

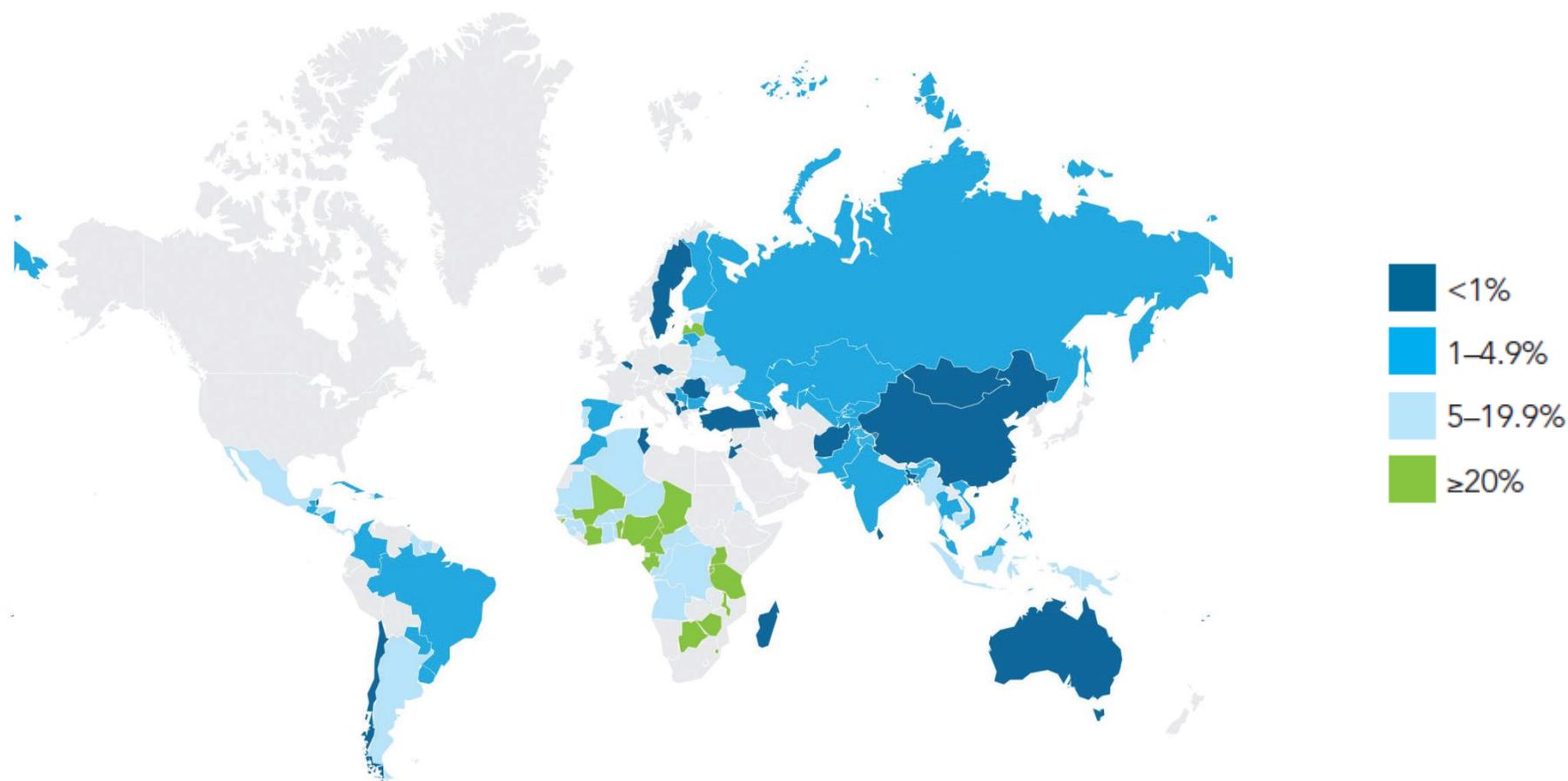
People left behind: Sex workers

[Link with the pdf, Sex workers](#)



I am a sex worker.
I face these issues.

HIV prevalence among sex workers, 2009–2013



Source: Global AIDS Response Progress Reporting 2014.

