also added to developing an identity as a (regional) group. In this, outreach is an important way to directly experience the differences and similarities and to reflect upon the use of methodology. Cultural mediation is an approach that enables contact with migrant sex workers and is the only adequate measure in the context of a growing women's migration within the (enlarged) European Union. Common projects could enable more co-operation on disseminating the methodology and for qualifying additional team members and volunteers to reach migrant sex workers for health prevention activities and other (social, legal) counselling. The mapping questionnaires can and should also serve to raise awareness within other organisations and to sensitise them for the situation of (migrant) sex workers and the lack of service providers. The impact of the survey was that the responses can also be used as a powerful lobbying tool. Small group work (in regional setting) is an efficient and preferred way to communicate and to explain complex information on reports, deadlines and other formalities within the TAMPEP VII project.

3. The **third RCM** of the East Commission took place during the second TAMPEP General Meeting in Turin in September 2006. It served to revise and finalise the Regional Reports and to clarify open issues and questions. It was also a forum to explain the use and distribution of the new TAMPEP VII CD-ROM and clarify any remaining work package issues.

D4.2

Coordination of the activities on national levels and delivery of the report of the national activities

Austria, Czech Republic, Hungary, Poland, Slovakia

The National Coordinators (NC) are responsible for gathering information about the prostitution scene in their country, passing on their reports to their Regional Commission and its Coordinator and implementing the work packages in their country. In Section B of this Report more detailed description of the NCs tasks is provided. The following chapter gives an overview of the most important national results of the TAMPEP VII project.

Each country carried out or organised training and/or events on local and/or national level, and/or participated on local and/or national level in events organised in cooperation with other institutions. The issues of the different events were related to either one or more of the following issues: migration, sex work, trafficking in women, health, and sensitisation of social and medical services providers on sex workers' matters, peer education, outreach work, advocacy, and human rights.

In the RC meetings of the East Region all regional member organisations give updates on the current situation and changes in the legal and political context of sex work in their respective country. These national reports serve as basis for discussion, analysis and review of the work.

Still there is a lot of difference between the networks of the different organisations, mainly because there are such large differences between the countries.

The special focus on developing and consolidating the national networks, for many partners worked as a tool to deepen existing co-operations – even in countries with a lack of sex workers organisations or service providers (which is the case in most of the countries in the East region). Partner organisations of the national networks include social and health service providers, women and migrant's organisations, human rights institutions, harm reduction organisations, HIV/AIDS prevention organisations, outreach/street work organisations and – where they exist – sex workers' organisations.

At the same time, the national events often served to motivate co-operations between national networks of service providers and to intensify the exchange and integrate the other partners into discussions on sex work.

The main aims of the events were:

- to reach sex workers and to involve them within the projects as peer educators and active members

- to provide space for and access to discussions on the issue of sex work and sex workers' rights
- to bring together individuals and organisations working with different target groups, to sensitise them for the situation of sex workers and to find allies in the fight for their rights
- to establish a network of individuals and organisations active in the field of rights protection
- to discuss different aspects of sex work, covering a broad range of usually neglected issues
- to involve experts as well as sex workers and rights activists to find common ground in the work to improve working and living conditions for sex workers
- to strengthen a national and regional platform
- to increase knowledge on specific (health) issues within different groups of society (e.g. youth)
- to inform about the services provided by the national TAMPEP partner
- to inform about transnational developments and events relevant to sex workers

The activities that were conducted included: campaign on International Whore Day (Austria); round table discussions on International AIDS awareness day (Austria); protest letter campaigns (Austria); educational seminar on sex work (Austria); HIV, STI and safer sex awareness events with young people (Poland); workshops for outreach workers, police and other institutions (Czech Republic); educational workshops for police representatives (Slovakia); systematic exchange and co-operation with the network members (Hungary) and preparations for up-coming events and co-operations.

National networks

Due to the lack of organisations working specifically with (migrant) sex workers in **Austria**, the national network consists mainly of organisations active in the field of rights of migrants, refugees and women as well as providing health and social services. Common activities of the network include organising and conducting common actions/events (International Whore Day), (protest) letter campaigns on the (legal) situation of migrant sex workers and a round table discussion on World Aids Day. Future activities shall focus on lobbying for the rights of migrant sex workers, public campaigns and the distribution of information regarding the working and living conditions of (migrant) sex workers in Europe (e.g. to the media, politicians etc.).

During TAMPEP VII, a network of 14 organisations (10 NGOs and 4 GOs) was consolidated in the **Czech Republic**. GOs involved in the network are: Faculty Hospital Prague/Venerological Department, Hospital Teplice, Health Institute Chomutov and the Ministry of Interior/Crime Prevention Department. NGOs in the network are: *Bliss without Risk* Prague, *Bliss without Risk* Brno, *Magdalenium*, *DRAK*, *Jana Project*, *ULICE*, *KARO*, *SANCE*, *La Strada* Czech Republic, *Caritas* Czech Republic. The sphere of action of the NGOs is: outreach work among female sex workers (one NGO works with male sex workers), counselling for migrants, refugees, victims of trafficking, victims of (domestic) violence, shelters, rehabilitation.

The national network in **Hungary** consists of – in addition to the Sex Education Foundation – 4 members who work with sex workers and 4 in the field of health prevention. The activities of the network members focus on HIV/AIDS and STI prevention, social and health services for sex workers, outreach work and the organisation of seminars, workshops and conferences. Members are: the Association of Street Workers Services (Tatabánya), Patronage and Human Rights for Hungarian Prostitutes (Budapest), Support Care Centre Services (Budapest), Start Foundation (Pécs), Sunshine for Life (Miskolc), the Institute for Public Health at the Semmelweis University (Budapest), Periphery Association (Nyíregyháza), Green Cock (Budapest) and CAF Civil AIDS Forum.

TADA in **Poland** is working with 10 national network members. Within this network is a smaller one which consists of four branches of TADA for HIV/AIDS and STI prevention (in Szczecin, Gdansk, Warsaw and Zielona Gora). These branches provide health services for sex workers, specialise in outreach work and organise seminars, workshops and conferences on sex work. Other network members are: La Strada Foundation (which itself is a member of the international La Strada Network), the Polish Federation for Woman and Family Planning (advocating for women's reproductive rights), Monar (a renown harm reduction organisation), Return from Addiction (counselling on drugs/addiction), OSKA Foundation (feminist women's organisation) and Family Planning Association TRR (a member of IPPF International Planned Parenthood Foundation).

So far, there has been no established national network in **Slovakia** on (the rights of) sex workers. But co-operation with organisations/institutions and individuals on specific issues does exist, though not (yet) as platform or systematic network on sex work. During TAMPEP VII, co-operation has been intensified with NGOs working on harm reduction and conducting outreach activities (C.A. Prima, C.A. Storm), with the national police department and the women's NGO *Alincia zien Slovenska*. Activities focus on gathering and exchanging relevant data and the organisation of seminars and meetings.

National events

Each country carried out or organised training and/or events on local and/or national level, and/or participated on local and/or national level in events organised in cooperation with other institutions. The issues of the different events were related to either one or more of the following issues: migration, sex work, trafficking in women, health, and sensitisation of social and medical services providers on sex workers' matters, peer education, outreach work, advocacy, and human rights.

Most partners of the East Region organised an event on national level, and all of them participated in a number of regional and national events to promote the needs of migrant sex workers, TAMPEP resources and methodology.

Austria: Action Day: International Whore Day, 2 June 2006 and 2 June 2005 (common activity with members of the national network in Vienna, including press work)

Seminar: Sex Work Socio-political Meaning – Political Reality (from June 23-25 2005, the 10th LEFÖ educational seminar took place on the issue of Sex Work / Socio-political Meaning and Political Reality)

Workshop on Sex Work, 26 October 2006 (workshop within the frame of a feminist conference organised by *Frauenhetz* (Vienna))

Event: “*wärmesponder*” (www.waermesponder.at), 24 November-23 December 2006 (benefit event for the support of the rights of (migrant) sex workers in Vienna, including press work)

Czech Republic: The TAMPEP Czech partner *Bliss without Risk* organised a seminar on “Work with Victims of Trafficking in Women” for outreach workers and police officers, with the financial support of the Czech Ministry of Interior. The seminar focused on training in identifying victims of trafficking and training on communication with victims of trafficking. The first part of the training involved inputs by experts on issues around violence, organised crime etc. During the second part, the draft of a manual for outreach workers was outlined. The manual is divided into 3 parts: outreach work, shelters and rehabilitation for victims, legal framework.

A branch office of *Bliss without Risk* in Brno was opened on June 1 2005, new counselling centre and medical room for female sex workers.

There were several theatre performances in 2005 at the Ostrava theatre festival, Chomutov theatre festival, Tyn nad Sazavou theatre festival, Prague/Psychiatric hospital, One World Prague Festival of Documentary Films organized by People in Need, Czech Republic.

A documentary film by Julie Query and Vicky Funari „Live Nude Girls Unite!“ was projected on April 21 2005 at the ROXY Club in Prague. The film is about peepshow stripper’s labour union in California.

Hungary: As an additional national activity, the Sex Education Foundation conducted prevention education for young people in orphanages. The aim of the event was to increase knowledge about HIV/AIDS and STIs, to inform about safer sex and to sensitise young underprivileged people in high vulnerability situations about the issues of health prevention and to provide them with an overview of existing support networks and organisations.

In 2006, the Hungarian partners concentrated on consolidating the national network and on reaching out to additional organisations that work with social and health issues. The mappings were a tool to achieve co-operation and exchange on the situation of migrant and national sex workers and to develop common strategies for outreach methodologies.

Poland: As an organisation that tries to reach as many people as possible on the issue of safer sex, TADA organised the national events during the “Heineken Open Air Festival”. For two days, 50.000 young people met in Gdynia for the music festival and it presented an opportunity to meet with many of them and provide information on safer sex, STIs, HIV and AIDS prevention and the work of TADA. The TADA-team consisted of a multidisciplinary group of experts: doctors, nurses, psychologists, social workers; as well as volunteers. The event presented an important opportunity to communicate safer sex awareness and to sensitise young people on the issue HIV/AIDS and STIs.

Slovakia: TAMPEP Slovak partner *Odyseus* organised on August 8, 2005 educational workshops in co-operation with the Minority Rights Group International London. The workshops were on sexual behaviour and the community of Roma people and an “introduction” to the sex-business. The aim of the workshops was to educate co-operation partners and future allies on issues related to sex work and to sensitise them for the very vulnerable group of Roma sex workers. As the situation of Roma people in general is very much neglected in Slovakia, a lot of misconceptions exist as well as double/triple stigmatisation and marginalisation of Roma sex workers.

On October 18, 2006 there was an educational workshop for the representatives of the police (municipal and state). The main topic was “Sex workers and their human rights”. The aim was to inform participants about the Declaration of Human Rights of Sex Workers in Europe and also about Human Rights guaranteed by the Slovak legislative system. The aim was also to find possibilities for cooperation with the police in resolving problems in their perception of the target group of sex workers.

D4.3

Lessons learned report of the exchange visits

Austria, Czech Republic, Hungary, Poland, Slovakia

Most bilateral visits have been planned for 2006. Each organisation has submitted a motivated choice for two possible visits and the final decision and organisation was made according to the capacity of the respective host organisations.

Already in 2005 (14-18 March), **Slovakia** made an exchange visit with **Germany**. This was very important for *Odyseus* as Germany continues to be one of the countries of destination for Slovakian sex workers. The meetings with service providers reaffirmed the need for transnational exchange and cultural mediation as a way to reach women of the target group and to enable communication. It made possible the exchange of information and knowledge (provide leaflets etc.) as well as the assessment of their needs. This is extremely important with marginalised groups who face multiple discrimination and criminalisation, i.e. migrant women, sex workers, drug users etc. Street work provided a possibility to compare the organisation of the prostitution scene in the different countries, outreach methods and accessibility of target groups. The exchange was essential for improving the understanding of the situation and context of Slovakian sex workers who migrate to Germany.

In 2006, the East-Region Partners carried out bilateral exchanges according to their specific needs and country situations. The main objectives of the exchanges were:

- to assess the situation of sex workers in the host country
- to assess the impact of the respective legal framework on the working and living conditions of sex workers
- to compare the situation of sex workers in the host country and the partner's country
- to understand the background, the working and living conditions of (national) sex workers in a specific country
- to visit and exchange with different (health) service providers
- to exchange methodologies and work approaches between the partner organisations (e.g. mobile ambulance, day centres, drop-ins, underground passage clubs, cultural mediation etc.)
- to carry out common activities (outreach, street work)
- to monitor the situation in specific areas (e.g. border region)
- to intensify bilateral co-operation
- to develop further co-operation projects

The following visits were carried out in 2006:

Austria visited **Slovakia**. The exchange visit between *LEFÖ* and *Odyssey* that took place on November 10 2006 (in Bratislava) was a result of a long-lasting co-operation between the two partner organisations. As part of the same Regional Commission, the exchange and co-operation also supports an understanding of regional specificities and developments. *LEFÖ* (throughout the course of TAMPEP VII and evaluating the data of the various mappings) assessed that 23% of sex workers in Austria are from CEE countries. Since the EU enlargement in 2004, women especially from the neighbouring new EU member countries may legally work in the Austrian sex-industry as self-employed registered sex workers. At the same time, Austria is upholding restrictions regarding access to the labour market for most of the new EU members, with a maximum prolongation of these restrictions for up to 7 years. In this situation, women have chosen different forms of engaging in sex work: there are women who want to move to Austria and settle down (some with their families), there are women commuting daily between their country of origin and their area of work in Austria, women who come to Austria specifically at week-ends for work, women who want to work in Austria for a certain period of time in order to raise money and will live in Austria during that time, women who work in street prostitution, women who work indoors in bars/brothels, studios or apartments. Crucial for the assessment of their situation and needs is access to the women through cultural mediation and an understanding of the specific working and living conditions in their countries of origin, as well as an analysis of factors contributing to the overall political, legal, economic and gender-specific situation.

Lessons learned: usefulness and success of adequate means (tailored to the specific local context) of contacting sex workers (mobile ambulance and underground passage club). A need for more resources to cover other areas of work (outreach in indoor prostitution, assessment of situation of migrant sex workers in Slovakia, more capacities for street work, e.g. in the border area). What was observed was a high level of social stigmatisation and legal discrimination of sex workers, often resulting in violence against and marginalisation of sex workers, with horrendous consequences especially for members of already stigmatised groups (e.g. Roma women)

Czech Republic visited Trieste, **Italy** from 20 to 26 October 2006. The aim of the visit was to exchange information on the work methodology of the host organisation regarding victims of trafficking and support for migrant sex workers in a different legal setting (evaluation of possibilities offered by the Italian legislation).

Lessons learned: The most striking realisation was that the local legislation – although street prostitution is legal – is repressive towards sex workers and penalises both clients and sex workers immediately e.g. if the work is carried out indoors. This setting highlighted the need for well trained peer educators and for providing sex workers with a broad range of materials.

On the 5 October 2006, **Czech Republic** additionally, participated in a conference in Kosice in Slovakia, called **Kosice Sexuology Days** contributing with a lecture about childhood of sex workers and what sex workers do and do not plan in their future. The lecture concerned the specific aspect of social care for sex workers with the result of TAMPEP need assessment survey.

Slovakia revisited **Germany** on 22-26 May 2006. The main aim of both visits was to learn about new approaches in the work with (migrant) sex workers and to assess the

possibilities of NGOs in a country where sex work is legalised. Another specific aim was to increase the experience in work with migrant sex workers (e.g. through observing the work of cultural mediators and the frame/setting they operate within) as this was perceived as lacking by the visiting partner who is not yet carrying out specific outreach activities to reach migrant sex workers.

Lessons learned: The main result of the exchange was an understanding of different methodologies to reach sex workers who work indoors (bars, apartments etc.) – as this was an area in which the visiting organisation had no experience yet. A common aspect of the prostitution scene in both countries is drug use among sex workers. Slovakia benefited by learning about the concepts of “drug using spaces/rooms”. Another aspect relating to this was the co-operation network within which the host country carries out its activities, a network that proves to be very useful and ranges from harm reduction organisations to drop-in-centres, health care institutions etc.

Slovakia visited S.A.L.I. (*Siciliani, Acunamatata, Laboratori Uniti, Immaginario*) an NGO in Palermo, Italy on July 7 to 12 2006. The partner participated in the preparation of a meeting for Youth Exchange coordinated by S.A.L.I. This was a visit in order to connect the experience of NGO networks developing prevention programme for youth with TAMPEP activity, particularly due to the fact that in Slovakia street sex workers are very young.

Lessons learned: the primary benefit of the exchange was in the field of learning about the possibilities of motivating young people from vulnerable communities. This was especially relevant due to the fact that in Slovakia there is lack of organizations working with target group of children and youth from vulnerable communities.

Hungary focused on **visits to national partners** and exchange with members of the national network. This work was carried out by visiting the broad range of organisations within the national network and carrying out common activities. The purpose of these visits was to exchange experience and see the streetwork, the places where it takes place and the methods employed. Members of the Sex Education Foundation visited the follow NGOs: Association of Street Workers (Tatabánya) (10.05.2005 and 11.03.2006), Perifeia (Nyíregyháza) (02.11.2005 and 14.04.2006), Sunshine for Life (Miskolc) (16.11.2005 and 30.03.2006) , Start Foundation (Pécs) (22.09.2005 and 20.01.2006), Association for Help (Győr) 28.11.2005 and 28.04.2006), Association of Social Care (Veszprém) (06.10.2005 and 20.04.2006), Patronage and human rights for the Hungarian Prostitutes (Budapest) (04.11.2005 and 11.05.2005). It was a way to get involved in the network, exchange personally and understand the respective local situation (e.g. stronger presence of Roma women in the East part of the country, different life standards, collective organisation of women in certain areas, different forms of sex work along highways and gas stations). Good connection was established with the network members and many written materials were exchanged.

Lessons learned: the most important learning experience was in regards to the structure of the NGO and the use of the mobile medical unit; moreover, how certain problems could be dealt with through an SMS. The importance of sharing and exchanging information was once more reinforced.

Poland visited Vilnius, **Lithuania** on the 22-25 June 2005 and Kaliningrad, Russia on 18-20 March 2005. At the occasion of the East Commission Meeting in Vienna on 18-20 November 2005, Poland also realised its bilateral exchange with Austria. One of the main motives of these visits was the exchange of information on different

experiences and work methodologies with NGOs from Eastern Europe – reaching the target group of CEE sex workers. The Polish partner already had a lot of exchange with organisations in Western Europe and relatively less experience with exchanges with Eastern Europe. This made these visits all the more important as they offered an opportunity to get to know the different kinds of networks that exist, organising structures, methodologies etc. Some similarities could be noted and were due to common history or cultural connections – and additionally these partners work with a similar target group, CEE sex workers.

Lessons learned: The most significant outcomes of the meeting were the methods of work in the frame of different political and social policies – with special methods for national and migrant sex workers. Also, the visits provided insight into a context where all activities are centralized and can provide efficient support to sex workers. It also opened up discussion on environments where NGOs exist without any local or national government support and need to develop alternative strategies to provide accessible services.

Work package n° 5

Regional Coordination WEST, national coordinations, international and regional exchanges

Belgium as invited partner, France, Luxembourg, the Netherlands

In TAMPEP VII a greater emphasis is placed on the Regional Commissions (RC). Each regional group works together in preparing, implementing, comparing and evaluating the work packages. The Regional Coordinators facilitate this process by organising intra-group communication and several meetings. In Section B of this Report more detailed description of the RCs tasks is provided. The present Work package gives a summarised overview of the most important Regional results of the TAMPEP VII project.

D5.1

Coordination of the activities at regional level and delivery of the report of regional activities

Belgium as invited partner, France, Luxembourg, the Netherlands

- 1. The first RC meeting** on the Western Region took place during the GM in 2005 (in Budapest, 25 - 27 April). The group's common tasks and schedules were discussed so that all commission members were well prepared for this project's work packages.
- 2. The second RC meeting** was held in Amsterdam on 13th – 14th January 2006. An assessment was made of the work in progress and preliminary results from the mappings were compared, the results of which are presented in work package 13. Bilateral visits were planned for 2006. The meeting was closed off with several

training visits to the Red Light District in Amsterdam and a meeting with community policy makers.

3. RC West Meeting was held for third time during the Turin GM (September 26, 2006). The results of TAMPEP VII assessment activities, were being discussed during this meeting, i.e. need assessment, prostitution and service mapping. Common regional trends were analysed and Regional Reports reviewed. Part of the RCM was also used for presenting the new CD-ROM. Lastly, the RC West discussed the results of the bilateral visits, national networking and events, future action plans and platforms.

D5.2

Coordination of the activities on national levels and delivery of the report of the national activities

Belgium as invited partner, France, Luxembourg, the Netherlands

The National Coordinators (NC) are responsible for gathering information about the prostitution scene in their country, passing on their reports to their Regional Commission and its Coordinator and implementing the work packages in their country. In Section B of this Report more detailed description of the NCs tasks is provided. The following chapter gives an overview of the most important national results of the TAMPEP VII project.

National events

Each country carried out or organised training and/or events on local and/or national level, and/or participated on local and/or national level in events organised in cooperation with other institutions. The issues of the different events were related to either one or more of the following issues: migration, sex work, trafficking in women, health, and sensitisation of social and medical services providers on sex workers' matters, peer education, outreach work, advocacy, and human rights.

Most partners of the West Region organised an event on national level, and all of them participated in a number of regional and national events to promote the needs of migrant sex workers, TAMPEP resources and methodology.

Belgium: The *European Conference on Sex Work, Human Rights, Labour and Migration* was held in Brussels from 15 to 17 October 2005. All members of the West Region participated very actively in the organisation of this important European event. Also all TAMPEP members were present at the conference. The following documents were elaborated and endorsed at the conference and presented at the European Parliament by 200 sex workers and allies from 30 countries:

- 1. Declaration of the Rights of Sex Workers in Europe** – created by sex workers and international human rights experts setting out current violations of the rights of sex workers across Europe, affirming the rights sex workers have under current human rights legislation in Europe and identifying the measures that need to be taken by states to respect, protect and fulfil the rights of sex workers.

2. Sex Workers Manifesto – created by sex workers for sex workers, setting out their shared vision of an equitable society.
3. Recommendations - formulated and endorsed by the 200 participants and presented at the European Parliament. The Organisation Committee and the International Committee on Rights of Sex Workers in Europe (ICRSE) will support the commitment of the participants towards the setting up of a European-wide Sex Worker Network.

The participants committed themselves to develop the ICRSE Network beyond this conference. The new network will include both individual sex workers, sex worker organisations as well as allies and ally organisations that are working in the areas of migrant, human, and labour rights, especially those who include the recognition and promotion of sex worker rights as part of their agenda. Please see www.sexworkeurope.org

Luxembourg: On October 10, 2005 the *DropIn Croix Rouge* of Luxembourg organized a conference in the framework of TAMPEP VII. The Minister of Equality of Chances, Madame Marie-Josée Jacobs gave her patronage for this event. Two lecturers were invited. Hanka Mongard, from TAMPEP Netherlands spoke about '*Facing internationalisation of prostitution in Europe: the need for development of adequate approach based on the protection of human rights of sex workers*' and Veronica Munk, the German TAMPEP Coordinator, addressed the conference on '*Empowerment and Respect: the foundation stones of a practice based work*'.

More information on this conference can be found on:
www.mega.public.lu/actualites/actu_min/2005/10/SWs/index.html and.

France: PASST, the TAMPEP Network member in Northern France met with 22 organisations that provided data for the mapping to discuss the results.

Thanks to the TAMPEP organisation in the South of France (*Autres Regardes*) a big event with 14 organisations took place in Marseille for the occasion of World AIDS Day on 1st of December, 2005. In addition they run a range of other projects and networks, including a European Equal project aiming at the social and economic inclusion of sex workers in Nice and Marseille.

On September 28 - 29 2006, *Autres Regardes* also in Marseille, organised a national meeting with the objective of discussing the final results of the prostitution mapping in France. Strengthening the capacity of the different organisations which deal with sex workers issues was the purpose of the exchange of this information. The participants of this meeting were both NGOs (Community Based Organisations – CBOs, which work with *santé communautaire*) as well as GOs and representatives of the local government, i.e. the Deputy Mayor of Marseille. The European Coordinator participated and presented the results of the European Mapping.

Netherlands: On March 23, 2006 TAMPEP-Netherlands organised a platform meeting, in which 9 public health organisations (GGD) from all over the Netherlands took part. Representatives of the *Foundation Against Trafficking Women*, *Rode Draad* (organisation of sex workers), the *Prostitution Information Centre*, *Foundation SOA/AIDS*, *Humanitas Rotterdam* and *BLiN* were also present. The topic of this meeting was *Cultural mediation as an effective tool in reaching out to vulnerable groups*, particularly with focus on migrants.

In July 2006 TAMPEP-Netherlands, in cooperation with the Ministry of Women Affaires and with UNOG-OHCHR (The Office of the United Nations High Commissioner for Human Rights), organised a national consultation meeting with

Ms. Yakin Ertürk, the UN Special Rapporteur on violence against women, its causes and consequences. The purpose of the Special Rapporteur's official mission to the Netherlands (2-12 July) was issuing a Report to the Human Rights Council in Geneva on the situation of violence against women in the Netherlands. In addition to meeting with government authorities at national and local level, she had expressed a wish to discuss with civil society groups the following issues: general state responsiveness to violence against women, domestic violence, trafficking and commercial sexual exploitation, and violence against migrant women. The organisation of this meeting was therefore very important for TAMPEP's objectives as this occasion allowed the voice of many specialised organisations to be heard and their concerns to be further communicated to the Human Rights Council. Present were all organisation in Netherlands involved in prostitution issues and vulnerable groups. The preparation of the consultation meeting involved technical and key common issues and formulation of recommendations for the Special Rapporteur.

D5.3

Lessons learned report of the exchange visits

Belgium as invited partner, France, Luxembourg, the Netherlands

All countries of the Region participated in at least one exchange visit either as host or visitor. In general terms, these visits are perceived by the participants as very productive and the lessons learned during them often help solve problems or inspire to carry out new initiatives. Below are the details of the particular exchanges:

The Netherlands and Belgium visited **Spain** and presented the *European Approach on Health and Social Promotion in a Prostitution Setting* at the national seminar 'From Stigma to proposition on prostitution policy', from 21 to 22 October 2005 organized by TAMPEP-Spain and the *Council of the Youth* in the Asturias region. The participants were policy makers as well as researchers in the field. After the seminar several service providers were visited in Barcelona, Madrid and Oviedo.

The main lessons for all participants were drawn from the comparison made on the ways in which the prohibition of street prostitution can drive sex work indoors and how this influences the prostitutes' position. For more information please refer to www.cmpa.es

Additionally, **Netherlands** visited **Hungary** in November 2006 as a follow-up of the peer education training carried out in 2005.

In October 2006 the Netherlands visited the Member in the south of **France** in the framework of a new cooperation project between Italy and France. The purpose of this meeting was the strengthening of the capacity of the service providers in border area between Italy and France.

France visited **Italy** (Turin) in May 2006. The main focus of this visit and the lessons learned were in the field of procedures and techniques to reach prostitutes who work in indoor settings.

Luxembourg visited the **Netherlands** in December 18-20, 2006 with the purpose of monitoring the effects of the legalization of 2000.

Luxembourg representatives (*DropIn - Croix Rouge Luxembourgoise*) learned lessons in the following three areas, which were also the main areas of interest: 1) good practices in working with women who are in protection programmes for trafficked women (organised by BLiN in the Netherlands); 2) effective multifaceted interventions for sex workers carried out by HAP (an NGO drop-in centre at the tolerance zone in Utrecht) as well as cooperation between GO (GGD) and NGO (TAMPEP) in the field of provision of services and information in Alkmaar; 3) insight into managing of prostitution establishments (street and window) by the Alkmaar municipality and also by the sex business owners.

Switzerland (as invited country) organised an exchange with **Germany**. The Swiss project Don Juan "face to face client education" has inspired the German project "freier.sein". This new cooperation covers the need to share the different experiences in relation to the effects of sex safe campaigns for clients.

Work package n° 6

North Region: national prostitution mappings, legislation on prostitution, migration patterns

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

In all countries of the North Region national assessments were made on the national prostitution scene, migration patterns, policy changes and their impact on (migrant) sex workers. In order to achieve a comparable data collection on regional and European level, TAMPEP used a methodology which was already used with success in previous phases. Four questionnaires were developed in total (Prostitution Mapping, Migration & Mobility, Service Mapping and Needs Assessment) with the purpose of - based on the information they would provide - achieving a complete overview of the prostitution scene in Europe. Questionnaires Prostitution Mapping and Migration & Mobility were the 2 sources of information for the present work package. They were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level.

Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national mappings were developed and finalised. Moreover, indicators for the migration and mobility patterns study were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in prostitution through gathering of qualitative and quantitative data within the network of 24 countries. More precisely, this entailed carrying out national mappings, i.e. collecting data on the national prostitution scene, sex workers situation, living and working conditions, population and the different communities of sex workers and their nationalities, mobility, policy changes and their impact on migrant sex workers. These national assessments allowed to compare the results on regional level and to make an assessment of common legal tendencies of the Region as well as the common consequences of these tendencies. Lastly, the objective of the Prostitution Mapping and of Migration & Mobility was to identify the migration patterns in prostitution in the North.

Migration patterns assessment entailed collection of data on composition of the population of sex workers, gender, nationalities, working place, the percentage of migrants and national sex workers, mobility patterns and cross-border movement. Further on, in each region we focus on a particular migration flow. For the countries of the North it was the influx of sex workers from the **Baltic countries**, and from new neighbour countries like Russia, Belarus and Ukraine. This is carried out in order to attain a specific element of qualitative analysis.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report only a short summary of the results is provided. The complete product is available in the *European Overview of HIV and Sex Work and 7 Case Studies of Country Reports*. Nevertheless, the geopolitical report below presents the essence of the analysis of combined results from both the interim and final assessment on the current trends in the Region.

Questionnaires and the Mapping Final Report form as well as national forms and a more detailed regional report are available on request.

Country	Major Group	Origin	Major Work Place
Denmark	50% migrants	<u>Thailand</u> , Baltic countries. New: increase of Nigerians on the streets, and Polish in massage parlours	85% indoor
Estonia	80% Russians established in Estonia	12% Estonians. Migrants: Latvia, Lithuania, Belarus, Ukraine	95% indoor
Finland	60% migrants	Russia, Estonia, <u>Thailand</u>	95% indoor
Germany	60% migrants	55% CEE, 20% <u>Asia</u> , 15% Latin America, 10% Africa. A total of 38 different nationalities.	80% indoor
Latvia	85% Latvians	Migrants: Russia, Belarus, Ukraine, Estonia, Lithuania	50% indoor
Lithuania	85% Lithuanians	Migrants: Russia, Ukraine	70% indoor
Norway	60% migrants	<u>Thailand</u> , Bulgaria, Estonia, Lithuania, Rumania. New: increase of Nigerians on the streets	60% indoor
United Kingdom	40% migrants. London 75%.	50% CEE countries, 25% other European countries, 10% Asia, 10% Latin America, 5% Africa, Australasia and North America.	70% indoor. Migrants do not work on the street.
Main countries of origin in the NORTH		Russia, Thailand, Lithuania, Ukraine, Estonia.	

WORKING CONDITIONS		
What percentage have worked in another country before	Nationals 25%	Migrants: 55%
Where do sex workers work	General %	Migrants %
City street	19	7
Highways and roads (border areas)	3	1
Brothels	9	9
Apartments	26	34
Clubs + Bars	12	25
Massage Parlours	21	20
Windows	1	1
Escort	7	2
Others	2	1
Total INDOOR	76%	91%
Total OUTDOOR	24%	9%

Prostitution Mapping – Common trends of the North Region

- Migrant sex workers in the North Region are differently divided: in the old EU countries they are the majority, while they are still a minority in the new EU countries.
- The Baltic countries are still mainly origin countries. They did not become transit or destination countries as expected, because they are of no economic interest for migrants. The Baltic countries are however turning into important *entry countries*. This refers to persons using the Baltic countries to just enter the EU and afterwards travel to more promising countries in terms of jobs and better earnings.
- Regarding the work places, in all eight countries however, prostitution is mostly performed indoors, with a clear majority of migrants. This has two main reasons: 1) the indoor situation offers more protection for migrants, and 2) the majority of those working outdoors, mainly on the city streets, are German drug using sex workers
- In the last two to three years there was a very quick increase of migrant sex workers in the old EU countries. The most significant example for that phenomenon is **Norway**: while in 2001 migrants represented about 20% of the sex workers population, they are now about 60%. In only five years their amount tripled.
- There was no major change with regards to EU enlargement. There was slight increase of sex workers from this region in the West European countries but nothing that would change considerably the prostitution milieu. On the contrary, the most significant change in the region was the increase of Nigerian street sex workers in Norway and in Denmark.
- In Estonia the working conditions have improved. There are more independent sex workers using the internet. The high percentage of Russian sex workers represents Russians who are not migrants but live in Estonia legally and are considered both Estonian and Russian. A survey was implemented by the Estonian partner and supported by the *Global Fund Medical Project* in 2005 with the following results: Estonians 12%, Russians 80%, and other nationalities 8%.
- In Lithuania there was a decrease of sex workers in general because of the great migration to the West. By early 2005 about 400.000 people had left Lithuania

looking for work. About 55% of them were women. By January 2006 Lithuania had around 3.4 million inhabitants, which means that about 10.5% of the population had left the country¹. On the other hand, there was an increasing internal migration flow of sex workers moving from rural areas to bigger cities, to occupy the places left by those who emigrated.

- Latvia felt an increase of indoor prostitution. It is the only country of the region where sex workers have to undergo periodical medical examinations, every three months.

Impact of the Legislation on prostitution and on living and working conditions

Regarding policy on sex work, the most significant change regarding the North Region was the increasing influence of the “*Swedish Model*” (SM) or its newest variant, the “*Finnish Model*” (FM) on the other countries². This model was very much welcomed by different politicians of the region as a “lighter” alternative to the SM because:

1. The FM is not so radical as the SM,
2. The opinions are very much divided in the different countries of this region about the pros and cons of the SM, what makes the FM a good alternative for the moment, and
3. The FM could be a very appropriate instrument for the fight against trafficking in women, the main political argument nowadays to control prostitution.

In **Finland**, due to the new law of June 2006 there was an increased repression on street prostitution, which became almost nonexistent or very clandestine. There are now different means of looking for clients, because working on the street has become very rare. The police’s biggest problem is to figure out how this law can be implemented in practice, as well as for the clients to recognise who is a victim of trafficking or of pimping. Especially in pimping cases it will be difficult, because the definition of pimping is very broad and not commonly known among citizens.

Denmark is still very much divided about what to do, but the issue is not on the political agenda at the moment. **Estonia** and **Latvia** are also very much divided, yet the impression is that they will consider opting for the FM, mainly if one of them does, the other will probably follow very soon.

In **Germany**, just before the Soccer World Cup in 2006 there was a proposal on regional level, to create a similar version of the FM. This proposal will probably materialise on national level in 2007. The evaluation of the German Prostitution Law of 2002, which came out end of 2006, did not bring any change to the fact that sex work is recognised as an activity and sex workers have labour and social rights.

Lithuania criminalises both clients and of sex workers since 2005, with fines from 100€ up to 300€, and a possible imprisonment for 30 days. A major consequence of this act is the moral one: clients are more afraid of being caught with a sex worker than to pay the fine.

In **Norway**, due to the increase of African sex workers, the SM was once more heavily debated. Politicians might therefore opt for the FM as an alternative.

¹ www.statistikosdepartamentas.lt

² The “*Finnish Model*” criminalises the clients of sex workers who are victims of Trafficking in Women. This model is a different version of the so called “*Swedish Model*” which criminalises the purchase of sexual services entirely.

In the **UK** a “zero tolerance” policy has been adopted, which however does not go as far as the SM. The *Anti-Social Behaviour Orders (ASBO)*, used against street sex workers, can lead to imprisonment if not respected. Although brothels are illegal in the UK, England and Wales are proposing to allow two sex workers to work together legally. In Scotland there is a proposal to criminalise behaviour likely to cause nuisance, fear or offence while engaging in street prostitution which will be applicable to both street sex workers and their clients³.

Migration patterns in the NORTH

The Baltic countries did not become, as firstly expected, transit or destination countries. One of the reasons for this fact was that the majority of those who decided to emigrate – nationals of those countries as well as those from Russia, Ukraine or Belarus - migrate directly to the West or take other routes. Again, other than expected, very few take the route via Finland.

Some facts which characterise the migration pattern in the North Region:

- For Eastern Europeans the main routes to the West are through Poland, Czech Republic, Hungary, Austria and Germany, one of the reasons for the developed sex industry in the border areas of those countries.
- For those coming from Thailand, the main route to the North is through Germany, because of a quite consolidated Thai community and network in the country, which supports newcomers. The majority however fly directly to the destination country.
- For Africans the main route to the North is via Spain, Italy and Germany. The majority worked already in the sex industry in those southern countries, before moving on to the North.
- A great number of migrant sex workers have worked in the sex industry in their home countries and most of them have worked in another country before arriving in the one they are in at the moment. The main countries where sex workers have worked before are: Italy, Spain, Germany, the Netherlands and the UK.
- Those from the Baltic countries take different routes: if flying directly, the main destinations are: Denmark, Greece, Norway and Spain. If going by land, they usually go via Poland and Germany or Austria.
- One fact that was very much observed since the EU enlargement was that sex workers from Poland and the Baltic States are very mobile. Because of travelling facilities they come and go back to their home countries very often, within a short period of time.
- Sex workers from Russia, Estonia, Belarus and Ukraine arrive in Finland usually via Tallinn and/or via St. Petersburg and are very mobile on an international level, while sex workers from Thailand are more stable and when they move, it is within the country itself.
- Germany registers an enormous amount of mobility on national level. About 80% of migrant and national sex workers have already worked in another German

³ **UK:** Some consequences of the policy of “zero tolerance” which intends to reduce and eventually eradicate prostitution: there is less funding for sex work projects, with the majority of funding being directed at support to leave prostitution (street prostitution in particular). Little attention has been paid to the needs of migrant sex workers, who work indoors.

town before. However, only about 20% nationals have worked in another country, while about 60% of migrants have worked in another country before coming to Germany.

- Lithuania observed a new phenomenon also regarding internal migration: because many nationals migrated abroad, there has been a great mobility of sex workers from the interior travelling to bigger cities.

D6

Geo-political Report

Analysis and statistics regarding national and regional data from a cross border perspective: differences and similarities within the region

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

Most countries of the North Region reported a slightly increased migration of persons from the new EU countries after the EU enlargement in May 2004, which facilitated the mobility within the European Union. It became easier for “new” European citizens to work as self-employed in the countries where prostitution has been (semi-)legalized or regulated. It was reported that in Germany, for instance, the interest among sex workers in gaining their autonomy by registering as self-employed has been very strong.

The general pattern of mobility shifted along the EU border. There are reports showing that the mobility among sex workers has increased. Many of the Russian, Ukrainian and Belarusian sex workers have worked in other countries before entering the “old” EU member states, mainly in Poland, Czech Republic, Hungary and Baltic countries. For women from countries outside the EU, the situation has not changed: they still need a residence and a work permit to be able to work in the sex industry.

There is also a tendency showing an increase in the number of migrant sex workers in general, not only from the new EU countries or other CEE countries. Some countries of the North Region reported that due to that situation, competition has grown enormously. As a consequence of this fact, there has been a significant increase in offers of unsafe sex in different sorts of ads as well as clients’ demand for such services for greater pay. Because of the great social and financial pressures which, in general, most sex workers suffer, many projects observed that there has been some acceptance of this practice.

Due to this new reality, the World Cup in July 2006 in Germany brought with it the opportunity to develop *campaigns directed at potential clients* of sex workers. A campaign called **FairPlay**⁴ was created, which targeted men in promoting more respect for sex workers and safer sex practices. A network of GOs and NGOs carried it out on different occasions, in all the towns where matches took place. The activity

⁴ *Context*, an organisation in Berlin and Frankfurt/Main, developed the campaign. About 300,000 condoms and postcards in different languages were distributed during this period. The campaign was a success and many towns planned to continue this sort of approach after the World Cup.

consisted of distributing condoms and a postcard listing “*The ten golden rules for clients of sex workers*”.

Prostitution became a more openly discussed topic in some of the countries of the North Region, but because of media’s portrayal of the link between sex work, trafficking and victimization of migrant sex workers, the general attitude is either to “assist” and “paternalize”, rather than to empower and recognise the rights of sex workers. All countries of the North Region are starting discussions and changes in the legislation in regard to trafficking of women.

The greatest differences between the countries of this region consist in their prostitution policies, origins of sex workers and the social and health services available for sex workers.

- Policies go from criminalising sex workers and their clients, like in Lithuania, to the German law which recognises sex work as labour, passing by Finland where only clients of “victims” of trafficking and pimping are punished.
- The origin of sex workers vary according to the countries: EU-15 countries have a majority of migrant sex workers while the EU-10 countries of nationals.
- Regarding services, the EU-15 countries have a quite well develop network of social and health services providers for sex workers, while the Baltic countries still have very few, what hinders effective prevention activities and efficient services for sex workers.

The Baltic countries stand apart from the rest of the region: as EU ‘new’ members, these countries show the greatest diversification from the rest of the region. They are the entry points from the East – from Russia, Belarus and Ukraine – for persons wishing to go further to Scandinavia, Poland and the rest of Western Europe. These countries are also the ones with the least legislation and legalization of sex work, the greatest number of national sex work force (85%), and the least diversity among its migrant workers, who primarily tend to come from East European countries.

The sex industry is composed largely of women, with almost no men reported as working in prostitution. The number of women working in the streets in some of the countries is quite large, reaching up to 50% in Latvia.

Origins of migrant workers also differ by country. Denmark and Norway are seeing an increase in numbers of workers coming from West Africa (mainly from Nigeria), whereas Germany and Denmark are seeing an increase in the number of women coming from Poland. Countries like Germany, Denmark and the UK already have a large and established community of Asian sex workers, mainly from Thailand. And Germany has a significant number of sex workers from Latin America. Germany, due to its proximity to Poland, is experiencing a phenomena of ‘temporary-workers’, those who stay just a few weeks or months.

Other diversity regarding travel patterns: Denmark and Norway have a large migrant force entering through Germany. And Germany is often entered through Poland or the Czech Republic, one of the facts which explain the high quantity of brothels, clubs and street prostitution in the border area of those countries.

The Baltic countries have a long experience in working closely together because of their links in terms of politics, history and culture. Their status of new members also connects them into a closer partnership. The Scandinavian countries also have a history of cooperation in the issues of trafficking prevention as well as prostitution.

South Region: national prostitution mappings, legislation on prostitution, migration patterns

Bulgaria, Greece, Italy, Portugal, Romania, Spain

In all countries of the South Region national assessments were made on the national prostitution scene, migration patterns, policy changes and their impact on (migrant) sex workers. In order to achieve a comparable data collection on regional and European level, TAMPEP used a methodology which was already used with success in previous phases. Four questionnaires were developed in total (Prostitution Mapping, Migration & Mobility, Service Mapping and Needs Assessment) with the purpose of - based on the information they would provide - achieving a complete overview of the prostitution scene in Europe. Questionnaires Prostitution Mapping and Migration & Mobility were the 2 sources of information for the present work package. They were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level.

Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national mappings were developed and finalised. Moreover, indicators for the migration and mobility patterns study were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in prostitution through gathering of qualitative and quantitative data within the network of 24 countries. More precisely, this entailed carrying out national mappings, i.e. collecting data on the national prostitution scene, sex workers situation, living and working conditions, population and the different communities of sex workers and their nationalities, mobility, policy changes and their impact on migrant sex workers. These national assessments allowed to compare the results on regional level and to make an assessment of common legal tendencies of the Region as well as the common consequences of these tendencies. Lastly, the objective of the Prostitution Mapping and of Migration & Mobility was to identify the migration patterns in prostitution in the South. Migration patterns assessment entailed collection of data on composition of the population of sex workers, gender, nationalities, working place, the percentage of migrants and national sex workers, mobility patterns and cross-border movement.

Further on, in each region we focus on a particular migration flow. For the countries of the South it was the influx of sex workers from the **Balkan countries**. This is carried out in order to attain a specific element of qualitative analysis.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report only a short summary of the results is provided. The complete product is available in the *European Overview of HIV and Sex Work and 7 Case Studies of Country Reports*. Nevertheless, the geopolitical report below presents the essence of the analysis of combined results from both the interim and final assessment on the current trends in the Region.

Questionnaires and the Mapping Final Report form as well as national forms and a more detailed regional report are available on request.

Country	Major Group	Origin	Major Work Place
Bulgaria	90% Bulgarians	50% of Bulgarian sex workers are Romas and from a Turkish minority. Migrants: Eastern Europe, Balkan countries	55% indoor. Increased indoor work
Greece	80% migrants	40% Eastern Europe, 25% Africa, 20% Balkan countries, 10% Central Europe, 5% Baltic countries, North and Latin America, Asia. There are 36 nationalities present. New groups from Africa: Congo, Ethiopia, Eritrea, Nigeria, Ghana	60% outdoor 40% (20% brothel) 70% of the migrants work indoor
Italy	80% migrants	35% Africa 25% Latin America, 20% Eastern Europe, 10% Balkan countries, 10% Central Europe, New: increase of women from Rumania and Moldavia. Chinese in massage parlours.	55% outdoor
Portugal	60% migrants	45% West Europe, 20% Africa, 15% Latin America, 10% Central + Eastern Europe, 5% Baltic countries, 5% Asia	70% outdoor
Romania	95% Romanians	Large number of Roma among Romanians Migrants: mainly from Moldavia	55% outdoor: 40% street, 15% borders area
Spain	70% migrants	70% Latin America, 15% Africa, 15% Eastern Europe	90% indoor
Main countries of origin in the SOUTH		Ukraine, Nigeria, Romania, Brazil, Russia	
WORKING CONDITIONS			
What percentage have worked in another country before		Nationals 25%	Migrants: 31%
Where do sex workers work		General %	Migrants %
City street		42	41
Highways and roads (border areas)		10	3
Brothels		4	9
Apartments		17	18
Clubs + Bars		19	27
Massage Parlours		5	1

Windows	-	-
Escort	2	1
Others	1	.
Total INDOOR	47%	56%
Total OUTDOOR	53%	44%

Prostitution Mapping – Common trends of the South Region

- Majority of sex worker population in South Regional countries are migrants, except Bulgaria and Romania where the majority of sex workers are natives with a large percentage of the Roma.
- The most common working place in Greece, Italy and Portugal is the street, although recently a general increase of indoor prostitution (due to continuous police raids) has been noticed in these countries. Other reasons for this change can be attributed to legislations against soliciting clients - in Spain in the city of Barcelona. Other reasons for moving indoor are the aggressions and violence against sex workers.
- Migration and prostitution laws have very negative effects on the working and living conditions of migrant sex workers. In Bulgaria, for example, no changes have been introduced in the law with regards to prostitution but women are still being pimped or trafficked. In Greece, the new migration law and presidential decree prohibits the access of illegal migrants to public health services. In Italy, from 2002 to 2005, a much criticized immigration law worsened the condition of sex workers. In 2006, although the new government is taking into consideration a new immigration law in favour of migrants in general, debate over prostitution law is oriented towards punishing clients and repressing migrant sex workers.
- There is an increased mobility of migrant sex workers who report to have worked in other countries. 40% of Romanian sex workers have worked in Cyprus, France, Italy, Spain, Germany, Greece, the U.K. and Switzerland. In Portugal, there is an increase of migrant sex workers from African, Eastern European and Latin American countries who have worked in Spain, Italy and Holland. In Greece, there is a significant increase of African girls, which is mainly due to the new routes criminal organisations have adopted. The mobility of the sex workers in the South has the specificity of seasonal mobility related to the tourist season and tourist areas in Italy, Spain, Greece, Portugal and the Black Sea.
- Internal mobility within working countries is frequent: migrant sex workers tend to work seaside resorts during the summer and move to bigger cities and ski resorts during the winter. Migrant sex workers from former URSS who are present in small numbers in Bulgaria and Romania work during the summer in all seaside resorts in these countries as tourism is markedly on the rise.

Impact of the legislation on prostitution and on living and working conditions

Notwithstanding the diverse approaches to prostitution in the region there are still some very similar developments. There is a general tendency of the governments of the South Region countries to adopt new legislation on trafficking. In most countries, women who are victims of trafficking now have special rights. Although legislation

in almost all South partner countries foresees a residency permit for a defined period of time for the victims of trafficking, (generally three months, until collaboration with law enforcement orders is over) it does not allow any prospective of obtaining residency permit for permanent stay.

Reports show that there is an increased tendency towards indoor prostitution. Even though in comparison to the other European Regions, street prostitution is very common in the south, prostitutes now tend to work indoors more frequently. Different reasons account for this: frequent police raids, increase of violence on the streets, set up of video cameras in some Italian cities aimed at discouraging clients.

Bulgaria – Prostitution in Bulgaria is neither legal nor criminal. However, the penal code treats the persons who organise the activity of prostitution or provide the venue for prostitution as a criminal. A new decree establishes heavier penalties that range from 3 to 12 years when the victim is less than 18 years of age or when the victim has been abducted to commit acts of debauchery and, even more severe, when the purpose of abduction is to commit acts of debauchery outside the country. Another step undertaken by Bulgarian legislation towards protecting the victims of trafficking is the decree for witness protection; adopted in 1997, article 97a of the Criminal Code, which guarantees that the identity of a witness will be protected in cases when the life or limb, health, or property of a witness is endangered.

In the past two years, the criminalisation of the possession of drugs has led to a drastic increase in the number of drug-overdose deaths among sex workers. Therefore, drug-using sex workers have become evermore covert or hidden, with their access to health services being significantly hindered. As well, it has become more difficult to reach out to them with services. Within the last two years, the Bulgarian Ministry of Health has recognised the significance of sex workers as a group that should receive primary care and services. The national Programme for the Prevention and Control of HIV/AIDS, funded by the Global Fund, has a separate component that addresses HIV-prevention among sex workers. In Bulgaria, indoor prostitution is managed by organised crime which opens illegal brothels called “office” where 3-5 women work in shifts.

Greece – There has been no change in the prostitution law. Prostitutes can work only in brothels. Any other form of prostitution is illegal. The licence for the brothel is issued only to a person who has a certification for practicing prostitution and only if the owner agrees. Tests for STDs, TB, and mental diseases are obligatory every two weeks. Sex workers must not be married. Greece signed the UN convention against transnational organized crime and the optional protocol on trafficking. The law provides for the imprisonment of convicted traffickers. A presidential decree, issued for aiding victims in August 2003, provides shelters and co-operation with NGOs. The law has been badly criticized by the NGOs and even the police say, “it cannot work”. Women that are victims of trafficking have special rights. They are entitled to a residence permit until the start of legal proceedings in order to decide whether she wants to act as a witness.

During this period (three months) she is given medical assistance, support and shelter. Until now, no official State service is considered to be responsible for their support. A change of the law is proposed through appropriate provisions in the new law on immigration. Since February 2005, all civil servants (including doctors), when confronting a foreigner, have to ask for his/her papers and with the exception of emergencies, following this decree, public services are simply not provided to undocumented sex workers. This provision is not yet widely applied, but the

Ministry of Health, despite the great outcry against this provision, still insists on its strict application. This has created a problem for public health since the migrants are afraid to contact health services.

Illegal migrant sex workers have no access to medical aid with the exception of NGOs; they work in an unsafe environment and under the fear of the police. With the new ministerial decree for medical assistance to foreigners, the situation is deteriorating. Prostitution takes place in bars, in the streets, in the hotels or by way of newspaper advertisements or mobile phones. The nationalities of the newcomers in the sex industry have changed lately, with an increasing number of women coming from Africa, especially Ethiopia, Eritrea, Nigeria and Ghana. These groups are also moving through this country to Italy or to Spain. The exclusion to HIV testing and care is particularly dangerous as the groups are coming from Sub-Saharan region with endemic HIV prevalence.

Italy - In Italy, change to the law on prostitution is being discussed but has not yet been approved. There are several tendencies that have come to the forefront, but despite the intense pressure of the prohibitionists, it does not seem possible that the government's proposed prohibitionist decree of law shall pass. However, in many cities the mayors, through municipal decrees, are fighting against street prostitution by imposing fines on the clients, and the police are systematically rounding up the women. In 2003, severe sentencing under the law that punishes reducing a person to a state of slavery, together with the law against the trafficking of human beings, have proven to be effective means to identify and to officially embrace these victims. Currently, there is an increase in the scale of hidden prostitution (prostitution occurring behind closed doors) in order to evade police roundups. At the moment, in many cities there is an elevation in the number of women coming from Romania. Among the immigrant women that come from East Europe, the Romanian women are the most numerous due to the fact that they can travel free through the EU countries and are still able to work on the streets without the risk to be repatriated. It is important to notice that the labour migration to Italy from Romania is a significant phenomenon. Whilst there has been a notable fall in the number of Albanian women, (the massive exodus from Albania to Italy has stopped by different policies, including stricter border control), the presence of Nigerian women remains stable (due to the high presence of the Nigerian community legal in the country). The free movement possibility of the new EU citizens has resulted in high patterns of mobility of sex workers from these countries, with alternating periods of active work and long periods of re-entry in their homelands.

A particularity of the Italian article 18 of law 286/98, which permits women victims of trafficking to denounce their traffickers and pimps and receive protection, is that victims of trafficking have the possibility of remaining on the territory even after collaborating with the law force. A second important effect of this law is that sex workers have gained more bargaining power for higher earnings with their agents or pimps and so can demand to keep more money instead of turning them in to the police.

Portugal – Since it ratified the UN Convention on the elimination of all forms of discrimination against women in the early nineties when there was much concern over prostitution, not much has been done to favour national sex workers. Although voluntary prostitution is not a crime, prostitution is not recognised as a profession. On October 10, 1991, a new law n. 49/91 condemned the trafficking of human beings and the exploitation of prostitution. In regards to legislation on prostitution there

were no changes. A proposal to legalise prostitution did not result in any changes. Some modifications in the domain of the human trafficking with purpose of sexual exploitation did take place. The objective of these changes was more efficient combating of the trafficking nets. There was also greater concern given for the victims – protection, psychological, social and legal support. In the process of elaboration is a proposal of attributing a visa of authorization of residence for the victims who collaborate in dismantling of the existing nets. Considering that the majority of victims are in illegal situation in Portugal, such a legal regulation would avoid the process of involuntary repatriation.

Romania - In Romania prostitution is punished through the penal code; prostitution is illegal and the *public morality* is against it. The primary effect of the legislation is therefore the difficulty to reach and offer specialised assistance to people who are involved in commercial sex. Secondly, the illegality of prostitution is closely linked to lack of protection and sometimes even abuse from police. Street sex workers are already very exposed to violence and abuse although there is a pimp in the area all the time. But in addition, the Police is among the perpetrators of abuse against the sex workers. It is common for the women to receive penalties from the police even if they just stay on the street and they are not seen with the client. The penalties are rather high which is why the commercial sex workers hardly ever pay them and after a while these penalties are converted into jail days. If the police catch a sex worker while having sex with a client, they make a penal file and might even send the woman to jail.

In Romania prostitution is associated with injected drug use, especially heroin. Many sex workers are addicted to heroin. For most, heroin use was what leads them to prostitution because they were in need of money for buying the daily dose of drug. This makes out of the sex workers double offenders of crime: prostitution and drug use. This is the primary reason why they are afraid to go to a public hospital or to ask for help when they are abused. In these circumstances trafficking develops easily. The pimps buy and sell the sex workers one from another. They also convince the women to migrate outside Romania. Most sex workers were at least once in a foreign country for 3 months (especially old EU countries). They are usually accompanied by the pimp or by a middle man.

A particular remark on Romania's sex industry is that, although many brothels do exist, they are available only for high class sex workers or exclusive clients. All the same, it is reported that prostitution is still very visible on the streets but, it is very difficult for service providers to reach prostitutes as public morale is opposed to prostitution.

The policies on criminalisation on individual behaviours (sex worker and drug use) are in opposition with public health interest and HIV prevention measure. The only provision of services is developed by NGO. Thanks to the financial provisions of the Global Fund, the local outreach teams succeeded to offer medical, social and psychological assistance to commercial sex workers who don't "dare" to seek help in public hospitals.

The main activities of the outreach workers were HIV/AIDS prevention, sterile equipment for heroin injections, condoms, medical check-ups, psychological and social assistance, informative materials, referrals to other medical and social services. There was also collaboration through the Global Fund with SECS (The Society for Sexual and Contraceptive Education); they were offering free testing for HIV, HBV, HCV, syphilis, gynaecological check-ups and treatment for STIs. The impact of the

repressive system is opposite to the efforts for prevention and care. Also the practice of using testing results for collecting evidence against sex workers is a barrier to access to prevention measures.

Spain – There is no specific law on prostitution. Legal provisions on the topic exist in the Spanish penal code and in the immigration law. These regulations affect migrant sex workers, as majority of sex workers are immigrants. Spain had an abolitionist stance on prostitution until 1995 when the Spanish parliament approved a new law in the penal code which considered crimes related to sex work as crimes against sexual liberty and prohibited sexual exploitation. It also decriminalised several activities linked to sex work: abetting, indoor prostitution, soliciting in bars and other closed areas, taking appointments, putting adverts in newspapers which were considered until then as sexual exploitation. In 2003 a new law on citizen's security, domestic violence and social integration of foreigners annulled the decriminalisation act of the previous law.

This new law, still in force, also introduced repressive acts against all those who draw benefit from persons (mostly migrants) who are in a vulnerable situation. Additionally, immigration policies tend to restrain legal access to Spain and render the regularisation of immigrants nearly impossible, even for those who have a job. As a consequence, the number of migrant sex workers who find themselves in an irregular administrative situation have increased. They are the most penalised and are subject to severe police persecution, stigma and other factors of vulnerability. With the advent of a new government in 2004, little or nothing has changed. The new socialist Prime Minister introduced an extraordinary regularisation norm for migrants in 2005 which stayed in force for only three months. This law permitted all irregular immigrants to regularise their position in Spain through a work contract. Migrant sex workers could not in any way benefit from this special norm given that prostitution is not considered a job. The 2003 law actually does not address the regulation of sex work in general as it considers almost all sex workers to be victims of trafficking. This has led autonomous regions like Catalonia to issue specific norms against soliciting in the streets hence favouring indoor prostitution. In the Castilla region, for example, indoor prostitution population is made up mostly of native sex workers. 80% native sex workers work in clubs while 20% in pubs, bars and saunas or private homes. On the other hand 90% migrant sex workers work on the streets. They come from Africa (Nigeria, Liberia, Sudan and Sierra Leone), Latin America (Brazil, Ecuador, Peru, Panama, Argentina), East Europe (Romania, Albania, Bulgaria, Russia). Only a small percentage comes from Spain.

Since 2004 when street prostitution became a crime, police raids against migrant prostitutes have increased. Migrant sex workers face other vulnerable situations such as racism, poor knowledge of Spanish, isolation due to fear and mistrust of street operators from associations.

Migration patterns in the South

Migrant sex workers in South Regional countries account for 60% of the total sex workers. This is partially true as majority migrant sex workers are present in 4 out of the 6 South Regional countries the exceptions being Romania and Bulgaria. The phenomenon of migrant sex workers is reportedly low in Bulgaria, only 10%, while it is almost inexistent in Romania. Main nationalities of migrant sex workers include: Ukraine, Nigeria, Romania, Brazil and Russia.

Most countries in the southern region witnessed a vast migration inflow and outflow in the sex worker population. In Romania and Bulgaria the majority of the sex workers are nationals that migrate significantly in and out of the country. Approximately 40% Romanian sex workers and 30% Bulgarians have worked in a foreign country for at least a period of 3 months, primarily in old EU countries and above all with the purpose to earn more money. There is a very small group of transient sex workers, 2% in Bulgaria, which includes exclusively women from the ex-Soviet Union countries – former Soviet Union, Ukraine, Moldavia.

New trafficking routes are drawn up and this accounts for the presence of diverse nationalities in southern regional countries. Italy, Spain and Greece and in some cases Portugal are the principal entry routes for African sex workers, mostly Nigerians. These countries have subsequently become receiving and transient countries as some migrant sex workers remain in their first country of arrival while others move onwards to other north European countries.

New routes towards Greece include trips starting from Nigeria through Libya and Turkey while Ethiopians travel from Addis Abeba through Lebanon and Cairo or as an alternative Addis Abeba, Israel, Syria and Turkey.

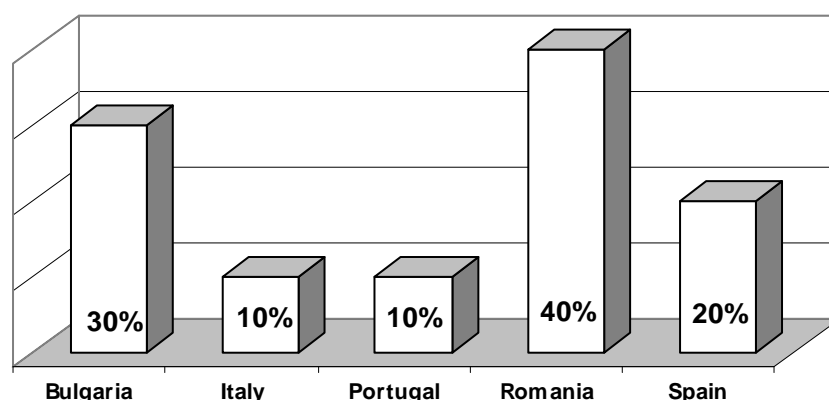
Eastern Europeans, mostly from Bulgaria and Macedonia, come to Greece by coach. Another route is from Africa to Spain – a journey by boat from Morocco, Sierra Leone and Nigeria. While the Africans first arrived in 1994, East European and Latin American women start coming end of the 90s, around 1998-99.

The particularity of the new migrants in prostitution in the all region is the young age and the intention of only short term migration. The average age of Nigerian sex workers is 22 while for the Eastern Europeans, 23. Data collected by *Hetaira*, a sex work project in Madrid, the city with the highest number of migrant sex worker, states that only 5% migrant sex workers are controlled by criminal networks; 85% choose to work on the streets autonomously and the remaining 10% are protected by “friends” who however exert power over them.

There has been a significant turnover of the nationalities of sex workers that are present on the Italian sex market scene. Between 1995 and 2000 Albanian women were the majority on the streets but with the issuance of the 1999 anti-trafficking law their numbers started reducing as many women adhered to protection programs while several others moved to North Europe. They were subsequently replaced by Romanian sex workers who actually represent the highest group of immigrant women from Eastern Europe. The presence of Nigerian women remains stable.

Portugal is mostly a second destination country as most African sex workers migrate to Spain as a first destination country. Among East European sex workers in Portugal, Romanian constitutes the majority followed by Croatians and Albanians. There are also many immigrant women from the new European Union, which have an elevated rate of mobility, alternating periods of active work with long periods of re-entry in their homelands. This is mainly due to the EU enlargement the ease to cross borders which has encouraged the prospect of higher earnings in Western Europe for several migrant sex workers who later invest in trade business in their country of origin.

Percentage of NATIONAL sex workers who worked in another country



Origin	Percentage	Destination country
Bulgaria	30%	Norway, Germany, The Netherlands, France
Romania	40%	Italy, Spain, Germany, UK, Cyprus, Switzerland, France
Portugal	10%	Spain
Spain	20%	Italy, France, Portugal, Holland
Italy	10%	Switzerland
*Greece	insignificant percentage of nationals	

These tables show how high is the number of Bulgarian and Romanian women with trans-European mobility patterns, in difference with the national sex workers in the other countries. The mobility patterns of migrants in Italy, Portugal, Spain and Greece are very high, more than 50% worked in another country.

MIGRATION PATTERNS FROM BALKAN COUNTRIES

At the end of the last century the tragic history of the Balkan countries resulted in abrupt reconfigurations to the national borders of some of these countries, which resulted in waves of migrations within and outside the zones that were struck by violent political and social upheavals. In the last twenty years we have seen modifications to the migratory routes, which have been dictated by the eventualities of politics, war, post-war malaise, bilateral and European political accords, and the definition of new borders. Herein there is not enough space for a detailed historical analysis of this phenomenon, but it is certainly worthwhile to record some of the most significant passages.

The break-up of the former state of Yugoslavia erupted in the outbreak of several wars; therefore, many people sought refuge in neighbouring countries. It was during that period that we witnessed the arrival of many women from ex-Yugoslavian regions, prevalently from Serbia, Macedonia, and Montenegro, to work as sex workers, a trend that lasted for years. We saw many women, often adults and very worldly, enter prostitution. Either alone or together with their families, these women became refugees in nearby countries. The choice of country was often based on the support that could be offered by relatives already residing elsewhere in another European country. During the time of the war in Yugoslavia, these women could

count on official recognition as refugees in Italy. Between '95 and '96 we recorded that the women in the street from former Yugoslavia were the 3rd largest group, after Albanian and Nigerian. However, the primary impetus for this migratory wave was the war and ethnic conflict.

Later on, because of the total economic and political collapse that occurred in Albania, we saw movements of displaced persons in large numbers and, in particular, women washed up on the shores of Greece and Italy to enter the sex market, either willingly or forcibly by their fiancés. How can we not remember the ships teeming with migrants that arrived day after day in the ports of Apulia (*Puglia*) or the Italian speedboat smugglers who gave a helping hand to the Albanian, after having abandoned the less lucrative black-market trafficking of cigarettes? The war in Kosovo completely redesigned the profiling of migrant prostitutes. At that moment, Albania had become the country of transit for many women, often very young, which also included the women coming from the new Balkan States and the ex-Soviet republics.

Based on our observations of 2005/2006, we now see how migratory routes and patterns have emerged during these first years of this new century. Right now, with the enlargement of the EU, for certain citizens of East Europe it is very easy to arrive in the West with a tourist visa and/or as new EU citizens. However, the routes of immigration of our target are still greatly variegated and are somewhat difficult.

In many prosecutorial and police reports, it is highly stressed how very well networked and collaborative the criminal groups are in spiriting people over national borders throughout Europe and Asia. For those coming from the Ukraine, Moldavia, or Romania, the classic migratory route is through the countries of Serbia, Montenegro, and Albania, with subsequent arrival in either Italy or Greece. For those coming from Albania the classic migratory route is the most obvious, which is by way of the Otranto Canal, from Valona to the Apulian (*Pugliesi*) coast in Italy, or by car going directly to Greece.

Without doubt, the status of Romania and Bulgaria as new-member states of the EU will in time yet again influence a change in the routes of both clandestine and legal immigration; however, at the moment of this report, we still witness basically the same situation of 2005 and 2006.

After 2003, in Albania there has been a decrease in the number of departures for prostitution. In fact, in 2005 there has been an estimated reduction of at least 20%. The travel routes most followed remain principally passage towards Greece, with Italy in second place, countries of transit for later arrival in Belgium, France, Germany, Norway, and the United Kingdom, and, in lesser number, Croatia, Macedonia, Poland, and Switzerland. Whilst awaiting new passage to other EU countries, many women that have been repatriated stay there and work as prostitutes in Albania.

In fact, it seems that Greece serves as the country of transit for most Albanian women towards other EU countries, once they are armed with Greek documentation. The old route through Valona (*Vlora*), which up to 2002 was a principal staging point for the traffickers, has been overtaken by passage to Greece, even for the women from other Balkan countries, which involves travel from Russia through Serbia to Italy, women from Kosovo and Macedonia to Albania and from there to Greece, and after a period of work in Greece (the time to procure documents) and from there, usually Athens, to other northern EU countries. Facilitating anyone who wants to migrate and accepts being smuggled is the intense traffic in the corridors

from the West to the Southeast and from the Northwest to the East, where thousands and thousands of trucks and buses daily pass the borders.

