Health Monitoring and Evaluation Framework for the Decriminalisation of Sex Work

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2 Introduction

2.1 Background

In February 2022, the Victorian Parliament passed the Sex Work Decriminalisation Bill 2021 that will lead to the staged repeal of the Sex Work Act 1994. This will ensure that most forms of sex work are regulated within existing frameworks.

Research shows that when sex work is decriminalised, it has many positive effects on sex workers' wellbeing. For example, in New South Wales, where sex work was decriminalised in 1995, there have been fewer cases of HIV/STI acquisition, more condom use, better access to healthcare, outreach services, and police protection, and improved occupational safety support for sex workers (Kim 2015; Macioti, Power & Bourne, 2022). In Victoria, sex workers and key stakeholders (including community leaders and service providers) believe decriminalisation is a necessary and positive step to improving the health, security and rights of sex workers (Macioti et al. 2022). The gains of decriminalisation can be further supported by investing in healthcare, social services and outreach for sex workers (Macioti et al. 2022) and work to reduce stigma which often persists despite decriminalisation (Macioti, Power & Bourne 2022).

In Australia, sex workers have relatively low rates of HIV and sexually transmitted infections (STIs) (Australian Department of Health 2018a, 2018b) - including in Victoria where sex workers use condoms and get tested regularly (Lee et al. 2005; Macioti et al. 2022; Zappulla et al. 2020). However, like in other countries (Platt et al. 2018), the wellbeing of sex workers in Australia is impacted by stigma, discrimination and criminalisation – which can negatively shape the quality of healthcare sex workers receive, increase their risks of experiencing violence, compromise occupational health and safety, and discourage crime-reporting to police due to mistrust or worry about being judged or punished (Baratosy & Wendt 2017; Macioti et al. 2022; Stardust et al. 2021; Treloar et al. 2021).

2.2 Decriminalisation of sex work in Victoria

The decriminalisation of sex work in Victoria occurs in two stages to allow time to transition to a different model of regulation (see Appendix A).

The department has funded several evidence-based initiatives to support sex worker health and wellbeing, including:

- sex worker peer support, outreach, education and counselling
- capacity building for primary care and other health practitioners
- guidance on best practice methods for infection prevention and control
- evaluation and monitoring of the health impacts of the reforms.

This report outlines the approach to evaluating and monitoring the health impacts of these reforms.

3 Evaluation approach

The Victorian Department of Health has commissioned the Centre for Social Research in Health (CSRH) at UNSW, Sydney to develop the Health Monitoring and Evaluation Framework for the Decriminalisation of Sex Work. The evaluation commenced in June 2022 and runs until June 2027. This evaluation plan has been developed in consultation with The Victorian Department of Health, Scarlet Alliance, Vixen and other stakeholder organisations.

3.1 Evaluation questions

The evaluation has been designed to address the key evaluation questions as determined by the Department of Health:

1. What are the impacts of decriminalisation on sex worker health and well-being over time?
2. What are the impacts of associated health initiatives, including peer education and peer-led service provision, on sex worker health and well-being over time?
3. What are the continuing gaps in service provision and access?
4. What can be learnt from decriminalisation in Victoria? What worked, what didn't work, and why?

3.2 Evaluation methodology

The evaluation questions will be addressed by gathering data over three rounds using realist evaluation principles. Realist evaluation is used to inform the thinking of policy makers, practitioners, program participants and the public by asking 'what works for whom, in what contexts, in what respects and how' (Pawson & Tilley 1997). This methodology is based on a theory of change and evaluation logic which outlines clear hypotheses about how, and for whom, programs might work.

3.3 Consultation phase

The evaluation methodology (including recruitment strategies and data collection instruments) was developed through extensive consultation with a range of stakeholder organisations identified by the Department of Health. This collaborative approach ensures that the evaluation is grounded in the priorities and experiences of the sex work community.

Fourteen organisations were invited to participate in the consultation phase. Ten organisations and 13 individuals participated in consultations, which were recorded and summarised by the evaluation team (see Appendix B). The results were used to inform the development of the theory of change and evaluation logic.

3.4 Peer research capacity building

The evaluation includes a capacity building program of activities to meaningfully include peer researchers with lived experience of sex work in the evaluation research. This includes recruiting and supporting bilingual sex workers already conducting outreach activities to sex workers from migrant and culturally and linguistically diverse backgrounds, with priority populations identified as Mandarin, Thai, Korean and Vietnamese-speaking sex workers. Peer researchers are

employed and paid by UNSW to: assist with recruitment of sex workers from diverse backgrounds to participate in in-depth interviews and/or complete online surveys; conduct interviews in language where needed; assist in analysis and participate in findings workshops; and opt in for authorship opportunities where appropriate. Peer researchers will be supported throughout the life of the project, according to their availability, capacity, and interest.

4 Theory of change

A theory of change describes the anticipated benefits of an intervention, the mechanisms and influences that will drive these benefits, and the conditions in place that are needed for them to occur. The theory of change for this evaluation links decriminalisation effects with expected short- and long-term outcomes for sex worker health and wellbeing (see Appendix C).

