



# Street Prostitution strategy for Southend-on-Sea Borough Council 2022-2023

## **Contents**

Introduction	3
Southend 2050	3
Safe and Well	3
National and local picture	4
Our priorities for 2021/2022	5
Overall achievements/changes made so far	5
Consultation - what we have been told	6
What the women told us	7
What services told us	8
Gaps in provision	9
What we are going to do/action plan	9
1. Adopt a gender and trauma informed approach to delivering services	9
2. Housing	10
3. Education and training of staff	10
4. Communication between services	10
5. Information and guidance	11
Longer term aims	11
How do we know if we have been successful?	11
Appendix A	13
Appendix B	14

## Introduction

In June 2020, in response to an identified concern about prostitution in Southend, a meeting jointly hosted by the Council and the Southend Clinical Commissioning Group was convened with partner organisations, including adult social care, the Police, housing services, health services and key charities providing outreach and other support services. The purpose of the meeting was to discuss the individuals involved in prostitution in the Borough. It was agreed by the members that the group of greatest and immediate concern was the vulnerable women involved in selling sex on the streets, this group have been poorly represented through Southend Borough Council strategies to date.

This group are often high and dependent users of drugs and alcohol, other vulnerabilities may include mental health, depression, vulnerable housing status, domestic abuse and previous experience of the criminal justice system. They put themselves at risk of harm from sexually transmitted diseases as well as potential harm from violence and exploitation on a daily basis.

A Notice of Motion was submitted to Southend on Sea Borough Council's Cabinet in January 2021 on Street Prostitution to approve a strategy to Support a risk reduction approach for women selling sex in street areas and build pathways to enable them to exit street prostitution in a safe managed way. The ask was also for the work to be embedded into the Violence and Vulnerability Strategy. This Motion was approved.

Therefore, this strategy aims to understand the current support offer available, how it can be improved, reduce harm, have improved access. Whilst also enabling departments within the Council to work with local third sector organisations to develop exiting pathways that allow women who wish to stop selling sex to do so; promoting collaborative working by ensuring that our new network of partners is committed to developing an enhanced approach for supporting some of the most vulnerable women in our community.

## Southend 2050

Southend 2050 is the community vision for the future of Southend-on-Sea. This ambition was developed following extensive conversations with those that live, work, visit, do business and study in Southend-on-Sea. These conversations asked people what they thought Southend-on-Sea should be like in 2050 and what steps are needed now, and in the coming years, to help achieve this. We received thousands of responses which provided a rich source of information from which the ambition has been developed. The ambition is grounded in the values of Southenders. It is bold and challenging and will need all elements of our community to work together to make it a reality.

This strategy will help to deliver on this Southend 2050 outcome in particular:

#### Safe and Well

- Public services, voluntary groups, strong community networks and smart technology combine to help people live long and healthy lives.
- Carefully planned homes and new developments have been designed to support mixed communities and personal independence, whilst access to the great outdoors keeps Southenders physically and mentally well.
- Effective, joined up enforcement ensures that people feel safe when they're out and high-quality care is there for people when they need it.

This strategy will help to deliver on the Safe and Well outcome by providing co-ordinated support services to reduce harm and provide a clear pathway to exit street prostitution. It will protect and improve the quality of life of this most vulnerable group in our community as well

as ensuring residents feel safe and secure in the areas that street prostitution is operating from.

#### **Opportunity and Prosperity**

- People in Southend feel valued, nurtured, and invested in
- This means that they have a love of learning, a sense of curiosity and are ready for school, employment, and the bright and varied life opportunities ahead of them.
- They have so many options to build a career or grow a business locally. We are so much more than a commuting town.

The strategy will also help to deliver on the Opportunity and Prosperity outcome by ensuring that the women's voices are heard, and that they feel valued and invested in as individuals. Co-ordinated support services and clear exit pathways will also ensure that the women have the opportunity to exit and create a new life for themselves, if they are ready to do so.

