I am a UKCP accredited psychotherapist and have worked in NHS Mental Health Services for 37 years, including 12 years as an inner city community psychiatric nurse and a clinical specialist nurse in an addiction team. I continue to work as a psychotherapist in private practice. I am offering the parliamentary committee a personal view of my experience treating sex workers from a psychological and psychotherapeutic perspective.

During my career I have worked therapeutically and clinically with a number of sex workers. What has become evident to me is that all of them have suffered repeated trauma throughout their lives. Most grew up in communities and families where they were subjected to abuse in a variety of ways including neglect, psychological abuse, violence, sexual abuse and denigration. They have often grown up in dysfunctional families and in deprived circumstances. Where this is not the case there has been early relational difficulty and often early and traumatic bereavement. All have felt unsupported to address these issues and have used some form of mind altering substance, be that prescription medicine, alcohol or street drugs, to manage their distress.

Making the decision to sell sex was never simple or clear, many, if not all, have acknowledged that they had already come to a point of being unable to make “good” decisions by this stage in their lives. Some were trafficked and prostituted under the age of consent and others were groomed, both as children and adults, and had become enmeshed in the sex industry before they had been able to identify what they were becoming involved in doing.

Once involved in the sex industry all became exploited and controlled, to a greater or lesser extent, by brokers and pimps and often by drug dealers. This further reduced their ability to make decisions in their own interests and eroded their belief that they had control over their own lives. Exiting the sex industry has always, in my experience, been a final attempt to survive the situation they found themselves in and is accompanied by a high level of fear and often despair. In addition the stigma of having been criminalised rather than supported and the contempt in which they experience themselves held makes approaching services for help, particularly when that stigmatisation is played out in the very services that should be supporting their attempts to extricate themselves from this damaging situation.

It is evident to me that the first step in supporting sex workers to escape the quagmire in which they find themselves would be to remove the stigma of criminalising the selling of sex. The evidence, as I understand it, supports an approach which criminalises the purchase of sex. This with a determined campaign to prosecute the individuals who exploit sex workers would be a first step in supporting the individuals who have been made vulnerable to this form of exploitation. Further a change in the law would be a first step in providing appropriate and accessible support for those people who have reached the point of wishing to exit the sex industry and would enable the co-ordination of mental health, addiction and physical health care as they rebuild lives in the wider community.