The theory of change was developed in collaboration with the Victorian Department of Health following the consultation phase.

The theory of change for decriminalisation benefits to health and wellbeing is that in the short term, the Department of Health initiatives and changes to legislation will:

- allow sex workers to participate in the reform processes and in their working conditions, and increase information and access to health services; and,
- over time, in policy implementation and the provision of high-quality care in inclusive and accessible settings will reduce barriers to health services, and reduce stigma and discrimination against sex workers.

5 Data collection methods

Three types of data will be used (see Appendix D):

- conducting online surveys to collect quantitative data;
- conducting in-depth interviews to collect qualitative data; and,
- analysing existing data sets.

The study will involve three rounds of data collection between 2022 and 2027 to measure and compare data and results over time and throughout both stages of the decriminalisation process (see section 7):

- Wave 1 data collection (2023) – Baseline impacts of decriminalisation
- Wave 2 data collection (2025) – Immediate term impacts of decriminalisation
- Wave 3 data collection (2027) – Longer term impacts of decriminalisation

Methods were developed and refined in collaboration with the Victorian Department of Health and Scarlet Alliance/Vixen.

Ethics approval to conduct this evaluation was provided by The Alfred Hospital Ethics Committee (88873) on 31 October 2002 (modification approval to refine recruitment strategies and the survey instrument was provided 23 March 2023).

5.1 Online Surveys

Surveys are the most appropriate data collection method for quantitative data to measure and monitor sex workers' health and wellbeing over five years. Surveys will be administered online to ensure accessibility, privacy, and data security.

Eligibility: Sex workers will need to meet the following eligibility to participate in online surveys:

- 18 years or older
- Identifies as a sex worker
- Has engaged in sex work in Victoria at any time during or since 2021.

Recruitment and consent: The strategies to advertise the online survey to sex workers include:

- An online flyer for distribution through Vixen and Scarlet Alliance networks.
- Physical flyers for distribution by outreach workers from both RhED and Vixen, including at Hustling2Health – a dedicated drop-in space for street-based sex workers.
- An advert in RhED magazine.
- Physical and online flyers to be distributed to stakeholder organisations and services, such as Melbourne Sexual Health Centre, Harm Reduction Victoria, Living Positive Victoria, etc.
- The distribution of physical flyers by peer sex workers/peer researchers at sex industry workplaces, such as flyer drops in brothels and other workplaces.
- Advertising the survey on websites/apps identified by peer workers/peer researchers as being relevant to or frequented by people in the sex worker community (e.g., Locanto, Escort and Babes, Grindr).

The online survey is available on a dedicated website that potential participants will be directed to by study flyers and advertisements. Before proceeding with the survey, potential participants will read a Participant Information Statement, proceed through an online process of consent and need to answer screening questions (which will exit users who do not meet the inclusion criteria). Once consent and eligibility has been established, participants may begin the survey.

The survey will take approximately 15 and 30 minutes and will be anonymous. Participants receive $20 for participation to acknowledge their time and the costs of participating, and to support participation beyond those who are altruistically motivated. The survey will only be administered in English; however, bilingual peer researchers who administer the survey during their outreach activities may be able to provide informal translation in language, and assist in entering responses in English.

Survey questions will be designed to collect primarily quantitative data about participants:

- Demographics
- Work history and experiences

- General health
- Access to STI testing and contraception
- Access to and use of health (or other) services
- Experiences of stigma or discrimination

Each survey round will close once the target sample of 400 is reached. This sample size was determined using G*Power (a program to compute statistical power analyses), which calculated a required sample of 1,188 over the three time points (i.e., 396 in each survey wave) (Fall et al. 2007). A sample size of 400 in each survey wave will also enable relatively small effect sizes (0.25) to be detected in analyses to compare mean scale scores between survey waves.

5.2 In-Depth Interviews

Qualitative interviews are the most appropriate method for collecting nuanced and subjective data on the experiences of decriminalisation, and the contexts in which any benefits of decriminalisation occur. Interviews will be conducted face-to-face, by telephone or via video conference (e.g., Zoom, Microsoft Teams) as the participants' preferences. The interviewer will be a UNSW researcher (over video conference or telephone only) or by a peer researcher (by telephone, video conference or face-to-face). Face-to-face interviews will be conducted in a private room at the premises of a collaborating organisation (Vixen or RhED) and with a peer researcher to ensure a safe and supportive environment.

Eligibility: Sex workers will need to meet the following eligibility to participate in an in-depth interview:

- 18 years or older
- Identifies as a sex worker
- Has engaged in sex work in Victoria at any time during or since 2021.

Recruitment and consent: Participants for interviews will be initially recruited through outreach by workers at relevant stakeholder organisations and services and through invitations sent out through organisational email membership lists. Information about the study will also be shared on stakeholder organisations' social media and email contact lists as per letters of support. Participants who complete a qualitative interview will also be asked by the research team to share information about the study within their own informal sex worker networks (such as to peers and friends) as a method of snowball recruitment (Noy 2008). Advertising to recruit study participants may also be placed on websites identified by peer workers and researchers as being relevant to or frequented by people in sex worker communities (e.g., Locanto, Escorts and Babes, Grindr).

