

+ + - = one industry:

Positive sex workers

Hysteria and prejudice define public debate about HIV positive sex workers, regardless of their safe sex practices. In the following article, Keith Gilbert shatters the stereotypes regarding HIV positive sex workers.

SEX industry work is not fully decriminalised in any Australian State or Territory. The legal situation helps maintain a sub-class of sexually active people who are subject to scrutiny and discrimination. As recent Australian history has shown, hysterical community and government attitudes to positive sex and sexuality will be played out most clearly and vehemently against those working in the sex industry.

The legalities of HIV positive people working in the sex industry vary from state to state in Australia. For example, in the ACT, the *Prostitution Act* 1992 explicitly prohibits people living with HIV/AIDS (PLWHA) from buying or selling sexual services. In Tasmania, however, there are no specific regulations related to HIV and sex work; positive sex workers there must comply with regulations that apply to all positive people — essentially to inform all sexual partners of their HIV status. In conjunction, many states' health authorities have developed specific guidelines or protocols for the 'management' of HIV positive sex workers.¹

The response by governments, media and some community groups to the issue of PLWHA providing sexual services for money has been, in a word, hysterical. There are many ill-conceived assumptions that underscore this response, including:

- sex workers are more likely than other community members to place their sexual partners at risk;
- HIV infection equals death;
- sold sex is not safe sex;
- safe sex is not actually safe;
- clients of sex workers play a passive/invisible role in the sex industry and need government protection; and
- sex workers are victims, and a positive HIV diagnosis is the final tragedy that can beset these poor people. Undoubtedly, given the 'choice', they would much rather take part in an 'exit and retraining scheme' (which will land them in a 'regular' work situation, usually with less money and less control over their work conditions).

Between 1990 and 1994 I worked for the Prostitutes Collective of Victoria (PCV), first as Male Sex Worker Education and Support Worker, then as Administrative Co-ordinator. In 1992, two positive people working in the sex industry in Melbourne were charged with "knowingly and recklessly endangering life". The media had a field day and

the resultant mass hysteria led to police, the courts, the Health Department and the PCV management committee all making outrageous decisions concerning the lives of the two people involved — 'Rebecca' and 'Sean'.

The court set unreasonable bail conditions for 'Rebecca', including a curfew that prohibited her from leaving her home after dark, and from being in Melbourne's main street work area, St Kilda. As her advocate, I met with the head of the AIDS/STD Unit of the Health Department (Vic). I hoped to convince him to influence the court's decision, which had effectively prevented 'Rebecca' from accessing services of the PCV and the Positive Living Centre (both located in St Kilda). Unfortunately, he saw 'sense' in the bail conditions as a transmission prevention strategy, despite the facts that people have sex during daylight hours, and 'Rebecca' could easily find clients without entering St Kilda, simply by consulting her personal address book. There was no regard for condom use which 'Rebecca' said she had always adhered to.

The Department then developed guidelines for the management of HIV positive sex workers that focused on stopping positive workers from working. The PCV management committee's response was to throw money at the situation and give 'Rebecca' cash (despite a minimal welfare budget) and to treat her as if she were the only HIV positive sex worker in town. She was marginalised by all involved with no apparent concern for her health which deteriorated rapidly as a result.

In the following two years, I had contact with at least 18 self-disclosing positive people accessing the PCV for services. This experience taught me that the policy of removing sex workers from the sex industry upon their seroconversion is not only discriminatory, it is also redundant. Over half of those PLWHA contacting me were seeking information and support about *entering* the sex industry for the first time.

There has been little dialogue about people making a conscious and informed decision to start sex industry work following a positive HIV diagnosis. The danger in speaking about this issue is the possibility of a conservative backlash. The catchcry 'public health danger' often forewarns calls for legislative and police intervention; it creates additional stress for all sex workers, who are already unfairly burdened by irrational legalities. The World Health Organisation (WHO) has stated that stress, *not* sexual health, is the major health concern for sex workers.² This is caused by criminalisation, marginalisation, and inadequate industrial health and safety measures. Any rational dialogue on the issue needs to dispel those myths outlined earlier.

Most of the 18 PLWHA I dealt with at the PCV were gay



men, and a couple were male-to-female trannies. Their information and support needs were the same as any other person choosing to start work. They asked for standard industrial information, legal information (about the local sex industry and about positive sexuality), sexual health information (including sexually transmitted opportunistic infections and oral safety), and potential discrimination (from clients, police, other sex workers etc).

Their reasons for choosing sex work were not unusual (the money and the work conditions) although the life events that informed their choices were often specifically related to serostatus. There are some advantages in sex work that make it an attractive option for some positive people. There is the option of working for yourself, whereby you determine your own hours and can avoid discrimination and/or harassment from employers or co-workers. It's 'easy cash' which suits PLWHA, who often have to fork out for treatments and therapies.³

Recovering from the crisis and shock of a positive diagnosis usually takes some months. Once acceptance settles in, people often find themselves in need of cash. For some, they've left their job due to workplace discrimination, while others have left work due to the overwhelming nature of the crisis itself. For others, they've simply knowingly and recklessly endangered their life savings and meanwhile, the therapy/Stolichnaya/vitamin suppliers' bills have been piling up.

Even more significant I think, is that it's 'dirty cash'. Apart from economic disadvantage or need, why is it that sexually active women, trannies and gay men are more likely than others (ie. straight men) to engage in sex work? The simple answer is transgression. Once you've crossed over one major social/sexual taboo, other ones don't seem so daunting. It should not be surprising, therefore, that many positive people are choosing to become sex workers. They are more often than not gay men or transgender, and therefore 'sexually transgressive'. Further, they are assumed to have practised 'risky sex', thereby transgressing cultural safe sex norms pertaining to their own communities.

The community and government response to the sex industry as a whole needs to be more reasoned, and less Hollywood. We do have a thriving sex industry (even if it is slow on a Tuesday). We do have a significant PLWHA population. The two are not mutually exclusive. People who are positive or negative, male or female or transgender, gay or straight or bisexual, sex worker or client, English speaking or NESB — require information and support, not stress and scrutiny. Rednecks may hear alarm bells, but the reality is that movie-score saxophone blues don't swell in the parlours and streets of our sex industry, calling the virus to dance its deathly transmission dance. As Cheryl Overs⁴ said "The virus is not transmitted through the handling of cash or credit cards." ★

KEITH GILBERT is a Gay Education Strategy Officer at AFAO.

JOHN FADDEN



NOTES

1. Fysh, Geoffrey, 'History of the Government's Response to HIV in the Sex Industry', AFAO, 1996.
2. Further, the Final Report of the IGCA Working Party on the Sex Industry (1991) recommended the repeal of all laws criminalising sex work.
3. Fewer hours for more money is a common reason for anyone choosing sex work, though, in the long term, this is not necessarily sustainable.
4. Cheryl Overs has been a sex worker rights activist for many years, and was one of the founding members of the Prostitutes Collective of Victoria (PCV).