HIV burden

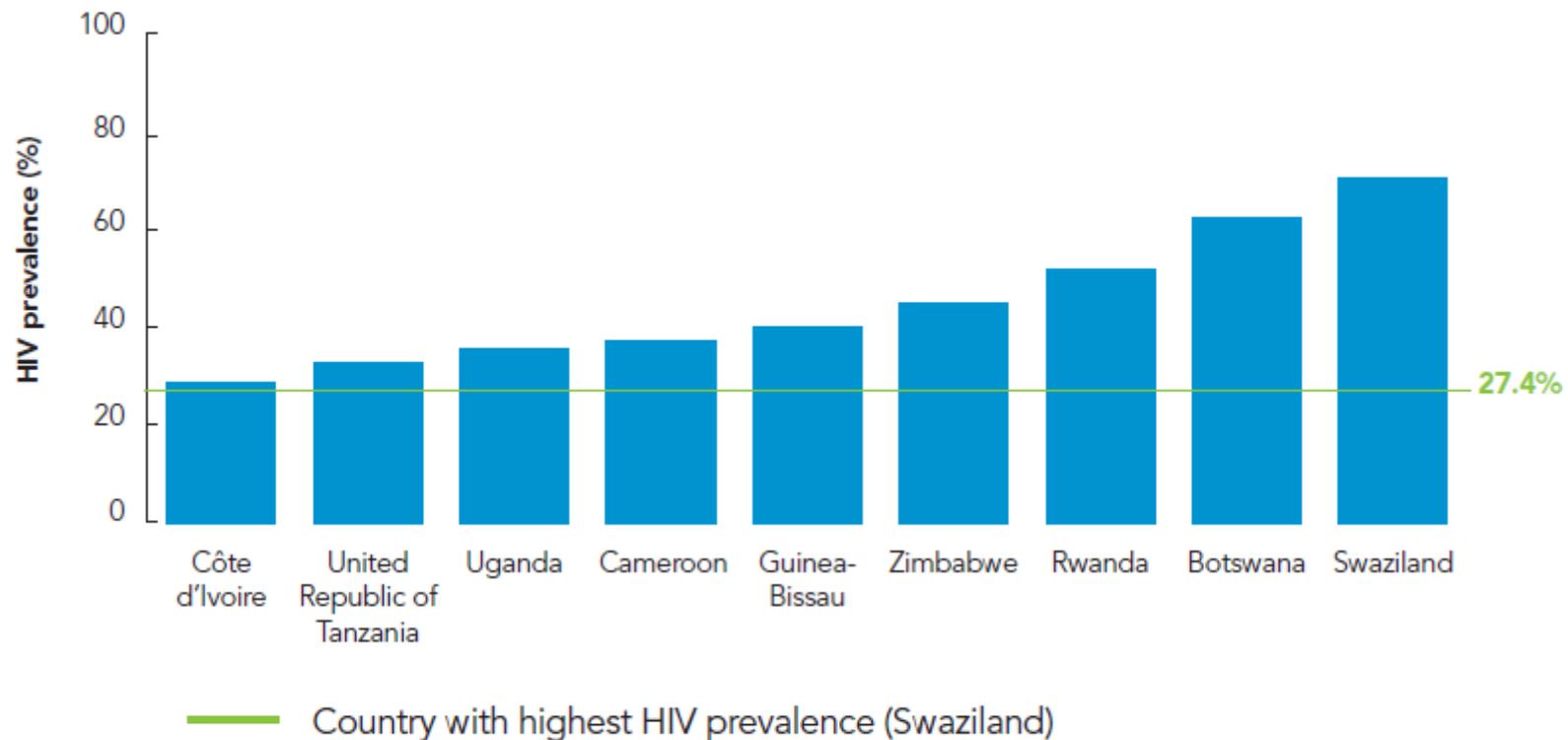
- In low- and middle-income countries, the average HIV prevalence among sex workers is estimated to be approximately 12%, with an odds ratio for HIV infection of 13.5 compared to all women aged 15–49.
- In 110 countries with available data, the prevalence of HIV infection is almost 12 times higher among sex workers than for the population as a whole, with prevalence at least 50-fold higher in four countries.
- Even in very high prevalence countries, HIV prevalence among sex workers is much higher than among the general population. An analysis of 16 countries in sub-Saharan Africa in 2012 showed a pooled prevalence of more than 37% among sex workers.
- In Nigeria and Ghana, HIV prevalence among sex workers is 8-fold higher than for the rest of the population.
- HIV prevalence among male sex workers, reported from 27 countries, was 14%.

