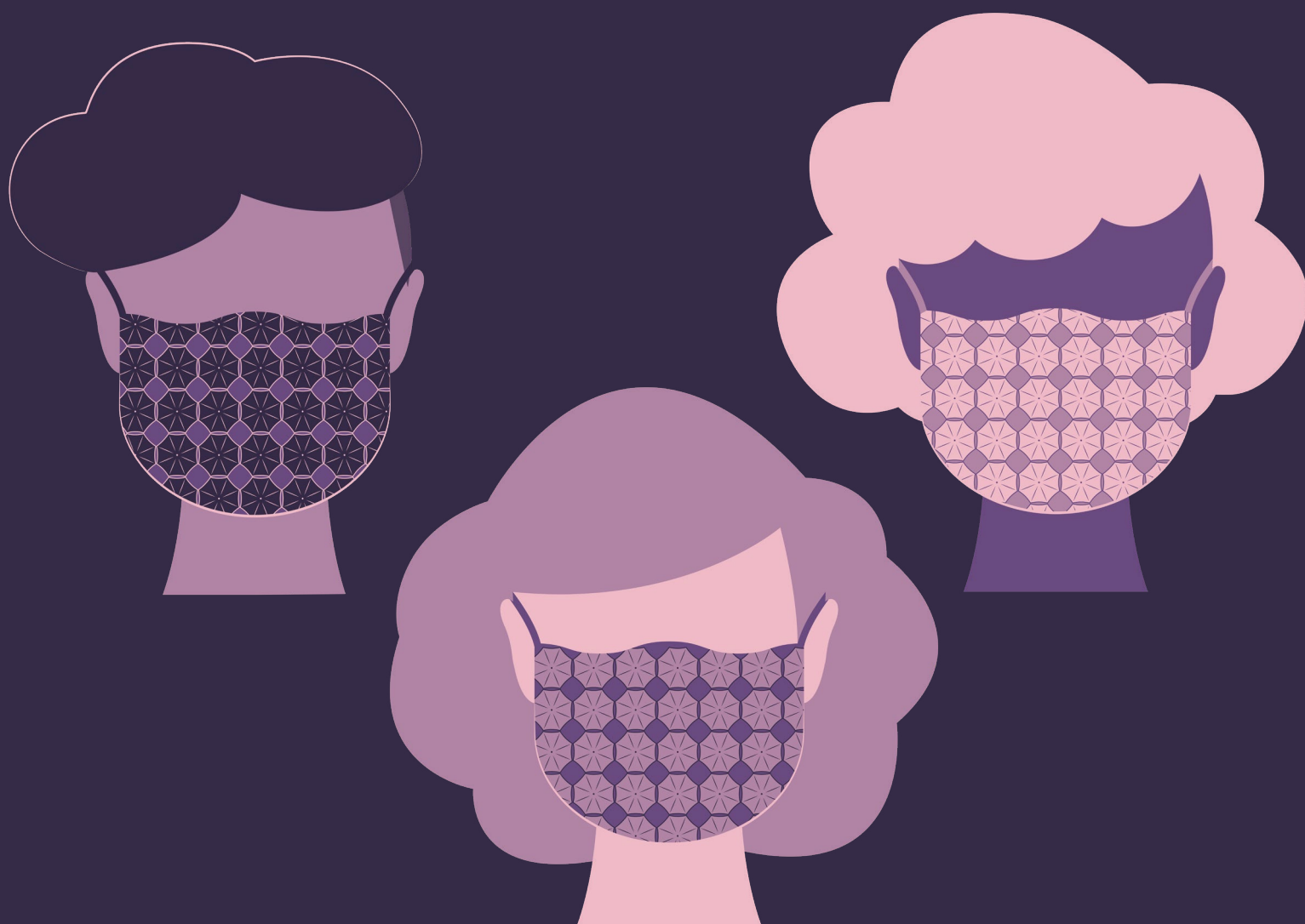

Sex workers on the frontline

March 2021

The role of sex worker rights groups in providing support during the COVID-19 crisis in Europe



International Committee on the Rights of Sex Workers in Europe

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Introduction

Marginalised and minority communities, such as people of colour, women, (undocumented) migrants, disabled and LGBT people have all faced deepening pre-existing inequalities during the COVID-19 crisis in Europe. The pandemic has significantly exacerbated these populations' social, economic, and political vulnerabilities and has exposed the ways in which excluded groups are forced to operate on the economic and social margins, in precarious circumstances, without state protection.¹

The majority of sex workers in Europe belong to one or more of these groups, which have experienced great obstacles to obtaining healthcare, accessing basic necessities, and living without fear of abuse and violence ever since the outbreak of the pandemic. Those belonging to multiple marginalised communities and living precariously and/or unemployed or not formally employed, including the majority of sex workers, were amongst the first to feel the impact of government restrictions and the introduction of strict lockdowns in 2020, as we will later illustrate in this report.