A new trend manifests in our sex workers target. Whilst in the past, the women had long-term migratory goals; they now arrive with short-term migratory goals. The new trend is to make money fast, go back home, and then come back again, often bringing with her a new friend who is then taught everything she needs to know about the job. Sex work is one of the opportunities in the informal work trade, like housekeeping, but it is much more remunerative.

As one can see in the TAMPEP report, certain countries of the southern region have a strong presence of Balkan women. In **Greece**, the bulk of the migrant sex workers are women who come almost exclusively from Eastern Europe; namely Ukraine, Poland, Russia, Bulgaria and Albania. In **Italy**, the biggest group after Nigerian women are Romanian, Moldavian, Albanian, and Ukrainian, Russian, Serbian, and Macedonian women. However, there are lesser and lesser numbers of Albanian women working in Italy, and we would like to stress that prostitution markets are now busy and open in Albania, Kosovo, and in other states of the former Yugoslavia.



Geo-political Report:

Analysis and statistics regarding national and regional data from a cross border perspective: differences and similarities within the region

Bulgaria, Greece, Italy, Portugal, Romania, Spain

It is striking that in a region with such diverse approaches to prostitution there are still some very similar developments. While in Romania the prohibitionist attitude to prostitution prevails (one of the few countries in the EU where prostitution is considered a crime and punished by the penal code), in Greece there is a regulatory system, in the sense that sex workers must register in order to work in brothels, whereas in Bulgaria, Italy, Portugal and Spain there are abolitionist tendencies. Regardless these differences, all these countries are adopting new legislation on trafficking. In most countries, women who are victims of trafficking now have special rights.

Although legislation in almost all South partner countries foresee a residency permit for a defined period of time for victims of trafficking (generally three months, until collaboration with law enforcement is over), it does not allow any prospective obtaining residency permit for permanent stay. In Greece for example, the three-month residence permit entails basic services until the start of legal proceedings in order to decide whether the victim wants to act as a witness or not. A particularity of the Italian article 18 of law 286/98, which permits women victims of trafficking to denounce their traffickers and pimps and receive protection, is that victims of trafficking have the possibility of remaining in the territory even after collaborating with the law force. A second important effect of this law is that sex workers have

gained more power to bargain their earnings with their agents or pimps and can demand to keep more money instead of turning it into the police.

Reports show that there is an increased tendency towards indoor prostitution. Even though in the south street work is the more common form of prostitution vis-à-vis the other regions, prostitutes in the southern countries now also tend to work indoors. Different reasons account for this: frequent police raids, increase of violence on the streets, set up of video cameras, in some Italian cities aimed at discouraging clients. In Bulgaria, indoor prostitution is managed by organised crime which opens illegal brothels called “office” where 3-5 women work in shifts. In Spain, the strong prohibitionist approach that was applied in the big cities has caused a significant number of prostitutes to move indoors, where sex workers have a contractual conflict with the management of the bars and locals. Currently street prostitution accounts only for 5%.

A particular note is that many brothels do exist in every country and from a top- to a low level brothel, mostly are illegal, except for Greece. In Romania top level brothels are available only for high class sex workers or exclusive clients. Though it is reported there that prostitution is still very visible on the streets, it is very difficult for service providers to reach prostitutes as public morale is opposed to prostitution.

In general every country has discussions on the topic of the utility of harm reduction projects but there's a lack of application of this practice interventions, an example is Italy where the effort in these policies is reduced; more effort is seen in Romania and Bulgaria thank to the AIDS Global.

Most countries in the southern region witnessed a vast migration inflow and outflow in the sex worker population. In Romania and Bulgaria the majority of the sex workers are nationals that migrate significantly in and out of their own country. Approximately 40% Romanian sex workers and 30% Bulgarians have worked in a foreign country for at least a period of 3 months, mainly in EU countries and primarily due to hopes of higher earnings. Rumania and Bulgaria are not attractive as a destination country for the migrants from the neighbouring countries, as for example the countries of Central Europe. Rumania and Bulgaria are up until now strong emigration countries. There is a very small group of transient sex workers, 2% in Bulgaria, which includes exclusively women from the ex-Soviet Union countries – former Soviet Union, Ukraine, Moldavia. In the new geopolitical situation of these countries as new EU members it is possible that the situation changes and they do begin receiving migrants.

In every country of South we observe a certain percentage of transient women working for a short time who later on move to another country. There is a very small group of transient sex workers, 2% in Bulgaria, which includes exclusively women from the ex-Soviet Union countries – former Soviet Union, Ukraine, Moldavia. In Greece Balkans women work for a while before to move to Italy and North Europe. We see a tendency of increasing of this phenomenon.

New trafficking routes are drawn up and this accounts for the presence of diverse nationalities in southern regional countries. Italy, Spain and Greece and in some cases Portugal are the principal entry routes for African sex workers, mostly Nigerians. These countries have subsequently become receiving and transient countries as some migrant sex workers stay in their first country of arrival while others move to other north European countries.

There are also many immigrant women from the new European Union member or associated States, which have an elevated rate of mobility, alternating periods of

active work with long periods of re-entry in their homelands. In many cities currently there is an increase in the number of women coming from Romania who represent the highest group of immigrant women from Eastern Europe. In Portugal Italy and Spain the women from the enlarged Europe States are not only working in the street but sometimes involved in regular jobs as dancers and entertainers in situations where sex work is included as practices. This sort of legal job gives the possibility to do sex work on a semi-legal status but there's no space for the women to discuss the agreement with the employer due to the fact that sex work is still a semi-illegal condition. The club owners and managers still exercise a very strong power over the sex workers everywhere where the rights of sex workers are not recognised.

Whilst there has been a remarkable fall in the number of Albanian women, the presence of Nigerian women remains stable. Portugal is mostly a receiving country as most African sex workers migrate from Spain.

Work package n° 8

East Region: national prostitution mappings, legislation on prostitution, migration patterns

Austria, Czech Republic, Hungary, Poland, Slovakia

In all countries of the East Region national assessments were made on the national prostitution scene, migration patterns, policy changes and their impact on (migrant) sex workers. In order to achieve a comparable data collection on regional and European level, TAMPEP used a methodology which was already used with success in previous phases. Four questionnaires were developed in total (Prostitution Mapping, Migration & Mobility, Service Mapping and Needs Assessment) with the purpose of - based on the information they would provide - achieving a complete overview of the prostitution scene in Europe. Questionnaires Prostitution Mapping and Migration & Mobility were the 2 sources of information for the present work package. They were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level.

Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national mappings were developed and finalised. Moreover, indicators for the migration and mobility patterns study were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in prostitution through gathering of qualitative and quantitative data within the network of 24 countries. More precisely, this entailed carrying out national mappings, i.e. collecting data on the national prostitution scene, sex workers situation, living and working conditions, population and the different communities of sex workers and their nationalities, mobility, policy changes and their impact on migrant sex workers. These national assessments allowed to compare the results on regional level and to make an assessment of common legal tendencies of the Region as well as the common consequences of these tendencies. Lastly, the objective of the Prostitution Mapping and of Migration & Mobility was to identify the migration patterns in prostitution in the East. Migration patterns assessment entailed collection of data on composition of the population of sex workers, gender, nationalities, working place, the percentage of migrants and national sex workers, mobility patterns and cross-border movement. Further on, in each region we focus on a particular migration flow. For the countries of the East this was the influx of sex workers from East European countries. This is carried out in order to attain a specific element of qualitative analysis.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report only a short summary of the results is provided. The complete product is available in the *European Overview of HIV and Sex Work and 7 Case Studies of Country Reports*. Nevertheless, the geopolitical report below presents the essence of the analysis of combined results from both the interim and final assessment on the current trends in the Region.

Questionnaires and the Mapping Final Report form as well as national forms and a more detailed regional report are available on request.

Country	Major Group	Origin	Major Work Place
Austria	80% migrants	70% CEE, 15% Latin America, 15% Africa	75% indoor Outdoor: 15% street, 10% border area
Czech Republic	65% Czechs	70% Eastern Europe, 20% Central Europe, 5% Balkan + Baltic countries, 5% Asia, Africa, Latin America. 28 different nationalities.	70% indoor Outdoor: 10% street, 10% border area
Hungary	80% Hungarians	50% Balkan countries, 35% Eastern Europe, 10% Central Europe, 5% Asia + Africa. High number of Roma among Hungarians	65% indoor Outdoor: 35% street, 15% border area
Poland	70% Polish	Migrants: mainly from Ukraine, Russia, Belarus, but also Bulgaria, Moldova, Romania	89% indoor Outdoor: 10% street, 20% border area
Slovakia	95% Slovaks	Migrants: Ukraine and Russia. High number of Roma among Slovaks	70% outdoor: 20% street, 50% border area

Main countries of origin in the EAST **Ukraine, Russia, Romania, Bulgaria, Belarus.**

WORKING CONDITIONS

What percentage have worked in another country before	Nationals 29%	Migrants: 26%
Where do sex workers work	General %	Migrants %
City street	21	8
Highways and roads (border areas)	20	12
Brothels	28	22
Apartments	16	8
Clubs + Bars	8	14
Massage Parlours	4	2
Windows	1	3
Escort	2	27
Others	-	4
Total INDOOR	59%	76%
Total OUTDOOR	41%	24%

Prostitution Mapping – Common trends of the East Region

- There have been significant consequences of the EU enlargement within the East Region. The majority of the countries now are **countries of origin, transit and destination**.
- Due to being new countries of destination, there is an **increased East-East-migration** that takes place inside the region. This new reality is not met with an adequate **infrastructure**. There is a lack of support offers in the health/social area for the new target groups.
- The increased mobility in the region is not only a result of increased needs. Mobility in general increased following the EU enlargement as **new possibilities** of travelling to other European countries without entry or stay visa requirements became accessible.
- The EU enlargement intensified especially the **impact of migration/mobility from the new EU countries to Austria** (the only old EU member in the region). Due to the non-formalised character of prostitution in Austria (not part of the formal labour market), citizens of new EU countries now have easier access to work in prostitution as they no longer require any kind of visa or work permit as prostitutes (through the possibility of being self-employed)⁵.
- In some areas of the region, there is an increase in prostitution in **border regions**. In these areas, there are no (support-) services available and (migrant) sex workers are in a very vulnerable situation.
- The majority of migrant sex workers in the East Region are from **CEE** and the **Balkan countries**. Austria is an exception with a large number also of African and Latin American migrant sex workers.

⁵ Prostitution in Austria can only be conducted as self-employed work and currently new EU-citizens may only work as self-employed workers. Before the EU enlargement they needed a permit of stay in Austria and a special visa was issued to non-EU-citizens who were working in prostitution (still as self-employed workers). Now, they are not required to have a permit to stay (due to being EU citizens), but may not work as employees leaving self-employment the only solution. Additionally they may register (due to the system of regulation) as prostitutes.

- There is a notable increase in **Roma-women** who work in the sex industry throughout the region. Also, there is an increasing number of African sex workers.
- **Migrant sex workers** are still a **minority** in the **new EU countries**. In Austria – (the only old EU partner) – migrant sex workers continue to be the majority.
- Regarding the work places, in all five countries prostitution is performed mainly **indoors**.

Impact of the Legislation on prostitution and on living and working conditions

The legal frame in all countries of the East region is ambiguous. Activities around prostitution are regulated (prohibition areas etc.), sex work is tolerated and controlled (obligatory health exam in Hungary and Austria, registration in Austria etc.). At the same time, prostitution is not recognised as work and sex workers face harassment and legal prosecution due to a diverse number of repressive regulations.

There were 3 main legislative changes during the TAMPEP VII period in **Austria**:

- 1) **Prostitution legislation in Austria is regulated by the provinces. A new Viennese Prostitution Law has been implemented in May 2004.** Prostitution – under the new Viennese legislation – is still related to morality and “good manners”. The changes were among others: the introduction of new “protection zones” (where prostitution is not allowed); stricter execution/control of existing “protection zones”; additional rights for executive authorities (“entry warrant” for buildings, apartments etc. in case of “substantiated suspicion” that illegal prostitution takes place, without prior legal order; fines for owners/landlords of apartments etc. where “illegal prostitution” takes place respectively for those who do not prohibit or report those activities; explicit mention of the mandatory health controls for sex workers (already regulated by national laws) – cementing the controlling aspect and approach of this new legislation. Also, the “land security legislation” (*Landessicherheitsgesetz*) now includes a new regulation potential clients can be reported and fined for unsolicited invitations to or requests for sexual acts. It is unclear how this is implemented in practise.
- 2) **A reform (2003) of the asylum legislation came into force on May 1st 2004.** The new regulation is a massive backlash and also affects asylum seekers who work in the sex industry. It foresees (among others) an acceleration of the asylum process (by shortening appealing proceedings) and deprives the affected persons of basic rights while at the same time expanding the possibilities of state interventions. One of the (positive) measures of the new law(s) is the provision of (minimum) state care for asylum seekers; referring to shelter and food. The implementation of this regulation proves difficult though in the different provinces because of disputes over (financial) competence (federal/provincial). The care services translate into an amount of EUR 290 per person and per month. All the while asylum seekers do not have access to the formal labour market, no matter how long their asylum process might take. Since January 2005, a new practise is exercised: registered sex workers (their data had been collected and exchanged) have to provide a valid tax number in order to receive the money. They further have to sign a statement declaring the amount of their monthly income. If it exceeds a certain limit (EUR 316) they do not receive any money. If it is less, EUR 40 is deducted. Because of this procedure, many women are thinking about returning their registration card or already did so. In this case, they

have to provide an official confirmation of it (issued by the police). Another new barrier has been introduced for asylum seekers who still want to register: newly arrived women have to wait 3 months before they can get their “control-card”.

- 3) **New immigration legislation.** Non-EU-citizens (especially Romanian and Bulgarian⁶ women) sometimes work in prostitution while their permit of stay is based on a tourist visa. But most of them applied for a **“permit as self-employed without residency”**, a short-term visa designed especially for work in prostitution or as show-dancers, issued as a decree (and thus legally not-binding) by the Ministry of Interior. The situation changed dramatically since February 2005: On request of the Romanian government – stating that prostitution is illegal in Romania – the Austrian authorities are no longer issuing the “prostitution-visa” to Romanian citizens. For those Romanian women who already received such a visa, measures are being planned to terminate their permit/stay. In addition, the women might face retributions upon their return for having worked (*legally*) in prostitution. Even Romanian women who are married to Austrian citizens are not allowed to work in prostitution – they are still Romanian citizens. In general, Austrian authorities became more reluctant to issue the visa and were apparently looking for ways to avoid legally administered work of non-EU-migrants. In Lower Austria, migrant sex workers who worked with the “prostitution-visa” were summoned and interviewed by the police. Their visa was withdrawn if they stated that they received a percentage of the bar’s beverage sales; because the visa is issued exclusively for work in prostitution. As a second step, the prostitution visa (and the visa for show-dancers and go-go girls) ceased to exist.

On 1st January 2006, a new Immigration Law came into effect. By this act, the old law (including all decrees) was no longer valid. This means, there is no decree to base a visa application on (as sex workers or dancers). As it is, there are no political intentions to issue another similar decree or to provide another legal possibility for non-EU migrant women to apply for a permit of stay based on their work in the sex-industry. This brought dramatic changes. Women, who have been living and working in Austria for years, became illegalised. This weakens the position of the women and enforces dependencies and increases vulnerability. It deprives women of their rights and exposes them to exploitation and the need to rely on services of others. **In practise, a new procedure was adopted: Non-EU migrant sex workers are being issued an actual visa (Visa D+C).** This new legal form for non-EU migrant sex workers is very short-term (3-6 months). The application – and any prolongation – has to be made from abroad, respectively from the country of origin. And the visa is only issued for a period of max. 6 months within 12 months.

This leaves the women with no long-term perspective for the management of their lives and future. The full impact of these new measures still has to be evaluated. It seems that this action – the implementation of this law with all its consequences – is politically possible because of the potential increase in new EU-citizens in the sex industry. As the demand is currently satisfied, - i.e. the demand (by clients, the economy, bar owners etc.) for women in the sex industry, - because there are sufficient women (now new EU citizens) who may legally

⁶ Although at the moment of finalising this report (March 2007) Bulgarian and Romanian citizens were already EU citizens, the TAMPEP VII project covers a period when they were non-EU.

work and thus there is no need from the demand side to seek or advocate solutions (e.g. special permits of stay). This economic factor influences strongly the current situation, i.e. that there seems to be no need to provide longer legal protection to other groups of migrant women.

Sex workers in the **Czech Republic** work in a sort of “grey” area: their work is neither explicitly legal nor illegal – with no special instruments of state control (e.g. obligatory health exams). In 2005, the Czech government proposed a law to license sex workers and to confine sex work to certain areas as part of an effort to curb the sex industry and to reduce organised crime. The plan included monthly health checks for (licensed) sex workers, the obligation to pay taxes and have a health insurance. Licenses would only be issued to Czech nationals and other EU nationals over the age of 18, with no criminal record, and they would be renewed annually. Operating without a license would have been illegal and those refusing to register would have been prosecuted and fined. This move to regulate sex work was not (yet) approved. But consequences of the debate are already visible: outdoor-based sex workers were afraid of being penalised and started to work indoors (e.g. in private apartments and brothels). Penalties for “public harassment” are adding to the criminalisation of sex workers who are seen as street offenders and as such as criminals.

In **Hungary**, the system for regulation of prostitution can be characterised as “limited abolitionist”. Protected and tolerance zones are mentioned in the law (1999), but in practise, they are missing or only tolerated and sex work is pressed indoors (mainly apartments). Street prostitution is less concentrated than before which makes the outreach activity of social workers very difficult. Sex workers are obliged to undergo medical checks and to carry a medical certificate. The lack of zones of tolerance however has the result that only a few of them actually possess these papers, consequently there is no exact data on the overall number of sex workers. Migrant women mostly work in private flats, (wanting to avoid being visible). Most non-EU citizens enter Hungary with a tourist visa for 3 months, which does not entitle to work in Hungary. They are illegalised when starting work and risk deportation. Usually migrants work in their own flats or in hidden brothels. Working conditions are suboptimal. Just as Hungarian sex workers, migrant women face issues of human rights abuse, language barriers, violence – in addition to being sex workers, also as migrants.

Sex work in **Poland** is neither penalised nor legalised, but many circumstances and activities associated with it are illegal. This situation has remained the same in the past 20 years. Within the present conservative government, there are no proposed policy changes so far.

There have been some changes in the welfare system though which relate also to sex workers as long as they are Polish nationals. A person has the right to receive free social insurance if they are registered at the local employment office as unemployed but able to work. For those who are differently able or unable to work, the social system covers a monthly grant and health insurance. Usually, sex workers declare themselves as “housewives”.

In 2005, a new penal code and order were prepared in **Slovakia** which came into force on January 1st 2006. In this penal code, there are special paragraphs relating to trafficking in human beings, pimping and exploitation through prostitution of others. Prostitution is still not regulated but in Bratislava there are some special local regulations. Working in the sex business is prohibited and policemen can punish sex workers and their customers with a financial penalty.

Migration Patterns in the East Region and migration patterns from Central and East European countries

Migration from non-EU countries to the new EU countries and to Austria (and other old EU countries) intensified. At the same time, there is also internal mobility in the countries of the region: from poorer areas to more prosperous ones (Slovakia); from border regions/the periphery to the centre (Poland, Austria) and vice versa. Mobility in general increased following the EU enlargement as new possibilities of formality-free travelling to other European countries became accessible. One of the focus areas still are the border regions and the mobility that takes place there. There are different kinds of work areas at the borders: brothels in the Eastern European countries that are visited by Western European clients; women who live in the (Eastern European) border regions and go to work in the West; and women who work on the highways and streets around the border. This situation is present in Poland/Germany, Czech Republic/Austria, Slovakia/Austria and probably also around Hungary. With some areas (Polish border) it is not only migrant sex workers who are present in the sex industry but also national sex workers. This border-region prostitution is a major factor and facilitates – in diverse forms – a big part of mobility/migration.

It is important to emphasise that the increased and improved mobility between EU countries did not bring an improvement in the working conditions within the whole East Region. The EU accession eliminated one factor: (fear of) deportation (for new EU-citizens). But at the same time, there is no access to the formal labour market (in Austria), prostitution is not recognised as labour and non-EU citizens face even more dependencies and difficulties. Former countries of origin become transit and/or destination countries. There still are many aspects of inequality in the region.

An example of impact of legislative changes on migration patterns of sex workers from a non-EU-country to Austria, based on the evaluation carried out by TAMPEP Austria relating to the legislative changes

The following example focuses on the situation of migrant women (non-EU citizens) who work in prostitution in Austria. It especially highlights the change that took place through the implementation of the new immigration legislation (1.1.2006). These legal changes abolished the possibility of acquiring a so-called "prostitute's or dancer's visa" for stay in Austria and work in prostitution. This permit of stay was short-term, required a work place (bar, brothel) – thus increasing dependencies from owners etc. – and didn't foresee the possibility to either change the title of the permit (i.e. change the activity for which the visa was issued) or to change to a long-term permit (of residency). With the new legislative act of 1.1.2006, this permit of stay was abolished. Now, a "Visa C/D" is issued for non-EU citizens who want to work in the sex-industry in Austria. These visas are even more restricted: The application (also for prolongations) has to be made from the country of origin; the maximum duration is 3 or 6 months – within a span of 12 months. In this, the new visa is satisfying the demand side of the sex industry without taking into account the rights of the migrant women who work in prostitution.

Also, the new regulation came into force without any measures regarding those women who have been working and living in Austria for years with the old permit. These women (from the Dominican Republic, Bulgaria, Ukraine etc.) have been working in prostitution, were registered as *sex workers*, were paying health insurance, rent and other costs, had a legal stay and trusted the fact that there was a legal basis for a continuation of their lives as it was. With the new law, these women

were illegalised; with no possibility to change their status to another permit. The new status forces them to leave the country, incur expenses to finance the trip; the applications etc., and leave them only with a short-term stay with no possibility for continued stay or residency. It is a violation of their rights and excludes and ignores them as workers. The illegalisation further creates new dependencies and insecurities. It increases the vulnerability of the affected women – to exploitation and other (health) risk factors.

D8

Geo-political Report:

Analysis and statistics regarding national and regional data from a cross border perspective: differences and similarities within the region

Austria, Czech Republic, Hungary, Poland, Slovakia

Increasing European integration is creating new inclusions and exclusions. A clear distinction remains between old and new countries, and differences still exist in the way their citizens are effected, for example by the range of legal regulations that prevent full participation in the labour market of the old EU countries. In this complex situation, new areas of competence and intervention and new tasks arise for International Organisations, NGOs and other networks.

The expansion of the EU in 2004 brought radical changes. The possibilities of mobility increased. An interesting aspect of the Eastern Region is that all countries have borders with new EU members and that they are in an interesting position to observe the changes in the prostitution as a result of the enlargement.

Mobility is increasing within the EU, including migration from outside the EU. The border has shifted to the East and the new member states are experiencing growing south-/east-east migration. Migration patterns are shifting.

Based on the results of our prostitution mapping, the main reasons for mobility are expectations of better income and better working conditions. In addition, anonymity is often mentioned in combination with the possibility of making a fresh start. Of all migrant prostitutes in this region around 10 to 20% is estimated to have worked in other countries before. The Czech Republic has an extremely mobile sex workers population with 60% transient sex workers. Most of the migrant sex workers in these countries are from Eastern Europe and the Baltic states.

The place of work of migrant sex workers differs strongly from country to country. In the Czech Republic and Poland for example, most work in brothels, whereas in Hungary more than half work on the streets. What is common across the region is the fact that all prostitutes and especially the migrants suffer from a lack of information about protecting their health and their legal status (which is very weak in most cases). The language barrier often makes this a persistent problem. In addition, the migrant sex workers face great stigma and criminalization.

Origin, transit and destination - With the exception of Austria (which primarily is a country of destination and sometimes transit), all countries of the East Region

consider themselves as at the same time origin, transit and destination countries. This means that movement, mobility and migration are a major part of the respective local prostitution scenes. This situation intensified with the accession of Czech Republic, Hungary, Poland, and Slovakia to the EU in 2004. This also entails new legal situations and challenges for migrants from non-EU countries to the now new EU members. Many women enter with a tourist visa for 3 months and commute regularly to prolong their stay. As prostitution is not recognised as formal labour in any of the region's countries, their work in the sex industry is not regulated. Controls can result in deportation. The system of regulation in Austria is an exception in this as it regulates work in prostitution (though not officially recognised as labour). The registration as a sex worker requires a permit of stay or residency and is only possible for EU citizens or similarly recognised individuals. Non-EU-citizens who work without registration will be deported. Others face administrative charges.

Countries of origin - The majority of migrant women in the sex-industry in the East Region come from the Ukraine, Russia and Belarus, from Romania, Moldova and Bulgaria. Many of these women who work in Eastern European countries continue to migrate to other countries after having worked for some time and saved up enough money to finance additional travelling (e.g. to Austria, Germany, the Netherlands). In this, the number of Romanian and Bulgarian women in the Austrian sex industry is increasing. Also, women from Slovakia, Hungary and the Czech Republic often migrate to Austria as the first country of destination. Consequently, Austria shows the highest number of migrant sex workers (approx. 80%) while the percentage is lower in the rest of the region but steadily increasing (Czech Republic 37%, Hungary 15-20%, Poland 30%, Slovakia 5%; see also Prostitution Mappings). As a new group, there is a noticeable increase of women from African countries in the sex industry in Austria and also in the Czech Republic. Moreover, the presence of (young) Roma-women in prostitution is noted almost throughout the region (in Hungary, Slovakia, and Austria).

Work places - Some of the migrant sex workers worked in the sex industry in their country of origin before migrating, others didn't. There is a diverse mix of situations throughout the East Region. Migrant women are present in every area of the sex industry: they work in street prostitution, in clubs, bars and apartments and especially in Poland, the Czech Republic and Slovakia also in border regions. There is also constant movement between different work places: in Hungary, women move from the streets into clubs and apartments although there they have fewer possibilities to work independently. Contrarily to this, in Austria work in bars or clubs is a safer environment for women than on the streets. In certain areas, predominantly migrant women from the Ukraine, Russia and Belarus work in clubs or salons (Slovakia).

Work package n° 9

West Region: national prostitution mappings, legislation on prostitution, migration patterns

Belgium, France, Luxembourg, The Netherlands, Switzerland

In all countries of the West Region national assessments were made on the national prostitution scene, migration patterns, policy changes and their impact on (migrant)

sex workers. In order to achieve a comparable data collection on regional and European level, TAMPEP used a methodology which was already used with success in previous phases. Four questionnaires were developed in total (Prostitution Mapping, Migration & Mobility, Service Mapping and Needs Assessment) with the purpose of - based on the information they would provide - achieving a complete overview of the prostitution scene in Europe. Questionnaires Prostitution Mapping and Migration & Mobility were the 2 sources of information for the present work package. They were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level.

Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national mappings were developed and finalised. Moreover, indicators for the migration and mobility patterns study were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in prostitution through gathering of qualitative and quantitative data within the network of 24 countries. More precisely, this entailed carrying out national mappings, i.e. collecting data on the national prostitution scene, sex workers situation, living and working conditions, population and the different communities of sex workers and their nationalities, mobility, policy changes and their impact on migrant sex workers. These national assessments allowed to compare the results on regional level and to make an assessment of common legal tendencies of the Region as well as the common consequences of these tendencies. Lastly, the objective of the Prostitution Mapping and of Migration & Mobility was to identify the migration patterns in prostitution in the West.

Migration patterns assessment entailed collection of data on composition of the population of sex workers, gender, nationalities, working place, the percentage of migrants and national sex workers, mobility patterns and cross-border movement. Further on, in each region we focus on a particular migration flow. For the countries of the West this was influx of sex workers from African countries, such as from the Maghreb region, Nigeria, Ghana, Togo, Cote D'Ivoire, etc. This is carried out in order to attain a specific element of qualitative analysis.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific countries, regions and cities. The results of the mappings serve as a source of

information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report only a short summary of the results is provided. The complete product is available in the *European Overview of HIV and Sex Work and 7 Case Studies of Country Reports*. Nevertheless, the geopolitical report below presents the essence of the analysis of combined results from both the interim and final assessment on the current trends in the Region.

Questionnaires and the Mapping Final Report form as well as national forms and a more detailed regional report are available on request.

Country	Major Group	Origin	Major Work Place
Belgium	75% migrants	25% East Europe, 25% Baltic countries, 15% Central Europe, 15% Africa, 10% Latin America, 5% Asia, 5% West Europe	90% indoor
France	80% migrants	40% Africa (more in the south), 25% CEE (more in the north), 25% Latin America (more in the north), 10% Asia (more in the north)	South: 70% outdoor (10% border area, 60% street) North: 60% outdoor
Luxemburg	70% migrants	55% Latin America, 25% CEE, 10% Other EU countries, 10% Africa	Mainly street prostitution, but increasingly indoor
the Netherlands	70% migrants	40% CEE, 35% Latin America, 15% Africa, 5% Asia, 5% Other EU countries. In the new clandestine form of indoor, more presence of CEE women, probably the total percentage is higher than 40%	75% indoor: windows, brothels. Street prostitution includes the “zones” considered by the authorities as illegal. Only 6 cities maintain street prostitution zones.
Switzerland	75% migrants	40% Latin America, 30% CEE, 15% Africa, 10% Asia, 5% Others	70% indoor
Main countries of origin in the WEST		Bulgaria, Romania, Hungary, Poland, Nigeria	
WORKING CONDITIONS			
What percentage have worked in another country before		Nationals 37%	Migrants: 78%
Where do sex workers work		General %	Migrants %
City street		34	34
Highways and roads (border areas)		2	2
Brothels		9	7
Apartments		20	11
Clubs + Bars		7	17
Massage Parlours		1	3
Windows		13	14
Escort		13	11
Others		1	1
Total INDOOR		63%	63%
Total OUTDOOR		37%	37%

Prostitution Mapping – Common trends of the West Region

- In all countries the majority of sex workers are migrants
- There are increasing repressions from the side of the authorities against the sex industry in general and particularly against its visible forms (street) which leads

to a reduction of the official forms of sex work and growing number of clandestine prostitution venues

- In most countries (exception Luxembourg and France) sex work is exercised mainly indoors. The clients are reached by the means of internet, mobile phones, advertisements, etc. In France, street prostitution is around 50 - 60%, but it is more diffused and takes place outside the cities and/or on highways.
- Indoor prostitution is subject to big changes. Next to the traditional forms (windows and brothels in the Netherlands and in Belgium for example), new places are being created for the migrant and/or street sex worker who are excluded from the visible, legalised and/or tolerated forms.
- Significant difference between the populations of sex workers in France: in the south street prostitution is a little more tolerated than in the north which results in a higher presence of outdoor prostitution (70% vs. 60%). Another characteristic is the high percentage of transgender sex workers (17,5% of all sex workers in the national territory), with a particularly high presence of transgender Latin American sex workers in the north. Almost half of all migrant sex workers in France come from Sub-Saharan Africa and from the Maghreb region.
- As a result of diminishing number of clients (due to economic situation) there is more competition among sex workers which leads to reduction of the prices which results in diminution of the incomes of sex workers.
- Every country reports augmented mobility of migrant sex worker: most of the migrant sex workers have worked in other countries. There is more mobility also among national sex workers.
- Augmentation of abusive work environments and abusive clients (more violence and less income). Particularly the situation of highway and underground prostitution in closed and clandestine places entails high risks.
- Significant number of newcomers from non-EU countries who usually end up in clandestine prostitution.

Impact of the Legislation on prostitution and on living and working conditions

In the Western region there have been quite some legislative changes over the past few years. Apart from the Netherlands where prostitution had been legalised in 2000 and is regulated by an official law, the authorities in other countries, where prostitution is not officially legalised or regulated, are continuously introducing all sorts of regulations that aim at suppression of prostitution and at its regulation within the existing law.

The impact of the legislative changes is more or less similar in the entire region, that is: prostitution is pushed towards more clandestine settings, the sex workers are forced to be more mobile, in effect there is exclusion from access to information on health issues, such as prevention measures, safe sex, etc. This leads to an augmentation of vulnerability to HIV/STIs. The move towards clandestine work settings also has an impact on sex workers being in closed, isolated environments, where they are more controlled and dependent of “protectors”, at the same time being less accessible by outreach workers and in general service providers.

The strict application of the immigration law in the West countries, in connection with the more frequent controls in the various work settings has a result and common trend in the Region, a higher number of involuntary repatriations. The fear of the consequences of this taking place has a great impact on the sex workers preferring

more clandestine settings. All factors considered together form substantial barriers in access to services.

Belgium - Prostitution has become a focus of debate on the national and local agendas. Several law proposals have been submitted to the Belgian Parliament and Senate to penalise the clients, taking the Swedish model as an example, or to regularize prostitution according to the Dutch model. Some bigger cities have developed strategies in view of getting control over sex work activities as well as first steps towards regulating prostitution with the view to safeguard “security, public morality and order”. Several city councils impose local taxes on “waitresses” or on those performing as artists in bars, clubs and cabarets. In Antwerp these local taxes have been expanded towards prostitution windows and rooms and to the hotels that rent rooms for purpose of prostitution. The window brothels can be now only rented to persons who are in possession of residence permit. There is a so-called “zone model” practiced in Antwerp⁷ which is considered as a pilot project and will be slowly introduced in other cities such as Brussels, Ostend, Gent and Liege. The situation in Belgium has led to a significant growth of sex workers working in escort agencies (40%), which in fact are very informal settings in apartments, with low level of safety, poor hygiene and often the site of severe exploitation of the sex workers.

The impact of **France’s** 2003 interior security law (*Loi pour la sécurité intérieure*⁸), called the Sarkozy law, and is stronger on migrant sex workers, who are the principal target of the police. For them an arrest can mean as well an expulsion from the country. They have to live clandestine, in physical and psychological insecurity. The law forbids passive soliciting and concerns every person who has the intention to propose a remunerated sexual service in the streets but also in public places such as bars, public gardens, roads, woods, etc. The application of the law depends on the city: in Lyon and Toulouse it is applied in a strict way with frequent police controls, while in Marseille, Nîmes and Montpellier the presence of police is less evident. As the result of the introduction of the law, the prostitution scene changed significantly: in most cities street prostitution has nearly disappeared from the centre and moved to remote places in the suburbs (parks, roads), or to the apartments, clubs or massage parlours, which means to less safe working conditions.

The French law on foreigners hardened too. It is more difficult now to get a temporary residence permit, and even less the right to work. A foreign sex worker who complains about sexual exploitation or presents herself as a witness can be granted a temporary residence permit of 3 months. But in some districts, they often

⁷ After having renovated the window area, Antwerp introduced a regulation that allows window prostitution only in three designated streets – this way reducing the number of windows to 167 (plus 50 windows in the newly build Eros Centre) – in comparison with 17 streets with approximately 300 windows that were in past. All the windows will be subject to severe control with regard to hygiene, the size, etc, the windows that do not comply with these regulations will be closed. These restrictions concern also the area around the central station in Antwerp, where traditionally street prostitution had been exercised: most of the hotels used by the sex workers had been closed and no alternative area had been offered. The authorities augmented that these sex workers are drug users and should not work in prostitution. The above mentioned Eros Centre in Antwerp built by a private person with the support of the Antwerp Municipality forms an example of a brothel where all sex workers will be together and this way easy to control (also exclude illegal sex workers). Other cities in Belgium expressed a wish to build an Eros Centre too.

⁸ Journal officiel de la République française 19 mars 2003, Loi n°2003-239 du 18 mars 2003

do not get any permit. Due to the Sarkozy law and the stronger police repression, but also because of the trafficking networks, the mobility of the migrants has increased, between cities in France and countries in Europe. The increased mobility has many side effects in terms of access to services, for example when migrants leave the city, or simply continuously change residence they have to stop medical follow ups.

Wanting to avoid the consequences of the Sarkozy law, sex workers move away from visible areas, i.e. away from the city streets, towards forests or inside apartments. The greatest hindrance this has created is the service provider's difficulty in reaching prostitutes who are more frequently changing work location; lack a stable address and who are in more covert locations.

The authorities In **Luxemburg** have been introducing since 2001 regulations that aim at the repression of street prostitution and at eliminating prostitution in the cabarets. Street prostitution is now allowed in two small streets and in designated time (from 20.00 until 3.00). The streets are right in the centre of the city, in view of general public (bus stop) which means a discomfort for the sex worker as well as for the bystanders. Due to this regulation a lot of prostitutes have moved indoor, where they are harder to reach for service providers.

Until recently, prostitution had been exercised also in the cabarets. For several years, women working in cabarets came in majority from non- EU countries (Belarus, Russia, etc) entering the country on artist visa valid for one to six months. In 2004 a new law was introduced which abolished this form of visa, ending the possibility for non-EU citizens to come to Luxembourg working as an artist in a cabaret. This led to closing of a big number of cabarets. As a result, outside the city of Luxemburg some small clubs/bars had been established where women from Latin America work. Recently there is greater influx of women from the new EU countries for work in cabarets.

Latin Americans come with a tourist visa, but recently it is more and more common to have a waitress or dancer contract. From time to time police make indoor controls. There is no indoor regulation for prostitution, so what are used are the regulations on pimping (i.e. if an owner of an apartment makes profit out of prostitution, he could be punished as a pimp.) In Luxembourg prostitution under 18 years is not allowed by law, and above 18 years of age prostitution is not mentioned. Punished by law are: violence against women, pimping and trafficking in human beings.

In the **Netherlands** the legalisation of prostitution put the task of regulating the prostitution activities on the plate of the municipalities. In practice, it is relatively simple for native women and those from the old European countries to work legally as a registered, self-employed prostitute. However, women from other countries are unable to work under these relatively improved conditions and seem to move to other forms of prostitution where they are generally harder to reach for service providers.

The law on legalisation of prostitution and on granting licence for running sex business is being applied in a very strict way. Generally, it can be said that the trend is to diminish the volume of prostitution: given that the municipalities are free to decide about the number of (licensed) sex work venues in their area, most of them tend not to give new licences or to withdraw the ones already granted. Also closing of the whole prostitution areas (like in Arnhem) or streets or window prostitution (like in The Hague) belongs to the new, more repressive policy of the authorities.

The same trend applies to street prostitution: the tolerance zones are being successively closed (Amsterdam, Rotterdam, The Hague) or the access of sex workers to them is being restricted by introduction of special registration system

(Utrecht, Eindhoven). We estimate that, as a result, the volume of (official) prostitution venues in the Netherlands has diminished by some 50 % to 60%. This trend leads to growing underground and undercover sex business locations: clandestine brothels, saunas, (Thai) massage parlours, escort services for women who have no access to official prostitution scene. The signals are that the volume of this illegal sector might match the official licensed one. In Rotterdam for example, Turkish cafes are populated by Bulgarian women who under the cover of being so-called “entertainment girls” work non-officially in prostitution.

Sex work is legal in **Switzerland**, yet the internal local rules vary in their tolerance and repressiveness levels. This leads to internal migration, recently big influx to Geneva (coming from Zurich and other cities), increase of the offer, strong competition, more abuse and violence. No major legal changes took place recently but there are very discriminatory laws in preparation concerning migrants. There are also reports on increased transnational mobility due to the bi-lateral agreement with EU 15 countries: big influx of persons but as the market is saturated many persons leave the country.

The Swiss penal code has two articles specifically prohibiting trafficking in persons with severe penalties both of which focus on sexual exploitation and forced prostitution. According the police statistics two cases of human trafficking have been sentenced in 2004.

Migration patterns in the West

The most significant change in migration patterns of the West Region is the augmentation of sex workers from the new EU countries. In this respect the region has experienced the enlargement of the EU in 2004 very significantly. This trend is combined with a broader tendency of influx of sex workers from the CEE countries. The proportion of sex workers from CEE reaches in some countries 65% (Belgium) and oscillates between 25% and 35% in the remaining countries of the West.

The second aspect of this migration flow is the big variety of nationalities. From TAMPEP's assessment there are around 15 different CEE nationalities present among the sex workers in the West. This trend is more or less homogenous in all the Western countries.

A new observation was made in relation the patterns of migration of the sex workers from the Balkans. To illustrate this we can use the example of Albanian sex workers, who have changed destination countries. From a relatively high concentration, just a few years ago, in Italy, they have shifted migration primarily to France and to Belgium. The current trend of the Balkan migration is characterised by more multivectoral routes than the past South-Europe-centred migration. The Balkan flow to western Europe is no longer focused on South Europe, as this was the practice when women used to cross just one border; therefore, most often, arriving across the Adriatic to Italy. The current patterns are more diversified than in the past, and destination countries are no longer the ones in closest vicinity. The arriving in the West is now attained by many possible routes, which because of having so many variants, are less studied. Nevertheless, the effect is such that there are now high numbers of sex workers of various Balkan nationalities spread all over the West region, the most significant groups being from Bulgaria and Romania.

Another migration pattern of the West Region concerns sex workers from Africa, who according to our assessment originate from 8 African countries and have the

highest presence in France, reaching 60 % in the South of the country. This group has been present in the sex industry of the West more or less since the 1980s, and the new trend we have observed is in relation to a few new origin countries: Sierra Leone, Cameron, Benin. The presence of sex workers from Africa is strictly correlated to the history of colonisation and all countries of the region that had colonies in the past experience a high presence of migrants coming from the ex-colonies.

Moreover, there are migrant sex workers from Latin America, and these most frequently originate from Ecuador, Brazil, Venezuela, Peru and Colombia. The mother countries have not changed over the years, and there is a continued influx of new sex workers coming from the mentioned countries. We note it to be quite stable along the years.

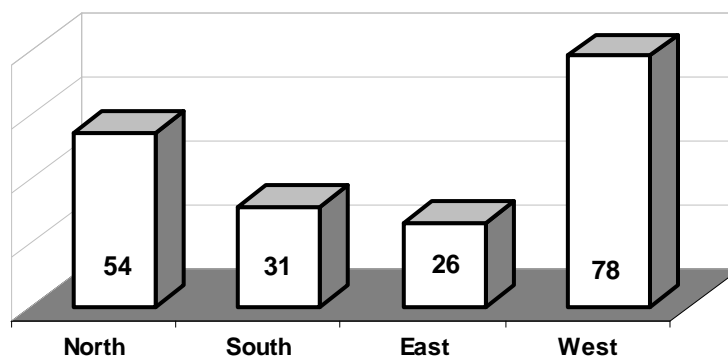
Fourthly, sex workers from Asia are the least represented group in the region, with highest presence in Switzerland.

A specific characteristic of migration patterns takes place in Luxemburg, where the number of sex workers from old EU countries is the highest, reaching 10%. Due to the country's geographical positioning we know that the presence of German, French and Dutch sex workers is related to cross-border prostitution, but there are also 3 other old EU nationalities present in Luxemburg, i.e. Spanish, Portuguese and Italians.

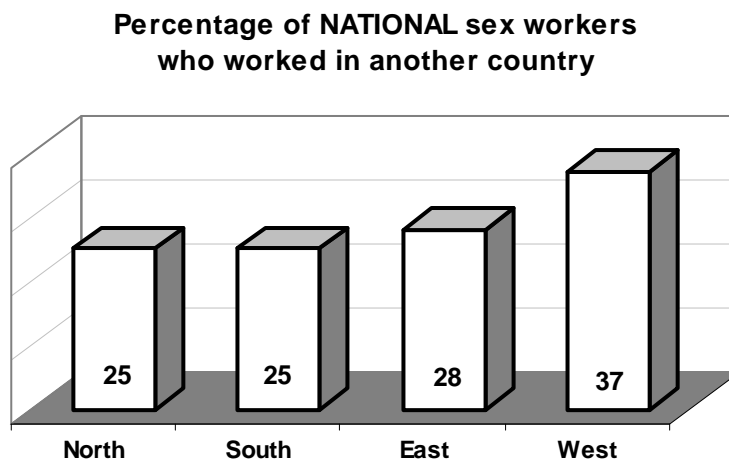
The characteristics of the West Region's migration patterns are thus, a very high diversity of nationalities (most likely over 30), a relative augmentation of nationalities, coming from 4 different continents, high level of border and cross-border prostitution and most significantly very high levels of mobility of both national and migrant sex workers.

To develop more on the last characteristic of the migration patterns in the West, we have decided to present in more detail the aspect of mobility in the region. Out of all TAMPEP regions, the west represents the highest mobility rate for both migrant sex workers and national sex workers. If we first consider the migrants alone, we see on the below figure the significant difference between the West and the other regions. The countries where migrant sex workers worked in are various countries of Europe, including non-EU countries.

**Percentage of MIGRANT sex workers
who worked in another country**



The countries of the West Region also have the highest percentage of national sex workers who worked in other (neighbouring) countries (37%). Although both nationals and migrants are very mobile, the migrants are substantially more mobile, (76% vs. 37%). Cross-border prostitution in the West is aimed at Germany, Switzerland, Belgium, Spain and France. What also takes place is significant, work in border areas, for example, in Luxembourg national sex workers (who are 82 %) do not want their friends, family or children do know that they are in prostitution. There are a lot of bars in the border area recruiting new staff on continuous basis. National sex workers are able to speak the languages of the border countries. Also swinger bars in the border area often need sex workers for weekends.



The fact of high mobility among migrant as well as among national sex workers in the West Region illustrates that in spite of all repressive regulations there is still coming and going of sex workers: the pull and push elements that determine this situation are:

- the present country was not the first definitive target country
- there is always moving between various countries while looking for better working places
- there is also high movement between cities, especially among the groups of so-called “old groups” of migrants who have their own networks (Latin Americans, Africans).

Specific migration patterns from African countries

The history of migration movements from the countries of West Africa and sub-Saharan to Western Europe and particularly to the countries that had colonies in former times forms part of the process of decolonisation. Therefore, there are various push and pull factors that determine migration patterns, its variety, composition of the groups of migrants and the consistence and the structure of communities. The bellow gives a sketch of some of the elements of female labour migration/trafficking into the West European sex industry from selected countries in Africa.

In the period between 1985-90 migration from West African countries for the sex industry in Benelux countries was dominated by the women from Ghana, Nigeria,

Senegal and (particularly in Belgium) Congo. In France the persons from former colonies (Senegal, Cote d'Ivoire, and other French-speaking sub-Saharan countries) predominated. Their presence in prostitution amounted to 20 – 30% of all population of sex workers.

Another group in this period was formed by the women from North Africa, who formed an ethnic minority in Western Europe. They included Moroccans, Algerians and Tunisian.

Since the 1990s women from West Africa, especially from Nigeria started to predominate in the groups of African sex workers with high concentration in Italy for example.

The most important characteristic of these groups is that they are based on a strong community of men and women present in the destination countries and which are bound by the family and friend relations. This means that their migration was directly connected with the presence of a contact person/member of the community who was resident in a given country and who provided further support or legal guaranties. Often the reason for migrating for work purpose was based on the family reunion status. In principle the pattern of migration was that it was the men who first left to be later followed by the women.

Simultaneously, since the late 90s other trends in the patterns appeared: more feminisation of the migration, women travelling alone, women seeking economical resources and alternatives. These trends became more predominant with time. In addition, the passage often occurs through organised trafficking routes and the result is exploitation. A typical example of structure is a Nigerian madam (usually former sex worker), with women who work for her and who had been recruited in their country by the accomplice of the madam, usually a man, and who had been brought over with the use of ingenious travel routes.

Since late 90s we can also observe another phenomenon in the migration patterns from Africa: the growing number of young and/or underage asylum seekers who mainly come from the countries with ethnic conflicts or which are at war (Cameroon, Angola, Sierra Leone, etc.). They arrive under the pretext of seeking asylum, but it is not clear if there is an organised trafficking that aims specifically at these groups or is it just a coincidence that asylum seekers end up in prostitution, nevertheless there is a significant and growing presence of these persons, evident for example in Greece and in Austria (around 20 % in 2005 of all street contact were with young Nigerian women).

TAMPEP's Migration Mapping also allowed concluding that African sex workers' migration trend is completely different than 2 years ago. We identified that the countries of origin, transit and destination⁹ are as follows:

- From East Africa (a new group is girls from Ethiopia) to Egypt, then Lebanon or Israel, Syria, Turkey and then Greece (frequent arrival of new girls from Ethiopia, in Greece 40 to 50 every week) and from this region to North and West Europe

⁹ *National sex workers* are defined here as those who reside and work in the country they were born in, regardless of citizenship. *Migrant sex workers* work as sex workers in a country other than the one they were born in. *Transient migrant sex workers* also work in a foreign country, but have the intention of either returning to their home country or moving on to yet another country.

- From West Africa (Nigeria, Ghana, Cameroon, Cote d'Ivoire) to Libya, Morocco and then fly to Spain, Italy or France. Or frequently Nigerian women move to Benin, Ghana, Ivory Coast, and then fly to Italy, France and Netherlands
- From Morocco, Sierra Leone and Nigeria by boat to Spain (and some then move to Portugal) and some travel further e.g. to Northern Europe

An example of migration pattern from a country in West Africa to the Netherlands on the base of a survey carried out by TAMPEP Netherlands among Ghanaian sex workers

The majority of African women working in prostitution in the Netherlands come from Ghana and Republic of Benin. The majority of the Ghanaian women originate from the town of Kumasi in the Ashanti region while a minority comes from Accra in the Greater region. Their reasons for travelling to Europe are always economic. Money earned in prostitution they invest in economic enterprises, for example of importing used cars to their countries or helping the families to develop some small business. Family bonds and the feeling of duty towards family and further relatives are very strong in this region of Africa. This applies especially to the persons who travel abroad: there are many expectations towards the economic opportunities in Europe.

Strong element in the social role of Ghanaian women is their reproductive capacity – without it they are considered worthless. When a woman is infertile, her relationship with her husband is not very stable because the man may leave to be with another who can give him children. Many of the women give birth to children in Africa before they set off for Europe. Normally they break up with the father of their children before travelling and start a new relationship in Europe.

Ghanaians believe - and live - in the extended family, so everyone in a family has to behave well in order to preserve the good name of his/her family. The children of the women who migrated are being taken care of by the family during their absence. If the migration is long term it can happen that there is a strong push from the side of the families for reunification with the mother, which might mean bringing the child to Europe.

There still exists the myth of Europe as a paradise that quickly disappears upon the confrontation with reality. Especially in the case when women pay a lot for the passage, the disillusion is high. The women regret coming but cannot go back because they either have debts to settle or have sold all their properties. They cannot go back with bare hands, so they accept any work which makes them very vulnerable, especially if they have no support from the local relative's network.

Since prostitution is a taboo in Ghana, women do not identify themselves with it. Prostitution is for them a way to accelerate their earnings. They expect that none of their relatives back in Africa will know. Initially, the women have expectations of temporary stay founded in the belief that they can make money quickly. Usually, stays result being long term; sometimes related to entering relationships with (Ghanaian) men and setting up a social network of contacts.

The travel pattern

The ways of coming to the Netherlands are varied. In most cases a Schengen visa is being arranged which permit them to travel from one country to another and the women are brought by their families in order to live with others who have already settled themselves in Europe. In other cases, their passage is facilitated by relatives or a

friend with an agreement that after this temporary stay they will bring back home a capital or some kind of merchandise for the person who helped them in coming over. Most of the women do not explicitly aim at work in prostitution - they would take any job that is available. But as they have no permission to stay, or a work permit, many of them will be compelled to work in prostitution, especially if their transfer is being arranged by a relative who already is a prostitute, or by a person who facilitated the relative's passage. If the passage is financed and arranged by an intermediary, the debt bondage and economic pressure is very present.

Mobility

African sex workers are very mobile. Most of the women circulate continuously between different countries and towns in Europe because they have a broad social network of contacts/information and good insight into prostitution scene that helps them to detect most favourable places and times for work. This good feeling for informal trade helps to develop some other small business next to prostitution. Another reason for their mobility is to protect their anonymity towards their own ethnical community.

There is a pattern of working in a different country, other than the one where the husband or the members of the community live (Italy and Belgium). Women who come to work in the Netherlands stay here for a couple of months and are very capable to lead a "double" life.

D9

Geo-political Report:

Analysis and statistics regarding national and regional data from a cross border perspective: differences and similarities within the region

Belgium as invited partner, France, Luxembourg, the Netherlands, Switzerland

The legislative changes which took place over the past few years in the countries of the West Region have impacted the sex workers' situation in various ways. Moreover, the effects of the more repressive measures, in prostitution and immigration law, were similar in all 5 countries of the Region. The primary result was the creation of more underground work settings. This, in consequence led to decreased coverage possibilities by service providers, which entailed less direct contact with sex workers and a substantially higher and more common exclusion from access to health care. Moreover, public order driven legislation which impact the prostitution situation overlooks the creating of any positive solutions for the sex workers and focuses only on the elimination of the "negative" aspects of prostitution. A part from such an approach being very selective in the good it aims at achieving, it is important to stress that public order focused legislation does not have any positive impact on the health and well-being of all citizens and residents. Therefore what is lacking and necessary in the West Region is more public health driven legislation, which creates an inclusive environment for all, eliminating the current exclusion of

sex workers from access to health services. Public health centred laws would also be more inline with the human rights framework TAMPEP so strongly aims at promoting as a fundament for approaching legislative changes concerning sex workers.

A constant in the region has been regulation of some areas of prostitution, almost independent of the law system in force. This has resulted in territorial diffusion of prostitution, diversification of forms of prostitution especially into new forms that circumvent regulation and/or prohibition. The control of pimps, traffickers and other intermediaries thus increases. Luxembourg is the only country in Europe where street prostitution is strictly regulated.

The region which already had very high levels of sex workers' mobility has noticed an ever greater increase of mobility. The repressive legal changes - particularly against visible forms of prostitution, i.e. street - have intensified, encouraging sex workers to relocate frequently. They move either to work in a place where the laws are more favourable, or simply escaping the intensified police raids, or restrictive regulations on performing sex work (such as licenses, limitations in tolerance zones, elimination of streets where prostitution can take place, imposing of narrow time ranges when prostitution can be performed, etc). Augmentation of mobility was noted among both the national and the migrant sex workers.

What needs to be underlined is that high levels of mobility were (and are) not only related to legislative changes, which either attract towards or discourage against a place. The other push and pull factors are rather constant in time and do contribute greatly to sex workers mobility. Among the most important we can mention: wanting to escape abusive work environments a/o abusive clients, controllers, seeking new locations where the income can be higher, or where one can work more independently and/or in better conditions, where quality of life can be higher.

In terms of specific work place, we notice that in the West there are very few differences between sex workers and migrant sex workers. Both groups are present more or less evenly in almost all forms of indoor and outdoor work. The differences occur in work in apartments, where sex workers are more frequent, and in clubs and parlours, where the migrant sex workers are more frequent. There is also a slightly higher group of migrant sex workers in window. In essence, most of prostitution is exercised in an indoor form.

In relation to the high mobility rate, the West receives very big numbers of migrant prostitutes from all continents, and roughly from 30 countries. The result is a very high proportion of migrants among the sex workers (75%). There is a noticeable increase in sex workers from the CEE countries, among them the new EU states are highly represented; 4 of the top five nationalities in the region being new EU nationalities. Their presence is directly correlated to the enlargement of the EU in 2004 and the elimination of any sort of entry visa requirements. The situation of sex workers from these new states is nevertheless not equal to the nationals, as all countries of the West have maintained labour market limitations for the new EU citizens. Therefore, in order to work legally these sex workers have only the option of becoming self employed. The diffusion of information on this topic is still not sufficient and many new EU sex workers continue working in clandestine and underprivileged conditions.

Due to enforced control of prostitution, sex workers which have either recently arrived or been in the West since a while, and who do not have their stay situation regularised (mainly non-EU countries) find themselves usually in clandestine

prostitution, which is often characterised by suboptimal working conditions of poor hygiene, extreme control from pimps, very limited personal mobility, having large portions of their income taken away by the controllers. In general their working and living conditions can be described as unsafe, without regard for safe sex practices, with extremely limited access to services, or to information on their rights, on health and prevention issues. These are the sex workers of the West who are most exposed to various risks and who are most vulnerable to HIV/STIs and violence, yet at the same time they are the ones least reached by service providers, precisely due to their covert, often unknown locations.

Work package n° 10

North Region: outreach work, special target group (ASIAN sex workers), development of new materials and methods, spreading of good practice methods through TAMPEP CD-ROM

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

Part of TAMPEP's methodology is an analysis of a **special target group**. In all countries of the North Region national assessments were made on a chosen group which was identified based on country or region of origin. A different target group is selected for each region based on the region's specific experience with particular nationalities. This is either in relation to the group's long presence in the region, or because of a recent large influx to the region, and always is associated with the fact that the group is numerous, and almost uniformly present in all countries of the region. The nationalities are selected for a special study also due to the fact that a particular approach is necessary in relation to interventions with representatives of the specific target group. In order to carry out the tailor made outreach activities most adequately responding to the group's specific needs, the group has to be better understood by the service providers. For this reason TAMPEP carries out a deeper analysis on the migration background, living and working conditions of sex workers from the target group. The reporting about the specific target group of each region is work in progress.

In the North the study is focused on Asians. The method applied is observation and evaluation of the reasons of establishment of this specific group in that specific region. This is done by one of TAMPEP's questionnaires which is sent out to GOs and NGOs on national level dealing with that specific group of sex workers. The data for the final report was being gathered all along 2005 and 2006. Final reports based on the collected information were produced by the end of 2006. A summary of the findings is presented below in D.10.1. The analysis led to the development of special activities and/or tools for that group. The study and the material developed was shared with the partners of the other regions.

In all countries of the North Region national assessments were also made on **services** with the objective of evaluating the infra-structure of the health service providers (including NGOs), their services and capacities targeted to migrant sex workers and trafficked women. Part of the assessment focused on the kinds of services being offered and another part on the service providers. Different levels of service providers were analyzed; public health care as well as civil society and social care

service providers. Certain service providers with more important programmes for sex workers had their profile examined and presented more profoundly. The intention was to ascertain the capacity of the service providers to reach the sex workers with their prevention and care measures. The key issue was availability, accessibility, barriers and gaps in the availability and whether the offered services respond to the needs. The results of the Service Mapping allowed identifying the gaps in the offered services as well as the barriers to accessing the existing services. We were also able to compare the offer with the actual needs of the sex workers through the experience of low threshold outreach programmes which are in direct contact with the sex workers.

In order to achieve a comparable data collection on regional and European level, TAMPEP used a **methodology** which was already used with success in previous phases. Two of the previously mentioned 4 questionnaires were developed specifically for the analysis of the special target group (Needs Assessment) and the services (Service Mapping). These were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level. Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national Service Mappings and Needs Assessment were developed and finalised. Moreover, indicators for the study of the target group and access to services were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in service provision and target migrant sex workers communities through gathering of qualitative and quantitative data within the network of 24 countries. This entailed carrying out national mappings, i.e. collecting data on the services offered, service providers, accessibility to health and social care, barriers to this access for migrant sex workers, gaps in the offered services. These national assessments allowed to compare the results on regional level and make an evaluation of common tendencies (common gaps and barriers) of the region as well as the common consequences for the sex workers.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific nationalities, in specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions.

Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report (D.10.4) only a short summary of the results is provided. The complete product with full analysis and conclusions is provided in a separate report *Gaps Analysis in Service Provision*.

D10.1

Report about a specific target group - ASIAN sex workers

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

Here we could once more see the differences between the Baltic and the other five countries: while in Denmark, Finland, Germany, Norway and UK the migration of women, men, and transgender into the local sex industry has been taking place for more than 30 years now, the Baltic countries still remain origin and not destination countries. They have, therefore, very little experience with migrant sex workers. The experience they do have is related almost exclusively to East European sex workers. They could not, therefore, report any experience with Asian sex workers.

In all five countries of the region, Asian sex workers represent the biggest (Denmark) or the second biggest group (Germany, Norway, Finland and UK) among migrant sex workers. About 90% of Asian sex workers are originally from Thailand, which explains why this report refers only to Thai sex workers.

Reasons do migrate – The main reasons Thai women migrate are: the little opportunities they have at home to earn higher wages, their expectations to earn more in Europe, and the family's expectations of the daughter's financial support. In the rural areas this phenomenon is quite common, with cases where this is the only source of support.

Family - Most Thai sex workers have come to Europe through a sexual or an affectionate relationship, either as already married women or as "sex workers to be wives".

Many of the husbands are unaware that their spouse works in the sex industry. The sex workers therefore live in constant fear of being discovered, which would implicate the end of the marriage, and could mean having to go back to Thailand.

Very often, Thai sex workers are the head of the households and are responsible for the economic well being of their children and families left in Thailand, who depend on the remittances they send home. Because of this economic pressure, they stay in the sex trade sector, very often, for a longer time. The absence of a public and social safety system in Thailand makes prostitution one of the strategies adopted by poor families for survival.

Thai sex workers, however, live between two sorts of morality. In one hand, daughters are expected to support their families and families rely on the income and remittances from them. On the other hand, prostitution continues to be seen as a deplorable job, which consequently leads to low self-esteem among sex workers. This contradictory system of values causes problems and stress between Thai sex workers and makes it difficult for institutions and organisations to contact them and offer support.

Financial Situation - Thai sex workers not only have the pressure of sending money back home, but they often come to Germany with money borrowed from their family, friends or acquaintances, debts which they must return in a short time.

Integration and language - One of the most common problems among Thai sex workers is the little knowledge of the language of the country they are in, which makes them vulnerable and dependant of third persons, and makes it difficult, if not impossible, to communicate with authorities. In other words, they live quite isolated from the German society. Because of the language barrier and/or specific cultural habits, Thai sex workers often medicate themselves, bringing medicines from Thailand and distributing them among colleagues.

Mobility & migration patterns - The expansion of Asian prostitution in northern Europe is linked to the increasing female migration from rural to urban (or to tourist areas) in Asian countries, where many start in the sex work. Some have been sex workers in other countries before coming to Europe. Therefore, they have contacts to other migrant sex workers communities in other countries.

Legal status - Marriage is often the goal and outcome of migration because it offers an important, if not the only way, to obtain a secure residence permit. There are various scenarios in which this “marriage migration” takes place: some enter as tourists and subsequently marry, some enter as “fiancées”, to become wives through matchmaking agencies, or helped by relatives or friends, and others arrive as “fiancées” of a man whom they had met in Thailand.

Working conditions - Because of their isolated life, many of them do not have information about the existence of support organisations and their offers. They have little or no knowledge about their rights and about legal, social and health care services. The majority of Thai sex workers work in apartments, brothels, clubs and massage parlours. After a while they might have an establishment of their own, becoming *mamasans* or female managers themselves. Some become recruiters of sex workers in their hometowns. Thai sex workers are between 25 and 60 years old.

Outcome – In order to improve services for Thai sex workers, the North Regional Commission came to the following conclusions:

- To recognise the importance of cultural mediation and peer education when dealing with Thai sex workers, and therefore develop special training for cultural mediators and peer educators.
- To create special campaigns in the home countries to inform potential migrants about the labour and social reality in Europe.
- To develop a network within the North Region among organisations dealing with Thai/Asian sex workers, and to enlarge this network to organisations in the home countries.

D10.2

Up-date of the information material

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

TAMPEP CD-ROM/ Volume 2

The new CD-ROM was very much welcomed by all partners of the North Region because of the increased number of languages available and the new themes

included. They distributed the new material among their national network members (GOs and NGOs) in October 2006. All partners got very positive feedback regarding the CD-ROM.

Denmark - The TAMPEP resources will be distributed during outreach work, in drop-in centres, massage parlours and clubs. The leaflets in English, Thai, Polish and Russian language will be the ones mostly used.

Estonia – Because the number of Russian speaking sex workers is higher than the Estonian speaking ones (85%:15%), the leaflets in Russian were and will be the most used ones. The leaflets are distributed during indoor and outdoor outreach, in drop-in centres, and medical centres. Apart from Russian and Estonian, the other languages which will be used are Latvian, Lithuanian, and Ukrainian.

Finland - Many service providers have not thought about the need to provide health promotion material to migrants. The promotion of the TAMPEP material was a kind of “wake up”. In Tampere and in Helsinki the most used language is Russian. Other used languages are English, French and Estonian.

Germany - The leaflets will be distributed during indoor and outdoor outreach work as well as within the different health and social counselling centres. With the exception of Albanian, all other 18 languages will be largely used. It was recommended to include the Turkish language because of the large Turkish community in Germany as well as to make a flyer with legal information about residence permits, health insurance, how to work as self-employed in the sex industry, migrants’ rights, etc.

Latvia - The materials were and will be distributed during indoor and outdoor outreach. The languages which were mostly distributed were Russian, Latvian and English. Considering that migrant sex workers in Latvia speak Russian and nationals speak Latvian, no additional language will be needed for outreach work.

Lithuania – About 80% of the leaflets will be distributed in the drop-in centre, 10% during outdoor outreach, and 10% in health clinics and police stations. About 95% of the leaflets will be distributed in Lithuanian, 2% in Polish and 3% in Russian. Polish will be distributed among Polish speaking sex workers, and the Russian leaflets among migrants coming from Belarus, the Kaliningrad region and Ukraine.

Norway - The leaflet was distributed in the national network and to all services involved in the TAMPEP mapping. It will also be distributed outside Norway, especially in Sweden and in North West Russia. It will be disseminated both in social and health centres, and during outreach work. The languages cover the Norwegian market well. There is however a demand for translation of the transgender leaflets into Thai. A translation into Norwegian or Danish could cover national drug users.

UK - TAMPEP leaflets will be distributed to migrant sex workers through both outreach services to establishments and through drop-in centres. In addition sex work projects will provide copies of the leaflets to Genito-Urinary Medicine clinics for distribution to migrant sex workers. Thai, Russian and Lithuanian language were identified as the most likely to be used, followed by Spanish, then Polish and Italian and then Portuguese, Latvian, Hungarian, English and Albanian. Two projects requested resources be developed in Chinese and Korean.

D10.3

Elaboration and development of new information material aimed at migrant sex workers

(HIV/STI prevention, pregnancy, contraception, security at work, legal matters, etc.)

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

The existent TAMPEP CD-ROM/Volume 1 was continuously distributed by all partners. Nevertheless, new materials were developed by some of them:

- **Information on labour regulations for members of the new EU countries** (Germany). The leaflet regards juridical advice for sex workers of the “new” EU countries, as it became quite simple for them to work on a self-employed basis, which is of great legal advantage for them. The leaflet was translated into: Polish, Russian, Czech, Estonian, Lithuanian, and German, with the support of the regional partners. It has been distributed during outreach work.
- **Information about rights and support possibilities for victims of trafficking in women** (Norway).
- **Report possibilities in case of violence** (UK). Booklet
- **The brochure “Everything OK?”** (Germany). It was done in eight languages (Hungarian, Russian, Spanish, Thai, English, Poland, Bulgarian, and Rumanian) with information about: prevention of breast cancer, sexually transmitted infections and HIV prevention. The leaflet has more images than text, as the aim was to show how to undergo a breast examination by oneself, how to recognize STI symptoms by women and men, what is dangerous and what is not with regard to HIV/AIDS. It was distributed to all partners of the TAMPEP Network.

D10.4

Report on evaluation on infra-structure of health services and NGOs, their services and capacities targeted to migrant sex workers and trafficked women

Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, United Kingdom

Health Services

Despite the economical difference between the three Baltic countries and the five other countries of the North Region (Denmark, Finland, Germany, Norway und the UK), none of them offer a wider range of services for non-insured and/or non documented sex workers, with the exception of Norway.

Some differences:

- Latvia is the only country in the region where sex workers have to undergo mandatory medical examinations every three months, which consists of testing for syphilis, gonorrhoea, HIV and other STD. After the health examination a certified physician or Dermato-Venerologists issues a health card to the sex worker, the “*Yellow Card*”. A person without a health card is not allowed to

engage in prostitution in Latvia. Sex worker must present the health card at the client's request. In Latvia there is no free of charge health care services, not for national or migrant sex workers. It is a paid service and it is not financed within the frame of the health care service minimum.

