

Prostitution Policy in Europe: A Time of Change?

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Abstract

There has been considerable recent debate about prostitution in Europe that reflects concerns about health, employment and human rights. Legal changes are being introduced in many countries. We focus on two examples in order to discuss the likely implications. A new law in The Netherlands is normalizing aspects of the sex industry through decriminalizing both workers and businesses. In Sweden, on the other hand, prostitution is considered to be a social problem, and a new law criminalizes the purchasers of sexual services in an attempt to reduce demand.

Both reforms appear to have had their desired effect at one level; in The Netherlands, health and safety regulations will be introduced as in any other job, and EU sex workers gain full social, legal and employment rights; in Sweden there was initially a tenfold decrease in the numbers of women working visibly on the streets, and some workers have left the industry. However, in both countries, the new legislation has also driven some sex work underground. Many sex workers are excluded by the Dutch system and move underground to become effectively invisible to the authorities. In Sweden sex workers and their clients also become less visible in order that the latter can avoid sanction. Social and economic changes, such as increased migration and the growing use of the Internet will also render the sex industry less visible both to state regulation and to health care workers.

The major problems of prostitution for the workers remain exploitation, stigma, abuse and criminalization. These are not unique to the industry, and can only be tackled effectively by the self-organization of sex workers into unions and rights groups, along with full decriminalization. An alternative vision is promised through self-organization and anti-racist actions by sex workers in Germany; normalization and workers' rights are tackled alongside training programmes for those seeking alternatives. Policy makers throughout Europe would do well to look at their experience and not simply at the clash of legal reforms.

Keywords

Prostitution; health; Europe; policy; regulation; law

Introduction

There has been considerable recent debate about prostitution in Europe that reflects concerns about health, employment and human rights.¹ We contend that these debates have not fundamentally affected the two traditional approaches to prostitution; abolition and regulation. Feminist debate is commonly pro or anti-abolition, and leaves regulation to one side. Prostitution as a form of violence against women is counterpoised to a view of prostitution as legitimate work. Some feminists campaign for women's rights to live without sexual exploitation, whether paid or unpaid, and draw parallels between prostitution, pornography, rape and domestic violence. Other feminists campaign for workers' rights in the sex industry and destigmatization of the 'whore' in society more generally.

State policies towards sex work have tended towards abolitionism in the latter part of the twentieth century, considering the industry unacceptable. The term itself evokes a comparison with slavery, whence the term derived, and associates the prostitute with the slave. This prostitute was generally considered a female victim, rather than a voluntary worker. International consensus was reflected in the Universal Declaration of Human Rights (1948) and the Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others (1949). In the former, for example, it is stated that 'prostitution and . . . traffic in persons are incompatible with the dignity and worth of the human person . . .'. Within this broad international consensus, differences between nation states were seen in the levels of toleration (usually within strictly demarcated zones and limits) and repression. Even though the avowed aim of laws and policies was to criminalize profiteers, agents and managers on the model of those profiting from slavery, it was and is often the workers, and particularly women, who suffer.

Abolitionism in the nineteenth century was constructed in moral opposition to state regulation where prostitutes were registered for the purposes of disease control and public order. Regulations were intended to deal with prostitution at a practical level, primarily through attempting to control the spread of disease. Abolitionists argued that it was wrong for the state to profit from, or condone vice and feminists attacked the system for making women (sex workers) responsible for prostitution in general and venereal disease in particular. Indeed, suggestions that clients, mainly the military, should also be subject to regular health checks were considered so unacceptable in the UK, threatening morale in the forces, that they were rejected out of hand (Walkowitz, 1980). Regulation has continued in some European countries, including Greece, Austria and Germany but has become far less common, being replaced by an abolitionist approach,

adopted at different times in, for example, the UK (1880s), France (1949, 1960) and Portugal (1962) (Walkowitz, 1980; Mak (ed.), 1996).