Upon expressing interest in the study, potential participants will be sent a participant Information and consent form (PISCF) information about the study and about the interview process. If they meet the inclusion criteria and express a desire to partake in an interview, a member of the research team will coordinate with the participant to schedule an interview format, date and time.

Consent can be provided either by filling out the consent form attached to the PISCF (and providing it to researchers at a face-to-face interview or via email if interview by phone/video conference) and/or by going through a verbal consent process if doing a telephone or video conference interview. While written consent is preferred, we acknowledge that verbal consent may be preferable for some participants. Interviews will take approximately 30 and 45 minutes. Participants will receive $40 for participation to acknowledge their time and the costs of participating, and to support participation beyond those who are altruistically motivated. Interviews will be conducted by a UNSW researcher in English; however, bilingual peer researchers may be able to conduct interviews in languages other than English.

Interviews will cover various topics including:

- Time and experiences doing sex work in Victoria and elsewhere.
- Understandings of sex work regulations in Victoria and the recent changes through the process of decriminalisation.
- Health and wellbeing, including the impact of sex work laws, regulations and decriminalisation on health and wellbeing.
- Access to and use of health services and resources – including STI testing behaviours and barriers to health care.
- The impact of stigma and discrimination on various aspects of sex workers' lives, including health and wellbeing.

A sample size of 20 participants will be sought for each round of interviews, with the overall sample size across all three rounds of interviewing being 60.

5.3 Existing data sets

Existing data sets will be accessed and obtained for analysis alongside analysis of data collected through online surveys and interviews. Three sources of data will be used to triangulate findings across all data collection methods (see Appendix C).

6 Evaluation results and reporting

The final evaluation report will be completed in June 2027 and include a summary report for community use. The draft and final reports will include an executive summary, evaluation background information, evidence on best practice and standards, aims and objectives of the evaluation, evaluation methodology, presentation of qualitative and quantitative analysis and results, summary of key findings and conclusions, policy recommendations and options for development.

Community-facing reports will be provided to the sex worker and community organisations to circulate through their networks.

7 Evaluation timeline

Milestone Description/Deliverables	Proposed Timelines
Phase 1: Project initiation, evaluation design and planning	**June 2022 – June 2023**
Project inception, ethics	June – November 2022
Develop evaluation and monitoring framework including theory of change via consultation with: • Victorian Department of Health • Relevant stakeholders	July – August 2022
Rapid evidence assessment via consultation with: • Victorian Department of Health • Melbourne Sexual Health Clinic • Burnet Institute	August – November 2022
Development of theory of change and logic model	November 2022 – March 2023
Ethics application approval	March 2023
Finalisation of evaluation plan	June 2023
Phase 2: Data acquisition, primary data collection, and analysis	**November 2022–July 2023**
Round 1 data collection and analysis	
Develop, implement and analyse surveys of sex workers	September 2022-July 2023
Develop, implement and analyse in-depth interviews of sex workers	November 2022–April 2023
Report on first wave of qualitative data collection	June 2023
Report on first wave of quantitative data collection	December 2023
Progress report (internal report synthesising data)	June 2024
Progress report (internal report on modifications to data collection instruments)	December 2024
Round 2 data collection and analysis	**February 2025–April 2025**
Report on second wave of data collection (internal report synthesising data)	June 2025
Progress report (internal report on modifications to data collection instruments)	December 2026
Round 3 data collection and analysis	**February 2027–April 2027**
Phase 3: Synthesis of findings and reporting	**April 2027 – June 2027**
Analysis of existing data sets	April 2027
Final report, incorporating findings from W1, W2 and W3 data	**June 2027**

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9 Appendix A – Decriminalisation timeframe

First stage of reforms May 2022 – December 2023

First tranche of decriminalisation as per *Sex Work Decriminalisation Act 2022* (Vic)

Repeal of certain offences in the *Sex Work Act 1994*

Key reforms include:

- anti-discrimination protections for sex workers.
- an end to mandatory 3-monthly STI testing for sex workers.
- repeal of offences for:
  - working as a sex worker with an STI.
  - permitting a sex worker to work with an STI.
  - engaging in sexual services without the use of a condom.
- end to registry for independent sex workers.

Key domains of illegality include:

- Conducting 'in calls' without a planning permit
- Conducting work with two or more sex workers without a sex work service provider license
- Street-based sex work near schools, day care centres and places of worship at designated days and times

Second stage of reforms December 2023

Second tranche of decriminalisation as per *Sex Work Decriminalisation Act 2022* (Vic)

Sex work will be decriminalised in most circumstances.

Key reforms include:

- full repeal of the *Sex Work Act 1994*
- end to the licensing system for sex work service providers
- amendment of the Planning Provisions to treat sex services businesses like other businesses and allow sex work to be carried out from home.

WorkSafe will continue to regulate occupational health and safety in the sex industry.

