

How can we address the health barriers among im/migrant sex workers in Metro Vancouver?



What did we find?

Im/migrant sex workers are

2.5x

more likely to experience client condom refusal¹

2x

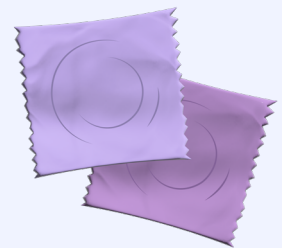
more likely to have gaps in healthcare insurance coverage²

42%

less likely to report violence³

These barriers are shaped by

- Racialized policing, stigma, discrimination, xenophobia, and language barriers.⁴
- Criminalization of sex work. Third-party criminalization undermines third-party supports for occupational health and safety (e.g., accessing condoms, client screening) community-based sex worker support.^{5,6}
- Policing and workplace inspections. Worrying about inspections undermines access to healthcare.⁷ Punitive and discriminatory policing deters violence reporting.⁸



What do we recommend?

- Decriminalize sex work, including im/migrant sex work
- End racialized workplace inspections
- Scale-up culturally inclusive anti-stigma efforts to support im/migrant sex workers' access to health equity
- Promote culturally & linguistically inclusive community outreach for condom distribution & sexual health services

Who are we?

AESHA (An Evaluation of Sex Workers' Health Access) is a long-standing, community-based research housed at the Centre for Gender & Sexual Health Equity at UBC in Vancouver, B.C. AESHA includes > 900 sex workers across outdoor and indoor venues, with Indigenous, racialized and im/migrant sex workers overrepresented among participants.



¹McBride, B., Shannon, K., Braschel, M., Mo, M., & Goldenberg, S. M. (2021). Lack of full citizenship rights linked to heightened client condom refusal among im/migrant sex workers in Metro Vancouver (2010–2018). *Global Public Health, 16*(5), 664–678.

²Goldenberg, S. et al. (forthcoming). Gaps In Health Coverage for Racialized Im/Migrant Sex Workers In Metro Vancouver: Findings of a Community-Based Cohort Study (2014-2021).

³McBride, B., Shannon, K., Bingham, B., Braschel, M., Strathdee, S., & Goldenberg, S. M. (2020). Underreporting of violence to police among women sex workers in Canada: amplified inequities for im/migrant and in-call workers prior to and following end-demand legislation. *Health and Human Rights, 22*(2), 257.

⁴Pearson, J., Machat, S., McDermid, J., Goldenberg, S. M., & Krüsi, A. (2023). An Evaluation of Indoor Sex Workers' Sexual Health Access in Metro Vancouver: Applying an Occupational Health & Safety Lens in the Context of Criminalization. *International Journal of Environmental Research and Public Health, 20*(3), Article 3.

⁵McBride, B., Goldenberg, S. M., Murphy, A., Wu, S., Braschel, M., Krüsi, A., & Shannon, K. (2019). Third Parties (Venue Owners, Managers, Security, etc.) and Access to Occupational Health and Safety Among Sex Workers in a Canadian Setting: 2010–2016. *American Journal of Public Health, 109*(5), 792–798.

⁶McBride, B., Shannon, K., Murphy, A., Wu, S., Erickson, M., Goldenberg, S. M., & Krüsi, A. (2021). Harms of third party criminalisation under end-demand legislation: undermining sex workers' safety and rights. *Culture, Health & Sexuality, 23*(9), 1165–1181.

⁷McBride, B., Shannon, K., Duff, P., Mo, M., Braschel, M., & Goldenberg, S. M. (2019). Harms of Workplace Inspections for Im/Migrant Sex Workers in In-Call Establishments: Enhanced Barriers to Health Access in a Canadian Setting. *Journal of Immigrant and Minority Health, 21*(6), 1290–1299.

⁸McBride, B., Goldenberg, S. M., Murphy, A., Wu, S., Mo, M., Shannon, K., & Krüsi, A. (2022). Protection or police harassment? Impacts of punitive policing, discrimination, and racial profiling under end-demand laws among im/migrant sex workers in Metro Vancouver. *SSM-Qualitative Research in Health, 2*, 100048.