In recent decades, two developments have shaped policy. First, the rise of social movements and identity politics has led to a concern for gender equity which has affected the implementation of abolitionist approaches to the 'problem' of prostitution. For example, clients as well as prostitutes have been policed in some countries and there has been a greater emphasis on rescuing victims rather than punishing criminals (that is, prostitutes). Such approaches take for granted that the majority of sex workers are female and the majority of customers are male. In many countries today, abolitionism can be understood broadly to imply that prostitution is a social problem, which is harmful to all the parties involved.² Second, recent concern with AIDS has affected both abolitionist and regulationist policies. In Europe, harm minimization is the norm in AIDS control and generally informs public health policy. The priority is to reduce disease transmission through advice on safer practices and help in their implementation as, for example, in needle exchange programmes. Harm minimization in prostitution has enabled the growth of health promotion projects that provide advice, health care and condoms to sex workers. Such harm minimization depends upon contact with sex workers and has been found to work best in the context of programmes to support the overall health and well-being of sex workers.³ Therefore, public health programmes can come into conflict with both regulationist and abolitionist state policies as these make many sex workers avoid contact with all state officials, including health care workers.

In addition to legislative reform, the sex industry is clearly affected by changes in the social and economic situation locally and internationally. For example, the numbers of single parents and the reduction in state benefits to young people and refugees in many European countries are likely to increase the numbers of people available for work in prostitution. Increased mobility into and within Western Europe, partly as a result of greater freedom of movement within the European Union and with migration from poorer Southern and now Eastern European countries, has created a large and transient sector within the sex industry. Travel for work and pleasure, along with consumerism in general, has increased opportunities for clients to purchase sex. These factors have altered the structure of the sex industry and create the context in which changes in policy must be viewed.

Having been involved in the provision of sexual health services as well as research for some years, both in the UK (since 1986) and in other European countries (since 1989), we are particularly interested in the impact of

changing policies on the health and well-being of sex workers.⁴ In a short article, it is not possible to review recent developments comprehensively and so we take new legislation in two countries as examples that illustrate a range of initiatives. The normalization of aspects of the sex industry in The Netherlands can be seen as a way of placing harm minimization and employment rights at the centre of official, national policy. The recent criminalization of the purchase of sexual services in Sweden provides an example of a broad attempt to tackle violence against women through strengthening and extending abolitionist policies that define prostitution primarily as a social problem.

This review derives in particular from our work as co-ordinators of the *European Network for HIV/STD Prevention in Prostitution* from 1998–2000, and we draw heavily on previous reports and publications as well as interviews conducted by the Co-ordinating Centre in London with national participants and other experts during 1999 (Mak (ed.), 1996).⁵

Legal developments in The Netherlands

Background to the new legislation

National legislation regarding prostitution in The Netherlands, like most European countries, has been abolitionist, and anyone involved in the organization of, or living off, prostitution has been criminalized. However, since this legislation was introduced in 1911, there has been a gradual relaxation in implementation which has meant that prostitution has, in reality, long been accepted as a way of life: brothels and toleration zones have been openly or tacitly condoned. At the same time, tension developed between national law and local policy that led to a complicated system that was difficult to administer (van Doorninck *et al.*, 1998).

In 1983, a bill was put forward to change the law as city authorities were keen to be given appropriate administrative tools to regulate prostitution. This development coincided with a general mood of liberalization, in which prostitution was progressively seen as legitimate work. Nonetheless, the majority of the population remained strongly censorious, as in other European countries:

The moral attitude of the Dutch people however, is not different than that of other countries in the European Union. Prostitution is not considered acceptable behaviour and prostitutes face the same condemnation and stigma. But there is a typical element in Dutch political practice, called pragmatism, which makes it possible to see the sex industry as just another social phenomenon.