Key domains of illegality include:

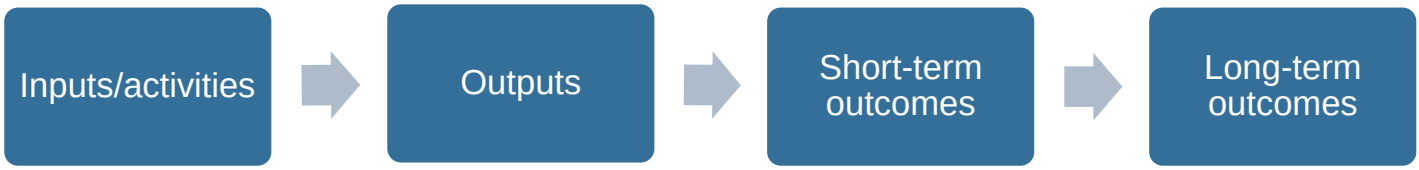
- Street-based sex work near schools, day care centres and places of worship at designated days and times

10 Appendix B –List of stakeholder organisations

The following is a list of all stakeholder organisations who participated in the consultation phase of the evaluation:

- The Burnet Institute
- Harm Reduction Victoria
- Living Positive Victoria
- Medically Safe Injecting Room
- Melbourne Sexual Health Clinic
- Resourcing health & Education (RhED)
- Scarlet Alliance
- Victorian Department of Health
- Vixen
- Victorian HIV and Hepatitis Integrated Training and Learning

11 Appendix C –Theory of change



Inputs/activities	Outputs	Short-term outcomes	Long-term outcomes
Process of legislative reform on decriminalisation. Victoria's voluntary peer-led sex worker organisation funded to support decriminalisation. Existing services to support sex workers in Victoria, including RhED and Pathways programs. Peer-led provision of targeted communications, support, crisis counselling and referral services for sex workers. STI and BBV prevention guidance, guidance for sex workers living with HIV and other DH guidance materials. Sex work sensitivity training for general practitioners, alcohol and other drugs (AoD) and mental health workers delivered by Victorian HIV and Hepatitis Integrated Training and Learning Program (VHHITAL) and Vixen Additional advocacy and engagement activities (to be noted as project progresses)	Decriminalisation achieved through legislative change. Sex workers are aware of services they can access to manage and improve their health and wellbeing. Sex workers are aware of their rights and responsibilities in a decriminalised environment. Sex workers have a voice in the reform process and can work with Government to develop relevant programs and policies.	Removal of two-tier system (between legally compliant v non-compliant work). Increased peer-based organisation engagement: • Social media presence • Web based resources • Counselling and referral pathways • Outreach and traditional engagement STI and BBV rates remain stable. Inclusive, high-quality care is delivered in primary care and community health settings to meet sex worker needs	Decreased experiences of stigma and discrimination Increased health service access and/or satisfaction Increased empowerment and agency among sex workers Increased community connection among sex workers STI and BBV rates remain stable.

12 Appendix D - Data collection instruments

12.1 Demographic data

These are the demographic data questions asked in online surveys and at conclusion of in-depth interviews.

1. How old are you?
    a. 18-25 years
    b. 26-35 years
    c. 36-45 years
    d. Over 45 years

2. How do you describe your gender? (Select all that apply)
    a. Woman
    b. Man
    c. Non-binary
    d. I use a different term (please state) _____
    e. Prefer not to answer

3. What sex were you assigned at birth? i.e. the legal sex listed on your original birth certificate
    a. Female
    b. Male
    c. Something else (please specify) _____
    d. Prefer not to answer

4. When you work as a sex worker, which gender(s) do you advertise as? (Select all that apply)
    a. Cis woman
    b. Cis man
    c. Trans woman
    d. Trans man
    e. Non-binary/gender fluid
    f. Other (please state) _____

5. Were you born with a variation of your sex characteristics (sometimes called ‘intersex’)?
    a. Yes
    b. No
    c. Not sure
    d. Prefer not to answer

6. How do you describe your sexuality?
    a. Lesbian
    b. Gay or homosexual
    c. Straight or heterosexual
    d. Bisexual
    e. Pansexual
    f. Queer
    g. I use a different term (please state) _____
    h. Prefer not to answer

7. Are you Aboriginal or Torres Strait Islander?
    a. No
    b. Yes, Aboriginal
    c. Yes, Torres Strait Islander
    d. Yes, Aboriginal and Torres Strait Islander

8. Where were you born?

a. Australia
b. Overseas (please specify) _____

9. If you were born overseas, what year did you arrive in Australia? _____

10. Do you speak a language other than English at home?
    a. No, English only
    b. Yes, I speak _____

11. In which state(s) have you ever worked as a sex worker? Please select all that apply.

	I currently work here	I have worked here before
Australian Capital Territory		
New South Wales		
Northern Territory		
Queensland		
South Australia		
Tasmania		
Victoria		
Western Australia		

12. What is the highest level of education you have completed?
    a. Up to Year 10 or equivalent
    b. High school Year 12 or equivalent (i.e., completed high school)
    c. Diploma / trade certificate or equivalent
    d. Undergraduate/postgraduate university degree or equivalent