- In all other countries services are voluntary, anonymous, and mostly free of charge.
- Estonia, Latvia and Lithuania only have services for sex workers in their capitals (Tallinn, Riga and Vilnius). In the Scandinavian countries - Norway and Finland - there are only three specialised services for sex workers in the three biggest cities: 3 in Norway and 3 in Finland. While Germany and the UK have a wide network of public health services for sex workers.
- With the exception of Germany and the UK, none of the Service Providers of the other countries of the North Region employ translators or cultural mediators. Despite of being the exceptions, it is not a general practice yet in Germany and the UK, and the majority of health services are still not prepared to deal with a migrant population.
- In the UK national and migrant sex workers have the right to access free of charge sexual health services at the NHS (*National Health Service*). There is however an increasing pressure within the NHS to collect payment from migrants. In Lithuania all services have to be paid for, with the exception of those at the *Lithuanian AIDS Centre*.
- Insured national and migrants sex workers, in all eight countries, have access to all sort of medical care service, while the offers to non-insured and/or non documented persons differ a lot among the countries.

Offers for non-insured and or non documented persons:

- All countries offer the following services for non-insured sex workers on an anonymous, and free of charge basis: HIV/STI prevention and health promotion information and advice, condoms and lubricants, drug harm reduction information and advice, needle exchange, STI and HIV testing, STI treatment. The only exception is Denmark, where STI treatments are not anonymous and has to be paid for.
- None of the countries offer HIV/AIDS treatment for non-insured, with the exception of Norway.
- None of the countries offer mental health care and drug treatment and rehabilitation for non-insured persons.
- Contraceptives: only offered by Finland, Latvia, Lithuania, Norway and UK.
- Abortion: only offered by Denmark and Norway.
- Maternity and gynaecological care is only offered by Norway.
- General Medical care by Finland and Norway.
- Dental and ophthalmic care only offered by Norway
- All other services have to be paid for, in all countries.

Some conclusions regarding the North Region:

- The need to incorporate cultural mediators and/or translators, mainly in Health Care Services, to be able to deal with cultural differences during treatment. These

differences are important to consider when dealing with psychosomatic symptoms, and, very often, with self-medication.

- The need to develop more peer education activities in order to deal with the great mobility of (migrant) sex workers.
- The need to facilitate the increase of specialised services for sex workers, to avoid stigmatisation and discrimination.
- The need to motivate the creation of networks and cooperation between GOs and NGOs.

NGOs

Almost all social services for sex workers are offered only by NGOs, which includes social and legal counselling, psychological counselling, shelter, and support for victims of trafficking and language courses, etc.

Again there are large differences between the various countries in the region. For instance: because *Pro-tukipiste* is the only organisation working with sex workers in Finland, there is no possibility to establish a large national network only for sex work projects. While in both the UK and Germany on the other hand there are well established networks of sex work projects.

The UK *Network of Sex Work Projects* consists of dedicated sex work projects, generic agencies working with sex workers and academics.

In Germany there are different networks throughout the country, which are in turn interlinked to each other, as the ones of sex workers projects, of organisations dealing with migrant women, the one dealing with victims of trafficking and the network of Health Care Services.

In half of the countries – Denmark, Estonia, Finland and the UK – (public) social services are almost exclusively dedicated to victims of trafficking and not to sex workers.

Denmark: The government invested 6 million euros in a new national project in 2006, called “*Another Life*”. The project does outreach in the indoor prostitution area and offers counselling and other services but only for nationals or migrants with a legal status.

Estonia: There are very limited services. Only one NGO (TAMPEP-Estonia) offers anonymous, voluntary and free of charge services and shelter for sex workers.

Finland: There are no special Health Care Services for sex workers. The biggest barrier for sex workers accessing services is the stigma around prostitution. TAMPEP-Finland is the only NGO offering specialised services for sex workers.

Germany: there is a network of about 40 HCS offering voluntary, free of charge and anonymous services for sex workers. Besides, there are about 50 NGOs offering counselling and other services for (migrant) sex workers and migrant women, all anonymous and free of charge, and one network of 36 organisations dealing with victims of trafficking. They are much better prepared to deal with migrants in general, including sex workers. The majority offers legal and psychological advice. They address these crucial issues for a migrant target group through translators and/or cultural mediators. All of them offer their services on an anonymous and free of charge basis.

Work package n° **11**

South Region: outreach work, special target (African sex workers), development of new materials and methods, spreading of good practice methods through TAMPEP CD-ROM.

Bulgaria, Greece, Italy, Portugal, Romania, Spain

Part of TAMPEP's methodology is an analysis of a **special target group**. In all countries of the South Region national assessments were made on a chosen group which was identified based on country or region of origin. A different target group is selected for each region based on the region's specific experience with the particular nationalities. This is either in relation to the group's long presence in the Region, or because of a recent large influx to the Region, and always is associated with the fact that the group is numerous, and almost uniformly present in all countries of the region. The nationalities are selected for a special study also due to the fact that a particular approach is necessary in relation to interventions with representatives of the specific target group. In order to carry out the tailor made outreach activities most adequately responding to the group's specific needs, the groups has to be better understood by the service providers. For this reason TAMPEP carries out a deeper analysis on the migration background, living and working conditions of sex workers from the target group. The reporting about the specific target group of each region is work in progress.

In the South the study is focused on Africans. The method applied is observation and evaluation of the reasons of establishment of this specific group in that specific region. This is done by one of TAMPEP's questionnaires which is sent out to GOs and NGOs on national level dealing with that specific group of sex workers. The data for the final report was being gathered all along 2005 and 2006. Final reports based on the collected information were produced by the end of 2006. A summary of the findings is presented below in D.11.1. The analysis led to the development of special activities and/or tools for that group. The study and the material developed was shared with the partners of the other regions.

In all countries of the South Region national assessments were also made on **services** with the objective of evaluating the infra-structure of the health service providers (including NGOs), their services and capacities targeted to migrant sex workers and trafficked women. Part of the assessment focused on the kinds of services being offered and another part on the service providers. Different levels of service providers were analyzed; public health care as well as civil society and social care service providers. Certain service providers with more important programmes for sex workers had their profile examined and presented more profoundly. The intention was to ascertain the capacity of the service providers to reach the sex workers with their prevention and care measures. The key issue was availability, accessibility, barriers and gaps in the availability and whether the offered services respond to the needs. The results of the Service Mapping allowed identifying the gaps in the offered services as well as the barriers to accessing the existing services. We were also able to compare the offer with the actual needs of the sex workers through the experience

of low threshold outreach programmes which are in direct contact with the sex workers.

In order to achieve a comparable data collection on regional and European level, TAMPEP used a **methodology** which was already used with success in previous phases. Two of the previously mentioned 4 questionnaires were developed specifically for the analysis of the special target group (Needs Assessment) and the services (Service Mapping). These were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level. Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national Service Mappings and Needs Assessment were developed and finalised. Moreover, indicators for the study of the target group and access to services were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in service provision and target migrant sex workers communities through gathering of qualitative and quantitative data within the network of 24 countries. This entailed carrying out national mappings, i.e. collecting data on the services offered, service providers, accessibility to health and social care, barriers to this access for migrant sex workers, gaps in the offered services. These national assessments allowed to compare the results on regional level and make an evaluation of common tendencies (common gaps and barriers) of the region as well as the common consequences for the sex workers.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific nationalities, in specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report (D.11.4) only a short summary of the results is provided. The complete product with full analysis and conclusions is provided in a separate report *Gaps Analysis in Service Provision*.

D11.1

Report about a specific target group - AFRICAN sex workers

Bulgaria, Greece, Italy, Portugal, Romania, Spain

The Southern Region has witnessed a constant growth of foreigners involved in sex work. African women have also increasingly come to the South countries to work in prostitution. In Italy the main group from Africa from Nigeria; others are: Ghanaian and North African from Tunisia and Morocco, but not in relevant numbers. Greece has seen a significant change in the sex industry with an increasing number of girls coming from Ethiopia, Eritrea, Nigeria and Ghana. The precarious conditions under which these women work include factors such as small housing, coercion by the threat of magic rituals, violence and very limited access to services.

Over the years, we have noticed a constant, if not increasing, presence of Nigerian women involved in the prostitution. In effect, in the past 15 years there has been a constant growth of the number of foreign citizens entering the South of the EU (Spain, Italy and Greece). The migration flows started between the end of the 80s and the beginning of the 90s and had an impact on the prostitution phenomenon. More specifically, it is the Nigerian women, who appeared around 1991, together with the Albanian women who represented the most consistent presence in the prostitution market in Greece and Italy and soon after in Spain and Portugal.

There is a well established Nigerian community in Turin. Its presence is significant. This group is officially represented by six communities with ethnic backgrounds in the various parts of Nigeria. This is why Nigerian women often choose to reside in Turin, even though they might work elsewhere, in other important cities or simply in the country side surrounding Turin.

The living and working conditions of African sex workers are difficult. The integration of immigrants within the social texture is slow and for this group it is truly complicated. The sex workers are often marginalised and live in contexts “apart”. The Nigerian group, besides not being integrated, is nearly always isolated from other immigrant groups.

The Nigerian women involved in prostitution and in trafficking for the purpose of sexual exploitation face specific difficulties, which can be summed up as follows: bad living conditions, victims of blackmail, exploitation and violence (both from the part of the exploiters and that of the clients), poor housing, limited access to public services, obstacles in regularizing stay in Italy, exposure to direct health risks (HIV/STIs, unwanted pregnancies) and psychological problems.

Living and working conditions

The difficulties relative to the poor living conditions of the women refer to the extreme hardship in which they live. They are subdued and kept under strict control, thanks to psychological, economical and social conditioning. Their documents are taken away from them and kept by the exploiters as a guarantee; in the meantime, the girls are forced to live with others under continuous surveillance. Another form of coercion is the use of magic rituals performed according the culture of origin (Voodoo rituals). Finally, the housing situation is problematic. When the women work on the street, they usually live in precarious conditions, i.e. they live in groups, small rooms, former warehouses, small and decadent hotels and boarding houses,

and are generally marginalised from the society in which they are forcefully inserted and kept under control.

Mobility

Upon their entry into EU they start working. As soon as they commence paying their debt they also begin moving to other regions of the country or other countries of the EU, especially from South to the Northern countries, such as the Netherlands, Norway, etc. They travel in search of new work places, often outside the cities, near the highways. At all times they are highly exposed to the risk of violence. Their exposure to, and factual experience of violence is disproportional, on grounds of being a prostitute, a foreigner and of African ethnicity.

Violence

A study conducted prevalently in the South Italy informs that: “(t)he Minister of Interior has reported that from 1992 to 1999 that the percentage of women victims of homicide among foreigners has grown from 6.8% to 23.1%. Between 1994 and 1997, the number of foreign prostitutes murdered on the street was 68, whilst in the year 1999 alone, 186 women (mostly Albanian and Nigerian) were struck down. However, the data recently presented by other non-governmental organisations speaks of 400 women murdered in the year 2000.”¹⁰ This significant assessment illustrates how along with the growth of the numbers of persons that exercise prostitution, increase the violent acts against immigrants. By expressing criminal acts in numbers (which are most likely higher in reality) we can confirm how unsafe the working conditions of migrant sex workers are. Such reports also highlight the fact that the majority of the victims are women.

Arrival, Dependency and Debts

A temporary transit visa (usually valid from 3 to 15 days) is obtained through "brokers". This is the first element of the debt the women will have to repay. It is also the beginning of the manipulation and blackmail. All cost related to their travel to Europe which are born by the controllers, need to be paid back with very large interests. As soon as they arrive they begin working towards paying of their debts, which means they do not earn anything for themselves initially. The "ransom" price which needs to be paid may reach as high as €40,000 to €50,000. The Maman, the female figure that controls the women, keeps in touch with the international criminal groups and usually has from five to six or from 10 to 15 girls in her charge. Every month she takes her percentage of the profits, plus the portions due to local pimps and the criminal groups in Nigeria. The exploitation mechanisms start at the very beginning of their journey and last until the sex workers manages to accumulate the capital or to escape.

Social background

A dramatic situation emerges from research conducted on the labour market in Nigeria. Representing almost half of the national population, the female population

¹⁰ Full Report of A. Mazzeo and A. Trifirò, *Traffickanti di sogni*, available at: <http://www.terrelibere.org/counter.php?file=traffickanti.htm&riga=68>

of Nigeria is strongly penalised in its access to the labour market. The income of men is by far much greater than that of women. Yet, by far the greatest problem is not that of professional placement but that of “finding a source of income”, whether in a formal setting (work requiring only low qualifications) or an informal setting (small business). Entering into a polygamous marriage is sometimes the only prospect left open to resolve the problem of a young girl that wants to survive and overcome poverty.

D11.2

Up-date of the information material

Bulgaria, Greece, Italy, Portugal, Romania, Spain

The up-dating of the TAMPEP CD-ROM enabled the opportunity to include the Italian language in the prevention materials. This was requested in the past from the users of the first CD. Services providers dealing with sex workers in Italy refer to the *Comitato Per i Diritti Civili delle Prostitute* for a lot of the technical support, for methodology, developing information materials and peer education in the programmes for sex workers.

Where requested, the presentation and distribution of the old CD-ROM continues. Many of the NGOs that had already received the CD in the past await the receipt of new materials.

The Bulgarian network has printed some of the educational materials in the Russian language for the Russian-speaking sex workers. They also used the materials from the previous CD.

In Italy a short video was produced on the basis of “*Augusta’s Way*”, especially made for outreach work with Nigerian sex workers.

TAMPEP in Italy has collaborated with the National Focal Point of AIDS and Mobility at the *Istituto Superiore di Sanità* on the development of new material for the 2006 Health Ministry’s National Campaign of HIV prevention of for migrants.

ACT UP, The TAMPEP partner in Greece developed a DVD movie *Keep the Promise, don’t turn your back to AIDS*, on various resources, including the TAMPEP material.

A partner of the ROPP network in Spain, *ACLAD* together with University of Salamanca, prepared a DVD on safe sex training which are carried out in indoor prostitution settings.

D11.3

Elaboration and development of new information material aimed at migrant sex workers

(HIV/STI prevention, pregnancy, contraception, security at work, legal matters, etc.)

Bulgaria, Greece, Italy, Portugal, Romania, Spain

HESED has distributed the CD-ROM to the 9 other organisation/services providers for sex work programme in Bulgaria and all of them had shared great satisfaction with the new product and according to the preliminary evaluation they would evaluate its **usefulness** between 8 and 10.

Italy sent and distributed several of the new CD-ROMs to all participants during the presentation of the national campaign for immigrants. It was also distributed at the Correlation meeting in Turin with Gruppo Abele. Presented at the Equal partners “Emergendo” project meeting in Genova, in Verona at the training course for social operators Progetto Sirio, at the meeting on Prostitution and trafficking in Ferrara, also presented to the North-East Network of associations against trafficking and at the meeting of the NFP in Rome. Copies were sent to all the members of the national network and to all network projects for sex workers.

Copies of the CD-ROM were sent to 37 services providers, of which 13 were from the public sector.

The CDs were moreover being distributed during such occasions as conferences and technical encounters for projects within our network.

The information materials printed from the CD were distributed during outreach work with migrant sex workers, drug-users in the migrant sex workers population, in the public health services facilities where sex workers are treated, in projects offering shelter to trafficked women that are undergoing health care and treatment.

In regards to the reduced evaluation phase of the new CD, caused by technical delays of the production process, Italy nevertheless obtained during the brief period 12 evaluative responses (out of the 37 immediately sent out CDs); all of which were very positive, with none being negative.

Further more, the feedback form the outreach workers and service providers included a suggestion to add the following languages: Chinese, Arabic, Serbo-Croatian, and Macedonian.

In Romania, the new CD-ROM was distributed to all the 10 ARAS branches (Bucharest, Arad, Timisoara, Cluj, Brasov, Piatra Neamt, Iasi, Bacau, Constanta, and Craiova). There was a management meeting where all the branches received information about the CD-ROM and how to promote it. There were several local teams who directly distributed the CD-ROM among the sex workers.

D11.4

Report on evaluation on infra-structure of health services and NGOs, their services and capacities targeted to migrant sex workers and trafficked women

Bulgaria, Greece, Italy, Portugal, Romania, Spain

All countries in the South region have an extensive network of service providers, NGOs, and other organisations working with (migrant) sex workers. Romania is the only case, where TAMPEP member ARAS is the only organisation that provides HIV/AIDS/STIs prevention activities for sex workers. ARAS branches, under the supervision of the ARAS Bucharest office, implement the activities in the national territory. The members of the local outreach teams are involved in a comprehensive training and exchanging experience program in order to increase the quality of the services and to raise the capacity of the organisation to offer services for sex workers and trafficked women. Particularly in Romania, access to Public Services for the sex workers is limited because most of them have no legal papers or health insurance; without health insurance public health services are simply not offered.

Nevertheless, both Romania and Bulgaria have made significant progress in their coverage of service provision. In Bulgaria the national Programme for the Prevention and Control of HIV/AIDS, funded by the Global Fund, has a separate component that addresses HIV-prevention among sex workers. Together from NGO and Public Services, low threshold AIDS/STI prevention services for sex workers are being offered in 9 regions. In Sofia there are also several places, where sex workers can receive contraception for free. With regards to other health care services however, a basic limited package is available for insured sex workers and not for the non-insured ones.

In all the South countries health and social care services, such as shelter, psychological and partially legal consultations, are available for women, who are underage and/or have reported being victims of trafficking. Not yet all the countries give the right for the victim to a residence permit for undetermined time, only in Italy a large network of NGOs and Public Services are addressing this problem, working together in a very holistic way.

In Portugal, Romania, Bulgaria no maternity care is given to migrant undocumented sex worker. And we regard this as a serious gap, considering that the majority are young women in fertile age.

Furthermore in Romania the Romas are disproportionately represented among children and young people involved in prostitution. There is a lack of appropriate and targeted support and services for Roma ethnic minority.

The sexual infections test and treatments are guaranteed in all countries (except in Romania) by Public Services for both national and immigrant sex workers; and so far, the AIDS treatment is not guaranteed free for everybody everywhere. In Bulgaria a lack of accessibility of HIV treatment is being reported.

East Region: outreach work, special target (East European sex workers), development of new materials and methods, spreading of good practice methods through TAMPEP CD-ROM.

Austria, Czech Republic, Hungary, Poland, Slovakia

Part of TAMPEP's methodology is an analysis of a **special target group**. In all countries of the East Region national assessments were made on a chosen group which was identified based on country or region of origin. A different target group is selected for each region based on the region's specific experience with the particular nationalities. This is either in relation to the group's long presence in the Region, or because of a recent large influx to the Region, and always is associated with the fact that the group is numerous, and almost uniformly present in all countries of the region. The nationalities are selected for a special study also due to the fact that a particular approach is necessary in relation to interventions with representatives of the specific target group. In order to carry out the tailor made outreach activities most adequately responding to the group's specific needs, the groups has to be better understood by the service providers. For this reason TAMPEP carries out a deeper analysis on the migration background, living and working conditions of sex workers from the target group. The reporting about the specific target group of each region is work in progress.

In the East the study is focused on **East Europeans**. The method applied is observation and evaluation of the reasons of establishment of this specific group in that specific region. This is done by one of TAMPEP's questionnaires which is sent out to GOs and NGOs on national level dealing with that specific group of sex workers. The data for the final report was being gathered all along 2005 and 2006. Final reports based on the collected information were produced by the end of 2006. A summary of the findings is presented below in D.12.1. The analysis led to the development of special activities and/or tools for that group. The study and the material developed was shared with the partners of the other regions.

In all countries of the East Region national assessments were also made on **services** with the objective of evaluating the infra-structure of the health service providers (including NGOs), their services and capacities targeted to migrant sex workers and trafficked women. Part of the assessment focused on the kinds of services being offered and another part on the service providers. Different levels of service providers were analyzed; public health care as well as civil society and social care service providers. Certain service providers with more important programmes for sex workers had their profile examined and presented more profoundly. The intention was to ascertain the capacity of the service providers to reach the sex workers with their prevention and care measures. The key issue was availability, accessibility, barriers and gaps in the availability and whether the offered services respond to the needs. The results of the Service Mapping allowed sex workers the gaps in the offered services as well as the barriers to accessing the existing services. We were also able to compare the offer with the actual needs of the sex workers through the experience of low threshold outreach programmes which are in direct contact with the sex workers.

In order to achieve a comparable data collection on regional and European level, TAMPEP used a **methodology** which was already used with success in previous phases. Two of the previously mentioned 4 questionnaires were developed specifically for the analysis of the special target group (Needs Assessment) and the services (Service Mapping). These were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level. Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national Service Mappings and Needs Assessment were developed and finalised. Moreover, indicators for the study of the target group and access to services were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in service provision and target migrant sex workers communities through gathering of qualitative and quantitative data within the network of 24 countries. This entailed carrying out national mappings, i.e. collecting data on the services offered, service providers, accessibility to health and social care, barriers to this access for migrant sex workers, gaps in the offered services. These national assessments allowed to compare the results on regional level and make an evaluation of common tendencies (common gaps and barriers) of the region as well as the common consequences for the sex workers.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific nationalities, in specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report (D.12.4) only a short summary of the results is provided. The complete product with full analysis and conclusions is provided in a separate report *Gaps Analysis in Service Provision*.

Report about a specific target group – EAST EUROPEAN sex workers

Austria, Czech Republic, Hungary, Poland, Slovakia

EU enlargement - In response to the new migratory movements in the sex industry following the recent EU enlargement, new and/or additional interventions are needed to reach the (new) target groups – one main group being **sex workers from Eastern Europe**. As former countries of origin transform into transit and destination countries, intensive research has to be carried out to properly assess the changed situation (e.g. through mappings), followed by concrete work to improve the working and living conditions of CEE and other migrant sex workers. This especially applies to those countries within the region that so far were not confronted with the presence of migrant sex workers. Changes refer to the legal status and possibilities of the sex workers, their work places, language and cultural background, discrimination as migrants, additional stigmatisation as migrant sex workers (also from within the original community), discrimination and hierarchical structures within the group of sex workers, increased dependency because of a weak legal status, less self-confidence/ empowerment.

Border regions - In addition to the different areas of sex work, in the border region sex workers from CEE often find themselves in a difficult situation: they work and live in their country of origin but are at the same time practically isolated; they work with clients from the West, need language abilities to negotiate with them and often even the bar owners are from e.g. Austria or Germany and speak another language. With the rapid enlargement of the sex industry in border areas of the East Region and the crucial role these play in terms of migration/mobility, it is important to develop a specific kind of cross-border cooperation to reach the sex workers who work in those regions. This would mean to intensify work that has already been developed and implemented by projects on highways in other regions – e.g. Germany, Poland and Italy.

Services - There is a general lack of services for sex workers in almost all countries of the East Region. In this, there is a special need for services directed towards CEE and other migrant sex workers. These services should be able to provide useful (legal) information, bridge language barriers and increase the self-confidence of sex workers through their empowerment and support.

Legal situation/Rights - In general, there is a lack of information on the legal situation of/for CEE and other migrant sex workers, in the country of destination. This includes not only prostitution legislation but also immigration laws, information on working conditions/regulations (e.g. regulation/registration), asylum or marriage. As the target group is getting more complex, the amount of information that is needed in order to make relevant choices and decisions also increases. This is a phenomenon throughout the region with the increase of east-east-migration and with the different legal status that CEE sex workers have in different countries, depending on whether they are EU-citizens or not. Also, there is no adequate integrated legislation (within the region). Drafts of laws and changes do not improve the situation but spread insecurity over increasing restrictions. Strong lobbying for the legal rights of migrant sex workers and for adequate legislation is much needed and

hardly exists in most of the East Region's countries. In some of the countries (Czech Republic, Hungary), the UN convention of 1949 for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others seems to pose a considerable obstacle in implementing rights based legislation and in the legal recognition of sex work.

Specific issues or needs that could be identified – from the national reports of the partners' own and direct work experience – for sex workers from Eastern European countries:

- limiting legal situation of excluding and discriminating impacts on the living and working conditions
- different legislations and regulations apply, depending on the status (of the country of origin), i.e. non/EU-member state, bilateral agreements,...
- many different languages, cultural and religious backgrounds etc. where the women cannot be targeted as belonging to "one group"
- language barriers (need for work with cultural mediators)
- need for foreign language courses (to improve self-determination and reduce vulnerability)
- need for better and adequate information about rights (in the country of destination)
- inclusion into the "formal" labour market, legalisation of prostitution/recognition as labour
- need for services directed towards and accessible for migrant sex workers

Noteworthy developments regarding migration and mobility patterns are:

- increasing presence of Romanian and Bulgarian sex workers (in Austria)
- increasing presence of Roma women from Hungary, Romania and Bulgaria (in Austria); as a marginalised group, they have fewer possibilities in their countries and experience discrimination and exclusion
- increasing presence of Slovak women (in the Czech Republic)
- "migrant" sex workers who are national minorities in their country of origin (Hungarian women from Romania who work in Hungary); in these cases, at least language barriers do not exist
- migration pattern from Ukraine through Poland to Western Europe
- in general: a bigger diversity of different nationalities, more migration & mobility

D12.2

Up-date of the information material

Austria, Czech Republic, Hungary, Poland, Slovakia

The regional partners distributed the **TAMPEP VII CD-ROM** within their national networks of GOs and NGOs, various relevant national institutions that work in the area of health, with sex workers directly and interested individuals who serve as multipliers. The short-term evaluation of the use of the materials was overall very positive and underlined the need for multi-lingual information materials for sex workers. Specific issues that were touched in the evaluations were:

Content: The broad range of materials available on the CD-ROM was perceived as very valuable. Additional needs for materials were identified according to the needs of sex workers, including: legal information (social security/insurance, tax regulations, legal status), list of vocabularies with important or useful phrases relating to sex work in different languages. There were also comments on changes/additions to leaflets: the folder on drug use should mention various body regions where intravenous drug use is extremely dangerous (neck, groin) and should stress the importance of using one's own equipment (including spoons). The folder on STIs should include information on the HPV-virus which causes health problems and can lead to cancer (transmission is not necessarily through sexual conduct).

Languages: The number of languages in which the TAMPEP folders are available was stressed as extremely useful. The main languages used varied from country to country depending on the respective sex worker population. There were also suggestions to include further languages due to arising needs (Chinese) and to adapt the materials to address various Roma communities which might be difficult due to different dialects and lack of a singular language.

Form: The format of the CD-ROM and of the leaflets was much appreciated but it was added that it might be useful to include more pictures and illustrations and to increase the font size of the text. It was also mentioned repeatedly that the CD-ROM itself should have a multi-lingual menu in order to be more accessible for organisations and individuals in different countries. As in some countries the CD-ROM was also distributed directly to sex workers, it was suggested to include more elements such as short movies e.g. on how to use a condom.

Technical: It was suggested that the CD-ROM should run not only using Firefox but also other programs as this might cause technical difficulties for those who use other tools.

D12.3

Elaboration and development of new information material aimed at migrant sex workers

(HIV/STI prevention, pregnancy, contraception, security at work, legal matters, etc.)

Austria, Czech Republic, Hungary, Poland, Slovakia

The members of the East Regional Commission continued the promotion of the existing TAMPEP VI CD-ROM and distributed the new TAMPEP VII CD-ROM. In addition to this, a Hungarian translation of the FENARETE training manual for peer educators was made. Slovakia produced an information leaflet for Slovakian sex workers who intend to work in the sex industry in Vienna, containing information on the legal situation (registration, taxes, health check-ups etc.) and services provided by LEFÖ. LEFÖ in turn produced a brochure in Hungarian with specific information on working and living conditions for (migrant) sex workers in Austria (social

security, insurance, taxes etc.) called “Spotlight on the fundamental rights of prostitutes”, within an EU-co-operation project.

D12.4

Report on evaluation on infra-structure of health services and NGOs, their services and capacities targeted to migrant sex workers and trafficked women

Austria, Czech Republic, Hungary, Poland, Slovakia

Through performed together street work activity (during the exchange visits) it became evident that there are similarities as well as differences in the organisation of the prostitution scene between Vienna and cities in the other partners' countries. In part, they are due to Austria being a country of destination rather than a country of origin or transit. The similarities/differences refer to: organisation of prostitution scene (street, establishments, bars, clubs, brothels, massage parlours, apartments) – which, of course, is also framed by the relevant legal regulations, infrastructure of the establishments (rooms, showers etc.), access to establishments/sex workers, presence of migrant women in sex work, presence of nationalities, distribution of leaflets, cultural mediation.

One interesting lesson learned from the Regional Commission meeting was the importance of describing the different forms of indoor prostitution. In different countries each term can be interpreted in different ways and each type of prostitution may take place according to different patterns. It is valuable to exchange information about the specificities of each form of prostitution.

In addition, the evaluation of the mappings of services brought the following regional results:

Non-availability - In general, there is a lack of services targeted at sex workers, and especially at migrant sex workers throughout the East Region. With the general public health services, there are difficulties in accessing them for (migrant) sex workers: lack of insurance, legal status, language barriers, stigmatisation as sex worker etc. The situation is similar with public social services – where in some cases (e.g. Slovakia) they hardly exist at all.

Status/Insurance - One of the main obstacles for migrant sex workers in accessing any kind of public health services is the necessity of insurance. This is noted by all surveys throughout the region. Furthermore, the possibility of obtaining health insurance is related to one's legal status. For migrant sex workers with an undocumented status or non-formal status, insurances offered by private companies are often not affordable. Also, a number of health checks is not covered by the general health insurance and would have to be paid privately in addition to those costs covered by insurance. In both Hungary and Austria, there is an obligatory health check (HIV and STIs) for (registered) sex workers. Because of the restrictive system, only a small percentage of sex workers is actually registered. The possibility for registration also depends on one's legal status.

Mediation - The use of cultural mediation (or interpreters) seems to be a fairly new concept to public health and social care services throughout the East Region. Consequently, language barriers and other (cultural) difficulties inhibit the development of a mutual understanding of migrant sex workers' needs. This also restricts the rights of migrant sex workers as often it is not possible for them to self-determine their condition and treatment and they are not treated respectfully as "clients" but face racist, discriminating and non-accessible structures as migrants and as sex workers.

Networks - The lack of referral networks between public health/social services seems to be in contrast to numerous networks (on national and international level) between NGOs. In parts, this is due to the general lack of services either targeted at or accessible to (migrant) *sex workers*. On the other hand, there is also a lack of reflection on the needs of this target group and on ways to offer and improve services (including to non-insured people).

Gap of services in border area

In the East Region the new phenomenon is high concentration of street sex workers in the border area, who are not covered by the service providers and/or outreach projects.

Work package n° 13

West Region: outreach work, special target (Latin American sex workers), development of new materials and methods, spreading of good practice methods through TAMPEP CD-ROM.

Belgium, France, Luxembourg, The Netherlands, Switzerland

Part of TAMPEP's methodology is an analysis of a **special target group**. In all countries of the West Region national assessments were made on a chosen group which was identified based on country or region of origin. A different target group is selected for each region based on the region's specific experience with the particular nationalities. This is either in relation to the group's long presence in the Region, or because of a recent large influx to the Region, and always is associated with the fact that the group is numerous, and almost uniformly present in all countries of the region. The nationalities are selected for a special study also due to the fact that a particular approach is necessary in relation to interventions with representatives of the specific target group. In order to carry out the tailor made outreach activities most adequately responding to the group's specific needs, the groups has to be better understood by the service providers. For this reason TAMPEP carries out a deeper analysis on the migration background, living and working conditions of sex workers from the target group. The reporting about the specific target group of each region is work in progress.

In the West the study is focused on **Latin Americans**. The method applied is observation and evaluation of the reasons of establishment of this specific group in that specific region. This is done by one of TAMPEP's questionnaires which is sent

out to GOs and NGOs on national level dealing with that specific group of sex workers. The data for the final report was being gathered all along 2005 and 2006. A summary of the findings is presented below in D.13.1. Final reports based on the collected information were produced by the end of 2006. The analysis led to the development of special activities and/or tools for that group. The study and the material developed were shared with the partners of the other regions.

In all countries of the West Region national assessments were also made on **services** with the objective of evaluating the infra-structure of the health service providers (including NGOs), their services and capacities targeted to migrant sex workers and trafficked women. Part of the assessment focused on the kinds of services being offered and another part on the service providers. Different levels of service providers were analyzed; public health care as well as civil society and social care service providers. Certain service providers with more important programmes for sex workers had their profile examined and presented more profoundly. The intention was to ascertain the capacity of the service providers to reach the sex workers with their prevention and care measures. The key issue was availability, accessibility, barriers and gaps in the availability and whether the offered services respond to the needs. The results of the Service Mapping allowed identifying the gaps in the offered services as well as the barriers to accessing the existing services. We were also able to compare the offer with the actual needs of the sex workers through the experience of low threshold outreach programmes which are in direct contact with the sex workers.

In order to achieve a comparable data collection on regional and European level, TAMPEP used a **methodology** which was already used with success in previous phases. Two of the previously mentioned 4 questionnaires were developed specifically for the analysis of the special target group (Needs Assessment) and the services (Service Mapping). These were used by all 24 partners and distributed to GOs (mainly Health Care Services) and NGOs (dealing with migrant women, sex workers and/or migrant sex workers) on national level. Another factor which ensured comparability was the fact that the assessment was carried out within the same period of time by all partners. The methodology applied – the same sort of information given by the same profile of respondent - enabled an evaluation on the same data quality level, giving a picture of similarities and differences on cross border issues, as well as on regional and European issues.

In the first GM the questionnaires and common guidelines for the methodology of the national Service Mappings and Needs Assessment were developed and finalised. Moreover, indicators for the study of the target group and access to services were also defined. Successively the questionnaires were translated into all relevant languages and sent to the respondents in the relevant languages for each country. Towards the end of 2005 the preliminary results were collected by the National Coordinators and followed up in the second year. Their initial analysis was made at the RC Meeting. At the end of 2006 the final results were gathered by the National Coordinators and analysed into a National Survey Report. These were further elaborated by the Regional Coordinators into comparative analysis of the common regional trends.

The objective was to formulate, in the role of a European observatory, a comprehensive and updated assessment of the situation in service provision and target migrant sex workers communities through gathering of qualitative and quantitative data within the network of 24 countries. This entailed carrying out

national mappings, i.e. collecting data on the services offered, service providers, accessibility to health and social care, barriers to this access for migrant sex workers, gaps in the offered services. These national assessments allowed to compare the results on regional level and make an evaluation of common tendencies (common gaps and barriers) of the region as well as the common consequences for the sex workers.

The assessment is a tool not merely for accurate information gathering, but more importantly for better understanding of the interventions required, with the objective of customising the activities and services in response to the actual needs of the specific nationalities, in specific countries, regions and cities. The results of the mappings serve as a source of information for designing targeted interventions. Additionally, the results have a vital function of strengthening the knowledge and capacities of the services providers.

In this section of the Report (D.13.4) only a short summary of the results is provided. The complete product with full analysis and conclusions is provided in a separate report *Gaps Analysis in Service Provision*.

D13.1

Report about a specific target group – LATIN AMERICAN SEX WORKERS

Belgium, France, Luxembourg, The Netherlands, Switzerland

Based on the information gathered from the questionnaires sent back by the various GOs and NGOs who deal with the Region's target group and from our outreach experience with community of Latin American sex workers, TAMPEP can provide the following analysis on migration background, living and working conditions of the Latin American sex workers.

For over 25 years Latin American (L.A.) women and transgender persons have come to Europe to work in the prostitution. In some countries of the Western Europe they formed the first group of migrants that came to work in the sex industry in the end of seventies. The first countries with originally the highest presence of L.A. sex workers are Spain, France, Switzerland, Austria, Netherlands and Italy. Many of them did not manage to integrate within the local society. As repressions against the persons without a regularised situation started, these persons found themselves chased away from official prostitution scene and forced to enter the illegal circuit where they are excluded from the contacts with service providers.

In every country of the West Region (except for Belgium and South of France), the Latin American sex workers form an important group. In Luxemburg they even form the biggest group of migrant sex workers. They come mainly from Ecuador, Brazil, Colombia, Venezuela (France and Luxemburg); Venezuela, Chile, Peru, Colombia (Belgium); Colombia, Dominican Republic (the Netherlands).

The presence of transgender persons from Latin America is also significant. In France Latin American transgender sex workers form the second biggest group of migrant sex workers. Although in recent years admission to EU countries has

become more difficult, there is scarcely any evidence of a decline in the number of Latin American women in prostitution. The principal motive for working in Europe - the bad economic situation in their home countries - has not changed.

Migrant Latin American sex workers in the West Region live in very variable circumstances and it is quite difficult to draw the common lines because of the group's diversity (gender, nationality, age, etc.) that vary strongly among the five countries. What is common among all Latin Americans is that usually they rely on their own (ethnic and/or cultural) group in the transit countries and in the country of destination and that they are usually very mobile within the host country and towards neighbouring countries. This mobility is influenced by policies at the national and international levels and depends on the particular circumstances of the person. Also their dependence on third parties during their migration process makes them susceptible to exploitation. As a result of the restrictive prostitution policy the situation and the composition of the target group can vary from day to day.

For the purpose of a better understanding we could divide the new generation of Latin American sex workers (who have a totally different situation than the people who arrived in the previous two decades) into two groups:

Transgender Latin Americans who form the main group of Latin Americans in Belgium, France and Luxemburg and minority group in the Netherlands:

- Most of them are illegal what makes them vulnerable to exploitation and coercion,
- Being illegal, they have no access to health services
- They are young (with the exception of Luxembourg where the first generation of Latin American migrants is still present), and they do have access to health services and additionally there is very little knowledge of the transgender issues and Latin American specific, among the service providers. But often their network does not want them to have too much contact with official service providers. *PASST* in France is the only specific community based organisation and specific service provider for transgender in the whole region.

Female Latin Americans who form majority group in the Netherlands:

- Most of them come to Europe as a result of (family) networks and are accommodated by the Latin Americans who are already established in the country
- Most of the money earned in prostitution is sent back to home countries
- Many of them have a legal status in the country, usually achieved by marriage with a EU citizen
- Usually they are of older age

The main condition for an effective health promotion programme is to understand these different circumstances and to work out adequate response to them. Making use of the existing specific way in which Latin American women inform each other in prostitution is inherent to the TAMPEP methodology. To improve and add information and to encourage exchange within existing networks is one of the most important functions of the fieldwork. The mobility of the women also needs to be taken more into consideration. Latin American transgender have an added

vulnerability. They form a high risk group with regard to HIV/STI, and it is therefore vital that the access of service providers to these sex workers is enhanced.

D13.2

Up-date of the information material

Belgium, France, Luxembourg, The Netherlands, Switzerland

All existing TAMPEP materials were extensively reviewed following the evaluation of the international distribution of the first CD-ROM. All materials were then translated into six additional languages (Estonian, Lithuanian, German, Slovak, Latvian and Ukrainian), making a total of 18 languages (English, French, Spanish, Portuguese, Russian, Polish, Bulgarian, Albanian, Czech, Hungarian, Rumanian, Thai, Estonian, Lithuanian, German, Slovak, Latvian and Ukrainian). We cooperated between the 5 countries of the region in the process of this update, the testing and the production of the new folders in the 18 languages. Moreover, the translations included adjustments to each local context and identified needs. A big part of the updated and new material was used in the production of a new CD-ROM.

The TAMPEP resources material are widely spread and used in our region as common tools for reaching the very highly mobile (migrant) sex workers. The strategy of using the same multilingual materials in all 5 countries is way in itself of addressing the mobility. The same leaflets seen by a sex worker in more than one place, in more than one country have the purpose of building trust. She should feel confident to read materials produced by the same source especially if she found the information useful from the first time she had contact with a TAMPEP material. Moreover, the fact of referring to the many local services providers within one leaflet, booklet or brochure makes our material additionally helpful for someone planning to make another migratory move. The sex worker can hold on to the material for longer, not only because the information within continues to be of interest, but also because the reference to service providers in other countries will be helpful when she ends up working in a different location.

D13.3

Elaboration and development of new information material aimed at migrant sex workers

(HIV/STI prevention, pregnancy, contraception, security at work, legal matters, etc.)

Belgium, France, Luxembourg, The Netherlands, Switzerland

Several completely new materials have been developed in each country. They have been tested in outreach work, reviewed, adjusted and translated. The production and distribution was the next phase. A big part of the updated and new material was used in the production of a new CD-ROM which was finalised in September 2006. This also when the distribution of the new CD began. In all countries other updated and

new materials were being used sooner, in the form of a brochure which uses mostly pictures and limited text - thereby crossing many language barriers - to inform about sexual health. Production of materials in these forms requires much less time therefore their distribution and usage was possible almost immediately.

While all these adjustments were being made the existing materials (leaflets and CD-ROM) continued to be distributed and used for outreach work.

D13.4

Report on evaluation on infra-structure of health services and NGOs, their services and capacities targeted to migrant sex workers and trafficked women

Belgium, France, Luxembourg, The Netherlands, Switzerland

In all countries of the West Region (migrant) sex workers have in principle voluntary, free of charge and anonymous access to sexual health medical services. There are relatively extensive networks of service providers for migrant sex workers and trafficked women. Most of the sex workers are contacted by outreach workers (although they do not always speak the languages of the migrant sex workers) and are informed about the possibility of having medical check ups and are offered written information material, whenever possible in their own language.

National platforms are maintained and expanded in order to exchange information and experience among different organisations working in the same field. Often there exist several active networks grouped on various aspects of sex work, such as human rights protection, prevention of HIV/AIDS/STI or fighting human trafficking. This is illustrated by the French networks '*Plateforme contre la traite des êtres humains*' which was set up to promote reflection on trafficking, monitoring of the law and support for the protection and inclusion of trafficked people, and the '*Union Nationale des Associations de Lutte contre le Sida*' a national network gathering 40 organisations in France working on HIV questions, both of which TAMPEP France is an active member of. The other Western European countries show similar infrastructures.

Even if the infrastructure and capabilities of service providers are high level in the region, the general situation is worsening and it can be stated that there is no guarantee for the continuation of the necessary services and for adequate response to the health and social needs of sex workers, particularly for the new-comers and the persons who work in clandestine forms of prostitution. In all five countries **non-insured and non-documented** persons are **in practice excluded** from general **health care**. Generally, due to the present situation we have no estimations how many sex workers have access to health care and how many don't.

Public sexual health services in general are well covered, in terms of being present in many cities and locations of the Region. There is also tradition for specific STI prevention services. Moreover, there is general good coverage of the work of NGOs and good NGO and GO cooperation. Yet the reality of many changes in the sex industry in the West lead to the fact that good established practices of the service providers do not always meet the needs of the changing circumstances, which often

occur very abruptly. The good practices need to be adapted (and easily adjustable) to the rapidly altering situation in order to maintain their high quality.

The barriers to access services common for every country

- lack of adequate response from the side of health services to the present situation of prostitution (clandestine and illegal work)
- fact of working clandestinely/illegally and being beyond the reach of the outreach workers/services
- lack of knowledge about the possibility of access to the services, that results from the difficulties in communication between the outreach workers and the migrant sex workers
- influence of pimps/trafficking networks
- fear of being exposed as sex workers, distrust towards organisations that deal with prostitution
- there, where sex workers have to pay income taxes, they might not want to be recognised as such by public institutions
- high level mobility of sex workers makes it difficult to maintain contact with the sex workers

Work package n° 14

Dissemination of the results: website, newsletter, technical assistance (workshops and trainings) and provision of consultancy and policy advice for international agencies and national authorities and various beneficiaries

D14.1

Up-dated and interactive website

The data on the TAMPEP website (www.tampep.com) has been regularly actualised with the new collected data. The up-dated information allowed the creation of a forum where continuous exchange with the network partners (as well as with persons, institutions and organisations outside the network) is being carried out. This flow of new information will continue to be added to the already existing information. Following the European Commission's introduction of the ".eu" domain TAMPEP website currently can be found under the new URL www.tampep.eu.

D14.2

A regular pan-European newsletter

The first newsletter of TAMPEP VII came out in April of 2005. It gave an up-date on policy developments, country news as well as on organisational details.

The second Newsletter of the TAMPEP VII was finalised in September 2006. It presented an overview of the changes in sex work across Europe over the past year. The Newsletter focused on three areas: political changes, changes in the population of sex workers and finally the services available to (migrant) sex workers. The brief articles within give a broad picture of current trends in the field of prostitution and health promotion. Both Newsletters are available upon request.

Other newsletters are produced and distributed among the Network members with specific topics, e.g. Interim results, technical information, country news.

D 14.3

Guidelines for training programme for outreach workers, health and social care providers

(See Skill and Training Tools Report)

TAMPEP has developed over the last 13 years a specific methodology and tools for working directly with (migrant) sex workers. This methodology can be readily adapted for different prostitution settings. For this purpose we developed a set of guidelines that we use as a tool for our activities on the national and international levels. Our intervention methodology is based on necessity to respond adequately to the needs of sex workers, offering holistic services that combine all elements of comprehensive strategies and activities. The fact that we operate as community development and participation model which is rooted within the equalities and human rights framework, lays the promotion of equitable access to support and services for (migrant) sex workers and makes the voice of persons involved heard. This means that the implementation of this principle and the practical realisation in service provision and realisation of risk-reduction programme needs a clear basic philosophy and commitment and capacity building accompanied by creation of supportive environment by the services.

Our task as Coordination Centre in capacity building inside the network countries and in the transmission of experience within the cooperating organisations consists in making the framework clear and supporting the adaptation to specific contexts and targets. Even in the specific training programme and creation of specific tools adapted to the specific situation of services providers and the target the basic principles are based on three fields:

1. Our rationale for providing health services is that sex workers have a right to them. Our priorities include providing quality services; performing outreach; and involving clients, partners, and owners of sex work establishments, the police, the judiciary, the media, politicians and policy-makers. To build trusting

relationships, street work and other outreach must be systematic, frequent and intensive. It should not be limited to distributing condoms, lubricants and information, but include social, legal and psychological assistance as well.

2. In the social domain, there need to be anti-violence and protective activities, such as providing social and legal support and doing consciousness-raising in the community, all with the ultimate objective of empowering sex workers.
3. In the civic arena, existing projects and services may function as both advocates for the rights of sex workers and sources of information. Depending on the needs of the country in question, such work might entail creating a national advocacy platform, collecting and disseminating evidence, providing expertise to ministries and local authorities, creating a protocol for best practice or increasing public awareness through media work and campaigns.

The provision of guidelines for training programmes contain the three above mentioned elements and articulate capacity building for connection of these three fields. For example, the implementation of peer education programme in order to be realisable must be based on the capacity of the services to develop good and adequate, non-judgemental outreach work combined with provision of health services. But the level of community involvement and peer education is directly bound with the work environment of the group. This means that the creation of supportive environment and anti-violence protective activities for reduction of the risk and empowerment of the sex workers is central condition for the possibility and correct use of peer education model. The same concerns the human rights framework and sensitisation to the effects of civil society and public authorities on the effects of direct augmentation of vulnerability of sex workers (and specifically the migrant sex workers) and HIV/STI prevention. It means that the capacity of the service providers for lobby and advocacy is as relevant and important as their activities in the field of condom provision and counselling.

One of the central elements in our method is the application of continuous assessment of the situation in prostitution and the techniques of the collection of data for the efficiency of outreach work. For example in the interim results of prostitution mapping questionnaires there was a clear and significant change in the composition and the places of prostitution: it means that there is in all countries an important shift from street prostitution (previously the primary form of prostitution) towards the indoor prostitution in its all forms. This data acquired through our national mapping questionnaires lead to the conclusion that there is a high necessity to drastically change the way of organising outreach work. In this case it means that the National Coordinator of TAMPEP, with the technical support of the Coordination Centre and the Regional Coordinator, organised a specific research and trainings for outreach projects for the development of techniques of identification and mapping of indoor prostitution and the techniques how to reach these forms of prostitution. The same tendency of shifting towards the indoor was confirmed by our most recent prostitution mapping, which reaffirmed the need to continue our research on developing techniques of reaching sex workers in indoor settings.

For the TAMPEP Network countries where the services are mainly directed to street prostitution it is important to use the know-how of TAMPEP members who have longer experience in mapping, organisation and carrying out of services in indoor forms of prostitution. Using the Regional Commission meetings, a specific training for the participating countries was carried out about the techniques of outreach work

in indoor prostitution. The Coordination Centre provided the guidelines and supported the programme.

Prostitution is determined by migration, different vulnerability levels to HIV, plus currently the shift to indoor. Updates and the development of new tools and methodology is indispensable due to the fact that prostitution is a constantly changing phenomenon, with continuous variations of nationalities, age, gender, work setting, exposure to risks, etc. All of these factors need to be reflected in the outreach method. Diffusion of new and updated tools and methodology means strengthening the capacity of service providers; making their efforts and work better tailored to the actual needs; basically more effective. Existing resources were thoroughly assessed and analysed in the separate report *Skills, Training and Good Practice Tools*.

Strengthening the capacity through knowledge and trainings (e.g. about implementation of cultural mediation) is very important. This is why the production and diffusion of the new CD were so relevant. The strengthening of the capacity of service providers is also done through contacts, cooperation and networking. The sharing of knowledge these practices (whether ad hoc or institutionalised) create can not be underestimated.

For TAMPEP it is vital that national and international platforms are created, events are organised, strong and efficient referral systems are further developed. Also the exchange visits are used as opportunity to carry out specific trainings. They are an opportunity for the Network members to share information and mutually learn, and most of them are organised precisely with the purpose of a training, on topics such as, following the above example, how outreach could change the methodology for reaching indoor sex workers, or how to address the needs of specific groups, which are present longer in one country and only beginning to appear in another.

Moreover, the Regional Commissions improve cross-border cooperation, e.g. Norway will cooperate with Estonia, a special project supporting east-west cooperation will take place between Austria and Hungary. Thanks to closer regional cooperation common good practices can be shared and implemented in the countries of the region. Further on, from the assessment of specific needs, customised projects can be developed. All of this is facilitated within the TAMPEP Network, as we collect, analyse and share data on cross-border work. Lastly, nevertheless very importantly, the members of the Network can and do offer each other direct support. They establish bilateral relations, not only within the regional cooperation scheme, but also on grounds of common interests and needs, e.g. Norway and Italy have a specific project for work with Nigerian women in Nigeria.

The surplus brought upon by intensified cooperation within the Network has proved to be very advantageous to all members of the Network. All members have a common need of constant outreach activity enhancement. In the TAMPEP VII project, all of them benefited from improving their outreach activity, and the most effective way to this improvement was through sharing of information, experience and knowledge on all possible levels and occasions.

Training seminars for implementation of peer education: the organisation of peer education programme

Three extensive national trainings have been carried out on peer education for service providers specialised in harm reduction and/or prostitution. These trainings have been organised by TAMPEP national coordinator in Finland, Hungary and

Romania. TAMPEP Coordination Centre prepared the programme and the contents of each of the trainings. For the training in Hungary and Romania TAMPEP Coordination Centre was assisted by TAMPEP Italy and invited external agencies (ACCES from Marseille) specialised in harm reduction and peer education. In Finland an expert in the field of harm reduction from the Netherlands participated.

The participants of these 3-day training seminars were workers of outreach projects, service providers, GOs and NGOs, educational institutes, academics, allies, representatives of sex work organisations etc. We choose for this broad representation of trainees because there was a need to sensitise them and make accessible the peer education model based on the country capacity and to implement and integrate peer education training and model in their services in a structural and sustainable way. For in-depth implementation of the professional training for peer educators we used the model of FENARETE project (peer education training that we developed in 2003-2004 in 6 countries) and the manual that had been translated in seven languages among which Hungarian and Romanian. For further information please see the website: www.fenarete.org

The following are examples of specific workshops/trainings carried out by the Coordination Centre during the conferences organised by partner countries and/or other networks. Their aim was to integrate our expertise in a broader context of the health and social services which are not directly associated with TAMPEP but which are targeted to the audience and regions of interest. The objective is to set up the framework on good practices and intervention in the European sex work settings. The enlisted below are a sample of diversity of audience, topics and of the way of transmission of guidelines and methods:

- July 22 – 24, 2005, Vilnius, Lithuania, Workshop carried out during "Sex Work Policy Meeting" - organized by the Open Society Institute (OSI) Sexual Rights and Health Program (SHARP).
- November 10 – 13, 2005, Bucharest, Romania, Workshop carried out during the European Seminar SUSTAINABLE SERVICES FOR VULNERABLE GROUPS. Organised by ARAS in the framework of AIDS Action and Integration Programme.
- November 11- 12 , 2005 -Workshop carried out during the seminar "*Women and HIV/AIDS in CEE: Bringing Different Communities Together to Advance Common Goals*" organized by the Open Society Institute, the ASTRA – CEE Women's Network for Sexual and Reproductive Health and Rights.
- October 2005 - Workshop session during European Technical Consultation with the European AIDS Treatment Group, on working with civil society to scale-up access to HIV treatment organized by WHO Europe.
- Various during 2005 - The Coordination Centre as TAMPEP International Foundation developed a bi-lateral programme with Ukraine financed by the Dutch Ministry of Foreign Affaires Organisation. The programme is based on the development of good practices and HIV prevention for sex workers on local and regional levels and parallels a national capacity building programme. This capacity building programme is based on series of training seminars for services providers, governmental agencies, NGOs, law enforcement functionaries, etc. In total 3 national training seminars had been carried out based on good practices of TAMPEP. This programme does not belong to Network contract activities with SANCO, but we consider this effort as a way of integration of Ukraine to the TAMPEP Network and the diffusion of good practice to this country.

The use of TAMPEP resources CD-ROM

During the TAMPEP VII project the most important achievement in terms of information material production was the TAMPEP CD volume II finalised in September 2006. This was also when the distribution of the new CD begun in the 24 countries. The toolkit of both TAMPEP CD-Roms (volumes I and II) contains among others the Guidelines for target intervention, the Manual for training for outreach workers, and Manual for peer education training. Along with the new CD the old one is still being broadly used and diffused through the national coordinators and directly through the Coordination Centre. This is the channel through which we respond directly to the needs of service providers, programme managers who will use the manuals and the guidelines for their own programmes. It means that we cannot cover directly the execution of these educational programmes, but we can in an effective way monitor and guide their capacity building efforts using the tools that are already existing and give advice for adaptation to the local situation and context and local capacity.

The first TAMPEP CD was praised and evaluated as very useful by the all users. Yet the circulation of the CD allowed also for an appraisal on what could be improved in the volume II. First reason to update and add new material was simply the fact of the changing situation in Europe's prostitution scene and therefore a necessity to address these changes and new needs with new materials. As TAMPEP attempts to be always up to date with the needs of the sex workers and of the service providers, continuously several completely new information materials were being developed. They were tested in outreach work, reviewed, adjusted and translated. A big part of the updated and new material was used in the production of a new CD-ROM.

The reactions and questions from the first users enabled TAMPEP to have clear ideas also on how to enhance the practicality of the CD resources. Therefore, a second reason for a revision was the graphic form of the materials, in order for the content to be easily understood, there was a need to develop information primarily in picture form with minimal text. This had the added advantage of not having to translate as much text.

Thirdly, it was TAMPEP's intention to make the CD technically accessible to all service providers, even the ones with low resources, slow and old equipment etc. It was important for us that the material could be downloaded using a simple programme making it again more accessible and user friendly. Eliminating the all possible IT related obstacles we wanted to achieve the goal of having the TAMPEP resources used in as many places and reaching as many sex workers as possible.

Following the evaluation phase, TAMPEP moved on to the production of the new material, updating of the existing one, testing all materials with different targets. All national partners made their own contributions to these changes both in terms of language and in the content. When the material was finalised it went on to be produced. While all the CD adjustments were being made the existing materials (leaflets and old CD-ROM) continued to be distributed and used for outreach work.

As mentioned before the principle for us was to make the material available in all European countries. Making it available, entailed making sure those services providers everywhere are able to use it. A work group had to check the cross border practicality and the universality of the information provided. For obvious reasons, not all solutions and advice can be carried out in all places, or at least not always in the same manner or level of simplicity and guaranteeing the same outcome uniformly

in all the TAMPEP countries. This is why the partners' input into the preparation of the new CD was so important. Often only the local TAMPEP members can verify whether information and solutions advised in a certain materials are in fact feasible inside a specific country; these referrers to the type of (medical) services accessible, the procedures of reaching such services, the legal aspects, local customs, fees and many other practical details which may vary from country to country. Eliminating any likelihood of misinforming the end receivers of the material, was just as important as communicating the message in a clear and comprehensive way in a language the user understands.

The final outcome of the project was just as envisioned, an updated, more user friendly and more technically accessible CD, with information materials in a total of 19 languages: Albanian, Bulgarian, Czech, Estonian, English, French, German, Hungarian, Italian, Latvian Lithuanian, Polish, Portuguese, Rumanian, Russian, Slovak, Spanish, Thai and Ukrainian. There were three new subjects added, which broaden the scope of health care knowledge we aim to empower the S sex workers with. These new topics were: *When the condom bursts*, *Protect Yourself* and *Safer Drug Use*; plus a brochure "*Everything OK?*" about breast self examination, STI and HIV/AIDS, available in 8 languages, although designed almost exclusively with images and very limited text. The usage of images allows the material to be much more practical, as it is easy to understand, often at first glance. The graphic design frequently allows for expressing in detail many complex medical (and other) issues, which perhaps when expressed verbally would be comprehensible only by a scarcer audience. Illustrations also make out of the material a very functional tool across borders and cultures. The multicultural feature of our information material is highly relevant for TAMPEP, majority of the target population being migrant and very mobile, frequently does not stay long enough in the place where they can be reached by service providers in order to be sufficiently acquainted with the local language or customs. It is our goal to reach them in a manner which conquers these obstacles and we deem that graphic, custom informative and multicultural materials are the best way to seamlessly reach the growing number of nationalities in the prostitution scene in Europe.

Evaluation process of the volume II CD was unfortunately shorter than expected. The manufacturing phase took longer and delayed the moment when we were expecting to be able to begin the distribution. As the product was only finalised in September (therefore only three months before the end of the TAMPEP VII project) we were unable to carry out an evaluation process as complete as initially planned. Although, the distributing commenced immediately after the CD was ready, the CD was not long enough in circulation for us to receive all the feedback necessary to make a very extensive evaluation. The responses we did receive do allow for a preliminary idea of the success rate of the CD. The evaluation forms were sent out to everyone who received a copy of the CD. These in turn informed us on to whom the CD information material was distributed to.

We therefore know our new material reached sex industry establishments (via outreach work) and health clinics across Europe. In most cases the service providers were very pleased with the adjustments made. They justified this opinion by saying that the material was clear, directly touched the issues concerning (migrant) sex workers and complete. The issues which were advised as important to add were those concerning rights, residence permit, available health and social services. In some cases suggestions of new translations were made due to the presence of a new nationality in the area. The distribution campaign of the CD-ROM and the technical

support in using multilingual material is on ongoing process. The request forms as well the evaluation forms for the TAMPEP resources users are available via the TAMPEP website. Until the end of February 2007 a total of 5000 copies of the CD have been distributed worldwide.

D 14.4

Provision of consultancy services and policy advice

The following is a list of the activities of the Coordination Centre in the framework of the provision of policy advice, training, information and consultation services for projects and organisations dealing with the phenomenon of (migrant) prostitution in the areas of social, health and human rights protection effectuated in the period between 1 January 2005 and 1 January 2007. This list is non-exhaustive and aims to give an indication of the variety of activities and audiences that the Coordination Centre undertakes.

Further each regional and national coordinator of TAMPEP (24) is entitled and obliged to promote and diffuse the experience and results of the Network through the national events and/or presentations in conferences and meetings. The list of these activities on national and international levels can be provided on request. In this way the diffusion occurs on a wide scale.

Academics/Researchers, delegations of staff from health promotion and anti-trafficking programmes: provision of data and methodology of TAMPEP

- 24 – 28 January 2005 - Meeting and provision of technical advice for a medical researcher of the Department of Public Health and Policy, London School of Hygiene and Tropical Medicine, on collection and analysis of regional information and support policies in Europe and Asian countries, among mobile populations for issues around HIV/AIDS.
- February 23, 2005 - Meetings and accompaniment of a researcher from Utrecht University, preparing a dissertation on female migration from Latin America towards the Netherlands. The focus on this consultation was the situation of Latin Americans entering Dutch sex industry, i.e. immigrant status, legal situation, knowledge of their rights and level of formal/informal organisations, use of support from institutions and personal networks, their personal migrant experience, goals and expectations regarding their stay in the Netherlands and strategies of integration with the receiving Latin community.
- March 2005 - Meeting and provision of data from TAMPEP mapping for Technical Advisor HIV/AIDS Unit, United Nations Office on Drugs and Crime, preparing a survey and rapport for UNODC response of human trafficking, and attendant HIV risk ratios - relative to sex workers and trafficked persons for the sex industries.
- June 1, 2005 - Meeting with fellows of the Southern Methodist University fellowship from Dallas, Texas, who came to Netherlands to prepare a report on social, economic, and political effects and implications of prostitution in the Netherlands including the position of migrant sex workers.

- September 7, 2005 - Meeting and accompaniment of manager and a worker of the non-governmental organisation Health and Protection Project STELLIT in Saint Petersburg whose main goals are rendering medical, psychological, social aid, supporting people involved in prostitution and HIV and other infection diseases prevention. The main issues that were treated concerned TAMPEP methodology of work with sex workers in the framework of health promotion and HIV prevention and with respect of sex workers human rights protection. Accompanied visit to the prostitution scene in Alkmaar where the practical work of TAMPEP had been discussed and shown.
- October 31, 2005 - Meeting and accompaniment of a researcher at Antioch College in Ohio, USA (education-abroad programme in the framework of Comparative Women's Studies in Europe) who is researching trafficking of women in Europe - especially Eastern European women. A second meeting with a researcher from The College of Wooster in Ohio, USA who carries out research on the motives of the women to get involved in prostitution, the effects of prostitution on various aspects of their life, and the rights of sex workers.
- November 2, 2005 - Meeting with the workers from Caritas Armenia who visit the Netherlands in order to study the channels of trafficking from Armenia to the countries of EU and the ways of assistance offered to the victims of trafficking in the framework of the follow-up of the anti-trafficking programme to be implemented in Armenia. The main issues that were treated were related to partnerships and local and international networks working in the field of anti-trafficking and human rights.
- January 27, 2006 - presentation about the present situation of prostitution and TAMPEP working methods with migrant sex workers for a group of 15 students of Vrije Universiteit (VU), Amsterdam
- March 14, 2006 - presentation on the present situation of prostitution and TAMPEP working methods with migrant sex workers for a group of 11 students of *Ecole d'études sociales et pédagogiques* from Lausanne, Switzerland
- March 29, 2006 - presentation on the present situation of prostitution and TAMPEP working methods with migrant sex workers with a Polish researcher
- June 15, 2006 - lecture about comprehensive methods of work with migrant sex workers in the framework of HIV/STI prevention and health promotion for vulnerable groups for a International Summer School of University of Amsterdam
- October 30 – November 1, 2006 - giving lecture about the present situation of prostitution and TAMPEP working methods with migrant sex workers and accompaniment of a group of students to outreach activities of TAMPEP from the master class of VU in Amsterdam
- November 2, 2006 - meeting with representative of Zi Teng, sex workers project from Hong Kong, presentation of methodology of work with migrant sex workers
- Responding to the quest coming from various researchers, other service providers, networks with regard to provision of information about prostitution issues, policies, methods and experiences and recommendations. The number of these consultations amounts to three to five per week and most frequently is carried out by means of e-mail.

- Operating as a centre for referral contacts, depending on the demand and the context we refer and support the interested persons to the most optimal resources (countries, services, projects, GOs, etc)
- Bilateral contacts and the development of cooperation with the representatives of organisations from the region where migrant sex workers come from. Some of these exchanges resulted in production of informational materials and exchange of knowledge and experience with organisations in the mother countries of migrant sex workers, such as Nigeria, Brazil, Ukraine, and Thailand

International Policy Makers

- April 14, 2005 - Advice to the Dutch Ministry of Foreign Affairs on the prostitution situation in Ukraine. The official of the Ministry was in charge to prepare the advice of the Ministry with regard to prostitution policies in the international context and the support for the programme for returning victims of trafficking in Ukraine.
- April 14, 2005 - Participation in the Third Annual NGO Meeting on the EU Response to the Global AIDS Pandemic, organised by Stop AIDS Alliance, Brussels, Belgium and taking part in follow-up consultations.
- July 14 – 15, 2005 - Participation at the expert meeting organized by OSCE in Vienna about anti-trafficking policies OSCE - UN OHCHR Experts' Consultation to Develop a Legal Framework to Prosecute the Exploitation of Trafficked Persons, Vienna, Hofburg. The meeting was attended by representatives of UN agencies and invited experts from selected institutions. The goal was to provide advice to the UN OHCHR about the regions in conflict and anti-trafficking policies with regard to exploitation of prostitution.
- September, 2005 - Meeting with Helga Konrad, special representative on Combating Trafficking in Human Beings of OSCE during her official visit to the Netherlands for evaluation of the effects of the Dutch anti-trafficking programme and implementation of the law on prostitution. Next to the governmental institutions Ms. Konrad met some selected NGOs and international organisations for consultation. TAMPEP was one of invited consultants, reporting on the issues of the position of migrant sex workers in situation of dependency and the mechanisms of support.
- June 2006 - Meeting with Ms Yakin Ertürk, the Special Rapporteur on violence against women at the office of TAMPEP where 15 representatives of various organisations operating in the field of prostitution/anti-trafficking/human rights in the Netherlands participated
- Multiple annually - Participation in the Civil Society Forum and in the preparatory meetings. Organisation of diffusion of the results and the consultation of TAMPEP Network members.

Expertise, exchange and setting up of cooperation structure: national and international

These exchanges are effectuated in the framework of partnership with other organisations and are of long term nature based on regular input of expertise and exchange.