(van Doorninck *et al.*, 1998)

A Bill to abolish the general ban on brothels (defined as sex clubs, windows

and other businesses which are run for the purposes of prostitution) and to legalize voluntary prostitution was passed in October 1999 and will become law in summer 2000. The law has already been implemented in some cities including Amsterdam, and some effects have already been seen (at the time of editing in March 2000).

The law and its aims

The new law will legalize brothels as long as they do not interfere with or disrupt public life and, by regulating the commercial operation of prostitution in the same way as other businesses, it is hoped that the stigma of sex work can also be addressed and gradually removed. Sex work will come to be seen like any other business. The law has two main aims: first, to legalize the organization of voluntary prostitution; second, to increase the penalties against those involved in the organization of involuntary prostitution (through violence, force or coercion and fraud), particularly those involved in the exploitation of minors where the sentence is to be raised from one year to six years' imprisonment.⁶

The legislation sets out a clear and coherent prostitution policy, but it is the local authorities that will control and regulate the conditions under which sex work is permitted. Specific conditions include the size of brothels and their geographical location, health and safety regulations (minimum dimensions of the working area, running hot and cold water, presence of condoms, fire escapes) and the status of sex workers (protection of their physical and mental integrity, no under-age workers and none without a valid residence permit). Agencies such as the local authorities, police, health and social services have worked collaboratively for reform with a firm commitment to harm minimization and consultation with sex workers. These reforms meet some, but by no means all, of the demands of sex worker organizations for the right to work, as adults, through choice, and in reasonable conditions.⁷

Legal developments in Sweden

Background to the new legislation

In Sweden the situation is very different not least because the numbers involved in prostitution are small in comparison to The Netherlands. In Sweden there are approximately 2,500 prostitutes in a population of 8.5 million (0.3 per 1,000) compared to the estimated 25,000 who work in The Netherlands (1.6 per 1,000). Regulation was abolished in 1918 and there are relatively few laws relating to prostitution. For the last twenty years the Swedish approach has concentrated on addressing prostitution

as a social issue and a series of measures were introduced to provide a support system that included permanent governmental funding of municipal prostitute projects, counselling and retraining possibilities. These measures were based on a desire to eradicate prostitution, and in this sense can be termed abolitionist. The Swedish view continues to be strongly influenced by a concern for women's rights and was recently described by the Government as follows:

Prostitution is not a desirable social phenomenon. The government considers, however, that it is not reasonable to punish the person who sells a sexual service. In the majority of cases at least, this person is a weaker partner who is exploited by those who want only to satisfy their sexual drives. It is also important to motivate prostitutes to seek help to leave their way of life. They should not run the risk of punishment because they have been active as prostitutes. By prohibiting the purchase of sexual services, prostitution and its damaging effects can be counteracted more effectively than hitherto. The government is however of the view that criminalisation can never be more than a supplementary element in the efforts to reduce prostitution and cannot be a substitute for broader social exertions.

(Swedish Ministries of Labour, Justice and Health and Social Affairs, 1999)

The law and its aims

New legislation that criminalizes the buying of sexual services was introduced on 1 January 1999 and has engendered much public debate both within and outside Sweden. Its main aim is to reduce the numbers of people involved in the industry and actively to encourage sex workers to retrain. It targets men, as clients, rather than sex workers.⁸ Conviction for purchasing sexual services carries a penalty of a fine or up to six months' imprisonment and relates to all forms, whether purchased on the street, in brothels or massage parlours.

The Swedish government considers violence against women a serious social problem and the new law is part of a series of legislative changes targeting a reported increase in violence against women, particularly in the number of assaults and other forms of sexual offence, crimes which are often committed by men in close relationships with women (Swedish Ministries of Labour, Justice, Health and Social Affairs, 1999).

Effects of the reforms in The Netherlands and Sweden

It is too soon to gauge the full impact of the new legislation recently introduced in Sweden and still to be introduced in The Netherlands, albeit implemented at a local level in some cities such as Amsterdam. However,

preliminary findings suggest that very different developments in the two countries may be accompanied by surprising similarities.