#### Active and Involved

- Residents are routinely involved in the design and delivery of services
- Southend-on-Sea has grown, but our sense of togetherness has grown with it. That means there's a culture of serving the community, getting involved and making a difference, whether you're a native or a newcomer, young or old.
- This is a place where people know and support their neighbours, and where we all share responsibility for where we live.
- Southend in 2050 is a place that we're all building together and that's what makes it work for everyone.

This strategy also supports the Active and Involved outcome, as the strategy itself has been formed by the voices and experiences of this vulnerable group of women, as well as the perspectives of local services. All of which helps to shape services in Southend.

## National and local picture

Prostitution itself is complex, and there are multiple issues affecting women who sell sex. They are at high risk of all forms of harm, be that physical violence, sexual violence, or the psychological impacts of trauma or poor sexual health, some likely to be long term. The psychological impacts of selling sex are immense and multiply the longer a woman remains in prostitution. Trauma responses make managing everyday life more difficult, so accessing services and agencies is more challenging which, in turn, leads to increased vulnerability and further exploitation. Being in prostitution becomes a cycle that is incredibly difficult to break.

Street prostitution has existed in Southend-on-Sea, especially in the area around York Road and Ambleside Drive for many years. Various police operations have succeeded in moving the women selling sex from one road to another and various organisations have tried to support women selling sex, but no intervention has had a significant impact on reducing the number of women selling sex or on the numbers of men buying sex. There is also a significant impact on the local community with high levels of anti-social behaviour as a result of the women selling sex and the men in the area who are pimping the women or buying sex, including drug-dealing, hazardous litter, and noise nuisance.

There are currently 35 women who are registered with the local outreach services who support women who sell sex. This outreach service engages with a further 4 women who sell sex in Southend, although they are yet to attend the service. By building positive relationships built on trust, the aim is to enable women to feel secure enough to visit drop-in sessions and to engage with support services. In 2019, there were 9 referrals made to SOS Rape Crisis, where prostitution was either mentioned on the referral or during the initial assessment. The same number of referrals was made in 2020. Although, it is important to bear in mind that these figures only represent those service users who disclosed they were or had been selling sex and do not necessarily represent the true number of service users who had sold sex or were doing so. We are also unable to distinguish between indoor and outdoor prostitution in these figures.

There are challenges in capturing an accurate picture of the levels of street prostitution in Southend. Reasons include under-reporting by victims, inconsistencies in approach to data collection across services, and the hidden nature of this type of violence and associated stigma. Therefore, the data highlighted above is likely to be an underrepresentation.

## Our priorities for 2022/2023

This strategy has been developed by members of the Strategic Street Prostitution Group in consultation with women who sell sex on the streets in Southend and also local services. This strategy has three priorities:

- 1. To understand the specific needs of women who sell sex on the street and recognise street prostitution can be used as adult sexual exploitation and a form of violence against women and girls.
- 2. To recognise the public health risks associated with street prostitution and ensure harm reduction measures are in place for women selling sex on the street including provision of condoms and sexual health testing in a way that is truly accessible to women.
- 3. To enable departments within the Council to work with local third sector organisations to develop exiting pathways that allow women who wish to stop selling sex to do so including helping to facilitate a forum for services to fast-track women into trauma-informed support, promoting collaborative working and holding organisations to account for the support they offer.

Once exiting pathways are in place that are shown to be appropriate and working to enable women to exit street prostitution, the focus will move to ending street prostitution in the Borough and sending a clear message that this town will not tolerate perpetration of sexual harm.