1. See: Nobody Left Outside (2020). NLO briefing paper. COVID-19 in marginalised groups: challenges, actions and voices. Available: <https://nobodyleftoutside.eu/wp-content/uploads/NLO-COVID-19-Briefing-paper-Final-August-2020-updated.pdf>; UN Women (2020). Policy brief: The impact of COVID-19 on women. Available: <https://www.unwomen.org/en/digital-library/publications/2020/04/policy-brief-the-impact-of-covid-19-on-women>; <https://picum.org/covid-19migrantsineurope>; Millett, Gregorio A. et al. (2020). Assessing differential impacts of COVID-19 on black communities, *Annals of Epidemiology*, Volume 47, 2020, pp. 37-44. Available: <https://www.sciencedirect.com/science/article/pii/S1047279720301769>; ENAR (2020). Evidence of the impact of Covid-19 on racialised communities exposes need to address persistent inequalities and racism. Available: <https://www.enar-eu.org/Evidence-of-the-impact-of-Covid-19-on-racialised-communities-exposes-need-to>



Sub-groups of sex workers mostly impacted by the COVID-19 crisis according to ICRSE members responding to ICRSE's community survey.

Faced with this unprecedented crisis, sex workers and their organisations were quick to react, mobilising their communities and supporters to reach out to the most vulnerable sex workers. Not only did they provide direct support on the ground, but also carried out important policy work to draw attention to the exclusion of sex workers from government support schemes. Furthermore, they organised internationally and shared tools and knowledge.

The International Committee on the Rights of Sex Workers in Europe (ICRSE) played an important role in connecting sex worker rights groups across Europe and Central Asia and creating a set of advocacy recommendations for European and national-level policy makers. Not only did ICRSE launch an online monitoring website of the situation², but also organised several webinars on crowdfunding, community support, and advocacy to allow activists to gain knowledge on topics crucial to providing an emergency response to the crisis. Its policy demands³ and situational analysis were incorporated in international policy positions, such as the Report on the EU Strategy for Gender Equality (2019/2169(INI)) of the Committee on Women's Rights and Gender Equality⁴ the Technical Report of the European Centre for Disease Control and Prevention⁵ and statements by UNAIDS.⁶

With the present report, we aim to summarise the impact of the COVID-19 crisis on sex workers in 2020, focusing on how their socio-economic conditions, health and safety were compromised throughout the year, ending with strict 2nd and 3rd wave lockdowns and curfews in many countries of the region. Furthermore, we provide a summary of the various grassroots actions that ICRSE membership carried out in 2020, illustrating the power and resilience of sex worker collectives, based on a survey targeted at ICRSE membership and individual discussions. Finally, the report ends with recommendations for policy makers to upscale community support and alleviate this crisis for sex worker communities.

2. <http://redlightcovidEurope.org>

3. http://redlightcovidEurope.org/wp-content/uploads/2020/04/Policy_brief_ICRSE_COVID19.pdf

4. https://www.europarl.europa.eu/doceo/document/A-9-2020-0234_EN.html

5. European Centre for Disease Prevention and Control (ECDC) (2020). Guidance on the provision of support for medically and socially vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic, 3 July 2020. Stockholm: ECDC; 2020. Available: <https://www.ecdc.europa.eu/sites/default/files/documents/Medically-and-socially-vulnerable-populations-COVID-19.pdf>

6. https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2020/april/20200408_sex-workers-covid-19

Impact of COVID-19 on sex workers

Socio-economic impact

The COVID-19 pandemic has been a major shock for European and global economies, with very severe economic and social consequences. In November 2020, the European Commission projected that the euro area economy would contract by 7.8% in 2020 before growing 4.2% in 2021 and 3% in 2022. The unemployment rate in the euro area is estimated to rise from 7.5% in 2019 to 8.3% in 2020 and 9.4% in 2021, before declining to 8.9% in 2022.⁷

With supply chains disrupted, businesses required to close or scale back, and millions losing their jobs and livelihoods, women and LGBTIQ people have been disproportionately affected due to preexisting inequalities in sexist and cis-heteronormative labour markets. Across the globe, women and LGBTIQ people have restricted access to secure jobs and are more likely to be employed in the informal sector, working under exploitative conditions – from seasonal or temporary employment to home working, flexi and temp-work, to subcontracting, working as freelancers, or as self-employed persons.

Women - in many countries with a high proportion of (undocumented) migrant women - form the large majority of the care sector as well, including health

workers, caretakers, and domestic workers. The care sector has been historically undervalued, underpaid, or completely rendered invisible and unwaged. Furthermore, it was severely hit by recent austerity measures. Many sex workers work in the sex industry because their care work, whether raising children or tending to ill or disabled relatives, is invisibilised and completely unpaid. With school closures and the early release of COVID-19 patients and those with chronic illnesses from hospitals, more and more women have become primary unpaid caregivers in their families. As reported from the UK, many women had relied on exchanging childcare, cleaning, or sex for housing; all these arrangements were disrupted by the pandemic thus many women lost their associated income.