In The Netherlands, the situation for some sex workers has already and will continue to improve: health and safety regulations will be introduced as in any other job, and sex workers will gain full social, legal and employment rights. Those working within this new legal framework benefit in terms of access to health and other mainstream services. The prostitutes' collective, *De Rode Draad*, has opened a centre to advise on matters such as registering as a self-employed person, tax forms and pension schemes.

The new system of regulation in The Netherlands enables the normalization of some forms of sex work: sex workers can operate visibly and become part of public life, whether in small-scale businesses or in the large and diverse entertainment industries which yield a substantial revenue to the state. Abuses can be prosecuted. For example, in Amsterdam, where the new system was introduced in 1996, licences have been withdrawn from brothel owners who employed sex workers illegally. At the same time, those denied work have been supported in law:

On 18 July 1997, the court in The Hague overruled a decision by the immigration office of the Ministry of Justice who had denied a Czech woman permission to reside in The Netherlands for the purposes of prostitution. The European Union has association treaties with Poland and the Czech and Slovak Republics, which gives nationals the right to self-employment in The Netherlands. The Ministry argued that prostitution could not be seen as labour in this sense and the Czech woman took the Dutch state to court with the above result. The court made it clear that prostitution is labour in the full juridical sense and so, when nationals of these countries can prove that they are able to support themselves as self employed (not employed) sex workers, they must be given permits.

(Visser, 1997)

In contrast, the first visible effect of the Swedish legislation was an immediate tenfold decrease in the numbers of women working visibly on the streets in cities such as Stockholm and Gothenburg, from about twenty to thirty women per night to one to three. According to reports, numbers are slowly increasing again but they have not reached the previous levels (Pettersson and Sjogren, 2000). This reduction in numbers is unlikely to reflect a move out of sex work altogether. It is more probable that both workers and customers have chosen less visible ways of making contact, so that the policy has led to a reorganization of the sex industry. Moreover, other developments in the sex industry make it easier to work less visibly including the use of the Internet to advertise services and mobile phones. It is interesting to note that the numbers of male clients attending the KAST project, a project that offers advice, support and counselling to

the buyers of sexual services, have not changed over the last year (Pettersson and Sjogren, 2000).

In Sweden, in the first nine months of 1999, only three clients were found guilty and fined. The women involved in these cases did not have to appear in court and had their anonymity preserved.

Crucial to the new Swedish policy has been the focus on women as victims rather than criminals. This approach has encouraged collaboration and communication between the police and social services, resulting in more sensitive treatment of sex workers, who appear happier reporting crimes to the police; moreover, it is reported that there has been a decline in recruitment, particularly of young prostitutes, into the industry (Pettersson and Sjogren, 2000). Social support is available in the same way to sex workers as it is for other non-prostitutes (for example, in finding alternative work), unlike in other countries.

These differences between the Swedish and Dutch reforms are debated throughout Europe today. In The Netherlands policies distinguish between voluntary and forced prostitution while in Sweden all prostitution is seen as a social problem. The Dutch government recognizes the purchase of sexual services as a valid part of the entertainment industry. National laws and policies are normalizing the industry through legalisation and regulation, using a number of measures such as the legalization of brothels, decriminalization of street prostitution in certain areas and the recognition of prostitution as legitimate work. Increased penalties have been approved for traffickers of migrant and underage sex workers. In Sweden, all prostitution is considered to be a social problem. Sex workers are treated as victims of exploitation and abuse, they are encouraged to leave the business and clients are criminalized. The new legislation and related policing may have contributed to the trend for sex workers to work less visibly. While project workers in Sweden have emphasized the fact that they are still available for support, advice, information and counselling, they have found it increasingly difficult to contact workers. New outreach methods are being developed through adverts, men's magazines and known addresses. So far project workers have had little success, and these methods are both time-consuming and labour intensive (Pettersson and Sjogren, 2000).

