

The Real Impact of the Swedish Model on Sex Workers

#3

Impacts of the Swedish Model's Justifying Discourses on Service Provision

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Introduction

In the second (previous) paper of this toolkit, direct impacts of the Swedish model – the criminalisation of the purchase of sex – were discussed: the most notable outcomes of the law have been to the detriment of sex workers, notably street-based sex workers, and in addition to these negative outcomes is the law's failure to achieve its ambition of decreasing levels of sex work in Sweden.

In this paper, I discuss the impacts of the ideas and assertions that justify the criminalisation of the purchase of sex (discussed in the first paper of this toolkit). Specifically, these ideas – advocated by abolitionist radical feminists – include: the construction of sex work as a form of violence; the assertion that the violence that can be associated with sex work is constant and unchangeable; and additionally, the generalisation that sex workers are passive, disempowered victims. Of principal focus here are the impacts that these ideas and generalisations have had on the views of state-sponsored, sex work-targeted service providers, on service provision, and on harm reduction services and views surrounding harm reduction.

What is harm reduction and why is it needed?

As with many other jobs, harms can be associated with sex work. These harms are exacerbated by legal frameworks that criminalise sex workers, which serve to marginalise sex workers, increase social exclusion, and push sex work into underground and hidden spaces (as discussed in the second paper of this toolkit); criminalisation therefore creates disengagement between sex workers and service providers and state-sponsored protection. Violence, stigma, and discrimination are all significant harms that can be associated with some sex work, and other concerns include the transmission of HIV and other STIs and blood-borne infections.

These harms are variable, and, like with all potential harms and difficulties that can be associated with work and working environments, they can therefore be tackled, mitigated, and reduced. Though Sweden's outspoken ambition is to abolish sex work, O'Connell Davidson (2003)¹ pertinently notes that even where an aim is to reduce levels of sex work, reducing the harms surrounding sex work should be a priority 'in the meantime' (it should be stressed, however, that abolitionism and criminalisation do, in and of themselves, exacerbate and create harm, as discussed in the second paper of this toolkit).

...HARMS ARE EXACERBATED BY LEGAL FRAMEWORKS THAT CRIMINALISE SEX WORKERS, WHICH SERVE TO MARGINALISE SEX WORKERS, INCREASE SOCIAL EXCLUSION, AND PUSH SEX WORK INTO UNDERGROUND AND HIDDEN SPACES...

1 O'Connell Davidson, J., 2003, "Sleeping with the Enemy? Some Problems with Feminist Abolitionist Calls to Penalise those who Buy Commercial Sex." *Social Policy & Society* 2,1: 55–63

TO REDUCE THE HARMS THAT CAN BE ASSOCIATED WITH SEX WORK, HARM REDUCTION IS IMPERATIVE, WHETHER OR NOT THE POLITICAL AMBITION IS TO DECREASE LEVELS OF SEX WORK...

Harm reduction initiatives position themselves politically neutrally: they do not aspire towards reducing levels of the activity in question, but instead to reduce the harms that may be associated. First advocated and introduced for people who use drugs in the context of the HIV pandemic (for example, needle exchange/provision and opiate substitution therapy), harm reduction initiatives have been advocated for sex workers; they include condom provision, the provision of information on selling sex more safely, the provision of lubricants, the provision of medical and GUM (genitourinary medicine) services, and arguably decriminalisation, since criminalisation is itself demonstrated to be harmful. To reduce the harms that can be associated with sex work, harm reduction is imperative, whether or not the political ambition is to decrease levels of sex work, as is the case in Sweden.

If harm reduction is imperative, is there opposition to harm reduction?

Yes: abolitionist feminist discourse sees sex work as a form of violence, and sees the variable harms that can be associated with sex work as constant. This means that harm reduction is simply dismissed since:

- 1 harm reduction discourse does not strive to reduce levels of sex work, and is therefore seen as conflicting with abolitionist aims, and
- 2 it is asserted that the harms surrounding sex work cannot be reduced, and so efforts to reduce harms are seen to be pointless and unrealistic. As per the below quotation, sex work is seen to always and inevitably be “really, really dangerous”:

“prostitution in itself attracts strange people, and I think prostitution has always been, and always will be really, really dangerous... in what way can you help someone then, what kind of information would you give to help people?”

