

## 10 FACTS ABOUT HIV & SEX WORK

**1.) 12% of sex workers in low and middle-income countries are living with HIV** according to UNAIDS, with rates ranging from 2.8% in India to 7.3% in Ukraine to 24.5% in Nigeria to 50.8% in Rwanda. Across the world, the HIV prevalence among sex workers is 12 times higher than that of the general population on average. The prevalence is at least 50 times the general population in four countries. An estimated 50% of sex workers living with HIV are in sub-Saharan Africa, and 92% of all HIV/AIDS deaths attributed to sex work occur among African women.

**2.) Trans sex workers are disproportionately affected by HIV.** In the United States, trans sex workers are nearly 6 times as likely to be living with HIV (15.32%) than the general trans population (2.6%) and 25 times as likely to be positive than the general population (0.6%).

**3.) In the United States, cis-female sex workers (especially street-based sex workers) are also at high risk for HIV.** An estimated 20 to 40% of women at high risk of HIV infection in the United States reported having sex in exchange for money or drugs within the past year. Sex workers engaged in injection drug use face additional risks due to needle sharing arising from barriers to accessing clean syringes and intersecting stigma. Sex workers are also especially affected in the south, where HIV transmission rates are among the highest in the country.

**4.) Peer education and empowerment works in preventing HIV transmissions among sex workers, and syringe exchange works in preventing HIV transmission among sex workers engaged in injection drug use.** For example, the Songachi Project in Calcutta, India hired sex workers as peer educators to distribute and promote condom use, educate sex workers about rights, and help sex workers access local health clinics. The program increased condom use from 27 to 86%. The lack of funding for empowerment-based peer-led programs for sex workers harms the fight against HIV, in the U.S. and globally.

Some sex workers are also injection drug users, and sharing needles during injection drug use accounts for 7-14% of new HIV infections in the United States each year. Syringe exchange programs (or programs that provide clean syringes, STI testing, and non-judgmental advice and referrals) are highly effective in reducing HIV transmissions, yet a ban exists on federal funding for syringe exchange, limiting the reach of this valuable intervention. Additionally, many states still have laws criminalizing syringe possession, leading drug users to refrain from carrying excess syringes and forcing drug users to share needles.

**5.) Elimination of sexual violence could avert 17-20% of HIV infections among sex workers and clients.** Sex workers experience extremely high levels of sexual violence: Globally, sex workers have a 45 to 75% chance of experiencing sexual violence at some point in their lives as a sex worker and a 32 to 55% chance of experiencing sexual violence in a given year. Sex workers also experience extremely high levels of sexual and physical violence at the hands of police, with rates as high as 90 percent in Kyrgyzstan and 52-60% in Bangladesh. In Chicago, IL, 30% of exotic dancers and 24% of street-based sex workers who had been raped identified a police officer as the rapist.

**6.) Police frequently confiscate condoms as evidence to support prostitution charges, forcing sex workers to refuse free condoms from outreach workers and refrain from carrying condoms while working.** In fact, in some areas known for prostitution to occur, outreach workers can face criminal charges for distributing condoms and safe sex resource materials. This practice has been documented in New York, Los Angeles, Washington, DC, and San Francisco, greatly hindering best practices for HIV prevention.

# HIV & Sex Work

**7.) In the United States, 32 states criminalize HIV exposure, and 13 U.S. states explicitly criminalize HIV+ individuals arrested on prostitution-related charges.** Statutes criminalizing engaging in sex work while living with HIV, are often broader than general statutes that criminalize engaging in sex while HIV positive. No intent or transmission is required. No activity likely to transmit HIV is even required, and people can be charged for oral sex, hand jobs, and sex with condoms. Since many of these charges occur following sting operations, no actual sex act must take place.

**8.) Sex workers made up 95% of individuals charged with HIV-related crimes in California,** according to a study released by the Williams Institute on December 1, 2015. An earlier study in Nashville, TN found that 63% of individuals charged under HIV-related criminal laws were charged with aggravated prostitution--or engaging in sex work while living with HIV. Nearly half of those charged in Nashville engaged in substance use or had mental disabilities, and one--third were homeless.

**9.) PEPFAR bans the use of funding to promote or advocate the legalization or practice of prostitution.** It also requires non U.S. organizations to sign an Anti-prostitution Loyalty Oath opposing prostitution which is attached to PEPFAR contracts and sub-contracts. PEPFAR - the United States President's Emergency Plan for AIDS Emergency Relief - is the vehicle for U.S. funding for global HIV prevention, treatment and care, and disburses ~5-6 Billion USD in funding globally annually. The anti-prostitution pledge, along with the federal ban on funding for syringe exchange, has had a devastating effect on HIV prevention and treatment efforts for sex workers globally. Without U.S. funding for clean syringes and non-judgmental, sex worker-led HIV efforts many global NGOs are forced to refrain from offering HIV prevention measures that could greatly reduce transmissions of HIV, STIs, and other transmittable infections.

**10.) Decriminalizing sex work would prevent 33-46% of new HIV infections among sex workers and clients,** according to *the Lancet*. Decriminalizing sex work would have a greater impact on reducing new HIV infections than increased access to anti-retroviral therapy, safer work environments, or elimination of sexual violence. It would also vastly reduce violence against sex workers and profoundly increase access to health and social services as well as the social integration and human rights of sex workers.

## QUOTES

*The assumption is that sex workers are nothing but spreading disease and that places a heavy stigma on sex workers. If you're a sex worker it is assumed that you must have HIV or you must be at a very, very high risk, but illogically your access to condoms is cut short.*

-Monica Jones in "Nothing About US Without Us" report.

*Ending the AIDS epidemic will involve progress across the entire spectrum of rights: civil, cultural, economic, political, social, sexual and reproductive. Defending the rights of all people—including children, women, young people, men who have sex with men, people who use drugs, sex workers and clients, transgender people and migrants...*

*Through the realization of their rights, people being left behind will move ahead, to the very forefront of*

*the journey to end AIDS— informed and empowered, mobilized and engaged..*

-UNAIDS

*Violence against sex workers is not only widespread, but is also perpetrated, legitimized, and accepted by many. It undermines HIV prevention efforts and increases sex workers' vulnerability to HIV transmission in several ways.*

-World Health Organization

\*By Katherine Koster (SWOP-USA) & Cris Sardinia (Desiree Alliance)

**SEX WORKERS OUTREACH PROJECT-USA**