The COVID-19 crisis revealed in weeks that sex workers are amongst the populations most disproportionately impacted due to their social and economic exclusion working in a highly criminalised sector, and often being (undocumented) migrants. All organisations participating in the ICRSE survey signalled that there was a surge of contacts to their collectives as sex workers found themselves in an unprecedented situation, with an often complete lack of income. For instance, the English Collective of Prostitutes reported that between March and the

7. https://ec.europa.eu/commission/presscorner/detail/en/ip_20_2021

end of September 2020, the numbers of women contacting them rose by approximately 30%, while a Cardiff, UK based charity saw a 69% rise in women coming to them for support during the coronavirus crisis, where women have been working throughout the pandemic through economic necessity.⁸

Sex workers began to report a huge decline in the number of clients from February onwards in Southern-European countries hit first by the pandemic. They have almost abandoned the streets due to the fear of contagion and out of a sense of responsibility for public health upon the introduction of lockdown measures. The economic impact of the first lockdowns fell on a community that was already precarious and engaged in work in an unrecognised sector, e.g. in **Italy** sex work is not recognised as work, therefore it is not possible to work even as self-employed, while in **Spain** sex workers are heavily criminalised. Soliciting on the street is prohibited in Malaga, Sevilla, Madrid, Bilbao, Murcia and Valencia and sex workers are frequently punished by fines. Organisations from these two initial hotbeds of COVID-19 reported a rapid loss of income for sex workers: in **Spain**, the number of active advertisers on one of the main advertising sites dropped by 32 % after the national lockdown was introduced. Similar numbers were reported later on from other countries as well, e.g. in **Norway**, from 9 March to 13 April 2020, the number of online advertisements dropped from 724 to 236.⁹

“ We have tried to say to the workers: ‘Don’t work.’ But they say: ‘we don’t have food and don’t want to starve. We have to risk having the virus, we need the money.’

Nini, Ombre Rosse, Italy

“ The virus comes on top of a crisis of poverty, especially among women. Most sex workers are mothers, mainly single mothers, who have been made poorer by austerity cuts. One and a half million people have been made deliberately destitute by government policies and four million children are living in poverty. That means that 100,000s of families in the UK rely on the income from sex work to survive.

*Niki Adams,
English Collective of Prostitutes*

8. <https://www.bbc.co.uk/news/uk-wales-52706165>

9. Pro Sentret (2000). The exclusion of persons who sell sexual services in the handling of the COVID-19 pandemic. p. 13. Available: <https://prosentret.no/ny-rapport-fra-pro-sentret-new-report-from-pro-sentret>

As countries followed the example of national lockdowns in Italy and Spain, similar reports surfaced of sex workers losing their income from one day to the next. Many of them were already precarious due to oppressive legal frameworks being in place, such as the client criminalisation in **Ireland** and **France**, which had drastically reduced sex workers' income prior to the current crisis. In other countries, such as the **UK**, the criminalisation of loitering, soliciting and "anti-social behaviours" had already been used against sex workers and contributed to their general precarity and vulnerability.

The majority of sex workers could not access governmental support schemes. The problems sex workers encountered included in the **UK**: waiting weeks before they got any money; universal credit agency doing an assessment of the rent which was based on the average housing allowance for that area but which in reality did not cover anything like the actual cost of the rent; not being able to prove their identity; being turned down for arbitrary reasons; difficulty navigating the online system; no money for mobile data to be able to access the system and no wifi in their accommodation. According to the community survey of the English Collective of Prostitutes, 24% of participant sex workers applied for universal credit.¹⁰

Migrant sex workers remained one of the most vulnerable groups in terms of income loss, as in most European countries they were not entitled to receive social support. Examples include having a "No Recourse to Public Funds" state-

“The housing situation prior to COVID-19 was already awful for sex workers. The rents are terribly high in big cities like Barcelona, like in any other gentrified European city. Many sex workers live at their workplaces, which were shut down, so basically sex workers found themselves on the street.

*Sabrina Sanchez, Aprosex,
OTRAS, Spain*

10. English Collective of Prostitutes (2020). Sex workers and COVID-19 survey. Forthcoming.

ment attached to their immigration status in the **UK**, or not complying with sex work-related criteria, such as the compulsory registration as a sex worker in **Germany**. Experience with extending work visas varied to a great extent in the countries of ICRSE's survey. In **Austria**, for instance, many migrants became undocumented due to the slow processing of extension requests, while in **Poland**, visas were automatically extended and allowed many migrant sex workers to stay in the country during 2020.

In connection with shrinking incomes, stable housing also became a pressing concern. Those sex workers who had official rental contracts were in most countries protected by eviction moratoria, but those without contracts faced increasing housing insecurity. In **Italy**, it has been reported that many have been pushed to the streets, such as a group of transgender sex workers having to sleep under a bridge in Florence. In the absence of formal rental contracts, many sex workers struggled to negotiate with their exploitative landlords. In **Spain**, it had been common for sex workers to stay at workplaces; with brothels shutting down and a lack of rental contracts, many found themselves on the street. In **France**, sex workers in migrant dorm-like accommodation faced pressure from their landlords. Additionally, various sex worker organisations reported that some sex workers spent the quarantine with clients at their homes for a reduced price or for free in the absence of other accommodation options, often ending up in potentially exploitative situations.

For migrant trans sex workers, staying together was a frequent strategy, reported from the **Netherlands** and **France**. However, sharing an apartment or hotel room for cost reduction also potentially increased the risk of COVID-19 transmission, as well as criminalisation and punishment under third-party laws (brothel-keeping).

Impact on health

According to the European Centre for Disease Control and Prevention, people medically vulnerable to COVID-19 include not only older adults and people who have underlying health conditions, but also those who are socially vulnerable. Among others, this includes those with long-term physical, mental, intellectual or sensory impairments; homeless people; people living in abusive household settings; ethnic minorities; sex workers; people from the LGBTIQ community; and irregular migrants.¹¹ Certain segments of the sex worker population also have a prevalence of underlying physical and mental health conditions due to longstanding stigma, marginalisation, and criminalisation, which have made them more at risk of COVID-19 contraction.