13. What is your current relationship status?
    a. Single
    b. In relationship(s)
    c. De facto
    d. Married
    e. Other (please specify) _____

14. Do you have any children? (Select all that apply)
    a. No
    b. Yes, aged 0-17
    c. Yes, aged 18 and over
    d. Prefer not to answer

15. How long have you worked in the sex industry in Australia?
    a. Less than 1 year
    b. 1-2 years
    c. 3-5 years
    d. 6-10 years
    e. More than 10 years

16. What type of workplace do you currently work in? (Select all that apply)
    a. Brothel
    b. BDSM house
    c. Escort agency
    d. Private work (escort)
    e. Private work (in-call)
    f. Online
    g. Massage parlour
    h. Street-based
    i. Other (please specify) _____

12.2 Online survey

Baseline survey (May 2023)

Additional demographic question

1. Do you have any of the following disabilities, chronic illness, or neurodiversity?
    - Physical disability
    - Psychosocial disability (disability arising from mental health issues, e.g., depression, bipolar disorder, schizophrenia, anxiety disorder, obsessive-compulsive disorder, post-traumatic stress disorder)
    - Neurodiversity (e.g., autism, ADHD)
    - Intellectual disability
    - Other disability or illness (please specify) _____
    - None of the above
    - Prefer not to answer

Section 2: Your sex work

2. How long have you worked as a sex worker **in Victoria**?
    - Less than 1 year
    - 1-2 years
    - 3-5 years
    - 6-10 years
    - More than 10 years

3. What type of workplace/s have you ever worked in as a sex worker? (Select all that apply)

	I **currently** work here	I have worked here since May 2022	I worked here before May 2022
Brothel			
BDSM house			
Escort agency			
Private work (escort)			
Private work (in-call)			
Private work (BDSM)			
Online/content creation			
Massage parlour			
Street-based			
Porn company			
Strip club			
Other (please specify)			

4. Do you consider yourself to be:
    - A full-time sex worker
    - A part-time sex worker
    - An intermittent sex worker
    - Other (please specify) _____

Section 3: Decriminalisation of sex work in Victoria

In February 2022, the *Sex Work Decriminalisation Act 2022* was passed by the Victorian Parliament. Decriminalisation of sex work in Victoria will occur in two stages – the first stage commenced on 10 May 2022 and the second stage will commence on 1 December 2023.

5. Before today, how much had you heard about the decriminalisation of sex work in Victoria?

- Nothing
- Very little
- A fair amount
- A lot

6. Where have you accessed information about the decriminalisation of sex work? (Select all that apply)
   - I haven't accessed any information
   - Your workplace or employer
   - Word-of-mouth from other sex workers
   - Vixen online or print resources, including the Decrim Info Hub
   - Vixen outreach workers
   - RhED online or print resources
   - RhED outreach workers
   - Scarlet Alliance or Red Book (redbook.scarletalliance.org.au)
   - Sex Worker Health page on Health.vic website
   - Other Victorian government websites such as WorkSafe, CAV, or VEOHRC
   - Other [please describe] _____

7. Was information about decriminalisation available in your preferred language?
   - Yes
   - No
   - I don't know

8. If "No", what is your preferred language? _____

9. How well do you feel like you understand what the decriminalisation of sex work in Victoria will mean for you?
   - Very well
   - Fairly well
   - Unsure
   - Not very well
   - Not at all

10. Since 2019, how have the following changed overall?

	Decreased a lot	Decreased a little	No change	Increased a little	Increased a lot
Your use of condoms for oral sex					
Your use of condoms for anal or vaginal sex					
The number of clients you see					
Your income from sex work					

11. Have you changed any of the following because of COVID-19?
    - The services you offer
    - Where or how you work (e.g., in-call vs. out-call; brothel vs. street-based work)
    - Your use of condoms for oral sex
    - Your use of condoms for anal or vaginal sex
    - The number of clients you see
    - Your income from sex work
    - None of the above

12. Have you changed any of the following because of the announcement that sex work will be decriminalised in Victoria?
    - The services you offer
    - Where or how you work (e.g., in-call vs. out-call; brothel vs. street-based work)

- Your use of condoms for oral sex
- Your use of condoms for anal or vaginal sex
- The number of clients you see
- Your income from sex work
- None of the above

13. Since 2019, have you changed any of the following for any other reasons (i.e., not COVID-19 or decriminalisation)?
    - The services you offer
    - Where or how you work (e.g., in-call vs. out-call; brothel vs. street-based work)
    - Your use of condoms for oral sex
    - Your use of condoms for anal or vaginal sex
    - The number of clients you see
    - Your income from sex work
    - None of the above

14. How do you think decriminalisation of sex work in Victoria will affect your:

	Much better	A little better	No change / unsure	A little worse	Much worse
Working conditions					
Ability to earn a living					
Overall health and wellbeing					
Interactions with health services					
Personal relationships					
Standing in the community					
Interactions with police					
Future security					

15. Please answer the following in relation to your current workplace. If you have more than one workplace, please answer in relation to your main workplace.