(Interview, 2009, Social Worker, Stockholm Prostitution Unit)²

As with other elements of radical feminist discourse, then, this opposition to harm reduction has come to inform the stance of Swedish stakeholders and service providers. Harm reduction for sex workers is opposed, since it is not just seen to be pointless in the context of what are asserted to be unavoidable harms, but is actually seen to *encourage* and *facilitate* sex work. Harm reduction is seen to keep people in sex work where otherwise they may have ceased, and these approaches are therefore seen to undermine Sweden's expressed aim to abolish sex work:

“harm reduction is many times a way of, I mean it, it tends to keep people in the problem, instead of helping them to leave”.

(Interview, 2009, Social Worker, Stockholm Prostitution Unit)³

2 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

3 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

Swedish views of condom provision for sex workers and their clients

This wider opposition to harm reduction has led to opposition amongst targeted service providers, the Swedish Prostitution Units. These organisations are tasked by the government to reduce levels of sex work through social service provision.⁴ Though sex workers and their clients are both foci for HIV and STI prevention for the Swedish National Board of Health and Welfare, the Stockholm Unit in particular opposes condom provision to sex workers during its outreach work. Condoms are not seen as measures to promote health and to reduce harm, but instead as means with which to attract sex workers to the Stockholm Unit's offices (where condoms are available).

Despite Sweden being often regarded as one of the world's ultimate welfare states, the Swedish model has resulted in street-based sex workers not being provided with condoms. The need for condom distribution during outreach to street-based sex workers is made clear by reports of sex workers having to provide one another with condoms, and further reports of sex workers having to shoplift condoms:

"every time I'm on the street, the girls are coming to me asking for condoms... When I was working before, regularly (on the street)... girls were shoplifting condoms. And now I don't know what they do. But it was a store, then they didn't want to let us in".

(Interview, 2009, Sex Worker [Street; Escort; Internet])⁵

Not only is there opposition to the provision of condoms to sex workers; opposition to the provision of condoms to sex workers' clients has been considerable in Sweden. The Malmö Prostitution Unit, in the south of Sweden, has previously attempted to provide harm reduction services, providing sex workers with condoms during outreach, and providing condoms to people who buy sex. However, its giving condoms to clients resulted in a national outcry.

II: "We tried with condoms, and it became a national issue. Not a local, but a national issue. It is very funny if you think about it, 'cause we, you gotta remember, we gave out how many condoms?"

I: "Eight condoms."

II: "Eight condoms! Eight condoms. And it became a national issue."

(Interview, 2010, Two Social Workers, Malmö Prostitution Unit)⁶

This opposition was due to the fact that in Sweden (and abolitionist feminist discourse), the purchase of sex is constructed as a form of violence; it is this understanding that justifies the Swedish model. With sex work constructed as a form of violence, giving condoms to sex workers' clients – seen to be the perpetrators of this violence – is therefore seen as providing the tools with which to commit a violent offence, not as a means with which to promote health and harm reduction.

WITH SEX WORK CONSTRUCTED AS A FORM OF VIOLENCE, GIVING CONDOMS TO SEX WORKERS' CLIENTS... IS THEREFORE SEEN AS PROVIDING THE TOOLS WITH WHICH TO COMMIT A VIOLENT OFFENCE, NOT AS A MEANS WITH WHICH TO PROMOTE HEALTH AND HARM REDUCTION.

⁴ It is very important to remember that Sweden's desire to decrease levels of sex work was to be achieved through both legal interventions (criminalisation of demand) and through social interventions. In spite of this, when the law was introduced in 1999 no money whatsoever was given to social services (and several million Swedish kronor were given to the police).

⁵ Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

⁶ Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

Swedish view of guides to safer sex work and harm reduction information

As well as giving condoms to sex workers and their clients, the Malmö Unit has also provided a harm reduction pack, which includes a safer sex work guide, informed by sex workers themselves. Again, these guides are felt by some key stakeholders in Sweden to actually encourage sex work, and were even considered by the National Coordinator Against Trafficking and Prostitution to encourage people to *begin* sex work:

“maybe some young girls who is not in the prostitution for the moment, they find this on the internet, and say ‘Ah, maybe it could be really safe, because I have this handbook, and I have these things, so nothing could happen’”.

(Interview, 2009, Interview, 2009, Stockholm Länsstyrelsen)⁷

As discussed above, with sex work generalised as inevitably and unchangeably surrounded by violence, providing information on safer sex work is also seen to be pointless: there is not seen to be any such thing as safer sex work.

Moreover, as a Swedish politician who proposed the Swedish model notes below, since the purchase of sex has been criminalised, providing harm reduction and information regarding safer sex work is seen as providing information regarding how to commit a crime, a crime that has been constructed in dominant Swedish discourse as a form of violence.