HIV prevalence among sex workers, 2009–2013



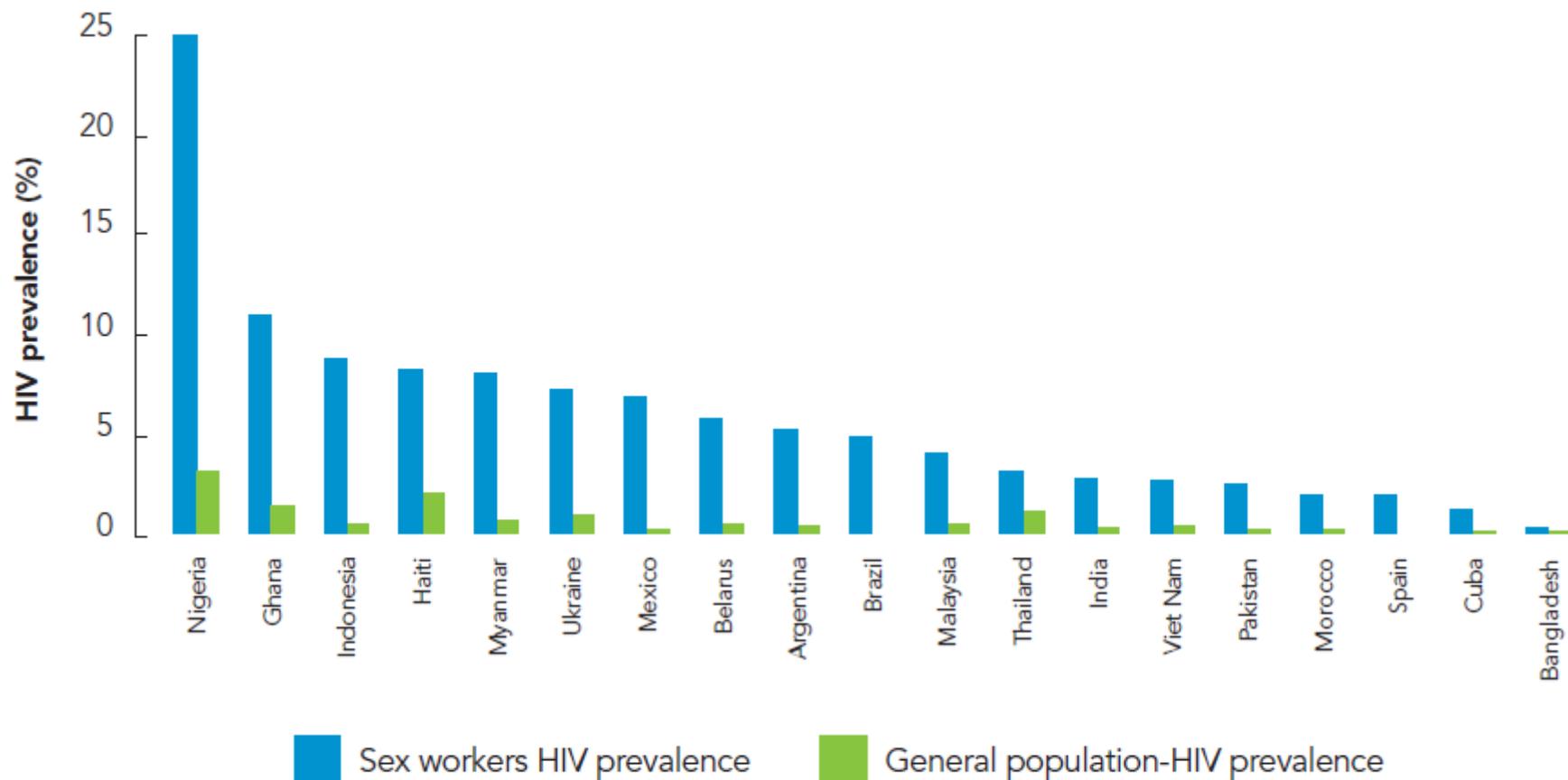
Source: Global AIDS Response Progress Reporting 2014.