- Several meetings with BLinN (Bonded Labour in Netherlands) in preparation of the manual '*Met het oog op de toekomst*' about the empowerment of victims of trafficking and (Eastern European) women who work on prostitution. This manual has been published as a joint initiative of BlinN and TAMPEP and used as a set of guidelines for training for service providers in the framework of combination of educational outreach activities in the field of anti-trafficking policies and the empowerment of sex workers.
- Multiple meetings with the staff of STV (Foundation against Trafficking in Women) about the creation of a platform of organisations in North Holland and about the TAMPEP methods of combating trafficking in women. The platform was eventually created and currently is used as a forum where various policy makers and representatives of law enforcement coordinate actions and provision of services in the North Region within this platform. The meetings are regular.
- Cooperation with the La Strada Network (anti-trafficking and support organisation in the countries of CEE): regular contacts for provision and exchange of information and data concerning position of (trafficked) migrant sex workers.
- July 22 – 24 July, Vilnius, Lithuania - Participation in the "Sex Work Policy Meeting" organized by the Open Society Institute (OSI) Sexual Rights and Health Programme (SHARP). Presentation of a paper on TAMPEP experience with the programme of protection of human rights of sex workers, reduction of health inequalities and improvement of social and economic rights through a multi-sectorial response involving both GOs and NGOs. Contact with service providers from these regions and in coordination with OSI is regular.
- September, 15 – 16, 2005 - Participation in the forum of NGOs that was held at the occasion of the 10th Anniversary of La Strada in Warsaw, Poland - TAMPEP has become the member of this newly created platform that serves as an advisory body for La Strada Network and which would meet on regular basis. The platform consists of grass-root organisations whose work is based on direct contacts with (migrant) sex workers and whose role will be (among others) to link La Strada with the field of prostitution. The second forum was held in September 2006 in Kiev, Ukraine.
- Regular exchange and cooperation with OSI for various programmes and networking supported by OSI in the region of EU and EU neighbour countries, Central Asia and Caucasus, in relation with our expertise on sex work
- Providing of information about TAMPEP results and programme for various newsletters of international networks, (AIDS and Mobility, IPPF, etc)
- March 23, 2006 - participation in the meeting of the national platform of organisations about the position of migrant sex workers in the Netherlands
- April 13, 2006 - participation in the meeting of Network against Trafficking in Women in Alkmaar
- April 18, 2006 - meeting with Foundation SOA/AIDS for exploring the possibilities for carrying out common strategies in health promotion activities
- May 3, 2006 - meeting with Mr Paul van Gelder, the consultant in charge of provision of evaluation report about legalisation of exploitation of prostitution in the Netherlands

- December 19, 2006 - participation in the meeting with the representative of municipality of Alkmaar who is in charge of managing sex business establishments in the city and the region of Alkmaar

Conferences: presentation of papers

- October 10 – 11, 2005 - Luxemburg, Presentation of TAMPEP methodology on the seminar about the ways of facing the multi-cultural and multi-ethnic prostitution scene in the countries of EU, Luxemburg. The goal of the seminar attended by the workers of health promotion projects in Luxemburg and the ministry of Health and the ministry of Women Affaires was to present the model of policy dealing with prostitution.
- October 19 - 22, 2005 - Presentation of two papers: 1.The Situation on prostitution in Europe and policies and 2. Results of the Sex workers conference in Brussels, at the national conference for policy makers, services providers and researchers “From the Stigma to a Proposal” organised by the Region of Asturias and TAMPEP Spain in Oviedo, Spain.
- November 12, 2005 - Presentation of a paper and conduction of a workshop at the ASTRA/OSI seminar, Warsaw, Poland; carrying out follow up contacts with the participants who are representatives of service providers in 30 CEE countries. The seminar "Women and HIV/AIDS in CEE: Bringing Different Communities Together to Advance Common Goals" was organized by the Open Society Institute, the ASTRA – CEE Women’s Network for Sexual and Reproductive Health and Rights. The aim of the seminar was to establish contacts and to seek possibilities to start cooperation between various groups and communities working on the issues related to prevention of HIV/AIDS and women's rights in CEE.
- November 2005 - Presentation of TAMPEP paper on Prostitution in Europe at the opening of: SEX WORK Exhibition on *Prostitution: Reality and Myths* at the Museum for Work/*Museum der Arbeit* in Hamburg, Germany. This exhibition is a unique manifestation in the world of museums. The exhibition is accompanied by a programme that contains workshops, lectures, etc and will be held in other museums in Germany and Austria. The opening ceremony was attended by hundreds of guests and with an opening speech of a high governmental functionary. The resources of TAMPEP, photos of outreach workers and peers of TAMPEP were exposed in one room of the exhibition. www.museum-der-arbeit.de
- January 2006, Mogliano Veneto, Italy - A TAMPEP representative furnished a panoramic overview of prostitution throughout Europe and explained European policies concerning prostitution at a meeting that was set up for Italian policy makers and local politicians as a day of study dedicated to the necessity to develop new policies and their impact.
- 10 March 2006 - Presentation of the TAMPEP position paper on trafficking at the closing seminar of the European Inter regional programme between the region of Friuli/Venezia Giulia and Slovenia promoted by Comitato/TAMPEP Italy, held in Gorizia, Italy. This seminar presented and evaluated the results of the two years programme on exchange of expertise and cooperation on the policies of the mobile prostitution and trafficking between the two bordering countries. The

contacts with the cooperating GOs and NGOs in Slovenia are still active with regards to the cooperation and exchange of information.

- August 13 – 18, 2006 - International AIDS Conference Toronto: poster presentation and running of a booth
- September 28 – 30, 2006 - AIDS & Mobility Conference: Bridging Policy and Action, Utrecht, the Netherlands
- November 22- 27, 2006 – participation at the International Expertise meeting with regard to sex work in Taipei, Taiwan

Training seminars: preparation, carrying out, presentation

- March 4 – 5, 2005 - Budapest, Hungary, Training on peer education and presentation of TAMPEP methodology on the seminar about peer education organised by *Sex Educational Foundation* and *Comitato per i Diritti Civili delle Prostitute*.
- April 7 – 8, 2005 - Helsinki Finland, Presentation of TAMPEP methodology at the seminar about peer education organised by Pro-Tukipiste. Provision of training in the principles and the implementation methods of peer education in prostitution for workers of health promotion projects from various regions of Finland.
- May 12 – 14, 2005 - Cluj, Romania, Presentation of TAMPEP methodology on the seminar about peer education organised by ARAS and *Comitato per i Diritti Civili delle Prostitute*. Provision of the training about peer education in prostitution for workers of health promotion projects from various regions of Romania.
- June 23- 25, 2005 - Organisation and carrying out of a second training seminar for policy makers, law enforcement officials, service providers, municipality officials and workers of NGOs in all regions of Ukraine in Lviv, Ukraine. The seminar on “European approach on health and social promotion in prostitution setting. Employment of the principle of human rights protection in the development and implementation of policies” had been attended by 56 participants and resulted in reaching an agreement with regard to employment of human rights perspective in dealings with sex workers. Organised by TAMPEP and SALUS.
- December 2, 2005 - Training of the workers of La Strada Poland about TAMPEP methods of work with (migrant) sex workers who are in the situation of dependency. These trainings occur on regular basis.

Consulting Sessions for GOs

- Several during 2005 - WHO Regional Office in Europe: Consultation on the preparation of the “Tool kit for sex workers”; provision of the follow – up. *Sex work toolkit: targeted HIV/AIDS prevention and care in sex work settings*. Geneva, WHO, 2005: <http://who.arvkit.net/sw>
- 2005 - Provision of the chapter “Female migrant Sex Workers: At risk in Europe” for the book *HIV/AIDS in Europe. Moving from death sentence to chronic disease management*. WHO Europe, 2006.
- October 2005 - World Health Organisation: taking part in European Technical Consultation with the European AIDS Treatment Group, on working with civil

society to scale-up access to HIV treatment. TAMPEP was invited as the only expert group for sex work issues.

- UNAIDS, Geneva, preparation for global stakeholder consultation on HIV/AIDS and sex work organized jointly by United Nations Population Fund (UNFPA) and the Joint United Nations Programme on HIV/AIDS (UNAIDS) secretariat. The final “Global Consultation on HIV and Sex Work” took place in Rio de Janeiro, Brazil in July 2006 and was organised by the UNFPA, the UNAIDS and the National STD/AIDS Programme of the Ministry of Health of Brazil. Plenary presentation of the TAMPEP results
- June 13, 2005 - Brussels, Belgium, participation in the informal NGO consultation, co-organized by the EU Commission - DG SANCO, AIDS Action Europe and the EATG which aimed to allow European NGOs to input the next policy document of the Commission
- Several consultation sessions with UNFPA on global policy development on sex work and development of sex work assessment projects and capacity strengthening of the service providers in Europe. The UNFPA office of Focal Point for HIV and Sex Work in New York took leadership and coordination on HIV prevention in sex work in the UN framework.

Others

- October, 2005 - Brussels, Belgium, Sex Workers Conference: TAMPEP Coordinator was a member of the Organisation Committee of the conference. Very important political event, the majority of TAMPEP National Coordinators participated at the Conference, assisted by sex workers from their countries. In total 120 sex workers and 80 allies participated. The preparation of the Conference demanded very active and broad European consultations on issues of human rights infringing and sex work, involvement of individual sex workers and community based organisations, consultations with various allies, collection of prove of evidence and the preparation of the various advocacy documents. The result of the Conference had been presented at the European Parliament and is to be found at: www.sexworkeurope.org
- Membership and the Steering Committee membership of European Sexuality Resource Center that aims to provide services particularly in the area of information to a wide community of researches, activists and policy makers both within the EU and outside.
- Presentation of abstracts, skills building workshop, activities in the framework of Global Village for the World AIDS Conference in Toronto, Canada.

1. Cooperation between partners and tasks

Management of the project, distribution of the activities and work among partners and coordination of the project

The list and address of the associated partner is in the front page in the report.

The management of the project was carried out through the different bodies and involved actively all partner members of the Network. This structure has been used during the last two periods of TAMPEP and proved to be the most efficient and optimal form for a network to function, based on identification of common commitment and philosophy. This structure of the Network allows us to organise the activities in a multi-disciplinary way and guarantees the wide dissemination of working methods, good practices, tools and results. The New and Associated countries have been equal partners in our Network since many years and have been involved directly and actively in the execution of the programme. The complete description of the activities and tasks executed by countries/partner members is available in the table in Section B4.

TAMPEP Network structure

International Level

TAMPEP consists of 24 countries across Europe. During the TAMPEP VII project the Coordination Centre encouraged multilateral contacts by organizing activities such as the General Meetings and facilitating conferences, national seminars and the bilateral visits. This strategy promoted the mutual exchange of experience and expertise as well as the strengthening of the network structure. The Coordination Centre placed great importance on its responsibility of expending and disseminating the expertise and resources also beyond the network members' structure.

Coordination Centre

The Coordination Centre in the Netherlands and its General Coordinator managed and coordinated the planning, organisation and overview related to the network's three main areas: research, outreach and advocacy on pan-European level. The Coordination Centre provided on the mandate of the network consultancy and advice for international agencies and relevant international organisations.

On a continuous basis the Coordination Centre operates as a Consultation and Expertise Centre and during the TAMPEP VII project it reported back and informed the Network members of the most relevant activities in the function of adviser on policies and consultant for various international bodies. Coordination Centre collected and managed the response for technical assistance for GOs and NGOs concerning the training guidelines and supporting tools, it planned and managed the final products of the delivery. The Coordination Centre and its General Coordinator were also the reference point for all member organizations individually as well as the overall Coordinator and representative of the project.

Steering Committee

The execution of the project was guided, monitored and evaluated by the General Coordinator of the Coordination Centre supported by the Steering Committee. The Steering Committee is formed by the four Regional Coordinators/main partners and three National Coordinators (Greece, UK, and Slovakia). Each of these National Coordinators was also a supportive body as facilitator and rapporteur for the Regional Coordinator for the managing and execution of the Regional Programme and Regional Meetings. The Steering Committee was additionally in charge of the setting up of the programme and the facilitation of the General Meeting. The Committee met at regular intervals: 6 times during this project period. Two additional working group meetings took place.

Regional Level

The member countries/partners of the TAMPEP VII Network were divided into 4 Regional Commissions. The principal function of the Regional Commissions was to facilitate in-depth exploration of issues within smaller geographic areas and to compare and carry out common specific activities according to the working plan of each Commission.

National Level

The 23 Network Associated Partners are TAMPEP's representatives in their respective countries. The organisation functions as a national focal point for the activities of the Network. In addition, each national organization has a mandate to represent the Network: its philosophy, activities, knowledge and resources and spread it in their country. A detailed description of the national coordinators' tasks can be found below. Additionally 3 organisations/countries (Belgium, Switzerland, Ukraine) are invited to participate as guest countries for chosen activities: GM and Regional Meetings. They participate with their own resources in the collection of data (prostitution mapping and services mapping) as well in the distribution of the TAMPEP resources material (CD).

As far as the National Activities are concerned the Network members all played the same role. Next to this some of the Network members had additional functions, such as General Coordination and the Chairmanship of the Steering Committee (the Netherlands), Coordination of the Regional Commission and participation at the Steering Committee (the Netherlands, Austria, Germany, and Italy), co-facilitating and being rapporteur of the Steering Committee (United Kingdom, Slovakia).

NORTH

GERMANY

(REGIONAL COORDINATOR AND STEERING COMMITTEE MEMBER)

United Kingdom (Steering Committee Member)

Denmark

Finland

Norway

Lithuania

Latvia

Estonia

- Deeper analysis on: Female and Transgender **Asian** sex workers
- Study on migration patterns from the Baltic countries, Russia and Belarus
- Spreading of good practices: dissemination of the **CD-Rom**
- **Implementing** TAMPEP methodology on local and national levels
- **Development of new material**
- *Fieldwork*
- **Legislation** on migration and prostitution
- **2005:** mapping
- **Infra-structure of Health Services and NGOs:** needs + expectations
- **Training** (cultural mediators + peer educators)
- **Bilateral visits**
- Participation at **GM**
- Participation in Regional Commission **meetings**
- National **coordination**

WEST

NETHERLANDS

(REGIONAL COORDINATOR AND STEERING COMMITTEE MEMBER)

Belgium

France

Luxembourg

Switzerland (as invited country)

- Deeper analysis on: Female and Transgender **Latin American**
- sex workers
- Study on migration patterns from African countries
- Spreading of good practices: dissemination of the **CD-Rom**
- **Implementing** TAMPEP methodology on local and national levels
- **Development of new material and methods**
- *Fieldwork*
- **Legislation** on migration and prostitution
- **2005:** mapping
- **Infra-structure of Health Services and NGOs:** needs + expectations
- **Training:** cultural mediators + peer educators
- **Bilateral visits**
- Participation at **GM**
- Participation in Regional Commission **meetings**
- National **coordination**

EAST

AUSTRIA

(REGIONAL COORDINATOR AND STEERING COMMITTEE MEMBER)

Poland

Slovakia (Steering Committee Member)

Hungary

Czech Republic

- Deeper analysis on: Female **Central and East European** sex workers.
- Study on migration patterns from the Central and East European countries as: origin, transit and destiny countries
- **Specific activity:** *evaluation and perspectives of the situation in the New EU Member States.*
- Spreading of good practices: dissemination of the **CD-Rom**
- **Implementing** TAMPEP methodology on local and national levels
- **Development of new material**
- *Fieldwork*
- **Legislation** on migration and prostitution
- **2005:** mapping
- **Infra-structure of Health Services and NGOs:** needs + expectations
- **Training:** cultural mediators + peer educators
- **Bilateral visits**
- Participation at **GM**
- Participation in Regional Commission **meetings**
- National **coordination**

European Coordination Centre

THE NETHERLANDS

Coordination Centre:

- planning, organisation and overview related to the network's three main areas: research, outreach and advocacy on pan-European level and rendering of final products
- Organisation of the General Meetings
- Organisation of the Steering Committee Meetings
- Editing of the Interim and the Finals Reports
- Dissemination of the results: website, newsletter, technical assistance (workshops and trainings) and provision of consultancy and policy advice for international agencies and national authorities as training, information and consultation centre for various beneficiaries.

SOUTH

ITALY:

(REGIONAL COORDINATOR AND STEERING COMMITTEE MEMBER)

Portugal

Spain

Greece (Steering Committee Member)

Romania

Bulgaria

- Deeper analysis on: Female **African** sex workers
- Study on migration patterns from the Balkan countries, Albania, Moldova.
- Spreading of good practices: dissemination of the **CD-Rom**
- **Implementing** TAMPEP methodology on local and national levels
- **Development of new material** (if necessary)
- *Fieldwork*
- **Legislation** on migration and prostitution
- **2005:** mapping
- **Infra-structure of Health Services and NGOs:** needs + expectations
- **Training:** cultural mediators + peer educators
- **Bilateral visits**
- Participation at **GM**
- Participation in Regional Commission **meetings**
- National **coordination**

Detailed description of the role and activities of each partner

Regional Coordinators

The 4 Regional Commissions were coordinated, facilitated and lead by a Regional Coordinator/Main Partner. The regional coordinators were:

North	Veronica Munk	<i>Amnesty for Women</i>
East	Maria Cristina Boidi	<i>LEFÖ</i>
South	Pia Covre and Carla Corso	<i>Comitato per i Diritti Civili delle Prostitute</i>
West	Licia Brussa and Hanka Mongard	<i>TAMPEP International Foundation</i>

Activities of the Regional Coordinator

- Supporting the implementation of the national programme of the group of countries/partners in the regional groups (see organigram);
- Organising and facilitating Regional Meetings and providing reports on meetings to the Central Coordination Centre (Collaboration with the Coordination Centre);
- Supporting national coordinators in identifying bilateral exchange partners. Collecting and disseminating the reports to the Network members.
- Coordinating activities and providing reports on the focussed study (report)

Tasks of National Coordinators (associated partners)

Coordinating national activities consisted of:

- Monitoring the situation in the country regarding (migrant) sex workers and collecting data with a special attention to migration patterns. A national mapping of the prostitution scene was carried out using the TAMPEP questionnaire; carrying out survey on legislative framework and migration patterns in the country;
- Carrying out outreach work and helping with development of new materials
- Maintaining, strengthening and expanding its national network and/or platform of service providers;
- Disseminating TAMPEP's information, resources and expertise through the national network;
- Disseminating the TAMPEP CD-Rom accompanied by the guidelines booklet, monitoring its use and collecting and evaluating the response of service providers regarding the use of the materials;
- Organising a national seminar, thus strengthening the development of national response. The seminar had different forms: practical (for example training for service providers), political (sensitising of policy makers) or instrumental (exchange and sharing of experience, knowledge and strategies with local projects);
- Undertaking a bilateral visit with another member country of the network.
- Providing data and analysis for the focussed study (report) and deeper analysis for the Regional Commission
- Implementing TAMPEP methodology and lessons learned in the provision of services for (migrant) sex workers and in the cooperating services
- Preparing the contribution and presenting it at the 2 General Meetings and at 2 Regional Commission Meetings

- Providing national contribution to interim and final report

To further explain the **key responsibilities of the National Coordinators and Regional Coordinators** we need to highlight the following areas of their work:

A) Organisation and National Situation

National Coordinators were responsible for preparing an overview of the organisation and current national situation for both Interim and Final National TAMPEP Reports.

The General Coordination Centre and Regional Coordinator had to be notified of any changes in the partner's contact details and remit of the organisation.

The General Coordination Centre and Regional Coordinator had to be notified of any significant changes in the national situation of migrant sex workers.

B) Mapping of Prostitution Scene

The National Coordinator was responsible for gathering information about the prostitution scene in their country and preparing reports for the Regional Coordinator. This entailed that the National Coordinator had to:

- complete the mapping questionnaire from their own knowledge and experience (from either a local, regional or national perspective). The completed questionnaires were sent to both the Regional and General Coordinators.
- translate the national mapping questionnaire.
- identify key informants within country (A minimum of 10 informants had to be identified within each country).
- send out questionnaires to key informants. A record was kept of all organisations sent questionnaires.
- follow up on questionnaires that have not been returned.
- prepare an interim report on the national mapping of prostitution scene. (Template was provided to ensure reports were comparable).
- review completed questionnaires from key informants, clarify with contact person any inconsistencies or contradictions in answers provided.
- collate responses and prepare report (Template was provided to ensure reports were comparable.); they had to include an appendix with list of key informants used to prepare national mapping of prostitution scene.
- send report via email to Regional Coordinator

The above work of the National Coordinator had the purpose of providing data for a **Regional overview of national mapping of prostitution scenes**. The results handed over in the form of a National Report served the **Regional Coordinator** to carry out his responsibility of collating the national responses and preparing a regional overview for the General Coordinator.

C) Mapping of Services for Sex Workers

The National Coordinator was responsible for gathering information about health and social care services available to migrant sex workers in their country and preparing a report for the Regional Coordinator. This entailed that the National Coordinator had to:

- translate national mapping questionnaire.
- identify contact persons in key services within country (A minimum of 10 service providers had to be identified within each country, with all major cities covered).
- send out questionnaires to contact persons within each key service. A record was kept of all services sent questionnaires.
- follow up on questionnaires that have not been returned.
- review completed questionnaires; clarify with contact person any inconsistencies or contradictions in answers provided.
- collate returned questionnaires and prepare report for Regional Coordinator (Template was be provided to ensure reports are comparable).
- send report via email to Regional Coordinator

The above work of the National Coordinator had the purpose of providing data for a **Regional overview of national mapping of services for sex workers**. The results handed over in the form of a National Report served the **Regional Coordinator** to carry out his responsibility of collating the national responses and preparing a regional overview for the General Coordinator.

D) TAMPEP CD-ROM Resource

The National Coordinator was responsible for the promotion, distribution and evaluation of the new TAMPEP CD-ROM resource and preparing reports for the Regional Coordinator. This entailed that the National Coordinator had to:

- consider costs involved in distributing CD-ROM resource nationally and establish national price for CD-ROM resource (the price had to cover the cost of disseminating the resource but should not have included a profit).
- translate promotional flyer, letter of intent, CD-ROM booklet and CD-ROM evaluation form; draft text of promotional flyer and letter of intent provided which can be adapted for national use. The flyer had to include an order form and cost for the CD-ROM resource.
- promote and distribute CD-ROM resource - using flyer and other methods decided nationally. The letter of intent could have been sent with the flyer or with the CD-ROM resource – it was up to the National Coordinator to decide which is most appropriate for their country. A record was be kept of all organisations sent publicity about the CD-ROM resource. A record had to also be kept of all organisations receiving the CD-ROM resource.
- prepare an interim report on the promotion and distribution of the CD-ROM resource.
- monitor feedback from the CD-ROM resource. A record had to be kept of any feedback received about technical questions or additional needs identified by recipients of CD-ROM resource (this is an on-going task)
- evaluate CD-ROM resource – CD-ROM resource evaluation forms had to be sent out to all recipients of CD-ROM resource.
- follow up on evaluation forms that have not been returned.
- collate completed evaluation forms, clarify with contact person any inconsistencies or contradictions in answers provided.

- prepare summary report of returned evaluation forms (Template was provided to ensure reports were comparable; they had to include an appendix with list of recipients of CD-ROM resource).

The above work of the National Coordinator had the purpose of providing data for a **Regional overview of evaluation of CD-ROM resources**. The results handed over in the form of a National Report served the **Regional Coordinator** to carry out his responsibility of collating the national responses and preparing a regional overview for the General Coordinator.

E) National Networks & Events

The National Coordinator was responsible for establishing and/or maintaining contact with a *minimum* of 10 organisations, organising two national events and preparing a report for the Regional Coordinator. This entailed that the National Coordinator had to:

- identify and establish/maintain a national network within each country (a minimum of 10 organisations). *In countries that already had a national network* - contact persons had to be identified in each member organisation. *In countries that did not yet have a network* - a contact person had to be identified and established within key services working with sex workers and invited to join a national network. Details of national network members had to be recorded (Template was provided to ensure reports were comparable).
- organise the first national TAMPEP event. It was up to the National Coordinator to decide what is most appropriate for their country. It could have been a national seminar for service providers and/or policy makers or organising a training programme within their country. A record was kept of all participants.
- prepare interim report on the membership of the national network and the first national event; appendices with lists of members of the national network and participants in the national event had to be included.
- organise the second national TAMPEP event. Again it was up to the National Coordinator to decide what is most appropriate for their country.
- prepare final report on the membership of the national network and both national events; appendices with lists of members of the national network and participants in the first and second national events had to be included. (Template was provided to ensure reports were comparable).

The above work of the National Coordinator had the purpose of providing data for a **Regional overview of national networks and events**. The results handed over in the form of a National Report served the **Regional Coordinator** to carry out his responsibility of collating the national responses and preparing a regional overview for the General Coordinator.

F) Bi-lateral/Multi-lateral Exchanges

The National Coordinator was responsible for identifying learning needs and potential partners for bi-lateral and/or multi-lateral exchanges, in line with the identified needs, and preparing a report on their participation in bi-lateral/multi-lateral exchanges for the Regional Coordinator.

The bi-lateral and multi-lateral exchanges were discussed and agreed at the first General Meeting and a more detailed work plan was prepared and circulated to

National Coordinators once the programme of exchanges and guidelines had been agreed. This entailed that the National Coordinator had to:

- prepare a final report on the bi-lateral/multi-lateral exchanges participated in. (Template was provided to ensure reports were comparable.

The above work of the National Coordinator had the purpose of providing data for a **Regional Overview of Bi-lateral/Multi-lateral Exchange**. The results handed over in the form of a National Report served the **Regional Coordinator** to carry out his responsibility of collating the national responses and preparing a regional overview for the General Coordinator.

G) Migration and Mobility Patterns Research

The **Regional Coordinator** was responsible for facilitating an in-depth analysis of migration and mobility patterns within Regional Commissions through national mapping questionnaire, case studies and Regional Commission meetings. Each Regional Commission had target regions/countries:

- *East Commission* Central and East Europe
- *North Commission* Baltic, Russia & Belarus
- *South Commission* Balkans, Albania and Moldova
- *West Commission* Africa

The **Regional Coordinator** was responsible for preparing a discussion paper which was circulated to National Coordinators within their commissions before the first General Meeting. Guidelines and programme for the research were discussed and agreed at the first General Meeting and a more detailed work plan was prepared and circulated to National Coordinators following the first General Meeting. The **Regional Coordinator** had to organise a Regional Commission meeting to review mobility and migration research and prepare an interim report. This entailed that the National Coordinator had to:

- prepare a case study on sex workers from target countries and send via email to Regional Coordinator. (Template was provided to ensure reports were comparable.

The above work of the National Coordinator had the purpose of providing data for a **Regional Report**. The **Regional Coordinator**, had the responsibility of collating the national case studies and preparing a **Regional Report** for the General Coordinator.

H) Needs Assessment of Migrant Sex Workers

The **Regional Coordinators** facilitated an in-depth analysis of the needs of specific target groups of migrant sex workers within Regional Commissions through national mapping questionnaire, case studies and Regional Commission meetings. Each Regional Commission has a specific target group:

- *East Commission* Central and East Europe
- *North Commission* Asian
- *South Commission* African
- *West Commission* Latin America

The **Regional Coordinator** was responsible for preparing a discussion paper which was circulated to National Coordinators within their commissions before the first General Meeting. Guidelines and programme for the research were discussed and

agreed at the first General Meeting and a more detailed work plan was prepared and circulated to National Coordinators following the first General Meeting.

Regional Coordinator was responsible for:

- preparing an interim Regional Report for the General Coordinator
- preparing a final Regional Report for the General Coordinator

2. Countries involved

The TAMPEP activities are carried out simultaneously in all countries (see annex 1). In terms of implementation of the activities there was no relevant difference between the countries. The only difference was in relation of context of the country in terms of situation in prostitution and coverage of services specific to sex workers.

The results of the TAMPEP VII project have been made available in all 24 countries of the Network by various means. As the national results are gathered through establishing contacts with multiple service providers on national levels, exchange of information also takes place also with these entities. It has not been officially counted, but from the lists of resources and remits provided by our Network members, we estimate to have made our findings available to over 1000 entities. The following presents a list of the most significant ways of making available our findings.

- national meeting and events (see relevant chapters in Section A).
- diffusion on TAMPEP the resources,
- participation in important national platforms and commissions on public health and/or prostitution.
- data collection was an excellent way to present the TAMPEP activities and to activate the network of services providers GO and NGO in the different countries. In total 700 services providers participated in the prostitution mapping survey and 1000 services providers in the services mapping survey.
- posters presentations of the network are carried out in the majority of the countries at the 1st December events
- the function of national coordinator entails being available for any request for cooperation and partnership from an agency and other NGOs in the on country which requires the tools and resources of the network.
- interim, newsletters and the final reports are made available in all countries.
- the TAMPEP website and the web site of the majority of the associate partners also refer to the TAMPEP activities

3. Achievement of Objectives

In order to implement the goals set out in the TAMPEP VII project proposal the TAMPEP Network had to prepare clear guidelines for executing our objectives. These guidelines needed to be just as much addressed to the work of the Amsterdam headquarter as well as to the regional and national centres. The project had a very

wide scope in terms of subject areas we wanted to study and analyse the results of, and in terms of the geographical range of our objectives. The work plan for the whole biannual project needed to include both the thematic scope and the geographical division of tasks within these multiple areas of assessment.

The task of drafting the work plan of all network members was carried out by the European Coordination Centre. The same centre was also responsible for follow up procedures, in order to make sure that the Regional Coordinators and National Coordinators were carrying out their assignments according to the plan and schedule. It was also the Coordination Centre's task to identify obstacles which the Regional and/or National Centres may experience in the process of executing their responsibilities and delivering the assigned results.

The broad objectives were achieved thanks to a thoroughly but flexibly executed monitoring of the work in process. The frequent occasions of bilateral, regional and general meetings, were part of the evaluation and supervision process. These encounters allowed for a frequent update of the progress accomplished and of the backlog, delays, or other difficulties. In order to manage the complex process of evaluation and monitoring the Coordination Centre used a tool which helped to track the results achieved. (The tool is presented in the following table.) The application of this tool leads us to a structured manner of drawing our results. The conclusions we present in the Final Report as well as in the 3 thematic reports were all based on the results and evidence achieved through the various questionnaires and additional studies carried out in all TAMPEP member countries. The Coordination Centre followed the self imposed discipline of the Monitoring Tool in order to keep abreast the developments of the work process and to continuously assess if the work plan is being followed. The biannual Activity Report as well as the synthesis of the achievements presented in the Monitoring Tool is in fact a mirror of the TAMPEP VII management plan carried out while implementing the objectives laid out in the contract.

TAMPEP VII MONITORING & ASSESSMENT TOOL

	Wp1 - EC	Wp14 - EC	Wp2 - NORTH (Germany, UK, Denmark, Finland, Norway, Lithuania, Latvia, Estonia) Wp3 - SOUTH (Italy, Portugal, Spain, Greece, Romania, Bulgaria) Wp4 - EAST (Austria, Poland, Slovakia, Hungary, Czech Republic) Wp5 - WEST (Netherlands, Belgium, France, Luxembourg, Switzerland)	Wp2 - NORTH Baltic; Russia & Belarus Wp3 - SOUTH Balkans, Albania, Moldova Wp4 - EAST Central + East Europe Wp5 - WEST Africa	Wp2 - NORTH Asian sex workers Wp3 - SOUTH African sex workers Wp4 - EAST East European sex workers Wp5 - WEST Latin American sex workers
	PLANNING & COORDINATION	WEBSITE, NEWSLETTER, TECHNICAL ASSISTANCE, CONSULTANCY	COORDINATION	LEGISLATION & MIGRATION MAPPING	NEW MATERIALS, SERVICE MAPPING, NEW TARGET GROUPS
RESULTS – completed deliverables	<u>Coordination at European level</u> 2 GMs: ✓ - 25-27.04, 2005 Budapest, Hungary - 25-27.09, 2006, Turin, Italy <u>Interim Report</u> ✓ Handed in March 2006 <u>Final Report</u> ✓ Handed in March 2007 <u>6 Steering Committee meetings:</u> ✓ - 6-9.02, 2005, Amsterdam, - 23-24.04, 2005 in Budapest, - 29-30. 09, 2005, Vienna, - 14-17.03, 2006, Amsterdam , - 23-25.09, 2006, Turin - 30.11-3.12.2006 Amsterdam <u>Three other small SC work group meetings</u> took place in 2006 in Amsterdam: 4-7 April, 15-19 October and December 14-17 Steering Committee meeting reports ✓ 300 beneficiaries from GM + transnational exchanges ✓	The interactive website was continuously updated <u>Regular pan-European internal newsletter</u> (2 per project) ✓ April 2005 and September 2006 100 technical assist sessions ✓ 100 presentations of TAMPEP ✓ 10 consultancy missions ✓ 15 international policy meetings ✓ <u>Guidelines for training programmes</u> ✓ for outreach workers and health/social care providers were drafted and included in the website; The resources for training are introduced in report <i>Skills, Training and Good Practice Tools</i> <u>Consultancy services and policy advice</u> ✓ was frequently carried out to a very wide range of audiences, from researchers and service providers to representatives of NGOs and national governments	24 countries ✓ <u>Coordination at regional level</u> 2 regional meetings per group ✓ - all regions met 3 times - all regional reports completed 1 bilateral exchange per partner (24) ✓ - all partners were hosts and/or guests during multiple exchange visits - Lessons learned reports from exchange visits were completed for all exchange visits <u>Coordination at national level</u> 2 national events per partner (50) ✓ - all partners participated in at least 2 events organised on a national scale - all national reports completed <u>National networking with minimum of 10 service providers (24)</u> ✓ - all partners networked with numerous service providers, most with a significantly more than 10 - more than 1000 entities were reached or involved in events	24 countries ✓ 24 national mapping reports ✓ 4 regional mapping reports ✓ Regional reports included - analysis and statistics at national and regional level, highlighting the differences and similarities within region - comparison with 2003 mapping, highlighting the changes and consequences of changes Reports were comparable between and within regions	7 new languages ✓ - 7 new languages added for information material on CD vol. II resources (in comparison to vol. I) - Updated the content of the existing material in the previous languages (in total 18 languages and 8 topics) 4 new subjects in the CD vol. II ✓ 5000 copies of the CD were disseminated ✓ <u>evaluation of materials through outreach</u> ✓ - all TAMPEP material is tested during outreach work <u>evaluation of accessibility of materials</u> ✓ - evaluation of the distribution of the CD resources is a continuous task <u>Reports on specific target groups</u> ✓ - all regions completed their target group report <u>Update of educational materials and development of new materials</u> ✓ - all partners took part in updating of the existing and the creation of new materials <u>Report on health services and NGOs, their services and capacities to meet the needs of migrant sex workers and trafficked women</u> ✓ - all regions carried out theses assessments and completed reports

<p>Central Coordinator – finalised responsibilities & tasks</p>	<p>Organised logistics of GMs✓</p> <p>Organised logistics and agenda for Steering Committee meetings✓</p> <p>Monitored number of beneficiaries✓</p> <p>Prepared reports of Steering Committee meetings and GMs ✓</p> <p>Prepared report of Interim and Final of activities and European survey reports on European prostitution mapping and service mapping✓ (finalised in Feb 06)</p>	<p>Facilitated development of new website✓</p> <p>Edited and disseminated newsletters✓</p> <p>Provided and facilitated technical assistance✓</p> <p>Provided and facilitated TAMPEP presentations✓</p> <p>Provided and facilitated consultancy missions✓</p> <p>Attended policy meetings✓</p> <p>Prepared summary report and European overview, newsletter, technical assistance, TAMPEP presentations, consultancy missions and policy meetings; continuous diffusion of results✓ (interim report finalised Mar 05, final report completed Mar 07)</p> <p>Collated and elaborated training programme guidelines and prepared summary report and overview of resources as training programme guidelines✓ (final report completed Dec 06)</p>	<p>Received reports from Regional commission meetings✓</p> <p>Received reports from bi-lateral or multi-lateral exchanges✓</p> <p>Received reports of national events and networks ✓</p> <p>Prepared summary report and overview of Regional Commission meetings, bi-lateral and multi-lateral exchanges and national events/networks. ✓ (interim report finalised Mar 05, final report completed Mar 06)</p>	<p>Received reports from National Coordinators of national mapping✓</p> <p>Received and collated reports from Regional Coordinators of regional mapping overview ✓</p> <p>Received and collated reports from Regional coordinators of in-depth analysis of migration and mobility patterns from specific target regions/ countries✓</p> <p>Prepared European overview of mapping survey and in-depth analysis of migration and mobility patterns from specific target regions/ countries.✓ (final report completed Dec 06)</p>	<p>Coordinated updating and translation of existing materials into new languages✓</p> <p>Coordinated development of new materials and their translation ✓</p> <p>Facilitated development, production and distribution of new CD-ROM resource containing all TAMPEP educational leaflets ✓</p> <p>Received reports from Regional Coordinators on needs of specific target groups✓ (final report finalised Dec 06)</p> <p>Prepared summary report and European overview of additional materials developed, needs assessments for specific target groups and major TAMPEP events. ✓ (interim report finalised Dec 05, final report finalised Dec 06)</p> <p>Developed peer education training plan✓ (finalised Oct 05)</p>
<p>Steering Committee – finalised responsibilities & tasks</p>	<p>Attended Steering Committee meetings✓</p> <ul style="list-style-type: none"> - Developed and agreed work plan for TAMPEP activities ✓ - Developed and approved programme for GMs✓ - Facilitated in the GM✓ - Oversaw and evaluated GMs✓ - Monitored and evaluated implementation of TAMPEP activities and work plan✓ 	<p>Developed and approved guidelines for new website design and content✓</p> <p>Developed and approved guidelines for newsletter✓</p> <p>Developed and agreed guidelines for development of training programme✓</p>	<p>Development of guidelines for regional commission meetings✓</p> <p>Development of guidelines for bi-lateral or multi-lateral exchanges✓</p> <p>Development of guidelines for national events and networks✓</p>	<p>Reviewed, updated and approved mapping questionnaires✓</p> <p>In depth migration and mobility patterns research✓</p> <p>Developed and approved framework, guidelines and specific questions to be added to mapping questionnaire to establish migration and mobility patterns from specific target regions/countries</p>	<p>Target group needs assessment research✓</p> <p>Developed and approved framework, guidelines and specific questions to be added to mapping questionnaire to establish needs of specific target groups</p> <p>Development and approval of new materials✓</p> <ul style="list-style-type: none"> - Personal safety - HIV treatment - Drug use - Tips and tricks <p>Reviewed and approved new languages for materials ✓</p> <p>Lithuanian Slovakian German Ukrainian Estonian Latvian Italian</p> <p>Service mapping and evaluation research ✓</p> <p>Developed and approved guidelines for specific questions to be added to mapping questionnaire to map services</p>

Regional Coordinator – finalised responsibilities & tasks	<p>Facilitated GM programme ✓</p> <p>Contributed information and reports for website and newsletter ✓</p> <p>Participated, as required, in technical assistance, TAMPEP presentations, consultancy missions and policy meetings ✓</p> <p>Collaborated in the elaboration of training programme guidelines ✓</p>	<p>Contributed information and reports for website and newsletter ✓</p> <p>Participated, as required, in technical assistance, TAMPEP presentations, consultancy missions and policy meetings ✓</p> <p>Collaborated in the elaboration of training programme guidelines ✓</p>	<p><u>Regional Commission meetings</u></p> <p>Developed programme: ✓</p> <ul style="list-style-type: none"> - Analysis of national mapping responses at a regional level and further explore migration and mobility patterns from specific target regions/countries - Exploring needs of specific target groups <p>Organised logistics of Regional Commission meetings ✓</p> <p>Prepared summary reports for Central Coordinator ✓ (interim report finalised Dec 05, final report finalised Dec 06)</p> <p>Bi-lateral and/or multi-lateral exchanges ✓</p> <p>Advised and supported National Coordinators in identifying learning needs and partners</p> <p>Coordinate and collect National Reports for Interim and Final, prepare regional summary for Regional Report ✓</p>	<p>Prepared discussion paper as basis for regional workshops at 1st GM in relation to migration and mobility patterns from specific target regions/countries. ✓ (finalised for Central Coordinator 1 Apr and sent to National Coordinators by 10 Apr 05)</p> <p><u>Mapping questionnaire</u></p> <ul style="list-style-type: none"> - Discussed, agreed and distributed revised mapping questionnaires within Regional Commissions at 1st GM ✓ - Received and collated national mapping responses ✓ - Prepared regional overview and summary report for Central Coordinator ✓ - Prepare draft regional results for 2nd GM ✓ (interim report finalised Nov 05, final report finalised Nov 06) <p><u>Migration and mobility patterns research</u></p> <ul style="list-style-type: none"> - Developed specific questions for region to be added to revised mapping questionnaire to establish migration and mobility patterns from specific target regions/countries ✓ - Discussed, agreed and distributed migration and mobility patterns questionnaires within Regional Commissions at 1st GM ✓ - Received and collate national responses ✓ - Organised and facilitated Regional Commission meeting ✓ - Prepared regional overview and summary report for Central Coordinator ✓ (interim report finalised Nov 05, final report finalised Nov 06) 	<p>Prepared discussion paper as basis for regional workshops at 1st GM in relation to needs assessments amongst specific target groups ✓ (finalised for Central Coordinator 1 Apr and sent to National Coordinators by 10 Apr 05)</p> <p><u>Target group needs assessment research</u></p> <ul style="list-style-type: none"> - Developed specific questions to be added to revised mapping questionnaire to explore and identify needs of specific target groups. ✓ - Discussed, agreed and distribute target group needs assessment questionnaires within Regional Commissions at 1st GM ✓ - Received and collated national needs assessment responses ✓ - Organised and facilitated Regional Commission meeting ✓ - Prepare the draft result for 2nd GM ✓ - Prepared regional overview and summary report for Central Coordinator ✓ (final report finalised Oct 06) <p><u>Service mapping research</u></p> <ul style="list-style-type: none"> - Discussed and agreed service mapping within Regional ✓ Commissions at 1st GM - Received and collated national service mapping responses ✓ - Prepared final regional overview and summary report for Central Coordinator ✓ (final report finalised Oct 06)
---	--	---	--	--	---

National Coordinator - finalised responsibilities & tasks	<p>Participated in GM ✓ with 2 representatives of each country</p>	<p>Contributed articles and information for website and newsletter. ✓</p> <p>Participated, as required, in technical assistance, TAMPEP presentations, consultancy missions and policy meetings ✓</p>	<p>Participated in 2 Regional Commission meetings around in-depth analysis of migration and mapping patterns and target group needs assessments. ✓</p> <p><u>Bi-lateral and/or multi-lateral exchanges</u></p> <p>Identified learning needs ✓</p> <p>Identified partners for bi-lateral and/or multi-lateral exchange ✓</p> <p>Organised and participated in exchange ✓</p> <p>Provided a summary report on participation in bi-lateral and/or multi-lateral exchanges ✓</p> <p><u>National events</u></p> <p>Identified national learning needs ✓</p> <p>Organised national event ✓</p> <p>Provided summary reports on national events ✓</p> <p><u>National networking</u></p> <p>Identified key national partners ✓</p> <p>Collated details of members of national network ✓</p> <p>Provided a summary report on members and activities of national network. ✓</p> <p><u>Prepare National reports following given forms</u> ✓</p>	<p><u>Provided initial overview of current national situation to Central Coordinator including</u></p> <p>Changes in national political profile re prostitution - including legislation, welfare/health system and societal attitude ✓</p> <p>Changes in sex worker population ✓</p> <p>Changes in services available for migrant sex workers ✓</p> <p><u>Prepared a poster presentation on the national situation for 1st GM including</u></p> <p>Organisation profile ✓</p> <p>National political profile re prostitution - including legislation, welfare/health system and societal attitude ✓</p> <p>Overview of prostitution scene ✓</p> <p>National activities relevant to TAMPEP – including new resources developed for migrant sex workers and new transnational partnerships and cooperation. ✓</p> <p><u>Prepared a poster presentation on the TAMPEP national results for 2nd GM including</u></p> <p>Changes in legal framework ✓</p> <p>Prostitution scene ✓</p> <p>Exchanges and events (completed Sep 06) ✓</p> <p><u>Mapping Questionnaires</u></p> <p>Translated mapping questionnaire, including migration and mobility patterns and needs assessment questions for target regions and groups research ✓</p> <p>Completed mapping questionnaire from own knowledge ✓</p> <p>Distributed mapping questionnaire to minimum of 10 key stakeholders. Monitored and reported on distribution ✓</p> <p>Draft results prepared and discussed at the 2nd GM ✓</p>	<p><u>Distributed educational materials</u></p> <p>Monitored and reported on distribution of TAMPEP CDrom vol. I ✓</p> <p>Distributed TAMPEP 7 CDrom and evaluation questionnaires ✓</p> <p>Followed up on TAMPEP 7 CDrom evaluation questionnaires ✓</p> <p>Analysed national responses</p> <p>Prepared a national summary report on evaluation of TAMPEP 7 CDrom for Central Coordinator. ✓</p> <p><u>Needs assessment research</u></p> <p>Received discussion paper from Regional Coordinator ✓</p> <p>Discussed and agreed methodology for undertaking needs assessment for target groups in Regional Commission workshops at 1st GM ✓</p> <p>Draft results prepared and discussed at the 2nd GM ✓</p> <p>Analysed responses to mapping questionnaire re: needs assessment questions ✓</p> <p>Provided a national overview and summary report on the analysis of needs of target group to Regional Coordinator ✓</p> <p><u>Service mapping research</u></p> <p>Discussed and agreed methodology for undertaking service mapping in Regional Commission workshops at 1st GM ✓</p> <p>Undertook and analysed national service mapping research ✓</p> <p>Draft results prepared and discussed at the 2nd GM ✓</p> <p>Provided a national overview and summary report on services for migrant sex workers to Central Coordinator ✓</p>
---	--	---	---	--	---

				<p>Provided a national overview and summary report on the analysis of responses to Regional Coordinator ✓ (interim report finalised Sep 05, final report completed Apr 06)</p> <p><u>Migration and mobility patterns research</u></p> <p>Received discussion paper from Regional Coordinator ✓</p> <p>Discussed and agreed methodology for in-depth analysis of migration and mobility patterns from target regions/countries in Regional Commission workshops at 1st GM ✓</p> <p>Draft results prepared and discussed at the 2nd GM ✓</p> <p>Provided a national overview and summary report on the analysis of national responses and at least one case study of a migrant sex workers to Regional Coordinator ✓</p>	
--	--	--	--	---	--

ANNEX 1

Summary of the work process of TAMPEP VII

TAMPEP VII expanded the network to 25 European countries, including 8 new EU member countries and 2 associated countries.

There are 4 Regional Commissions: East, North, South and West.

EAST Commission

Austria (Regional Coordinator), Czech Republic, Hungary, Poland, and Slovakia.

NORTH Commission

Germany (Regional Coordinator), Denmark, Estonia, Finland, Latvia, Lithuania, Norway, and United Kingdom.

SOUTH Commission

Italy (Regional Coordinator), Bulgaria, Greece, Portugal, Romania, and Spain.

WEST Commission

The Netherlands (Regional Coordinator), France, Luxembourg, Belgium and Switzerland (as invited country) and Ukraine (as bilateral project of the Netherlands)

Our overall purpose: to develop models of good practice and tools to support the planning and implementation of health and social care services for (migrant) female and transgender sex workers and trafficked women.

TAMPEP VII aims shared and committed to by the whole Network

1. To develop and consolidate HIV/STI prevention, health and social promotion interventions.
2. To promote human rights and equality in public health policy.
3. To facilitate the sharing of knowledge, experience and good practice among service providers.
4. To strengthen national partners capacity for effective interventions within a sub-regional cooperation model.

TAMPEP VII objectives shared and committed to by the whole Network

1. To further develop realistic, comprehensive and innovative intervention models including multi-lingual information materials and guidelines for outreach projects, multi-disciplinary services, peer education and cultural mediation.
2. To assess the situation within prostitution through gathering qualitative and quantitative data from the 25 national partners
3. To educate health and social care service providers in relation to (migrant) sex worker's and trafficked women's needs, within a human rights framework.
4. To promote risk reduction measures for migrant female and transgender sex workers and trafficked women and to seek to integrate recommendations within national and European policies.

These aims and objectives are worked out, diffused, presented and translated into the activities and results at the level of Coordination Centre towards various agencies

and in different settings through the communication channels among the Network members and countries.

TAMPEP VII Work Programme

ACTIVITIES SUMMARY

To achieve our aims and objectives the activities have been scaled up following a strict time table and the clear division of tasks. Detailed National and Regional work plans, including guidelines for implementation and critical deadlines, have been prepared and distributed before and discussed during the first General Meeting. In order to make the data and gathering of information compatible on European level, the tools had been prepared in the form of questionnaires, summary and report forms, and the guidelines.

Interactive Website

The General Coordinating Centre in Amsterdam is working with an IT specialist to further develop the TAMPEP website so that it is more interactive and contains downloadable materials.

Electronic Newsletter

The General Coordinating Centre produces an electronic newsletter twice a year for network members, providing information about TAMPEP VII activities and reports from National and Regional Coordinators. To facilitate the first newsletter and the 2005 General Meeting each National Coordinator had been required to submit a short report on the current national situation by the end of March 2005, guidelines had been provided for the provision of this information. To facilitate the third Newsletter, National Coordinator had been required to submit a short report on the current national situation by September 2006. Guidelines had been provided for the provision of this information. The other newsletters are prepared as technical communications by the Coordination centre.

Technical Assistance and Policy Advice

The General Coordinating Centre provides both technical assistance and policy advice to both national partners and external organisations.

TAMPEP Educational Resources

The General Coordinating Centre coordinates the updating and translation of TAMPEP educational leaflets. Next to the existing series of leaflets we developed 2 new leaflets Take care of yourself, Safer drug use (in total 8 topics) and adding 6 new languages – Lithuanian, Slovak, Ukrainian, Latvian, Estonian and German (in total 18 languages). All National Coordinators provided the updating of the existing folders, provided new translations and provided the translations in new languages. A new CD-Rom was produced containing all of the educational materials in an easy to download and print format that was available by September 2006.

Develop Guidelines for Training Programmes

The General Coordinating Centre coordinates the development of training guidelines for outreach workers and health and social care providers to the National Coordinators and external cooperating agencies and develops and diffuses a specific peer education training programme. Three national trainings on peer education had been effectuated in 2005. The review of the TAMPEP resources for outreach and existing skill of sex work projects are presented in the *Skills, Training and Good Practice Tools*.

General Meetings

The General Coordinating Centre organises 2 General Meetings. The first General Meeting had been held in April 2005. The second General Meeting was held in September 2006.

Regional Commissions Meetings

The Regional Coordinators organise 3 Regional Commission meetings and prepare a report for the General Coordinator. Guidelines for the Regional Commission meetings had been discussed and agreed at the first General Meeting. One Regional Meeting took place at the time of GM and the second Meeting took place: for Commission South in November 2005, for Commission East in December 2005, for Commission West in January 2006, for Commission North in March 2006, the third meeting of all 4 commissions took place in September 2006.

In-depth Analysis of Migration and Mobility Patterns

The Regional Coordinators facilitates an in-depth analysis of migration and mobility patterns within Regional Commissions through national mapping questionnaire, case studies and Regional Commission meetings. Each Regional Commission has target region/countries as a specific study:

- East Commission Central and Eastern Europe
- North Commission Baltic countries, Russia and Belarus
- South Commission Balkans countries, Albania and Moldova
- West Commission Africa

Regional Coordinators have prepared a discussion paper that was circulated to National Coordinators before the first General Meeting. Guidelines for the research had been discussed and agreed at the first General Meeting.

The Regional Coordinators were required to collate the national responses and prepare a regional overview for the General Coordinator which was sent by December 2006. The draft was prepared and discussed with the member of each Regional Commission group in September 2006.

In-depth Analysis of Needs of Specific Target Groups of Migrant Sex Workers

The Regional Coordinators facilitated an in-depth analysis of the needs of specific target groups of migrant sex workers within Regional Commissions through national

mapping questionnaire, case studies and Regional Commission meetings. Each Regional Commission had a specific target group:

- East Commission Central and Eastern Europe
- North Commission Asian
- South Commission African
- West Commission Latin America

Regional Coordinators have prepared a discussion paper that was circulated to National Coordinators before the first General Meeting. Guidelines for the research had been discussed and agreed at the first General Meeting.

The Regional Coordinators were required to collate the national responses and prepare a regional overview for the General Coordinator to be sent in by October 2006. The draft of the need assessment report was discussed and finalised with the member of each Regional Commission group in September 2006.

National Mapping

The National Coordinators completed the mapping questionnaire from their own knowledge and experience (from either a local, regional or national perspective) before undertaking the national mapping activity. The completed questionnaires had been sent to both the Regional and General Coordinators by the end of May 2005.

As the second step the National Coordinators translated the definitive mapping questionnaire; identified a *minimum* of 10 key informants in their country from whom quantitative and qualitative data can be gathered; collated the information in returned questionnaires and prepared a report for the Regional Coordinator. Guidelines for the mapping activity had been discussed and agreed at the first General Meeting. The second phase of the national mapping was the update in 2006. The final result in the form of a National Mapping Report was sent to the Regional Coordinators in October 2006.

The Regional Coordinators collated the national responses from National Coordinators (in November/December 2005 for the Interim and October 2006 for the final) and prepared a regional overview for the General Coordinator by November 2006. The national data of the prostitution mapping are introduced in the European database by the Coordination Centre and finalised after a final consultation in the GM with all countries in September 2006. The analysis of the final results is presented in *European Overview of HIV and Sex Work* report. The comprehensive case study of seven comparative countries of the TAMPEP Network forms the second part of the European Overview report.

National Mapping of Health and Social Care Services for Migrant Sex Workers

The National Coordinators gathered information about health and social care services available to (migrant) sex workers in their country and prepared a report for the Regional Coordinator by July 2006. Guidelines for the service mapping activity had been discussed and agreed at the first General Meeting.

The Regional Coordinators collated the national responses and prepared a regional overview for the General Coordinator by August 2006. The draft of the services

report was discussed and finalised with the member of each Regional Commission group in September 2006. The final analysis and European overview of the results of all national mapping on access to health and social services is elaborated by Coordination Centre and presented in the *Gaps Analysis in Service Provision*, finalised in December 2006.

National Distribution of TAMPEP resources

The National Coordinators were required to promote, distribute and evaluate the new TAMPEP CD-Rom, prepare distribution and evaluation reports and to prepare a report for the Regional Coordinator. The promotion and distribution campaign started in September 2006.

The Regional Coordinators collated the national responses and prepared a regional overview for the General Coordinator December 2006.

National Networks

The National Coordinators established and/or maintain contact with a *minimum* of 10 service providers and prepared a report for the Regional Coordinator.

The Regional Coordinators were required to collate the national responses and prepare a regional interim overview for the General Coordinator by November 2005 and a final overview by November 2006. The national reports included a list of National Network members and remits of the organizations from the network.

National Events

The National Coordinators organised a minimum of 2 national TAMPEP events and prepared a report for the Regional Coordinator.

The Regional Coordinators collated the national responses and prepared a regional overview for the General Coordinator. The national reports included a list of participants in national event and remit of the participants.

Bi-lateral/Multi-lateral Exchanges

The National Coordinators identified learning needs and potential partners for bi-lateral and/or multi-lateral exchanges and prepared a report for the Regional Coordinator. Guidelines for the bi-lateral and multi-lateral exchanges had been discussed and agreed at the first General Meeting and support have been provided by the Regional and General Coordinators.

The Regional Coordinators collated the national responses and prepared the final regional overview for the General Coordinator by December 2006.

Interim and Final Reports

The National Coordinators prepared an *Interim Report* with all interim results on their TAMPEP activities and resources lists for the Regional Coordinator by the end of November 2005.

The National Coordinators prepared a *Final Report* for the Regional Coordinator on their TAMPEP activities by end of November 2006.

The Regional Coordinators collated the national reports and prepared a regional overview for the General Coordinator by December 2005 (Interim) and December 2006 (Final).

ANNEX 2

Example of a Regional and National reports

NORTH REGION

TAMPEP 7

December 2006

Compiled by *Amnesty for Women/TAMPEP-Germany*

FINAL REPORT

Regional Final Report

This report was drawn from information provided by the TAMPEP partner organisations which compose the NORTH region.

- | | |
|------------------|--|
| ▪ Denmark | Danish Centre for Research on Social Vulnerability |
| ▪ Estonia | AIDS-I Tugikesku |
| ▪ Finland | Pro-tukipiste |
| ▪ Germany | Amnesty for Women |
| ▪ Latvia | Genders |
| ▪ Lithuania | Lithuanian AIDS Centre |
| ▪ Norway | The Pro-Sentret |
| ▪ United Kingdom | Scot-Pep |

There are five main facts which call attention regarding the NORTH region:

1. There were no major changes within the prostitution scenario because of the EU-Enlargement.
2. The Baltic countries did not become (important) transit countries as expected.
3. Migrant sex workers are the majority among the EU-15 countries and still a minority among the EU-10 countries.
4. In all countries the majority of sexual services are offered indoors.
5. The increasing influence of the **Swedish Model** (SM) or its newest variant, the **Finnish Model** (FM) on the other countries.

The **Finnish Model** - which criminalises only the clients of sex workers who are victims of trafficking or of pimping – was adopted last June. This model was very much welcomed by the politicians as a “lighter” alternative to the SM because:

4. The FM is not so radical as the SM,
5. The opinions are very much divided in the different countries of this region about the pros and cons of the SM, what makes the FM a good alternative for the moment, and
6. The FM could be a very appropriate instrument for the fight against trafficking in women, the main political argument nowadays to control prostitution.

Denmark – still very much divided about what to do, but it is not on the political agenda at the moment. The government is against the SM, one (fairly small) party on the left is for, but most parties are divided on the question among themselves.

Estonia – also very much divided. Although the *Ministry for Internal Affairs* declared there was no intention to adopt the SM¹¹, the impression is however that Estonia will consider opting for the FM.

Finland¹² - the police's biggest problem is now to figure out how to apply the law... And how can this law be implemented in practice? How can the clients really estimate who is a victim of trafficking or of pimping?¹³ Especially in pimping cases will it be difficult, because the definition of pimping is very wide and not commonly known among citizens.

There are criticisms from different sides:

- a) SM supporters and abolitionists: In practice the law legalizes prostitution, because it doesn't condemn buying sexual services in general¹⁴.
- b) Sex workers: the FM (and SM) doesn't give any rights to sex workers; they are not treated as victims but only as witnesses. This means that they are not entitled to get any compensation¹⁵.
- c) Service providers: The same victim criticism as above + no clear decision who is responsible to take care of prevention, support and protection¹⁶.

Germany – just before the Soccer World Cup there was a proposal on regional level, to create a similar version of the FM. But it did not have any consequences. However, there has been some controls and repression on clients within the restricted areas for street prostitution.

Latvia – also very much divided on what to do, but it will probably adopt the FM in case Estonia does it.

¹¹ **Estonia**: Furthermore, a research institute, the *Open Estonia Institute*, declared that the Estonian population were not prepared for such repressive measures... This high percentage of Russian sex workers represents Russians who are not migrants but live in Estonia legally and are considered both Estonian and Russian. A survey was implemented by our centre and supported by the Global Fund Medical Project in 2005 with the following results: Estonians 12%, Russians 80%, other nationalities 8 %. The survey included 180 visitors in a period of 9 months.

¹² **Finland**: The FM was born because of divided opinions regarding the adoption of the SM, as an alternative to it. Apart from this new legislation, brothels are illegal in Finland and it is forbidden to sell and to buy sexual services in public places. The only way to work as a sex worker in Finland is as an independent person.

¹³ Is this again one example of the laws which is “empty paragraph” from the beginning and which was necessary only for political reasons?

¹⁴ And it gives wrong message that there are acceptable forms of prostitution (voluntary prostitution).

¹⁵ They are treated as victims only in very common sense but not victims of crime. Pimping has been extended to include almost all forms of advertising of sexual services (publishing ads in newspapers/magazines/internet etc). That means that almost all sex workers can be victims of pimping.

¹⁶ Many politicians expressed that these services are even more important than criminalization, but no funding for these services has not been allotted so far.

Lithuania – the criminalisation of both clients and of sex workers already started in 2005, with fines from 100€ up to 300€, and a possible imprisonment for 30 days. A major consequence is the moral one: clients are more afraid of being caught with a sex worker than to pay the fine.

Norway - due to the increase of African sex workers in public places, the SM was once more heavily debated in Norway last spring. The present government will not adopt the SM, but they are under a heavy pressure⁷. The FM came as a surprise in the Norwegian debate. Some politicians might adopt this idea as an alternative, but for the time being the debate has again decreased and we do not know how the FM will influence further policy.

UK –a “zero tolerance” policy has been adopted in the UK, which however does not go as far as the SM. The *Anti-Social Behaviour Orders (ASBO)*, used against street sex workers, can lead to imprisonment if not respected. Although brothels are illegal in the UK, England and Wales are proposing to allow two sex workers to work together legally. In Scotland there is a proposal to criminalise behaviour likely to cause nuisance, fear or offence while engaging in street prostitution which will be applicable to both street sex workers and their clients¹⁸.

PROSTITUTION MAPPING

Country	Major Group	Origin	MAJOR WORK PLACE
Denmark	50% migrants	<u>Thailand</u> , Baltic countries. New: Nigerians on the streets, Polish in massage parlours	70% indoor
Estonia	12% Estonians, 80% Russians established in Estonia	Latvia, Lithuania, Belarus, Ukraine	90% indoor
Finland	60% migrants	Russia, Estonia, <u>Thailand</u>	95% indoor
Germany	60% migrants	55% CEE, 20% <u>Asia</u> , 15% Latin America, 10% Africa. A total of 38 different nationalities.	80% indoor
Latvia	85% Latvians	Russia, Belarus, Ukraine, Estonia, Lithuania	50% indoor
Lithuania	85% Lithuanians	Russia, Ukraine	70% indoor
Norway	60% migrants	<u>Thailand</u> , Bulgaria, Estonia, Lithuania, Rumania. New: Nigeria	60% indoor
United Kingdom	37% migrants. London 76%. Outside London 0 – 40%.	52% from former Eastern Bloc and Balkan countries., 24% other European countries, 9% Asia, 9% Latin America, 5% Africa, 1% Australasia & 1% North America.	72% indoor. Migrants do not work on the street.

Some considerations:

- Migrants in the NORTH region are differently divided: while in the old EU countries they are the majority, they are still a minority in the new EU countries.
- The Baltic countries are still mainly origin countries. They did not become transit or destination countries as expected, because they are of no economic interest for

¹⁷ **Norway** There again the Christian Democrats and the Extreme Left Party (very small) are for the adoption of the SM. The Liberal Party is against, while all other parties have discussions going on.

¹⁸ **UK:** Some consequences of the policy of “zero tolerance” which intends to reduce and eventually eradicate prostitution: there is less funding for sex work projects, with the majority of funding being directed at support to leave prostitution (street prostitution in particular). Little attention has been paid to the needs of migrant sex workers, who work indoors,.

migrants. The Baltic countries are however turning into *entry countries* for those wishing to enter the EU.

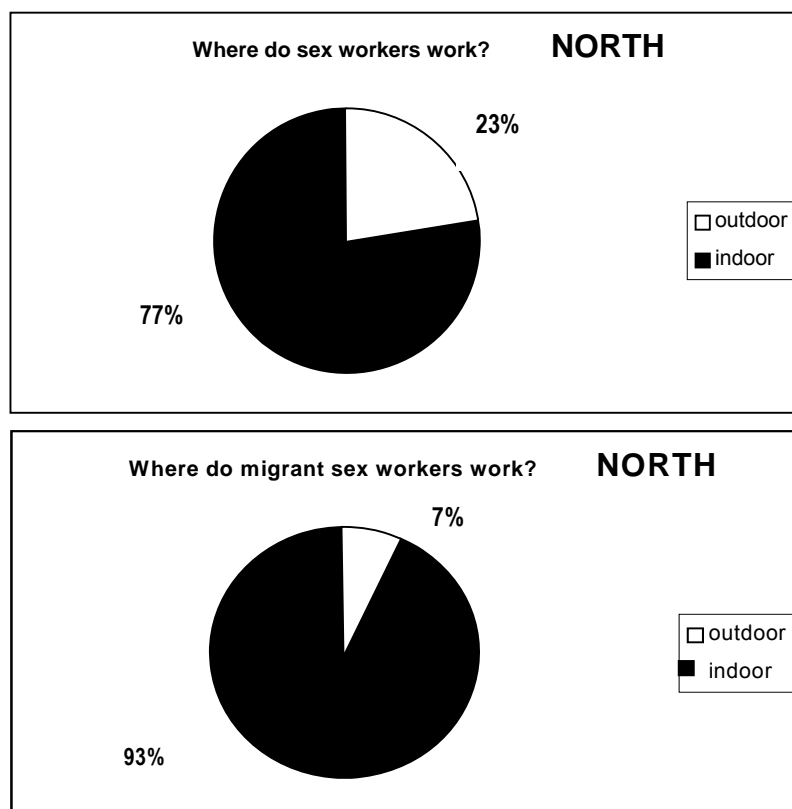
- Regarding the work places, in all eight countries however, prostitution is mostly performed indoors.
- In the last two to three years there was a very quick increase of migrant sex workers in the old EU countries. The most significant example for that phenomenon is **Norway**: while in 2001 migrants represented about 20% of the sex workers population, they are now about 60% of them. In only five years their amount more then tripled.
- There was no major change what regards the EU-Enlargement. There were slight increases of sex workers from this region in the West European countries but nothing that would change considerably the prostitution milieu. On the contrary, the most significant change in the region was the increase of Nigerian street sex workers in Norway and in Denmark.

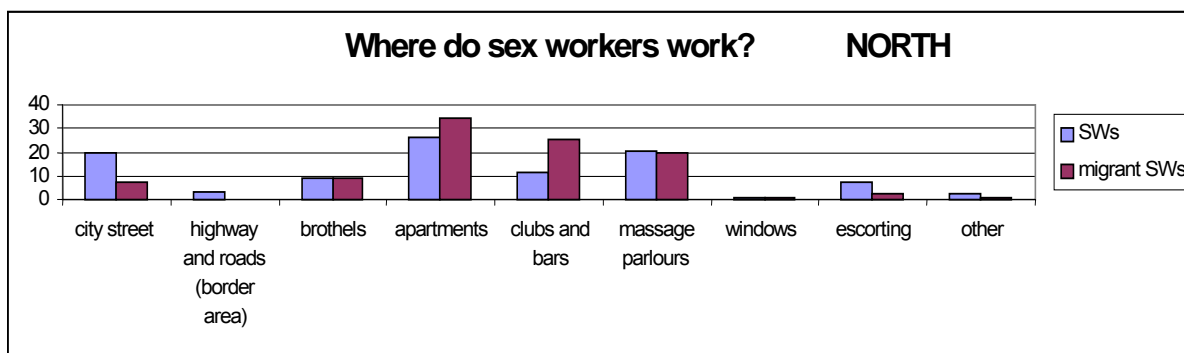
Estonia – The working conditions have improved. There are more independent sex workers using the internet. In Estonia there are different sorts of citizenships: there are Estonians with Russian passports, there are citizens with Alien passports, which mean they have no nationality, and there are those Estonians with Estonian passport.

Finland – Because of increasing repression, street prostitution became almost nonexistent or very clandestine. There are now different means of looking for clients, because working only on the street has become very rare.

Latvia – There has been an increase in the indoor prostitution. The majority of sex workers have pimps. In Latvia, sex workers have to undergo periodical medical examinations every three months.

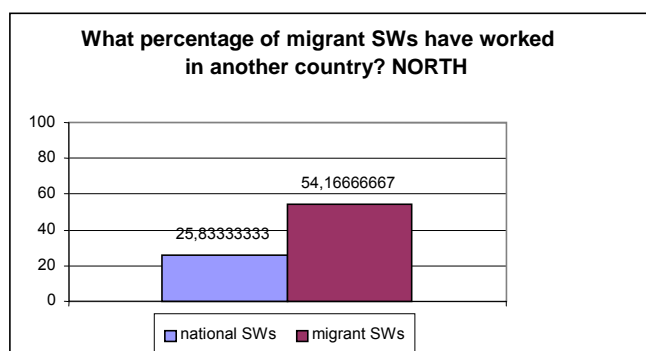
Lithuania – There was a decrease of sex workers in general because of the great migration to the West. To give an idea of the migration dimension: 15% of the Lithuanian population migrated to the West since the EU-Enlargement. This means 300 thousand persons from a total of 2 million. Of those who migrated, 40% were men and 60% women.





top 5 nationalities in NORTH Europe

Russia
Thailand
Lithuania
Ukraine
Estonia



SERVICES

Services vary according to each country. However, one could say that in general, in both old and new EU countries, services are still not prepared to deal with sex workers, especially not migrant sex workers.

Denmark – The government invested 6 million euros in a new national project on prostitution called “*Another Life*”. The project does outreach only in the indoor prostitution area and offers counselling. Everyone (Danish and non-Danish) has the right to be tested anonymously for HIV/STI¹⁹.

Estonia – There is only one service which offers information, support, anonymous and free of charge HIV testing and counselling, testing and treatment of STI: AIDS-Tugikeskus. These

¹⁹ The Clinic of Venereal Diseases at the Bispebjerg Hospital in Copenhagen offers testing of HIV/STI, examinations and counselling. In Århus the Clinic of Venereal Diseases offers examinations and treatment without referral from GP's. In Vejle County there is a local agreement with GP's to test anonymously for HIV/STI. There might be other local agreements.

services are financed by the *Global Fund against AIDS, Tuberculosis & Malaria Program*. The state only participates by partly financing “rehabilitation” services for former sex workers through the ATOLL centre, which is supported by the EQUAL Program.