Yet, regulation and abolition may become unexpected bedfellows in their approaches to the 'problem of prostitution'. As noted above, the Swedish legislation may force sex work underground. It is possible that effective implementation of abolitionist policies within Sweden will also divert Swedes to neighbouring states. Swedish sex workers may move abroad, there could be an increase in 'sex tourism' where Swedish clients buy the

services of sex workers in neighbouring countries. The local industry becomes more dominated by migrants who seek to avoid contact with police, health and social workers.

In The Netherlands, some sex workers do not wish to register their employment and many cannot because they are not eligible: they may be under age, use drugs illegally or work as illegal immigrants. While it is difficult to estimate accurately the numbers of workers without papers, several estimates cluster around the following figures: of approximately 25,000 sex workers in The Netherlands in any one year, about 50 per cent are not nationals of the European Union (van der Helm and van Mens, 1999). Therefore, a significant proportion of sex workers in The Netherlands are likely to be excluded by the new system and may be adversely affected by the new legislation insofar as they have to move underground and become effectively invisible to the authorities. Early reports suggest that mobility within The Netherlands and in neighbouring countries has increased as a direct result of the new policies being implemented in cities like Amsterdam. As far as harm minimization and health promotion are concerned, this new mobility and increasing invisibility cause social and health workers acute problems of access to sex workers (van der Helm and van Mens, 1999).⁹ Moreover, vulnerable groups who are outside the law are likely to experience increasingly bad working conditions, with little concern from managers or clients about their occupational health and safety. In this way, a two-tier system is being created with a legal sector, in which workers may win the same employment, civil and other rights as all other nationals of the European Union, and an illegal sector, in which workers are excluded from civil society and have few rights to health care, social benefits or protection at work and little recourse to the law should they suffer abuse.

Discussion

The impact of such policies is yet to be seen, and needs to be considered at the international and local as well as the national level. For example, developments in The Netherlands have affected neighbouring countries with illegal sex workers moving across the border to Belgium and Luxembourg. In addition, close monitoring of the impact of changes may help inform wider developments as reforms within any one area of Europe may be rapidly disseminated, and adopted elsewhere. The Swedish experiment has been widely discussed in other Nordic countries, and the Danish and Finnish governments recently decided not to adopt the new policy (Kaivola, 2000; Kongstad, 2000).¹⁰

The Dutch reforms have also been followed attentively. Many countries

and cities have experimented with toleration zones for street prostitution, following earlier policy in The Netherlands. There is also great interest in the current extension of toleration towards full business normalization, particularly in Germany. The German sex worker rights movement is particularly strong, and the 1998 change in government (from Helmut Kohl's Conservative Christian Democrats to Gerhard Schroeder's Social Democratic and Green Party alliance) promised reform. The German Civil Code classes prostitution as an 'offence against good morals' so that sex workers, although they may register their work, do not receive full employment rights: they are not entitled to social security payments or health insurance, yet at the same time, if registered, they have to pay income tax.¹¹

In June 1999 the SPD Minister for Family put forward a draft Bill calling for the recognition of prostitution as labour so that sex workers would receive full employment rights and receive equal treatment in law. Perhaps the most infamous German legislation concerns the *Geschlechtskrankheitengesetz*, the law combating venereal disease (part of a general statute concerning legislation for Epidemic Control, the *Bundeseseuchengesetz*). This law classes prostitutes exclusively as the conveyors of sexually transmitted infections for which they have to undergo regular and frequent medical examinations. However, implementation varies widely: for example, in northern, largely Protestant cities such as Hamburg, Bremen and Berlin, services are now anonymous and voluntary but elsewhere obligatory medical examination still exists today. The Government plans to reform this 1943 law so as to abolish mandatory testing and end the legal stigmatization of prostitutes as those responsible for disease. A Bill has been under discussion in Parliament for the last ten years but it is hoped that the new government alliance will finally pass the legislation.