	No, they never have	No, but they have in the past	Yes, they always have	Yes, but only recently	Not applicable
My workplace/employer provides plenty of free condoms					
My workplace/employer discourages the use of condoms for some services					
My workplace/employer provides information about STIs in a language I can read					
My manager/employer allows me to refuse a service if a client refuses to use a condom					
My manager/employer allows me to refuse a service if I suspect a client has an STI					
My workplace/employer requires a sexual health attendance certificate					

My workplace/employer provides adequate training about safer sex practices					

Section 5: Health and wellbeing

16. Thinking about your own life and personal circumstances, how satisfied are you with your life as a whole?

Not at all satisfied (0)	1	2	3	4	Neutral (5)	6	7	8	9	Completely satisfied (10)

17. In general, would you say that your **physical health** is:
    - Excellent
    - Very good
    - Good
    - Fair
    - Poor

18. In general, would you say that your **mental health** is:
    - Excellent
    - Very good
    - Good
    - Fair
    - Poor

19. How would you rate your current understanding of sexual health and safer sex practices?
    - Excellent
    - Very good
    - Good
    - Fair
    - Poor

20. In the past 12 months, how has your understanding of sexual health and safer sex practices changed?
    - My understanding has increased a lot
    - My understanding has increased a little
    - No change
    - My understanding has decreased

21. How satisfied are you with…?

	Not at all satisfied	1	2	3	4	Neutral	6	7	8	9	Completely satisfied
Your standard of living											
Your health											
What you are achieving in life											
Your personal relationships											
How safe you feel											
Feeling part of your community											
Your future security											
Your capacity for work											
The support you get from your friends											

The conditions of your living place											
Your access to health services											

22. In the past 4 weeks, about how often did you feel:

	None of the time	A little of the time	Some of the time	Most of the time	All of the time
Tired out for no good reason					
Nervous					
So nervous that nothing could calm you down					
Hopeless					
Restless or fidgety					
So restless you could not sit still					
Depressed					
That everything was an effort					
So sad that nothing could cheer you up					
Worthless					

Section 6: Health services

23. In the past 12 months, to what extent have you been able to access the health services you wanted in Victoria?
    - Always
    - Most of the time
    - Some of the time
    - Never

24. In the past 12 months, how often did you have difficulty accessing the following services?

	Never	Rarely	Sometimes	Often	Always	Have not tried to access
GP						
Mental health service						
Sexual health service						
AOD services						
Other health services (please specify)						

25. In the past 12 months, how often have the following stopped you from accessing a health service you thought you might benefit from?

	Never	Rarely	Sometimes	Often	Always
Lack of information					
Being unable to afford the fees					
No Medicare card					
Wait times were too long					
Not mentally well enough					

Afraid of being reported to police					
Afraid of being reported to immigration					
Service not accessible (e.g., no wheelchair ramps)					
Afraid of stigma or discrimination					
Service is too far away					
Afraid someone I know will see me there					
Service not open at times I can go					
Afraid of experiencing racism					
Don't have transport to get there					
No one speaks my language					

26. In the past 12 months, how often have you accessed the following health services?

	More than once a month	Every 1-2 months	Every 3-6 months	Every 6-12 months	Have not accessed in the past 12 months
GP					
Mental health service					
Sexual health service					
AOD services					
Other health services (please specify)					

27. In the past 12 months, which of the following services for sex workers have you accessed? [Select all that apply]
    - Vixen
    - Resourcing Health and Education (RhED)
    - Melbourne Sexual Health Centre
    - None of the above

28. In the past 12 months, where have you accessed information about sexual health or safer sex practices? [Select all that apply]
    - I haven't accessed any information
    - Your workplace or employer
    - Other sex workers in person
    - Other sex workers online
    - Vixen
    - RhED
    - Department of Health guidance for the sex industry
    - Health services
    - Red Book (redbook.scarletalliance.org.au)
    - Better Health Channel
    - Other [please specify]

29. In the past 12 months, how many sexual health appointments have you attended?
    - None
    - One

- Two
- Three
- Four or more

30. How many sexual health appointments do you expect to attend in the next 12 months?
    - None
    - One
    - Two
    - Three
    - Four or more
    - It will depend on when/if I think I need them

31. Since May 2022, have you changed how often you attend sexual health appointments?
    - Yes, I now attend more frequently
    - Yes, I now attend less frequently
    - No change

32. In the past 12 months, where have you attended a sexual health appointment? (Select all that apply)
    - Sexual health clinic
    - My regular GP (who I see for all medical concerns)
    - A GP other than my regular GP
    - Hospital
    - Community-based service
    - Somewhere else (please specify)
    - I haven't attended any sexual health appointments

33. In the next 12 months, where do you plan to attend sexual health appointments? (Select all that apply)
    - Sexual health clinic
    - My regular GP (who I see for all medical concerns)
    - A GP other than my regular GP
    - Hospital
    - Community-based service
    - Somewhere else (please specify)
    - Not sure
    - I'm not planning any sexual health appointments in the next 12 months