Finland – *Pro-Tukipiste* is the only specialised service for sex workers. Public services however, are becoming more open minded for sex workers. There are plans to start special services also in Tampere (the 3rd biggest city in Finland): *Pro-tukipiste* is planning to build up a network with other service providers in this area²⁰. The Social and Health Care Departments decided (in September 2006) that they have to include the prostitution issue (how to provide services to this target group) in their training plan in 2007.

Germany – Since 2001, all public health services offer voluntary, anonymous and free of charge HIV/STI testing and (some) treatments for sex workers. There are about 40 *Public Health Care Services* in Germany specialised to attend sex workers, including migrant sex workers. AIDS treatment has to be paid for.

Latvia – There are no specialised services for sex workers. Most STI testing is free of charge but treatments have to be paid for. If any STI or HIV is detected, the diagnosis and the lab test are for free, but medicines have to be paid for.

Lithuania – All services have to be paid for, with the exception of those at the AIDS-Centre. There are insufficient services for sex workers, who are very much discriminated.

Norway – Only in three towns are there specialised services for sex workers: Oslo, Stavanger and Bergen, STI testing and treatments are free and anonymous. Long term AIDS treatment has to be paid for. Public services however are starting to improve their offers for migrants.

UK – National and migrant sex workers have the right to access free of charge NHS (*National Health Service*) sexual health services, however migrant sex workers do not have the right to access other NHS free of charge health services and there is increasing pressure within the NHS to collect payment from migrants.

MIGRATION FLOW

The Baltic countries did not become transit countries because their inhabitants as well as those from Russia, Ukraine or Belarus migrate directly to the West or take other routes. Very few take the route via Finland.

- For Eastern Europeans the main routes to the West are through Poland, Czech Republic, Hungary and Germany.
- For Thais the main route to the North is through Germany. The majority however fly directly to the destination country.
- For Africans the main route to the North is via Spain and Italy.
- A great number of migrant sex workers have worked in the sex industry in their home countries AND most of them have worked in another country before getting in the one they are in at the moment.
- Main countries where sex workers have worked before:
 - 1) Italy and Spain.
 - 2) Germany, the Netherlands and UK.

²⁰ An unofficial network of local service providers contacted *Pro-Tukipiste* and asked if they could start working also in Tampere. All network members were invited to discuss about three different options: a) they would start the services and organize it as part of an already existing services, b) they would establish a new local NGO, which could run the activities required and c) *Pro-tukipiste* would apply for funding to start and coordinate the local work and network. The vast majority wanted *Pro-tukipiste* to start in Tampere because then they can be sure that it will be based on the same ideology and practice what the organisation develops in Helsinki. *Pro-Tukipiste* applied for funding but the information if it will be possible will only be given mid December. In the Tampere City Council one of the council members raised the issue about if Tampere is prepared to provide services for sex workers. The Council decided however, that the Social and Health Care Departments have to include this issue in their next year training plans.

3) 15 other countries were mentioned²¹

Denmark: More than half of the presumed victims of trafficking are known to have worked as prostitutes in other countries before coming to Denmark

Estonia – Nationals go directly, mainly to Denmark, Greece, Norway and Spain.

Finland – Sex workers from Russia, Estonia, Belarus and Ukraine arrive via Tallinn and/or via St. Petersburg and are very mobile. Sex workers from Thailand are stable but mobile within the country itself.

Germany – There is an enormous amount of mobility on national level. About 80% of migrant and national sex workers have already worked in another German town before. However, only about 20% nationals have worked in another country, while about 60% of migrants have worked in another country before coming to Germany.

Latvia and Lithuania – Since the EU-Enlargement national sex workers are very mobile: they come and go back to their home countries very often in a short period of time.

Lithuania – Because many nationals migrated abroad, there has been a great mobility on national level of sex workers from the interior coming to the bigger cities.

Norway – Because of repression and competition there has been increased mobility.

United Kingdom – 44% of migrant sex workers were reported as having worked in another country prior to coming to the UK and 25% were reported as having worked in other UK cities. 14% of national sex workers were reported as having worked in another country.

ASIAN SEX WORKERS

Asian sex workers, mainly those from Thailand, are the most important group in the NORTH region after those from the CEE countries. They are probably the biggest group in Denmark, the second one in Norway and Germany, and the third one in Finland.

Thai sex workers characteristics are:

- They live quite isolated from the host country's society but well integrated in the local or national Thai community.
- This group needs therefore cultural mediators and social workers to be contacted.
- The majority have a legal status through the marriage to Dane, Norwegian, Fin or German men.
- Most of them work in massage parlours.
- Many of them worked in the sex industry in Thailand, where they met their future husbands.
- There are no Thai sex workers in the Baltic countries. What could exist are Chinese sex workers in very closed and isolated Chinese communities, which are therefore impossible to contact.

²¹ Austria, Denmark, Estonia, France, Greece, Israel, Latvia, Lithuania, Norway, Poland, South America, Sweden, Switzerland, Turkey, USA.

NORTH REGION

TAMPEP 7

December 2006

Compiled by *Amnesty for Women/TAMPEP-Germany*

FINAL REPORT

Prostitution Mapping Report

This report was drawn from information provided by the TAMPEP partner organisations which compose the NORTH region.

▪ Denmark	Danish Centre for Research on Social Vulnerability
▪ Estonia	AIDS-I Tugikesku
▪ Finland	Pro-tukipiste
▪ Germany	Amnesty for Women
▪ Latvia	Genders
▪ Lithuania	Lithuanian AIDS Centre
▪ Norway	The Pro-Sentret
▪ United Kingdom	Scot-Pep

DENMARK

PROSTITUTION SCENE

Street prostitution has slightly increased, and it is believed that more women started working in escort prostitution. There has been a big increase of women from Nigeria coming to Denmark and working in street prostitution.

SEX WORKERS SITUATION

One of the main vulnerability factors for both national and migrant sex workers is their unstable physical and psychological situation. The biggest difference between national and migrant sex workers is that migrant sex workers do not have access to information about their rights, apart of their fear of authorities.

In the last years there has been an increase of clients demanding sex without condom. During outreach work it has been observed that sex workers ask fewer condoms and more lubricants, and women talk more about violence committed against them.

Drug use among street sex workers has decreased, but there are more young women making use of it.

The government created a nationwide *Competence Centre for Prostitution* in Denmark, which however is only accessible for national and migrants with a legal status.

An important change which occurred in 2005 was the extension of the “reflection days” for victims of trafficking, from 15 to 30 days. During this period the person usually stays in a women’s shelter.

MOBILITY

National and migrant sex workers are very mobile within Denmark itself, usually between big cities in Denmark, which means cities with more than 500.000 inhabitants. Many migrant sex workers had already worked in their home countries and in other European countries in prostitution before migrating to Denmark.

The main reasons for mobility are:

- National and migrant sex workers move from one place to another in order to increase their earnings.
- National and migrant sex workers prefer to move between big cities in order to benefit from the anonymity.
- Mobility is very often facilitated by informal networks existing within different communities, which supports sex workers in their search for new working places.

SERVICE PROVISION AND POLICY

Outreach work, “mouth to mouth” and hotline are the main means of contacting sex workers.

The main barriers for migrant sex worker to access services are:

- Many national and migrant sex workers are afraid to be recognized as sex workers and are therefore afraid of authorities and they avoid having contact with NGO’s.
- The fact of being an undocumented migrant.
- The lack of information about their rights and about organizations that offer services.

All national sex workers are entitled to access public health care. There are specific health clinics and hospitals that provide services for migrant sex workers. But only one organization, *The Nest Stop Trafficking*, has translators and cultural mediators.

If a migrant sex worker has no documentation (citizenship, residence permit) she cannot access long term treatment unless the illness’s symptoms get acute. In 2006 a health clinic targeting migrant sex worker has opened.

There has been published a leaflet in 11 languages for victims of trafficking.

ESTONIA

PROSTITUTION SCENE

Different sources of information estimated that the number of sex workers has been stable during the last 3 years and that there are approximately between 1.500-2.000 sex workers in the country.

There are very few cases of street prostitution. Women mostly work in apartments, saunas, bars, massage parlours. The majority of sex workers are women.

After the EU enlargement no remarkable changes happened regarding migration flows, gender and nationalities of sex workers. The number of migrant sex workers is not higher than 1% of the total sex workers’ population.

During the last 2 years there were a growing number of Latvian sex workers working in Tallinn and during the summer, in Parnu, on a temporary basis.

SEX WORKERS SITUATION

Estonia became an EU member in 2004, which meant an easier access to the West European market for national sex workers.

MOBILITY

The number of migrant sex workers remains very low. The prognoses that there would be a float of migrant sex workers to Estonia after the enlargement of the European Union did not take place. After the Finnish parliament have passed, in October 2006, the new legislation regarding the criminalization of clients of victims of trafficking, several experts see the possibility of an increase of Finnish clients coming to Estonia to seek for sexual services.

SERVICE PROVISION AND POLICY

There are still only two service providers for sex workers – *the AIDS Information & Support Centre* and the *Tervisekeskus Elulootus Centre*, with two projects: a drop-in centre and a medical service. In 2005 the *ATOLL Centre* was created in the frames of an EGUAL project, but they work only with those who decide to leave or already left prostitution. It is still not

clear what their methodology are and what services they offer. The ATOLL Centre was officially opened in October 2005 and it spread information among about 400 contacted persons during one year, but only “rehabilitated” one sex worker.

The medical services and the drop-in centre in the *Tervisekeskus Elulootus Centre* and in the *AIDS i Tugikeskus* are financed by the *Global Fund against AIDS, Malaria and Tuberculosis Program* in Estonia. The government acts like a co-founder and support only rehabilitation through participation in the EQUAL project.

It is very difficult to create a network of service providers because of:

1. Very different (sometimes antagonist) points of view regarding sex work. For example: the ATOLL Centre regards prostitution as a phenomena which is described by their psychologist and fieldworkers as “mental disability”, which is absolutely not acceptable for *AIDS Information & Support Center* and for *Tervisekeskus Elulootus Center*.
2. Differences in “target” groups. The *AIDS Information & Support Centre* and the *Tervisekeskus Elulootus Centre* work with all sex workers, regardless their wish about leaving or staying in prostitution, while the ATOLL Centre aims to “rehabilitate” prostitutes, working only with those who will or already left sex business.
3. Very different attitudes and ways of working. The ATOLL Centre uses in their work methods absolutely not appropriated for sex workers and their allies. For example: several time, outreach workers of the ATOLL Centre introduced themselves at brothels and to sex workers as clients; or, in their printed material it is not pointed out that the project’s aim is to “rehabilitate” sex workers and to convince them to leave prostitution.

FINLAND

PROSTITUTION SCENE

No major changes, the situation has remained very stable. The enlargement of the EU did not affect the numbers of sex workers. The number of street prostitution has always been small but it has become very discreet after the new Law in October 2006, which criminalises clients of victims of trafficking and pimping. Most street workers developed therefore other ways to get in contact with clients, which is the internet. During the last two years, the sex workers’ organization *Salli* has widened the picture of the Finnish prostitution scene: sex work is not only a migration issue anymore.

SEX WORKERS SITUATION

Nowadays Finland has more information available about national sex workers. This wider perspective have caused resistance among abolitionist groups because they argument that by talking more about (national) prostitution and their multi faceted nature, the media will transform prostitution into a normal issue.

A diffuse legal situation and increased repressive attitudes have caused a small but real empowerment movement among both national and migrant sex workers. They are more ready to stand up and fight for their rights.

The definition of pimping is unclear and it’s causing confusion. In the beginning of October 2006 a new law came into force. It criminalizes abuse of victims of trafficking and/or pimping. A person is guilty of abuse, if he buys services from a person who is a victim of trafficking or pimping. This law is a good example of so called “symbolic legislation” which has become more common in Nordic states during the last years.

MOBILITY

No major changes. In Lapland the visibility of sex workers has decreased.

SERVICE PROVISION AND POLICY

There were no major changes concerning services targeted to sex workers in general or to migrant sex workers in special. People with legal residence status are entitled to all services. Several services provided by NGO’s are available also for migrants without legal status.

Sex work is more on the political agenda and there have been some changes regarding service providers' attitudes towards sex workers. Even if *Pro-tukipiste* is still the only service provider specialized in sex work issues, there are other organisations anxious to start working with sex workers outside Helsinki, as in Tampere and Turku. Sex workers own organisation *Salli* is providing legal advice and peer support. They have also started peer education training in autumn 2006.

According to the national action plan, the Finnish government established special service programmes for trafficked people. Victims of trafficking are entitled to get social and health care services during the reflection period (from 1 to 6 months). Victims of trafficking can get also residence permit if they decide to cooperate with the police and cut all the contacts to the traffickers. Persons in especial vulnerable situation can get the permit without the requirement of cooperation.

GERMANY

PROSTITUTION SCENE

In Germany, the majority of sex workers (about 80%) work indoors, either in apartments, in brothels, bars and clubs. Both migrant and German sex workers work in such a pattern and very often sex workers from different nationalities work together, including German and migrants, as well as women and transgender.

Regarding sex workers working on the streets: those are usually drug addicts and the majority are Germans.

There has also been noted an increase in the number of migrant sex workers working in massage parlours. Although the majority of such institutions less frequently employ migrants, there has been a significant growth in number of Asian sex workers offering sexual services in parlours disguised as Thai massage parlours.

The majority of sex workers are women (93%) with males comprising 4% and transgender 3% of the total sex workers' population.

The pattern of percentages of national and migrant sex workers has been showing an increase in the numbers of migrant sex workers since 1999. In 2005 this difference has reached the amount of 40% national and 60% migrant sex workers. This trend has been further reinforced by the enlargement of the EU. For the first time, there is a greater number of migrant sex workers than of nationals in the whole country.

In Germany the majority of female sex-workers are migrants: about 60% of them, while among male sex workers 75% are migrants and about 85% among transgender sex workers are migrants.

Migrant sex workers in Germany are divided as follows: 55% Central and Eastern Europe, 20% Asia, 15% Latin America, 5% Africa, 5% Other EU countries.

The 10 main countries of origin are: Poland, Russia, Baltic countries, Thailand, Ukraine, Czech Republic, Bulgaria, Dominican Republic, Brazil and Ghana. There were a total of 38 different nationalities among migrant sex workers.

SEX WORKERS SITUATION

Despite the fact that this law was an extremely important political step towards recognition of sex work as an activity, it did not bring many concrete benefits to sex workers until now, for both Germans and documented migrant sex workers. In practice this has meant little clarity still about work contracts, prohibition regarding areas where street prostitution can take place as well as prohibition to advertise for sexual services.

Migrant sex workers have an additional difficulty: they have to struggle with repressive migration laws, which prevent their migration and work on legal bases, with consequences such as dependency, exploitation, isolation, bad working conditions, lack of information, dangerous situations concerning their health, physical and psychological well being.

There was an increase of national and migrant sex workers offering their services via internet. The main reason for that is economic: it costs about €100,00 to advertise for 30 days on the internet, while it costs about the same for only four days in a daily newspaper.

The three main vulnerability factors for German sex workers are:

- Lack of social and political recognition regarding the rights and necessities of sex workers.
- Sex workers' lack of information about their rights, the unclear labour structures within the Prostitution Law, bad working conditions, debts, and psychological violence/pressure because of financial commitment towards the family.
- Sex workers' lack of self-esteem, political awareness and professionalism.

The three main vulnerability factors for migrant sex workers are:

- Repressive policies on migration, which leads to "illegality", lack of rights and marginalization; discrimination as sex workers and as migrants.
- Dependency on third persons, which leads to isolation, exploitation, often to physical violence, and to bad living and working conditions. Debts, psychological pressure because of financial commitment towards the family, and moral problems (often religious) by the fact of working in prostitution.
- Lack of information about their rights, access to legal, social and health care services.

The use of condoms among both Germans and migrant sex workers is high. However, lately there has been an increase in demand and offer of unsafe sex. The main reasons for sex workers to accept it is competition and the financial pressure under which many of them live and work.

There was an increase in cases of violence against national and migrant sex workers. Victims of those cases were, for instance, undocumented migrant sex workers, sex workers who "refused" some of the client's wishes, drug users or those migrants who speak little German. An increase of psychological violence against sex workers was also observed, through cases of debt bondage, residence and working permit issues, etc.

About 70% of German and 60% of migrant sex workers work for themselves. Working for others includes family, partners, pimps, managers, "intermediates"/smugglers (among migrants), club owners, "protectors", taxi drivers. Germans as well as migrants keep about 50% of their earnings when working for others.

The majority (about 90 to 95%) of those who prostitute themselves due to drug consumption are Germans. About 10% of migrant sex workers consume cocaine, crack and heroin.

MOBILITY

About 20% of German sex workers have already worked in another country. The principle countries were: Austria, Belgium, France, Greece, Italy, Netherlands, Spain and Switzerland.

About 60% of migrant sex workers have already worked in another country. The principle ones were: Austria, Denmark, Estonia, France, Italy, Latvia, Lithuania, Netherlands, Poland, Spain, South America, Sweden, Switzerland, Thailand, Turkey and UK.

About 80% of both German and migrant sex workers already worked in another German town. The principle ones are: Bayreuth, Berlin, Bochum, Bonn, Dortmund, Duisburg, Düsseldorf, Essen, Esslingen, Frankfurt/Main, Hamburg, Hameln, Hannover, Ingolstadt, Kiel, Köln, München, Nürnberg, Reutlingen, Rostock, Schwerin, Stralsund, Stuttgart, Ulm, Waiblingen, Wuppertal, Zwickau.

The three main reasons for mobility are:

Undocumented migrant sex workers must constantly look for new working places because of police raids, bad working conditions or because they are forced by pimps or traffickers.

Sex work is an activity which demands a constant re-introduction of new faces. For both German and migrant sex workers mobility brings better earning possibilities. This is greatly supported by different informal networks within the different (cultural) sex workers' communities.

Because of elements specific to the prostitution milieu such as conflicts, public events with a concentration of a higher demand, trips with clients, difficult or private situations.

SERVICE PROVISION AND POLICY

All services provided by NGOs and by Health Care Services/HCS for German sex workers are voluntary, anonymous, and free of charge. The obligatory health examination for sex workers was abolished in Germany in January 2001. They provide:

HCS - Information on prevention of HIV/STI, pregnancy, and contraception, safer sex, examination and treatment of STI, distribution of condoms and lubricants, vaccination of Hepatitis B, streetwork, indication of other medical specialists, information for those wanting to enter or to leave prostitution, psychosocial counselling. Some HCS offer exchange of needles for drug using sex workers.

NGOs - Information on the Prostitution Law, advocacy activities for the rights of sex workers, psychosocial counselling specific for sex workers, counselling for those wishing to enter or to leave prostitution, or those wanting to change the activity, indication of IT courses.

Regular and continuous outreach work is done by the majority of GOs and NGOs and was, therefore, mentioned as the most efficient way of contacting migrant sex workers because of the mobility and the often isolation in which they live and work.

Other means are: counselling hours within the institutions and organizations themselves, by word of mouth advertising within each community, through the police, brothel and club owners and/or managers, through networks dealing with sex work, migration, trafficking in women and health promotion, on local, national and international levels, by selling condoms and other needed articles for the work, by distributing flyers, to put ads in brothels and clubs, on the internet sites or in newspapers where they put their own ads, to offer counselling hours within brothels or clubs, directly by telephone, by sending information through the post, to have a place within the red light district where it is possible to drink coffee, get condoms and have a chat or short counselling.

19 of the 42 organizations (45%) answered that they employ translators or cultural mediators. Those institutions, which do not employ them, gave, as main reason for not doing so, the high financial costs involving employment of translators and cultural mediators. The importance of employing cultural mediators or translators for contacting migrant sex workers was however pointed out as something very immediate and necessary.

The 3 main barriers for migrant sex workers accessing services

- The legal status – the situation for undocumented sex workers is insecure and unstable, which leads to vulnerability and fear.
- The language - the little knowledge of German leads to dependency on third persons.
- The stigma – most migrant sex workers do not identify themselves as sex workers and are constantly afraid that someone from the family back home discovers it.

HCS and NGOs offer their services on an anonymous, voluntary, and free of charge basis. The exception is when undocumented migrants or those who have no valid health insurance for Germany need a specific treatment, which is not offered by the HCS or need hospitalisation. In those cases, they have to pay for the services or hospital by themselves. This includes HIV/AIDS patient.

LATVIA

PROSTITUTION SCENE

Nowadays there is an abolitionist wave in Latvia. It does not imply regulations regarding the selling of sexual services. However, other aspects of prostitution such as running public houses, pimping, and sex with underage persons are qualified as crime and foresee imprisonment. Therefore, anything that is connected to prostitution is criminalized, but prostitution itself is not a crime. This system is based on international conventions which prohibits exploitation of prostitution.

According to criminal police data, there are about 3.000 to 4.000 sex workers in Latvia, but taking into account short-term employments during the year, this number might be a couple of thousands higher.

In Latvia, there has been a rapid growth of the sex industry, which includes different forms of sex work, and the production of pornographic materials.

Along with a mass emigration of Latvian sex workers, sex work is changing inside the country as well. The number of sex workers on the streets has decreased to 30%, more women have moved from the streets to brothels (about 30%), clubs and bars (about 20%).

SEX WORKERS SITUATION

Sex workers' incomes vary according to their work place. High class sex workers, who searches for clients through the internet and preferably chooses foreigners and rich men, earns 2-3 thousands Lats a month (between €2.800 and €4.200). Riga's oldest sex workers earn an average of 1-1,5 thousands Lats a month (between €1.400 and €2.100). Working in bars and on the streets (if the sex worker is not an alcoholic), her income is about 500-700 Lats a month (between €700 and €1.000).

In Latvia there are no statistics about the number of cases of STI infections among sex workers, despite the fact that sex workers have to undergo regular mandatory health examinations. In case of an infection, sex workers can look for any certified dermato-venerologist, gynaecologist or their family doctor. Compulsory monthly medical check-ups are done by any certified dermato-venerologist. Governmental agencies for STD and Skin Infections have an office where sex workers are monthly checked and where they get their health cards. The Cabinet attends between 70 to 100 sex workers a year. There are usually more positive results when the sex worker comes for the first time or if she has been working for more than 6 months.

Research has shown that sex workers need special support in the following spheres:

- Health care
- Consultations, psychological and psychotherapeutic treatments
- Support in drug use cases
- Assistance in getting life skills, especially concerning financial planning and cash flow management
- For street sex workers: a settled living place or a shelter, where they can turn at any time
- Support from colleagues on how to be protected and avoid violence
- Legal consultations (criminal sphere, violence, self-defence, children rights)
- Consultations for an alternative job if someone wishes to quit sex work
- Social worker support
- A more positive attitude of society towards sex workers, and disposition to listen in to their needs.

MOBILITY

Although there has been some migration of sex workers into Latvia, the new aspect is however the mass emigration of sex workers towards Western Europe. Unlike Western Europe, Latvia, with its comparatively low life standards, is not a country of destination, but rather a country of origin and transit. For different reasons, persons with or without experience in sex work, on their own or through agents, travel to West Europe to earn money by providing sexual service. Agents are usually pimps, recruiters, and tourism agents. The most popular countries of destination are Germany, Denmark, Spain, Cyprus, Greece, Israel, Switzerland, Czech Republic and UK.

The most popular is however Germany, where prostitution is legal, followed by Spain and Italy. Switzerland is also appreciated because the income is high and brothel's owners' attitude is quite positive.

According to Latvian police, at least 100 men and women leave Latvia for Western Europe to work as sex workers every month. The times, when the vast majority of women were deceived by other job offers, are past: nowadays 90% of women make this choice consciously. For one woman's recruitment a pimp gets either about €1.000 or 5 to 10% of her income.

SERVICE PROVISION AND POLICY

Health Care Services are accessible for sex workers as for any other Latvian citizen or permanent resident, with the exception of undocumented migrants, who only in urgent cases are sent to a specialist. In case of an STI, the person can go directly to a dermatovenerologists. If syphilis, gonorrhoea, HIV or other is stated, the patient doesn't have to pay the health care fee if in a state institution. In private clinics there is always the doctor's consultation fee, and the laboratory diagnostic fee. Medical remedies have to be purchased for the full price at the pharmacy, except for AIDS, which has state-covered remedies, but not for undocumented persons.

The monthly medical check up for sex workers is a paid service. Health care principles for European Union member states' citizens are the same as for Latvian residents. Health care services for other countries citizens are not for free, except in emergency cases.

LITHUANIA

PROSTITUTION SCENE

There are no data on prostitution features and extent in Lithuania. The present situation may be estimated based on qualitative and quantitative data accumulated by the *Lithuanian AIDS Centre (LAC)* in Vilnius and the police.

According to the data there are about 1000 sex workers in Vilnius. The estimated numbers in other cities: 400 in Klaipeda (harbour), 350 in Kaunas (second largest city in Lithuania). The number of sex workers has significantly decreased after Lithuania accessed the EU in 2004. The amount of migrant sex workers has also decreased because women from Eastern countries like Ukraine, Russia and Belarus are going straight to the West without a temporary work period in Lithuania.

We have observed an increase of internal or local migration: women from rural areas or smaller towns come to the capital and/or go to larger cities in Lithuania, to replace the women who have left to the West. The number of East European sex workers might also decrease because of stricter border controls, which prevents illegal border crossing.

After approval of the new Law criminalizing both sex workers and the clients, no big changes occurred in the national prostitution scene, especially in percentage of women working on the streets. It seems the police is not very keen to pursue sex workers and clients and charge them to pay the fine. From time to time police raids are organised in the apartments, after policemen contact women by phone pretending to be a client. Recently there were a series of articles in the newspapers regarding "cooperation" between some policemen and some sex workers: the policemen get a sum of money to "close their eyes", or they get "free" sexual services. A number of policemen were displaced and are under trial.

SEX WORKERS SITUATION

The Lithuanian government has worked out a legal amendment to impose fines on both sex workers and their clients. The Law provides a fine of customers of sex services with around 400 litas (about €115). In accordance with the landmark amendment, after a repeated arrest for the above crime, an individual shall pay a fine of about 750 litas (about €215), or be placed under detention for 30 days.

According to international law, the Lithuanian government is also set to consider legal norms which would allow exempting the victims of human trafficking from administrative responsibility. At present, Lithuania has no legal norms exempting the people who were involved in prostitution or suffered from trafficking in human beings from administrative liability.

Up to 20 organisations in Lithuania provide certain services to trafficking victims. Those with longest operation background are *Missing People Families Support Centre* and *International Migration Organisation Vilnius Office*. Later several NGOs and GOs have been involved into this work, e.g. *Lithuanian Caritas*, *Women Crisis Centres*, etc. Support to women victims of human trafficking is available also in other Lithuanian cities like Kaunas, Klaipeda, Alytus, etc. However, it should be noted that services of these organisation differ a lot: one of them

are oriented towards informing the general population about the difficulties working abroad, including in prostitution, others provide information to the victims and their relatives, others help the women to integrate into society and assure psychological support. Medical and social support (and shelter) is mainly available in the *Missing People Families Support Centre* in Vilnius, *Vilnius Mother and Child Pension*, *Klaipeda Social and Psychological Support Centre*, the biggest cities of Lithuania. The *Lithuanian AIDS Centre* is able to assure professional medical consultations, testing and treatment, as well as psychological and social support.

Sociological surveys performed by the *Lithuanian AIDS Centre* and data of TAMPEP questionnaires prove higher awareness of sex workers on HIV transmission modes. Most sex workers seem to use a condom while having sex. However, the number of drug using street sex workers has increased dramatically. There is practically no data on violence against sex workers. Some street sex workers visiting *Lithuanian AIDS Centre* report sporadic cases of client's violence. However, the indoor situation remains unclear. Sex workers usually do not make any statements to the police regarding violence because of fear of "getting a record".

MOBILITY

Data of authorities show that the majority of migrant sex workers come from Belarus, Russia and Ukraine, though the flow has decreased recently. Authorities relate this to decreasing prices in the sex industry and to an increased danger of deportation. Migration to the West countries has slightly increased. The Government has approved the *Human Trafficking and Prostitution Prevention and Control Programme 2005-2008*, with costs of 5.7 million Litas (about €1.450 million). The Programme provides an estimation of human trafficking and prostitution in Lithuania, and reinforces specific police divisions which fight human traffic. The Programme foresees the development of a support system for victims of human trafficking in Lithuania.

SERVICE PROVISION AND POLICY

Lithuania has implemented the "*Programme for Prevention and Control of Human Trafficking and Prostitution*", which provides financial support for NGOs that assure social services to victims of human trafficking and professional training for alternative labour possibilities. However, in case a woman continues to work in prostitution, the support is suspended immediately and not further assured. A system for victims of trafficking and witnesses protection was created, which includes: reinforced cooperation with foreign embassies and consulates, and other international agencies and organisations, especially around the Baltic region, and the fight against the organised crime involved in human trafficking, especially on international level.

NORWAY

PROSTITUTION SCENE

It is estimated that there are about 2500 female sex workers in Norway. The figures on male and transgender sex work are uncertain.

It is estimated that around 60% is represented by indoor prostitution.

There are regional differences: street prostitution is documented in 3 cities, while indoor prostitution is known all over the country.

During the last two years the number of migrant sex workers has increased. This is most significant in the street scene in Oslo and Stavanger. These two cities have also seen a decrease of national street sex workers.

The most significant change is the rapidly increase of Nigerian sex workers, mostly in the street. In 2004 *Pro Sentret* encountered 128 Nigerian sex workers, in 2005 they were 393.

SEX WORKERS SITUATION

The sex marked is more stressed, leading to more competition and some minor tension between migrant and national sex workers. There is also a public debate on what to do with migrant prostitution, adding to the stigmatisation of migrant women.

MOBILITY

There is more mobility among migrant sex workers and more competition between them.

SERVICE PROVISION AND POLICY

Increased concern among NGOs about migrants sex workers.

In 2005 there was established a help/hot line for victims of trafficking.

UNITED KINGDOM

PROSTITUTION SCENE

Prostitution occurs in various forms in the UK - street, sex industry establishments (saunas, massage parlours, private flats, bars, hotels, nightclubs) and escort, but the proportion varies from town to town as a result of differing local policies, attitudes and law enforcement practices. There have been no significant changes in the forms of prostitution within the UK since the last mapping exercise. Nor has there been any evidence from sex work projects of a significant increase in the number of sex workers within the UK over the last two years.

In the United Kingdom there is estimated to be between 50,000 and 80,000 female sex workers, of whom it is estimated that 28% (14,000 to 22,400) work in street prostitution while the remaining 72% (36,000 to 57,600) work in indoor establishments and as escorts. Overall it is estimated that 37% (18,720 to 29,952) of female sex workers in the United Kingdom are migrants, with 52% of migrant sex workers estimated as coming from former USSR countries. The 2005/6 mapping exercise continued to demonstrate an *absence* of migrant sex workers in street prostitution in the UK, primarily because of high visibility and policing of street prostitution across the UK. While amongst indoor based sex workers it is estimated that 52% are migrants. London projects reported 76% of their female contacts being migrant indoor based sex workers, compared to 63% and 80% in the previous two mappings. The presence of migrant indoor based sex workers outside of London varies across the country with percentages ranging from 0% to 40%, compared to 0% to 20% and 0% to 8% in the previous two mappings. However, this increase reporting may be due as much to sex work projects increased awareness of migrants within their local sex industry and a new focus on outreach to the indoor sex industry as to any significant increase in the number of migrant sex workers.

SEX WORKERS SITUATION

Repressive policy and law enforcement continues to make the situation of all sex workers more uncertain. Much of the law enforcement initiatives have focussed on zero tolerance of street prostitution, illegal immigration and trafficking for the purposes of prostitution within the indoor sex industry. The street prostitution initiatives have had no impact on migrant sex workers they have increased the vulnerability of street based sex workers who continue to experience disproportionate levels of violence and abuse. The indoor sex industry initiatives have been targeted mainly at migrant sex workers and victims of trafficking, however, it is not known how many illegal or semi-legal (right to reside but not to work in the UK) migrant sex workers have been deported as a result of these initiatives. However, as a result of these initiatives the level of fear amongst all migrant sex workers has increased and they have increasingly become the victims of exploitation, crime and violence as the perpetrators assume migrants will not report such abuse and crime to the authorities.

MOBILITY

There has been an increased knowledge across the UK about sex workers migration and mobility; however, there remains a lack of in-depth knowledge about the mobility patterns and sex work history of both national and migrant sex workers in the UK.

SERVICE PROVISION AND POLICY

Policy priority in the UK is currently focusing on eradicating street prostitution, combating trafficking for the purposes of prostitution, addressing illegal immigration, supporting women to 'exit' prostitution and addressing the unlawful use of the NHS and welfare benefits.

Many sex work projects have seen cuts in funding for harm reduction services to national sex workers with little recognition of the needs of migrant sex workers over the last 2 years. Founders have shifted focus to support for women to 'exit' prostitution and enter alternative employment, this new emphasis on training and alternative employment excludes illegal and semi legal migrant sex workers as these new programmes are only open to those who have the right to reside and work within the UK. In addition the tightening up of access to free NHS treatment has made it more difficult for migrant sex workers to access essential health care.

NORTH REGION

TAMPEP 7

December 2006

Compiled by *Amnesty for Women/TAMPEP-Germany*

FINAL REPORT

Needs Assessment of ASIAN Sex Workers

This report was drawn from information provided by the TAMPEP partner organisations which compose the NORTH region.

▪ Denmark	Danish Centre for Research on Social Vulnerability
▪ Estonia	AIDS-I Tugikesku
▪ Finland	Pro-tukipiste
▪ Germany	Amnesty for Women
▪ Latvia	Genders
▪ Lithuania	Lithuanian AIDS Centre
▪ Norway	The Pro-Sentret
▪ United Kingdom	Scot-Pep

DENMARK

Living conditions: The great majority of Asian sex workers come from Thailand. Most of them have a legal status through the marriage to Danish men.

Many Thai sex workers live in massage parlours for a longer period of time. Some live by themselves in apartments and others with their husbands and children. The majority send money home regularly, to their families.

Thai women live very isolated, inside their own Thai community. Problems are solved inside the community or through the network of the different Thai groups.

Working conditions: Thai sex workers work in sex clubs or massage parlours. Some of them work in massage parlours in shifts. Many however, live inside those massage parlours and are available 24 hours a day.

NGOs doing outreach work have noticed lately more Thai transgender among sex workers.

Needs: to bridge between Thai sex workers and social and health care services, as well as between Thai sex workers and the police, in order to offer support and assistance in case of exploitation and assaults.

ESTONIA

There are no sex workers from Asia in Estonia.

FINLAND

Mobility & migration patterns: Many Thai sex workers come originally from poor areas in the northeast of Thailand. Many go to work as sex workers in Phuket and Pattaya, where they meet their future husbands.

Most of them are married to Finnish men. Others come to Finland with a three months tourist visa to visit their relatives. During their visit they work in massage parlours.

The mobility in the country is quite common. It is possible to find Thai massage parlours in every city and it is common that women, who have difficulties in one place, move to another city. Some massage parlour owners own several parlours in different cities and workers are travelling between them, when it is needed.

Living conditions: Most Thai women working in massage parlours do not know much about the Finnish society, about their rights and about the services they are entitled to.

Needs: They need information and counselling about their legal rights and translation/cultural mediation in order to understand how to make use of it. For this group cultural mediation is very important to reduce ethnic isolation. Health promotion and social support are necessary steps for empowering women to cope independently in the future.

GERMANY

About 90% of Asian sex workers in Germany come from Thailand. The rest come from the Philippines, Indonesia and Vietnam.

Family - Most Thai sex workers come to Germany through a sexual or affectionate relationship, either as already married women to a German citizen, or as "sex workers to be wives". A great number of them are married to a German man.

Financial Situation - Thai sex workers are not only responsible for the well being of their children and families left in Thailand. Often they came to Germany with money borrowed from their family, friends or acquaintances, which put them under great financial pressure.

Integration and language - The lack of knowledge of the German language, about their rights and the legal and health system make them vulnerable, insecure, dependant and isolated from the German society.

Mobility & migration patterns - Social networks are maintained and extended by Thai migrants all over Germany, mostly in the west and in the south. Asian sex workers prefer large cities as work places, such as Hamburg, Berlin, Munich and Frankfurt, since they offer greater security with regard to their anonymity. Some of them have been sex workers before in China, Taiwan, Singapore, Japan, Hong Kong, Australia, Malaysia, USA, UK and Switzerland.

Working conditions - The majority of Asian sex workers work in apartments, brothels, clubs and massage parlours. After a while they might have an establishment of their own and become *mamasans* or female managers themselves.

Condom use - The majority of Asian sex workers in Germany use condom with their clients. Sometimes however, clients badger them to have unsafe sex (mostly oral sex), or they offer more money to do so.

Use of Drugs: It is estimated that only a very small group of Asian sex workers suffers from the problem of drug dependency. It has been reported that there is an increase consumption of amphetamines (*Yabaa*, in Thai).

Age: Asian sex workers are between 25 and 60 years old.

Educational levels: Many of the Thai women who work in the sex trade tend to have at least the 6 years education, which are compulsory in Thailand.

Living conditions: Because of the low education level, many find it difficult to learn the German language, to be successful in the German education system and to find another job outside the sex industry.

Cultural community relationships and networks: Thai sex workers socialize with Thai persons at the Buddhist Temple, Thai associations, events during Thai holidays, or stores selling Thai groceries.

Levels of violence and crime against them: Women from Thailand are very often victims of violence and criminality perpetuated by husbands and clients.

LATVIA

There are no sex workers from Asia in Latvia.

LITHUANIA

There are no sex workers from Asia in Lithuania.

NORWAY

Trends: Usually sex workers from Thailand migrate directly from Thailand, or through marriage to a Norwegian man. Their residence permit depends on their marital status.

Condom use: They work indoors and use condoms with their clients.

Levels of violence and crime against them: Often they are victims of violence and exploitation but the majority is not trafficked.

Use of Drugs: There is a low consumption of drugs between them.

Living conditions: They have strong bonds to Thailand and they live isolated in Norway. Because of the frequent low level of education, they have problems getting into the Norwegian labour market.

Needs: Information on legal rights both before and after entering Norway. Better access to education and labour market, practical help regarding legal rights, social welfare, etc. Cultural mediation is a must in approaching this group.

UNITED KINGDOM

Levels of violence and crime against them: The stereotyping in the UK of Asian women, and Asian sex workers in particular, as passive has resulted in establishments where Asian women work becoming targets for criminals and violent clients.

Working conditions: Asian sex workers tend to work longer hours and more days than national sex workers, however, it is not known whether this is voluntary to earn more money to pay back debts quickly and enable them to save or is coerced by those holding the debt. Women who have cleared debt continue to work long hours so this may be a cultural difference in expectations and aspirations.

Asian sex workers work and socialise together collectively and enter into 'business arrangements' which are seen as by themselves as supportive but by outsiders as sometimes perceived to be exploitative and controlling.

SOUTH REGION

TAMPEP 7

2006

Compiled by **Comitato per i Diritti Civili delle Prostitute onlus**

FINAL REPORT

REGIONAL PROSTITUTION MAPPING

This report was drawn from information provided by the TAMPEP partner organisations which compose the SOUTH region.

▪ Bulgaria	Health and Social Development Foundation
▪ Greece	Act Up
▪ Italy	Comitato per i Diritti Civili delle Prostitute onlus
▪ Portugal	M.A.P.S.
▪ Romania	ARAS
▪ Spain	Cruz Roja Española-Asturias

BULGARIA

According to experts' estimations, approximately 43% of sex workers in Bulgaria work in the streets, 30% work in clubs and bars, 10% in massage parlours, 10% in apartments, 4% in escorting, 1% on the road and a remaining 2% work in other areas. Women account for 90% of the sex worker population while 7.5% are male sex workers while 2.5% are transgender. The estimated number of female sex workers ranges from 7.000 to 10.000. The percentage of national sex workers present on the territory is thus divided: 90% female SWs are national, 80% male SWs are national and 99% transgender, the remaining percentage in each sub-group are migrants. Transient migrant female sex workers account for 2%. Approximately 50% of migrant sex workers work in the street, 25% in apartments and 25% in clubs and bars. 85% migrant sex workers come from Eastern Europe while 15% come from the Balkan countries. 50% of the ethnic group of sex workers include the Roma people, the biggest ethnic minority, subject to a significant level of discrimination. The two main nationalities of the sex worker population in the past year are Bulgarians: 40% and Turks: 10%. Main countries where migrant sex workers come from are Russia and the Former Soviet Union Republic (Ukraine, Moldavia).

National sex workers are mostly vulnerable to the incompetence of professionals who work with SWs, the difficult economic situation and the low health culture prevalent among SWs. Migrant sex workers are also vulnerable to the difficult economic situation and incompetence of professionals as mentioned above including the unstable social and family environment they live in. As a solution to these problems training courses for professionals like the police, social workers and medical doctors could be spread nation-wide; sensitisation campaigns could be organised; low-threshold services and programs could be better developed.

About 10% national sex workers work for themselves and get to keep their earnings while those who work for pimps get to keep 50% of their earnings. A higher percentage of migrant sex workers, 10 to 20%, work on their own and have the same arrangement over their earnings as national SWs. There is an average use of condoms and safe sex practices among migrant SWs and this has been on the rise in the last few years. Violence against migrant SWs is low and stable while the use of drugs is average and is on the rise. A new law, which has had an impact on SWs in general, was recently introduced: it penalizes anyone found with a dose of any kind of drug. For a year and a half all SWs, taking drugs, had become too hidden or were imprisoned. In the last months the legislation was changed, due to pressure from the EU, and the penalties have been reduced or transformed to

probation. As per migrant SWs, the specialised law against trafficking in human beings was revised in 2005, as reported in the final report of TAMPEP VI with no specific modifications. Mobility for national sex workers who have worked in another country has been estimated at 30% in Western European countries: Norway, Germany, The Netherlands and France. It is estimated that 60% migrant sex workers have also worked in the countries mentioned above. 20% migrant sex workers have worked in different Bulgarian cities, mostly bigger towns, border towns and the Black sea's coast resorts. Three main reasons for mobility comprise the poor economic situation in the region of origin, law enforcement against SWs and trafficking networks.

10 daily outreach units meet migrant sex workers regularly. Three barriers which hinder access to services include rigid control for indoor sex workers, active police actions against them and low trust in institutions and help organisations. Identical services are provided to national and migrant SWs: VCT for HIV/AIDS and STIs, medical check ups, distribution of condoms, lubricants, sterile injecting materials (syringes and needles), specific educational and health materials. Services for migrant sex workers are voluntary, anonymous and free of charge. Not all groups of migrant sex workers have access to available services, specifically, indoor sex workers are difficult to come in contact with due to rigid controls. Any specialised medical services would be difficult to access, as the majority of the migrant SWs are outside the health insurance system and have to pay high out-of-pocket payments, including official fees and unofficial (bribes) ones. There are no known cases of migrants who are HIV positive and are unable to access medical treatment. Both national and migrant SWs can meet outreach workers in 9 regions in Bulgaria. They offer them health consultations, safer sex and safer injecting materials, referral and support, and also adapted educational and health materials. The outreach workers visit all working areas at least once a week and this is a big change for Bulgaria that so many SWs are being reached by whatever kind of free and anonymous services.

11 mobile medical units function under the auspices of the Ministry of Health, their maintenance is delegated to local NGOs and the medical staff is provided by the local STI clinic. This allows the MMUs to function as bridge over the gap between the SWs and the STI clinics and other public health and social services.

Transient SW travel through a network and arrive mostly from Ukraine, Russia and other ex-Soviet countries. In cases where they decide to stay for long, they would be better described as migrants and more often than not have a local boyfriend/pimp.

Some of the SWs, coming from the ex-Soviet Union countries, travel through Bulgaria to Albania and then Italy and other Western European Countries.

There appears to be a better economic situation in Bulgaria like in other sectors and so there are many Bulgarian SWs who go back as they can earn as much as in other East European countries. Many of them have acquired experience on how to go back and forth in Western Europe.

ITALY

In Italy 54.98% sex workers work on the streets, 30.75% work in apartments, 7.22% work in clubs and bars and 5.11% work in massage parlours. Female sex workers account for 75.78% while male sex workers are 3.78% and 20.44% are transgender. Estimates based on partial data from some Italian cities indicate the number of sex workers to be divided as such: 4601 female, 233 male and 1927 transgender. The estimated percentage of female migrant sex workers is 79.34%, 23% male and 22% transgender. 59.9% migrant sex workers work in city streets, 29.86% work in apartments, 8.61% work in clubs and bars and 1.89% in massage parlours. 34.33% migrant sex workers come from Africa, 25.6% come from Latin America, 20.39% from Eastern Europe, 11.78% from the Balkan countries, 1.89% from Central Europe, 0.89% from Baltic countries, 0.67% come from Asia and 0.78% from other European countries. Ten main countries present on the prostitution scene include Nigeria, Rumania, Moldavia, Columbia, Brazil, Bulgaria, Albania, Russia, Ukraine and former Yugoslavia. This mapping has evidenced the increase of women from Rumania and Moldavia. The number of women from new EU member countries like Poland, from Hungary and from the Baltic states is less significant. Hungarian women are mostly present in clubs whereas Rumanians and Moldavians now work in clubs and replace Colombians in some working areas.

Main vulnerabilities identified for national sex workers are violence and aggressions, health issues and access, stigma and marginalization of sex workers. Majority of national sex workers work for themselves and keep 100% of their earnings. Three main vulnerabilities for migrant sex workers include their illegal status, exploitation and criminal organisations and poor knowledge of the language and disinformation. Majority of migrant sex workers work for others generally identified as their pimps, madams and family. The percentage of earnings they get to keep varies from 10% to 80%. Safer sex practices and the use of condoms is at an average 70% level and 30% high level. The repressive policies have caused precariousness which in turn makes it difficult for sex workers to manage their work with authority. In addition, the economic crisis renders little earnings to the extent that SWs readily go with clients for less. The level of violence is on rise going from a low level of 1% to a 4% average level and a 5% high level. The level of drug use is on the decrease being at 1% high level compared to 6% in the past.

As per legislative changes having an impact on national sex workers, repression against indoor (flats) sex workers is moderate notwithstanding the abolitionist parties failed attempt to change the law on prostitution in the previous government. The severe law on the use of drugs has worsened the conditions of the few autonomous sex workers who are drug dependent. As per migrants sex workers, 2005 witnessed the full application of the Bossi-Fini immigration law which was issued 2004. It led to increased repressions and the arrest of illegal aliens who were withheld in temporary detention centres (CPT) and their consequent expulsion. Other legislative changes include longer waiting time for regularising one's status in Italy, low entry quotas for migrants in Italy, severe marriages controls between Italian citizens and foreign women leading to the denial of the permit of stay in suspect marriages (in such cases, the woman stays in a stand-by situation). Changes to the Bossi-Fini law have started since mid 2006. The new government issued a decree which permits the regularization of 350.000 immigrants who had been excluded from the 2006 entry quota. The management of illegal aliens is under change, it has proposed to change residency period necessary to obtain the Italian citizenship, to reduce the permanent permit of stay and to extend the right to family reunion to other categories. In the light of all these changes, it is hoped repressive actions will also reduce although these depend on local authorities.

In terms of mobility, the percentage of national and migrant sex workers who have worked in other countries is lacking. Countries where migrant sex workers have been include Spain, France, Germany, Holland, Switzerland, Austria, Serbia, Slovenia, Cossovo and Turkey. 59.33% migrant sex workers have worked in other Italian cities like Turin, Milan, Rome, Naples, Genoa, Florence and Venice. The main reasons for mobility include escape from police raids and repression, research for prosperous markets and new clients and transfer by trafficking networks. There have been relevant changes in the mobility scene. Several migrant sex workers who come from future EU and new EU member countries commute a lot and each time they come back to Italy they change towns. Sex workers who have friends or family ties have the possibility to exchange countries. For Latin American sex workers, for example, Spain is the first country of choice as well as the Canary Islands. Compared to the past, there are more and more women from eastern Europe who declare to have worked in transient countries like Slovenia, Macedonia, Serbia and Cossovo. Some counties are considered of great interest by sex workers who have worked there and would like to return there: Germany, Switzerland, Holland, Austria. Majority of these sex workers declare they expect regularising their status, some through marriage. Those who have established here and are illegal continue changing towns for fear of police interception. Periodic raids drive female sex workers to change working areas and streets frequently. Another reason for mobility is the search for better earnings: they move in order to appear new on the market and attract more clients. For sex workers who work in apartments turnover occurs every two weeks and involves a large network even in small towns (South Americans are well organised). In addition, given frequent police controls and consequent incursions, newspaper adverts are changed regularly in order to remain unidentified. Even seasons have an influence over mobility and change of working area. During the summer cities get emptied and sex workers look for clients in holiday centres. Even Chinese sex workers do commute as reported during an interview with a Chinese cultural mediator. They confirmed working in Turin and in Milan. Some of the Chinese sex workers declared they had been working in China or have worked in transient countries. One last reason which causes mobility, even though to a lesser extent, is the evolution of the phenomenon and the relative requirements

criminal organisations (modification of trafficking routes, ethnical division of territories) and exploitation networks have. In some cases, friendship and solidarity networks influence mobility. Sex workers are contacted through outreach mobile units, through police raids in the course of anti-trafficking interventions, free-toll national number, clients. Main barriers for access of services include illegal status and fear of being signalled to the police, poor knowledge of the territory and of services as a consequence of little information, poor autonomous capacities and free movement due to traffickers. Services provided to both national and migrant sex workers are voluntary and free. Translators-mediators are available in some public services although it is more common to find translated material destined to migrants. All NGOs that work with sex workers try to have translated material for them. They often require of these material from TAMPEP. Traditionally organised public services do not have cultural mediators who are, on the other hand, present in NGOs and in outpatients departments destined to immigrants. The importance of cultural mediation has been acknowledged but in most cases economic resources are lacking. A main barrier to services for illegal migrant SWs is that they cannot have a general practitioner and a barrier in health care is that in order to obtain any public medical service they have to pay for it beforehand. Migrant SWs who reported aggressions against them were not expelled from Italy. Information campaigns on trafficking are on the rise but a lot of confusion has been generated over other immigration issues. More information brochures in several foreign languages regarding issues that may be of interest to immigrants. As per programs supporting trafficked women, there are quite a number of these in Italy but in the past two years financing to these projects has been reduced.

GREECE

In Greece 60% sex workers work on the streets, 20% brothels, 10% in apartments and 10% in clubs and bars. 91% of them are female and 8,74% transgender. The estimated number of female sex workers is 783 and that of transgender 75. Migrants on the scene are mostly composed of female sex workers who amount to 98,7% and transgender adding up to 1,23%. (For the first time since 1999 when male SWs could register officially, three men registered as Sws in September 2006). No official data on male sex workers although it seems there are male Sws from Iraq, Iran, Sudan, Libya, Egypt, Pakistan and China. From information gathered, 40% migrant sex workers work in brothels, 30% work on the streets, 25% in clubs and bars and 5% in apartments. 42.83% migrant sex workers come from member countries of the EU, 37.91% from Eastern Europe, 23.57% from Africa, 10.8% from Central Europe, 17.42% from the Balkan countries, 2.1% from Baltic countries, 1.23% from North America, 0.82% from Latin America, 0.2% from Asia and 0,2% from Australasia.

There are 36 nationalities present in the sex work market. The 10 main nationalities are Russia, Nigeria, Ukraine, Germany, Albania, Romania, Bulgaria, Kazakhstan, Poland and Georgia. One sex worker of a different ethnic group, an Arab, has been identified. A significant change in the prostitution scene is the increased presence of African girls which constitute an absolute novelty in the sex work market. Most of them come from Ethiopia, Eritrea, Nigeria and Ghana. NGO's have tried to establish contact with the State in order to discuss new trafficking models in Greece to no avail. Bulgarians are also on the increase. A change-over takes place every two months as they go back to their country and are replaced by other Bulgarian Sws.

Vulnerabilities for national sex workers include social exclusion, use of drugs and alcohol. Majority of them work for themselves but there is no available data on the earnings they get to keep for themselves. Vulnerabilities for migrant sex workers include legal issues concerning the new ministerial decree, STDs and sexual exploitation. Majority of migrant sex workers work for others who act as their pimps and they get to keep 10-30% of their earnings. Migrant sex workers make average use of condoms and safe sex practices, violence against them is high while the level of drug use is low and has remained so in the last few years.

A recent legislation, introduced in February 2005, had immediate impact on migrant sex workers. This ministerial decree obliges all civil servants to require of any alien his/her papers before providing any service. As a consequence illegal migrant sex workers have no access to public services, especially health services, except in case of emergencies. There has been no positive response from the State to criticisms from NGO's and even the police on this provision who have advocated for a change of the decree.

Sex workers who work in brothels have the best working conditions but are obliged to STDs every 15 days. They seem to be happy about it and even use it against migrant sex workers to claim that they are safe whilst the others are risky sex workers.

No data on the percentage of national sex workers who have worked in other countries. 20% migrant sex workers have worked in Germany, France, Spain and Turkey. 60% of them have worked in other Greek cities such as Thessalonica, Heraklio and Larissa. The main reasons for mobility comprise police raids, the desire to earn more money and the exchange of women between traffickers.

Greece serves as a transient country for the African sex workers from Nigeria and Ethiopia as they move to Italy or Spain. Given the fact that they change working areas frequently, it is difficult to maintain contact with illegal migrant sex workers who work for pimps, are subject to abuse as they work in unsafe areas and do not have any right of access to public services. Migrant sex workers are contacted through street work, the police getting in touch with associations and direct access to services by sex workers themselves. Language barrier, fear caused by the new law and ignorance of existing services are the three main reasons why migrant sex workers do not have access to services. Free, confident, anonymous and voluntary services are provided to national and migrant sex workers which include information on HIV, STIs, support, services referral. Translation services are provided to migrant sex workers on legal issues and in emergency shelters. Cultural mediation is given in emergency shelters. Shelters are foreseen only for female migrant sex workers and victims of trafficking.

The following changes have had an impact on migrant sex workers in the last two years: information on their rights, on available services, on programmes supporting trafficked and in other areas of service provision or policy. No major changes have been registered as to health care, social care, housing, reporting crimes and the regulation of the prostitution market. On the whole, the two major changes that have affected the prostitution scene in the last two years are the migration law and the presidential decree on trafficking.

PORTUGAL

In Portugal, local sex workers make up 70% of the prostitution scene while 30% are migrant sex workers. The National prostitution scene is divided in 50% sex workers who work on the street, 20% on highways and roads, 10% in apartments, 10% in clubs and bars, 5% work in brothels and another 5% in massage parlours. The sex worker population is made up mostly of women who constitute 85% of the scene, 10% male and 5% transgender. It is estimated that there are 1670 female sex workers, 144 male and 124 transgender. The estimated percentage of migrant sex workers totals 80% female, 15% male and 5% transgender. The percentage of migrant sex workers who work on the streets totals 55% while 15% work on highways and roads, 10% in apartments, 10% in clubs and bars, 5% in brothels and 5% in escorting. Most migrant sex workers come from Brazil (not easy to estimate), 45% from unidentified European countries, 20% come from Africa, 15% come from Latin America, 5% from central Europe, 5% from Asia, 5% from Eastern Europe and 5% from the Baltic countries. There are 10 major countries of origin from which migrant sex workers come from: Brazil, Angola, Venezuela, Ukraine, France, Spain, Nigeria, Cameroon, Rumania and Congo. In these last two years, as a consequence of an increase in trafficking, migrant prostitution from Latin America (east and south) specifically from Brazil is on the rise.

Trafficked girls from Brazil have to pay for their journey and the majority of them is unaware of what they will end up doing. They are confined into houses from which they cannot come out freely. There is a strong and well organised network which provides their needs directly at home.

The most common route used by the majority of migrant women to come to Portugal is the airplane. They pay for their ticket in advance, have their passports and obtain a tourist visa which allows them to stay in the country legally for 3 months. Those who arrive through the trafficking networks pay their debts to these criminal networks by instalments as they organised their trip. Most of these women get stuck in prostitution houses as most of the money they earn serves to pay their debts. There are reported cases of young women from Moldavia who are brought into Portugal by trafficking networks, with the promise of employment. These women previously lived in Spain (Madrid and Barcelona) where they were in prostitution for 5 years, and afterwards sold for 1000 and 1500 euros. Once in Portugal, they are forced to work in closed houses, under the threat of ill-treatment to their

families in the origin country. This constitutes the main reason why they refuse to run away or to give complaints to the police. The criminal networks are able to move the women across the border thanks to their connections at the borders. They pay the sum of 150 and 200 euros per visa, almost always using documents of the trafficked women. The women are then transported in vans, generally under drug effect.

Main vulnerabilities identified for national sex workers include their exposition on the streets and its consequences, the lack of legal frame that protects them and the risk of sexually transmissible infections (STI). Migrant sex workers also face the same problem but are more vulnerable due to the difficulties they encounter in social integration, their illegal status linguistic barrier, racial discrimination, disinformation over existent norms and associations, and fear of the trafficking networks. On the whole there is no institutional and appropriate health care structures for either local or migrant sex workers. In cases of denunciation, they are helped by NGOs. Very little information is available for them except from associations.

Although no data on the percentage of earnings they keep is available, most national sex workers work for themselves whereas migrant sex workers work for others and keep only 15% of their earnings for themselves. Thanks to an increase of information campaigns and to the free distribution of condoms by support-giving associations, an upsurge in the use of condoms in the last two years has been registered. The level of drug use is estimated to be low as no relevant data has been collected among migrant sex workers. Crimes committed against migrant sex workers in the last two years remain constantly high. Identified aggressors turn out to be their negotiators, spouses and customers.

In terms of mobility, 10% national sex workers have worked in Spain unlike the 15% migrant sex workers who have worked in Spain, Brazil, Venezuela, Italy and Greece. 30% migrant sex workers have worked in other Portuguese cities such as Aveiro, Leiria, Porto, Lisbon, Viseu, Coimbra, Faro, Setúbal, Albufeira and Famalicão. Main reasons attributed to their mobility are search for better living conditions, maintenance of their anonymity and to avoid to be associated to prostitution.

The “Equipas de Rua” (mobile street unit) conducts regular outings which permits it to meet sex workers, nationals and migrants, and to provide services and give health information. Importance is given to the approach used by the equipe which is professional and to the meeting area which is informal. Migrant sex workers have difficulty in accessing services due to language difficulties, fear of being repatriated and fear of the criminal organisations they are tied to. Services provided to national sex workers include the distribution of condoms, information on health prevention, transmission of STI's, available treatments, legal, medical, social and psychological counselling, accompaniment to health centres, disinfect alcohol sheets, information on safe sex and health cares, provide syringes (in the case of the sex workers who consume drugs), distribution of food and clothing as well as bannings services. In addition to these services, information on the Portuguese immigration law is offered to migrant sex workers. All services are anonymous and free of charge. Translators are included in the mobile street unit when judged necessary to facilitate linguistic comprehension.

In the last two years, there has been an increased access to health care services by migrant sex workers due to the work carried out by the mobile street unit and to the fact that it provides accompaniment to health structures. The public service provides most of the health care services although it is lacking in the following: HIV/ AIDS treatment, Drug treatment and rehabilitation, Abortion, Maternity care, Dental care and Ophthalmic care. Services provided are almost always anonymous and free of charge for national and migrant sex workers.

Main barriers for migrant sex workers to accede to public health cares are: their illegal status, ignorance over places they can go to, how to apply for them, cultural and linguistic barriers, racial discrimination and the lack of documents.

On the social care level, migrant sex workers request assistance in filling out and delivering application forms necessary to obtain minimum subsistence fund. Migrant sex workers report crimes committed against them and in some cases ask for protection and leave the streets. The constant outreach work has permitted migrant sex workers to be aware of their rights, the law and the existence of other services present on the territory. Public social care services for national and migrant sex workers is provided although not sufficiently. Areas where the public service is lacking are mainly: support for victims of trafficking, language courses and other professional training courses. Only one association, MAPS, offers Portuguese language courses and gardening courses for its beneficiaries on condition that they are legally present in Portugal.

Since it ratified the UN Convention on the elimination of all forms of discrimination against women in the early nineties when there was much concern over prostitution, not much has been done to favour national sex workers. Although voluntary prostitution is not a crime, prostitution is not recognised as a profession. On October 10, 1991, a new law n. 49/91 condemned the trafficking of human beings and the exploitation of prostitution. As regards migrant sex workers, a proposal to legalize prostitution was made with no result. Presently an organisation is being created to defend the rights of sex workers and to see into the terrible working conditions they face and the lack of social assistance. Sex workers are still considered as objects, products for the clientele without any rights. Portugal does not have an adequate structure for victims of trafficking. The Portuguese authorities provides lodging only to women who denounce trafficking nets, during court hearings against criminals involved in their trafficking. Unfortunately, these hearings take up to two or three years and this poses another problem for the victims to whom no psychological support is given. Although the crime of human trafficking is foreseen in the Portuguese Criminal Code since 1947, trafficking for the purpose of prostitution is confined to prostitution and probably for this reason there are no adequate punishments for those judged responsible for trafficking.

ROMANIA

In Romania, 40% sex workers work in the streets, 15% on Highways and borders, 15% in brothels, 10% in clubs and bars, 8% in massage parlours, 7% in apartments and 5% in Escorting. 80% of sex workers are female, 15% are male and 5% are transgender. Please note that there are no data on migrant sex workers in all fields. As a significant change in the last two years, we noticed that more sex workers start using injectable heroin. Also the number of sex workers on the street grew significantly. Other ethnic groupings present in sex worker population are the Roma. The number of Roma women is increasing. They are very young, mostly minors, and like all the other sex workers some of them may also use injectable drugs. Prostitution is still a crime and is punished according to the penal code. Relevant data on this aspect of sex work is lacking as assessment on their presence started recently. They are highly vulnerable due to their ethnic origin and discrimination against them. ARAS has developed a number of activities in their favour but unfortunately remains the only service that provides assistance to sex workers. Although they do not consider themselves as SWs, male sex workers have become more visible. Three main vulnerabilities for national sex workers include trafficking, their legal status and the lack of access to medical and social services. Majority national sex workers work for others, pimps, middle men and their family.

In 2006, ARAS together with UNAIDS and the Health Minister made a Research on Commercial Sex Workers- A public health and social perspective. The research was made in 12 counties all over Romania on 395 sex workers. The data on level of condom use were: more than 36.2% of the sex workers said that they used the condom at the most recent sexual intercourse with a client or with the life partner. About the drug use, 11% said that they used injectable heroin in 2004 and 42.50% of the users said that they shared the syringe in the last month. About the trafficking, 28.60% of them declared that they have been sold or bought at least once. More than half of the sex workers from the national research declared that they have been abused by the clients and almost 33% of them said they have been beaten by the police.

No serious initiatives to change the law has been taken up in the last two years. 40% national sex workers have worked in another country: Italy, Spain, Germany, the United Kingdom, Switzerland, Greece, Cyprus and France. As per internal mobility, 63.54% SWs worked in the same location for less than 2 years whereas 2% have worked in the same location for more than 10 years. Approximately 2% of these are newcomers. Three main reasons for mobility are trafficking, poverty and discrimination and stigma against them. An increasing number of women are willing to travel abroad for sex work where they can earn more money and face less discrimination; but unfortunately they end up in traffic networks in foreign countries. Several articles published in the local newspapers regarding police intervention against the heads of trafficking networks. Several attempts have also being made to reintegrate victims of trafficking into the social circle. The service provided to national sex workers (ARAS) are voluntary, anonymous and free of charge. Services include outreach mobile units, HIV/AIDS/STIs counselling, risk assessment counselling, risk reduction counselling, IEC materials, condoms, lubricants, primary medical care, HVA+HVB vaccination, referrals, social assistance, hygienic products, psychological support, needles

exchange, distilled water, alcohol swabs, heparin gel, HIV/HVB/HVC counselling, rapid tests and free transportation.

SPAIN

It is estimated that about 43% of sex workers work in clubs and bars while 33% work in apartments. A remaining 7% work in brothels, 6% in escorting, 5% in city streets, 4% in massage parlours and 2% on highways and roads around the border. About 90% women make up the sex worker population while 6% represent the male population and 4% transgender. In figures, 300.000 women are estimated to make up the population of sex workers. An estimated 91% are migrant female sex workers. The estimated percentage of migrant male and transgender sex workers is about 9%. Majority migrant sex workers work in clubs and bars, about 64% while 20% work in apartments, 10% in city streets, 3% on highways and roads at the border and a remaining 2% in massage parlours and 1% in escorting. Sex workers come from ten different countries which are divided as such: Argentina, Brazil, Colombia, Nigeria, Romania, Ecuador, Ukraine, Dominican Republic, Morocco, Venezuela. The percentage from area of origin is thus divided: 70% from Latin America, 14% from Africa, 14% from Eastern Europe, 1% from the Baltic states and another 1% from other European countries. The East European Mafia organises the arrival of groups of twenty Romanian and Bulgarian SWs.

Latin American SWs go back and forth to Holland every six months. They come from their countries through family ties and work in clubs. The police follows them even inside the clubs.

It has been noticed that Eastern European SWs are taking over the streets and as a consequence the Latin American SWs work in clubs.

Internal mobility occurs during change of season: during the winter SWs work in big cities while during the summer they move to the coast.

Spanish girls work more in clubs and bars where they usually approach clients at the counter before taking them to their rooms within the bar or to their hotel rooms.

National sex workers are vulnerable to three main factors: the stigmatisation against sex work being unrecognised as a job, lack of health and social services, poor working conditions due to violence and frequent mobility. It appears that national sex workers work for club proprietors and madams and are able to keep 60% of their earnings for themselves while the remaining 40% goes to others. On the other hand, migrant sex workers are vulnerable due to irregular status, ignorance of the availability of services for them and the non-recognition of sex work as a job. Just as national sex workers, the majority of migrant sex workers work for madams, club proprietors, the mafia and their family and get to keep 60% of their earnings for themselves while the remaining 40% goes to others.

There has been an increase in the practice of safe sex as average migrant sex workers use condom. Violence registered or reported against them is low though police raids have increased. Drug consumption is at an average with the exception of cocaine and alcohol.

As per policy changes over sex work in the last two years, nothing has really changed on a national scale over the legal status of sex work which has still not been recognised as a job nor regularised. This contributes to the fact that stigmatisation is high and social resources destined to sex workers are limited. Migrant sex workers are the most hit as they have no legal status and police raids against them are frequent. At a local level, in Barcelona, a law which penalises sex workers who solicit clients on the streets was issued by the local authorities. This law has an impact on both national and migrant sex workers.

20% of national sex workers have worked in Italy, France, Portugal and Holland whilst 50% of migrant sex workers have worked in Holland and France. 80% of migrant sex workers have also worked in other Spanish cities such as Madrid, Barcelona, Bilbao, Alicante and Leon, the first two cities being their main choice. The three main reasons associated to their mobility are: search for better working conditions, search for new clients or rotation of sex workers and frequent raids by the police and criminal organisations like the mafia.

Migrant sex workers are reached through telephone calls, at their working areas, or by approach programs destined to them. Although local associations which provide sex workers information over their rights exist, SWs tend to ignore these services. The main reasons they do not go there are: unawareness of the existence of such centres and that the services are free, lack of comprehension of the local language and mistrust and fear of authorities and local services.

Services provided to national and migrant sex workers are identical to the services that are available for all women but they do not have access to services on issues regarding labour rights such as wages, unemployment grants which penalises migrant sex workers. Uninsured migrant sex workers have only basic health care services, such as urgencies, HIV information, care, assessment and treatment.

Some cities have special services for sex workers where they can collect condoms free of charge, receive medical and psychological support, legal counselling and information on various services present on their territory. Translators and cultural mediators are available in some associations though they lack sufficient money to offer specific training and work contracts. Public services do not have cultural mediators. No information was gathered on housing matters, the frequency with which crimes against sex workers are reported and on programs supporting trafficked women. On the whole, in the last two years there has been an improvement in health care for migrant sex workers as well in social care. On the social side, in some cities like Madrid and Bilbao a social pension, called REMI, is offered by the local government to local sex workers who want to abandon their trade: 300€ for 2 years while one way tickets are offered to migrant SWs in order to encourage them to return to their country of origin.

