

# Advocating for Intersectional Sex Worker Representation In Academia

By Veronica Mullins

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The lives of sex workers and the obstacles they face are starkly unexplored in academic literature. Contrary to past connotations of sex work involving only prostitution, the digital age has inspired countless outlets for people to make money by selling their time, images, videos, or by webcamming (Amir, 2020). The normalization of sex work in society has drawn judgement, particularly in the way academia utilizes a dichotomy between an educated, modest, professional woman and a sex worker (Taylor, 2015). These ideas are outdated and offensive and perpetuate violence against sex workers as they face the threat of being exposed, blackmailed, and fired from positions if employers find out they engage in sex work (Stranger, 2020). Additionally, a large composition of sex workers include Black LGBTQ people, representing some of the most marginalized groups in society. My intention is to amplify the voices of these communities to raise awareness of racial inequalities, lack of resources, and housing hardship they face in both the LGBTQ community and academia for greater systematic change. I believe empathetic research on issues of marginalization will bring attention to the need for resources and will contribute to eliminating the existing negative stereotypes around sex work as a whole.

During my time as a student researcher at a local LGBTQ community center in Las Vegas, Nevada, I interviewed several sex workers that were willing to share their experiences and recommendations to improve the services they were receiving. Upon introducing myself as a researcher, I noticed an immediate disconnect and sense of distrust between me and the interviewees. In academia, it is rare that I am able to disclose my identity as a woman who is knowledgeable about the sex industry without fear of ridicule by my peers. I spoke with them about my experience of being open about my identity and facing judgement from male colleagues who told me that, in order to be taken seriously, I should distance myself from my friends who are strippers, camera models, and sex workers and present modestly on my personal social media. In my personal experience, topics such as sex work are deemed taboo in academia. I have been advised to distance myself from any image which does not portray the idea of professionalism according to these biased terms. Sharing these experiences of my own discrimination regarding sex work and misogyny bridged the gap between me and the clients, and allowed us to find common ground in discussions around misogyny, unsafe sex work conditions, and potential solutions to gaps in community center support. While this type of research was academically informal, holding space for marginalized communities to share their thoughts and feelings was essential in collecting sensitive data and ensuring they were met with respect and empathy. I believe research with sex working communities should be conducted with

an emphasis on empathy for their hardship, sensitivity to their race, and with the intention of amplifying their voices to bring them justice.

I interviewed 10 individuals who identified as Black, transgender women. Three of the clients shared that they began engaging in sex work as a means of survival, some starting as young as 16 years old. They spoke to me about how engaging in street-based sex work at a young age was an exploitative experience and how they sought to help younger girls in the same position. In America, Black cisgender and transgender girls and women from who come from poverty are more likely to be exploited via sex trafficking, exposing them to violence from police and potential drug use (Sankofa, 2016).

In Las Vegas, Nevada, 150 to 200 minors, some as young as 11, are arrested every year and placed into the juvenile justice system for prostitution-related charges regardless of the fact that they are below the age of consent (Kennedy, 2014). Of this population, over 60% of the girls arrested are African American, even though only 12% of the Clark County population is composed of African American individuals (Kennedy et al., 2014). The disproportionate number of arrested Black child victims not only raises concern for the fact that children are criminalized for being victims of sexual activities which they cannot consent to, but also highlights the need to address the issue from an intersectional standpoint with sensitivity to the victim's race. The lines between sex work and sexual exploitation often overlap — some believe the solution is to abolish the sex industry altogether instead of dismantling aspects which contribute to exploitation such as poverty, racial segregation, stigma, and limited access to resources (Sankofa, 2016). This idea is opposite of what the women I spoke with defined as effective solutions to combat systematic exploitation.

One of the women I spoke with ran a program which taught life skills to young women and girls, most of whom were Black and engaged in street-based sex work in order to access expanded choices in work options. The program provided advice regarding finances, career options, education, and personal aspects. I sat in on a meeting and appreciated how the intention was never to discourage those from engaging in sex work by choice, but to equip the individuals with an expansive array of life skills and provide unconditional support. This type of community support allows for Black women to hold space for their healing in a supportive, respectful, and empowering environment.

Another way the community can provide support is to establish trauma-informed outreach in areas that are convenient for sex workers. There is currently no attempt to reach out to these communities by the general community center. Outreach team members could provide self-care kits with personal items such as soap, toothbrushes, and other personal hygiene items in addition to harm reduction kits to establish trust. Additionally, resource sheets with hotline numbers for shelters, case management, and crisis intervention could all be of benefit to these individuals.

Given that the justice system criminalizes both those that engage in sex work by choice and those who are trafficked, it is crucial to compose a local team of highly trained individuals to establish a trusted connection with this vulnerable community. The clients I interviewed reported that there is a strong network of women who work together in the same parts of town and mutually look out for one another. However, when the local center relocated to a different part of town, this local network was disrupted. One client at the new center remarked, "I do not see anyone like me here or anyone who understands what I go through." This statement reflects the disconnect between sex workers and the rest of the community and highlights the need for the outreach team to be composed of individuals (1) with extensive knowledge of the sex industry

who are (2) able to represent the communities which they serve. Building a solid foundation of trust is fundamental to open communication between sex workers and those who can provide resources. Community centers should consider taking the time to prioritize conversations with sex workers to accommodate spaces, resources, and outreach where these individuals can feel a part of the community and be aware of services they offer.