34. How many of the following sexual health tests have you had in the last 12 months?

	None	One	Two	Three	4 or more
HIV test					
Anal swab					
Throat swab					
Vaginal swab					
Urine sample					
Blood test for syphilis					
Other blood test					

35. In the past 12 months, have you been diagnosed with any of the following STIs/BBVs? (Select all that apply)
    - HIV
    - Chlamydia
    - Gonorrhoea
    - Syphilis

- Other STI
- Not been diagnosed with an STI in the past 12 months

36. If you have been diagnosed with an STI, how did you acquire it?
    - From a client
    - From a regular sex partner
    - From a casual sex partner (not a client)
    - Unsure

37. What is your HIV status?
    - HIV-negative
    - HIV-positive
    - I don't know
    - Prefer not to say

38. Do you tell health services about your sex work?
    - Yes, always
    - Yes, but only when it's relevant
    - Not if I can avoid it
    - No, never

39. How comfortable are you telling health services about your sex work?
    - Completely comfortable
    - Fairly comfortable
    - Neither comfortable nor uncomfortable
    - Not very comfortable
    - Not at all comfortable

40. Has decriminalisation of sex work in Victoria affected how often you tell health services about your sex work?
    - Yes, I now tell **more** services about my sex work
    - Yes, I now tell **fewer** services about my sex work
    - No, it hasn't changed who I tell about my sex work

41. Has decriminalisation of sex work in Victoria affected how comfortable you are with telling health services about your sex work?
    - Much more comfortable
    - A little more comfortable
    - No change
    - A little less comfortable
    - Much less comfortable

42. In the last 12 months, how often have you done the following to avoid stigma or discrimination from health services?

	Never	Rarely	Sometimes	Often	Always
Delayed accessing health care					
Not told health workers about your sex work					
Changed health services					
Stopped seeing a health worker					
Not attended a follow-up appointment					
Left an appointment before it finished					

Asked for recommendations from other sex workers					

43. Have you experienced any of the following in health care settings?

	Yes, since May 2022	Yes, before May 2022	No, never	Prefer not to say
Offers of sexual health checks when not requested or needed				
Coercive STI/BBV testing				
Inappropriate referrals				
Misdiagnosis because of sex work				
Suggestions or advice to leave sex work				
Diagnosing sex work as the problem				
Inappropriate comments				
Inappropriate disclosure of personal information				

Section 7: Stigma and discrimination

44. How much do you agree or disagree with the following:

	Strongly disagree	Disagree	Neither	Agree	Strongly agree
Doctors, nurses, or other health care providers are likely to treat me poorly					
I believe I would have trouble finding or keeping a new job					
I believe I would have trouble getting a new apartment or house					
I worry about being treated unfairly by a supervisor or employer					
I am likely to be denied a bank account, loan, or mortgage					
I worry about being harassed or stopped by police or security					
People might try to physically attack me					
I expect to be pointed at, called names, or harassed when in public					
I fear that I will have a hard time finding friendship or romance					

45. In the situations outlined above, which of the following are the most relevant to your concerns? (Please rank as many as apply, with 1 being the most relevant, 2 being the next most relevant, and so on).
    - Sex work
    - Mental health
    - Gender
    - Disability
    - Parenting situation
    - Unstable housing
    - Cultural background

46. In the last 12 months, how often have you experienced the following?

	Never	Rarely	Sometimes	Often	Always
Heard, saw, or read others joking or laughing about you (or people like you)					
Been treated as if you are unfriendly, unhelpful, or rude					
Been called names or heard/saw your identity used as an insult					
Been treated as if others are afraid of you					
Been stared or pointed at in public					
Been told that you should think, act, or look more like others					
Heard that you or people like you don't belong					
Asked inappropriate, offensive, or overly personal questions					
Been treated as if you are less smart or capable than others					

47. In the situations outlined above, which of the following are the most relevant to your experiences? (Please rank as many as apply, with 1 being the most relevant, 2 being the next most relevant, and so on).
    - Sex work
    - Mental health
    - Gender
    - Disability
    - Parenting situation
    - Unstable housing
    - Cultural background

48. In the last 12 months, have you experienced any stigma or discrimination (e.g., avoidance, pity, blame, shame, rejection, verbal abuse, bullying) **in relation to your sex work**?
    - Never
    - Rarely
    - Sometimes
    - Often
    - Always

49. In the last 12 months, to what extent do you agree that the following occurred **in relation to your sex work**?

	Never	Rarely	Sometimes	Often	Always	
Health workers treated me negatively or different to other people						
People didn't want to have an intimate relationship with me						
My partner tried to convince me to leave sex work						I don't have a partner
My family treated me negatively because of my sex work						I don't have contact with family

My community treated me negatively because of my sex work						
I was harassed or threatened by police						
I experienced physical violence from police						

50. In the past 12 months, how often have you been treated negatively by the following because of your sex work?

	Never	Rarely	Sometimes	Often	Always	I haven't had any contact
Social worker						
Mental health professional						
Financial service						
Academic institution						
Another job						
Health service						
Accommodation or housing						

51. **If you are HIV-positive**, how often have the following occurred in the past 12 months?