FINAL REGIONAL REPORT: Regional Overview

TAMPEP 7
December 2006

EAST Region
compiled by LEFÖ/TAMPEP Austria

This final regional report/overview is drawn from information provided by the TAMPEP partner organisations which compose the EAST region:

Austria	LEFÖ	
Czech Republic	Bliss without Risk	
Hungary	Sex Education Foundation	
Poland	TADA	
Slovakia	Odyseus	

MIGRATION AND MOBILITY

Origin, transit and destination With the exception of Austria (which primarily is a country of destination and sometimes transit), all countries of the east-region consider themselves as at the same time origin, transit and destination countries. This means that movement, mobility and migration are a major part of the respective local prostitution scenes. This situation intensified with the EU-accession of the countries (Czech Republic, Hungary, Poland, Slovakia) in 2004 as part of the so-called "east-enlargement" of the EU. It also brings new legal situations and challenges for migrants from non-EU countries to the now "new" EU-members. Many women enter with a tourist visa for 3 months and commute regularly to prolong their stay. As prostitution is not recognised as formal labour in any of the region's countries, their work in the sex-industry is not regulated. Controls can result in deportation. The system of regulation in Austria is an exception in this as it regulates work in prostitution (though not officially recognised as labour). The registration as sexworker requires a permit of stay or residency and is only possible for EU-citizens or similarly recognised individuals. Non-EU-citizens who work without registration will be deported. Others face administrative charges.

Countries of origin The majority of migrant women in the sex-industry in the east-region come from the Ukraine, Russia and Belarus, from Romania, Moldova and Bulgaria. Many of these women who work in Eastern European countries continue to migrate to other countries after having worked for some time and saved up enough money to finance additional travelling (e.g. to Austria, Germany, the Netherlands). In this, the number of Romanian and Bulgarian women in the Austrian sex-industry is increasing. Also, women from Slovakia, Hungary and the Czech Republic often migrate to Austria as the first country of destination. Consequently, Austria shows the highest number of migrant sexworkers (approx. 80%) while the percentage is lower in the rest of the region but steadily increasing (Czech Republic 37%, Hungary 15-20%, Poland 30%, Slovakia 5%; see also Prostitution Mappings). As a new group, there is a noticeable increase in women from African countries in the sex-industry in Austria and also in the Czech Republic. Also, the presence of (young) Roma-women in prostitution is noted almost throughout the region (in Hungary, Slovakia, Austria).

Work places Some of the migrant sexworkers worked in the sex-industry in their country of origin before migrating, others didn't. There is a diverse mix of situations throughout the east-region. Migrant women are present in every area of the sex-industry: they work in street prostitution, in clubs, bars and

apartments and especially in Poland, the Czech Republic and Slovakia also in border regions. There is also constant movement between different work places: In Hungary, Women move from the streets into clubs and apartments although there they have fewer possibilities to work independently. Contrarily to this in Austria, work in bars or clubs is a safer environment for women than on the streets. In certain areas, predominantly migrant women from the Ukraine, Russia and Belarus work in clubs or salons (Slovakia).

Migration and mobility Migration from non-EU countries to the “new” EU-countries and to Austria (and other “old” countries) intensified. At the same time, there is also internal mobility in the countries of the region: from poorer areas to richer ones (Slovakia); from border regions/the periphery to the centre (Poland, Austria) and vice versa. Mobility in general increased following the EU-enlargement as new possibilities of travelling legally to other European countries became accessible. One of the focus areas still are the border regions and the mobility that takes place there. There are different kinds of work areas at the borders: brothels in the Eastern European countries that are visited by Western European clients; women who live in the (Eastern European) border regions and go to work in “the West”; and women who work on the highways and streets around the border. This situation is present in Poland/Germany, Czech Republic/Austria, Slovakia/Austria and probably also around Hungary. With some areas (Polish border) it is not only migrant sexworkers who are present in the sex-industry but also national sexworkers. This border-region prostitution is a major factor and facilitates – in diverse forms – a big part of mobility/migration. It is important to emphasise that the increased and improved mobility between EU-countries did not bring an improvement in the working conditions within the whole east-region. The EU-accession eliminated one factor: (fear of) deportation (for EU-citizens). But at the same time, there is no access to the formal labour market (in Austria), prostitution is not recognised as labour and non-EU citizens face even more dependencies and difficulties. Former countries of origin become transit and/or destination countries. The region remains divided: “old partners”, “new partners”, “would-be partners” and no partners at all.

NEEDS ASSESSMENT

EU-Enlargement In response to the new migratory movements in the sex-industry following the recent EU-enlargement, new and/or additional interventions are needed to reach the (new) target groups. As former countries of origin transform into transit and destination countries, intensive research has to be carried out to properly assess the changed situation (e.g. through mappings), followed by concrete work to improve the working and living conditions of (migrant) sexworkers. This especially applies to those countries within the region that so far were not confronted with the presence of migrant sexworkers. Changes refer to the legal status and possibilities of the sexworkers, their work places, language and cultural background, discrimination as migrants, additional stigmatisation as migrant sexworkers (also from within the original community), discrimination and hierarchical structures within the group of sexworkers, increased dependency because of a weak legal status, less self-confidence/empowerment.

Border regions In addition to the different areas of sexwork in the border region (see above), sexworkers there often find themselves in a difficult situation: They work and live in their country of origin but are at the same time practically isolated. They work with clients from “the West”, need language abilities to negotiate with them and often even the bar owners are from e.g. Austria or Germany and speak another language. With the rapid enlargement of the sex-industry in border regions in the east-region and the crucial role they play in terms of migration/mobility, it is important to develop a specific kind of cross-border cooperation work to reach the sexworkers who work those regions. This would mean to intensify work that has already been developed and implemented by projects on highways in other regions – e.g. Germany, Poland and Italy.

Services There is a general lack of services for sexworkers in almost all countries of the region. In this, there is a special need for services directed to migrant sexworkers. These services should be able

to provide useful (legal) information, bridge language barriers and increase the self-confidence of sexworkers through their empowerment and support.

Legal situation/Rights In general, there is a lack of information on the legal situation of/for (migrant) sexworkers, in the country of destination. This includes not only prostitution legislation but also immigration laws, information on working conditions/regulations (e.g. reglementation/registration), asylum or marriage. As the target group is getting more complex, the amount of information that is needed in order to make relevant choices and decisions also increases. This is a phenomenon throughout the region with the increase of east-east-migration. Also, there is no adequate integrated legislation (within the region). Drafts of laws and changes do not improve the situation but spread insecurity over increasing restrictions. Strong lobbying for the legal rights of migrant sexworkers and for adequate legislation is much needed and hardly exists in most of the east-regions countries. In some of the countries (Czech Republic, Hungary), the UN convention of 1949 for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others seems to pose a considerable obstacle in implementing rights based legislation and in the legal recognition of sexwork.

SERVICES

Non-availability In general, there is a lack of services targeted at sexworkers, and especially at migrant sexworkers throughout the east-region. With the general public health services, there are difficulties in accessing them for (migrant) sexworkers: lack of insurance, legal status, language barriers, stigmatisation as sexworker etc. The situation is similar with public social services – where in some cases (e.g. Slovakia) they hardly exist at all.

Status/Insurance One of the main obstacles for migrant sexworkers in accessing any kind of public health services is the necessity of insurance. This is noted by all surveys throughout the region. Furthermore, the possibility of obtaining health insurance is related to one's legal status. For migrant sexworkers with an undocumented status or non-formal status, insurances offered by private companies are often not affordable. Also, a number of health checks is not covered by the general health insurance and would have to be paid privately in addition to those costs covered by insurance. In both Hungary and Austria, there is an obligatory health check (HIV and STIs) for (registered) sexworkers. Because of the restrictive system, only a small percentage of sexworkers is actually registered. The possibility for registration also depends on one's legal status.

Mediation The use of cultural mediation (or interpreters) seems to be a fairly new concept to public health and social care services throughout the east-region. Consequently, language barriers and other (cultural) difficulties inhibit the development of a mutual understanding of migrant sexworkers' needs. This also restricts the rights of migrant sexworkers as often it is not possible for them to self-determine their condition and treatment and they are not treated respectfully as "clients" but face racist, discriminating and non-accessible structures as migrants and as sexworkers.

Networks The lack of referral networks between public health/social services seems to be in contrast to numerous networks (on national and international level) between NGOs. In parts, this is due to the general lack of services either targeted at or accessible to (migrant) sexworkers. On the other hand, there is also a lack of reflection on the needs of this target group and on ways to offer and improve services (including to non-insured people).

PROSTITUTION MAPPING

See also separate report on Prostitution Mapping.

Summary:

Country	Major Group	Origin	Major Work Place
Austria	80% migrants	70% CEE, 15% Latin America, 15% Africa	75% indoor migrants: 75% indoor
Czech Republic	65% Czechs	70% Eastern Europe, 20% Central Europe, 5% Balkan + Baltic countries, 5% Asia, Africa, Latin America. 28 different nationalities.	70% indoor migrants: 82% indoor
Hungary	80% Hungarians	50% Balkan countries, 35% Eastern Europe, 10% Central Europe, 5% Asia + Africa. High number of Roma among Hungarians	65% indoor migrants: 80% indoor
Poland	70% Polish	Migrants: mainly from Ukraine, Russia, Belarus, but also Bulgaria, Moldova, Romania	89% indoor migrants: 80% indoor
Slovakia	95% Slovaks	Migrants: Ukraine and Russia. number of Roma among Slovaks	High 70% outdoor: 20% street, 50% border area

- The majority of migrant sex workers in the EAST region are from CEE and the Balkan countries. Austria is an exception with a large number of African and Latin American migrant sex workers.
- Migrant sex workers are still a minority in the "new" EU-countries. In Austria – the only "old" partner – migrant sex workers continue to be the majority.
- The EU-enlargement intensified especially the impact of migration/mobility from the "new" countries in the region to Austria, the only "old" EU-member. Due to the non-formalised character of prostitution in Austria (not part of the formal labour market), citizens of "new" EU-countries now have easier access to work in prostitution as they no longer require any kind of visa or work permit as prostitutes.
- The "new" EU-countries are transforming to countries not only of origin and transit but also destination – with an increasing need for cultural mediators to reach out to different new communities of migrant sex workers.
- Regarding the work places, in all five countries prostitution is performed mainly indoors.
- The legal frame in all countries of the region is ambiguous. Activities around prostitution are regulated (prohibition areas etc.), sex work is tolerated and controlled (obligatory health exam in Hungary and Austria, registration in Austria etc.). At the same time, prostitution is not recognised as work and sex workers face harassment and legal prosecution due to a diverse number of repressive regulations.

NATIONAL NETWORK AND EVENT

The special focus on developing and consolidating the national networks, for many partners worked as a tool to deepen existing co-operations – even in countries with a lack of sex workers organisations or service providers, which is the case in most of the countries in the East region.

At the same time, the national events often served to motivate co-operations between network members and to intensify the exchange and integrate the other partners into discussions on sex work. The activities that were conducted included: campaign on International Whore Day (Austria); round table discussions on International AIDS awareness day (Austria); protest letter campaigns (Austria); educational seminar on sex work (Austria); HIV, STI and safer sex awareness events with young people (Poland); workshops for outreach workers, police and other institutions (Czech Republic); educational workshops for police representatives (Slovakia); systematic exchange and co-operation with the network members (Hungary) and preparations for up-coming events and co-operations.

The main aims of the events were:

- to reach sex workers and to involve them within the projects as multipliers and active members
- to provide space for and access to discussions on the issue of sexwork and sex workers' rights

- to bring together individuals and organisations working with different target groups, to sensitise them for the situation of sex workers and to find allies in the fight for their rights
- to establish a network of individuals and organisations active in the field of rights protection
- to discuss different aspects of sexwork, covering a broad range of usually neglected issues
- to involve experts as well as sex workers and rights activists to find common ground in the work to improve working and living conditions for sex workers
- to strengthen a national and regional platform
- to increase knowledge on specific (health) issues within a different groups of society (e.g. youth)
- to inform about the services provided by the national TAMPEP partner
- to inform about transnational developments and events relevant to sex workers (e.g. Declarations)

Partner organisations of the national networks include social and health service providers, women's and migrants' organisations, human rights institutions, harm reduction organisations, HIV/AIDS prevention organisations, outreach/streetwork organisations and – where they exist – sex workers' organisations.

BILATERAL EXCHANGE VISIT

The East-Region Partners carried out bilateral exchanges according to their specific needs and country situations. The main objectives of the exchanges were:

- to assess the situation of sex workers in the host country
- to assess the impact of the respective legal framework on the working and living conditions of sex workers
- to compare the situation of sex workers in the host country and the partner's country
- to understand the background, the working and living conditions of (national) sex workers in a specific country
- to visit and exchange with different (health) service providers
- to exchange on methodologies and work approaches between the partner organisations (e.g. mobile ambulance, day centres, drop-ins, underground passage clubs, cultural mediation etc.)
- to carry out common activities (outreach, streetwork)
- to monitor the situation in specific areas (e.g. border region)
- to intensify bilateral co-operation
- to develop further co-operation projects

The following visits were carried out: TAMPEP Austria visited TAMPEP Slovakia; TAMPEP Czech Republic visited TAMPEP Italy; TAMPEP Slovakia visited TAMPEP Germany. TAMPEP Hungary focused on visits to national partners and exchange with members of the national network.

CD-ROM AND MATERIALS

The regional partners distributed the TAMPEP 7 CD-Rom within their national networks of GOs and NGOs, various relevant national institutions that work in the area of health, with sex workers directly and interested individuals who serve as multipliers.

The short-term evaluation of the use of the materials was overall very positive and underlined the need for multi-lingual information materials for sex workers. Specific issues that were touched in the evaluations were:

- **Content:** The broad range of materials available on the CD-Rom was perceived as very valuable. Additional needs for materials were identified according to the needs of sex workers, including: legal

information (social security/insurance, tax regulations, legal status), list of vocabularies with important or useful phrases relating to sex work in different languages. There were also comments on changes/additions to leaflets: The folder on drug use should mention various body regions where intravenous drug use is extremely dangerous (neck, groin) and should stress the importance of using one's own equipment (including spoons). The folder on STIs should include information on the HPV-virus which causes health problems and can lead to cancer (transmission is not necessarily through sexual conduct).

- **Languages:** The number of languages in which the TAMPEP folders are available was stressed as extremely useful. The main languages used varied from country to country depending on the respective sex worker population. There were also suggestions to include further languages due to arising needs (Chinese) and to adapt the materials to address various Roma communities which might be difficult due to different dialects and lack of a singular language.

- **Form:** The format of the CD-Rom and of the leaflets was much appreciated but it was added that it might be useful to include more pictures and illustrations and to increase the font size of the text. It was also mentioned repeatedly that the CD-Rom itself should have a multi-lingual menu in order to be more accessible for organisations and individuals in different countries. As in some countries the CD-Rom was also distributed directly to sex workers, it was suggested to include more elements in the CD-Rom, like short movies e.g. on how to use a condom.

- **Technical:** It was suggested that the CD-Rom should run not only using Firefox but also other programs as this might cause technical difficulties for those who use other tools.

SUMMARY

Main characteristics of the EAST-region:

- There have been significant consequences of the EU-enlargement within the EAST-region. The majority of the countries now are **countries of origin, transit and destination**.
- As "new" countries of destination, there is an **increased east-east-migration** that takes place. This new reality is not met with an adequate **infrastructure**. There is a lack of support offers for in the health/social area for the new target groups.
- The increased mobility in the region is not only a result of increased needs. Mobility in general increased following the EU-enlargement as **new possibilities** of travelling legally to other European countries became accessible.
- The EU-enlargement intensified especially the **impact of migration/mobility from the "new" EU-countries in the region to Austria**, the only "old" EU-member in the region. Due to the non-formalised character of prostitution in Austria (not part of the formal labour market), citizens of "new" EU-countries now have easier access to work in prostitution as they no longer require any kind of visa or work permit as prostitutes.
- In some areas of the region, there is an increase in prostitution in **border regions**. In these areas, there are no (support-) services available and (migrant) sexworkers are in a very vulnerable situation.
- The majority of migrant sexworkers in the EAST region are from **CEE and the Balkan countries**. Austria is an exception with a large number of African and Latin American migrant sexworkers.

- There is a notable increase in **Roma-women** who work in the sex-industry throughout the region. Also, there is an increasing number of African sexworkers.
- **Migrant sexworkers** are still a minority in the "new" EU-countries. In Austria – the only "old" partner – migrant sexworkers continue to be the majority.
- Regarding the work places, in all five countries prostitution is performed mainly **indoors**.
- The **legal frame** in all countries of the region is ambiguous. Activities around prostitution are regulated (prohibition areas etc.), sexwork is tolerated and controlled (obligatory health exam in Hungary and Austria, registration in Austria etc.). At the same time, prostitution is not recognised as work and sexworkers face harassment and legal prosecution due to a diverse number of repressive regulations.

United Kingdom National Final Report for TAMPEP 7

Person completing report Ruth Morgan Thomas, SCOT-PEP

1	ORGANISATIONAL OVERVIEW including aims, staff & volunteer team, summary of services provided and number of sex workers in contact with organisation
	<p>SCOT-PEP is a peer-led, community development and participation organisation, promoting health and dignity in prostitution. We are committed to ensuring that sex workers are afforded equal measure of dignity, respect and acceptance that others in society enjoy – and expect.</p> <p>SCOT-PEP has the following aims:</p> <ul style="list-style-type: none"> ➤ to empower sex workers, through the creation of supportive environments, thereby enabling them to take full responsibility for their personal development, well-being, sexual health and to maximise their quality of life. ➤ to enable sex workers, their sexual partners and others involved in the sex industry to minimise their risk of sexually transmitted infections, including HIV and other blood borne viruses, through the provision of information and practical support around harm reduction. ➤ to give sex workers a voice in public debates on the sex industry. ➤ to work towards the harmonisation of legislation, law enforcement, human rights and public health interests <p>SCOT-PEP has a staff team of 5 - Project Manager, two part-time Project Workers, part-time Volunteer Coordinator and part-time Administrator, and a volunteer team of 15 from a diverse range of backgrounds, including sex workers.</p> <p>DAYTIME SERVICES</p> <p><i>Office based support</i> (for both indoor and street based sex workers) offers a safe friendly, confidential and relaxed atmosphere where service users can get practical and emotional support by appointment from volunteers and staff. The office is normally open two days a week.</p> <p><i>Telephone support</i> (for both indoor and street based sex workers) offers anonymous, safe, friendly and confidential information and advice and can be used to request safe sex supplies deliveries to sex industry establishments or report an Ugly Mug. An answerphone operates when staff are not available.</p> <p><i>Community based support</i> (for both indoor and street based sex workers) offers confidential support, where service users can ask staff or volunteers to accompany them as advocates when accessing outside agencies.</p> <p><i>Establishment outreach</i> (for indoor based sex workers) offers delivery of safe sex supplies and Ugly Mugs Lists and the provision of information and advice in sex industry establishments when requested. There are normally two establishment outreach sessions a week.</p> <p>NIGHTTIME SERVICES</p> <p><i>Mobile Unit</i> (for sex workers ONLY) offers a safe, friendly, confidential and relaxed atmosphere where service users can get practical support and information from volunteers and staff. There are normally two nighttime sessions a week.</p> <p><i>Street Outreach</i> offers delivery of safe sex supplies and Ugly Mugs reports and the provision of information and advice on the beat. There are normally two street outreach sessions a week.</p> <p><i>Needle Exchange</i> operates from the mobile unit. It offers the opportunity for those involved in prostitution and using drugs to access sterile injecting equipment, find out more about drugs and the risks attached to their use and referral onto specialist drug services.</p> <p>INTERNET SERVICES</p> <p><i>Website</i> provides a wide range of information and links to other useful sites.</p> <p><i>Internet Outreach</i> provides a broadcast information service to those registered with us and responds to a</p>

	<p>wide range of request for information and support.</p> <p>UGLY MUGS SCHEME <i>Ugly Mug List</i> offers an early warning system for sex workers by collecting and distributing allegations about potentially dangerous clients, including descriptions of them, their vehicles and location of incident. <i>Police Remote Reporting</i> system offers new possibilities of reporting crimes to the police. SCOT-PEP collates the information of where and when an incident took place and relates it to the police. Remote reporting allows 3 ways to report a crime: as named reporting, named intelligence or anonymously.</p> <p>PARTNERSHIP WORKING <i>Lothian & Borders Police</i> - A police liaison officer is based in Leith police station to support street sex workers - tackling violence, exploitation and abuse. She is out on patrol in uniform or plain clothes, gathering information about the street prostitution scene. <i>NEON</i> - We work in partnership with the NHS Harm Reduction Team to provide a specialist needle exchange within our mobile unit one night a week; it involves needle exchange, information about drug use, drug counselling and referral onto specialist drug treatment services. <i>BBV Nurse</i> - We work in partnership with the NHS Harm Reduction Team to provide a specialist blood borne virus service within our mobile unit and during establishment outreach; it involves vaccinations against Hepatitis B, as well as tests for Hepatitis B, Hepatitis C, and HIV.</p> <p>VOLUNTEER DEVELOPMENT PROJECT Our Volunteer Coordinator facilitates recruitment; deployment and coordination; training, including induction; and support and supervision to those wishing to share their time and energy by volunteering within SCOT-PEP. This project is part of the core work of SCOT-PEP in recognition of the essential and valuable role that volunteers play in enabling SCOT-PEP to provide support and services to sex workers and meet its obligations to volunteers.</p> <p>SCOT-PEP recorded 3,181 contacts last year between 1 April 2005 and 31 March 2006.</p> <p>SCOT-PEP worked with 483 service users last year, 216 were first time service users: 396 sex workers – 389 females, 1 male, 2 transgender and 4 unknown gender (through Internet support); 5 former sex workers; 64 others working in the sex industry; 8 clients of sex workers and 9 partners or family members.</p> <p>SCOT-PEP maintained contact with 258 indoor establishment based sex workers in 33 establishments; 45 indoor escort sex workers; 87 street based sex workers and 6 unknown sector (through Internet support).</p>
2	<p>NATIONAL LEGAL FRAMEWORK including summary of prostitution, migration and trafficking legislation</p>
	<p>PROSTITUTION It is not illegal to buy or sell sex within the UK. Prostitution and the sex industry is covered by national legislation, which criminalises various aspects of the sex industry. Scotland has an independent legal system but the laws relating to prostitution are similar across the UK.</p> <p>It is a civil offence for men and women in to 'solicit' or loiter with intent to 'solicit' in a public place for the purposes of prostitution. However, such offences are penalised with a fine resulting in sex workers having to engage in prostitution even more in order to pay the fines or face imprisonment for non-payment of fines.</p> <p>Across the UK Anti-Social Behaviour Orders are now being used against street based sex workers. These orders are civil court actions that exclude sex workers from certain areas or engaging in street prostitution across a defined area. Breaching such an order is a criminal offence and a significant number of street</p>

	<p>based sex workers have been sentenced to terms in prison for breaching their ASBOs.</p> <p>It is a criminal offence across the UK to run a brothel, live off 'immoral' earnings, seek to recruit males or females to work as prostitutes and purchase sexual services from a minor (under 18). It is not possible for sex workers to work together legally; criminalisation has driven the indoor sex industry underground, and made sex workers vulnerable to greater levels of exploitation and abuse by manager and clients.</p> <p>England unlike Scotland introduced 'kerbcrawling' legislation, making it an offence for men to solicit to purchase sexual services from a vehicle from street based sex workers, however such legislation has had little impact on the levels of street prostitution or men seeking to purchase sexual services from street based sex workers. Sex work projects report higher levels of violence against street based sex workers since the introduction of the legislation.</p> <p>MIGRATION & TRAFFICKING</p> <p>UK migration legislation is complex. However, there have been no significant changes since the introduction of trafficking for the purposes of prostitution legislation was introduced. However, the Home Office which is responsible for all UK migration legislation and policy is tightening up on entry to the UK following enormous media attention about illegal migrants entering and staying in the UK. Nationals from the new EU member states are allowed to work in the UK, however, there is a government Workers Registration Scheme for citizens from the 8 East and Central Europe countries and the UK government is proposing further restrictions on Romanian and Bulgarian citizens.</p> <p>Across the UK law enforcement actions, primarily targetting illegal immigration and trafficking, against the indoor sex industry have continued – impacting on both national and migrant sex workers. In February 2006 Operation Pentameter was launched which was a three month national campaign targetting trafficking – which involved a publicity campaign aimed at raising awareness of trafficking amongst clients and the public, law enforcement officers handing out leaflets to migrant women at airports and law enforcement raids on sex industry establishments. A total of 188 women and girls were 'rescued' during 515 raids on establishments, 72 women and 12 girls aged between 14 and 17 were confirmed to be victims of trafficking during the operation and an undisclosed number of migrant sex workers are believed to have been deported. Following Operation Pentameter a United Kingdom Human Trafficking Centre has been established which will continue to coordinate anti-trafficking initiatives across the country. However, the Home Office Minister responsible for prostitution and trafficking issued a statement that the UK government would continue to refuse to grant asylum status to genuine victims of trafficking on the grounds that it would result in a flood of women claiming to be trafficked for the purposes of prostitution if asylum status is granted. Despite government claims to focus on protecting the rights of victims of trafficking the focus remains on their usefulness as potential witness in the criminal justice system and then they are returned to their home countries regardless of the risks they face on their arrival.</p>
3	<p>OVERVIEW OF ANY POLITICAL CHANGES</p> <p>including changes in legislation, welfare/health systems and societal attitudes</p>
	<p>Both the Home Office (Paying the Price) and the Scottish Executive (Being Outside) have undertaken reviews of prostitution policy which were completed in 2005 – the Scottish Executive review focussed only on street prostitution and it is currently reviewing the indoor sex industry. The Northern Ireland Office is currently initiating a review of prostitution policy.</p> <p>In England & Wales there are no proposed changes to the legislation, however, there is a proposal to change the definition of a brothel to allow two women to work together (for personal safety reasons) with a maid/receptionist. In the Home Office response they have defined prostitution as violence against women and announced a priority focus of targetting clients of street based sex workers, 'exiting' women from prostitution and clamping down on 'brothels' in an attempt to reduce and eventually eradicate prostitution, but paid little attention to the situation and needs of migrant sex workers.</p> <p>In Scotland the Scottish Executive has defined street prostitution as violence against women and are proposing to change the legislation for street prostitution - repealing the loitering and soliciting for the purposes of prostitution offences and introducing new legislation that can be used against both the sellers and buyers of sexual services related to causing nuisance, offence or alarm when engaging in street</p>

	<p>prostitution, which for the first time in Scotland will criminalise clients – this legislation is scheduled to be introduced late 2006 early 2007. Alongside the proposed changes to legislation the Scottish Executive is issuing Guidance to local authorities on developing a multi-agency strategy to respond to street prostitution, which focus on reducing demand from clients, preventing involvement in street prostitution, harm reduction, supporting sex workers to leave street prostitution and protecting communities.</p> <p><u>Access to Health & Welfare Services</u></p> <p>The pressure continues within the NHS, to restrict health care to ‘foreigners’ who do not have entitlement to free health care within the UK. Medical facilities employ officers to check if patients have free NHS treatment entitlement, however, all migrants are entitled to use sexual health services. Access to welfare services for non-EU citizens is limited to victims of trafficking.</p> <p><u>Societal Attitudes</u></p> <p>Within the UK the policy framework agreed by both the Home Office and Scottish Executive of seeking to reduce and eradicate prostitution as a form of violence against women prevails and influences funding of sex work projects. However, within politicians, the media and general public opinion is divided but there is open debate and some support for the rights of sex workers to work and unionise and significant support for alternative prostitution legislation or decriminalisation.</p>
4	PROSTITUTION MAPPING
	<i>Prostitution scene, including any changes in the last 2 years</i>
	<p>Prostitution occurs in various forms in the UK - street, sex industry establishments (saunas, massage parlours, private flats, bars, hotels, nightclubs) and escort, but the proportion varies from town to town as a result of differing local policies, attitudes and law enforcement practices. There have been no significant changes in the forms of prostitution within the UK since the last mapping exercise. Nor has there been any evidence from sex work projects of a significant increase in the number of sex workers within the UK over the last two years.</p> <p>In the United Kingdom there is estimated in any year to be between 50,000 and 80,000 female sex workers, of whom it is estimated that 28% (14,000 to 22,400) work in street prostitution while the remaining 72% (36,000 to 57,600) work in indoor establishments and as escorts. Overall it is estimated that 37% (18,720 to 29,952) of female sex workers in the United Kingdom are migrants, with 52% of migrant sex workers estimated as coming from former Soviet Bloc countries. The 2005/6 mapping exercise continued to demonstrate an <i>absence</i> of migrant sex workers in street prostitution in the UK, primarily because of high visibility and policing of street prostitution across the UK. While amongst indoor based sex workers it is estimated that 52% are migrants. London projects reported 76% of their female contacts being migrant indoor based sex workers, compared to 63% and 80% in the previous two mappings. The presence of migrant indoor based sex workers outside of London varies across the country with percentages ranging from 0% to 40%, compared to 0% to 20% and 0% to 8% in the previous two mappings. However, this increase in reporting may be due as much to sex work projects outside of London increased awareness of migrants within their local sex industry and a new focus on outreach to the indoor sex industry as to any significant increase in the number of migrant sex workers.</p>
	Sex workers situation , including any significant differences between national and migrant sex workers and changes in the last 2 years
	<p>Repressive policy and law enforcement continues to make the situation of all sex workers more uncertain. Most of the law enforcement initiatives have focussed on zero tolerance of street prostitution, illegal immigration and trafficking for the purposes of prostitution within the indoor sex industry. The street prostitution initiatives have no impact on migrant sex workers but they have increased the vulnerability of street based sex workers continue to experience disproportionate levels of violence and abuse. The indoor sex industry initiatives have targeted mainly at migrant sex workers and victims of trafficking, however, it is not known how many illegal semi-legal (right to reside but not to work in the UK) migrant sex workers have been deported as a result of these initiatives. However, as a result of these initiatives the level of fear amongst all migrant sex workers has increased and they have increasingly become the victims of exploitation, crime and violence as the perpetrators as</p>

	<p>migrants will not report such abuse and crime to the authorities.</p> <p>Three main vulnerabilities of migrant sex workers identified by sex work projects across the UK</p> <ul style="list-style-type: none"> ➤ Lack of ability to communicate in local language which results in isolation and lack of knowledge about legislation, rights, cultural norms and health and social care services ➤ Lack of access to a comprehensive range of health and social care services for those with no recourse to public funds. ➤ Migrant status which for many brings with it a fear of 'authorities' resulting in high levels of exploitation and violence, including migrant sex workers becoming the target for robberies by gangs; violence from clients and exploitative working conditions by managers as they assume migrant sex workers will not report such offences.
	Mobility , including any changes in the last 2 years
	<p>There has been an increased knowledge across the UK about sex workers migration and mobility; however, there remains a lack of in-depth knowledge about the mobility patterns and sex work history of both national and migrant sex workers in the UK.</p>
	Service provision and policy , including any changes in the last 2 years
	<p>Policy priority in the UK is currently focusing on eradicating street prostitution, combatting trafficking for the purposes of prostitution, addressing illegal immigration, supporting women to 'exit' prostitution and addressing the unlawful use of the NHS and welfare benefits.</p> <p>Many sex work projects have seen cuts in funding for harm reduction services to national sex workers with little recognition of the needs of migrant sex workers over the last 2 years. Funders have shifted focus to support for women to 'exit' prostitution and enter alternative employment, this new emphasis on training and alternative employment excludes illegal and semi legal migrant sex workers as these new programmes are only open to those who have the right to reside and work within the UK. In addition the tightening up of access to free NHS treatment has made it more difficult for migrant sex workers to access essential health care.</p> <p>Three main barriers for migrant sex workers accessing services identified by sex work projects</p> <ul style="list-style-type: none"> ➤ Language and ability to communicate remains the major barrier ➤ Long working hours of sex workers and restricted times of services ➤ Trust and knowledge of health and social care services structure and location
	see Appendix 1: Prostitution Mapping Questionnaire participants
5	TAMPEP 7 CDROM RESOURCE
	Activities undertaken to promote and distribute the TAMPEP CDrom
	<p>The TAMPEP 6 CDrom resource was distributed at the Annual General Meeting of the UK Network of Sex Work Projects in February 2005 and was included in the conference pack for all participants at the <i>'Working with Diversity in Sex Work'</i> Conference co-sponsored by the UK Network of Sex Work Projects and Mainliners (a London agency working with sex workers in London).</p> <p>The TAMPEP 7 CDrom resource was distributed at the Annual General Meeting of the UK Network of Sex Work Projects and was promoted and distributed at the UKNSWP conference <i>'Working within and Challenging: Critical Reflections on the National Strategies'</i> in October 2006. In addition the TAMPEP UK Coordinator is attending the London Sex Work Project Forum in December 2006 to distribute and discuss the new TAMPEP CDrom resource. A copy of the TAMPEP CDrom will be provided to all members of the UKNSWP and promoted and made available to all sexual health service providers through the UKNSWP.</p>

	<p>Initial feedback from 6 sex work projects indicates that the TAMPEP leaflets will be distributed to migrant sex workers through both outreach services to establishments and through drop-in centres. In addition 2 sex work projects will distribute the leaflets through Genito-Urinary Medicine clinics.</p> <p>Thai, Russian and Lithuanian were identified as the most likely to be used, followed by Spanish, then Polish and Italian and then Portuguese, Latvian, Hungarian, English and Albanian.</p> <p>Projects requested resources be developed in Chinese and Korean as increasing numbers of migrants from these countries are being seen.</p>
	See Appendix 2: CDrom promotion and distribution
6	NATIONAL NETWORKING & EVENTS
	National networking , including number of network members, types of organisations in the network and summary of activities
	<p>There is a well established network of sex work projects in the United Kingdom. The UK Network of Sex Projects currently has 99 members; consisting of dedicated sex work projects, generic agencies working with workers, activists and academics. Both non-governmental and governmental organisations are members UKNSWP.</p> <p>With funding from the Big Lottery Fund which came on line August 2005 the UKNSWP has maintained an information service amongst its members; maintained and further developed regional and home nation forums; maintained the Safety, Policing and Violence Working Group; organised 2 national conferences; developed a Directory of Sex Work Projects and Services for sex workers; developed an Ugly Mug Scheme Good Practice Guidance for sex work projects. Over the next two years the UKNSWP will develop an interactive website in 4 further sets of Good Practice Guidance, which will include Good Practice Guidance for working with migrant workers and Good Practice Guidance for outreach work in 2007; 2 further national resources for sex workers a Resource Manual for Sex Work Projects.</p>
	National event
	<p>The UKNSWP organised 2 conferences in 2005 in partnership with other agencies. The first 'Working Diversity in Sex Work' was co-sponsored by Mainliners in Liverpool, February 2005 and included both plenary and workshop sessions addressing migrant sex worker's issues. The second 'Street Sex Work and Homelessness Time For Change' was co-sponsored by Shelter (the national homelessness organisation) in Manchester, October 2005. Given that no sex work project had reported contact with migrant sex workers involved in street prostitution migrant sex worker's issues were not addressed at this national event.</p> <p>The UKNSWP organised <i>'Working Within and Challenging: Critical Reflections on the National Strategy'</i> national conference in Manchester, October 2006 which included both plenary, roundtable discussions and workshops highlighting the needs of migrant sex workers. The plenary session and the roundtable discussion resulted in lively discussion about sex workers rights and the extent of migration and trafficking within the UK industry and how the UK government is failing to address the needs of migrants and the human rights of victims of trafficking.</p> <p>In addition to the national events a number of regional and home nation events were organised and attended by the TAMPEP UK Coordinator to promote the needs of migrant sex workers, TAMPEP resources and methods.</p>
	See Appendix 3: National Network members & Appendix 4: Participants in national event
7	BI-LATERAL & MULTI-LATERAL EXCHANGES
	Exchange visits , including aims, activities and learning outcomes
	AIMS

	<p>To explore how Amnesty for Women in Hamburg, Germany makes contact and builds rapport with migrant sex workers in apartments, and how they potentially identify victims of trafficking and create a safe space for them to disclose their needs. To look at the range of needs and circumstances of migrant sex workers and find out whether mechanisms exist for these to be appropriately recorded in a consistent way.</p> <p>ACTIVITIES</p> <p>Amnesty for Women were also hosting exchange visits from participants from Finland and Denmark, which enabled us all to learn about the prevailing political standpoints in each country as well as the different services available in each location. During the visit discussions were held with Amnesty for Women staff and cultural mediators, a number of agencies working with migrant sex workers were visited and outreach was undertaken to apartments.</p> <p>LEARNING OUTCOMES</p> <p>We revisited the issue of cultural mediators which has still not been implemented in SCOT-PEP, largely because we still don't have as many migrant sex workers as our colleagues in other parts of Europe – but our migrant population is clearly growing. We recognised that it's important for some migrants to be able to speak to someone from the same cultural background in order to establish contact and build relationships – it's not enough to just have someone who speaks the language. We are looking at possibilities for recruiting cultural mediators to join our team of volunteers and it has been beneficial to learn about reasons why this is important.</p> <p>In the UK there is a perception, held by many politicians and policymakers, that all migrant sex workers are victims of trafficking. In Germany they do not, in general, seem to have the same problem and as a result perhaps there is less pressure on projects to demonstrate that they have checked out whether a sex worker has been trafficked or not. As for instances in which this is the case, it is just the same as with any other difficult circumstances – you have to build up a rapport with someone, and listen to your instincts. Although we already do this of course, it was important to have this discussion this with our overseas colleagues and explore new ideas about communicating with migrants.</p> <p>Of particular interest were the reports which Amnesty for Women complete after each outreach session. These can be quite detailed and although we recognise a need to not overwhelm ourselves with paperwork, we can see from these notes that relevant information will be shared easily between team members and that this method has value. In particular it allows the team to note trends and changes over time, as well as generally help them remember different issues.</p> <p>In addition to the bilateral exchange visit to Hamburg a number of other international exchanges were attended by the TAMPEP UK Coordinator to further extend the knowledge in SCOT-PEP and the UKNSWP about methods of supporting and providing services to migrant sex workers.</p>
8	SERVICE MAPPING
	Public health care services
	<p>Access to health care is limited for non-documented and/or non-insured migrant sex workers unless they can pay privately. MSW can only access free health care relating to sexually transmitted infections (excluding HIV/AIDS), contraception and Accident & Emergency health care (for which they may be billed if the hospital tracks them). Some sex work projects who provide clinical services are able to extend some general health care to migrant sex workers regardless of migration status, but it is still very limited.</p>
	Public social care services
	<p>Access to free social care, other than as a victim of trafficking or seeking repatriation, is even more limited for non-documented and/or non-insured migrant sex workers unless they can pay privately. Some sex work projects are able to provide legal information and advice and a few offer counselling but that is very limited</p>

	by language barrier.
	See Appendix 5: Service providers mapping

List of all organisations and individuals participating in TAMEPEP 7 activities.

Organisations	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
3D Crime Concern	Southampton	sex work
Abacus Clinics	Liverpool	health
Aberdeen Drugs Action	Aberdeen	drugs/sex work
Anawim	Birmingham	sex work
Armistead	Liverpool	sex work
Barnardos - SECOS	Middlesbrough	sex work
Barnardos Young Men's Project	?	sex work
Barnardos Young Women's Project	Southampton	sex work
Barts & London NHS	London	health
Base 75	Glasgow	sex work
Belinda Brooks Gordon	London	academic
Birmingham City Council	Birmingham	local government
Birmingham Community Safety Partnership	Birmingham	local government/law enforcement
Birmingham DAAT	Birmingham	local government
Bradford Council	Bradford	local government
Bradford Working Women's Project	Bradford	sex work
Brighton Oasis Project	Brighton	sex work
Bristol Drug Project	Bristol	drugs/sex work
Bristol University	Bristol	academic
Brownlow Group Practice	Northampton	health
Cambridgeshire Police	Cambridgeshire	law enforcement
Cardiff Community Drug Unit	Cardiff	drugs/sexwork
Cardiff University	Cardiff	academic
Celso Fernandez - Lopez	London	UKNSWP member
Central Cheshire Drugs Service	Cheshire	drugs/sex work
Ciaran McKinney	Dublin	UKNSWP member
CLASH	London	drugs/sexwork
Claude Nicol Centre	Brighton	health
Claudia da Silva	London	UKNSWP member
Comic Relief	London	funder
Community Drug Team	Ipswich	drugs/sexwork
Community Drug Team	Rochdale	drugs/sexwork
Community Midwifery Service	Manchester	health

Cornerhouse	Hull	sex work
Crime Concern	London	social service/law enforcement
Crown Prosecution Service	London	law enforcement
Dorset Working Womens Project	Bournemouth	sex work
Dr Laura Agustin	Liverpool	UKNSWP member
Dr Linda Cusick	Glasgow	UKNSWP member
Dr Maggie O'Neill	Loughborough	UKNSWP member
Dr Mike Emberson	Deal	UKNSWP member
Dr Nikki Jeal	Cardiff	UKNSWP member
Dr Teela Sanders	Leeds	UKNSWP member
Dr Tuppy Owens	London	UKNSWP member
Drugline Lancashire	Blackpool	drugs/sex work
Durex	national	health
Eaves Housing for Women	London	social service
English Collective of Prostitutes	London	sex work
Essex Police	Essex	law enforcement
Foxton Centre Streetlink	Preston	sex work
Gabrielle McClelland	Bradford	academic
Gay & Lesbian Equality Network	Dublin	sex work
Genesis	Leeds	sex work
Gloucestershire Police	Gloucestershire	law enforcement
Grand Project /Isis	Rochester	sex work
Hackney Community Safety Team	London	social service/law enforcement
Hackney DAAT	London	local government
Hackney Police	London	law enforcement
Hampshire Police	Hampshire	law enforcement
Hanne Hoeck	Kenilworth	UKNSWP member
Harbour Drug and Alcohol Services	Plymouth	drugs/sex work
Harm Reduction Team - NHS Lothian	Edinburgh	health
Health First	London	health
Healthy Options Team	London	sex work
Hilary Kinnell	Telford	UKNSWP member
Hillingdon Women's Centre	Hillingdon	sex work
Home Office	London	national government
International Union of Sex Workers	London	sex work/trade union
Jackie West	Bristol	academic
Jane Pitcher	Coventry	academic
Jenny Pearce	Enfield	academic
Julia O'Connell Davidson	Nottingham	academic
Kairos WWT	Coventry	sex work
Kirklees Safer Communities Partnership	Kirklees	local government

Lesbian & Gay Foundation	Manchester	sex work
Lifeline	Manchester	drugs/sexwork
Linda Myers Solicitors	Brighton	jurist
Liverpool City Council	Liverpool	local government
Liverpool DAT	Liverpool	local government
Loughbrough University	Loughbrough	academic
Luton Drug & Alcohol Partners	Luton	drugs/sex work
Mainliners	London	drugs/sex work
Manchester Lesbian and Gay Foundation	Manchester	sex work
Manchester Public Health Development	Manchester	health
Manchester Specialist Midwifery Service	Manchester	health
Maple Access Partnership	Northampton	health
Mary Whowell	Manchester	academic
MASH	Manchester	sex work
Matrix	Norwich	sex work
Melissa Fulton	Bristol	academic
Merseyside Police	Liverpool	law enforcement
Merseyside Police - International Crime Unit	Liverpool	law enforcement
Metropolitan Police - Clubs & Vice Unit	London	law enforcement
Metropolitan Police - Forensic Services	London	law enforcement
Metropolitan Police - Immigration Crime Team	London	law enforcement
Metropolitan Police - Sapphire Project	London	law enforcement
Middlesex University	Middlesex	academic
MSWOP	Manchester	sex work
New Futures	Leicester	sex work
New Horizon Youth Centre	London	sex work
New Philanthropy Capital	London	funder
North Surrey PCT - Health Promotion		health
NOVAS	London	social service
One 25	Bristol	sex work
Open Doors	London	sex work
Oxfordshire DAAT	Oxford	local government
Pasante Healthcare	national	health
Peterborough DAT	Peterborough	local government
Phace Scotland	Glasgow	sex work
Phoenix Sexual Health Service	Oldham	sex work
Plymouth Women's Aid	Plymouth	social service
POW	Nottingham	sex work
Praed Street Project	London	sex work
PROTECT	Wolverhampton	sex work

Providence Row Charity	London	sex work
Reachout Highland	Inverness	sex work
Response	Birkenhead	sex work
ROAM	Edinburgh	sex work
Rob Newell	Bradford	academic
Rochdale Drug Team	Rochdale	local government
Safe & Sound - Edge Project+A146	Derby	sex work
Safe Exit at Toynbee Hall	London	sex work
Safe in the City	Manchester	sex work
SAFE Project	Birmingham	sex work
Salford DAAT	Salford	local government
Salvation Army	national	social service
Sandyford Initiative	Glasgow	health
SCOT-PEP	Edinburgh	sex work
Second Step	Bristol	sex work
Sexual Health Outreach Service	Grimsby	sex work
Sheffield City Council	Sheffield	local government
Sheffield Futures - Sexual Exploitation Service	Sheffield	youth/sex work
Sheffield Futures - Taking Stock	Sheffield	sex work
SHOC - Barnett	London	sex work
SHOC - Haringey	London	sex work
South Wales Police	Cardiff	law enforcement
South Yorkshire Police	Yorkshire	law enforcement
Southampton WW Project	Southampton	sex work
Spires Streetlink	London	sex work
St Mungos	London	sex work
St Peter's House	Redhill	sex work
Streatham Streetlink	London	sex work
Streetreach	Doncaster	sex work
Streetwise North	Newcastle on Tyne	drugs/sex work
Supporting People	London	local government
SWEET	Huddersfield	sex work
SWWOP	Sheffield	sex work
Tameside & Glossop Centre for Sexual Health	Ashton Upon Lyne	health
Terence Higgins Trust - South	Brighton	sex work
Terence Higgins Trust - SWISH Project	Coventry	sex work
Terence Higgins Trust - SW5	London	sex work
Terence Higgins Trust - West	Bristol	sex work
Terence Higgins Trust - East	Southend on Sea	sex work
The Blue Room	Manchester	sex work

The Children's Society	London	youth/sex work
The Phoenix Sexual Health Centre	Oldham	health
The Royal London Hospital	London	health
The Salvation Army	national	social service
The Well/Alabare Christian Care Centre	Bristol	sex work
The Women's Project	Stoke-on-Trent	sex work
TRUST	London	sex work
UKNSWP	Manchester	sex work
University Hospital Cardiff	Cardiff	health
University of Bradford	Bradford	academic
University of Bristol	Bristol	academic
University of Leeds	Leeds	academic
University of Liverpool	Liverpool	academic
University of Paisley	Paisley	academic
W Surrey Health Promotion Outreach	Woking	sex work
Walsall MBC	Walsall	sex work
Wandsworth Drug Project	London	drugs/sex work
Willan Publishing	national	academic
Women's Link	London	sex work
Women's Work	Derby	sex work
Working Men's Project	London	sex work
Yorkshire MESMAC	Bradford	sex work
Young Women's Unit	Sheffield	social service
Youth at Risk Campaigne	London	youth/sex work

Appendix 1: Prostitution Mapping Questionnaire participants

		Questionnaire		
<i>Organisation or other source of information</i>	Remit health service, sex work project, social service, law enforcement, academic, media.	SENT	FOLLOWED UP	RETURNED
All UKNSWP members received questionnaires <i>and reminders</i> for the prostitution mapping. See National Network & Events Appendix for full list.				
SCOT-PEP, Edinburgh	SEX WORK PROJECT	Y		Y
MASH, Manchester	SEX WORK PROJECT	Y		
Bradford Working Women's Project, Bradford	SEX WORK PROJECT	Y		Y
CDU, Cardiff	DRUG PROJECT	Y	Y	Y
Genesis, Leeds	SEX WORK PROJECT	Y	Y	Y
CLASH, London	DRUG & SEX WORK PROJECT	Y	Y	Y
SHOC Haringey, London	NHS SEX WORK PROJECT	Y	Y	Y
SHOC Barnett, London	NHS SEX WORK PROJECT	Y	Y	Y
Open Doors, London	NHS SEX WORK PROJECT	Y	Y	Y
Praed Street Project, London	NHS SEX WORK PROJECT	Y	Y	Y
Armistead, Liverpool	NHS SEX WORK PROJECT	Y	Y	
Oasis, Brighton	SEX WORK PROJECT	Y	Y	Y
Base 75, Glasgow	NHS SEX WORK PROJECT	Y	Y	
UKNSWP		Estimate of no. of sex workers in UK		
Pentameter Operation Report	Police	Results of anti-trafficking operation		

Appendix 2: CDrom promotion and distribution

<i>Organisation</i>	Promotional material sent	CDrom sent	Evaluation form sent	Evaluation form returned
All UKNSWP members and 2006 conference participants received promotional material about CDrom. See National Network & Events Appendices for full list.				
Bradford Working Women's Project, Bradford		X	X	X
Safe Project, Birmingham		X 2	X	X
Genesis, Leeds		X	X	X
Dorset Working Womens Project, Bournemouth		X	X	X
Brighton Oasis Project - SWOP, Brighton		X	X	X
SCOT-PEP, Edinburgh		X	X	X
Working Womens Service, Bradford		X	X	
SWISH - THT, Coventry		X	X	
SOS - THT, Brighton		X	X	
Claude Nicol Centre, Brighton		X	X	
Armistead Street, Liverpool		X 2	X	
Response - The Lodge, Liverpool		X	X	
International Crime Unit - Merseyside Police, Liverpool		X	X	
MSWOP, Manchester		X	X	
Bristol Drugs Project, Bristol		X	X	
Safe Exit at Toynbee Hall, London		X	X	
MASH, Manchester		X	X	
Streetreach, Doncaster		X	X	
Birmingham Community Safety Partnership, Birmingham		X	X	
St Mungo's, London		X	X	
Outreach Team, North Surrey		X	X	
New Horizons Outreach Team, London		X	X	
New Futures Project, Leicester		X 2	X	
SHOC - Haringey, London		X	X	
SHOC - Barnett, London		X	X	
Open Doors, London		X 2	X	
Womens' Work, Derby		X	X	
Rochdale Drug Team, Rochdale		X	X	
NHS Lothian, Edinburgh		X	X	
One 25, Bristol		X	X	
Metropolitan Police - Clubs & Vice Unit, London		X 4	X	
Anawin, Birmingham		X	X	

Appendix 3: National Network members

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
3D Crime Concern	Southampton	Sex Work Project
Aberdeen Drugs Action	Aberdeen	Drug & Sex Work Project
Anawim	Birmingham	Sex Work Project
Armistead	Liverpool	Sex Work Project
Barnardos Secos	Middlesbrough	Sex Work Project
Barnardos Young Women's Project	Southampton	Sex Work Project
Bradford Working Womens Project	Bradford	Sex Work Project
Brighton Oasis Project	Brighton	Sex Work Project
Bristol Drugs Project	Bristol	Drug & Sex Work Project

CAU	Cardiff	Drug & Sex Work Project
Central Cheshire Drug Service	Crewe	Drug & Sex Work Project
CLASH	London	Drug & Sex Work Project
Community Drug Team	Ipswich	Drug & Sex Work Project
Community Drug Team	Rochdale	Drug & Sex Work Project
Community Midwifery Service	Manchester	Health service
Cornerhouse	Hull	Sex Work Project
Dorset Working Womens Project	Bournemouth	Sex Work Project
Drugline Lancashire	Blackpool	Drug & Sex Work Project
Foxton Centre Streetlink	Preston	Sex Work Project
Genesis	Leeds	Sex Work Project
Grand Project /Isis	Rochester	Sex Work Project
Harbour Drug & Alcohol Services	Plymouth	Drug & Sex Work Project
Healthy Options Team	London	Sex Work Project
Hillingdon Women's Centre	Hillingdon	Sex Work Project
Kairos WWT	Coventry	Sex Work Project
Lesbian & Gay Foundation	Manchester	Sex Work Project
Luton Drug & Alcohol Partners	Luton	Drug & Sex Work Project
Mainliners	London	Drug & Sex Work Project
Maple Access Partnership	Northampton	Health service
MASH	Manchester	Sex Work Project
Matrix	Norwich	Sex Work Project
New Futures Project	Leicester	Sex Work Project
New Horizon Youth Centre	London	Sex Work Project
One 25 Ltd	Bristol	Sex Work Project
Open Doors	London	Sex Work Project
Phace Scotland	Glasgow	Sex Work Project
Phoenix Sexual Health Service	Oldham	Sex Work Project
Plymouth Women's Aid	Plymouth	Sex Work Project
POW	Nottingham	Sex Work Project
Praed Street	London	Sex Work Project
PROTECT	Wolverhampton	Sex Work Project
Providence Row Charity	London	Sex Work Project
Reachout Highland	Inverness	Sex Work Project
Response	Birkenhead	Sex Work Project
ROAM	Edinburgh	Sex Work Project
Safe & Sound (Edge Project)	Derby	Sex Work Project
Safe in the City	Manchester	Sex Work Project
SAFE Project	Birmingham	Sex Work Project
SCOT-PEP	Edinburgh	Sex Work Project
Second Step	Bristol	Sex Work Project
Sexual Health Outreach Service	Grimsby	Sex Work Project
Sheffield Futures/Taking Stock	Sheffield	Sex Work Project
SHOC Barnet	London	Sex Work Project
SHOC Haringey	London	Sex Work Project
Southampton WW Project	Southampton	Sex Work Project
Spires Streetlink	London	Sex Work Project
St Mungo's	London	Sex Work Project
St Peter's House	Redhill	Sex Work Project
Streetreach Project	Doncaster	Sex Work Project

Streetwise North	Newcastle on Tyne	Drug & Sex Work Project
SW5	London	Sex Work Project
Swan Partnership	Northampton	Sex Work Project
SWEET	Huddersfield	Sex Work Project
SWISH THT Midlands	Coventry	Sex Work Project
SWWOP	Sheffield	Sex Work Project
Tameside & Glossop Centre for Sexual Health	Ashton Upon Lyne	Health service
The Children's Society	London	Sex Work Project
The Well/Alabare Christian Care Centre	Bristol	Sex Work Project
The Women's Project	Stoke-on-Trent	Sex Work Project
THT East	Southend on Sea	Sex Work Project
THT South	Brighton	Sex Work Project
TRUST	London	Sex Work Project
W Surrey Health Promotion Outreach	Woking	Sex Work Project
Wandsworth Drug Project	London	Drug & Sex Work Project
Women's Link	London	Sex Work Project
Women's Work	Derby	Sex Work Project
Yorkshire MESMAC-BLAST Project	Bradford	Sex Work Project
Youth at Risk Campaigne	London	Sex Work Project
IUSW	London	Sex Work Project – trade union
Rob Newell	Bradford	associate
Gabrielle McClelland	Bradford	associate
Melissa Fulton	Bristol	associate
Jackie West	Bristol	associate
Dr Nikki Jeal	Cardiff	associate
Jane Pitcher	Coventry	associate
Hanne Hoeck	Kenilworth	associate
Jenny Pearce	Enfield	associate
Dr Maggie O'Neill	Loughborough	associate
Teela Sanders	Leeds	associate
Mary Whowell	Manchester	associate
Julia O'Connell Davidson	Nottingham	associate
Linda Cusick	Paisley	associate
Claudia da Silva	London	associate
Celso Fernandez - Lopez	London	associate
Belinda Brooks Gordon	London	associate
Dr Mike Emberson	Deal	associate
Hilary Kinnell	Telford	associate
Ciaran McKinney	Dublin	associate
Dr Tuppy Owens	London	associate

Appendix 4: Participants in national events

UK Network of Sex Work Projects Conference 25 February 2005		
Organisations	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
3D Crime Concern	Southampton	sex work
Abacus Clinics	Liverpool	health
ANAWIM x 2	Birmingham	sex work

Armistead Project x 5	Liverpool	sex work
Barnardos - SECOS	Middlesbrough	sex work
Barnardo's Young Men's Project	?	sex work
Birmingham Community Safety Partnership	Birmingham	social service/law enforcement
Bradford Working Women's Project x 2	Bradford	sex work
Brighton Oasis Project	Brighton	sex work
Brownlow Group Practice x 3	Nothampton	health
Cambridgeshire Constabulary	Cambridgeshire	law enforcement
Central Cheshire Drugs Service	Cheshire	drugs/sex work
CLASH x 2	London	sex work
CLASH/MCC	London	sex work
Crime Concern	london	Social service/law enforcement
Eaves Housing for Women	London	housing/trafficking
English Collective of Prostitutes	London	sex work
Genesis x 11	Leeds	sex work
Gloucestershire Police	Gloucestershire	law enforcement
Hackney Police	London	law enforcement
Hackney Community Safety Team	London	social service/law enforcement
Hackney DAAT	London	drugs/sex work
Hampshire Police x 2	Hampshire	law enforcement
Harbour Drug and Alcohol Services	Plymouth	drugs/sex work
Health First x 2	London	health
Home Office	London	national government
International Union of Sex Workers	London	sex work
Metropolitan Police - Immigration Crime Team x 2	London	law enforcement
Metropolitan Police - Clubs & Vice Unit x 2	London	law enforcement
Kirklees Safer Communities Partnership	Kirklees	social service/law enforcement
Liverpool City Council	Liverpool	local government
Mainliners x 2	London	drugs/sex work
Manchester Action on Street Health x 8	Manchester	sex work
Manchester Lesbian and Gay Foundation x 2	Manchester	sex work
Manchester Public Health Development	Manchester	health
Manchester Specialist Midwifery Service	Manchester	health
Merseyside Police x 3	Liverpool	law enforcement
Metropolitan Police	Liverpool	law enforcement
Metropolitan Police - Forensic Services	London	law enforcement
Metropolitan Police - Sapphire Project x 2	London	law enforcement
New Horizon Youth Centre x 2	London	youth/sex work
Open Doors x 4	London	sex work
Oxfordshire DAAT	Oxford	drugs/sex work
Pasante Healthcare	national	health
Peterborough DAT	Peterborough	drugs/sex work
POW x 2	Nottingham	sex work
Praed Street Project	London	sex work

RESPONSE	Birkenhead	sex work
Safe in the City x 2	London	sex work
SAFE Project x 3	Birmingham	sex work
Sandyford Initiative	Glasgow	health/sex work
SCOT-PEP	Edinburgh	sex work
Sheffield Futures - Sexual Exploitation Service x 2	Sheffield	youth/sex work
SHOC x 3	Sheffield	sex work
South Wales Police x 2	Cardiff	law enforcement
Streatham Streetlink x 3	London	sex work
Streetreach x 3	Doncaster	sex work
SWAN/Maple Access Partnership	Northampton	health
SWWOP x 2	Sheffield	sex work
Terence Higgins Trust - South	Brighton	sex work
Terence Higgins Trust - SWISH Project	Coventry	sex work
The Children's Society	London	youth/sex work
The Phoenix Sexual Health Centre x 2	Oldham	health
The Salvation Army	London	social service
The Sweet Project x 2	Huddersfield	sex work
Terence Higgins Trust - West	Bristol	sex work
University Hospital Cardiff	Cardiff	health
UKNSWP x 7	Liverpool	sex work
Walsall MBC	Walsall	sex work
Working Men's Project	London	sex work
Yorkshire MESMAC	Bradford	sex work

UK Network of Sex Work Projects Conference 5 October 2006

Organisations	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
Anawin	Birmingham	sex work
Armistead x 8	Liverpool	sex work
Barts & London NHS	London	health
Birmingham City Council	Birmingham	local government
Birmingham DAAT	Birmingham	local government
Bradford Council	Bradford	local government
Bradford Working Women's Project x 3	Bradford	sex work
Brighton Oasis Project	Brighton	sex work
Bristol Drug Project x 2	Bristol	drugs/sexwork
Bristol University	Bristol	academic
Cardiff University	Cardiff	academic
Comic Relief	London	funder
Crime Prosecution Service	London	law enforcement
Dorset Working Womens Project	Dorset	sex work
Durex	national	health
Essex Police x 2	Essex	law enforcement

Gay & Lesbian Equality Network	Dublin	sex work
Genesis x 5	Leeds	sex work
Gloucestershire police	Gloucestershire	law enforcement
Hackney DAT x 2	London	local government
Harm Reduction Team - NHS Lothian	Edinburgh	health
Home Office	London	national government
International Union of Sex Workers x 2	London	sex work
Kirklees Safer Communities Partnership	Kirklees	local government
Lifeline x 2	Manchester	drugs/sexwork
Linda Myers Solicitors	Brighton	jurist
Liverpool DAT	Liverpool	local government
Loughbrough University	Loughbrough	academic
MASH x 3	Manchester	sex work
Metropolitan Police - Clubs & Vice Unit x 2	London	law enforcement
Middlesex University	Middlesex	academic
MSWOP	Manchester	
New Futures x 2	Leicester	sex work
New Horizon Youth Centre x 3	London	sex work
New Philanthropy Capital	London	funder
North Surrey PCT - Health Promotion x 2	Surrey	health
NOVAS	London	social service
Open Doors x 6	London	sex work
Praed Street Project x 2	London	sex work
Safe Exit x 2	London	sex work
Safe Project x 2	Birmingham	sex work
Salford DAAT	Salford	local government
Salvation Army x 2	national	social service
SCOT-PEP x 2	Edinburgh	sex work
Sheffield City Council	Sheffield	local government
SHOC - Barnett	London	sex work
SHOC - Haringey x 3	London	sex work
South Yorkshire Police x 3	Yorkshire	law enforcement
SPIRS	London	sex work
St Mungos x 3	London	sex work
Streetreach x 3	Doncaster	sex work
Supporting People	London	local government
SWEET Project x 2	Huddersfield	sex work
Terrence Higgins Trust - SW5	London	sex work
Terrence Higgins Trust - SWISH x 4	Coventry	sex work
The Blue Room	Manchester	sex work
The Children's Society x 2	London	sex work
The Royal London Hospital	London	health
UKNSWP x 7	Manchester	sex work
University of Bradford	Bradford	academic
University of Bristol	Bristol	academic

University of Leeds x 2	Leeds	academic
University of Liverpool	Liverpool	academic
University of Paisley	Paisley	academic
Willan Publishing	national	academic
Women's Work x 2	Derby	sex work
Young Women's Unit	Sheffield	social service

Appendix 5: service providers mapping

1. Works with sex workers 2. Works with migrant sex workers	3. Has multi-lingual resources 4. Uses interpreters		5. Uses cultural mediators		Questionnaire		
Organisations	1	2	3	4	5	SENT	RETURNED
All UKNSWP members were sent the service mapping questionnaire. See National network and events appendix for full list.							
SCOT-PEP, Edinburgh	Y	Y	Y	Y	N	Y	Y
MASH, Manchester	Y	Y	Y	Y	N	Y	Y
CDU, Cardiff	Y	Y	Y	Y	N	Y	Y
GENESIS, Leeds	Y	Y	Y	Y	N	Y	Y
CLASH, London	Y	Y	Y	Y	N	Y	Y
SHOC – Haringey, London	Y	Y	Y	Y	N	Y	Y
SHOC – Barnett, London	Y	Y	Y	Y	N	Y	Y
Praed Street Project, London	Y	Y	Y	Y	Y	Y	Y
Armistead, Liverpool	Y	Y	Y	Y	N	Y	Y
POW, Nottingham	Y	Y	Y	Y	N	Y	Y
Base 75, Glasgow	Y	Y				Y	declined

TAMPEP 7 National Partners Update

National Coordinator Name	Ruth Morgan Thomas
National Coordinator Tel No	+44 131 622 7550
National Coordinator Mobile No	+44 7711 330013
National Coordinator Email	manager@scot-pep.org.uk
Organisation Name	SCOT-PEP
Address	70 Newhaven Road, Edinburgh EH5 6QG, Scotland UK
Organisation Fax	+44 131 622 7551
Organisation Tel no	+44 131 622 7550
Organisation Email	voice@scot-pep.org.uk
Organisation website	www.scot-pep.org.uk

AUSTRIA National Final Report

Person completing report Faika Anna El-Nagashi

In completing this final report, please collate information from the final work programme reports.

Please also complete the information requested in the Appendices.

1.	ORGANISATIONAL OVERVIEW , including aims, staff & volunteer team, summary of services provided and number of sex workers in contact with organisation
	<p><u>LEFÖ-working topics:</u></p> <ul style="list-style-type: none"> • Counselling and Education Centre for Migrant Women from Latin America • Health Prevention for Migrant Sexworkers (TAMPEP) • Intervention Centre for Women affected by Trafficking (IBF) • Public relations work, trainings, seminars <p><u>TAMPEP-staff:</u> Maria Cristina Boidi, Co-ordinator Faika Anna El-Nagashi, Cultural Mediator Doris Cordova, Cultural Mediator Adrienne Pall-Kaiser, Cultural Mediator Nadja Rizkallah, Administration/Correspondence</p> <p><u>TAMPEP-services:</u></p> <ul style="list-style-type: none"> - outreach/streetwork by cultural mediators in Vienna and other provinces - (health, legal, social) counselling - accompaniment - workshops for peer educators - presentation and distribution of educational materials in different languages - distribution of condoms and lubricants - cultural mediation at Health Service Providers - trainings for cultural mediators - TAMPEP-networking as national focal point <p><u>Aims:</u></p> <ul style="list-style-type: none"> * to empower migrant sexworkers * to improve the working and living conditions of migrant sexworkers * to implement comprehensive and holistic services for migrant sexworkers * to foster national and transnational co-operation to enhance the rights of migrant sexworkers * to sensitise the media, decision makers and the general public on the issue of migrant sexworkers, their needs and their rights * to fight for the rights of migrant sexworkers and to demand (state) accountability * to evaluate (health, social, legal) measures regarding their consequences for migrant sexworkers and their working and living conditions
2.	NATIONAL LEGAL FRAMEWORK including summary of prostitution, migration and trafficking legislation
	<p>a. TRAFFICKING</p> <p>Regarding anti-/trafficking legislation, there have been no recent initiatives. The main changes – since the Trafficking Protocol came into force – were modifications of the Penal Code, relating to the adaptation of the Palermo Protocol:</p> <ul style="list-style-type: none"> * the new anti-trafficking law (§104a Penal Code, in force since May 1st 2004): this law now covers trafficking in Human Beings into all spheres;

* the old law on trafficking (§217 Penal Code) was renamed "Cross-border Prostitution Trafficking" and only refers to (cross-border) trafficking into prostitution;

b. PROSTITUTION

Prostitution in Austria is regulated by national and provincial laws:

National laws

In the health control sphere:

* Sexually Transmitted Diseases Law (BGBl. 591/11993) states that prostitutes must undergo a weekly health check-up.

* AIDS Law (BGBl. 293/1986-728/11993) states that prostitutes must have an HIV Test every three months.

In the criminal law sphere:

* Promotion of prostitution (Art. 215) and pimping (Art. 216) are criminal offences.

In the tax law sphere:

* Since January 1st 1983, prostitutes are included within the General Tax Law on Profits and Income.

Provincial laws

Provincial laws compose specific laws about the issue (for example: Vienna, Lower Austria), or just as part of the legislation of the penal provincial police (or security police), that among other things regulates prostitution (for example: Burgenland, Salzburg).

Legislation could be grouped into two major models:

The brothel system: Prostitution can only be exercised in brothels that have a special permit. Prostitution in the streets is prohibited.

The regulatory system: This system does not circumscribe prostitution to brothels but foresees areas where – in addition to general prohibition zones – prostitution is forbidden.

c. MIGRATION

In principle, as of January 1st 2003, only self-employed persons or employed "key professionals" may immigrate to Austria for the purpose of gainful employment. Requirements include, amongst others, training or knowledge for which there is special demand, a minimum income of approximately 2.100 EUR before tax and a significant impact of the employment on the Austrian labour market or a part thereof. There is no quota for persons with simple qualifications.