With sex workers required to discontinue working due to stay-at-home orders and bans on services that require close contact, not only did they lose their primary livelihood but many also faced difficulties in accessing healthcare. As transition-related and sexual and reproductive healthcare have not been prioritised as vital in the overwhelming majority of European countries, cis women and trans sex workers faced the

11. (ECDC) (2020) p. 3.

inability to access services in these fields. According to a joint assessment of ICRSE and the Sex Workers' Rights Advocacy Network (SWAN)¹², many AIDS/HIV clinics or departments were not completely closed but continued to work with limited and altered capacities, postponing or moving consultations online or over the phone, and organising medicine delivery via post or direct home delivery. Many groups reported that ARV treatments were still available for "old" patients, but new ones were not admitted. Furthermore, shortages in HIV medication were also reported and HIV testing was suspended in various contexts.¹³

Many sex workers also reported having to break the rules of lockdown and work under increased risks of police violence, blackmail, detention and penalties, as well as potential exposure to the virus. Community-based groups participating in the ICRSE survey reported the continuation of health prevention services. However, outreach often became impossible due to sex workers hiding from service providers since they shared accommodation with other sex workers to lessen financial burdens and this could be interpreted as third-party violation (brothel-keeping), or because they worked violating quarantine regulations. Additionally, sex workers' rights groups reported that reaching sex workers proved to be challenging offline and posed difficulties for them since they lack human resources and were not able to travel for outreach.

“ In Poland, a law proposal was put forward during the pandemic to further criminalise abortion (ban of abortion on basis of fetal malformations). For sex workers, it was very hard to access ‘morning after pills’ due to movement restrictions and the delays of appointments with doctors.

Ana, Sex Work Polska, Poland

12. http://www.sexworkeurope.org/sites/default/files/userfiles/files/Covid19_SWAN_ICRSE_Final_Umbrella_Interactive.pdf

13. EATG (2020). Rapid Assessment. COVID-19 crisis' Impact on PLHIV and on Communities Most Affected by HIV. Available: <https://www.politico.eu/wp-content/uploads/2020/04/EATG-Rapid-Assessment-COVID19-1-.pdf>

Migrant sex worker communities have continued to face intersectional disparities in relation to access to healthcare during the pandemic. Communications about COVID-19 developments and protection guidelines in most countries of the ICRSE inquiry ignored migrant communities' languages. Furthermore, undocumented migrant sex workers experienced serious barriers to accessing non-emergency care, fearing or actually risking being denounced to the immigration authorities or receiving large bills they cannot pay as a result of accessing services. Only two countries, Italy and Portugal rolled out regularisation measures¹⁴ that would grant time-limited residence authorisation for specific groups of migrants with associated access to healthcare. However, these regulations did not mention sex workers given that they do not enjoy worker status in these countries.

Impact on safety

Gender-based violence against women and gender minorities is increasing globally as the COVID-19 pandemic combines with economic and social stresses and measures to restrict contact and movement. Crowded homes, limited access to services, and reduced peer support are exacerbating these conditions. Many countries with reporting systems in place have stated surges of 25-50 % of people asking for assistance in cases of in-partnership violence. No data is available however on the victimisation of sex workers during the pandemic.

While social distancing measures have been introduced in the majority of countries in the region, it may have been particularly difficult to respect them for those who rely on their work based on close personal contact, have been homeless or lived precariously, or have been forced to be with abusive family members or other parties in confinement. First responder services and shelters for victims of abuse and violence also lack capacities to help and might be locked down due to not being qualified as essential services. LGBTIQ people are especially affected due to family rejection, and their needs have been largely overlooked in the response to gender-based violence.

Sex workers have been amongst the most precarious informal workers in the present situation, with little or no income and savings, often being (undocumented) migrants and LGBTIQ. Furthermore, the decrease in the number of clients and economic emergencies resulted in a heightened risk of taking on abusive clients and engaging in risky behaviours, such as condomless sex. Access to justice for sex workers, especially for (undocumented) migrants, has long been compromised. The lack of access to support and justice in cases of victimisation creates an especially vulnerable situation during the pandemic: sex workers are afraid of the police and immigration authorities and do not report cases of abuse and violence to them due to the well-founded fear that they will either receive no support, or even get fined, detained, or deported.

14. <https://picum.org/wp-content/uploads/2020/10/Non-exhaustive-overview-of-European-government-measures-impacting-undocumented-migrants-taken-in-the-context-of-COVID-19.pdf>

Coronavirus restrictions and “lockdown laws” have been imposed in a discriminatory way, targeting sex workers in many countries. In the **UK** for instance, lockdown regulations particularly targeted women of colour and immigrant women, with some receiving “on the spot fines”, others being harassed for working on the street or experiencing their premises raided.

In **Norway**, the police used pandemic regulations to unfairly arrest, detain, heavily fine and deport foreign sex workers, using the National Act relating to the control of communicable diseases as a pretext for harassment and deportation of sex workers. Police have raided apartments and used coercive measures such as confiscating mobile phones to find details that they can use against sex workers. In addition to deportations and detainment, sex workers have been fined 19 000 NOK (1845 EUR) for allegedly breaking quarantine and infection rules. There was no legal basis for the police behaviour in the Act relating to the control of communicable diseases, as the sex worker would have needed to be infected with a disease and infect others on purpose, or through gross negligence.¹⁵

Violence against sex workers by non-state parties did not stop with lockdown measures. As perpetrators knew that sex workers violated the ban on contact services, in some countries, such as the **UK** and **Norway**, they specifically targeted sex workers. In **Norway**, sex workers provided accounts of an increase in intoxicated clients, clients who refuse to pay or ask for non-payment referring to the fact that selling sex is prohibited,

“Those who are undocumented migrant sex workers even fear going out. There is a lot of police control during the lockdown. If they are stopped by the police, they will probably be deported.”