## Overall achievements/changes made so far

It was agreed the initial focus would be on coordinating support to the street-based women selling sex as they were considered the most vulnerable, most exploited, and most socially excluded group. Due to the urgency to understand this cohort of women in more detail and to better co-ordinate support services, three key task and finish groups were initially set up to review drug and alcohol addiction support (chaired by Southend Borough Council); sexual and physical health needs (chaired by the Terrence Higgins Trust); and the co-ordination of outreach services (chaired by the Lead for MARAC). Outcomes from these groups have included the additional supply of condoms, provision of face coverings to outreach services for distribution during Covid-19, and the distribution of professional support service telephone numbers for urgent referral access to sexual health and drug and alcohol support. For simplicity it was then decided to move forward with two groups for women selling sex, an Operational Street Prostitution Group that is accountable to a Strategic Street Prostitution Group. The latter will report directly to the Violence and Vulnerability Strategic Group.

Other actions from this group were the establishment of a draft support pathway (appendix A) and training for partner organisations supporting women selling sex, delivered by the Terrence

Higgins Trust, Aspirations and The Storehouse. This Operational Street Prostitution Group then developed into a Street Prostitution Safeguarding Forum to discuss specific cases and provide a plan of wraparound support for each one. Street Prostitution Safeguarding Forum partners worked together to develop a Multi-Agency Information Sharing Agreement, to create a positive culture of information sharing between partner agencies, with the aim of improving service delivery.

Both Strategic and Operational Street Prostitution Groups were part of the consultation of the Southend Sexual Health Service procurement process. The feedback from the Groups was included in the service specification. A key service element and expected outcomes of the new Sexual Health Service is to proactively support women selling sex through robust fast tracked clinical assessment and safeguarding procedures; offering service access through face-to-face sessions; offering online services; contacting women selling sex through net reach provision; bespoke clinic provision; outreach provision; and access to home testing for sexually transmitted infections.

Women are enabled to access specialist support to address their drug and alcohol use by Southend Treatment and Recovery Service (STARS), who will allocate a keyworker to assist them to develop a personal care plan to address their needs. Each woman accessing the service will be given the opportunity to engage with women-only group sessions as part of their treatment offer, and where appropriate they will be offered additional treatment options such as 1-1 counselling, opiate substitution therapy, ambulatory detox for alcohol use, and access to residential detox and rehab if their needs cannot be met from community services. The personal care plan will also consider non-treatment concerns that will enable their journey to recovery; these should include consideration of access to suitable accommodation, access to benefits/income, access to physical and mental health services, access to social groups and activities, and focus on future aspirations around work, training and volunteering etc.

Where women experience sexual violence, the group is working with partners to support them through referrals to SOS Rape Crisis; the Oakwood Place sexual assault referral centre; and through the sexual health services. Support will also be given to women through the new Domestic Violence Bill where local authorities in England will have a duty to provide support to victims of domestic abuse and their children in refuges and other safe accommodation.

Safe and long term 'supported' housing is an important part of an exit strategy for women who sell sex however there is often complicated systems to navigate for assessment including vulnerability priorities and acceptance for tenancy may not always be the outcome. The Group is aware that onward case management is required to support women with complex needs and potentially longer-term interventions should be implemented to aid recovery, improve mental health and substance misuse outcomes, as well as providing training and employment opportunities therefore enabling women to sustain tenancies and live independently.

## Consultation – what we have been told

Informal consultation was carried out with the women selling sex through the voluntary groups providing outreach services. First, a short questionnaire (appendix B) was printed out for the women, this included 3 questions about their current support offer. The women wrote down their answers, which helped give us an idea of the key issues, and what questions we need to ask in the future. A small group session was then organised with the women, in order to delve deeper into the key themes. The main aim of the group session was to identify the key issues with each service that was mentioned in the questionnaire and how we can improve these services.

A stakeholder workshop was then organised, and professionals from each key service was invited to the workshop. Including Change Grow Live (CGL), HARP, Aspirations, Southend Vineyard, Homeless Link, CCG Mental Health, Police, Council (Adult Social Care, Housing, Benefits, Rough Sleeper Initiative outreach team and commissioning), Probation, SOS Rape Crisis, Peabody Floating Support, Trauma Alliance, NHS Integrated discharges team and Safe Steps. The aim of the workshop was to understand the challenges that services face when trying to provide support to this group of women, and to work together on providing solutions to remove these challenges and create exit pathways to enable women to exit if they wish to do so. Professionals were also encouraged to think about some principles that organisations can agree on, which will be used to create a Charter of Agreement.