It is interesting that campaigners for sex workers' rights in Germany have objected to the exclusion of certain workers such as illegal drug-users and sex workers without papers whose access to health services, prevention initiatives and treatment would remain difficult under the proposed reforms. Lessons are being learned from the Dutch initiatives. Perhaps 50 per cent of sex workers in Germany are migrants, as in The Netherlands, and there was a call for the immediate abolition of repressive measures towards these migrants at the 25th German Whores' Conference in 1998 (European Network, 1999b). Calls were made to end discriminatory raids, HIV testing, police interrogation without a translator and deportation of aliens with no work permits. These moves reflect a recognition of racism within the industry and the introduction of anti-racist measures by sex worker organizations at the local level.

While it is difficult to end differential pricing and other practices within

the industry, the participation of sex worker organizations will be essential in combating the continual reproduction of a distinction between 'legitimate' and 'illegitimate' work undertaken by women, whether the line is drawn between sex work as a whole in opposition to other forms of work or between a legal and illegal sector within the industry.

The importance of monitoring national policy changes at a local level can be demonstrated by a third example from the UK. Prostitution is repressed in the UK through laws criminalizing soliciting and advertising by sex workers, fining clients who drive around street prostitution areas and through various laws directed against managers and exploiters of prostitution.¹² However, implementation of these laws varies between and even within cities. A study of prostitution in Liverpool, a port in the north-west of England, found that there was no coherent city strategy (Campbell *et al.*, 1996). Three geographically separate police authorities deal with street prostitution, leading to continual displacement of street workers from one area to another as different levels of toleration and repression are experienced. Police action, accompanied by local vigilante action, traffic management and regeneration schemes leads women to move from traditional red light areas to other residential and business areas. The report by Campbell *et al.* argued that issues such as poverty, inequality, sex discrimination, homelessness and drug dependency, all reasons for entering the sex industry, needed to be considered alongside residents' interests and general service needs. In response to these recommendations the Safer Merseyside Partnership, a multi-agency community safety partnership forum,¹³ recently implemented a series of measures to provide a coherent strategy for approaching the 'problem of prostitution' in the city. While it is too early to see if the situation for sex workers is improved, the Partnership has already introduced a Prostitution Strategy Group to mediate different agencies and groups and has funded a new project. The project complements existing sexual health service provision for sex workers by supporting those who wish to find alternative employment.¹⁴ The project is also developing safety initiatives in line with national guidelines including the ugly mugs scheme, warning sex workers about dangerous clients, and provides housing and welfare advice and referral to other agencies. These initiatives along with the development of improved prostitution police liaison may prove more effective than previous attempts at resolving the 'problem of prostitution'.

Conclusions

Legal reforms in The Netherlands and Sweden represent different approaches to sex work with different aims and implementation. In The

Netherlands, it is intended to normalize aspects of the industry and decriminalize both workers and businesses. In contrast, the Swedish reforms extend criminalization to the purchasers of sex, along with a more sympathetic approach to those considered victims, i.e. the workers. While the approaches are counterposed, they nonetheless start from a common understanding of prostitution as a problem, which can be addressed through state intervention. In The Netherlands, reforms are intended to dissolve a flourishing black market, with exploited workers who lack rights, and wealthy managers whose revenue is invisible to the state. Those who continue to work ‘informally’ outside the new regulations will face more intense criminalization. In Sweden, the problem is seen to consist in a socially unacceptable behaviour and the reforms aim to solve the problem by removing demand, thereby encouraging workers back into mainstream society.