“since it’s illegal, you can’t, it becomes very strange if you are informing of something that not legal in Sweden”.

(Interview, 2010, Proposer of *Sexköpslagen*; Politician – Social Democrats)⁸

With so little provided by way of harm reduction and information on safer sex work, sex workers in Sweden learn how to avoid harm from doing their own research, from having to educate one another, or from having experienced harm personally.

Selective and conditional service provision for sex workers in Sweden

Further to Swedish oppositions to harm reduction, generalisations of sex work as problematic and violent have informed the views and attitudes of Swedish service providers. With all sex workers assumed to be victims in need of assistance and exit from sex work, service providers are unconcerned about providing services to sex workers who do not identify their sex work to be problematic and/or who do not identify as victims. These sex workers do not fit into mainstream and political assumptions regarding sex work, and so they are simply excluded from state-sponsored assistance. Indeed, sex workers ‘who feel good’ are not seen to be worthy of the ‘energy’ of service providers:

“as far as they feel well, and like to be in this situation, fine with me, I mean, the day when they don’t like it anymore, they can come to me. So I don’t spend my energy on this group of people”.

(Interview, 2009, Stockholm Länsstyrelsen)⁹

Though respondents from the Stockholm Prostitution Unit emphasised that they did not judge their clients, and that they did not insist that their clients ceased selling sex, it seems that their alignment with Swedish understandings of sex work have resulted in their assuming their clients to be victims, as well as applying abolitionist conditions on their provision of services.

...WITH SEX WORK GENERALISED AS INEVITABLY AND UNCHANGEABLY SURROUNDED BY VIOLENCE, PROVIDING INFORMATION ON SAFER SEX WORK IS ALSO SEEN TO BE POINTLESS: THERE IS NOT SEEN TO BE ANY SUCH THING AS SAFER SEX WORK.

7 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

8 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

9 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)



As per the below quotations, one sex worker noted that social workers had refused to provide her with assistance in getting a doctor's note unless she ceased her sex work for a period of time; another reported that she was expected to adopt a victim status during her engagement with social workers at the Unit. These claims certainly contrast with the Stockholm Unit's asserted neutrality, suggesting instead that they align firmly with the discourses that justify the Swedish model.

"I had so many questions. Is this wrong? What will happen if I get sick? What happens if I get robbed? What happens if I get killed with a customer?... And they were not talking about the good things, they were only doing (making) things worse. So when I go home from them, I was crying, and I was feeling like, 'Oh my god, what a bad dirty people I am'... I like to do this. I'm not a bad girl... they should really be able to understand how we're thinking, and why we are thinking, and why we exist. Not to push us out back on the street, and (say) 'you're a bad person'".

(Interview, 2010, Sex Worker [Internet Escort])¹¹

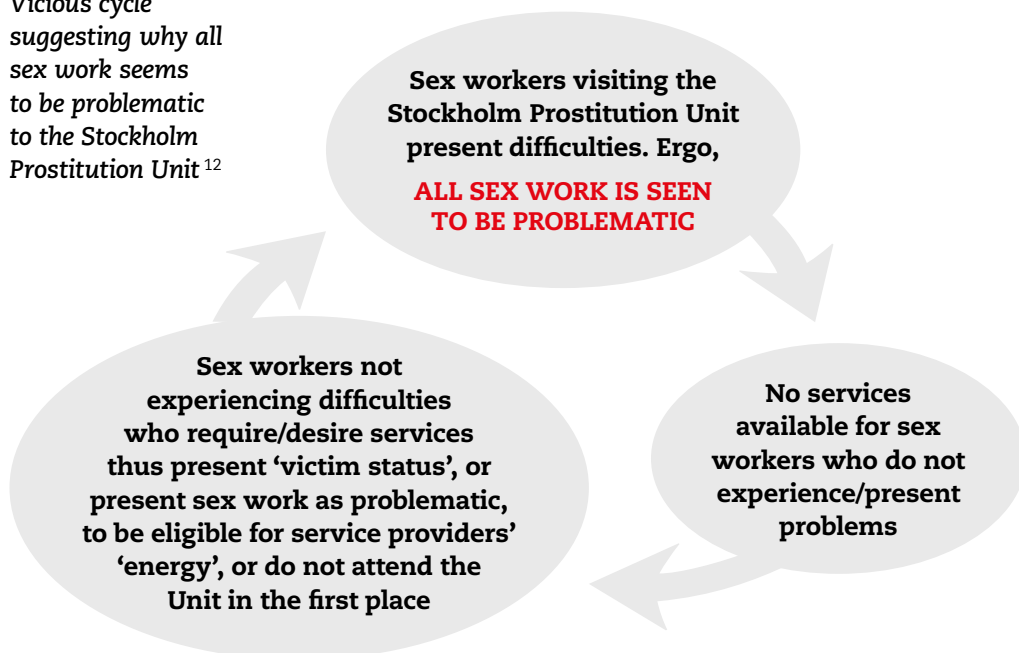
With only some sex workers eligible for state-sponsored assistance, we can see why stakeholders in Sweden assert that all sex work is problematic: only those sex workers who problematise their sex work are entitled to service provision. Those who do not may therefore position themselves as being a victim and/or their sex work as being problematic, or they will not seek out service provision at all:

