

‘The space which is not mine’

SEX WORKERS LIVING WITH HIV/AIDS IN VENICE AND EDINBURGH

Nicoletta Policek

Despite great achievements by sex workers’ collectives and support organisations to make sex workers’ voices heard, those living with HIV/AIDS continue to experience stigma and discrimination. This is my conclusion after observing the outdoor sex industry in Italy and Scotland since 1992 as an HIV/AIDS activist and academic.

The data I discuss here comes from open-ended interviews with 282 women involved in outdoor sex markets in Edinburgh and 102 women in Venice conducted between 1992 and 2010. Edinburgh and Venice are quite different in many ways, but they have a similar approach to regulating the outdoor sex industry: they fine outdoor sex workers for soliciting their clients, and they fine clients for approaching sex workers on the street.

The women I interviewed in both countries ranged from 18 to 52 years old, the average age 25 in Edinburgh and 22 in Venice. In Edinburgh the majority of women (201) were British nationals, and 79 were from Eastern Europe, Sub-Saharan Africa and North Africa. In Venice only seven were Italian nationals, and all the rest were from Eastern Europe, Sub-Saharan Africa, North Africa and Latin America. It is interesting to notice how countries of origins of outdoor sex workers I met are indicative of migration policies and trends in both countries.

Focus on Places

My study deals with the spaces where sex workers work and live: the place of work (the street), the place called home and the place of care (hospital or HIV clinic). When discussing their place of work, sex workers had similar experiences in both countries. In both cities outdoor sex workers conduct their business in industrial areas far removed from the city centre. They overwhelmingly said working conditions have deteriorated. In Edinburgh, a non-harassment zone that had offered relative safety was closed in 2001, contributing to an environment in which violence against sex workers

is now tolerated. In Venice, the policing of undocumented migrants became a priority after the Bossi-Fini law regulating migration was passed in 2002.

When discussing the place called home, nearly all women in Venice stated that housing was a real problem because affordable places are almost impossible to find. Most women were either homeless or lived in vans illegally parked near their place of work. Women in Edinburgh could get housing subsidies to pay their rent. Child care for women in both countries was a major problem.

The Place of Care for Sex Workers Living with HIV/AIDS

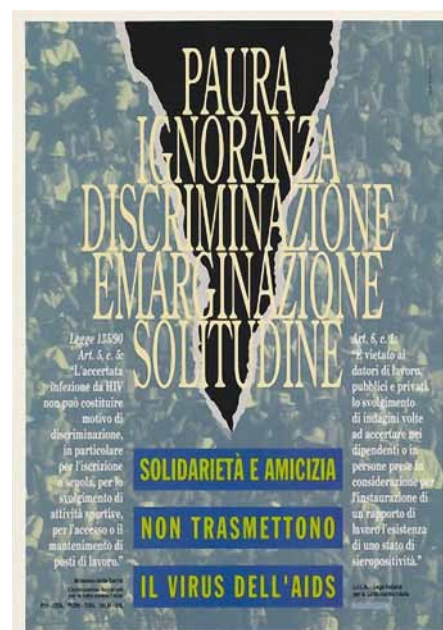
Fourteen per cent of sex workers I interviewed in Scotland and 38 per cent in Italy are living with HIV/AIDS. I asked them to talk about their experience of the HIV clinic, where I had assumed they would feel most welcome. I was wrong. For example, Tracy, a sex worker in Edinburgh, described, about the HIV clinic she regularly attends, what it feels like

not to be welcomed, to feel that we should not be here, as workers, as positive women, as human beings. This is a place which is not mine.

Maria, who comes from the West of Scotland and worked outdoors in Liverpool before coming to Edinburgh, echoed Tracy’s feelings of isolation when she said

Other positive women do not want prostitutes here at the hospital, at the support group... I think it is sad as we are all sharing the same virus, the same effects on our body, we take the same medications and we share the same fear about our future.

Tanya, a sex worker from Romania who moved to Italy to work several years ago, said she was open about her intravenous drug use with other HIV-positive women but found it difficult to attend a local support group for women living with HIV/AIDS because



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They ignore me and often say it is because I prostitute myself that I have HIV. They say it was my choice. It’s true, I always reply, my choice is to work, but it was not my choice to have HIV, to become ill, to feel tired.

Silvana, who has lived and worked near Venice all her life, pointed to a clear disparity between the way both health-care workers and women living with HIV/AIDS relate to HIV-positive sex workers:

Positive women here at the hospital have always treated me like a piece of shit, and it doesn’t matter how many times I have talked about how I feel about it with the nurses and my doctor, nothing seems to change except that they tend to group sex workers in the same slot of appointments so that we do not get abused by other positive women.

Sex workers in Venice and in Edinburgh unanimously reported that they felt supported and welcomed by the medical staff at HIV clinics they regularly attend but said HIV-positive women not involved in the sex industry were often judgemental and patronising. It was depressing to realise that other women living with HIV/AIDS contribute to perpetuating stigma against sex workers by blaming them for spreading the virus. Living with HIV/AIDS is a lifelong battle even when access to treatment and health care are of a high standard, as in both Italy and Scotland. But sex workers in outdoor markets are discriminated against and penalised simply for being sex workers.

