



Submission to the Special Committee on Reforming the BC Police Act

Submitted on behalf of the An Evaluation of Sex Workers' Health Access Project (AESHA) Team at the Centre for Gender and Sexual Health Equity (CGSHE)

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About CGSHE

The Centre for Gender and Sexual Health Equity (CGSHE) is an academic research centre hosted at Providence Health Care and affiliated with the University of British Columbia and Simon Fraser University. CGSHE has a strategic mandate to advance gender & sexual health equity among marginalized populations in BC, Canada, and globally through three pillars: research, policy, and practice. These pillars incorporate community-based, clinical and population health research, policy evaluation, implementation science and education. The centre is founded on a well-established infrastructure of research, education, policy, and knowledge translation at UBC and SFU, bringing together faculty members, their trainees and research staff since 2010. Our work spans departments, schools and disciplines, including social medicine, public health, family medicine, obstetrics, nursing, social sciences, gender and labour studies, and policy. We are committed to intersectional and collaborative approaches to advancing gender equity and sexual health for all. CGSHE regularly provides expert evidence and consultation to all levels of government, including City of Vancouver task forces, BC Ministry of Health, BC and National Inquiries into Missing and Murdered Indigenous Women and Girls, federal Ministry of Justice, House of Commons, Status of Women Canada, and Public Health Agency of Canada.

About AESHA

Housed at the CGSHE, the AESHA (An Evaluation of Sex Workers' Health Access) Project is a 10-year longitudinal community-based research project that includes a quantitative cohort and qualitative/ethnographic arm. As part of the quantitative arm, AESHA operates a community-based prospective cohort of over 900 sex workers across diverse work environments. The qualitative arm is focused on documenting the lived experiences of sex workers of all genders and third parties who provide services for sex workers (e.g. receptionists, venue managers, owners and security personnel). Racialized sex workers are over-represented within AESHA: 38% of participants are of Indigenous ancestry, and 29% are racialized im/migrant workers. 6% of participants identify as a minority gender identity (trans or two-spirit women), and 34% identify as a minority sexual orientation (lesbian, gay, bisexual, queer, or two-spirit). Primary places of service include indoor (57.5%) – 34.3% indoor venues (in-call venues, massage parlours, beauty spas, micro-brothels) and 23.2% informal indoor venues (bars, hotels) – and 37% outdoor/public spaces (cars, street, parks, alleys). AESHA involves sex workers across Metro Vancouver, including the City of Vancouver and its bordering municipalities (e.g., Burnaby, Surrey).

Over the past 5 years, the AESHA project focused on evaluating the impact of evolving legislative approaches to the regulation of sex work including the Canadian 'end-demand' laws (The Protection of Exploited Persons and Communities Act), on sex workers' health, safety, and human rights. This research has been shared in over 38 peer-reviewed articles and a recent report on the harms of end-demand legislation, which our team submitted to the federal Department of Justice and all MPs and Senators. AESHA is built on partnerships with SWUAV, SWAN, PACE, WISH, HIM/HUSTLE, Pivot, HIV/AIDS Legal Network, and the BCCDC.

Evidence-based recommendations

Based on over a decade of rigorous academic peer-reviewed community-based research, we have four central evidence-based policy recommendations for the reform of the BC Police Act. We urge the committee to endorse the following priorities to ensure the occupational health and safety of sex workers in BC:

- 1. Stop the enforcement of all sex work-related offences as outlined under current 'end-demand' federal sex work laws;
 - 1.1. End enforcement of offences related to the purchase of sexual services and stop police surveillance of sex workers' clients,
 - 1.2. End enforcement of communicating for the purpose of offering and obtaining sexual services, offences and cease police harassment of sex workers and surveillance of their work environments,
 - 1.3. End enforcement of sex work-related third party offences, including advertising sexual services, and unrequested police interference of indoor sex work venues,
- 2. Implement a Good Samaritan policy that allows sex workers and third parties to call for police,
- 3. assistance on their own accord and without the threat of arrest or immigration-related repercussions,
- 4. Eradicate systemic racism and xenophobia within police agencies,
- 5. Divest from policing of sex work and poverty and reinvest in sex worker-led community supports.

It is critical that law and policymakers approach legislative changes to policing through an intersectional lens. Intersectionality reflects an understanding of the different social locations and systems of oppression (e.g., race/ethnicity, gender, class, sexuality, disability/ability, migration status, etc.) that inform and influence sex workers' lives. This understanding highlights the roles of power inequities and structural forces in shaping sex workers' interactions with police and the outcomes of these interactions. As highlighted throughout this report, research evidence clearly shows that reliance on police in the sex industry disproportionately impacts sex workers who face intersecting social and structural inequities, including Indigenous, racialized im/migrant, gender non-binary, those who use drugs and those living in poverty. An intersectional lens to reforming policing should address the systemic, gendered, and colonial harms of current and historical policing of sex workers and take steps towards divesting resources from policing and scaling-up support for community-led safety and support strategies.

Legislative landscape

Sex workers globally face disproportionate health and social inequities, primarily resulting from high levels of criminalization, policing, stigma and limited investment in community-based sex work support services (Shannon et al., 2015; Platt et al., 2018; Decker et al., 2015;

Footer et al., 2016). In Canada, there has been significant attention to the regulation of sex work over the past decade. In 2013, the Supreme Court of Canada, in a landmark unanimous decision (Canada v Bedford), struck down prior prohibitive sex work laws deeming the prohibitions unconstitutional for not protecting the right of sex workers to security of the person.

