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Committee Secretary  
Senate Select Committee on Men's Health  
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Dear Sir/Madam,

On behalf of Scarlet Alliance, the Australian Sex Workers Association, please find the following submission addressing the terms of reference of the Senate select committee on men's health.

Scarlet Alliance has represented sex workers and Australian state and territory community based sex worker organisations at a national level since 1989. The organisation aims to, through its objectives, policies and programs, achieve equality, social, legal, political, cultural, health and economic justice for past and present workers in the sex industry.

Our organisation represents male, female and transgender sex workers and hosts amongst its working groups a male sex worker working group and elects each year a male sex worker spokesperson. It is through these networks that this short submission has been developed to ensure that male sex workers health needs are recognised within the broader health needs of men.

Should you require further information or detail on the issues raised in this submission please contact us to organise representatives of Scarlet Alliance to meet with you.

Yours faithfully,

Janelle Fawkes,  
Chief Executive Officer

Christian Vega  
National Representative of Male Sex Workers

## Executive Summary

### **i.**

The current level of commonwealth, state and other funding addressing men's health issues does not adequately serve male sex workers. Sex Worker services require funding in order to deliver services and peer education to male sex workers.

Australian sex workers have a strong history of effective prevention programs combating Sexually Transmitted Infections (STI) and HIV. This is mostly achieved through peer to peer skill-sharing. Primarily, resourcing for services targeting male sex workers comes from STI and HIV prevention funding. Whilst most services are highly effective at delivering these services, few primarily target men's health.

Male sex workers experience discrimination from health care professionals upon disclosure of occupation, reducing quality of care available. Sex workers are often not acknowledged as part of Australian society, thus negatively affecting their health and wellbeing and contributing to social exclusion.

### **ii.**

The level of existing education and awareness campaigns regarding men's health for both men and the wider community does not serve or acknowledge the specific health needs of male sex workers or their clients.

To date there has not been a broad education campaign addressing the health needs of male sex workers that doesn't focus solely on STIs or HIV, leaving male sex workers without information on their broader health needs. There is little understanding of the health needs of this diverse population.

There are pockets within the community, including sex workers, that have demonstrated success and leadership in their exemplary behaviour and approach towards health. General health campaigns would benefit much from the learning achieved by these initiatives.

### **iii.**

Sex workers are a unique resource for overcoming prevailing attitudes of men towards their own health and sense of wellbeing. The achievements made by this community are demonstrative of effective health promotion with little recognition of being so.

Sex workers (male, female and transgender) have demonstrated a unique ability to navigate personal boundaries with their clients, often discussing issues that may not be brought before a doctor or therapist.

### **iv.**

The extent, funding and adequacy of treatment services and general support programs for men's health in metropolitan, rural, regional and remote areas does not go far enough to serve male sex workers. Being so highly marginalised, this community is particularly sensitive to any shortfalls of existing programs.

Male sex workers are high-level consumers of health care and are well placed to compare services across states and territories. The quality and availability of health services varies dramatically across capital cities in Australia. In some capital cities, there is only one option and in regional areas there is often no service available.

Targeted health services for male sex workers are scarce, and accessibility to PEP or other treatments (including HIV treatment and care) is low.

**General issues related to the availability and effectiveness of education, supports and services for men's health, including but not limited to:**

- i. *The level of Commonwealth, state and other funding addressing men's health, particularly prostate cancer, testicular cancer, and depression,*

Australia has a strong history of effective HIV and STI programs for sex workers. However, projects are often not funded to provide services for male sex workers. Peer education is the approach that is acknowledged by both National and State HIV strategies as an effective tool in reducing risk. Additional funding would be required to employ male peer educator staff and provide targeted services to male sex workers.

Sex worker organisation funding for men primarily comes from STI and HIV prevention funding. For women, funding is derived from a variety of sources, allowing a more holistic approach.

Few organisations primarily target men's health.

Male sex workers, when disclosing their work, often experience discrimination from mainstream health services. Frequently this results in non-disclosure with health professionals, reducing the level and quality of health care available to male sex workers.

Male sex workers, along with female and transgender sex workers, are often not acknowledged as part of Australian society. This social exclusion and invisibility has negative impacts on health and equitable access to services.

- ii. *adequacy of existing education and awareness campaigns regarding men's health for both men and the wider community,*

To date there has not been an education campaign addressing the health needs of male sex workers.

As described above, mainstream health services do not accommodate the needs of this group or understand the complexity of disclosure of sex work experience.

Male sex workers are a diverse group and include both men who have sex with men, and heterosexual men seeing female clients. There are also many different sectors of the sex industry and ways in which men may provide sex work services. As such education and awareness campaigns need to reflect this diversity.

In the few isolated cases where targeted education campaigns have been developed it has been for information on Sexually Transmitted Infections or HIV, leaving male sex workers without information on their broader health needs.

A needs assessment of the health needs of male sex workers has not been conducted in Australia.

In the few cases where male sex workers have developed information for other male workers, this information has proved to be extremely beneficial and highly sought after by other male workers. An example of this is Scarlet Alliance's 'Scarlet Men' website ([www.scarletmen.org.au](http://www.scarletmen.org.au)), which offers information on health, service providers, sex worker skills and other issues relevant to male sex workers. This is evidence that further resourced education materials would be welcomed and assist male workers.

There are pockets within the community that have demonstrated success and leadership in their exemplary behaviour and approach towards health. Injecting drug users, sex workers, the homeless, indigenous communities (to just name a few) have each employed a number of programs, constructing their own specific strategies that have proven effective within their own communities. General health campaigns would benefit much from the learning achieved by these initiatives. There needs to be more recognition of the achievements of those often left out of the main stream.

Sex workers (with low rates of STIs; higher consciousness around sexual health and sexuality and work practices based on safe sex and shared responsibility) have much to contribute to the education and awareness campaigns regarding men's health for both men and the wider community.

*iii. prevailing attitudes of men towards their own health and sense of wellbeing and how these are affecting men's health in general, and*

One of the challenges in addressing the three identified issues of men's health (prostate cancer, testicular cancer, and depression) is the level of personal boundaries that must be overcome before they can be addressed amongst male sex workers.

Sex workers (both male and female) have demonstrated a unique ability, characterised by their occupation, to navigate personal boundaries with their clients, often discussing issues that may not be brought before a doctor or therapist. As such, sex workers are a valuable yet often unrecognised health resource as health educators for the wider community. Sex worker's clients are often not as aware of sexual health or general health issues, and in the privacy of sexual interaction with sex workers, often gain invaluable information and support.

This is further enhanced when discussing male sex workers, who are able to employ health promotion/education strategies such as role modelling, peer education and the development of intimate interpersonal skills.

*iv. the extent, funding and adequacy for treatment services and general support programs for men's health in metropolitan, rural, regional and remote areas.*

Access to tailored health services for male sex workers, or their male clients, is unavailable in most rural, regional and remote areas of Australia.

Male sex workers are high-level consumers of health care facilities and resources. Working in an industry where travel from state-to-state for work is quite common, and are well placed to compare availability and quality of health care.

In fact, the quality and availability of health services varies dramatically across capital cities in Australia and in some capital cities there is only one option and in the regional areas no service provision.

Targeted health services for male sex workers are scarce, and accessibility to PEP or other treatments (including HIV treatment and care) is very low. Please refer to the recent needs assessment of HIV positive sex workers in Australia and the full report identifying barriers to accessing services and care. (<http://www.scarletalliance.org.au/library/hiv-needsassessment08/>)