As of January 1st 2003, non-EEA [European Economic Area] citizens who have settled with a residence permit after January 1st 1998 and non-EEA citizens who have been granted a first residence permit after January 1st 2003, must fulfil a so-called "integration agreement".

With 1st January 2006, a new "immigration package" goes into effect, including a new asylum law, immigration police law and settlement and residency law. One of the changes directly impacts on the situation of (non-EU) migrant sexworkers: The so-called "prostitution visa" (or its equivalent for dancers) – which actually was a short-term stay permit for self-employed individuals and for the purpose of work in prostitution – no longer exists and is no longer being issued. It is being "substituted" by an actual visa (Visa D+C). This new legal form for non-EU migrant sexworkers is very short-term (3-6 months). The application – and any "prolongation" – has to be made from abroad, resp. from the country of origin. And the visa is

	<p>only issued for a period of max. 6 months within 12 months. This leaves the women with no long-term perspective for the management of their lives and future. Women who had been working and living legally in Austria for years with the previous permit of stay were given no perspective for a future life in Austria. They were illegalized.</p> <p>At the same time, there is no access for non-EU migrants to other parts of the labour market (as employees) – with the exception of “key professionals”. For migrant sexworkers without a permit of stay (or residency) based on other purposes (through marriage or otherwise), it is not possible to – as self-employed professionals – work as registered sexworkers.</p>
3.	<p>OVERVIEW OF ANY POLITICAL CHANGES, including changes in legislation, welfare/health systems and societal attitudes</p>
	<p>1) Prostitution legislation in Austria is regulated by the provinces. A new Viennese Prostitution Law has been implemented in May 2004.</p> <p><u>The main changes relate to the following points:</u></p> <ul style="list-style-type: none"> - includes additional rights for executive authorities: “entry warrant” (<i>Betretungsrecht</i>) for buildings, apartments, vehicles, premises – in case of “substantiated suspicion” (illegal prostitution), without prior legal order! We perceive this as a violation of basic constitutional rights (to privacy) and human rights. - it foresees fines for owners/renters of apartments etc. where “illegal prostitution” takes place, respectively who do not prohibit or report those activities; - explicit mention of the mandatory health controls for sexworkers (already regulated by national laws pertaining to prostitution, i.e. STD and AIDS law) – cementing the controlling aspect and approach of this new legislation - enlargement of the prohibition areas (now including, e.g., cemeteries) - reduction (by two-thirds) of the maximum amount of fines for “illegal prostitution” (non-registered and/or prohibited area); though the maximum amount of now EUR 1.000 is still too high! - explicit mention of the regular health controls as extenuating cause in cases of fines for “illegal prostitution” (this again re-enforces the control aspect); - it is further suggested that the financial income from the fines should be directed towards (exit) organisations; We believe that it is essential to have secure and independent funding of NGOs and their activities – and that the focus must not be on “exit” programs. <p>* The “land security legislation” (<i>Landessicherheitsgesetz</i>) now includes a regulation for the “protection” of the “decent” people: Potential clients can be reported and fined for unsolicited invitations to or requests for sexual acts. It is to be seen how this shall be practised.</p> <p>Prostitution – with the new Viennese legislation – is still related to morality and “good manners” (<i>contra bonos mores</i>).</p> <p>2) Introduction of new “protection zones” (where prostitution is NOT allowed) and/or stricter execution/control of existing “protection zones”.</p> <p>3) A reform (2003) of the asylum legislation went into force on May 1st 2004. The new regulation is a massive backlash and also affects asylum seekers who work in the sex-industry. It foresees (among others) an acceleration of the asylum process (by shortening appealing proceedings) and deprives the affected persons of basic rights while at the same time expanding the possibilities of state interventions. This has strongly been criticized by numerous Human Rights organisations and other institutions and ultimately, some measures were lifted up by the constitutional court. After this decision, and following</p>

personnel changes in the Ministry of Interior, a new – as harshly criticised – reform is about to be implemented.

One of the (positive) measures of the new law(s) is the provision of (minimum) national/state care for asylum seekers (*Bundesbetreuung/Grundversorgung*); referring to shelter and food. The implementation of this regulation proves difficult though in the different provinces because of disputes over (financial) competence (federal/provincial). The care services translate into an amount of EUR 290 per person and per month. All the while asylum seekers do not have access to the formal labour market, no matter how long their asylum process might take.

In Vienna, the CARITAS is (as an off-site location) responsible for administering the payments to asylum seekers. Since January 2005, a new practise is exercised: registered sexworkers (their data had been collected and exchanged) have to provide a valid tax number in order to receive the money. They further have to sign a statement declaring the amount of their monthly income. If it exceeds a certain limit (*Geringfügigkeitsgrenze*; EUR 316) they do not receive any money. If it is less, EUR 40 are deducted.

Because of this procedure, many women are thinking about returning their registration card or already did so. In this case, they have to provide an official confirmation of it (issued by the police).

In general, there is a lot of confusion and irritation about the situation. It is unclear how and annoying that registration information of the women has been passed on. Sometimes, the women are told that the deducted money is used to pay taxes. But officially, this has not been confirmed.

In the meantime, a new barrier has been introduced for asylum seekers who still want to register: newly arrived women have to wait 3 months before they can get their "control-card".

4) Non-EU-citizens (especially Romanian and Bulgarian women) sometimes work in prostitution while their permit of stay is based on a tourist visa. But most of them applied for a "permit as self-employed without residency" (*Aufenthalt als Selbständige ohne Niederlassung*), a short-term visa designed especially for work in prostitution or as show-dancers, issued as a decree (and thus legally not-binding) by the Ministry of Interior.

The situation changed dramatically since February 2005: On request of the Romanian government – stating that prostitution is illegal in Romania – the Austrian authorities are no longer issuing the "prostitution-visa" to Romanian citizens²². For those Romanian women who already received such a visa, measures are being planned to terminate their permit/stay (*aufenthaltsbeendende Maßnahmen*). In addition, the women might face retributions upon their return for having worked (legally!) in prostitution. Even Romanian women who are married to Austrian citizens are not allowed to work in prostitution – they are still Romanian citizens.

This was a first step.

In general, Austrian authorities became more reluctant to issue the visa and were apparently looking for ways to avoid legally administered activities/work of non-EU-migrants.

In Lower Austria, migrant sexworkers who worked with the "prostitution-visa" were summoned and interviewed by the police. Their visa was withdrawn if they stated that they received a share/percentage of the bar's beverage sales; because the visa is issued exclusively for work in prostitution.

As a second (final?) step, the prostitution visa (and the visa for show-dancers and go-go girls) ceased to exist. On 1st January 2006, a new Immigration Law went into effect. By this act, the old law (including all decrees) was no longer valid. This means, there is no decree to base a visa application on (as sexworkers or dancers). As it is, there were no political intentions to issue another similar decree or to provide another legal possibility for non-EU migrant women to apply for a permit of stay based on their work in the sex-industry.

	<p>This brought dramatic changes. Women, who have been living and working in Austria for years, became illegalised. This weakens the position of the women and enforces dependencies and increases vulnerability. It deprives women of their rights and exposes them to exploitation and the need to rely on services of others.</p> <p>In practise, a new procedure was adopted: Non-EU migrant sexworkers are being issued an actual visa (Visa D+C). This new legal form for non-EU migrant sexworkers is very short-term (3-6 months). The application – and any “prolongation” – has to be made from abroad, resp. from the country of origin. And the visa is only issued for a period of max. 6 months within 12 months. This leaves the women with no long-term perspective for the management of their lives and future. The full impact of these new measures still has to be evaluated.</p> <p>It seems that this action – the implementation of this law with all its consequences – is (politically) possible because of the (potential) increase in “new” EU-citizens in the sex-industry. As the demand side is “filled”, there seems to be no need to longer provide legal protection to other groups of migrant women.</p>
4.	PROSTITUTION MAPPING
	<i>Summary of prostitution scene, including any changes in the last 2 years</i>
	<p>LEFÖ/TAMPEP estimates approx. 60-80% migrant sexworkers in Austria. The composition of the group has changed during the last 10 years but could be categorised in 3 big groups²³:</p> <ul style="list-style-type: none"> - Latin American women (10,76%²⁴) who have been living and working in Austria since the 1980s, some of them with well established structures and networks. Recently, we noticed that some women from the “2nd Generation” were also working in the sex-industry. - The presence of African women (21,90%²⁵) in the sex-industry in Austria is a more recent phenomenon of the last 3-4 years and is met with sexist and racist structures and actions. <p>The number of African women is (albeit slower) continuously increasing but strongly depends on the legal frame and possibilities for migration. Mobility within Austria (even within regions or districts) increased in response to difficult working and living conditions. At the same time, due to strict asylum regulations many women are left with no (financial) support when moving away from their “assigned” location (city or province of original asylum application).</p> <ul style="list-style-type: none"> - Migration from central and south/east Europe (59,31%²⁶) intensified at the beginning of the 1990s and keeps changing as the (political/legal/social) frame changes. Among this very big and diverse group, the majority of women comes from Romania (24,06%²⁷) and Bulgaria (20,97%²⁸). The remaining women are from Poland, Hungary, Slovakia, Czech Republic and (in smaller numbers) from Russia, Ukraine, Moldova, Serbia, Croatia, Macedonia and Lithuania. <p>Since the EU enlargement, a considerable increase in women from the “new” EU countries can be noted. But the biggest tendency by far is the continuing presence of (mainly) Romanian and Bulgarian women in all regions/provinces in Austria. The recent legal restrictions in this area relating to the “prostitution-visa” will without doubt bring a severe change for the (legal and social) situation, safety and well-being of these women.</p>
	Summary of sex workers situation , including any significant differences between national and migrant sex workers and changes in the last 2 years
	<p>Migrant sexworkers face increased vulnerability and dependency due to the impact of the new legislation that went into force 1st January 2006. Migrant sexworkers who have been working and living in Austria for years (with a legitimate visa, paying taxes etc.) are illegalised and there no longer exists a long-term perspective for non-EU migrant sexworkers who want to work in the Austrian sex-industry as registered sexworkers.</p>
	Summary of mobility , including any changes in the last 2 years
	<p>No changes though the impact of the new immigration legislation and the restrictions regarding visa for non-EU migrant sexworkers still have to be evaluated.</p>

	Summary of service provision and policy , including any changes in the last 2 years
	<p>POLICY The changes in the Viennese Prostitution Law brought a continued tendency towards more control, more prohibition zones and more police reports against non-registered sexworkers.</p> <p>The new immigration legislation directly impacts on the situation of (non-EU) migrant sexworkers nationwide. The "prostitution visa" is no longer being issued and women who had been working with the visa for years were illegalised.</p> <p>SERVICE PROVISION In March 2005, the Euqal-partnership SILA (low-threshold counselling center for sexworkers) ended.</p>
	see Appendix 1: Prostitution Mapping Questionnaire participants
5.	TAMPEP 7 CDROM RESOURCE
	Summary of activities undertaken to promote and distribute the TAMPEP CDrom
	Due to the overall delay with this activity, the CDrom was distributed to a small number of organisations that are direct service providers and might be in touch with (migrant) sexworkers. In addition to this, the CD was also distributed as promotional information material to some institutions in the health area. Most organisations that received the CDrom could not yet provide an evaluation of the materials because they needed more time for production, exchange and evaluation.
	See Appendix 2: CDrom promotion and distribution
6.	NATIONAL NETWORKING & EVENTS
	Summary of national networking , including number of network members, types of organisations in the network and summary of activities

	<p>ACTIVITIES</p> <p>2006</p> <p>* International Whore Day, 2nd June 2006 common activity with members of the national network in Vienna, press release;</p> <p>* info-camapgin, scheduled for 2007 (March 8th-June 2nd) preparations for nation-wide info-campaign for the rights of (migrant) sexworkers with members of the national network;</p> <p>* prep-meetings European soccer championship 2008 preparations for cross-border co-operations (Switzerland) regarding the European soccer championship 2008 in Austria</p> <p>NUMBER OF NETWORK MEMBERS</p> <p>15</p> <p>NETWORK MEMBERS</p> <p>See Appendix 1</p> <p>2005</p> <p>* International Whore Day, 2nd June 2005 common activity with members of the national network in Vienna, press release;</p> <p>* Evaluation meetings, meetings after the national events with members of the national network to analyse the effects of the new "immigration law package" (asylum and immigration law) on the working and living conditions of migrant sexworkers;</p> <p>* Round Table, 1st December 2005 Round table on the occasion of World Aids Day in Graz on: No Right to Health? Expert round on the consequences of the legal situation (immigration law, asylum law) on the situation and health of sexworkers.</p> <p>* common letter to the Minister of Interior and protest-letter-action, February 2005 on the situation of Romanian sexworkers (after a decision not to grant the "prostitution visa" to Romanian women);</p> <p>* common letter to the Minister of Interior, December 2005 on the situation of non-EU migrant sexworkers after the implementation of the new immigration legislation and the abolishment of the "prostitution visa" (with 1st January 2006);</p> <p>NUMBER OF NETWORK MEMBERS</p> <p>15 (by December 2005)</p> <p>NETWORK MEMBERS</p> <p>See Appendix 1</p> <p>Summary of national event</p>
--	--

2006

- * International Whore Day, 2nd June 2006
common activity with members of the national network in Vienna, incl. press work;
- * Workshop on Sexwork, 26th October 2006
workshop within the frame of a feminist conference organised by Frauenhertz (Wien);
- * "wärmespender" (www.waermespender.at), 24th November-23rd December 2006
benefit event for the support of the rights of (migrant) sexworkers in Vienna, incl. press work;

2005

- * International Whore Day, 2nd June 2005
common activity with members of the national network in Vienna, incl. press work;
- * SexWork Socio-political Meaning – Political Reality
10th annual LEFÖ educational seminar
(from June 23rd-25th 2005, the 10th LEFÖ educational seminar took place on the issue of SexWork / Socio-political Meaning and Political Reality)

2005+2006: Aims of the event

- * to provide space for and access to (translateral) discussions on the issue of sexwork and sexworkers' rights
- * to bring together individuals and organisations working with women, migrants and sexworkers and provide a regional platform
- * to establish a network of individuals and organisations active in the field of rights protection
- * to discuss different aspects of sexwork, covering a broad range of usually neglected issues (historical and socio-political aspects and the issue of clients of sexworkers)
- * to involve experts from an academic background, as well as sexworkers and rights activists to find common ground in the work to improve working and living conditions for sexworkers
- * to sensitise individuals and organisations for the issue of (migrant) sexworkers and to find allies in the fight for their rights
- * to strengthen a national and regional platform

Evaluation of the event

2006

- the national event on 2nd June became a regular activity and connects the European sexworkers' movement to a national/local context
- the workshop in the frame of the feminist conference was an important input to sensitise parts of the national feminist movement for issues around sexwork and for (migrant) sexworkers' rights
- we consider it a success that we managed to focus the attention on the rights of (migrant) sexworkers throughout the event "wärmespender" (24th November-23rd December) which gathered a considerable

	<p>amount of media attention and was probably the most successful of the “wärmesponder suppe+soul” events so far</p> <p>2005</p> <p>The seminar showed, once more, the importance of cross-border (socio-) political work on the issue of SexW. This is the only mean – for experts and actors – to achieve a gradual improvement of sexworkers’ rights. It was agreed that public debate and discussion were crucial to the improvement of living and working conditions of sexworkers everywhere.</p>
	See Appendix 3: National Network members & Appendix 4: Participants in national
7.	BI-LATERAL & MULTI-LATERAL EXCHANGES
	Summary of exchange , including aims, activities and learning outcomes
	<p>The exchange visit between LEFÖ and Odysseus that took place on November 10th 2006 (in Bratislava) is a result of a long-lasting co-operation between the two partner organisations. Exchange and common activities (outreach work) during previous Regional Commission Meetings as well as co-operation in the production of an information leaflet for Slovak sexworkers about work regulations in Vienna fostered the development of a common understanding of the different situations in the two countries and intensified the need for closer co-operation comparing and evaluating the situation of migrant sexworkers in general and Slovak sexworkers in particular.</p> <p>As part of the same Regional Commission, the exchange and co-operation also supports an understanding of regional specificities and developments.</p> <p>LEFÖ/TAMPEP Austria (throughout the course of TAMPEP 7 and evaluating the data of the various mappings) assessed that 23% of sexworkers in Austria are from CEE countries. Since the EU-accession in 2004, women especially from the neighboring new EU-member countries may legally work in the Austrian sex-industry as self-employed registered sexworkers. At the same time, Austria is upholding restrictions regarding access to the labour market for most of the new EU-members, with a maximum prolongation of these restrictions for up to 7 years.</p> <p>In this situation, women have chosen different forms of engaging in sex work: there are women who want to move to Austria and settle down (some with their families), there are women commuting daily between their country of origin and their area of work in Austria, women who come to Austria specifically at week-ends for work, women who want to work in Austria for a certain period of time in order to raise money and will live in Austria during that time, women who work in street prostitution, women who work indoors in bars/brothels, studios or apartments. Crucial for the assessment of their situation and needs is access to the women through cultural mediation and an understanding of the specific working and living conditions in their countries of origin, as well as an analysis of factors contributing to the overall political, legal, economic and gender-specific situation.</p> <p>Due to this, the aims of the exchange visit were:</p> <ul style="list-style-type: none"> - to assess the situation of Slovak sexworkers in Bratislava - to compare the situation of Slovak sexworkers in Slovakia/Bratislava and Austria/Vienna - to understand the background, the working and living conditions of Slovak sexworkers - to exchange on the methodologies and work approaches between the partner organisations (esp. mobile ambulance and centre/“club”) - to carry out common activities (outreach, streetwork) - to monitor the situation in the border region - to intensify cross-border and regional co-operation - to develop further co-operation projects <p>Main activities included:</p>

	<ul style="list-style-type: none"> - presentation of the organisations and their different work areas - exchange on the specific country situation and the needs of the target group - inspection of the mobile ambulance - visit to the underground passage club - observation of the street work area <p>Learning outcomes:</p> <ul style="list-style-type: none"> - usefulness and success of adequate means (tailored to the specific local context) of contacting sexworkers (mobile ambulance and underground passage club) - need for more resources to cover other areas of work (outreach in indoor prostitution, assessment of situation of migrant sexworkers in Slovakia, more capacities for streetwork, e.g. in the border area) - high level of social stigmatisation and legal discrimination of sexworkers and resulting violence against and marginalisation of sexworkers, with horrendous consequences especially intensifying for members of already stigmatised groups (e.g. Roma women)
8.	SERVICE MAPPING
	Summary of public health care services
	<p>Due to the Austrian system of registration, official/public health care services only obtain data of registered sexworkers. This creates “blind spots” in the mappings.</p> <p>Public health care service institutions in Austria on a municipal/regional level are subsections of public administration (Magistratsabteilung or Bezirkshauptmannschaft). Registered sexworkers (who must have social insurance) have to register at the security direction of the police (Vienna) or a magistrate. With this registration, their data is automatically transmitted to the relevant health care institution. Here, it is no longer possible to differentiate between the migratory status of the women as this information is not vital to the health service institutions. It also eliminates the question whether the service is anonymous. It might be confidential but it is compulsory. For registered sexworkers, the examination costs are covered. At the same time, they have to pay the laboratory costs themselves – even though they do have (must have!) health insurance.</p> <p>In Vienna, non-registered sexworkers can also access the services of the public health care office.</p> <p>Not every treatment that is listed in the questionnaire as “service” is a voluntary offer. There are binding laws regarding the work of sexworkers in Austria that include regular compulsory health care check (which can be once a week or once every two weeks).</p> <p>Although some services are mandatory by law, not every service is being performed at every institution. The services vary and there are no standard guidelines to the offer of services. This is because the legal regulations differ from province to province. Due to the lack of nationally standardized guidelines, a standard evaluation is not possible.</p> <p>It is noticeable in the completed questionnaires that abortion, maternity care, general medical care, dental care, ophthalmic care and gynaecological care are not being offered at all. These examinations are being made by doctors who either charge non-insured persons or are contractual partners of the Austrian health funds which then provide the money for the examination, preconditioned that one has social insurance.</p>
	Summary of public social care services
	<p>The same rules as to health care services apply to public social care service. Service offers vary from province to province and there are certain restrictions regarding accessibility.</p> <p>Generally, legal advice, also on a confidential basis, is mostly provided for migrant sexworkers. In some cases referrals for psychological counselling are being made.</p>

	Referrals for language courses and other courses can be given, however this is not the case at every institution.
	See Appendix 5: Service providers mapping

Appendix 1: Prostitution Mapping Questionnaire participants

<i>Organisation or other source of information</i>	Remit health service, sex work project, social service, law enforcement, academic, media.	Questionnaire		
		SENT	FOLLOWED UP	RETURNED
Aids Hilfe Wien	Health service	July	✓	-
Steirische Aids-Hilfe	Health service	July	✓	✓
Aids Hilfe Oberösterreich	Health service	July	✓	-
Aids Hilfe Tirol	Health service	July	✓	-
Aids Hilfe Vorarlberg	Health service	July	✓	✓
Aidshilfe Salzburg	Health service	July	✓	-
aidsHilfe Kärnten	Health service	July	✓	-
Gesundheitsamt Wien (STD-Ambulatorium)	Municipal health office	July	✓	✓
Gesundheitsamt Eisenstadt Umgebung	Municipal health office	July	✓	✓
Gesundheitsamt, Magistrat Graz	Municipal health office	July	✓	✓
Magistrat St. Pölten, Abt. V Gesundheitsverwaltung	Municipal health office	July	✓	-
Gesundheitsamt Krems, BH Krems	Municipal health office	July	✓	✓
Gesundheitsamt, Magistrat Wiener Neustadt	Municipal health office	July	✓	✓
Gesundheitsamt, Magistrat Linz	Municipal health office	July	✓	
Gesundheitsamt, Magistrat Steyr	Municipal health office	July	✓	-
Gesundheitsamt Innsbruck	Municipal health office	July	✓	-
Gesundheitsamt Bregenz	Municipal health office	July	✓	-
Gesundheitsamt, Magistrat Salzburg	Municipal health office	July	✓	✓
Gesundheitsamt Klagenfurt	Municipal health office	July	✓	-
Caritas der Erzdiözese Wien	Social service	July	✓	-
Caritas Eisenstadt	Social service	July	✓	-
Caritas Graz	Social service	July	✓	-
Caritas der Diözese St. Pölten	Social service	July	✓	-
Caritas Oberösterreich	Social service	July	✓	-
Caritas Innsbruck	Social service	July	✓	-
Caritas Zentrale Vorarlberg	Social service	July	✓	-
Caritas Zentrale Salzburg	Social service	July	✓	-
Caritas Klagenfurt	Social service	July	✓	-
Frauenabteilung der Stadt Wien, MA 57	Women's and equality offices of the province/city	July	✓	-
Burgenländische Landesregierung, Büro Frauen u. Gleichbehandlung	Women's and equality offices of the province/city	July	✓	✓
Frauenbeauftragte der Stadt Graz	Women's and equality offices of the province/city	July	✓	-
Amt der Steiermärkischen Landesregierung	Women's and equality offices of the province/city	July	✓	-
Unabhängige Frauenbeauftragte der Stadt Graz	Women's and equality offices of the province/city	July	✓	-
Amt der Niederösterreichischen Landesregierung Frauenreferat	Women's and equality offices of the province/city	July	✓	✓
Amt der OÖ Landesregierung Büro für Frauenfragen	Women's and equality offices of the province/city	July	✓	-
Linzer Frauenbüro	Women's and equality offices of the	July	✓	-

	province/city			
Frauenreferat des Landes Tirol	Women's and equality offices of the province/city	July	✓	-
Stadtmagistrat Innsbruck Referat Jugend, Frau und Familie	Women's and equality offices of the province/city	July	✓	-
Frauenreferat im Amt der Vorarlberger Landesregierung	Women's and equality offices of the province/city	July	✓	-
Frauenfragen, Gleichbehandlung, Land Salzburg Referat 2/04	Women's and equality offices of the province/city	July	✓	-
Frauenreferat des Landes Kärnten	Women's and equality offices of the province/city	July	✓	-
Frauenreferat der Stadt Villach	Women's and equality offices of the province/city	July	✓	-
Amt d. Wiener Landesregierung, Landessanitätsdirektion	Provincial health directorates	July	✓	-
Burgenländische Landesregierung, Abt. 6, Hauptreferat Gesundheit, Familie, Sport	Provincial health directorates	July	✓	8 x ✓
Steiermärkische Landesregierung, Fachabteilung für Gesundheit	Provincial health directorates	July	✓	11 x ✓
Niederöstr. Landesregierung GS1-Gesundheitswesen	Provincial health directorates	July	✓	-
Oberöstr. Landesregierung, Landessanitätsdir.	Provincial health directorates	July	✓	3 x ✓
Amt d. Tiroler Landesregierung, Landessanitätsdirektion	Provincial health directorates	July	✓	-
Amt d. Vorarlberger Landesregierung, Abteilung Sanitätsangelegenheiten	Provincial health directorates	July	✓	-
Amt d. Salzburgischen Landesregierung, Landessanitätsdirektion	Provincial health directorates	July	✓	6 x ✓
Amt d. Kärntner Landesregierung Abteilung 12, Sanitätswesen	Provincial health directorates	July	✓	✓
KK Wien Zentrum Ost (Dr. Ruisz)	Police	July	✓	-
KK Wien Mitte (Mag. Löscher)	Police	July	✓	-
KK Wien Süd (Mag. Edelbacher)	Police	July	✓	-
KK Wien West (Mag. Koppensteiner)	Police	July	✓	-
KK Wien Nord (Mag. Ebner)	Police	July	✓	-
Die Tür (Eisenstadt)	Women's organisation	July	✓	-
Die Tür (Mattersburg)	Women's organisation	July	✓	-
Frauen für Frauen (Oberwart)	Women's organisation	July	✓	-
Frauen für Frauen (Güssing)	Women's organisation	July	✓	-
Frauenberatungsstelle Oberpullendorf	Women's organisation	July	✓	-
Der Lichtblick	Women's organisation	July	✓	-
Belladonna	Women's organisation	July	✓	-
WIFF Frauen- und Familienberatung	Women's organisation	July	✓	-
Frauenberatung Villach	Women's organisation	July	✓	✓
Mädchenzentrum Klagenfurt	Women's organisation	July	✓	-
Frauen für Frauen	Women's organisation	July	✓	-
Kassandra	Women's organisation	July	✓	-
Wendepunkt	Women's organisation	July	✓	-
Frauenberatung Zwetl	Women's organisation	July	✓	✓
Frauentreffpunkt Mostviertel	Women's organisation	July	✓	-
Frauenforum Gänserndorf	Women's organisation	July	✓	✓
UNIDA Coaching	Women's organisation	July	✓	-
Freiraum	Women's organisation	July	✓	-
Maiz	Migrant women, sexworkers	July	✓	✓
Frauentreff Rohrbach	Women's organisation	July	✓	-
ARGE SIE	Women's organisation	July	✓	-

Frauenberatungsstelle Babsi	Women's organisation	July	✓	-
Lena	Social services, national sexworkers	July	✓	-
Zebra	Migrants organisation	July	✓	-
Frauenservice Graz	Women's organisation	July	✓	-
Mafalda	Women's organisation	July	✓	-
Danaida	Migrant women	July	✓	-
Frauen im Brennpunkt Innsbruck	Women's organisation	July	✓	-
BASIS-Zentrum für Frauen im Außerfern	Women's organisation	July	✓	-
ARGE Schubhaft Innsbruck	Social service, migrants	July	✓	-
Verein Frauentreffpunkt	Women's organisation	July	✓	-
Evangelischer Flüchtlingsdienst	Social service, migrants	July	✓	-
Orient Express	Migrant women	July	✓	✓
AÖF (WAVE)	Women's organisation	July	✓	-
Peregrina	Migrant women	July	✓	-
Afrikanische Frauenorganisation	Migrant women	July	✓	-
Caravan – Projekt Integrationshaus	Refugee youth	July	✓	-
Frauenberatungsstellen des ABZ Wien	Women's organisation	July	✓	-
Miteinander Lernen – Birlikte Ögrenelim	Migrant women	July	✓	✓
Sprungbrett	Women's organisation	July	✓	-
Tamar – Beratungsstelle für sexuell mißbrauchte Mädchen/Frauen	Women's organisation	July	✓	-
Frauen beraten Frauen	Women's organisation	July	✓	-
Notruf (Frauenbüro der Stadt Wien MA57)	Women	July	✓	-

Appendix 2: CDrom promotion and distribution

<i>Organisation</i>	Promotional material sent	CDrom sent	Evaluation form sent	Evaluation form returned
AIDSHilfe Wien	X	X	X	
MAIZ (Linz)	X	X	X	X
Frauenservice Graz	X	X	X	
Danaida	X	X	X	
Verein Frauentreffpunkt	X	X	X	X
Peregrina (Vienna)	X	X	X	X
CARAVAN – Projekt Integrationshaus	X	X	X	
SFC Schwarze Frauen Community	X	X	X	
Municipal Health Office Graz	X	X	X	
Municipal Health Office Vienna	X	X	X	
Fonds Soziales Wien – Women's Health Officer of the City of Vienna	X	X	X	

Appendix 3: National Network members

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
MAIZ	Linz	Migrant women, migrant sexworkers
DANAIDA	Graz	Migrant women
Aids-Hilfe	Graz	Health
CARITAS Sozialberatung	Salzburg	Migrants/refugees
CARITAS Asylzentrum	Wien	Asylum seekers
CARITAS	Graz	Social service
Peregrina	Vienna	Migrant women
Orient Express	Vienna	Migrant women
ZEBRA	Graz	Migrants

Frauenservice	Graz	Women
AÖF Autonome Österr. Frauenhäuser	Vienna	Women's shelter
Aids-Hilfe	Vienna	Health
Integrationshaus/CARAVAN	Vienna	Refugee youth
Evangelisches Hilfswerk in Österreich	Vienna	Health
Kassandra	Mödling	Women

Appendix 4: Participants in national event (seminar 2005)

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
MAIZ Autonomes Integrationszentrum von und für Migrantinnen	Linz	migrant women, sexworkers
Erstes Wiener Frauenhaus	Vienna	women, violence
Peregrina Bildungs-, Beratungs- und Therapiezentrum für Immigrantinnen	Vienna	migrant women
Arbeiterkammer – Frauenreferat	Vienna	workers, women
Context – Zentrum für Prostitutionsstudien	Frankfurt	sexwork project
HighLights Agentur für Begleitung, Service, Vermittlung und Bildung	Berlin	sexwork project
CARITAS Sozialberatung	Salzburg	social services
CARITAS Asylzentrum	Vienna	asylum seekers
IOM	Vienna	migration
Orient Express Beratungs-, Bildungs- und Kulturinitiative	Vienna	migrant women
Xenia Beratungsstelle für Frauen im Sexgewerbe	Bern	sexwork project
3. Wiener Frauenhaus	Vienna	women, violence
Kirchliche Gassenarbeit	Bern	streetwork project
Individuals	Vienna, Bern	academic, training

Appendix 5: service providers mapping

1. Works with sex workers 2. Works with migrant sex workers	3. Has multi-lingual resources 4. Uses interpreters			5. Uses cultural mediators		Questionnaire	
<i>Organisations</i>	1	2	3	4	5	SENT	RETURNED
Aidshilfe Wien			x	x	x	x	x
Steirische Aids Hilfe			x			x	x

Aids Hilfe Oberösterreich						X	
Aids Hilfe Vorarlberg						X	
Aids Hilfe Salzburg			X	X	X	X	X
Aids Hilfe Tirol			X			X	X
Aids Hilfe Kärnten			X			X	X
Amt der Wr. Landesregierung, MA 15						X	
Amt der Burgenländischen Landesregierung- Abteilung 6						X	
Amt der Steiermärkischen Landesregierung- Gesundheitswesen						X	
Amt der Niederösterreichischen Landesregierung GS 1						X	
Amt der Oberösterreichischen Abteilung Landessanitätsdirektion						X	X
Amt der Tiroler Landesregierung Landessanitätsdirektion						X	
Amt der Vorarlberger Landesregierung Abteilung Sanitätsangelegenheit						X	
Amt der Salzburger Landesregierung Landessanitätsdirektion						X	
Amt der Kärntner Landesregierung- Abteilung 12 Sanitätswesen						X	X
Bezirkshauptmannschaft Weiz			X			X	X
Bezirkshauptmannschaft Bregenz						X	
Bezirkshauptmannschaft Klagenfurt						X	
Bezirkshauptmannschaft Mürzzuschlag			X			X	X
Bezirkshauptmannschaft Mattersburg						X	X
Bezirkshauptmannschaft Jennersdorf						X	
Bezirkshauptmannschaft Deutschlandsberg						X	
Landessanitätsdirektion Leibnitz						X	
Bezirkshauptmannschaft Graz Umgebung						X	
Bezirkshauptmannschaft Liezen						X	
Bezirkshauptmannschaft Bruck an der Mur						X	
Bezirkshauptmannschaft Weiz						X	
Sanität/ Gesundheitsamt Gröbming						X	
Gesundheitsamt Güssing						X	
Gesundheitsamst Magistrat Graz						X	
Magistrat der Landeshauptstadt St. Pölten, Abt. V, Gesundheitsverwaltung						X	X
Gesundheitsamt Krems, BH Krems			X			X	X
Gesundheitsamt, Magistrat Wiener Neustadt						X	
Gesundheitsamt, Magistrat der Landeshauptstadt Linz			X		X	X	X
Gesundheitsamt, Magistrat der Stadt Steyr						X	
Gesundheitsamt Innsbruck						X	
Gesundheitsamt, Magistrat der Landeshauptstadt Salzburg						X	
Gesundheitsamt Klagenfurt						X	
Gesundheitsamt Eisenstadt Umgebung						X	
MAIZ						X	
LENA						X	
Krankenhaus Stiftung Maria Ebene			X			X	X

TAMPEP 7 National Partners Update

National Coordinator Name	Maria Cristina Boidi
National Coordinator Tel No	+43-1-581 18 81
National Coordinator Mobile No	None
National Coordinator Email	office@lefoe.at
Organisation Name	LEFÖ Beratung, Bildung und Begleitung für Migrantinnen Information, Education and Support for Migrant Women
Address	Kettenbrückengasse 15/II/4, 1050 Wien, Austria
Organisation Fax	+43-1-581 18 82
Organisation Tel no	+43-1-581 18 81
Organisation Email	office@lefoe.at
Organisation website	http://www.lefoe.at

ITALY National Final Report

Person completing report

Pia Covre

In completing this final report, please collate information from the final work programme reports.

Please also complete the information requested in the Appendices.

1.	<p>ORGANISATIONAL OVERVIEW, including aims, staff & volunteer team, summary of services provided and number of sex workers in contact with organisation</p> <p>The Committee for the Civil Rights of Prostitutes (CDCP) is a non-profit association founded in 1982 by sex workers. In 2004, it was registered as an ONLUS organisation, a non-lucre socially useful organisation. Its main objective is to provide assistance to prostitutes.</p> <p>The Committee organises campaigns to heighten public sensitivity, which are aimed at raising public awareness concerning the dignity and rights of sex workers; promoting vocational training courses to empower and to improve the quality of life of women prostitutes.</p> <p>The Committee also acts as an interlocutor with political forces interested in changing the law on prostitution. The changes that we are fighting would depenalise prostitution, abolish mandatory health checks and any sort of indexing, fight against the exploitation and trafficking of human beings coerced into sexual activities, and obtain the recognition and the protection of the civil rights of sex workers. In addition, we demand modification of the laws that obstruct their complete social integration.</p> <p>Since 1986, in general, the Committee's members have worked in campaigns to disseminate AIDS-information and to implement reduction-of-harm measures, which is aimed at sex workers. In 1995, it started assisting trafficked persons by promoting self-emancipation and, in 1999, when Article 18 of the immigration law for victims of trafficking came into force; it opened a shelter centre for the victims of trafficking in Trieste.</p> <p>The Committee has implemented and promoted TAMPEP methodology right from its first year of creation by realising, assisting and monitoring a wide range of multidisciplinary projects for sex workers in Italy. Recently it conducted a nation-wide research on the new trends in prostitution.</p> <p>It has carried out mobile street-interventions with several Municipalities (Venice, Modena Trieste, Pordenone, etc.), the Province of Turin, with the aim of satisfying the needs and discovering the difficulties that sex workers face, of promoting health-prevention measures and implementing applicable methodologies, of initiating social consciousness and publicity campaigns concerning the issue of trafficking, HIV/AIDs and STI prevention among migrant sex workers.</p> <p>It has also worked with several prestigious institutions, such as the Health Ministry during campaigns against the diffusion of HIV/AIDS, and is a permanent member of the NFP (National Focal Point of AIDS and Mobility), a policy and observatory board of the National Institute of Health for HIV/AIDS prevention.</p> <p>It organises training courses for peer educators, cultural mediators, street, social-service, and health-care operatives in order to make social-service organisations aware of the intervention methods that TAMPEP employs.</p> <p>In December 2006, the Ministry of Health invited exponents from Tampep to attend its headquarters in order to participate as a member organisation in a new commission of experts constituted to devise and implement policy concerning the issue of <i>Salute e Immigrazione</i> (Health and Immigration). TAMPEP was the only non-governmental organisation admitted to this Commission whose other constituent members are from the public sector.</p> <p>The Commission's tasks are to sustain the Ministry's initiative in promoting and safeguarding the health of all foreigners present within national territory—<i>I lavori della Commissione dovranno approfondire prioritariamente: la salute nell'area materno infantile, la salute sui luoghi di lavoro, la salute mentale e i disagi psichici, le malattie legate alle esperienze di prostituzione, tratta e senza fissa dimora, le mutilazioni genitali femminili,...</i>—“With utmost priority the workings of the Commission shall thoroughly investigate: health in the area of maternity and infant care and treatment, health in the workplace, mental health and psychic disorders, the maladies stemming from the experiences of prostitution, trafficking, and being homeless, and the mutilations of female genitalia...”</p> <p>Through its field work, which is carried out in concert with Tampep Onlus in Turin, Stella Polare in Trieste, Princessa in Sanremo, the CDCP analyses several zones where prostitution is practised and studies the changes that are taking place in migratory patterns and trends, to include the</p>
----	---

	<p>legal, social, and working conditions of migrant workers.</p> <p>The following services are available to the sex-worker services-user:</p> <p>We provide them with accurate information about their overall and specific rights, with regard to health and work, to include expert advice on legal and health matters. Also the services we provide include work-orientation and physical accompaniment to/from health facilities, street-intervention outreach, visits to indoor prostitutes, providing shelter for the female victims of trafficking, the reconstruction of missing or lost official documents, legal assistance. And we offer programmes that facilitate inserting our services-users into tenable social, work, and housing environments.</p> <p>We also offer training for social-assistance operatives who deal with sex work and trafficking, to include peer-educator and cultural-mediator training, which thoroughly informs these workers about all the aspects of sex work and health prevention concerning AIDS and sexually transmitted infections (STIs).</p> <p>We are actively engaged in a number of ways in the promotion of human and civil rights and social policies that assist sex workers and migrants, as well as conducting activities that sharpen awareness and that raise social consciousness of the public at large through publicity campaigns, conferences, and press conferences.</p> <p>the equipe of Tampep in the several intervention of outreach, both in street prostitution and indoor prostitution, is contacting a number between 800 to 1000 Sex Worker every year. In addition a certain number of trafficked women are sheltered.</p> <p>TAMPEP's staffs comprise a regional Co-ordinatrix for the South of Europe and a national Co-ordinatrix, a Co-ordinatrix for the activities of shelter and street-intervention outreach programmes, four cultural mediators, two educators, and a psychologist.</p> <p>Besides, each year we have the collaboration of some interns and volunteers who collaborate in the activities of the our association and Project TAMPEP.</p>
2.	<p>NATIONAL LEGAL FRAMEWORK including summary of prostitution, migration and trafficking legislation</p>

	<p>In its time, the Merlin Law of 1958 guaranteed the freedom of women prostitutes from State-sponsored brothels and obligatory health and police controls. However, we are dealing with a law that contains abolitionist tendencies. As a result, it punishes aiding and abetting prostitution, luring clients, (an act that has been de-penalised and reduced to a fineable offence since 1999), and it excludes the possibility to organise prostitution in closed surroundings (public localities, clubs, and apartments). In reality, the law has been interpreted in a very repressive manner for many years, as evidenced by many of the verdicts handed down by the courts.</p> <p>Therefore, prostitution is mostly carried out on the streets. For foreigners there are no specific prohibitions against the practice of prostitution, nor is there is a law that affirms the right to practice prostitution. The situation of immigrant women that practice prostitution is much worse than that of Italian women because the foreign women are often illegal immigrants.</p> <p>The law on immigration (Law 40/1998) has introduced guaranties for immigrants. Therefore, there is guaranteed access to emergency health services, specialists, maternity/infant care, and preventive medicine, even for those that are clandestine immigrants. Article 18 (formerly Article.16) of this law promotes dispensing aid to victims of trafficking and finances programmes of social reinsertion, with the guaranty of a sojourner's permit for work. This social largesse should be equally guaranteed to even the women that do not denounce their exploiters or that find themselves in peril of life and limb. However, application of the law in this sense encounters resistance at the level of the local State Police offices and the magistracy. The scope of this article is national but, on the part of local law enforcement organisms, there is wide discretion in interpreting its individual application.</p> <p>Women that benefit from the safeguards guarantied by Article 18 are victims of a bureaucratic slowdown, which is evidenced by a snail's pace in obtaining the sojourner's permit and within the juridical apparatus, as well as the too-hasty release of the very persons that they have denounced for the trafficking of human beings. These bureaucratic hurdles represent the major problems that all the associations that work in this field must continually resolve. The Berlusconi Government has modified the law on immigration with very severe and pejorative measures. For the moment, the continuation of health assistance for irregular immigrants has also been confirmed.</p> <p>On 11 August 2003, the Italian parliament also approved a law against the trafficking of human beings and reducing a person into a state of slavery (the so-called Article 13), under which punishment was made severer, with imprisonment for up to a maximum of 15 years, in order to sustain the aims of Article 18 for the protection of the victims.</p> <p>In office since 2006, the new Government's platform calls for changes in some parts of the law on immigration. On 28 December 2006, the Government promulgated a decree of law, n° 300, which extends the programmes of assistance provisioned under article 18 to citizens of the EU, which regards the law against trafficking and extending assistance to victims. This urgent measure was in response to Romania's and Bulgaria's entry into the EU, with effect 1 January 2007. This measure has been adopted to gave assistance to Romanian citizens, which represented 30% of the all the persons found in shelters. This extension greatly changes the scenario and increases the possibilities for intervention to protect trafficked and exploited sex workers.</p>
3.	<p>OVERVIEW OF ANY POLITICAL CHANGES, including changes in legislation, welfare/health systems and societal attitudes</p>
	<p>There have been no changes to the Italian law on prostitution. After several months of parliamentary debate on prostitution, which was seemingly bent on approving a law against prostitution, came to a halt in 2004. Notwithstanding the pressure from the openly racist and conservative political parties within his coalition, the Berlusconi government was unable to have its proposed abolitionist law on prostitution approved.</p> <p>A new decree issued by the government is aimed at shortening the period of residency necessary to obtain a long-term sojourner's permit or Italian citizenship. Hopefully, a number of sex workers will be able to legalise their position in Italy.</p> <p>Since the passage of the so-called Bossi-Fini law, in general, the application of the immigration law against illegal immigrants, and especially migrant sex workers, has become severer and regularisation has become more difficult.</p> <p>It has led to increased repression and to the arrest of illegal aliens who have been detained in temporary detention centres (CPTs) and subsequently expelled.</p> <p>Other legislative changes include a longer waiting period for regularising one's status in Italy, low entry quotas for migrants in Italy, severer controls of marriages between Italian citizens and</p>

	<p>foreign women, which can lead to the denial of the sojourner's permit (permit-of-stay) in suspect marriages. (In such cases, the woman remains on stand-by.).</p> <p>Changes to the Bossi-Fini law have been undertaken since mid-2006. The new government issued a decree, which permitted the regularisation of 350,000 immigrants, who had been excluded from the 2006 entry quota.</p> <p>The entire regularisation process for illegal aliens is being reviewed. Proposals have been tabled to change the period of residency necessary to obtain Italian citizenship, to reduce the number of permanent permits-of-stay, and to broaden the right to reunite families to other categories. In light of all these changes, it is hoped that acts of repression will subside; however, local authorities determine the application of policy.</p>
4.	PROSTITUTION MAPPING
	<i>Summary of prostitution scene, including any changes in the last 2 years</i>

	<p>There are a discreet number of sex workers who come from the Balkan countries such as Albania, the former Yugoslavia and Kosovo. In general, the Albanians are old acquaintances and there are no new arrivals from Albania. Sex workers from Albania have become legal residents and have established themselves in Italy and now work indoors.</p> <p>The presence of African women is still high and totals 34% on a national scale. The majority of them come from Nigeria. Their presence varies from city to city. In Milan, for example, data from ALA and Caritas report 25.3% of the sex workers come from Romania and Latin America, whereas only 13.2% comes from Nigeria. Data collected by the Caritas Ambrosiana indicates an 18% Uruguayan presence in the sex market at Milan. Nigerian women work only in the streets, whereas in Sicily other African nationalities include Moroccan and Tunisian women, who work mostly indoors and for their fellow citizens.</p> <p>In some cities we attempted to carry out a census of male sex workers. However, systematic data collection for male sex workers is lacking, most probably because this phenomenon, dealing mostly with men, is considered to be part and parcel of the gay world, which is a separate market, becoming more and more visible and on the rise, not only amongst Italians, but also young Romanians and Moroccans are involved.</p> <p>In some cities, like Turin, where a systematic census was carried out within flats, there is a high number of Brazilians and Colombians who have high mobility in several Italian cities. (There is a network of flats where these women stay for about two weeks and pay very high rents.) They have permanent adverts in newspapers and the internet. Sometimes mobile phone numbers are exchanged from one flat to another or from one woman to another. (Some of these women work with three mobile phones at a time.)</p> <p>With adverts that disguise them as oriental masseuses, recently appearing are several Chinese women who in reality offer sexual services. This turn of events has also been confirmed by the police who have arrested some Chinese nationals for trafficking. The Chinese presence appears to be rapidly on the rise. In only one year, at Turin, at least 37 adverts were found in a single newspaper edition, although the number of women working indoors is higher. We have visited some Chinese sex workers during the course of TAMPEP street-intervention outreach unit. Most of these were women were illegal immigrants, with the exception of two of them who had regular sojourner's permits and were the proprietors and managers of some flats. Here we are talking about adult women about 40 years old who had come from the North of China. They do not admit to practising prostitution, but they readily qualify themselves as masseuses. They do not accept the use of the condom because they use the IUD. They often change cities because they work indoors in apartments, which are assigned to them by a Chinese 'agency', which organises the work for the Chinese in Milan. We have made telephone calls, pretending to be clients, and we have confirmed that they are indeed SWs. Besides the problem of safe sex, which is not practised, there is also the problem of access to health-care facilities, inasmuch as these women use an illegal circuit of Chinese doctors. In 2006 there were many arrests, associated with the use of illegal Chinese 'ambulatory clinics', where abortions and other procedures were carried out. In general, the Chinese do not speak Italian or other languages, and it is absolutely indispensable to have a cultural mediator present in order to talk with them. Besides this, as our cultural mediator recounts, there are many of them who speak only regional dialects, which are very difficult to understand, and are unable to speak Mandarin.</p> <p>We distributed leaflets in Chinese that had been made with the consultancy of sex workers in Hong Kong belong the Zi Teng Association.</p> <p>As it appears, women, from countries which recently joined the EU, do not enjoy much freedom from the criminal organisations, even though they are no longer illegal immigrants according to Italian law. Thanks to reports from Article. 18 projects, citizens to whom shelter has been given are mostly Romanians, which reflect the strong exertion that these criminal organisations have over them. Several criminal groups are made up of Albanians, Romanians, and Italians, as reflected by recent arrests.</p>
	Summary of sex workers situation , including any significant differences between national and migrant sex workers and changes in the last 2 years
	As for legislative changes that have had an impact on national sex workers, the new Minister of Health, Livia Turco, recently tried to change the Fini-Giovanardi law on the use of drugs,

	<p>which imposed a minimum quantity of drug for personal use. This is a positive note as the previous law worsened the conditions of drug-users sex workers (mainly Italian). Repression against indoor sex workers working in flats is moderate, but unfortunately many actions against alien sex workers are conducted from police in flats and Night club.</p> <p>As for migrants sex workers, 2005 witnessed the full application of the Bossi-Fini immigration law, which was passed in 2004, treats illegal migrants harshly and calls for their detainment in temporary detention centres and peremptory expulsion to their country of origin, without taking into account attendance circumstances.</p>
	Summary of mobility , including any changes in the last 2 years
	<p>Harsh and continuous police raids in the last two years have pushed several women to work indoors and, as a consequence, the overall tendency is an increase in indoor sex work (night clubs, bars or flats), which is illegal. Working in the streets has become evermore difficult for all those who work there, especially illegal aliens. This chain of events undoubtedly has had a negative effect on sex workers' health and safety. Two of the main reasons for mobility are the need to escape from police raids and the mere fact of being an illegal resident alien, which in turn renders the sex worker highly vulnerable. In July 2006, the government decided to extend the regularisation of currently present illegal foreigners who applied for a sojourner's permit for work to be included in and to become part of the authorised annual flow of guest workers. Hopefully, this opportunity will render legal the current presence of hundreds of female sex workers. The entering in Europe in Jan 2007 of Romania and Bulgaria will change the condition of a large part of SW too.</p>
	Summary of service provision and policy , including any changes in the last 2 years
	<p>There have been important cuts on the financial side and, as a consequence, free health-care services have been reduced. A number of services are not provided without advance payment. This policy obviously excludes illegal migrants who have no means of paying for health-care services that are not considered urgent. Furthermore, these cuts undermine all the work that has been done by various NGOs to raise awareness about health issues among the migrant sex worker population.</p> <p>Although projects that support trafficked persons are still financed, their budgets have been drastically reduced and often the financing arrives late. The free toll number against trafficking was recently suspended due to a lack of funds, but after six months of closure, it is now being reopened (January 2007).</p>
	see Appendix 1: Prostitution Mapping Questionnaire participants
5.	TAMPEP 7 CDROM RESOURCE
	Summary of activities undertaken to promote and distribute the TAMPEP CDrom
	<p>Sent And distributed previous Cd-Rom to all participants during the presentation of the national campaign for immigrants;</p> <ul style="list-style-type: none"> • Distributed at the correlation meeting in Turin with Gruppo Abele; • Presented at the Equal partners "Emergendo" project meeting in Genova; • Presented in Verona at the training course for social operators Progetto Sirio; • Presented at the meeting on Prostitution and trafficking in Ferrara • Presented to the North-East Network of associations against trafficking • Presented at the meeting of the NFP at Rome • Sent to all the members of the national network and to all network projects for sex workers
	See Appendix 2: CDrom promotion and distribution
6.	NATIONAL NETWORKING & EVENTS
	Summary of national networking , including number of network members, types of organisations in the network and summary of activities

	<p>Throughout our years of work, many long-lasting collaborations and partnerships have taken root. And we have consolidated relationships with several NGO and Services in the Country. On account of our highly successful networking, we receive a horde of invitations to public meetings and conventions or we are asked to participate in numerous formal training events. Our network is composed of 37 associations, SW project, public services.</p> <p>In December 2006, the Ministry of Health invited exponents from Tampep to attend its headquarters in order to participate as a member organisation in a new commission of experts constituted to devise and implement policy concerning the issue of Health and Immigration. TAMPEP was the only non-governmental organisation admitted to this Commission whose other constituent members are from official governmental institutions</p> <p>We are members of the National Focal Point for AIDS and Mobility that is under the aegis of the Superior Institute of Health of the Ministry of Health.</p>
	Summary of national event
	<p>August 2005: Trieste As part of the scheduled events of the cultural week, a group of women's associations decided to organise two evenings dedicated to raising social consciousness concerning the themes of female migration and trafficking and prostitution as a condition of life. In order to heighten public sensibility and to raise social consciousness about social matters that concern women, social exclusion, racism, sexual and gender discrimination, we offered films and spectacles for public viewing. Therefore, on the first evening, the Committee for the Civil Rights of Prostitutes laid out the question of migration by having a group of women from the Ukraine perform ethnic song and dance in native costume that they themselves had made. This performance skilfully informed the public about the underlying factors—the living and working conditions within the country of origin—that constitute the reason why these women had made the painful choice to emigrate. On the second evening, we showed a video that illustrated the general living and working conditions of prostitutes here in Italy. Afterwards, there was a public discussion that gave the women cultural mediators and operatives of project TAMPEP that work in Trieste in the North Star project (Stella Polare) the opportunity to describe the way that they work for health prevention health and to hand out publications.</p> <p>01 August 2006: Trieste For the very same cultural month event, we presented a documentary, titled <i>Ni coupables, Ni victimes</i> (Neither Culpable, Neither Victims), that had presented at the International Conference on the Rights Sex Workers of Brussels in 2005. The authoresses of this documentary, who are from the Sexy Shock Project of Bologna, were also on hand for this presentation together with MIT, Tampep Onlus.</p> <p>On this occasion we also presented the Manifesto of Sex Workers. Within the network of the women's film review the social co-operative <i>Cassiopea</i>, an interprise project that TAMPEP/Stella Polare started up some years ago, and the <i>L'una e l'Altra</i> (The One and the Other) association, Kagipota-Kazipot, Goap, <i>Progetto Donna Salute Mentale</i> (Women's Mental Health Project) are also participants.</p>
	See Appendix 3: National Network members & Appendix 4: Participants in national
7.	BI-LATERAL & MULTI-LATERAL EXCHANGES
	Summary of exchange , including aims, activities and learning outcomes
	<p>Il Comitato per I Diritti Civili delle Prostitute visited its Spanish partner (Spanish Red Cross) on 13, 14, 15 June 2005</p> <p>Participated in outreach work in private apartments</p> <p>Met with the project's operators</p> <p>Held a public debate on sex work and sex-worker rights</p> <p>Visited our Romanian partner (ARAS) and met with all the branch teams throughout Romania from 12 to 15 May 2005.</p> <p>We held a seminar on peer-education</p> <p>Visited our German partner (Amnesty for Women) from 4 to 6 December 2005</p> <p>Experienced outreach work concerning indoor prostitution.</p> <p>Visited our partner in Portugal from 10 to 13 May 2006 and we took part at the street activity on HIV prevention in the region of Algarve together with the equipe running the National health programme of ministry of health.</p> <p>Participate at the intervention with the mobile ambulatory for testing and vaccination.</p> <p>A very good performed intervention in consideration that there's a lack of access for migrant SW at the public services</p>

	<p>Our primary aim is to enlarge our capability and to devise effective strategy to address a substantive change in trend and manner that is taking place in Italy with regard to prostitution. Prostitution is moving from the street to indoors. At the moment, in Italy, we have minimum experience in establishing contact with sex workers that work indoors.</p> <p>Exchange visits to Spain and Germany have shed light on effective procedures that we shall endeavour to adopt here in Italy to establish contact with and to assist the growing number of prostitutes that opt to work indoors.</p>
8.	SERVICE MAPPING
	Summary of public health care services
	<p>There have been no significant changes in the organisation of services, except for the huge cuts in health-care services by the local health board and the municipalities. As a result, the services available for either Italian or immigrants have been reduced. Health care and treatment is tailored according to cost and is not in consonance with a patient's need. All mapped services offer identical services to legal and illegal immigrants. The only difference is that illegal immigrants do not have a general practitioner. Presently, in order to obtain any public medical service one has to pay for it (the so-called "ticket").</p> <p>Even projects with special objectives that are destined to the less advantaged have difficulty in guaranteeing health assistance.</p> <p>However, on a note of optimism, interventions within public health facilities have not changed and, as a result, STI- and AIDS-prevention and treatment services are still being offered free of charge.</p>
	Summary of public social care services
	<p>In Italy public social assistance services are unavailable for irregular immigrants. Only private associations or volunteer or non-governmental organisations offer assistance.</p> <p>Even regular immigrants who work in Italy also encounter difficulties in integrating into the society because housing costs are very high and are practically out of control. Low salaries and the uncertainty of temporary job contracts have a negative effect on the psycho-physical well-being of a person.</p>
	See Appendix 5: Service providers mapping

Appendix 1: Prostitution Mapping Questionnaire participants

Organisation or other source of information	Remit health service, sex work project, social service, law enforcement, academic, media.	Questionnaire		
		SENT	FOLLOWED UP	RETURNED
Servizio Città e Prostituzione Free woman project - Comune di Venezia	Sex Work project and public social service	X	X	
LILA - Trento	Sex Work project	X	X	X
COOPERATIVA NUOVO VILLAGGIO - Padova	Sex Work project	X		
PROGETTO STELLA POLARE - Trieste	Sex Work project	X	X	X
TAMPEP ONLUS progetto Antares - Torino	Sex Work project	X	X	X
Parsec - Roma	Sex Work project	X	X	
LILA Roma	Sex Work project	X	X	
Coop Il Cerchio progetto Provincia di Pisa	Sex Work project	X	X	X
COOP C.A.T. Streetlight Group Area Immigrazione e servizi sociali - Firenze	Sex Work project	X	X	
Progetto "MADDALENA" - Palermo	Sex Work project	X	X	X
DEDALUS Progetto La Gatta - Napoli	Sex Work project	X	X	
Cooperativa Lotta contro l'Emarginazione cooperativa sociale - Onlus Milano	Sex Work project	X	X	
LILA Onlus - Milano	Sex Work project	X	X	
ALA - Associazione Nazionale Lotta all'AIDS Progetto "Via del Campo" - Milano	Sex Work project	X	X	X

ON THE ROAD – Martinsicuro (TE)	Sex Work project	X	X	X
LILA Centro Assistenza Malati AIDS - Bari	Sex Work project	X	X	
PROGETTO PRINCESA Coop. Antropos - Sanremo	Sex Work project	X		X
ASSOCIAZIONE SAN BENEDETTO AL PORTO - PROGETTO LILA Progetto Art. 18: Oltre la strada – uds	Sex Work project	X	X	
OLTRE LA STRADA Progetto Prostituzione - Centro Stranieri del Comune di Modena	Sex Work project and public social service	X	X	X
Artemide - Progetto prostituzione - Comune di Bologna	Sex Work project	X	X	X
MIT- Movimento di Identità Transessuale - Bologna	Sex Work project and transgender health service	X		X
PIAM ONLUS - Asti	Sex Work project	X		X
CABIRIA progetto FREE WOMAN ASS. - Perugia	Sex Work project	X	X	
Caritas Ambrosiana Milano	Anti trafficking assistance and health-social service	X		X

Appendix 2: CDrom promotion and distribution

Organisation	Promotional material sent	CDrom sent	Evaluation form sent	Evaluation form returned
LILA MILANO	X	X	X	
LILA ROMA	X	X	X	
LILA TRENTO	X	X	X	X
DEDALUS NAPOLI	X	X	X	
PENELOPE CATANIA	X	X	X	X
TAMPEP ONLUS TORINO	X	X	X	X
SIRIO VERONA	X	X	X	
CITTÀ E PROSTITUZIONE VENEZIA	X	X	X	
OLTRE LA STRADA MODENA	X	X	X	X
CABIRIA PERUGIA	X	X	X	
PIAM ONLUS ASTI	X	X	X	
MIT Movimento di Identità Transessuale BOLOGNA	X	X	X	X
PROGETTO PRINCESA SANREMO	X	X	X	X
ARTEMIDE BOLOGNA	X	X	X	X
ROXANNE ROMA	X	X	X	
PROGETTO STELLA POLARE TRIESTE	X	X	X	X
IL CERCHIO PISA	X	X	X	
ALA MILANO	X	X	X	
ASS. SAN BENEDETTO AL PORTO GENOVA	X	X	X	
PROGETTO MADDALENA PALERMO	X	X	X	X
HEALTH CENTER FOR FOREIGNERS TRIESTE	X	X	X	X
INFECTIOUS DISEASE DEP'T TRIESTE	X	X	X	
DRUGS DEPENDENCY DEP'T TRIESTE	X	X	X	X
FAMILY PLANNING CENTER TRIESTE	X	X	X	
SAN MARTINO AL CAMPO TRIESTE	X	X	X	
OLTRE LA STRADA FERRARA	X	X	X	
MAGLIANA 80	X	X	X	
LILA BARI	X			
NAGA MILANO	X	X	X	
POLIAMBULATORIO PER IMMIGRATI SANTA CHIARA PALERMO	X	X	X	
UNITA OPERATIVA AIDS ASRLME ROMA	X	X	X	
SIMM – SOCIETÀ ITALIAN MEDICINA DELLE MIGRAZIONI ROMA	X	X	X	
OSPEDALE AMEDEO DI SAVOIA ASL 3 TORINO	X	X	X	

AMBULATORIO PER STRANIERI TRIESTE	X	X	X	X
MALATTIE INFETTIVE OSPEDALE MAGGIORE TRIESTE	X	X	X	
SERT CENTRO DIURNO TRIESTE	X	X	X	
CENTRO MST UDINE	X	X	X	

Appendix 3: National Network members

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, and academic.
Progetto Stella Polare	Trieste	Sex Work project + anti-trafficking
TAMPEP ONLUS progetto Antares	Torino	Sex Work project+ anti-trafficking
Servizio Città e Prostituzione Free woman project - Comune di Venezia	Mestre	Sex Work project and public social service
LILA Lega Italiana Lotta all'Aids	Trent	Sex Work project
Co.Di.Pe.P	Roma	Sex Workers Collective
Coop Il Cerchio	Pisa	Sex Work project + anti-trafficking
L'una e L'altra	Trieste	Women Association
Parsec	Roma	Sex Work project +social development
LILA	Roma	Sex Work project
Cooperativa sociale Cassiopea	Trieste	Women Theatre and laboratory
COOP C.A.T. Streetlight Group Area Immigrazione e servizi sociali - Firenze		Sex Work project + anti-trafficking
Progetto MADDALENA	Palermo	Sex Work project + anti-trafficking
DEDALUS Progetto La Gatta	Naples	Sex Work project + anti-trafficking
Cooperativa Lotta contro l'Emarginazione cooperativa sociale – Onlus	Milan	Sex Work project
LILA Onlus	Milan	Aids prevention + activism
ALA - Associazione Nazionale Lotta all'AIDS Progetto "Via del Campo"	Milan	Sex Work project
ON THE ROAD –	Martinsicuro (TE)	Sex Work project + anti-trafficking
Telefono Verde Aids	Roma	National Hot Line
PROGETTO PRINCESA	Sanremo	Sex work project + anti-trafficking
ASSOCIAZIONE SAN BENEDETTO AL PORTO - PROGETTO LILA	Genoa	Sex Work project + anti-trafficking
OLTRE LA STRADA Comune di Modena	Modena	Sex Work project and public social service
Artemide - Progetto prostituzione -	Bologna	Sex Work project
MIT- Movimento di Identità Transessuale	Bologna	Sex Work project and transgender health service
PIAM ONLUS	Asti	Sex Work project
CABIRIA progetto FREE WOMAN	Perugia	Sex Work project
SexyShock	Bologna	Women Lab Pink Queer Activist
Kagipota-Kazipot	Trieste	Women's Association + Theatre handicraft
Progetto Donna Salute Mentale	Trieste	Women's Public Mental Health Service
Goap	Trieste	Women's Centre against Violence
Centro Donna Giustizia	Ferrara	Women's Law enforcement
Assoc. Jerry Masslo	Caserta	Health service
Associazione Penelope	Catania	Sex Work project + anti-trafficking

Appendix 4: Participants in national event

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
Cooperativa Sociale Cassiopea	Trieste	Women Theatre and laboratory
Stella Polare project	Trieste	Sex work project + anti-trafficking
Kagipota-Kazipot	Trieste	Women's Association + Theatre handicraft
Goap	Trieste	Women's Centre against Violence
SexyShock	Bologna	Women's Lab Pink Queer Activist

Progetto Donna Salute Mentale	Udine	Women's Mental Health public Service
Tampep Onlus	Turin	Sex Work Project + anti-trafficking
Co.Di.Pe.P.	Roma	Sex Worker Collective
MIT Movimento Identità Transessuale	Bologna	Transgender health service + Sex Work project
L'una e L'altra	Trieste	Women base Association
Cooperativa Noncello	Pordenone	Social Co-operative
Il Nodo	Trieste	Cultural Association
"Lucrezia Marinelli"	Sesto S.Giovanni MI	Cultural Association Women's cinema
"Acquolina"	Trieste	Cultural Association
PROGETTO PRINCESA	Sanremo	Sex work project + anti-trafficking
Servizio Città e Prostituzione Free woman project - Comune di Venezia	Mestre	Sex Work project and public social services

Appendix 5: service providers mapping

1. Works with sex workers 2. Works with migrant sex workers		3. Has multi-lingual resources 4. Uses interpreters		5. Uses cultural mediators		Questionnaire	
Organisations	1	2	3	4	5	SENT	RETURNE D
NAGA MILANO		X	X	X	X	X	X
POLIAMBULATORIO PER IMMIGRATI SANTA CHIARA PALERMO		X	X	X	X	X	
UNITA OPERATIVA AIDS ASRLME ROMA	X	X	X	NO	NO	X	X
SIMM – SOCIETA' ITALIAN MEDICINA DELLE MIGRAZIONI ROMA	X	X	X	X	X	X	X
OSPEDALE AMEDEO DI SAVOIA ASL 3 TORINO		X	X	X	X	X	X
AMBULATORIO PER STRANIERI TRIESTE		X	X	X	X	X	X
MALATTIE INFETTIVE OSPEDALE MAGGIORE TRIESTE		X	X	X	X	X	X
SERT CENTRO DIURNO TRIESTE	X	X	X	X		X	X
CENTRO MST UDINE						X	
MALATTIE INFETTIVE OSPEDALE UMNERTO I MESTRE		X	X	X	X	X	
USSL 22 SERVIZIO MTS VERONA		X	X	X		X	
ANLAIDS PALERMO	X	X	X	X	X	X	X
OSPEDAI E S. GALICANO ROMA	X	X	X	X	X	X	

TAMPEP 7 National Partners Update

National Coordinator Name	Pia Cove
National Coordinator Tel No	++39 0434551868
National Coordinator Mobile No	++39 3355400982
National Coordinator Email	Lucciole.pia@iol.it
Organisation Name	Comitato Per i Diritti Civili delle Prostitute Onlus
Address	Via Dalmazia 10, 33170 Pordenone, post box 67
Organisation Fax	++39 0434551868
Organisation Tel no	++39 0434551868
Organisation Email	lucciole@iol.it
Organisation website	www.lucciole.org

GERMANY National Final Report

Person completing report

Sol Rojas + Veronica Munk

In completing this final report, please collate information from the final work programme reports.

Please also complete the information requested in the Appendices.