In blatant disregard of the Supreme Court of Canada Bedford decision, extensive research and growing consensus by international human rights bodies, the previous Conservative Federal Government enacted the Protection of Communities and Exploited Persons Act (PCEPA) in December 2014. The PCEPA re-criminalized all facets of sex work, including selling sex in a public space, purchasing sex in all spaces, all material benefits from the sale of sexual services, advertising, and working as a third party. These end-demand laws have been criticized by sex workers, human rights organizations such as Amnesty International, academics and lawyers for reproducing the harms to sex workers' health and safety that the Supreme Court of Canada recognized as unconstitutional in 2013. Indeed, in April 2021 the Ontario Superior Court has declared provisions of the PCEPA as unconstitutional, including the inability of sex workers to work with third parties and the prohibitions around communicating with clients. In the same month, the Canadian Alliance for Sex Work Law Reform — an alliance of 25 sex worker rights groups across the country has filed a Charter Challenge seeking to strike down all provisions of the PCEPA.

The framing of sex work in end-demand legislative approaches as inherently exploitative, and the continuous conflation of sex work with human trafficking, has led to the pervasive criminalization and policing of sex workers (McBride et al., 2020; Crago et al., 2021, Krüsi et al., 2014). Policy regimes rooted in anti-trafficking discourse, including end-demand laws, have underpinned punitive policing of sex workers' workspaces, including both outdoor and indoor settings, with significant harms to the occupational health and safety of sex workers (McBride et al., 2020; Crago et al., 2021; Anderson et al., 2015).

The following recommendations are based on peer-reviewed research evidence from AESHA and the CGSHE:

Recommendation 1. Stop the enforcement of all sex work-related offences as outlined under current 'end-demand' federal sex work laws

Despite the purported goals of prioritizing the safety of sex workers and encouraging sex workers to report violence, our body of research shows that end-demand criminalization and associated policing undermine sex workers' occupational health and safety (Centre for Gender and Sexual Health Equity, 2019; McBride et al., 2020; Krüsi et al., 2014). The

72% of Vancouver sex workers report no improvement and 26% report negative changes in working conditions under end-demand legislation.

(Machat et al., 2019)

enforcement of prohibitive sex work laws in tandem with sex workers' experiences of police harassment and surveillance under criminalization has been linked to rushed and clandestine

negotiations of sex work transaction; the displacement of sex workers to isolated and hidden spaces to avoid police detection; and reduced access to supports that are integral to sex workers' safety (e.g. spotters, third parties, other sex workers).

Recommendation 1.1 End enforcement of offences related to the purchase of sexual services and stop police surveillance of sex workers' clients

Criminalizing the purchase of sexual services

S.286.1(1) Obtaining sexual services for consideration is punishable by imprisonment and fine; mandatory minimum fines apply if the offence occurs in a public place that is, is in view of, or is next to a park or the grounds of a school or religious institution or where persons under the age of 18 can reasonably be expected to be present.

In 2013, the Vancouver Police Department (VPD) enacted a sex work enforcement policy which focused enforcement efforts on sex workers' clients rather than sex workers. Our peer-reviewed evaluation of this enforcement approach highlighted that policing strategies targeting clients reproduced the same harms and risks of violence as previous approaches targeting sex workers (Krüsi et al, 2014). Sex workers continued to mistrust police, had to rush screening clients and were displaced to outlying areas with less control over negotiating transactions. Sex workers' narratives emphasized that in the context where clients continue to be police targets, it remains in the clients' and sex workers' shared interest not to get detected by police. Therefore, sex workers continued to be forced to severely limit or forego screening or negotiating health and safety with prospective clients before getting into a vehicle (Krüsi et al, 2014).

"Sometimes the guy will drive up and just sort of wave or point to go down the alley or something like that somewhere else where he can pick me up. [How does that affect your safety?] You never know who it is, right? And you can't really see his face, can't really see anything they could have a gun in their hand or. You know what I mean, they could be a little bit drunk or something if you can't really see them very clearly, you know? And you can't say hi or whatever before you get in. You have to just hurry up before the cops come."

— Outdoor-based sex worker, Metro Vancouver (Krüsi et al, 2014)

Similarly, for indoor sex workers, clients' concern around maintaining anonymity under enddemand laws constrained venues' ability to adequately screen and identify clients. Since the implementation of PCEPA, sex workers have described that clients have generally been much less likely to share personal information in order to protect their identity, making it more difficult for workers to screen clients, which undermined their occupational health and safety:

"If clients are nervous about giving away their personal information, then it makes me not as safe because I don't have as much about their background. When I first started out there wasn't much talk about criminalization around sex work so people felt comfortable giving me their full first and last names and phone number and now I think people would be a lot more cautious."

Indoor sex worker, Metro Vancouver (McDermid, 2021)

Screening of prospective clients is essential in all sex work environments, as it allows sex workers to take precautions and obtain crucial information such as clients' full name, phone number, license plate, etc. Without the ability to screen clients, it is difficult for workers to employ adequate safety strategies, such as checking 'bad date' reports, detect the presence of weapons or intoxication, negotiate the fee and type of sexual transaction and avoid risky sexual encounters (e.g., unprotected sex), and compromises the ability to identify a violent perpetrator or access legal or other recourse in case of fraud or assault (Krüsi et al., 2014).