Sex work is mentally, physically, and emotionally taxing. Health issues are one of the biggest stressors for individuals of the LGBTQ community and street sex workers often put their health at risk for survival (Hafeez et al., 2017). In particular, street sex working women face unique obstacles in obtaining birth control and contraception in addition to being at greater risk for drug dependency and infections in comparison to brothel workers (Harcourt et al., 2007). Providing appropriate and accessible health services is essential to their safety and promotes the overall wellness of the community at large (Mulé et al., 2009). The local LGBTQ center where I conducted interviews offers a healthcare clinic which provides free same-day HIV, STD, and STI testing to the general public. Those who test positive for HIV are provided with pre-exposure prophylaxis (PrEP) medication and rapid initiation of antiretroviral therapy. Sex worker clients I spoke with reflected that this clinic was vital to keeping them healthy and in control of their bodies, but that it lacked sex worker-specific resources. Some of these missing resources included professionals who could administer general health exams, prescribe birth control and hormonal medications, and therapists who could provide transgender-specific counseling.

Additionally, many local centers provide their clients with harm reduction supplies such as Trac-B machines (used for needle exchange) and Naloxone (for opioid overdose reversal) free of charge. Local centers should update their Trac-B machines with sex worker specific harm reduction kits. These sex worker kits should include emergency contraceptives, condoms, drink testers for common date rape drugs, and resource lists. This service would not only be of great use to the community but would help to establish a point of contact with sex workers and local centers. With a need to visit the center, these individuals also may choose to utilize potentially beneficial services such as mental health counseling and group therapy sessions. Providing the appropriate resources to this community honors their right to safety and empowers them to make decisions for themselves and their health.

Sex workers often face financial hardship leading to housing instability. Some individuals are forced to stay in unsafe situations with an abusive partner to avoid homelessness or violence on the street. Clients I interviewed stated that partners had threatened to expose their sex work or gender identity by 'outing' them to employers, family, or to the public on social media. The discrimination sex workers and transgender individuals face exists both in their interpersonal relationships as well as in many community centers. Discrimination often prevents individuals from attaining support seeking services in the community. Many shelters deny homeless transgender individuals housing based on their gender identity or house them inappropriately, which can create an unsafe and inaccessible environment for transgender people (Transequality). Interviewees recalled the common experience of being denied access to a men's shelter because they presented too feminine and also being denied access to a women's shelter because they presented too masculine. When they were unable to find shelter locally, some exchanged sex for a place to stay.

Social service and homeless centers should update their non-discrimination policies to specifically address the transgender community. Additionally, various state laws could designate explicit protections for them in local centers (Canavan & Ledger, 2004). The implementation of

these measures requires support from elected officials and community partners. With widespread knowledge of these issues in society and academia, LGBTQ members and allies can apply pressure for transgender rights in shelters and advocate for equal housing rights.

Another client I spoke with also stated how they would like to hold more positions of power, specifically at the local LGBTQ center. However, when they suggested changes to the board of representatives including some of the proposed solutions previously discussed in this piece, they were met with immediate rejection. A Black transgender woman interviewee explained that she has made efforts to join the board and apply to positions of power to help represent this population but has not been accepted by the committee of majority white, gay men.

When discussing issues of the sex work and the Black transgender community, it is important to let these individuals have a unified voice, amplified but not overshadowed by the LGB community. The transgender clients I spoke with shared frustrations of having their struggles overlooked, neglected, or grouped into gay and lesbian experiences for the sake of inclusivity. They felt that lesbian, gay, and bisexual needs were met before theirs and that community events focused around these group, to the exclusion of important events such as “Trans Pride Week.” This erasure of the transgender community exists in society and research as well. For example, intimate partner violence regarding transgender people has been immensely unexplored in literature, with most of the emphasis on lesbian and gay experiences (Girshick, 2002).

Gaps in literature and improper grouping of marginalized groups can lead to failures in assisting vulnerable communities and providing appropriate resources such as transgender housing protections, sex worker harm reduction kits, and expanded outreach. It is imperative for the academic community to approach its research using an intersectional lens to differentially recognize the experiences of these community members and provide appropriate, specific services. I believe by thoughtfully interviewing these populations and producing comprehensive needs assessments to local shelters and community partners, the issue of housing insecurity can help reform the existing policies to include severely marginalized populations.

The underrepresentation of sex workers in the academic literature, specifically those who are Black and transgender, directly impacts the availability of health, financial, and crisis-related resources available to individuals who are suffering. Additionally, the existing objectification of sex workers insinuates violence against community members who exist in every facet of society, including academia. I believe research on sex workers and Black, transgender populations will bring awareness and solutions to the issues discussed above. I am immensely grateful for the trust bestowed upon me to accurately portray the clients’ hardship to the academic community.

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