From the relatively narrow perspective of harm minimization and health promotion, early reports suggest, however, that these developments are causing similar effects. Although workers in legitimate businesses in The Netherlands will have better access to health care and promotion, a large proportion, probably the majority of sex workers, is likely to ‘disappear’. In Sweden, all sex workers will be affected by the new policies and may attempt to find alternatives to open prostitution. In The Netherlands sex workers will seek to avoid regulation or prosecution. This makes it more difficult for health workers to make contact with sex workers, and health promotion and care will suffer. According to Petra Urban, Chair of *De Rode Draad*, Dutch and EU sex workers recognize the benefits that accompany the new legislation such as better working conditions and a real opportunity to report violence and abuse, but they are also concerned that in return they may lose their anonymity. Illegal sex workers, whose presence has been tolerated until this point, are likely to be driven underground for fear of prosecution and/or deportation.

However, health is not narrowly determined by contact with services and receipt of pamphlets and condoms. Overall well-being is crucial to health, and reflects social and economic factors far more than access to health services. The attempt to destigmatize part of the sex industry in The Netherlands is an important step towards better health through providing employment rights, an element of self-determination and some stability for workers. But, for those more vulnerable sex workers in The Netherlands and Sweden who cease to have contact with health and welfare workers for fear of sanctions deriving from the new policies, well-being is likely to worsen. Sex workers may continue in the industry, but operate in hidden sectors with intensified links to the criminal underworld, including the drug trade. Exploitation, violence and drug use may all increase and damage women’s health.

While prostitution issues are defined as a 'problem' amenable to state legislative and policy control, the prospects for better health and well-being remain limited. Social factors such as economic need and increased migration change the sex industry far more rapidly and profoundly than new laws. New technology plays a major role today in bypassing state controls of all sorts, with an explosion of Internet use within the sex industry. It is likely that this will render the industry less visible both to state regulation and interference and to health care workers. The situation for some sex workers will improve but, for many, further fragmentation will lead to isolation and exploitation by a new breed of e-pimps.

The major 'problems' of prostitution for the workers are exploitation, stigma, abuse and criminalization. These are not unique to the industry, and can only be tackled effectively by the self-organization of sex workers into unions and rights groups, along with full decriminalization. While the new law in The Netherlands addresses these issues of self-determination, it cannot be effective across the industry since there is no attempt to tackle the right of non-European Union citizens to work, nor the lack of economic alternatives to prostitution. In this context, it is striking that a model and a way forward has been provided through self-organization, through anti-racist actions by sex workers in Germany. In the future, policy makers would do well to look to sex worker organizations for models of anti-discriminatory measures and training opportunities, both within the industry in health and safety programmes for example, and beyond, in literacy programmes, computer training and so forth.

Notes

Sophie Day began a research project in the summer of 1986 (funded by AVERT), and began to work shortly after with Helen Ward, who set up a sex worker clinic, and obtained further research funding from the Medical Research Council in 1989. They set up the Praed Street Project working with sex workers in West London, and have continued to provide services and carry out research in the field. They sat on the steering committee for the Sociological and Epidemiological study of female sex workers, 1989–92, co-ordinated by Professor P. Piot (funded by the European Commission). Judith Kilvington joined Sophie and Helen in 1998 when they took over the European Coordination of the European Network for HIV/STD Prevention in Prostitution. The European Network has been supported by the European Commission, DGV *Europe Against AIDS*, since 1993. The participants represent projects in sixteen European countries, including sex worker self-help groups, clinical and health promotion services and social support programmes. The Network includes two groups, EUROPAP and TAMPEP, both of which started in 1993 and which merged in 1996. The co-ordinators in the sixteen member states exchange

experiences and skills both nationally and internationally in order to promote health and safety in the sex industry.