Our evidence also shows that client and worker police surveillance in indoor working environments has negative safety and economic implications for sex workers (Anderson et al., 2015; McBride et al, 2019; Duff et al, 2017). For example, under client criminalization, police surveillance may exacerbate clients' fear of arrest, fine or being 'outed', pushing some to redirect their anxiety back on to workers in the form of violence. Persistent police presence may also deter clients from accessing indoor environments, pushing workers away from working in indoor venues despite the numerous protections these environments can offer (e.g., access to condoms and other harm reduction supplies, reduced physical violence, and third party support, etc.) (McBride et al, 2019; Duff et al, 2017 Shannon et al., 2009). Alternatively, a reduction in client volume due to police may force some workers to see riskier clients that they would otherwise refuse or engage in unsafe sex practice, in order to make up for lost income (Machat et al., 2019).

Recommendation 1.2 End enforcement of communicating for the purpose of offering and obtaining sexual services offences and cease police harassment of sex workers and surveillance of their work environments

Criminalizing Communicating

s.213(1) Stopping or impeding traffic for the purposes of offering, providing or obtaining sexual services s.213(1.1) Communicating for the purpose of offering or providing sexual services for consideration in a public space or in any place that is in view of or next to a school ground, playground or daycare centre 2.286.1(1) Communicating for the purpose of obtaining sexual services for consideration is punishable by imprisonment and/or fine; higher penalties apply in a public place that is, is in view of, or is next to a park or the grounds of a school or religious institution or where persons under 18 can reasonably be expected to be present.

Similar to the enforcement of offences related to the purchase of sexual services, enforcement of the prohibition on communicating in public spaces for the purposes of sex work pushes marginalized sex workers to dark alleys, industrial settings and more isolated and hidden indoor and off-street spaces, where they have limited protection from violence or ability to screen prospective clients and safely negotiate terms of transactions (Shannon et al., 2008; Shannon & Csete, 2010; Krüsi et al., 2015; Lyons et al., 2017). When sex workers are pushed to work in isolated areas and forced to rush transactions, they may be forced to forgo client

condom use to prioritize immediate safety over their sexual health and safety (Shannon, Kerr et al., 2008; Shannon & Csete, 2010).

"You know, you get all these asshole cops and security kicking us off. Pushing us into darker and darker areas, you know. That has got to stop. Well, industrial areas are kind of scary, because no one's really around."

— Sex worker, Metro Vancouver (Shannon, 2008)

In qualitative research with trans women and Two-Spirit sex workers, negative interactions with police and enforced displacement have been shown to amplify risk of client violence due to limited space for gender identity disclosure (Lyons et al. 2017), highlighting that policing of trans and Two-Spirit sex workers has unique additional negative effects to their occupational health and safety.

What does police harassment of sex workers look like?

Under the criminalization of sex work, sex workers report regularly experiencing harassment from police, including intimidation and abuse by police (e.g., forced confinement or detainment without arrest, confiscation of condoms or other property without arrest, verbal intimidation, police raids), but also through surveillance or "checkins". These interactions with police have been shown to reduce sex workers' ability to utilize safety strategies, displace sex workers to isolated areas, and pose severe barriers to access to health and social supports (Shannon et al., 2008; Shannon et al., 2009; Shannon & Csete, 2010; Lyons et al., 2017; Anderson, 2015).

"While they're going around chasing johns away from pulling up beside you, I have to stay out for longer [...] Whereas if we weren't harassed we would be able to be more choosy as to where we get in, who we get in with you know what I mean? Because of being so cold and being harassed, I got into a car where I normally wouldn't have. The guy didn't look at my face right away. And I just hopped in cause I was cold and tired of standing out there. And you know, he put something to my throat. And I had to do it for nothing. Whereas I woulda made sure he looked at me, if I hadn't been waiting out there so long".

— Sex worker, Metro Vancouver (Krüsi et al., 2016)

Additionally, our research has found that the court-ordered sanctions and their enforcement (e.g. red zone/no-go restrictions) result in displacement to more unsafe and isolated work environments (Shannon, Strathdee et al., 2009; Krüsi et al., 2012; Deering et al., 2013).

Recommendation 1.2.1 Eliminate policing that harasses, targets and surveils sex workers who use drugs and harm reduction services

Sex workers who use drugs face enhanced targeting, harassment, and surveillance under current policing practices which criminalize and stigmatize of both sex work and illicit drug use. (Krüsi et al., 2014; Landsberg et al., 2017; Shannon et al., 2009, 2015; Goldenberg et al., 2020).

Sex workers facing police barriers faced 2x higher odds of non-fatal overdose. 68% of sex workers who use drugs reported police barriers to harm reduction.

(Goldenberg et al., 2020)

The disproportionate burden of policing among sex workers who use drugs is significantly linked to unmet needs for health services, exposure to physical and workplace sexual violence and non-fatal overdose (Goldenberg 2020). Criminalization and its enforcement displace workers from harm reduction services and supports, provide police with latitude to surveil, target, and harass sex workers on various charges (e.g., drug-related, loitering) and reinforce stigma and marginalization among sex workers who use drugs (Goldenberg et al., 2020; Shannon et al., 2015), many of whom are also racialized.