Vera, OTRAS, Spain

15. <http://www.pion-norge.no/aktuelt/arrests-and-deportations-of-sex-workers-in-norway>

clients who refuse to use a condom, bargain over price or demand services that the seller does not offer, as per the report of Pro Sentret, an Oslo-based service provider.¹⁶ Police were furthermore publically calling sex workers “contagion bombs” on Norwegian TV, which also contributed to sex workers having very low trust towards law enforcement authorities.

Police surveillance and raids of workplaces were reported from **Italy**, **Poland**, **France**, **Germany**, and the **UK** among the survey respondents. In **Italy**, sex workers from all around the country reported a high level of police surveillance since the introduction of lockdowns: police were escorting them home from their street working places and called them based on their online advertisements, which caused huge distress amongst the community, especially (undocumented) migrants. Further criminalisation also occurred in Italy, for instance, in Rimini, the municipality introduced a new ordinance to prohibit prostitution, and between 25 May and 31 October, 221 fines were handed out.¹⁷ In **Poland**, police fined workplaces for being venues of illegal gatherings and sent sex workers living in the brothels “home”. Some sex workers were also fined for working on the street. In **France**, several media outlets have reported on cases of migrant sex workers being targeted by the police with headlines such as “Migrant prostitutes infected by Coronavirus contaminate 13 clients” without any evidence of virological status of the individual, spreading fear

and disinformation. While fines for sex workers in the 1st wave lessened later on, police continued to punish clients during raids in **Germany**. In the **UK**, sex workers, especially women of colour and migrant sex workers faced fines and police raids at their workplaces.

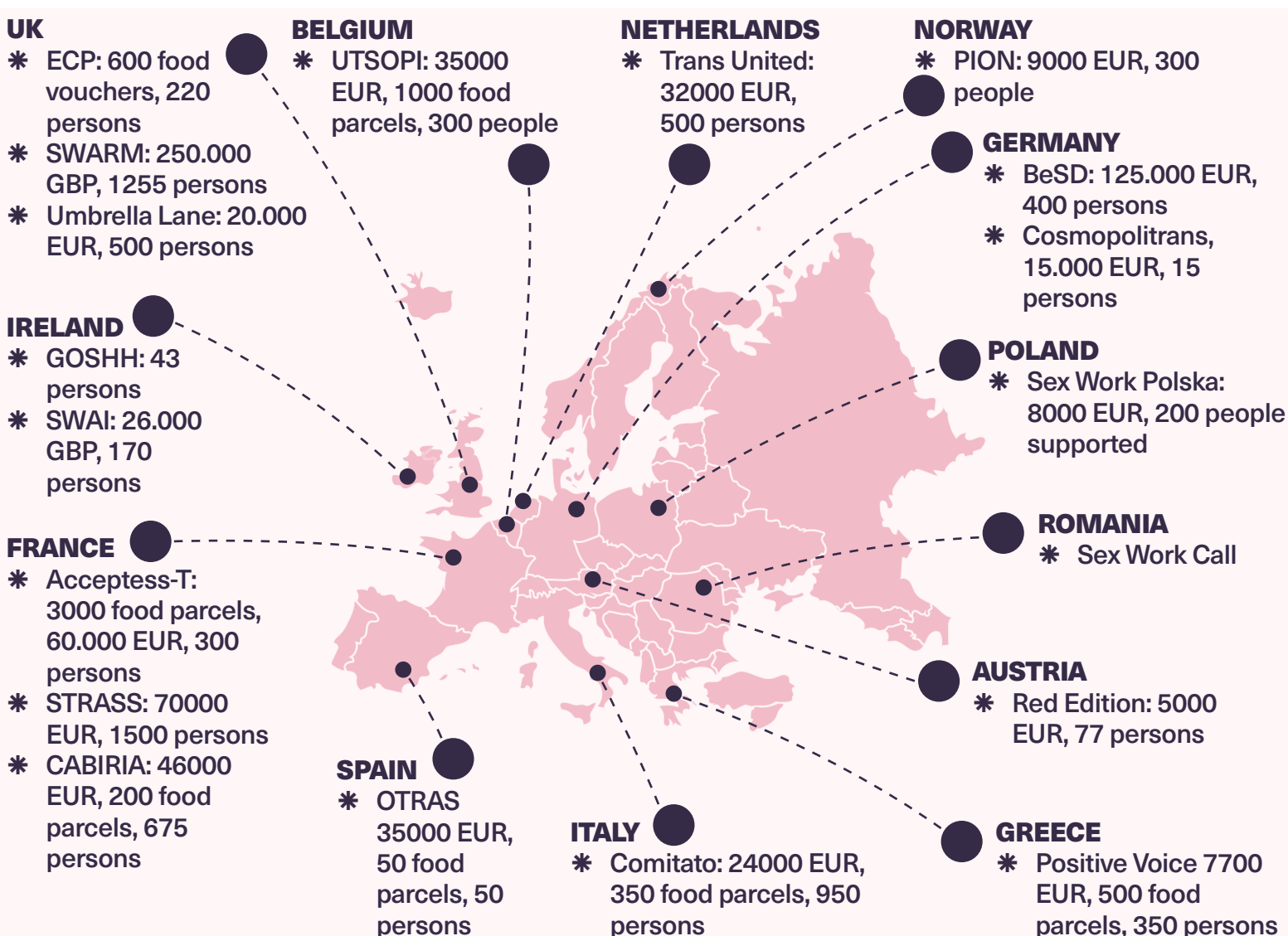
16. Pro Sentret (2020).