Nine reporting countries have a HIV prevalence among sex workers that is higher than the highest national value of HIV prevalence among the general population, 2009–2013



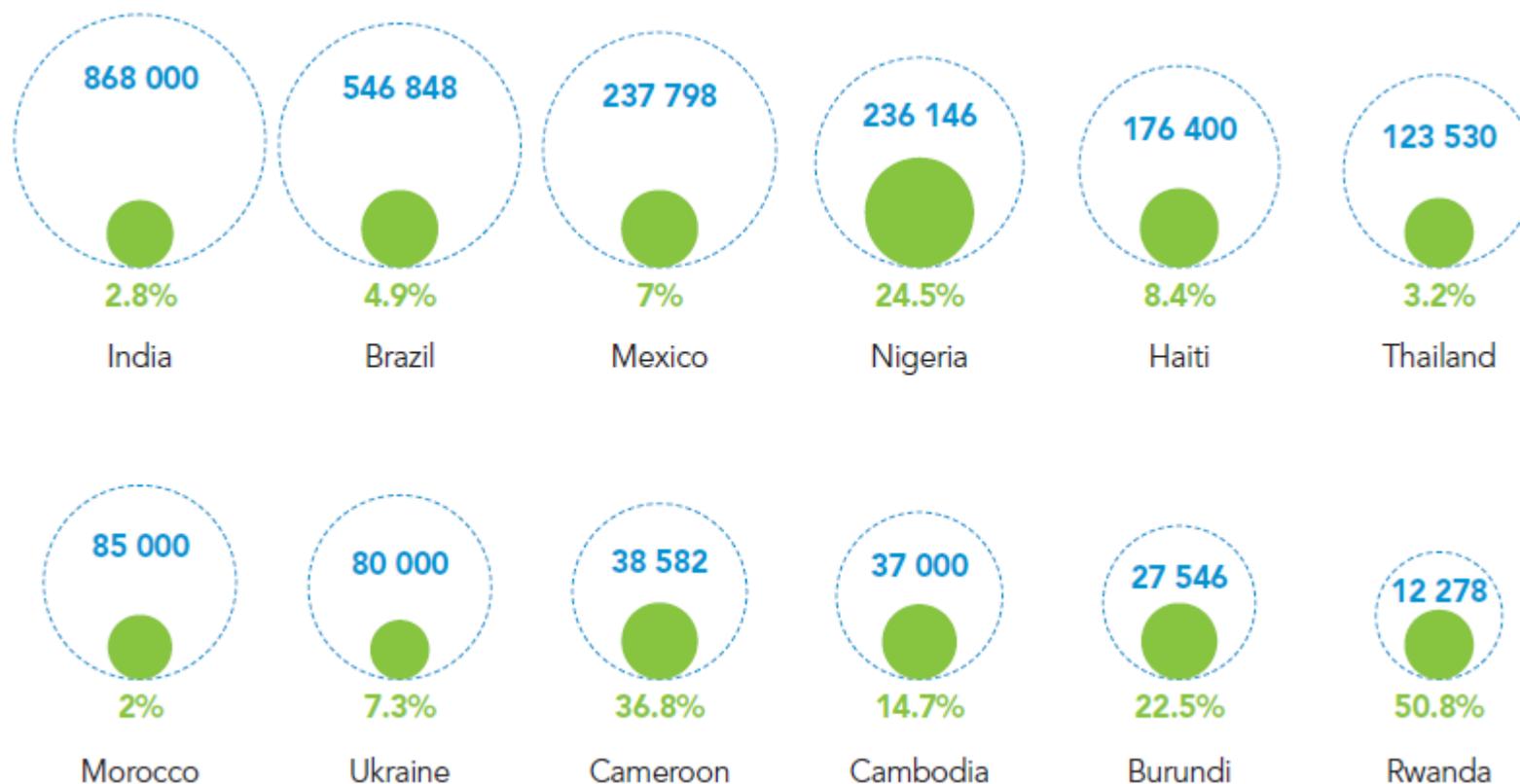
Source: Global AIDS Response Progress Reporting 2014.

HIV prevalence among sex workers for 19 countries that have reported having more than 50 000 sex workers, 2009–2013



Source: Global AIDS Response Progress Reporting 2014.

Estimated population size of sex workers, with the estimated proportion who are HIV-positive, in selected countries, 2009–2013



Source: Global AIDS Response Progress Reporting 2014.