Recommendation 1.3 End enforcement of sex work-related third party offences, including advertising sexual services, and unrequested police interference of indoor sex work venues

Material benefit from sexual services

S.286(1) & (2) Everyone who materially benefits (profits) knowing it was derived from the purchase of services

S.286.2(3) Living with a sex worker, in the absence of evidence to the contrary, is presumed to be proof

S.286.2(4) &(5) If a person receiving benefits is in a "legitimate" (i.e., family or intimate) relationship with or provides services at fair market value to the sex worker, exceptions may apply, but not if that person uses threats or violence, abuses a position of power or trust, provides intoxicants, or receives benefits in a "commercial enterprise" to sell sexual services

Sex workers frequently rely on third parties for a number of supportive services, including as receptionists, managers/venue owners, advertisers, website providers, drivers, housekeepers, spotters and security guards. Contrary to common stereotypes, our research indicates that the overwhelming majority of third parties in indoor sex work venues are women and current or former sex workers (McBride, 2020a). This problematizes the assumptions that are reflected in the current legislation, that all third parties are exploitative men or "pimps."

"I know I have a boss that will have my back no matter what."

— Indoor sex worker, co-manager, Vancouver (McBride et al, 2020a)

End-demand laws criminalize most third party involvement in sex work, resulting in the heavy policing of managed indoor sex workspaces (e.g., massage parlours). However, our research has consistently shown that access to third party supports with supportive management provide critical health and safety supports to sex workers and are among the safest work environments (McBride et al 2019b, Shannon et al, 2015; Goldenberg et al, 2015).

Indoor sex workers report 73% lower odds of violence compared to workers in public or street-based locations. (McBride et al, 2020b)

Access to third party administrative and security services has been directly linked to almost two-fold higher odds of accessing mobile condom distribution, and 1.6x higher odds of accessing sex worker-led/community supports. (McBride et al, 2019a)

Within managed, indoor venues, im/migrant sex workers across Metro Vancouver are over-represented and face racialized police harassment and surveillance, city by-law inspections, fines and shut-downs (McBride et al., 2020; Goldenberg et al, 2017). More than half of im/migrant sex workers worry about negative consequences of police interactions as well as inspections and surveillance by other authorities (e.g., immigration, municipal by-law) in their workplace, including loss of immigration status, deportation, arrest, fines, stigma, or loss of clients and income (Goldenberg et al., 2017; McBride et al., 2019; Anderson et al., 2015).

Under current legislation, condoms – which represent basic, essential occupational health equipment for sex workers – are often used by police as evidence of criminal activity. This can deter third parties from storing or offering sufficient quantities of onsite occupational health equipment such as condoms and lube (Goldenberg et al., 2017; Anderson et al., 2015).

"The manager just tells us to be careful...but she doesn't have the ability to do too much. She's also afraid of the police coming here and knowing that we're doing this work. It would shut down her parlour."

— Indoor sex worker, Metro Vancouver (Goldenberg et al., 2017)

Sex workers experienced no significant increase of violence reporting post-implementation of end-demand laws (PCEPA) and no im/migrant participants reported violence to police post-PCEPA.

(McBride et al, 2019b)

The criminalization of third parties and de facto criminalization of managed indoor workspaces has also been linked to indoor sex workers' and venue owners' avoidance of reporting violence to police due to fear of criminal charges (McBride, 2019a; McBride 2020b).

31% of workers felt unable to call 911 even when faced with life-endangering violence, due to fear of police detection, arrest, stigma, or harassment.

(Crago et al., 2021)

Ending police surveillance of indoor venues and the decriminalization of third parties is necessary to ensure sex workers are able to access the occupational health resources and third party supports they need.

Advertising of Sexual Services

Section 286.4 Knowingly advertising an offer to provide sexual services for consideration Section 286.5 Those who sell their own sexual services are protected from criminal liability for committing this offence if they advertise their own sexual services, or for participating in the commission of this offence if the offence relates to their own sexual services.

Criminalization of third party advertising limits sex workers' access to safety protections from violence that are afforded by screening potential clients in advance, including in the context of online work. As outlined above, the ability to vet clients and establish boundaries, negotiate services offered, prices, and use of PPE (condoms) is imperative to sex workers' health, safety, and financial security. As such, online advertising of sex work has been directly linked to reduced instances of violence, improved sexual health, and reduced work stress (Argento; 2018; Machat et al, 2021).

Third parties (e.g., managers, venue owners) can be charged for advertising the services of staff (Department of Justice, 2015). This has specific implications for sex workers who work in indoor venues and with co-workers and managers, among whom many are im/migrant workers. The dual criminalization and enhanced surveillance faced by third parties hinders advertising access for im/migrant sex workers - particularly Asian im/migrant sex workers - who may choose to utilize third party supports due to language barriers and the safety and economic advantages this may offer. For Asian im/migrant sex workers, enforcement of third party advertising laws can result in enhanced surveillance, 'take downs' of advertisements, reduced ability to screen clients and reduced client volume and income security (Anderson et al, 2015).

Recommendation 2: Implement a Good Samaritan policy that allows sex workers and third parties to call for police assistance on their own accord and without the threat of arrest or immigration-related repercussions

Our research shows that criminalized interactions with law enforcement and other government authorities severely impedes the ability of sex workers and third parties to contact the police for support, enabling perpetrators - including the police - to abuse sex workers with impunity, this perpetuating high levels of violence (McBride et al., 2020; Shannon et al., 2008; Shannon et al., 2009; Shannon & Csete, 2010; Lyons et al., 2017; Krüsi et al., 2016). This is especially true for Indigenous, racialized and im/migrant sex workers, who report particularly low levels of reaching out to police for assistance, even when faced with life-endangering violence (Krüsi et al., 2016; Goldenberg et al., 2017; McBride et al., 2020).