#### What the women told us

From both the questionnaire and the group session, several key themes were identified from the women's responses:

#### Housing

- Most of the women fed back that accessing support to obtain housing via the local authority Housing Solutions team was the area of most difficulty. The processes are **complex**, and the criteria is **difficult to understand**.
- The local authorities Housing Solutions team was also the agency with the most reported feedback around **negative language and feeling judged.** 
  - A number of women reported receiving judgemental comments or a lack of support whilst accessing housing services.
- A number of the women felt they **weren't listened to or regarded as individuals**. This was also in relation to being told they were not homeless if they were not sleeping on the street every night, although they were selling sex to make sure they could pay for a cheap B&B so that they weren't at risk of sleeping rough. This highlights the issue of **hidden homelessness**.
- Issues around being discharged from hospital, after being inpatients, back to being street homeless. Highlights a lack of information sharing between health care, adult social care, and housing. One woman commented that she felt services "did what they could to wash their hands of me".
  - The women also reported the changing need to provide different personal medical information, and that once provided they were then told that wasn't enough, but when asking medical staff for more they believed what they had submitted was sufficient.

#### Drug and alcohol services

- A recurring theme was the **turnover of staff** and how many keyworkers you can be allocated in a short period of time, and how this affected trust and relationships.
- There was also consistent feedback that it takes quite a long time in their view to get onto a script, and if you miss a couple of appointments, you can be removed and have to start all over again.
- Positive feedback from women who have worked with a trauma informed key worker, they were very positive about their communication and approach.

#### Lack of female friendly spaces

 Most of the women commented on services not being female friendly environments, some of the women reported being reluctant to attend certain locations due to expartners/men they have had difficulties with that also attend there. This can be a particular barrier to group work. Southend Treatment and Recovery Service (STARS) offer women's only mornings every Thursday which is not always accessible to women when they work nights.

#### Information sharing and guidance

• The recurring theme here was that some women did not know what support was available to them, even some women who have lived in Southend for some time. Some women felt that things keep changing, and that they didn't know where to go. Some reported being given the wrong information i.e. being told to go to a particular agency as they can support them with their issue, to then be told by the agency that they cannot help or that they are not open, despite being told they will be. This highlights a lack of information sharing and communication between services, which results in the women having to repeat themselves and their circumstances to different people.

## The women were also asked what might help to make things better/more accessible, below are some of the suggestions:

- A leaflet with a bit about each agency, where they are, what they can do, how to contact them. That way wherever you walked into first you'd get the same information rather than bits here and there A single access point or 'front door' so you know that if you go there, you can receive help with housing, benefits, substance misuse, social care advocacy, health and so on, with one main set of forms
- More flexibility around appointment times need appointment windows rather than being asked to arrive at a specific time, afternoon appointments work better than morning
- Female only spaces and groups that operate at a time that is accessible

"For staff to remember that we are human beings"

#### What services told us

A total of 39 professionals attended the workshop, and a number of key themes were identified:

#### The need to place a gender and trauma informed lens on our work:

- Some services have bespoke elements of their service especially for women who sell sex but not all agencies have this. This has a real impact on engagement, as the women are expected to fit into the wider rules and regulations or face consequences.
- Examples from housing providers in the workshop, some found that engagement had improved once they changed the rules e.g. curfews, having one address just for women and the other for men. This recognises the fact that many of these women have experienced trauma at the hands of men, and they may not feel comfortable sharing facilities/walking in the corridors at night with unknown males being present. Other ideas include:
  - The opportunity for the women to have female key workers
  - Female friendly spaces e.g. female only group sessions

- Taking services to the women getting agencies to use a safe/trusted space to engage with the women
- However, it was also noted that due to the various constraints that many services are faced with i.e. high caseloads, lack of resources/funding it can be difficult for services to put a gender and trauma informed lens on their work.