17. <https://www.altarimini.it/News143111-la-prostituzione-a-rimini-non-si-ferma-nonostante-il-covid-e-i-controlli-pronta-nuova-ordinanza.php>

Community-based support by sex worker organisations

Financial and direct support to sex workers

Sex worker groups, although many are operating on shoestring budgets and with the work of volunteers, stepped up to provide immediate support to those who lost their income from the very beginning of the pandemic. This included organising fundraising to help the most in need and not reached by other humanitarian organisations or service providers. The below graphic shows the amount of money raised through crowdfunding campaigns in various countries of ICRSE membership and the number of people helped through various support activities, including direct financial support. Sex workers did not give out cash payments in all cases. Some distributed food vouchers, food parcels, gift cards, depending on the organisation's decision and the community's immediate needs.



Direct provision of financial aid was complemented by several other measures, such as multilingual translation of COVID guidelines or online workshops about working online, mental health and wellbeing and other topics (**Ireland, Germany**). Various organisations also used this initial contact to follow up and offer support by peer outreach workers on an individual basis. Several organisations also provided support by negotiating with landlords to prevent evictions and providing emergency accommodation (**Romania, Poland, France, Spain**). Some organisations also supported sex workers with arranging for their return journey to their country of origin (**Sweden, Italy**) and also referred sex workers to appropriate services in case of violence and trafficking (**Italy**). In the **UK**, the English Collective of Prostitutes provided legal aid to those fined during the lockdown, while in **Romania** and **Ireland** sex work organisations helped sex workers obtain legal documentation, state benefits and health insurance.

In order to efficiently reach sex workers across the country, many organisations established new working relations with support organisations. For instance, in **Italy**, local sex worker groups cooperated with local NGOs and members of the National Anti-Trafficking Platform in cities with no local activists to distribute financial aid to sex workers, while activists in **Belgium** worked with social support mechanisms, such as food banks and City Councils. In **Ireland**, migrant sex workers with undocumented status were directed to the Migrant Rights Centre or anti-trafficking organisations in cases of trafficking.

In **France**, several organisations providing sex workers with assistance worked together to pool and share resources, such as personal protective equipment and also cooperated with other social work actors to organise access to HIV testing and care services. Sex worker activists in **Spain** also engaged in new partnerships with organisations to deliver food parcels and vouchers to sex workers, such as OXFAM, Intermon, the Spanish Red Cross, and the Ajuntament de Barcelona (the Municipality of Barcelona), amongst others.

Advocacy around sex workers' rights and inclusion in support schemes

Besides the provision of direct support to sex workers, sex worker rights groups also engaged in amplifying in public discourse the impact of COVID-19 on their communities. As a result, several alliances were made in 2020 with the media and other connected human rights and social justice movements. Furthermore, state institutions in some countries acknowledged the importance of supporting community-based groups and considering their demands. However, in some contexts, sex worker groups' exclusion from policy-making became even more visible by including abolitionist, anti-sex work groups in state support schemes instead of the inclusion of community-led collectives, such as in **Scotland** and **Ireland**.

The below case studies illustrate how various groups across ICRSE membership used the opportunity of increased visibility during 2020 to advocate for sex workers' inclusion in socio-economic and health measures.

Belgium: UTSOPI

UTSOPI focused its support on sex workers in Brussels, helping the most precarious undocumented sex workers in the country, in particular from the Nigerian community, with direct support, which they had not had experience providing before COVID-19. Additionally, they worked in Flanders and Wallonia. 30% of requests came from other support organisations, which brought new alliances to the organisation, such as the food distribution organisation and service providers focused on sex workers and victims of trafficking.

UTSOPI joined a local alliance for improving the situation of sex workers. Platform Schaerbeek included UTSOPI employees, different branches of the police, anti-trafficking organisations and policy-makers to inform each other on the situation of sex workers in North District 2 in Brussels. This cooperation enabled setting up a food distribution programme, receiving funding from the municipality of Schaerbeek. UTSOPI also decided to create a federal platform of various actors working towards the improvement of the situation of sex workers, irrespective of their position on sex work and prostitution. This platform was mandated during the first lockdown to establish the protocol of restart for the sex work activity. UTSOPI received 100.000 EUR during the 1st wave from the government, city of Schaerbeek and philanthropic Belgian organization (King Baudoin foundation) covering salaries and direct help to sex workers and managed to initiate conversations on the federal level about sex work decriminalisation.

France: ACCEPTESS-T

ACCEPTESS-T is a Paris-based community organisation ran by migrant, trans sex workers of colour. The organisation had already prepared an emergency plan to address the crisis even before the government announced the lockdown and other measures.