...ONLY THOSE SEX WORKERS WHO PROBLEMATISE THEIR SEX WORK ARE ENTITLED TO SERVICE PROVISION. THOSE WHO DO NOT MAY THEREFORE POSITION THEMSELVES AS BEING A VICTIM AND/OR THEIR SEX WORK AS BEING PROBLEMATIC, OR THEY WILL NOT SEEK OUT SERVICE PROVISION AT ALL...

"I was going to talk to them for some months, and she (Stockholm Prostitution Unit Social Worker) also told me that if she was going to help me, to write a paper, that I needed to *sjukskrivning* (sick note)... she was going to write a paper to help me to get the doctor to write that paper, because I have been waiting for three years... so she said 'if you are stopping prostitution for three months, and you don't do anything for three months, then I will write that paper'".

(Interview, 2009, Sex Worker [Street; Escort; Internet])¹⁰

*Vicious cycle suggesting why all sex work seems to be problematic to the Stockholm Prostitution Unit*¹²



10 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

11 Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Routledge)

12 Levy, J., 2012, *Second-Class Citizens of Sweden: Sex Work and Drug Use in the People's Home* (University of Cambridge: PhD Thesis)



Summary

SUCH OPPOSITION... IS MARKEDLY SIMILAR TO OPPOSITION TO DRUG-RELATED HARM REDUCTION, WITH NEEDLE EXCHANGE AND PROVISION FALSELY ASSERTED TO ENCOURAGE DRUG USE, AND NOT SEEN IN A CONTEXT OF REDUCING HARM.

In opposing the Swedish model, arguments tend to focus on the *direct* outcomes of the law. This paper has made clear that it is not only the law itself that needs to be opposed, but, in addition, the ideas that frame it, which are informed by ideological generalisations.

These ideas include generalisations of sex work as inevitably violent and of sex workers as disempowered victims, and these beliefs have directly informed the views of service providers. Harm reduction initiatives are opposed, seen to be both pointless and actually counterproductive in their apparently encouraging and facilitating sex work. Such opposition, driven as it is by Swedish

radical feminist abolitionism, is markedly similar to opposition to drug-related harm reduction, with needle exchange and provision falsely asserted to encourage drug use, and not seen in a context of reducing harm.

Although the Swedish model is advocated as a progressive piece of legislation and set of ideas, as a part of Sweden's liberal and progressive welfare state and Sweden's aspirations towards 'gender equality', the refusal of service providers to provide even the most basic services and harm reduction initiatives to sex workers – due to the ideas that frame the Swedish model – undermines such claims.

Further reading on these topics

The four papers of this toolkit stem from research undertaken by the author, Dr Jay Levy, in Sweden between 2008 and 2012. This research is presented in full in:

- Levy, J., 2014, *Criminalising the Purchase of Sex – Lessons from Sweden* (Abingdon: Routledge)

In addition to this book, several key texts provide useful further reading.

For discussions of harm reduction – particularly sex work-related harm reduction – and the importance of focussing on harm reduction and service provision, see:

- Cusick, L., 2005, “Widening the Harm Reduction Agenda: From Drug Use to Sex Work.” *International Journal of Drug Policy* 17: 3–11
- Rekart, M. L., 2005, “Sex-Work Harm Reduction.” *The Lancet* 366: 2123–2134

For further discussion of the impacts of the Swedish model on service provision, see:

- Levy, J. and Jakobsson, P., 2014, “Sweden’s Abolitionist Discourse and Law: Effects on the Dynamics of Swedish Sex Work and on the Lives of Sweden’s Sex Workers.” *Criminology and Criminal Justice*. doi: 10.1177/1748895814528926



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