Despite purported goals of end-demand laws, recent research since the enactment of PCEPA found that:

Fear of police and barriers to reporting violence have not improved following the implementation of end-demand laws in 2014. Sex workers in Metro Vancouver indicate being especially worried about negative criminal consequences of reporting violence, which is

further amplified by concerns or experiences of stigmatizing and discriminatory treatment by police (Anderson et al., 2015; Krüsi et al., 2014; Krüsi et al., 2016; Argento et al., 2019; Goldenberg et al., 2017; Goldenberg et al., 2020; McBride et al., 2020b).

Only 26% of incidents of violence over an 8-year period were reported by sex workers to the police, and im/migrant sex workers were significantly less likely to report such violence

(McBride et al., 2020b)

Furthermore, our quantitative research found that:

"Even if [robbery or assault] happens, I would not dare call the police. Sorry, it's because of my job."

— Third party support, Metro Vancouver (McBride et al., 2020a)

Racialized im/migrant sex workers are especially unlikely to report workplace violence to the police (Goldenberg et al., 2017; McBride et al., 2020). Our evidence-based research in this area points to the need to eliminate police and immigration targeting and surveillance of im/migrant sex workers and their workspaces; this can reduce barriers to reporting violence and other abuses and enable sex workers to do so on their own terms, utilizing police or other support systems (e.g., Bad Date reporting systems) without the threat of arrest, immigration consequences, or discrimination.

Because of the historic and continued violence perpetrated by law (and immigration) enforcement systems, for many sex workers, calling the police may never be a preferred or safe option. This fear and mistrust is shaped by decades of police apathy, systemic racism, a culture of mistrust and unresponsiveness and neglect surrounding missing women, and a lack of recourse and response to violence by police and the judicial system, particularly for Indigenous sex workers who described how racism and colonialism shape current and historical policing practices (Shannon et al., 2008; Hunt, 2015). Alternatives to policing are necessary to ensure adequate support for sex workers who experience violence and other human rights violations. This should include increased access to community-led violence reporting, such as the <u>BC Province-Wide Bad Date Reporting System</u> initiated by sex work organizations, trauma-informed support and feminist and culturally safe justice processes.

Recommendation 3: Eradicate systemic racism and xenophobia within police agencies

Policing has a long history of disproportionately impacting and further marginalizing racialized communities, including Indigenous, Black, and other people of colour, im/migrant sex workers, and trans and gender-diverse sex workers. As outlined above, our research consistently shows that criminalization and policing disproportionately impact racialized sex workers, and that current reliance on carceral interventions and punitive policing undermines the occupational health and safety of Indigenous and racialized im/migrant sex workers (Goldenberg et al., 2017; Machat et al., 2019; McBride et al., 2020; Bingham et al., 2014)

Indigenous sex workers with family members who experienced colonial violence (e.g. attending residential schools) face higher rates of police abuse.

(Bingham et al., 2014)

Policing and legal violence are fundamental to colonial power relations— relations which are, and have always been, inherently gendered (Hunt, 2015). Colonization's role in historical and contemporary policing practices has resulted in specific and direct harms for Indigenous people in general and Indigenous women, girls and gender non-binary people specifically. This is demonstrated by the epidemic of Missing and Murdered Indigenous Women, Girls and Two-Spirit persons and the decade-long unresponsiveness of Metro Vancouver police departments in investigating the disappearance of women from Vancouver's Downtown Eastside at the hands of a serial killer and BC's "Highway of Tears".

Our research with outdoor-based sex workers documented the experiences and discourse of state-sanctioned violence against Indigenous sex workers and lack of access to safe justice processes:

"There are so many girls going missing. Yeah, they're getting away with it".

"We're the bottom of the barrel. Nobody will miss us".

"Look at what happened to all the girls from the Pickton farm [the local farm where over 30 missing women were murdered]. Like you know that shouldn't have happened and, maybe if some of the resources would have been out there... I think these guys are way behind".

— Outdoor-based sex workers, Metro Vancouver (Shannon et al., 2008a)

Amongst a cohort of Indigenous women in Vancouver, many of whom have experience in sex work, state interventions/violence such as child apprehension are directly linked to higher odds of non-fatal drug overdose (Thumath et al., 2020). Intergenerational trauma related to colonial violence including displacement and residential schools has been associated with increased odds of police violence for Indigenous sex workers (Bingham et al., 2014). As well, Indigenous sex workers face over twice the odds of being unable to call 911 when needed (Crago et a.l, 2021). Persistent systemic racism within police services has been shown to intersect with discrimination against sex workers in ways that block Indigenous sex workers' access to protection under end-demand legislation (Krüsi et al., 2016).

"My views on the police, especially the VPD changed dramatically when I had a cop, sergeant with the VPD tell me that I cannot charge my date [client] for sexual assault because I was a hooker [...] I was supposed to write a complaint against it, which I still haven't done. I want to but I fear repercussions [...] I won't go to cops [in case of violence], not after that sergeant. There's just no point, not if I'm gonna get shot down and belittled. I'm not going to waste my precious breath on somebody who doesn't give a rat's ass."