Within the FAST emergency initiative, more than 100.000 EUR were collected from crowdfunding, which was distributed to the trans community to cover their debts incurring mainly from financing their accommodation, with a focus on those facing multiple discriminations whether they are migrants or sex workers. The FAST crew also tried to negotiate with landlords on lowering rental prices. As a result of the organisation's advocacy efforts, the Paris City Hall also contributed financially to the program.

Norway: PION

PION, the sex worker-led community group together with LGBTIQ and other rights-based organisations formed a coalition demanding social benefits for those not entitled, as a COVID-19 preventive measure under the infectious diseases act. The campaign resulted in widespread media attention. The organisation furthermore raised awareness on sex workers being barred from entering the European Union in their deportation decisions, with the reasoning that they present a health risk.

UK: English Collective of Prostitutes and Umbrella Lane

The English Collective of Prostitutes launched a public campaign to demand that the government make immediate, easy to access emergency payments available to sex workers in crisis along with worker status and an immediate moratorium on raids, arrests, and prosecutions of sex workers.¹⁸ ECP mobilised its national network to raise these demands, resulting in thousands of people lobbying their own MPs. This led to key MPs submitting questions to the government with ECP demands for emergency payments and other resources for sex workers during the national crisis, expunging criminal records and the potential merits of “decriminalising sex work and introducing a moratorium on raids, arrests and prosecutions during that outbreak”.

ECP furthermore joined the Global Women’s Strike’s campaign for the introduction of a care income. It was a particularly important advocacy step at the time of a pandemic because caring, the majority of which is provided by women, was more visible as essential to everyone’s survival.

In Scotland, the government addressed sex workers’ desperate situations by announcing a £60,000 fund. While Umbrella Lane, a sex worker-led group was excluded from the scheme, the Encompass Network, which includes nine organisations involved in sex worker support and defines prostitution as violence against women and campaigns for client

criminalisation, was included in the funding. Later on in September 2020, the Scottish Government opened up the ‘Equally Safe’ consultation to the public, which closed on 10 December 2020. It is aimed at “challenging men’s demand for prostitution, working to reduce the harms associated with prostitution and helping women to exit”. This client-criminalisation approach indicated an ideological alignment with the Swedish Model for regulating sex work. Activists of Umbrella Lane launched a counter-campaign with the hashtag “#notequalnotsafe”.

18. <https://prostitutescollective.net/action-alert-demand-support-not-criminalisation-for-sex-workers/>

Recommendations

As sex workers live on the economic margins, they have rarely benefitted from the pandemic response and recovery plans that countries rolled out. Furthermore, as evidenced by the financial crisis in 2008, many people will turn to sex work to make a livelihood in the months and years following the end of confinement periods, which will result in lower rates, increased vulnerability, and potentially increased exploitation. The following recommendations of social and economic measures need to be implemented in order to protect sex workers, along with other informal workers, from the detrimental effects of the current crisis.

- * Countries need to move towards recognising sex work as work and the full decriminalisation of sex work. They should facilitate a comprehensive inquiry that assesses the living and working conditions and human rights of sex workers. The consequences of current legislation should be researched with the active involvement of sex workers and their organisations and with a view to the most marginalised sex workers, such as (undocumented) migrants, single parents, LGBTIQ, people of colour, and disabled workers.
- * Community-led organisations that are run by sex workers, providing direct support to the most affected, need to be included in decision-making and the distribution of emergency relief and COVID-19 social assistance recovery measures.
- * Increased funding must be allocated to deal with the surge of clients at anti-violence organisations and be distributed to those community-led organisations as well that are often left out of the response to gender-based violence, including initiatives of the sex worker, LGBTIQ, and (undocumented) migrant communities.
- * Social assistance should be introduced to cover unpaid or low-paid caregivers and the informal workforce, including sex workers, regardless of their migration status. Basic social protections should be extended to caregivers and informal workers as well. Direct support, such as health insurance, paid sick and maternity leave, pensions and unemployment benefits need to reach beyond formal employment and be accessible to people in all spheres of work.
- * Many sex workers are at risk of becoming homeless, having lost their primary source of income and due to the closure of workplaces, where many of them used to reside. A moratorium on evictions should be introduced and those who struggle with rent or mortgage payments should be supported, while emergency housing options must be allocated to those in urgent need, with a special view to those at risk of abuse or violence in their residence.
- * Policing should not single out vulnerable populations, such as

homeless people, sex workers, LGBTIQ people, migrants or people of colour, and people who use drugs and should not punish them for violating quarantine regulations. Police enforcement of confinement and isolation measures should not be used for identity and residence status checks. Instead, police should refer people to essential services and distribute protection equipment, such as sanitisers and masks.

- * All raids, arrests, prosecutions, and deportations must be immediately suspended and criminal records for prostitution-related offenses should be erased.
- * Temporary residence and work permits for individuals need to be automatically extended or issued in light of the current circumstances, to stop people from becoming undocumented or being stuck with uncertain status due to the pandemic. Ways for undocumented migrants to regularise their status on various grounds should also be supported in the longer-term, and developed and implemented in partnership with migrant community and support organisations. Pathways for migration for decent work, family reunification, study and protection need to be established, which promote the rights of migrants and their families.
- * States should provide non-citizens who are victims of violence, exploitation, abuse and/or trafficking with access to secure and unconditional residence permits that are not dependent on assisting with the prosecution of their perpetrators and lead to more stable status after

a reasonable period of regular residence.