#### The need for a flexible and responsive offer:

- For example, drop-in services that respond to need there and then, and having complex needs workers who are going to be able to invest more time and effort into relationship building, to have workers who can be curious enough to keep going back to the individual if they are not engaging, but also have their timings right so if someone does want to engage then they can get onto it as quickly as possible.
- However, there is not always the resources/flexibility in the system for this to be the case. This results in missed opportunities for meaningful contact and safeguarding.

#### Information sharing and guidance

 A leaflet could be created and distributed in A&E and other areas – includes information on local services. Include information on where to go, who to call and opening times etc. A multi-agency approach is needed to create this leaflet, and to ensure that it is kept up to date.

#### Need for shared learning/work shadowing

• The idea was that you don't necessarily understand another agencies pathway unless you have spent some time seeing what it looks like in reality.

## Gaps in provision

- Southend needs a stronger drug and alcohol recovery community
- Lack of provision around mental health and especially people with both mental health problems and addiction (dual diagnosis).

## What we are going to do/action plan

#### 1. Adopt a gender and trauma informed approach to delivering services

It is really important that organisations are listening to the women and their experiences, and factoring this into how services are delivered, with the hope that this will have a positive impact on engagement.

To address this we will:

- Develop female only spaces no male staff walking around/answering the door etc.
- Get agencies to use a safe/trusted space to engage with the women, so they can see that organisations are trying to work together.

- Probation will be running a weekly drop in at Aspirations for their female cohort on Probation Orders. STARS are also aiming to deliver a group at Aspirations. The goal is to create a wrap-around service where women with complex needs can access services under one roof.
- Offer flexible appointment times mornings do not work, need time windows rather than asking them to arrive at a specific time.
- Have female police officers speaking to women on Ambleside Drive in plain clothes.
- Provide women with the opportunity to have the same trauma informed key worker across their journey as well as the option of choosing a female key worker.

#### 2. Housing

Safe and long term 'supported' housing is an important part of an exit strategy for women who sell sex however there is often complicated systems to navigate for assessment including vulnerability priorities, and acceptance for tenancy may not always be the outcome. Housing was also an agency with reported feedback around negative language and feeling judged.

To address this we will:

- A Housing Solutions Officer will attend the fortnightly Safeguarding forum to discuss any clients with urgent housing need.
- A Housing Solutions Officer is to attend Aspirations, starting as a pilot, to explain how the process works, answer any questions, and to build relationships with outreach staff and service users.
- Rough Sleeping Mental Health team have some parts of the team at Aspirations on a regular basis if that works for the women and the service.

#### 3. Education and training of staff

Many of the women reported feeling judged by professionals and negative language being used in written correspondence.

To address this we will:

- Aim to get all services signed up to Trauma Alliance training and Community of Practice.
- Create a video for police trainees, of an individual sharing their lived experience a way of helping them understand the women.
- Have a street prostitution lead within housing, who will be responsible for approving the letters that go out to the women could work alongside the Trauma Alliance.

#### 4. Communication between services

The women should not have to repeat their circumstances to a number of different agencies, services need to work in collaboration in order to produce better outcomes for the women.

To address this we will:

• Develop a universal referral form with a traffic light system to be agreed by all parties. The idea is that when somebody accesses one service, they then tick the boxes on the form to say that they consent to their information being sent to these agencies. Agencies can then contact each other to say that they have an individual who needs access to their service. This will ensure that there are no delays due to concerns around consent, and agencies will be committed to at least responding to a referral within a defined period of time (according to the traffic light system that is to be developed).

- Promote the safeguarding forum and encourage each organisation to sign up, agree to attend, and also respond to actions. The forum will also be refreshed frequently to ensure that the right people are invited.
- Encourage organisations to sign up to a charter of agreement.