— Indigenous sex worker, Metro Vancouver (Krüsi et al., 2016)

21% of im/migrant sex workers and managers/owners in Metro Vancouver have experienced criminalization, including police arrest or harassment (e.g., raids, fines, detained, property taken).

(Goldenberg et al., 2017)

Racialized im/migrant sex workers face intersecting concerns related to law and immigration enforcement and the severely negative impacts of these systems across many aspects of their occupational health and safety (Goldenberg et al., 2017; McBride et al., 2020). Rather than perceiving the role of law enforcement as protective, the fear and destabilizing effects of police presence is often seen as yet another risk to be managed by im/migrant workers and third parties (McBride et al., 2019a; Duff et al., 2017). The precautions that im/migrant sex workers take to avoid interacting with law enforcement often directly jeopardizes their health and safety (Goldenberg et al., 2017). Unexplained and non-consensual police visits and document checks, combined with discriminatory and disrespectful treatment, foster deep mistrust between sex workers, third parties, and law enforcement in indoor sex work venues in Metro Vancouver, and are perceived to be a form of racial discrimination and profiling of Asian-run and staffed establishments:

"Immigrants like us rarely have contact with police, so we are all quite nervous. This is only natural...we should not have to interact with the police much here, unless we are in danger, or if we commit crimes. So now, even when we didn't do anything, there are police here asking us many questions, which is very strange, and it is very uncomfortable. Especially their attitudes when they question us, it's as if we are doing something wrong."

Im/migrant third party support, Metro Vancouver (Goldenberg et al., 2017)

"The police are driving me crazy. Why do they come here? They scrutinize us so closely...it's discrimination...Sometimes we can understand why we were treated this way. Even though we are Canadian citizens, we do not feel we are treated equally as local people. It's really difficult for foreigners to survive."

— Im/migrant third party support, Metro Vancouver (Goldenberg et al., 2017)

In order to address the harms of policing for Indigenous, racialized, and im/migrant sex workers, there is an urgent need to dismantle systems of oppression (racism, colonialism, xenophobia and anti-migrant ideologies) that continue to harm sex workers' occupational health and safety.

In addition to ending the enforcement of harmful federal sex work laws, members of the Special Committee reviewing the BC Police Act must also involve concerted and specific efforts to address and undo policing's legacy of enforcing colonial and racist policies. Efforts to center racialized, im/migrant and Indigenous sex workers' experiences and perspectives on what changes are necessary to reverse and repair harms, and reinvest in transformative, decolonizing, and community-based, culturally safe alternatives of justice are also urgently needed.

Recommendation 4: Divest from policing of sex work and poverty and reinvest in sex worker-led community supports

Our research unequivocally demonstrates the negative impacts of criminalization and policing of sex work. Therefore, <u>in alignment with calls from BC community voices</u>, we do not support or recommend reform initiatives that increase police funding or expand the role of police with regards to sex work, as well as other intersecting communities such as those who are impacted by poverty, homelessness and toxic drug supply, of which racialized and Indigenous people are disproportionately burdened. Rather, changes in policing need to implement a divestment approach, and utilize reduced budgets while prioritizing the abovementioned recommendations.

Our research and that of others around the globe has shown that supporting and scaling-up community-based and sex worker-led initiatives and programmes are a best practice for advancing the health and human rights of sex workers, and have been identified as a WHO best practice for the promotion of sexual health (Argento et al., 2020). Our work in Vancouver has demonstrated that sex worker collectivization and peer supports - for example, increased social cohesion among sex workers can enhance occupational health, including reduced client condom refusal (Argento et al, 2016). Workplaces and settings where sex workers are able to mobilize, work together, and where interactions with police and immigration authorities are minimized have been shown to be critical for supporting sex workers' health and safety (Goldenberg et al, 2015). Similarly, our qualitative research has documented that access to safer indoor environments allows for informal peer support mechanisms, which are more difficult to advance in heavily policed outdoor environments (Krüsi et al, 2012).

"All I have to do is yell, and every girl in my building will be there, right? The guy gets scared and leaves. Sixteen girls show up at your door, banging on your door. He's gonna go, right? People are remembered there too, right?"

Sex worker, Metro Vancouver (Krüsi et al, 2012)

The ongoing criminalization, policing, and surveillance of sex work venues and work environments, coupled by a lack of funding, often hinder the collectivization of sex workers and the expansion of sex worker-led supports and organizing. Our evidence has found that under end-demand laws, sex workers experienced significantly reduced access to critical health and sex worker and community-led services (Argento et al., 2020).

Rather than policing sex workers, our evidence demonstrates the need for increased support and scale-up of sex worker-led and community-based services, including drop-in centres, outreach and health services that are gender-sensitive, trauma-informed, and culturally safe.

Evidence from public health and human rights research with sex workers around the globe is unequivocal: criminalization and punitive policing are consistently associated with poorer health and social outcomes and violate the fundamental rights of sex workers (Shannon, 2015; Platt et al, 2018; Footer et al, 2016; Decker et al, 2015; Shannon et al, 2018; plus: Krüsi et al, 2021). Scaling up support for sex worker- and community-led initiatives is an evidence-

based approach to improving sex workers' occupational health and safety, and should be
prioritized over policing and criminalization.