WHY SEX WORKERS ARE BEING LEFT BEHIND

THE TOP 4 REASONS

01 Violence

02 Criminalization

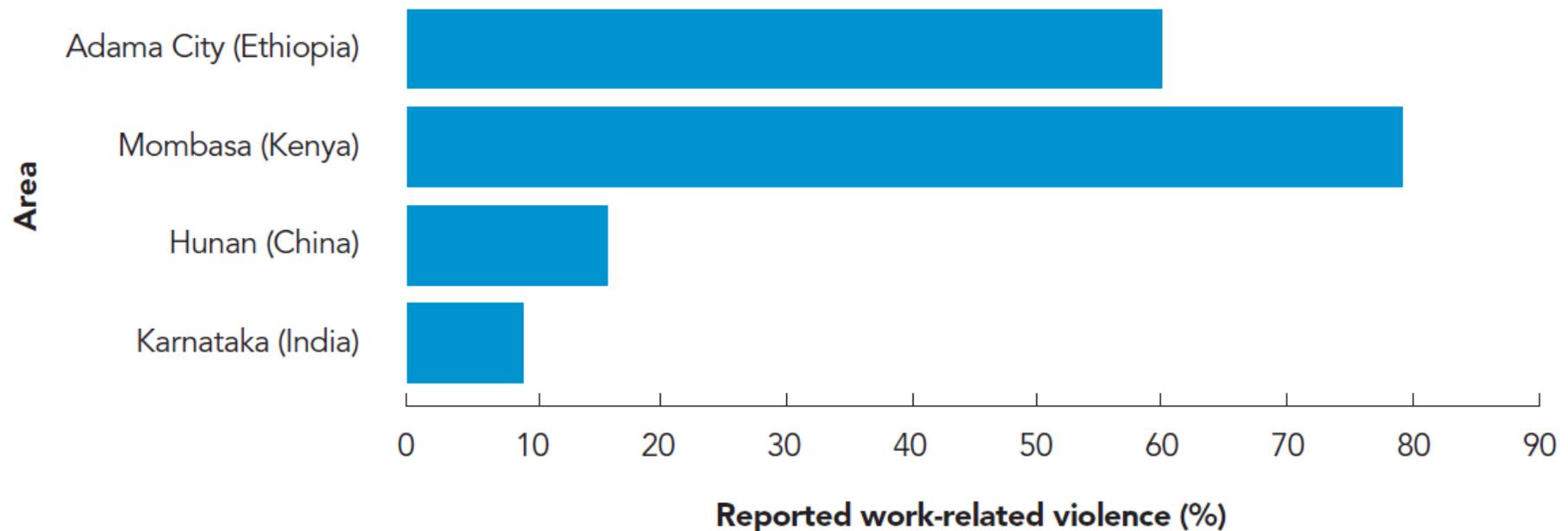
03 Stigma and discrimination

04 Lack of programmes and funding

Violence

- The legal status of sex work is a critical factor defining the extent and patterns of human rights violations, including violence against sex workers.
- Where sex work is criminalized, violence against sex workers is often not reported or monitored, and legal protection is seldom offered to victims of such violence.
- Addressing and reducing violence against sex workers has the potential to reduce HIV transmission. Modelling estimates in two different epidemic contexts—Kenya and Ukraine—show that a reduction of approximately 25% in HIV infections among sex workers may be achieved when physical or sexual violence is reduced.

Female sex workers reporting work-related violence (%)



Source: Mooney A, et al, BMC Public Health 2013; Pack AP, et al, Cult Health Sex 2014; Kelvin E, et al, China Sexual Health 2012; and, Deering K, et al, Sexually Transmitted Diseases. 2013.

Criminalization

- There is strong evidence that the criminalization of sex work increases vulnerability to HIV and other sexually transmitted infections.
- The threat of detention and laws that equate carrying condoms with evidence of sex work are serious barriers to the availability and uptake of HIV prevention programmes and services for sex workers.
- Fear of arrest and/or police-led sexual and other physical violence forces sex workers to remain mobile in order to avoid detection by the authorities.