- * Sexual and reproductive health care, HIV services, and transition-related care need to be maintained and reorganised, with more resources allocated to community-based organisations.

Annex: Timeline of COVID-19 restrictions

International organisations

France

Spain

UK

Germany

Austria

Ireland

Italy

JANUARY

5: WHO issued its first Disease Outbreak News report.

24: France informed WHO of three cases of coronavirus. These were the first confirmed cases in the WHO European region.

30: The WHO Director-General declared the coronavirus outbreak a public health emergency of international concern (PHEIC).

FEBRUARY

11: WHO announced that the disease caused by the coronavirus would be named COVID-19.

14: First death of a COVID patient reported outside of Asia in France.

22: Italy announced a new decree imposing the quarantine of more than 50,000 people from 11 municipalities in Northern Italy. All public events and sporting events were cancelled.

MARCH

4: Italy imposed the shutdown of all schools and universities nationwide.

7: Italy approved a decree to lock down Lombardy and 14 other provinces in Veneto, Emilia-Romagna, Piedmont and Marche.

9: First social distancing measure was introduced in Spain.

10: First school closures were introduced in Spain.

10: Mass gatherings with more than 1,000 participants were prohibited in Germany.

11: WHO made the assessment that COVID-19 could be characterised as a pandemic.

12: Ireland orders the closure of schools, colleges and public places.

13: The WHO Director-General said that Europe had become the epicentre of the pandemic with more reported cases and deaths than the rest of the world combined, apart from the People's Republic of China.

14: State of emergency and lockdown was announced in Spain.

16: Nationwide stay-at-home order was introduced in Austria.

17: Lockdown was introduced in France.

18: School closure was announced in the UK.

20: Closure of public venues was introduced in the UK.

22: Federal states and national government had jointly decided to implement a "contact ban" in Germany, limiting public gatherings and closing many businesses.

23: Stay-at-home order was announced in the UK.

30: Non-essential workers were announced to stay at home in Spain.

APRIL

4: WHO reported that over 1 million cases of COVID-19 had been confirmed worldwide, a more than tenfold increase in less than a month.

26: Children were allowed outside in Spain.

JUNE

1: Easing of restrictions introduced in the UK, with schools reopening.

2: Easing of restrictions introduced outside of Paris in France.

3: End of lockdown announced in Italy.

14: Cafes, restaurants and pubs were allowed to reopen in Paris, France.

21: State of emergency ended in Spain.

29: Ireland eased restrictions.

MAY

4: "Phase 2" starts in Italy, with travel between municipalities allowed only for work and health reasons, as well as for visits to relatives. The plan allowed the re-opening of manufacturing industries and construction sites, however schools and public venues stayed closed.

11: COVID-19 alert system entered into force in the UK.

18: In Italy, most businesses could reopen, and free movement was granted to all citizens within their region.

18-19: The 73rd World Health Assembly, the first ever to be held virtually, adopted a landmark resolution to bring the world together to fight the COVID-19 pandemic.

JULY

3: The European Centre for Disease Control and Prevention publishes its “Guidance on the provision of support for medically and socially vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic”, including information on sex workers.

6: WHO shared survey findings, showing that seventy-three countries have warned that they are at risk of stock-outs of antiretroviral (ARV) medicines as a result of the COVID-19 pandemic.

10: Lockdown ends in France, with restrictions on social distancing.

17: Catalonia forbids gatherings of more than 10 people.

21: Austria reintroduced face mask requirements inside supermarkets, banks and post offices.

24: Compulsory mask wearing in most indoor shops and public spaces introduced in the UK.

SEPTEMBER

15: The Higher Administrative Court of North Rhine-Westphalia overturned the ban on prostitution issued in the course of the pandemic; in Hamburg, Bremen and Schleswig-Holstein, sex workers could also return to work (business owners initiated).

AUGUST

7: Closing nightclubs, banning smoking outdoors if social distancing was not possible, and compulsory wearing of face masks in public was introduced in Spain.

OCTOBER

- 1:** Partial lockdown introduced in Madrid, Spain.
- 5:** Pubs, restaurants and cafes closed in Paris, France.
- 5:** WHO shared survey findings showing that the COVID-19 pandemic has disrupted or halted critical mental health services in 93% of the 130 countries covered.
- 7:** Compulsory use of protection masks outdoors was introduced in Italy.
- 10:** Curfews were introduced in France.
- 13:** Stricter rules on gatherings introduced in Italy.
- 21:** Ireland implements lockdown restrictions nationwide.
- 24:** Second national lockdown begins in France.
- 25:** The government of Spain reimposed a state of emergency across the country and introduced a national curfew.

NOVEMBER

- 11:** The European Commission, France, Spain, the Republic of Korea and the Bill & Melinda Gates Foundation pledged US\$360 million to COVAX, the Vaccines Pillar of the Access to COVID-19 (ACT) Accelerator, at the Paris Peace Forum.

DECEMBER

- 16:** Germany entered a hard lockdown, closing schools and non-essential businesses.
- 19:** It was announced that a new “tier four” measure would be applied to London, Kent, Essex, Bedfordshire and Hertfordshire, to try to control the spread of a new variant of the virus with higher virulence. The majority of the EU closed its borders to people entering from the UK.
- 26:** Austria introduced another lockdown.

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