References:

Anderson, S., Jia, J. X., Liu, V., Chattier, J., Krüsi, A., Allan, S., Maher, L., & Shannon, K. (2015). Violence prevention and municipal licensing of indoor sex work venues in the Greater Vancouver Area: narratives of migrant sex workers, managers and business owners. Culture, Health & Sexuality, 17(7), 825-841.

Amram, O., Shannon, K., Braschel, M., Machat, S., Moreheart, S., Lyons, T., & Goldenberg, S. M. (2019). Mapping Workplace Neighborhood Mobility Among Sex Workers in an Urban Canadian Setting: Results of a Community-Based Spatial Epidemiological Study From 2010-2016. Journal of interpersonal violence, 0886260519846858.

Argento, E., Taylor, M., Jody, J., Taylor, C., Jennex, J., Andrea, K., & Shannon, K. (2018). The Loss of Boystown and Transition to Online Sex Work: Strategies and Barriers to Increase Safety Among Men Sex Workers and Clients of Men. American Journal of Men's Health, 12(6). http://dx.doi.org.proxy.lib.sfu.ca/10.1177/1557988316655785

Argento, E., Goldenberg, S., Braschel, M., Machat, S., Strathdee, S. A., & Shannon, K. (2020). The impact of end-demand legislation on sex workers' access to health and sex worker-led services: A community-based prospective cohort study in Canada. PloS One, 15(4), e0225783.

Bingham, B., Leo, D., Zhang, R., Montaner, J., & Shannon, K. (2014). Generational sex work and HIV risk among Indigenous women in a street-based urban Canadian setting. Culture, health & sexuality, 16(4), 440-452.

Crago, A. L., Bruckert, C., Braschel, M., & Shannon, K. (2021). Sex Workers' Access to Police Assistance in Safety Emergencies and Means of Escape from Situations of Violence and Confinement under an "end-demand" Criminalization Model: A Five City Study in Canada. Social Sciences, 10(1), 13.

Cunningham S., DeAngelo G., & Tripp J. (2017). "Craigslist's Effect on Violence Against Women." URL http://scunning.com/craigslist50.Pdf.

Decker, M. R., Crago, A. L., Chu, S. K., Sherman, S. G., Seshu, M. S., Buthelezi, K., Dhaliwal, M., & Beyrer, C. (2015). Human rights violations against sex workers: burden and effect on HIV. Lancet (London, England), 385(9963), 186–199. https://doi.org/10.1016/S0140-6736(14)60800-X

Deering, K. N., Lyons, T., Feng, C. X., Nosyk, B., Strathdee, S. A., Montaner, J. S., & Shannon, K. (2013). Client demands for unsafe sex: the socioeconomic risk environment for HIV among street and off-street sex workers. Journal of acquired immune deficiency syndromes 63(4), 522–531. https://doi.org/10.1097/QAI.0b013e3182968d39

Department of Justice. (2015). "Fact Sheet - Prostitution Criminal Law Reform: Bill C-36, the Protection of Communities and Exploited Persons Act". https://www.justice.gc.ca/eng/rp-pr/other-autre/c36fs_fi/.

Duff, P, Sou, J., Chapman, J., Dobrer, S., Braschel, M., Goldenberg, S., & Shannon, K. (2017). Poor working conditions and work stress among Canadian sex workers. Occupational Medicine, 67(7), 515–521. https://doi.org/10.1093/occmed/kqx092

Footer, K. H., Silberzahn, B. E., Tormohlen, K. N., & Sherman, S. G. (2016). Policing practices as a structural determinant for HIV among sex workers: a systematic review of empirical findings. Journal of the International AIDS Society, 19(4 Suppl 3), 20883. https://doi.org/10.7448/IAS.19.4.20883

Goldenberg, S. M., Duff, P., & Krusi, A. (2015). Work environments and HIV prevention: A qualitative review and meta-synthesis of sex worker narratives. BMC Public Health, 15(1), 1241. https://doi.org/10.1186/s12889-015-2491-x

Goldenberg, S. M., Krüsi, A., Zhang, E., Chettiar, J., & Shannon, K. (2017). Structural determinants of health among im/migrants in the indoor sex industry: experiences of workers and managers/owners in metropolitan Vancouver. PLoS One, 12(1), 1–18. https://doi.org/10. 1371/journal.pone.0170642.

Goldenberg, S., Watt, S., Braschel, M., Hayashi, K., Moreheart, S., & Shannon, K. (2020). Police-related barriers to harm reduction linked to non-fatal overdose amongst sex workers who use drugs: Results of a community-based cohort in Metro Vancouver, Canada. International Journal of Drug Policy, 76, 102618.

Hunt, S. (2015). Representing colonial violence: Trafficking, sex work, and the violence of law. Atlantis: Critical Studies in Gender, Culture & Social Justice, 37(2), 25-39.

Krüsi, A., Chettiar J., Ridgway A., Abbott J., Strathdee SA., & Shannon K. (2012). Negotiating Safety and Sexual Risk Reduction with Clients in Unsanctioned Safer Indoor Sex Work Environments: A Qualitative Study. American Journal of Public Health 102 (6): 1154–1159.

Krüsi, A., Pacey, K., Bird, L., et al. (2014). Criminalisation of clients: reproducing vulnerabilities for violence and poor health among street-based sex workers in Canada—a qualitative study. BMJ Open, 4(6). http://bmjopen.bmj.com/content/4/6/e005191.abstract. Accessed April 2017.