- 1 We use the terms prostitute and prostitution synonymously with sex worker and sex industry.
- 2 Thanks to Elisabeth Pettersson and Torgny Sjogren for pointing out the possible confusion between laws, rules and moral standards in our use of the term abolitionism. Today, abolitionists continue to consider prostitution a problem but perhaps in less legalistic terms than in the nineteenth century when feminists were so opposed to state profit from vice. In contrast, regulationists tend to focus on the problems surrounding prostitution, such as disease and public order. Both these terms, of course, are very broad.
- 3 See European Network for HIV/STD prevention in prostitution (1999) *Hustling for Health: Developing Services for Sex Workers*, London; Imperial College. This is a practical handbook, which describes innovative programmes of peer educators outreach and health promotion schemes for different groups of sex workers, clients and managers in the sex industry.
- 4 See biographical details. Judith Kilvington joined the European Network in October 1998.
- 5 The views in this article are those of the authors and do not represent the views of the Network participants as a whole nor those of the European Commission. In particular, the Swedish participants have reservations about the conclusions we draw. Although we hold different views on sex work in this Network, we have developed a common platform arguing for adequate occupational health and safety measures and appropriate access to health services. These depend upon equality before the law and improved civil rights.
- 6 For a translation of the new law and more details see: Jan Visser (1997) 'The Dutch law proposal on prostitution: text and explanation', <http://www.mrgraaf.nl/2_ef.htm> and the Ministry of Justice (1997) 'Press release: heavier penalties for abuse of prostitution', <http://www.minjust.nl:8080/c_actual/persber/pb0121.htm>.
- 7 For a discussion of 'choice', see Jo Doezema (1998) 'Forced to choose: beyond the voluntary v. forced prostitution dichotomy' in Kamala Kempadoo and Jo Doezema (1998) editors, *Global Sex Workers: Rights, Resistance, and Redefinition*, London: Routledge.
- 8 Clients are generally, though not exclusively, considered to be men. All male and female sex workers are affected by the new law.
- 9 Although the focus of this article is on female sex workers, the legislation affects male sex workers in the same way. However, contact may be even more difficult with this group as male sex workers have tended traditionally to work informally outside brothels in bars, railway stations or with mobile phones.
- 10 It seems as though the Danish government has adopted elements of regulation

as well as abolition in the new legislation that came into force in July 1999. This makes it illegal to purchase sex from anyone under the age of 18, with a maximum sentence of two years in prison. Measures to prevent prostitution by minors, to help women get out of the sex trade and to stop trafficking have all been adopted. While the new legislation does not make sex work a legal occupation, it is partially decriminalized in accordance with a tradition of toleration in which sex workers have rarely been arrested since the mid- 1970s. Other activities like keeping a brothel or letting hotel rooms for prostitution activities will still be illegal. See Kongstadt (2000). See also website <<http://www.lifeline.demon.co.uk/sex/intro.html>>.

- 11 For a more detailed analysis of the German Civil and Social Codes see Maya Czajka, Country Report, Germany in Mak (ed.) (1996). Sex workers cannot register themselves as self-employed, and their income is generally calculated under the 'other income' category where tax is charged at a much higher rate. Sex workers cannot file a claim in court against a client or a pimp/brothel owner/manger for any outstanding payment owed to them, but in contrast, the court will act on behalf of a customer in order to claim back his money if the performance agreed upon was not accomplished.
- 12 There are many reviews of legislation available but, for one example specifically aimed at sex workers, see the pamphlet supported by the European Network and by Release, a drugs agency in London, Release (1997) *Sex Workers and the Law*, London: Release.
- 13 The Safer Merseyside Partnership is a Merseyside-wide multi-agency community safety partnership. The Social Programmes Unit works for SMP developing initiatives and strategies focusing on community safety and social exclusion working with such issues as drugs misuse, offenders, racial harassment and latterly prostitution. The SMP is chaired by the Chairperson of Merseyside Police Authority and includes political representation from the five Merseyside local authorities and representatives from Merseyside Police, drugs services, health authorities, Merseyside Fire Service, the Chamber of Commerce, NACRO, the Probation Service and from the voluntary sector through the CVS Network.
- 14 This scheme is known as the Linx Project, funded jointly by the Safer Merseyside Partnership and the Health Action Zone, a Department of Health scheme for projects that include multi-agency work between statutory and voluntary sectors dealing with social and health inequalities in Britain.

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