#### 5. Information and guidance

There is a need to ensure that the women are aware of the services available to them.

• Create a leaflet which includes information about each agency: where they are, what they can do and how to contact them. Plans for the leaflet to be distributed within A&E and other areas.

## Longer term aims

This strategy will last for 1 year and will focus on the short-term improvements, the delivery of the improvements/ actions in this strategy will be overseen at the monthly strategy group who will also ensure that a learning log is kept updated. This is to ensure that agreed processes are in place and are working before we look to more long-term preventative work to support a wider group of people involved in sex work including men.

Once agreed pathways are in place that are shown to be appropriate and working to enable women to exit street prostitution in the Borough, the focus of the Strategic Street Prostitution Group will move to sending a clear message that this town will not tolerate perpetration of sexual harm.

The need to develop a more flexible and responsive offer e.g. joint commissioning to have a package/framework already in place for when a woman says she wants to exit, she can be in a direct access respite room that night, can be treated for any drug/alcohol withdrawal within 24 hours, and an assessment done to look at a residential detox treatment.

The need for more complex needs workers, who are going to be able to invest more time and effort into relationship building. Due to time pressures, agencies often end up working with those that want to be working with them, so they tend to get picked up the fastest. Whereas those who are not ready to engage at that time can often slip through the net.

To build a stronger drug and alcohol recovery community in Southend.

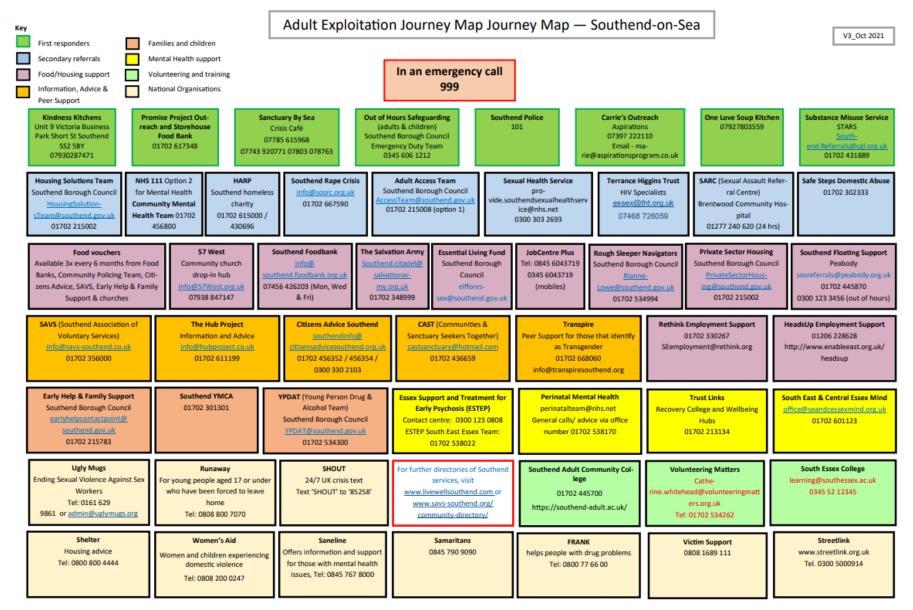
## How do we know if we have been successful?

We will continue to speak with the women to understand if they are feeling heard and supported by the services that they choose to engage with.

Trauma Alliance readiness assessments. The readiness assessment will be completed by all organisations that sign the Memorandum of Understanding (MOU). These assessments will

be used to develop a baseline of the organisation's current level of trauma-informed practice as well as how staff and volunteers are impacted by work within the organisation. Organisations will be encouraged to ask service users to participate in this baseline assessment.

#### Appendix A





### Appendix B

What services do you need <u>now</u> or what services <u>did</u> you need? (What support do you need)

What are/were the barriers that stopped you from accessing those services?

What would enable you to access those services?