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“这不是我的地方”

威尼斯和爱丁堡的阳性性工作者

Nicoletta Policek

近年来，尽管性工作者组织和支持机构努力发出性工作者的声音，获得了巨大的成就，但感染艾滋病的性工作者却仍然承受污名和歧视。这是我作为一名艾滋病活动家和学者，自1992年以来观察意大利和英格兰的街头性产业所得出的结论。

本文所使用的数据，来源于1992至2010年期间我所做的调查。我对爱丁堡和威尼斯的街头性交易市场进行了研究，通过开放式访谈的方式在这两个城市分别采访了282名和102名女性性工作者。爱丁堡和威尼斯在很多方面有显著的差异，但他们在规范街头性交易方面有一个类似的做法：那就是对招客的街头性工作者进行罚款，对在街上招嫖的客人也罚款。

我采访的这些女性年龄在18-52岁之间。在爱丁堡，被访者平均年龄是25岁，威尼斯被访者的平均年龄则为22岁。爱丁堡的大部分被访者（201人）是英国国籍，另外79人来自东欧、非洲撒哈拉以南地区和北非。而威尼斯的被访者只有7人是意大利籍，其他的人来自东欧、非洲撒哈拉以南地区、北非和拉丁美洲。有一点很有意思，我发现这些街头性工作者的国籍，是这两个国家移民政策和趋势的风向标。

研究的关注重点

我的研究关注性工作者工作和生活的场域：工作地点（街头）、被称为家的地方、以及获得关怀的地方（医院或艾滋病诊所）。当问到工作地点时，这两个国家性工作者的经验是类似的。在这两个城市，街头性工作者开展工作的地方是远离城市中心的工业区。他们一致声称工作条件恶化得很厉害。在爱丁堡，原来有一个不受干扰的地区能够提供相对安全的工作环境，但该地区却在2001年被关闭了。现在的环境则纵容对性工作者的暴力。在威尼斯，2002年通过管理利民的“波西-菲尼法”之



Scienzartambiente, Ex-Convento di San Francesco, Pordenone, Italy, 2009, Photo Elena Tubaro/前圣弗朗西斯修道院, Pordenone, 意大利, 2009年

后，警务工作的首要任务是规范没有身份的流动人口。

当我问到被称为家的地方时，几乎100%的威尼斯被访者女性都说房子很成问题，因为她们几乎不可能找到能够负担得起的地方。大多数妇女无家可归，或者住在离工作场所很近的违章停靠的货车里。在爱丁堡，女性能够获得住房补贴来支付租金。对儿童的照料在这两个国家都是一个主要问题。

阳性性工作者的关怀

在我所采访的性工作者中，14%的英格兰被访者和38%的意大利被访者是艾滋病病毒感染者。我让她们谈谈艾滋病诊所的经验，我以为她们在那里会受到欢迎，但是我错了。Tracy是爱丁堡的一名性工作者，她向我讲述自己是如何不受欢迎的。她被转介到一家后来经常去的艾滋病诊所，但诊所给她的感觉是：

“她不应该去那里；作为一名阳性妇女，作为一个人，她是不受欢迎的。她说，这不是我的地方。”

在这样一个本应该给所有感染者提供同样关怀的地方，那些不是从事性工作的女性感染者，在他们自己和性工作者之间划了一条清晰的界线。Maria来自英格兰西部，她在来爱丁堡之前，在利物浦的街头工作。她对Tracy描述的隔离感同身受：

“这些女性感染者并不希望妓女出现的这个医院里，在这个支持小组里……我觉得这很可悲，因为我们体内有着同样的病毒，这些病毒对我们的身体产生同样的影响，我们服用同样的药物，而且我们对未来有着同样的恐惧。”

Tanya是一名几年前从罗马尼亚移居到意大利的性工作者，她对自己静脉注射的事实并不隐讳。但她发现很难参与到女性感染者的支持小组里，因为：

“他们不理我，他们经常说我是因为卖淫而感染了艾滋病。他们说这是我自己选择的。我总是回答说，是的，这是事实。但我选择的是我从事的工作，感染艾滋病、生病和衰弱，不是我自己选择的。”

Silvana一直在威尼斯附近生活和工作的，她指出医护人员和一般的女性感染者是如何对待阳性性工作者的：

“这个医院的女性感染者总是把我当作一块狗屎。而且无论我跟护士和医生提了多少次我的意见，都不管用，没有任何改变，除了他们把性工作者安排在一起看病，以免我们被别的女性欺负。”

威尼斯和爱丁堡的性工作者一致反映，他们常去的艾滋病诊所的医护人员对他们很欢迎和支持。但是不从事性工作的女性感染者常常居高临下和戴着有色眼镜。我们看到，不从事性工作者的女性感染者们把疾病的传播归咎于性工作者，加重了性工作者面临的污名和耻辱。感染艾滋病是一场一辈子的战役。尽管在意大利和苏格兰有高水平的治疗和医疗关怀，但在街头性工作者仅仅因为他们性是工作者，就受到歧视和惩罚。

关于作者

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