	Never	Rarely	Sometimes	Often	Always
I was treated negatively by a sex industry operator (e.g., brother owner, receptionist) because of my HIV status					
I was treated negatively by another sex worker because of my HIV status					
My HIV status was disclosed without my consent to a client, other sex workers, or sex industry operator					
I was treating negatively by a client because of my HIV status					
I was treated negatively by the treating doctor or nurse because of my sex work					

52. **If you have been diagnosed with an STI** (other than HIV) in the past 12 months, how often have the following occurred?

	Never	Rarely	Sometimes	Often	Always
I was treated negatively by a sex work employer because of my STI diagnosis					
I was treated negatively by another sex worker because of my STI diagnosis					
My STI diagnosis was disclosed without my consent in a sex work setting					

I was treating negatively by a client because of my STI diagnosis					
I was treated negatively by the treating doctor or nurse because of my sex work					

53. Do you expect the decriminalisation of sex work in Victoria to have any effect on your experiences of stigma or discrimination in the future?
    - I expect to experience much less stigma/discrimination in the future
    - I expect to experience slightly less stigma/discrimination in the future
    - I don't expect any change in my experiences of stigma/discrimination
    - I expect to experience slightly more stigma/discrimination in the future
    - I expect to experience much more stigma/discrimination in the future

12.3 Interview schedule

Baseline interview guide 2022-23

Background

- Can you tell me a little bit about yourself, the types of sex work that you do, and about the settings or workplaces in which you do this type of work?
  (Explore: length of time as sex work; type of sex work; workplace context)

Knowledge

- How well do you understand the recent legislative changes regarding sex work in Victoria, can you explain them to me, and how they affect you? What remains unclear? What information has been helpful to you to understand these changes? Where did you get this information from?
  (Explore knowledge of tranche one v tranche two; transition period v end of December 2023 (decriminalisation); areas of remaining criminalisation; care to tease out the distinctions)

- How do these changes relate to the types of work that you do more generally? What changes are related to things currently in place, or how you anticipate these changes in the future?
  (Pull out the general process/overall vs piecemeal changes; where confusion remains)

- Have you done sex work in other states? If so, how those experiences compared to experiences in Victoria, including impact on health and wellbeing?

Health and wellbeing

- How do you think these legislative changes will impact sex workers' health and wellbeing generally; what impact did the previous conditions under which sex workers operated impact their health?

- How would you describe your own health and wellbeing at the moment; how has the process of decriminalisation impacted your current health and wellbeing? How do you think decriminalisation will impact your health and wellbeing in future?

- What do you anticipate your future health and wellbeing to be like following full decriminalisation? What issues will remain?

- What do you need to ensure your health and wellbeing as a sex worker, now and in the future?
  (information, equity, relate back to types of sex work, etc)

(Explore: STIs/BBVs, mental health, AOD; experiences of stigma and discrimination; access/barriers to health care; chronic health conditions; police and enforcement interactions; family, parenting and relationships; other)

Service access/barriers

- What health services do you currently access? Which health services do you not access? Are there any services you avoid? Why?

- How comfortable are you/would you be accessing health care services, what elements make you feel comfortable or safe disclosing that you are a sex worker? When do you not need/want to disclose? Are you any worries about disclosure more generally or in relation to particular services?

- What is your impression of how health services understand sex worker's health and wellbeing? Can you talk me through a good example/bad example from your experience?

- What do we need to do to improve your access to health services? Now and in the future?

(Explore: Sexual health [STI/BBV testing]; GP general clinic, mental health services, AOD services and harm reduction services [distinction between both]; gender affirming healthcare; specialists healthcare; other; relate back to sex work)

Other

- What aspects of your life are impacted by stigma or discrimination relating to your work? What about policing? Any other aspects? How do these aspects intersect with your overall health and wellbeing?
  (Explore: income stability; workforce safety; public safety; other support needs; police harassment/interactions; drug related aspects; licensing and regulatory frameworks)

- Have you experienced any changes to these aspects following the first stage of decriminalisation; what changes do you anticipate following full decriminalisation?

- Is there anything further you wish to add?

12.4 Existing datasets

ACCESS Project	The ACCESS Project is a national health surveillance network that collects information of the testing, diagnosis, and treatment of sexually transmissible infections and blood borne viruses. ACCESS data will help to assess any changes in prevention, testing, and treatment for HIV, hepatitis C, hepatitis B and other STIs (and behavioural data where available) among sex workers. Changes in the number of sex workers identified in ACCESS data will also be assessed.
Melbourne Sexual Health Centre	The Melbourne Sexual Health Centre dataset comprises clinical data from clients accessing MSHC services. MSHC data will help to assess changes in the number of sex workers accessing MSHC services, as well as changes in prevention, testing, and treatment for STIs and blood borne viruses among sex workers.
Department of Health	The Department of Health provides publicly accessible high-level health data on their website including surveillance data on infectious diseases and other notifiable conditions. The Department surveillance data will provide additional, broader context to any changes in prevention, testing, and treatment data among sex workers.