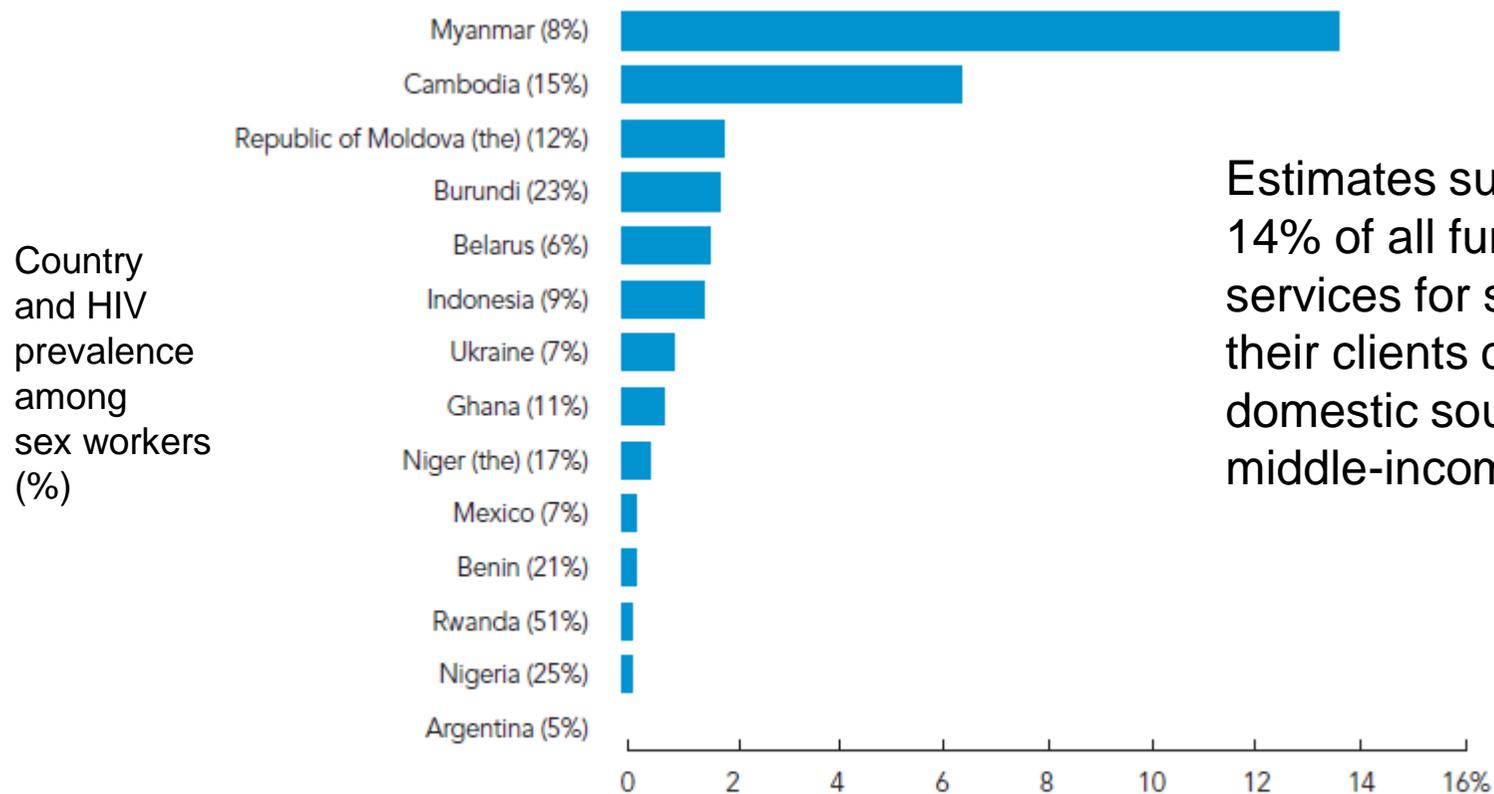
Stigma and discrimination

- Discrimination towards sex workers is nearly universal.
- In addition to the criminalization of sex work, entrenched social stigma means that sex workers often avoid accessing health services and conceal their occupation from health-care providers.
- Health service providers often neglect their duty to provide care when seeing sex workers.
- Police and other law enforcement officials often violate the human rights of sex workers rather than promote and protect them.
- Social and cultural isolation combined with stigma and discrimination further reduces sex worker access to social and health services.

Lack of programmes and funding

- Only about one third of countries report having risk reduction programmes for sex workers, but they tend to vary in quality and reach. The remaining two thirds of countries expect sex workers to obtain services through general health-care settings, where they may not be, or feel, welcome.
- In only a very few countries, notably in Asia and in sub-Saharan Africa, has there been a nationwide scale-up of HIV programmes specifically for sex workers.
- Around the world, whether in high-, low- or middle-income countries, sex worker organizations suffer from a lack of funding, which is, in some places, compounded by authorities who deny sex workers official registration owing to a refusal to recognize sex work as an occupation.

Reported domestic HIV spending on HIV prevention among sex workers in selected countries



Estimates suggest that only 14% of all funding for HIV services for sex workers and their clients comes from public, domestic sources in low- and middle-income countries.

Domestic HIV spending on HIV prevention among sex workers (in countries with >10 000 reported size estimate and >5% HIV prevalence) (%)

CLOSING THE GAP

HOW TO CLOSE THE GAP

01 Address violence

02 Decriminalize sex work

03 Empower sex work communities

04 Scale up and fund health and social services for sex workers