<p>1</p>	<p>ORGANISATIONAL OVERVIEW Including aims, staff & volunteer team, summary of services provided and number of sex workers in contact with organisation</p> <p><i>Amnesty for Women Städtegruppe Hamburg e.V.</i> is a not-for-profit association. Working on the principle of "helping women to help themselves", the organisation carries out an extensive programme of activities focused on the needs of migrant women in Germany, including counselling, accompanying and supporting them, and providing them with training. Public relations work aims to publicise their situation and the issues with which they are faced. The overall goal is to strengthen the social and legal situation of migrant women and thus, in the long term, to assist their integration into German society.</p> <p><i>Amnesty for Women</i> acts as a meeting place and a counselling centre for women in this problematic situation, and offers psychological/social and legal counselling for women. Our staff are from a migrant background, and speak German, English, Polish, Portuguese, Russian, Spanish, Thai and Czech. Thus, most women who come to us can receive counselling in their native language. Where this is not the case, we direct women to other counselling services or try to find an interpreter. We also offer psychological counselling in Polish and Spanish for Central European and Latin American women. Together with each individual, we look for ways of resolving her problems, helping her to understand and demand her rights on her way to a self-directed life and assisting her in increasing her own independence. Our counselling services are free and anonymous.</p> <p><i>Amnesty for Women</i> offers also German classes in different levels.</p>
<p>2</p>	<p>NATIONAL LEGAL FRAMEWORK Including summary of prostitution, migration and trafficking legislation</p> <p>Prostitution was legalized in Germany just over four years ago, in January 2002. Despite the fact that this law was an extremely important political step towards the recognition of sex work as an activity, it did not bring many concrete benefits to sex workers until now, for both Germans and documented migrant sex workers, with the exception of those from the new EU countries. In practice, the law has brought little clarity about work contracts. Depending on the law's interpretation, employers can be accused of pimping, which is punished. Furthermore, there is little in the law about prohibited areas where street prostitution can take place as well as - until July 2006 - the prohibition to advertise for sexual services.</p> <p>Migrant sex workers still have an additional difficulty. Because the Prostitution Law is not linked to the Alien Law, migrant sex workers are not allowed to apply for a visa in order to work as sex workers on a legal basis. Some migrants however, who have a legal status in Germany, are considering declaring themselves as sex workers and assuming all the necessary steps linked with it, like paying taxes and insurance, in order to be able to work and live as sex workers legally in the country.</p>

3	<p>OVERVIEW OF ANY POLITICAL CHANGES Including changes in legislation, welfare/health systems and societal attitudes</p> <p>The 2002 Prostitution Law</p> <p>There were little changes in the prostitution scenary since 2002. The positive gain regarding the Law was an slight increase of the awareness of the general public concerning sex workers' situation and a political recognition regarding sex work.</p> <p>Taxes are a problem</p> <p>Due to the legalization of prostitution, some municipal Financial Departments have been chasing sex workers demanding the payment of taxes for, in some cases, the past 10 years. This arbitrariness causes the majority of sex workers not to declare officially their activity. Many sex workers do not enter juridical process against bad clients, pimps or managers, for fear of being "discovered" by the Financial Department. Prostitutes, who have to share their income with brothel owners and other parties, are reluctant to pay taxes.</p> <p>The EU enlargement</p> <p>The number of sex workers from the Baltic countries, Poland, the Czech Republic and Hungary increased, but it did not bring any outstanding changes. One pull factor is the existence of the <i>Law on Prostitution</i>, which allows them to register as self-employed very easily. Many of them are already taking this step in order to work on legal bases.</p> <p>Advertising for sex work is now legal</p> <p><i>Since July 13th 2006, there is a new verdict from the German Federal Court of Justice (Bundesgerichtshof), which says that sex workers are now allowed to advertise in newspapers and magazines, since prostitution is a recognized activity. Until that date, sex workers were not allowed to advertise for their services, but that prohibition was not enforced. Daily newspapers in the whole country carried ads for women, men, and transgender offering their sexual services.</i></p> <p>The criminalization of clients</p> <p>Some politicians are starting to propose the criminalisation of the purchase of sexual services from "forced prostitutes", similar to the Finish model. The discussion has been supported by religious, abolitionists and feminist groups and refused by most NGOs and prostitutes organizations. There are even some voices among politicians saying that the complete Law on Prostitution of 2002 should be taken back...</p> <p>The offer for unsafe sex is growing</p> <p>Because of a remarkable increase of clients demanding unsafe sex, as well as an increase of the offer of unsafe sex in newspapers and internet ads, voices inside some HCS started to demand the return of the compulsory medical examinations for sex workers, which were abolished in January 2001.</p> <p>Legislation on Migration and Trafficking</p> <p>There were no changes in the last two years.</p>
4	<p>PROSTITUTION MAPPING</p> <hr/> <p><i>Summary of prostitution scene</i> <i>Including any changes in the last 2 years</i></p>

In Germany, the majority of sex workers (about 80%) work indoors, either in apartments, in brothels, bars and clubs. Apartments can be either shared among 2 or 3 sex workers or they choose to work alone out of their own flats. Both migrant and German sex-workers work in such a pattern and very often sex workers from different nationalities work together, including German and migrants, as well as women and transgender.

For those working in brothels, bars and clubs, the difference between national and migrant sex-worker distribution is more significant, where 24% of national sex workers work in such establishment and 31% of migrant sex workers find their first employment there. The difference can be explained by the fact that many migrants, first arriving in the country, cannot really establish themselves on an autonomous way and, therefore, choose to work in bars and brothels because it is easier, and more convenient. Another reason may be that those dependent on others have no choice but to start working in brothels owned by those persons—a measure, which offers the pimps more control over sex-workers.

A discrepancy in employment pattern can be seen in the numbers of sex-workers working on the streets: those are usually drug addicts and the majority are Germans.

There has also been a noted increase in the number of migrant sex-workers working in massage parlours. Although the majority of such institutions less frequently employ migrants, there has been a significant growth in number of Asian sex workers offering sexual services in parlours disguised as Thai massage parlours.

Gender of sex workers

The majority of sex workers are women (93%) with males comprising 4% and transgender 3% of the total sex workers' population.

Estimated number of sex workers

According to the estimates of the prostitutes' organizations in Germany, there are about 400.000 sex-workers—women, men, and transgender—working in Germany full or part-time in the period of one year. The biggest towns in Germany have approximately the following number of sex workers: Berlin (4.000), Bremen (1.500), Dortmund (2.000), Dresden (600), Düsseldorf (1.000), Frankfurt/Main (2.500), Hamburg (3.500), Hannover (2.300), Leipzig (250), Munich (3.000), Nürnberg (1.500), and Stuttgart (2.700).

Estimated percentage of Migrant sex workers among female, male and transgender sex workers

In Germany the majority of female sex-workers are migrants: about 60% of them, while among male sex workers 75% are migrants and about 85% among transgender sex workers are migrants.

Estimated percentage of national and migrant sex workers

The pattern of percentages of national and migrant sex-workers has been significantly showing an increase in the numbers of migrant sex-workers since 1999. In 2005 this difference has reached the amount of 40% national and 60% migrant sex workers. This trend has been further reinforced by the enlargement of the EU. For the first time, there is a greater number of migrant sex-workers than of nationals in all regions of the country. The difference in numbers is the greatest in the Northern region (34% Germans, 66% migrants), where a large prevalence of sex-workers are from Central and Eastern Europe.

The border to Poland, an important transit route for those coming from the Baltic countries, Russia and Belarus, allow the building up of networks among migrants from those regions in Germany. This can be one explanation for the high number of migrant sex workers in the North region. The elimination of the mandatory health examination in 2001 may explain the increase of migrant sex-workers in the central (47% Germans, 53% migrants) and in the south (44% Germans, 56% migrants) region.

Where do migrant sex workers come from?

Migrant sex workers in Germany are divided as follows:

- Central/Eastern Europe 55% (2003: 50%) (Including Baltic and Balcan countries)
- Asia 20% (2003: 20%)
- Latin America 15% (2003: 20%)
- Africa 10% (2003: 10%)

The 10 main countries of origin are: Poland, Russia, Baltic countries, Thailand, Ukraine, Czech Republic, Bulgaria, Dominican Republic, Brazil and Ghana.

The groups of migrant sex workers established themselves in patterns throughout the country. However, the majority of Eastern and Central European women work in the north (perhaps, due to the close proximity to that region and the extended border with Poland), the majority of Asian women concentrate in the central and southern region (this can be explained by the fact that many Asian women have entered the country through marriage to German men and therefore, could work despite the mandatory health examination), and the majority of Latin American women work in the central region (this is perhaps due to the years of community building). The distribution of African women is the most equilibrated, for the majority of earlier migrants were coming from ex-colonies and possessing an EU passport could freely establish themselves anywhere.

How many nationalities are included?

Within the estimation of 2006, 38 different nationalities are present, while in 2003 there were 31 different nationalities. This reinforces the trend of more and more women migrating from all over the world to the EU in search of work—the so-called *feminization of labor migration*.

Summary of sex workers situation

Including any significant differences between national and migrant sex workers and changes in the last 2 years

Prostitution Law

Despite the fact that this law was an extremely important political step towards recognition of sex work as an activity, it did not bring many concrete benefits to sex workers until now, for both Germans and documented migrant sex workers. In practice this has meant little clarity still about work contracts, prohibition regarding areas where street prostitution can take place as well as prohibition to advertise for sexual services.

Migrant sex workers have an additional difficulty: they have to struggle with repressive migration laws, which prevent their migration and work on legal bases, with consequences such as dependency, exploitation, isolation, bad working conditions, lack of information, dangerous situations concerning their health, physical and psychological well being.

Mobile phones and internet

There was an increase of national and migrant sex workers offering their services via these means. The main reason for that is economic: it costs about €100,00 to advertise for 30 days on the internet, while it costs about the same for only four days in a daily newspaper.

Vulnerability

The three main vulnerability factors for **German** sex workers are:

1. Lack of social and political recognition regarding the rights and necessities of sex workers.
2. Sex workers' lack of information about their rights, the unclear labour structures within the Prostitution Law, bad working conditions, debts, and psychological violence/pressure because of financial commitment towards the family.
3. Sex workers' lack of self-esteem, political awareness and professionalism.

The three main vulnerability factors for **migrant** sex workers are:

1. Repressive policies on migration, which leads to "illegality", lack of rights and marginalization;

discrimination as sex workers and as migrants.

2. Dependency on third persons, which leads to isolation, exploitation, often to physical violence, and to bad living and working conditions. Debts, psychological pressure because of financial commitment towards the family, and moral problems (often religious) by the fact of working in prostitution.
3. Lack of information about their rights, access to legal, social and health care services.

Independency

About 70% of German sex workers work for themselves, while about 60% of migrant sex workers are in this position. Working for others includes family, partners, pimps, managers, "intermediates"/smugglers (among migrants), club owners, "protectors", taxi drivers. Germans as well as migrants keep about 50% of their earnings when working for others.

Condom use

The use of condoms among both Germans and migrant sex workers is high. However, lately there has been an increase in demand and offer of unsafe sex. The main reason for that phenomenon is competition and the financial pressure under which many sex workers live and work.

Violence

There was an increase in cases of violence against national and migrant sex workers. Victims of those cases were, for instance, undocumented migrant sex workers, sex workers who "refused" some of the client's wishes, drug users or those migrants who speak little German. An increase of psychological violence against sex workers was also observed, through cases of debt bondage, residence and working permit issues, etc.

Drug Use

The majority (about 90 to 95%) of those who prostitute themselves due to drug consumption only are Germans. About 10% of migrant sex workers consume cocaine, crack and heroin. Marihuana, hashish and tablets (psycho-pharmaceuticals) are used by a bigger portion of that group. Alcohol is consumed mainly by those working in bars and clubs, sometimes in a greater quantity because of their participation in the sale.

Policy changes regarding Germans

The criminalization of clients was proposed by the conservative party in order to criminalize the purchase of sexual services from "forced prostitutes", meaning victims of trafficking. The discussion about pros and cons of such a measure has been supported by religious and feminist groups and refused by most NGOs and prostitutes organizations.

Due to the legalization of prostitution, which offers sex workers the possibility of declaring their activity officially, some municipal Financial Departments have been chasing sex workers demanding the payment of taxes for the past 10 years. This arbitrary application of the law - there are no rules which determine from which date the taxes have to be paid back - causes the majority of sex workers not to declare their activity to any sort of public administration department.

Policy changes regarding Migrants

The EU enlargement brought an increase of sex workers from the new EU countries. The pull factor for citizens of those countries was the existence of the Law on Prostitution which recognizes prostitution as an activity. This allows EU migrants to register as self-employed workers very easily. Many of them are already taking this step in order to work on legal basis in Germany. For those who wish to be employed by others, the German labour market will only be open from 2009 onwards. Until then, they need a working permit as before.

Summary of mobility

Including any changes in the last 2 years

- About 20% of German sex workers have already worked in another country. The principle countries were: Austria, Belgium, France, Greece, Italy, Netherlands, Spain and Switzerland.
- About 60% of migrant sex workers have already worked in another country. The principle ones were: Austria, Denmark, Estonia, France, Italy, Latvia, Lithuania, Netherlands, Poland, Spain, South America, Sweden, Switzerland, Thailand, Turkey and UK.
- About 80% of both German and migrant sex workers already worked in another German town. The principle ones are: Bayreuth, Berlin, Bochum, Bonn, Dortmund, Duisburg, Düsseldorf, Essen, Esslingen, Frankfurt/Main, Hamburg, Hameln, Hannover, Ingolstadt, Kiel, Köln, München, Nürnberg, Reutlingen, Rostock, Schwerin, Stralsund, Stuttgart, Ulm, Waiblingen, Wuppertal, Zwickau.

The three main reasons for mobility are:

1. Undocumented migrant sex workers must constantly look for new working places because of police raids, bad working conditions or because they are forced by pimps or traffickers.
2. Sex work is an activity which demands a constant re-introduction of new faces. For both German and migrant sex workers novelty brings better earning possibilities. This is greatly supported by different informal networks within the different (cultural) sex workers' communities.
3. Because of elements specific to the prostitution milieu such as conflicts, public events with a concentration of a higher demand, trips with clients, difficult or private situations.

We have witnessed a change in the patterns of mobility because of the EU enlargement. As enlargement facilitates mobility within the European Union, and because of border proximity, there was an increase mainly of Polish women, working in Germany on a temporary basis, or for a limited period of weeks or months.

Summary of service provision and policy

Including any changes in the last 2 years

Means of contacting MIGRANT sex workers

Regular and continuous outreach work is done by the majority of GOs and NGOs and was, therefore, mentioned as the most efficient way of contacting migrant sex workers because of the mobility and the often isolation in which they live and work.

Other means are: counseling hours within the institutions and organizations themselves, by word of mouth advertising within each community, through the police, brothel and club owners and/or managers, through networks dealing with sex work, migration, trafficking in women and health promotion, on local, national and international levels, by selling condoms and other needed articles for the work, by distributing flyers, to put ads in brothels and clubs, on the internet sites or in newspapers where they put their own ads, to offer counseling hours within brothels or clubs, directly by telephone, by sending information through the post, to have a place within the red light district where it is possible to drink coffee, get condoms and have a chat or short counseling.

The importance of employing cultural mediators or translators for contacting migrant sex workers was pointed out as something very immediate and necessary.

The 3 main barriers for MIGRANT sex workers accessing services

1. The legal status – the situation for undocumented sex workers is insecure and unstable, which leads to vulnerability and fear.
2. The language - the little knowledge of German leads to dependency on third persons.
3. The stigma – most migrant sex workers do not identify themselves as sex workers and are

constantly afraid that someone from the family back home discovers it.

Services provided for GERMAN sex workers

All services provided by NGOs and by Health Care Services/HCS for German sex workers are voluntary, anonymous, and free of charge.

NGOs - Information on the Prostitution Law, advocacy activities for the rights of sex workers, psychosocial counselling specific for sex workers, counselling for those wishing to enter or to leave prostitution, or those wanting to change the activity, indication of IT courses.

HCS - Information on prevention of HIV/STI, pregnancy, and contraception, safer sex, examination and treatment of STI, distribution of condoms and lubricants, vaccination of Hepatitis B, streetwork, indication of other medical specialists, information for those wanting to enter or to leave prostitution, psychosocial counseling. Some HCS offer exchange of needles for drug-using sex workers.

Services provided for MIGRANT sex workers

All services provided by NGOs and by Health Care Services for migrant sex workers are voluntary, anonymous, and free of charge.

NGOs - Psychosocial counselling specific to migrants' issues (marriage, divorce, children and work), advocacy activities for the rights of migrant sex workers, counselling with cultural mediators or translators, informational material in different languages, offer of German language courses, accompany to official departments, during processes for victims of trafficking, counselling for those wishing to enter or to leave prostitution, or those wanting to change the activity.

HCS - Information on prevention of HIV/STI, pregnancy and contraception, safer sex, examination and treatment of STI, distribution of condoms and lubricants, vaccination of Hepatitis B, streetwork, indication of other medical specialists, information for those wanting to enter or to leave prostitution, counselling with cultural mediators or translators, informational material in different languages, psychosocial counselling. Some HCS offer exchange of needles for drug addict sex workers.

Translation / Cultural Mediation services provided to MIGRANT sex workers

There is still no clarity among the different institutions and organizations about the difference between a translator and a cultural mediator. Nevertheless, 19 of the 42 organizations (45%) answered that they employ translators or cultural mediators. Those institutions, which do not employ them, gave, as main reason for not doing so, the high financial costs involving employment of translators and cultural mediators.

Services that MIGRANT sex workers cannot access

There are almost no services in Germany, which migrant sex workers cannot access as all HCS and NGOs offer their services on an anonymous, voluntary, and free of charge basis. The exception is when undocumented migrants or those who have no valid health insurance for Germany need a specific treatment, which is not offered by the HCS or need hospitalization. In those cases, they have to pay for the services or hospital by themselves. This includes HIV/AIDS patients.

Changes in the last 2 years that impact on MIGRANT sex workers

Health Care - No significant changes. Nevertheless, although sex workers, including migrants with a legal status in Germany, have now access to health insurance, only a minority make use of it because of the high costs of private health insurance. They, therefore, give preference to private doctors instead of the HCS. For undocumented migrant sex workers it became easier, since January 2001, to access the HCS. That is why, in most HCS the major clientele is now of migrant

sex workers.

Social Care - No significant changes. Only German and documented migrant sex workers, who are employed or paid privately for social care, have access to it.

Housing - Housing is not an issue among sex workers/migrant sex workers.

Reporting crimes against them - No significant changes. The Prostitution Law permits that a sex worker sues a client who did not pay for the services delivered, but there have not yet been such a case. Also among sex workers who are victims of trafficking, the amount of those who speak up against traffickers is very small, despite the fact that they would get a legal status during the time of the process. They cannot, however, work or study during that period, and after the process is finished they have to leave Germany anyway. There are, therefore, no great advantages for the sex workers themselves to enter such a process.

Information about rights – Yes, there were changes with the EU enlargement because persons from the new states have greater possibilities to work on an independent basis. Some organizations prepared specific informational material on that issue in order to distribute among sex workers from those countries. General information on civil and labor rights is given to sex workers/migrant sex workers through the different institutions and organizations.

Information about services available - No significant changes. Information about the existence of Social (NGOs) and Health Care Services (GOs) are spread among the target group mainly through outreach work done by NGOs and/or Health Care Providers. In many towns, there is a close collaboration between these institutions making the work much more efficient.

Programs supporting trafficked women – No significant changes. In Germany there is a network of organizations dealing with the issues of Trafficking in Women called KOK (*National Coordination Centre against Trafficking in Women and Violence on Women within the Migration Process*). The network is comprised of 38 organizations, which offer shelters, legal and social counseling, and access to lawyers, to Health Care Services, to the police in case the woman wants to file charges, and in case she wishes to return home. Many work quite close with the local police department as well as with the Immigration Office.

Within any regulated prostitution market – No significant changes. In some towns there is still the law which prohibits exercise of street prostitution in some areas or some streets of the town (*Speerbezirksverordnung*), and there are those where such limitation does not exist.

Other areas of service provision or policy – Yes, there were some changes.

The **Alien Law** - From January 2005 there is a new law (*Zuwanderungsgesetz*) that governs the entrance of foreigners for residence purposes. There are only two sorts of permits now: a limited and an unlimited one.

The legislation on **Trafficking in Women** - At the end of 2004, Germany started discussing the ratification of the UN and EU Trafficking in Human Beings Law. The German legislation takes into account all sorts of exploitation and not only those resulting in sexual exploitation.

The **EU Enlargement** – Since May 2004 there are no limitations for citizens of the new EU states (EU-10) to circulate within the European Union increasing the mobility among this group towards the old EU member states (EU-15). The enlargement facilitated an increase in numbers of people wishing to be self-employed, including in prostitution.

Criminalization of Customers – it is still a discussion among politicians and different institutions whether such step would or could stop trafficking in women. Most NGOs, among them all Prostitutes' Organizations, are against that proposal and fear a drawback regarding everything that was reached through the Prostitution Law from January 2002, which concerns the recognition

	of sex work as an activity, and the social and labour benefits for sex workers.
	see Appendix 1: Prostitution Mapping Questionnaire participants
5	TAMPEP 7 CDROM RESOURCE
	Summary of activities undertaken to promote and distribute the TAMPEP CDrom
	<p>In October 2006 TAMPEP-Germany has sent out 140 CD ROM: to 45 Health Care Services (GOs), to 75 non-governmental organizations (NGOs), and 10 to policy makers and academics which work with sex workers (male and female), drug users (male and female), sex workers migrant sex workers (male and female) and/or migrant women in Germany.</p> <p>The leaflets will be distributed during indoor and outdoor outreach work as well as within the different health and social counselling centres.</p> <p>With the exception of Albanian, all other 18 languages will be largely used.</p> <p>The CD-Rom was evaluated as very useful, very user friendly.</p> <p>The leaflets were evaluated as having a very clear and accessible language, and presenting the most relevant issues for sex workers regarding their work.</p> <ul style="list-style-type: none"> ▪ Languages still needed: Turkish, Arabic, Vietnamese, and Chinese. ▪ Resources still needed: a flyer with legal information about residence permits, health insurance, how to work as self-employed in the sex industry, migrants' rights, etc.
	See Appendix 2: CDrom promotion and distribution
6	NATIONAL NETWORKING & EVENTS
	Summary of national networking , including number of network members, types of organisations in the network and summary of activities
	<ul style="list-style-type: none"> ▪ On <u>LOCAL</u> level: interventions at different conferences, seminars and exhibitions in Hamburg on Prostitution and Migration issues, events organised by the <i>Hamburg Museum for Labour</i>, <i>Umdenken Foundation</i>, the <i>International Soroptimist Group</i>, the <i>German Women's Ring</i>, and for the different local political parties. ▪ On <u>NATIONAL</u> level: interventions at different conferences and seminars in Germany on Prostitution and Migration issues, events organised by the WHO/Work Health Organization, the Research Centre SoFFik, the Women's Group from Niedersachsen, the 37th German Prostitutes' Congress.
	Summary of national event
	<p>TAMPEP-Germany did not organize any particular event. However, during the 24 months of TAMPEP VII, the project participated in several conferences, seminar and other events.</p>
	See Appendix 3: National Network members & Appendix 4: Participants in national event
7	BI-LATERAL & MULTI-LATERAL EXCHANGES
	Summary of exchange , including aims, activities and learning outcomes
	<p>The Baltic countries: After noticing an increase of women from the Baltic countries in Hamburg and in Germany in general, TAMPEP-Germany chose to visit Estonia, Latvia and Lithuania, in order to analyze their motivations and migration routes. On of the aims was to improve and develop more effective strategies in working with this particular group.</p> <p>Luxembourg: To participate in the conference "<i>The Development of Intervention Methods for Sex Workers in Europe</i>" and exchange experiences among partners.</p>

	<p>Portugal: To exchange information about TAMPEP aims and methods as well as exchange results of the Interim Reports and discuss different activities such as events and outreach work.</p> <p>The following partner countries visited Germany:</p> <p>Italy, Slovakia, Lithuania, Denmark, Finland and UK.</p>
8	SERVICE MAPPING
	<p>Summary of public health care services</p> <p>The "<i>Law for the Protection of Infections Diseases</i>" effective on January 1st, 2001, abolished obligatory STD and HIV testing for sex workers. Since that date, STD tests and treatment, and HIV testing, are voluntary, anonymous, and free of charge for both German and migrant sex workers. Undocumented migrant sex workers, unlike German sex workers who have in many cases private insurance, now gained access to public health care treatment and counseling.</p> <ul style="list-style-type: none"> ▪ <u>HIV prevention</u> and health promotion information and advice: offered by all HCS. ▪ <u>HIV counseling and testing</u>: offered by all HCS ▪ <u>HIV/ AIDS treatment</u>: offered only by about 5% of the HCS. Persons who do not have a valid health insurance in Germany have no access to the HIV/AIDS treatment and must pay for all costs related to the illness. ▪ <u>Condoms and safe sex supplies</u>: about 75% of the HCS offer condoms and supplies. ▪ <u>Drug harm reduction</u> information and advice: about 50% of the HCS give counseling and information in the offices themselves. Otherwise they refer clients to other counseling centers. ▪ <u>Needle exchange</u>: about 15% offer this service but only 10% do it regardless of health insurance. ▪ <u>Drug treatment and rehabilitation</u>: only about 5% of the HCS offer drug therapy or rehabilitation and they are not confidential, anonymous and free of charge. ▪ <u>STD testing</u>: offered by all HCS. ▪ <u>STD treatment</u>: only about 60% of the HCS offer STD Treatment. ▪ <u>Contraception, counseling and information</u>: about 80% offer this service and about 90% do so regardless of whether clients have health insurance. Only about 20% of the HCS provide birth control pills ▪ <u>Abortion</u>: only about 35% of the HCS offer information and counseling regarding abortion regardless of whether the client is insured. Abortion is offered only by NGOs, and it is not anonymous or free of charge. ▪ <u>Maternity care</u>: only about 10% of the HCS offer guidance and support. ▪ <u>Gynecological care</u>: only about 35% offer this service. ▪ <u>Mental health care</u>: provided by about 35% of the HCS and of those, about 70% offer this service regardless of whether clients have health insurance. ▪ <u>General medical care</u>: provided by about 25% of the HCS. ▪ <u>Dental care</u>: no HCS provides this service. ▪ <u>Ophthalmic care</u>: no HCS provides this service. <p>The non-existence of health insurance implies: difficulties accessing in-patient treatment, psychotherapy, drug and alcohol rehabilitation as well as cancer, accident, dental and general medical care. Non-insured sex workers must pay for all these services out-of-pocket. Thus, undocumented migrants have a difficult time accessing HIV treatment and care, maternity and neonatal care.</p> <p>Migrant sex workers main barriers to access HCS are:</p> <ul style="list-style-type: none"> ▪ Lack of language competence from the side of the sex workers ▪ Lack of language competence from the side of the HCS staff

	<ul style="list-style-type: none"> ▪ Lack of information regarding sources of assistance and the German health care system ▪ Lack of health insurance and illegal status ▪ Isolation and mistrust of state officers. Fear of discovery and deportation. ▪ Fear of being recognized, controlled (name recognition) ▪ Cultural barriers. Fear of exclusion. ▪ Fear of being discriminated against as a sex worker. Insecurity and shyness. ▪ Dependence on third persons
	<p>Summary of public social care services</p> <ul style="list-style-type: none"> ▪ <u>Legal information and advice</u>: about 90% of the organizations offer counseling and information on residency rights as well as on family, social and labour rights. ▪ <u>Psychological counseling</u>: about 60% of the NGOs are prepared to offer psychological counseling but only a minority does so free of charge. ▪ <u>Emergency accommodation/shelter</u>: only about 55% offer this sort of accommodation, and only half of them are offered free of charge. ▪ <u>Support for victims of trafficking</u>: about 70% of the NGOs offer this service. ▪ <u>Support for those wishing to return to their mother country</u>: about 55% of the organizations offer this sort of service. ▪ <u>Language courses</u>: about 60% of the NGOs offer language courses, but not all are for free. ▪ <u>Other training courses</u>: other courses are: seminars about tax obligations for sex workers, professionalism in sex work, computer, cooking, sewing, dancing, swimming, and exercise classes. Self-help groups are offered by about 40% of the NGOs. Some of the courses are for free. <p>Institutions listed the following areas of social care as particularly inaccessible: right to basic assistance without documentation, qualification courses, legal and psychological counselling as well as financial sources.</p> <p>Migrant sex workers face barriers in accessing social services because of:</p> <ul style="list-style-type: none"> ▪ Mistrust of public institutions as a result of unfamiliarity with the social system in Germany. ▪ Confuse NGOs with state offices ▪ Undocumented status and fear of the consequences, insecurity ▪ High rate of mobility ▪ Poor language competence on the side of the sex workers ▪ Dependence on pimps, brothel owners. ▪ Poor intercultural and language competence on the part of the organizations' co-workers ▪ Lack of awareness of the counseling centers regarding the situation and the needs of migrant sex workers ▪ Moral inhibitions (fear and shame) ▪ Experiences of discrimination and stigmatization
	See Appendix 5: Service providers mapping

Appendix 1: Prostitution Mapping Questionnaire participants

Organisation or other source of information	Remit health service, sex work project, social service, law enforcement, academic, media.	Questionnaire		
		SENT	FOLLOWED UP	RETURNED
The 49 organizations listed below are those which answered the questionnaires, and from whose data this report is based.				

Health Service Providers

- **Anklam.** Landkreis Ostvorpommern AIDS-Prävention, Team „Abendrot“
- Gesundheitsamt Stadt **Augsburg**
- **Berlin.** Bezirksamt Charlottenburg-Wilmersdorf, Gesundheitsamt, Beratungsstelle für sexuell übertragbare Krankheiten sowie AIDS
- Stadt **Bonn** Gesundheitsamt
- Landratsamt **Böblingen.**
- **Braunschweig.** Beratungsstelle für sexuelle Gesundheit
- Gesundheitsamt **Bremen.** AIDS/STD-Beratungsstelle
- Gesundheitsamt **Bremerhaven.** AIDS/STD und Beratungsstelle
- Stadtverwaltung **Cottbus.** Beratungsstelle für AIDS und sexuell Übertragbare Krankheiten
- **Dresden.** Gesundheitsamt, Beratungsstelle für AIDS/STD
- **Düsseldorf.** Gesundheitsamt/ Beratungsstelle für sexuell übertragbare Erkrankungen
- **Essen.** Gesundheitsamt/Beratungsstelle zu AIDS und anderen sexuell übertragbaren Krankheiten.
- **Esslingen.** Landratsamt/ Gesundheitsamt
- Stadt Gesundheitsamt **Frankfurt/Main.** Beratungsstelle für sexuell übertragbare Krankheiten
- **Hamburg.** Zentrale Beratungsstelle für sexuell übertragbare Erkrankungen
- AIDS/STD-Beratung. Fachbereich Gesundheit. Region **Hannover**
- **Heidelberg.** Gesundheitsamt. AIDS/STD-Beratung
- Amt für Gesundheit **Kiel.** STD-Beratungsstelle
- Gesundheitsamt **Koblenz**
- **Leipzig.** Gesundheitsamt, Beratungsstelle für sexuell übertragbare Krankheiten
- Gesundheitsamt **Lübeck.** Beratungsstelle für sexuelle Gesundheit und AIDS
- **München.** Referat für Gesundheit und Umwelt, Gesundheitsdienst, Sozialdienst

- Gesundheitsamt **Nürnberg.** Beratungsstelle und Poliklinik für sexuell übertragbare Krankheiten
- Stadt **Wuppertal.** Gesundheitsamt/ Beratungsstelle
- Gesundheitsamt **Rostock.** Beratungsstelle für STD/AIDS

NGOs

Those organisations deal with either with Germans and/or migrants sex workers, with drug users, or with victims of trafficking.

- **Berlin.** BSD/ Bundesverband Sexuelle Dienstleistungen e.V.
- **Berlin.** HighLights.
- **Berlin.** Hydra e.V.
- **Berlin.** Sub/WAY e.V.
- **Berlin.** Treberhilfe Berlin e.V. Strassen-Sozial-Arbeit
- **Bochum.** Madonna e.V. Beratung für Prostituierte
- **Bremen.** Nitribitt e.V., Treffpunkt und Beratung für Prostituierte
- **Dortmund.** Mitternachtsmission e.V. / Beratungsstelle für Prostituierte und Opfer von Menschenhandel
- **Dortmund.** Kober
- **Essen.** Fach- und Beratungsstelle Nachtfalter
- **Frankfurt/Main.** Context e.V
- **Frankfurt/Main.** Tamara e.V.
- **Frankfurt/Oder.** Belladonna e.V.
- **Hagen.** Zuwanderungsberatung Diakonisches Werk. Beratungsstelle für Migrantinnen
- **Hamburg.** Amnesty for Women e.V.
- **Hamburg.** Ragazza e.V.
- **Hamburg.** Sperrgebiet
- **Hannover.** Phoenix e.V.
- **Kassel:** SichtBar-Beratungsstelle
- **Köln.** Agisra Köln e.V.
- **Magdeburg:** Vera
- **München:** Beratungsstelle Mimikry/Marikas
- **Nürnberg:** Service e.V. Sex Workers Rights International
- **Plauen:** Karo

Appendix 2: CDrom promotion and distribution

Health Service Providers

- **Anklam.** Landkreis Ostvorpommern AIDS-Prävention, Team „Abendrot“
- **Aachen,** Gesundheitsamt Aachen
- **Augsburg** Gesundheitsamt Stadt Augsburg
- **Altenburg,** Gesundheitsamt Altenburg Land
- **Bad Neuenahr- Ahrweiler** Kreisverwaltung Ahrweiler
- Gesundheitsamt Stadt **Augsburg**
- **Berlin.** Bezirksamt Charlottenburg-Wilmersdorf, Gesundheitsamt, Beratungsstelle für sexuell übertragbare Krankheiten sowie AIDS
- **Berlin** Gesundheit Berlin e.V

- Stadt **Bonn** Gesundheitsamt
- Landratsamt **Böblingen.**
- **Braunschweig.** Beratungsstelle für sexuelle Gesundheit
- Gesundheitsamt **Bremen.** AIDS/STD-Beratungsstelle
- Gesundheitsamt **Bremerhaven.** AIDS/STD und Beratungsstelle
- Stadtverwaltung **Cottbus.** Beratungsstelle für AIDS und sexuell Übertragbare Krankheiten
- Gesundheitsamt **Darmstadt**
- **Dresden.** Gesundheitsamt, Beratungsstelle für AIDS/STD

- **Düsseldorf.** Gesundheitsamt/ Beratungsstelle für sexuell übertragbare Erkrankungen
- **Essen.** Gesundheitsamt/Beratungsstelle zu AIDS und anderen sexuell übertragbaren Krankheiten.
- **Esslingen.** Landratsamt/ Gesundheitsamt
- Gesundheitsamt STD- Sprechstunde **Freiburg**
- Stadt Gesundheitsamt **Frankfurt/Main.** Beratungsstelle für sexuell übertragbare Krankheiten
- **Hamburg.** Zentrale Beratungsstelle für sexuell übertragbare Erkrankungen
- **Hamburg** Behörde für Soziales, Familie, Gesundheit und Verbraucherchutz Amt für Gesundheit
- Gesundheitsamt **Halberstadt.**
- AIDS/STD-Beratung. Fachbereich Gesundheit. Region **Hannover**
- **Heidelberg.** Gesundheitsamt. AIDS/STD-Beratung
- Stadtverwaltung **Jena** Gesundheitsamt/ Beratungsstelle für sexuell übertragbare Krankheiten.
- Amt für Gesundheit **Kiel.** STD-Beratungsstelle
- Gesundheitsamt **Koblenz**
- Gesundheitsamt **Köln**
- **Leipzig.** Gesundheitsamt, Beratungsstelle für sexuell übertragbare Krankheiten
- Gesundheitsamt **Lübeck.** Beratungsstelle für sexuelle Gesundheit und AIDS
- **Marl.** Kreis Recklinghausen AIDS/STD Beratung.
- **München.** Referat für Gesundheit und Umwelt, Gesundheitsdienst, Sozialdienst
- **Münster** Gesundheitsamt Münster Beratung für sexuelle Gesundheit
- Kreisverwaltung **Neuwied** Gesundheitsamt
- Gesundheitsamt Stadt **Remscheid**
- Gesundheitsamt **Nürnberg.** Beratungsstelle und Poliklinik für sexuell übertragbare Krankheiten
- Gesundheitsamt Stadt **Remscheid**
- Gesundheitsamt **Rostock.** Beratungsstelle für STD/AIDS
- Gesundheitsamt AIDS-Beratungsstelle. **Schwedt**
- Gesundheitsamt **Stuttgart**
- Gesundheitsamt **Soest**
- Landratsamt Rems-Murr-Kreis AIDS-STD-Beratung **Weiblingen**
- Stadt **Wuppertal.** Gesundheitsamt/ Beratungsstelle
- **Berlin** ZAPO
- **Berlin** Wissenschaftszentrum Berlin für Sozialforschung
- **Bochum** MONA
- **Bochum.** Madonna e.V. Beratung für Prostituierte
- **Bremen.** Nitribitt e.V., Treffpunkt und Beratung für Prostituierte
- **Dortmund.** Mitternachtsmission e.V. / Beratungsstelle für Prostituierte und Opfer von Menschenhandel
- **Dortmund.** Kober
- **Essen.** Fach- und Beratungsstelle Nachtfalter
- **Frankfurt/Main** Context e.V.
- **Frankfurt/Main** FIM/ Frauenrecht ist Menschenrecht e.V.
- **Frankfurt/Main** KISS Callboy Connection
- **Frankfurt/Main.** Tamara e.V.
- **Frankfurt/Oder.** Belladonna e.V.
- **Fürth im Wald** JANA
- **Gießen** AIDS-Hilfe Gießen
- **Hagen.** Zuwanderungsberatung Diakonisches Werk. Beratungsstelle für Migrantinnen
- **Hamburg** Basis Projekt
- **Hamburg** KaffeeKlappe
- **Hamburg** Koofra e.V.
- **Hamburg.** Ragazza e.V.
- **Hamburg.** Sperrgebiet
- **Hamburg** AIDS-Hilfe Beratung
- **Hannover.** Phoenix e.V.
- **Hannover** Kobra
- **Herne** Kirchenkreis Herne Informationszentrum Dritte Welt
- **Kassel** Franka e.V.
- **Kassel:** SichtBar-Beratungsstelle
- **Kiel** CONTRA
- **Köln.** Agisra Köln e.V.
- **Köln** BzGA
- **Leipzig** KOBRAnet
- **Lübeck** Frauenberatungsstelle Lübeck
- **Mainz** Solwodi e.V.
- **Magdeburg:** Vera
- **München:** Beratungsstelle Mimikry/Marikas
- **München** Jadwiga
- **Nürnberg** Cassandra e.V.
- **Nürnberg:** Service e.V. Sex Workers Rights International
- **Nürnberg** Kofiza – in Via
- **Plauen:** Karo
- **Potsdam** KOK e.V.
- **Regensburg** Landratsamt Regensburg
- **Regensburg** Regierung der Oberpfalz
- **Saarbrücken** Hurenselbsthilfe e.V.
- **Stuttgart** FrauenInformations Zentrum
- **Tübingen** Terre des Femmes e.V.
- **Waiblingen** Anonyme AIDS/STD- Beratung
- **Zittau** KOBRAnet

NGOs

Those organisations deal with either with Germans and/or migrants sex workers, with drug users, or with victims of trafficking.

- **Berlin.** BSD/ Bundesverband Sexuelle Dienstleistungen e.V.
- **Berlin** Ban Ying e.V.
- **Berlin.** HighLights.
- **Berlin.** Hydra e.V.
- **Berlin.** Sub/WAY e.V.
- **Berlin** SoFFI K.
- **Berlin.** Treberhilfe Berlin e.V. Strassen-Sozial-Arbeit

Appendix 3: National Network members

Organisations	City/Town	Remit health service, sex work project, social service, law enforcement, and academic.
Health Care Services (Gesundheitsamt AIDS/STD-Beratungsstellen)	Anklam Augsburg Berlin Bonn Boblingen Braunschweig Bremen Bremerhaven Cottbus Dresden Düsseldorf Essen Esslingen Frankfurt/Main Hamburg Hannover Heidelberg Kiel Koblenz Leipzig Lübeck München Nürnberg Rostock Wuppertal	
NGOs		
BSD/ Bundesverband Sexuelle Dienstleistungen e.V.	Berlin	Organisation for Issues on Sexual Services
HighLights	Berlin	Sex Workers Project
Hydra e.V.	Berlin	Sex Workers Project
Sub/WAY e.V.	Berlin	Male Sex Workers Project
Treberhilfe Berlin e.V. Strassen-Sozial-Arbeit	Berlin	For Sex Workers
Madonna e.V. Beratung für Prostituierte	Bochum	Sex Workers Project
Nitribitt e.V., Treffpunkt und Beratung für Prostituierte	Bremen	Sex Workers Project
Mitternachtsmission e.V. / Beratungsstelle für Prostituierte und Opfer von Menschenhandel	Dortmund	For Sex Workers and Victims of Trafficking
Kober	Dortmund	For victims of trafficking
Fach- und Beratungsstelle Nachtfalter	Essen	For victims of trafficking
Context e.V.	Frankfurt/Main	Research Centre for Prostitution Issues
Tamara e.V.	Frankfurt/Main	For Sex Workers
Belladonna e.V.	Frankfurt/Oder	For Sex Workers and Victims of Trafficking
Jana	Furth im Wald	Outreach project for sex workers
Diakonisches Werk. Beratungsstelle für Migrantinnen	Hagen	For Migrant Women
Amnesty for Women e.V.	Hamburg	For Migrant Women
Basis Project	Hamburg	For male Sex Workers
Ragazza e.V.	Hamburg	For female drug users
Sperrgebiet	Hamburg	For female drug users
KaffeeKlappe	Hamburg	Counselling Centre for sex workers
Koofra e.V./ Koordinierungsstelle gegen Frauenhandel	Hamburg	For victims of trafficking
Phoenix e.V.	Hannover	For sex workers
SichtBar -Beratungsstelle	Kassel	For sex workers
Agisra Köln e.V.	Köln	For migrant women

Vera	Magdeburg	For victims of trafficking
Beratungsstelle Mimikry/Marikas	München	For female and male sex workers
Kassandra e.V.	Nürnberg	Sex Workers project
Service e.V. Sex Workers Rights International	Nürnberg	Outreach project for sex workers
Karo	Plauen	Outreach project for sex workers
Hurenselbsthilfe e.V.	Saarbrücken	Sex workers project

Appendix 4: Participants in national event

TAMPEP-Germany did not organize any particular event. However, during the 24 months of TAMPEP VII, the project participated in several conferences, seminar and other events.

Appendix 5: Service providers mapping

1. Works with sex workers 2. Works with migrant sex workers	3. Has multi-lingual resources 4. Uses interpreters			5. Uses cultural mediators		Questionnaire	
	1	2	3	4	5	SENT	RETURNED
<i>Organizations</i>							
Health Care Services							yes
1 Aachen	yes	yes	yes	no	no		yes
2 Altenburg	yes	yes	yes	no	no		yes
3 Anklam	yes	yes	yes	no	no		yes
4 Augsburg	yes	yes	yes	no	no		yes
5 Berlin Charlottenburt-Wilmersdorf.	yes	yes	yes	yes	yes		yes
6 Bremen	yes	yes	yes	yes	yes		yes
7 Bremerhaven	yes	yes	yes	no	no		yes
8 Bonn	yes	yes	yes	no	no		yes
9 Böblingen	yes	yes	yes	yes	yes		yes
10 Cottbus	yes	yes	yes	no	no		yes
11 Darmstadt-Dieburg	yes	yes	yes	no	no		yes
12 Dresden	yes	yes	yes	no	no		yes
13 Duisburg	yes	yes	yes	no	no		yes
14 Essen	yes	yes	yes	yes	no		yes
15 Esslingen	yes	yes	yes	no	no		yes
16 Freiburg	yes	yes	yes	no	no		yes
17 Frankfurt an Main	yes	yes	yes	yes	no		yes
18 Hamburg	yes	yes	yes	yes	yes		yes
19 Hannover	yes	yes	yes	yes	no		yes
20 Halbertstadt	yes	yes	yes	yes	no		yes
21 Heidelberg	yes	yes	yes	no	no		yes
22 Koblenz	yes	yes	yes	no	no		yes
23 Köln	yes	yes	yes	yes	no		yes
24 München	yes	yes	yes	no	no		yes
25 Soest	yes	yes	yes	no	yes		yes
26 Rostock	yes	yes	yes	no	no		yes
27 Remscheid	yes	yes	yes	yes	yes		yes
28 Wuppertal	yes	yes	yes	no	no		yes
NGOs							
1 Berlin Subway Berlin e. V.	yes	yes	yes	yes	yes		yes
2 Berlin Treberhilfe Berlin e. V.	yes	yes	yes	yes	no		yes
3 Berlin Ban Ying	yes	yes	yes	yes	yes		yes
4 BerlinHydra e. V.	yes	yes	yes	yes	yes		yes
5 Berlin Highlights-Agentur	yes	yes	yes	no	no		yes
6 Bremen Nitribitt e. V.	yes	yes	yes	yes	no		yes
7 Dortmund Kober	yes	yes	yes	no	no		yes

8	Frankfurt/Main	Context e. V.	yes	yes	yes	no	yes		yes
9	Frankfurt/Oder	Belladonna e. V.	yes	yes	yes	yes	yes		yes
10	Hamburg	Amnesty for Women e.V.	yes	yes	yes	no	yes		yes
11	Hamburg	Sperrgebiet	yes	yes	yes	no	no		yes
12	Hamburg	Basis e. V.	yes	yes	yes	yes	no		yes
13	Hamburg	Kaffeeklappe	yes	yes	yes	no	no		yes
14	Hannover	Phoenix e. V.	yes	yes	yes	yes	yes		yes
15	Kassel	Franke e. V.	yes	yes	yes	yes	no		yes
16	München	Mimikry/Marikas	yes	yes	yes	yes	no		yes
17	Köln	Agisra e. V.	yes	yes	yes	yes	no		yes
18	Nürnberg	Service e. V.	yes	yes	yes	no	no		yes
19	Saarbrücken	Hurenhilfe e. V.	yes	yes	yes	yes	yes		yes
20	Plauen	Karo e. V.	yes	yes	yes	yes	no		yes

TAMPEP 7 National Partners Update

National Coordinator Name	Veronica Munk
National Coordinator Tel No	
National Coordinator Mobile No	0049 176 6571 8982
National Coordinator Email	
Organisation Name	Amnesty for Women e.V.
Address	Grosse Bergstr. 231 22767 Hamburg Germany
Organisation Fax	+49 40 38 57 58
Organisation Tel no	+49 40 38 47 53
Organisation Email	info@amnestyforwomen.de
Organisation website	www.amnestyforwomen.de

ITALY Networking & Events FINAL Report

Person completing report

Pia Covre

In completing this report, please provide the following information. Please also complete Appendix 1 listing the organisations that are members of the national network and Appendix 2 listing the participants at the national event.

1. **Summary of national networking**, including number of network members, types of organisations in the network and a summary of the activities

Since project TAMPEP's inception in 1993, many of those Italian associations and public institutions that have initiated interventions in the field of prostitution have relied on the consultancy of our experts and the collaboration of our team of cultural-mediators and peer-educators, to include numerous requests for our printed publications for use in many cities throughout Italy.

The consultancy of TAMPEP's co-ordinatrices has also served policy-makers in confronting the problems of managing this phenomenon, especially whenever there is a need to effectuate mediation with local citizens wherever street prostitution stirs up social conflict.

Throughout our years of work, many long-lasting collaborations and partnerships have taken root. And we have consolidated relationships even with associations that nurture philosophy and carry out interventions that differ somewhat from project TAMPEP methodology. However, these associations recognise that TAMPEP is the only project in Italy that has vast experience in the field of health-prevention and the implementation of harm reduction measures that concern male/female prostitutes and migrants.

On account of our highly successful networking, we receive a horde of invitations to public meetings and conventions or we are asked to participate in numerous formal training events. In terms of quality and significant number of participants, we list here only the most important of the associations involved.

We participate in the Triveneto network, which includes both governmental and non-governmental organisations (GOs and NGOs) that are involved in immigrant-hospitality and health-assistance projects. We also have established contacts with new NGOs in order to develop upstart projects and initiatives, where needed.

We have established a new agreement with the ASL 1 (Azienda Sanitaria Locale—Local Health-Care Organisation) in order to jointly unfold an outreach programme.

We have also initiated contacts that will enable us to intervene in the CPTs (Centro di Permanenza Temporanea—Temporary Detention Centre) and prisons on behalf of immigrant women and sex workers in trouble.

In December 2006, the Ministry of Health invited exponents from Tampep to attend its headquarters in order to participate as a member organisation in a new commission of experts constituted to devise and implement policy concerning the issue of Health and Immigration. TAMPEP was the only non-governmental organisation admitted to this Commission whose other constituent members are from official governmental institutions

We are members of the National Focal Point for AIDS and Mobility that is under the aegis of the Superior Institute of Health of the Ministry of Health.

On the basis of field activities, we have distributed questionnaires and the CD-Rom to the most qualified members within our national network.

24 February 05: Caserta We participated in a convention titled "Le Nuove Schiavitù: la Tratta delle Donne Nigeriane—The New Slaves: The Trafficking of Nigerian Women" organised by the Region of Campania. We presented a report titled, "Le Peculiarità del Traffico di Donne Nigeriane: L'Assoggettamento Superstizioso, le Fome di Sfruttamento, le Modalità di Fuoriuscita—The Peculiarities of the Trafficking of Nigerian Women: Subjection due to Superstitious Belief, the Forms of Exploitation, and the Ways to Abandon Prostitution". The participants were the Caritas of Naples; Co-op—Lotta all'emarginazione—Struggle Against Emargination, Milan; On the Road, Martinsicuro; Progetto Speranza—Project Hope, Caserta; Caritas of Capua; Co-op Parsec, Roma; Tampep Onlus, Turin; Medici senza Frontiere, Co-op Dedalus, Naples; Association Black and White, Castelvoturno; Association Jerry Masslo; OIM; UNICRI; and representatives from many other local and national institutions.

1 March 05 and 8 November 2005: Rome Conducted by the National Focal Point for AIDS and Mobility (NFP), a workshop was held at the Superior Institute of Health to single out the needs of foreign citizens. The Ministry of Health had requested the collaboration of the NFP and its component organisations to inaugurate a new national campaign against AIDS. The network participants were:

Numero Verde AIDS, ISS (Superior Institute of Health), Rome

Department MTI, ISS, Rome

Centro Medicina Migrazioni Università of Palermo

ASL Piacenza

Unità AIDS ASL RM/B, Rome

Association ARCHÉ, Rome

Department ITS and Tropical, Brescia

ALA Association, Milan

Caritas Diocesana Area Sanitaria, Rome

Università Magna Grecia, Catanzaro

NPS Network Seropositive Persons, Rome

ASL RM/A, Rome

Paediatric Services-Women's Health, Reggio Emilia

IOM, Rome

Serv Medicina Migrazioni IRCCS San Galicano, Rome

NAGA Association Health Services for Migrants, Milan

TAMPEP Onlus, Turin

Division MTI INMI-IRCCS Hospital Spellanzani, Rome

Dept. ITS ASL 6, Palermo

Unità Aids, ASL RM/E, Rome

Unità Operativa Psicologia Ospedaliera Hospital Cotugno, Naples

LILA Cedius, Milan

Department of Infectious and Tropical Diseases, University La Sapienza, Rome.

15 March 05: Verona The North-East regional network organised a workshop to discuss ways to combat trafficking. TAMPEP furnished a panoramic overview of prostitution throughout Europe and discussed the migratory flows of women towards certain European states for the purpose of prostitution. Present were 40 operators from 20 services- providers and NGOs that work in the field of trafficking and prostitution.

26 May 05: Genova At a trade fair for small publishers, we gave a presentation on project TAMPEP, which included a radio transmission wherein the situation of the prostitution of migrant women within Italy was discussed, and we unveiled the publications, and their usefulness, that this project has produced.

28 August 05: Certaldo At a seminar organised by a distaff group of labour unionists to discuss implementation of social policies that would prove useful in combating social exclusion, we briefed about project TAMPEP.

14 October 05: Pisa A meeting was held to discuss and to plan for a new common approach for

interventions concerning indoor prostitution. The participants were TAMPEP Onlus Turin, On the Road, Martinsicuro; The Pisa Circle, and the Province of Genova project.

18 October 05: Trieste TAMPEP representatives participated in a training course for female operatives of Progetto Stella Polare (Polar Star Project), titled "La Salute delle Donne e degli Uomini Migranti" (The Health of Migrant Women and Men), which was organised by local Health-Care Services Management Office (Azienda per i Servizi Sanitari).

19 January 2006: Mogliano Veneto A TAMPEP representative furnished a panoramic overview of prostitution throughout Europe and explained European policies concerning prostitution at a meeting that was set up for a day of study dedicated to analysing data on street prostitution, its interventions, and the contradictions found therein.

26 January 2006: Modena The Commune of Modena unfolded its ten years of work in street intervention on behalf of migrant sex workers, which has constantly been carried out in partnership with project TAMPEP, at a convention titled "Certain Nights... Ten Years of Street Intervention". In attendance were the associations and local institutions from the Region of Emilia Romagna that were actuators of the project called *Oltre la Strada*—Beyond the Street.

10 March 2006: Udine We attended a convention titled "The Problem of Trafficking, Confrontation between Friuli-Venezia-Giulia (FVG) and Slovenia", which was organised under project INERREG III Ita-Slo 2000-2006 by the Equal Opportunities commission in Alpe Adria. Among those attending were the Kljuc Centre association, the Anti-Mafia District Directorate, and the Caritas of Udine.

21—27 May 2006: Trieste Promoted by the Departments of Health of the Regions of Friuli-Venezia-Giulia and Sardegna, a full week, called 'Le Giornate della Salute - Days of Health', was dedicated to in-depth discussions aimed at redefining 'Community Welfare'. We were participants at the behest of the Health Department of Trieste, which is our partner in a preventative-health and outreach programme. Wide-ranging discussions were focused on ways and means to improve the workplace and the work conditions of health-care personnel and to devise highly efficacious management policy and procedure for community social-assistance/health-care wellness programmes that are inclusive of the migrant population. In round-table and workshop formats, the discussions were focused on how to establish outreach and field mental-health services and how to integrate territorial socio/health-care management policy and procedure in a way that would prove most beneficial to the overall community welfare. Within this frame of reference, project TAMPEP was cited as an excellent model of this concept.

6—7 October 2006: Trieste We participated in a workshop on prostitution at an international conference, titled "Violence and the Patriarchate", which was organised by the European Left. We contributed significantly in the drafting of the 'Manifesto of the European Campaign against Violence against Women'.

19 October 2006: Rome The National Focal Point for AIDS and Mobility convened at the Superior Institute of Health in order to evaluate the leaflet produced by the Ministry of Health for dissemination to foreigners for the national AIDS campaign for the year 2006—2007.

17 November 2006: Turin At a conference held for the project, known as the Correlated European Network for Social Inclusion and Health, we briefed about TAMPEP and its pool of experience. This conference was attended by 40 operatives who represented 34 associations and foreign services-providers, as well as dozens of Italian services-providers and associations, which included the Abele Group and the drug-addiction services-providers from the Region of the Piedmont and other regions.

24—25 November 2006: Naples We participated in a convention organised by the co-operative Dedalus, which has a street-intervention project, known as '*La Gatta*'—The Pussycat. Dedalus has collaborated with TAMPEP from the time that TAMPEP first came into being.

24—25 November 2006: Ferrara We participated in a convention titled, *Antiche Storie all'Oggi—Prostituzione fra Libertà e Abusi*—Ancient Histories up to Today—Prostitution betwixt Freedom and Abuses, that was organised by the Department of the Science of History of the University of Ferrara, which saw the participation of the *Centro Donna Giustizia* and *Unione Donne Italiane*

(Centre for Justice for Woman and the Union of Italian Women).

27 November 2006: Trieste We participated in the convention that concerned a study of "*La Violazione del Corpo Femminile: Origini Socio-Culturali e Tutela della Persona*" (The Violation of the Woman's Body: Socio-Cultural Origins and Safeguarding the Person), which was organised by the SAGAL Association and the Commission for Equal Opportunities.

01 December 2006, Trieste, World AIDS Day - Art exhibition organised by the local Health Board, ASS1, and other local associations that was finalised at raising awareness over this plague. A TAMPEP operatrix briefed participants over the health prevention methods that we use during mobile street units and the importance of educating the general public, especially young people over the HIV/AIDS and Safe Sex. Prevention Leaflet of TAMPEP and condom were distributed to general public.

11 December 2006: Rome Under the theme, *The City and Prostitution*, a public debate was held, which witnessed not only ours but also witnessed the participation of several of the health-care administrative districts of the municipality of Rome (namely Roma IV—V—VI—VII—VIII—IX—X—XI—XII—XV), as well as the associations Co.Di.Pe.P; MIT; Casa dei Diritti Sociali Libellula 2001; and the Circolo di Cultura Omosessuale Mario Mieli.

19 December 2006: Rome At the Chamber of Deputies, the document, titled *Da vittime a Cittadine e Cittadini* (From Victims to Citizens—Men and Women), was presented in order to relaunch socio-legal policies concerning the trafficking of human beings. For this event local institutions and associations convened representatives from the Italian government.. The TAMPEP Co-ordinatrix had all been invited to expose the problems of sex workers, migrants, and trafficked women, as well as exponents from other organisations; namely, Caritas Italiana, On the Road, CGIL, ANCI, ASGI, CNCA, and the Commune of Venice. In addition, for this important initiative also present were around 100 other persons who represented many other associations and include functionaries serving as undersecretaries within the Ministries of Equal Opportunities, the Homeland, Foreign Affairs, and Welfare.

19 December 2006: Rome At the nation's Capitol, TAMPEP personnel furnished an analysis on prostitution and its legislative aspects that was titled, 'Prostitution between Slavery and Choice', as a part of formal legislative debate, open to the specialists within this field, which included as participants the following organisations: AFFI, Casa Internazionale delle Donne, Solidea, Donne in Genere, No.Di, Co.Di.Pe.P, Differenza Donna, Gruppo maschile plurale, Amatrix, Circolo di Cultura Omosessuale Mario Mieli, Parsec, Casa dei Diritti Sociali, and Generi e Generazioni. On several occasions we participated as teachers and co-organisers in training programmes that the national network had promoted and/or that TAMPEP had organised for member organisations of the national network.

Networking and Training

from January to March 2006 At Imperia we organised, together with a training institute called *Circolo Parasio*, a training course called *Corso per operatori di Unità di Strada e di accoglienza nel campo Della prostituzione* (Course for Street-Intervention Operators and the Offer of Hospitality in the Field of Prostitution) with teachers/instructors from TAMPEP and with introduction to TAMPEP's methodology.

In Turin and Trieste during the 2006 Tampep organized six workshops for training peer educators and to underpin a process of empowerment of Sex Workers. In total 45 women and transgender participated in Turin and 16 in Trieste.

14—16 November 2006: Rome A TAMPEP staff operatrix participated in a training course titled *Prevenzione delle Malattie Infettive nel Giovane Migrante* (Prevention of Infectious Diseases in the Young Migrant), which was organised by the *Istituto Superiore di Sanità, Ministero della Salute* (Superior Institute of Health, Ministry of Health) at Rome.

9 marzo 06, Milan The TAMPEP Co-ordinatrix served as the instructor for a formal training course for peer educators concerned with working prostitutes. The name of this training course was "*Transiti, oltre i Confini della Persona*" (Transients, Beyond the Confines of the Person), which was organised by the ALA Association of Milan, in partnership with Crisalide Azione Trans

	<p>Association and the Local Health-Care Management Office (ASL) of the City of Milan and the training institute called Piccolo Principe(The Little Prince). This course relied on the methodology that had been developed under the Fenarete Project within the precedent framework of TAMPEP VI.</p> <p>26 January 2006, Verona, A TAMPEP operatrix served as instructor for a formal training event organised by Progetto Sirio of the Commune of Verona, titled <i>Esperienze e Teorie nel Lavoro Operativo con Utenti dell'Africa Subsahariana: La Nigeria-il Lavoro di Strada e il Contatto con le Donne Nigeriane in Strada</i> (Experiences and Theories in Operative Work with Services-Users from Sub-Saharan Africa: Nigeria— Street Intervention and Contact with Nigerian Women on the Street).</p> <p>16 February 2006, Verona, A TAMPEP operatrix served as instructor for a formal training event organised by Progetto Sirio of the Commune of Verona, titled <i>Esperienze e Teorie nel Lavoro Operativo con Utenti dell'Africa Subsahariana: l'Esperienza di una Ragazza Nigeriana Trafficata e Sfruttata e la Vita nella Comunità Nigeriana di Accoglienza</i> (Experiences and Theories in Operative Work with Services-Users from Sub-Saharan Africa: The Experience of a Trafficked and Exploited Nigerian Girl and Life within the Nigerian Community of Hospitality).</p>
2	<p>NATIONAL EVENT</p>
	<p>Aims of the event</p> <p>Many events took place during the years 2005/2006, which were produced within the framework of TAMPEP's operations in Italy, involving formal training and the dissemination of information through several means of communication. Among these events we have chosen to emphasise the annual summer cultural festival, which, since 2006, its second year of performance, has become an annual appointment for us. Within the network of cultural programmes dedicated to women's issues, this event constitutes an important moment to promote equal rights and parity in the right to citizenship for persons from different cultural backgrounds. Introducing the participation of sex workers and discussing the plight of sex workers in all its respective aspects fills a vacant space in cultural matters and helps to promote a more positive view of the female sex worker.</p> <p>At Trieste, a week dedicated to culture was set-aside during the month of August 2005 and 2006, which consisted of a film festival that treated women's themes. TAMPEP's participation in organising this cultural event, along with staff personnel from the <i>Stella Polare</i> project, has served to publicise the true plight of trafficked migrant women prostitutes and to overcome the prejudices created by the prevailing deleterious stereotypes that are automatically regurgitated by media gurus whenever prostitutes and migrants are mentioned in the news.</p>
	<p>Outline of the event</p> <p>The media highly publicised this event, and we were the subjects of an interesting interview during a wireless radio broadcast that covered all the Region of Friuli-Venezia-Giulia (FVG).</p>
	<p>Evaluation of the event</p> <p>The participating public (around 100 persons) were general population. Therefore, many of them, for the very first time, were able to receive unfiltered information on this subject without the intermediation of the media, which often prove to be biased in its overwhelmingly tendentious reports, with regard to prostitutes and migrants.</p>
	<p>Describe any significant, interesting or unexpected learning outcomes from the event</p> <p>The radio network asked us to participate periodically in future transmissions in order to give a direct voice to foreign women.</p> <p>The Public Socio-Health Care Business Management Office of Trieste (ASS 1), the financier of this cultural week initiative, expressed appreciation of our contribution to the two cultural weeks that were unfolded in August 2005/06 and also we were asked to give more participation for future</p>

	<p>programming.</p> <p>A local cultural center “Ivan Grbec” in Trieste handed a donation in appreciation of the work done by the operatrixes of TAMPEP Project and their activeness in diffusing harm –reduction methods.</p>
	Describe any particular challenges encountered during event
3.	Summary of national event
	<p>August 2005: Trieste As part of the scheduled events of the cultural week, a group of women's associations decided to organise two evenings dedicated to raising social consciousness concerning the themes of female migration and trafficking and prostitution as a condition of life. In order to heighten public sensibility and to raise social consciousness about social matters that concern women, social exclusion, racism, sexual and gender discrimination, we offered films and spectacles for public viewing. Therefore, on the first evening, the Committee for the Civil Rights of Prostitutes laid out the question of migration by having a group of women from the Ukraine perform ethnic song and dance in native costume that they themselves had made. This performance skilfully informed the public about the underlying factors—the living and working conditions within the country of origin—that constitute the reason why these women had made the painful choice to emigrate. On the second evening, we showed a video that illustrated the general living and working conditions of prostitutes here in Italy. Afterwards, there was a public discussion that gave the women cultural mediators and operatives of project TAMPEP that work in Trieste in the North Star project (Stella Polare) the opportunity to describe the way that they work for health prevention health and to hand out publications.</p> <p>01 August 2006: Trieste For the very same cultural month event, we presented a documentary, titled <i>Ni coupables, Ni victimes</i> (Neither Culpable, Neither Victims), that had presented at the International Conference on the Rights Sex Workers of Brussels in 2005. The authoresses of this documentary, who are from the Sexy Shock Project of Bologna, were also on hand for this presentation together with MIT, Tampep Onlus.</p> <p>On this occasion we also presented the Manifesto of Sex Workers. Within the network of the women's film review the social co-operative <i>Cassiopea</i>, an interprise project that TAMPEP/Stella Polare started up some years ago, and the <i>L'una e l'Altra</i> (The One and the Other) association, Kagipota-Kazipot, Goap, <i>Progetto Donna Salute Mentale</i> (Women's Mental Health Project) are also participants.</p>

Appendix 1: National Network members

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, and academic.
Progetto Stella Polare	Trieste	Sex Work project + anti-trafficking
TAMPEP ONLUS progetto Antares	Torino	Sex Work project+ anti-trafficking
Servizio Città e Prostitutione Free woman project - Comune di Venezia	Mestre	Sex Work project and public social service
LILA Lega Italiana Lotta all'Aids	Trent	Sex Work project
Co.Di.Pe.P	Roma	Sex Workers Collective
Coop Il Cerchio	Pisa	Sex Work project + anti-trafficking
L'una e l'altra	Trieste	Women Association
Parsec	Roma	Sex Work project +social development
LILA	Roma	Sex Work project
Cooperativa sociale Cassiopea	Trieste	Women Theatre and laboratory
COOP C.A.T. Streetlight Group Area Immigrazione e servizi sociali - Firenze		Sex Work project + anti-trafficking
Progetto MADDALENA	Palermo	Sex Work project + anti-trafficking
DEDALUS Progetto La Gatta	Naples	Sex Work project + anti-trafficking

Cooperativa Lotta contro l'Emarginazione cooperativa sociale – Onlus	Milan	Sex Work project
LILA Onlus	Milan	Aids prevention + activism
ALA - Associazione Nazionale Lotta all'AIDS Progetto "Via del Campo"	Milan	Sex Work project
ON THE ROAD – Telefono Verde Aids	Martinsicuro (TE)	Sex Work project + anti-trafficking
PROGETTO PRINCESA	Roma	National Hot Line
ASSOCIAZIONE SAN BENEDETTO AL PORTO - PROGETTO LILA	Sanremo	Sex work project + anti-trafficking
OLTRE LA STRADA Comune di Modena	Genoa	Sex Work project + anti-trafficking
Artemide - Progetto prostituzione -	Modena	Sex Work project and public social service
MIT- Movimento di Identità Transessuale	Bologna	Sex Work project
PIAM ONLUS	Bologna	Sex Work project and transgender health service
CABIRIA progetto FREE WOMAN	Asti	Sex Work project
SexyShock	Perugia	Sex Work project
Kagipota-Kazipot	Bologna	Women Lab Pink Queer Activist
Progetto Donna Salute Mentale	Trieste	Women's Association + Theatre handicraft
Goap	Trieste	Women's Public Mental Health Service
Centro Donna Giustizia	Trieste	Women's Centre against Violence
Assoc. Jerry Masslo	Ferrara	Women's Law enforcement
Associazione Penelope	Caserta	Health service
	Catania	Sex Work project + anti-trafficking

Appendix 2: Participants in national event

<i>Organisations</i>	City/Town	Remit health service, sex work project, social service, law enforcement, academic.
Cooperativa Sociale Cassiopea	Trieste	Women Theatre and laboratory
Stella Polare project	Trieste	Sex work project + anti-trafficking
Kagipota-Kazipot	Trieste	Women's Association + Theatre handicraft
Goap	Trieste	Women's Centre against Violence
SexyShock	Bologna	Women's Lab Pink Queer Activist
Progetto Donna Salute Mentale	Udine	Women's Mental Health public Service
Tampep Onlus	Turin	Sex Work Project + anti-trafficking
Co.Di.Pe.P.	Roma	Sex Worker Collective
MIT Movimento Identità Transessuale	Bologna	Transgender health service + Sex Work project
L'una e L'altra	Trieste	Women base Association
Cooperativa Noncello	Pordenone	Social Co-operative
Il Nodo	Trieste	Cultural Association
"Lucrezia Marinelli"	Sesto S. Giovanni MI	Cultural Association Women's cinema
"Acquolina"	Trieste	Cultural Association
PROGETTO PRINCESA	Sanremo	Sex work project + anti-trafficking
Servizio Città e Prostituzione Free woman project - Comune di Venezia	Mestre	Sex Work project and public social services