Krüsi, A., Kerr, T., Taylor, C., Rhodes, T., & Shannon, K. (2016). 'They won't change it back in their heads that we're trash': the intersection of sex work–related stigma and evolving policing strategies. Sociology of Health & Illness, 38(7), 1137-1150.

Krüsi, A., D'Adamo, K., & Sernick, A. (2021). Criminalised Interactions with Law Enforcement and Impacts on Health and Safety in the Context of Different Legislative Frameworks Governing Sex Work Globally. In S. M. Goldenberg, R. Morgan Thomas, A. Forbes, & S. Baral

(Eds.), Sex Work, Health, and Human Rights: Global Inequities, Challenges, and Opportunities for Action (pp. 121–140). Springer International Publishing. https://doi.org/10.1007/978-3-030-64171-9_7

Landsberg, A., Shannon, K., Krüsi, A., DeBeck, K., Milloy, M. J., Nosova, E., ... & Hayashi, K. (2017). Criminalizing sex work clients and rushed negotiations among sex workers who use drugs in a Canadian setting. Journal of Urban Health, 94(4), 563-571.

Lyons T., Krüsi A., Pierre L., Small W., Shannon K. (2017). The impact of construction and gentrification on an outdoor trans sex work environment: Violence, displacement and policing. Sexualities. doi:10.1177/1363460716676990

Machat, S., Shannon, K., Braschel, M., Moreheart, S., & Goldenberg, S. M. (2019). Sex workers' experiences and occupational conditions post-implementation of end-demand criminalization in Metro Vancouver, Canada. Canadian Journal of Public Health, 110(5), 575-583.

Machat, S et al. (2021). Internet solicitation linked to enhanced occupational safety outcomes: 2010-2018. Under Review.

McDermid, J. (2021). Moving Beyond End-Demand Legislation: Understanding the impact of criminalization on client behaviour and sex worker health and safety and policy alternatives to end-demand approaches to sex work. Summit SFU Repository: Master of Public Policy Thesis.

McBride, B., Shannon, K., Duff, P., Mo, M., Braschel, M., & Goldenberg, S. M. (2019a). Harms of Workplace Inspections for Im/Migrant Sex Workers in In-Call Establishments: Enhanced Barriers to Health Access in a Canadian Setting. Journal of Immigrant and Minority Health, 21(6), 1290–1299. https://doi.org/10.1007/s10903-019-00859-9

McBride, B., Goldenberg, S. M., Murphy, A., Wu, S., Braschel, M., Krüsi, A., & Shannon, K. (2019b). Third parties (venue owners, managers, security, etc.) and access to occupational health and safety among sex workers in a Canadian setting: 2010–2016. American Journal of Public Health, 109(5), 792-798.

McBride, B., Shannon, K., Murphy, A., Wu, S., Erickson, M., Goldenberg, S. M., & Krüsi, A. (2020a). Harms of third party criminalisation under end-demand legislation: undermining sex workers' safety and rights. Culture, Health & Sexuality, 1-17.

McBride, B., Shannon, K., Bingham, B., Braschel, M., Strathdee, S., & Goldenberg, S. M. (2020b). Underreporting of violence to police among women sex workers in Canada: amplified inequities for im/migrant and in-call workers prior to and following end-demand legislation. Health and human rights, 22(2), 257-270.

Platt, L., Grenfell, P., Meiksin, R., Elmes, J., Sherman, S. G., Sanders, T., Mwangi, P., & Crago, A. L. (2018). Associations between sex work laws and sex workers' health: A systematic review and meta-analysis of quantitative and qualitative studies. PLoS medicine, 15(12), e1002680. https://doi.org/10.1371/journal.pmed.1002680

Shannon K, Strathdee SA, Goldenberg SM, Duff P, Mwangi P, Rusakova M, Reza-Paul S, Lau J, Deering K, Pickles MR, Boily M-C. (2015). Global epidemiology of HIV among female sex workers: influence of structural determinants. Lancet, 385, 55-71.

Shannon, K., & Csete, J. (2010). Violence, condom negotiation, and HIV/STI risk among sex workers. Jama, 304(5), 573-574.

Shannon, K., Kerr, T., Allinott, S., Chettiar, J., Shoveller, J., & Tyndall, M. W. (2008a). Social and structural violence and power relations in mitigating HIV risk of drug-using women in survival sex work. Social Science & Medicine, 66(4), 911–921. https://doi.org/10.1016/j.socscimed.2007.11.008

Shannon, K., Rusch, M., Shoveller, J., Alexson, D., Gibson, K., & Tyndall, M. W. (2008). Mapping violence and policing as an environmental–structural barrier to health service and syringe availability among substance-using women in street-level sex work. International Journal of Drug Policy, 19(2), 140-147.

Shannon, K., Kerr, T., Strathdee, S. A., Shoveller, J., Montaner, J. S., & Tyndall, M. W. (2009). Prevalence and structural correlates of gender based violence among a prospective cohort of female sex workers. Bmj, 339.

Thumath, M., Humphreys, D., Barlow, J., Duff, P., Braschel, M., Bingham, B., Pierre, S., & Shannon, K. (2020). Overdose among mothers: The association between child removal and unintentional drug overdose in a longitudinal cohort of marginalised women in Canada. International Journal of Drug Policy, 102977. https://doi.org/10.1016/j.drugpo.2020.102977