

April 15, 2022

The Honorable Nancy Skinner Chair, Senate Budget & Fiscal Review Committee California State Senate Sacramento, CA 95814

The Honorable Sydney Kamlager Chair, Senate Budget Subcommittee 4 California State Senate Sacramento, CA 95814 The Honorable Phil Ting Chair, Assembly Budget Committee California State Assembly Sacramento, CA 95814

The Honorable Wendy Carrillo Chair, Assembly Budget Subcommittee 4 California State Assembly Sacramento, CA 95814

## Subject: Support Decrim Sex Work California Coalition's Request for Sex Worker Housing as Healthcare Pilot

Dear Budget Leaders:

We write to respectfully request your support for Decrim Sex Work California Coalition's housing as healthcare pilot program for unhoused and housing insecure current and former sex workers. Specifically, we are asking for:

- \$147 million in one-time General Fund money for a pilot program to support five to ten housing programs for unhoused and housing insecure current and former sex workers that includes connections to culturally competent services for these populations. The funds would be from the 2022-23 budget but be spent over 5 years and would be split among programs selected for demonstrated need and regional diversity. The money would be dispersed to organizations that provide housing programs to reduce and prevent homelessness among current and former sex workers. Funds would be targeted to help all sex workers especially those who are at higher risk of violence and have less access to services.
- \$9 million for the Department of Healthcare Services to administer and evaluate the program.

People who trade sex in a broad array of contexts face stigma and discrimination. This results in their marginalization and lack of access to basic human needs. They deserve to be healthy and safe, and housing is an essential element to ensuring this becomes a reality. While housing and houselessness is an issue across California, current and former sex workers are especially impacted populations with less access to housing resources due to discriminatory and punitive policies and practices. Housing is crucial for connecting people to needed physical and mental healthcare and other services, is a violence prevention measure, and is the biggest unmet need for many people in the sex trades. Sex workers also frequently face discrimination when trying to access other services, like healthcare, professional development, banking, and legal services. When these barriers compound with housing insecurity, it can be especially difficult for people to maintain connections to vital services. People who trade sex need more culturally competent service providers and safe, secure housing.

Unfortunately, houselessness rates are especially high for sex workers. According to the US Interagency Council on Homelessness, there were estimated 161,548 unhoused people on any given day in California as of January 2020,<sup>1</sup> or about 0.4% of the state's population.<sup>2</sup> About half of people in the sex trades have experienced houselessness,<sup>3</sup> and a 2018 survey found that 79% of the sex workers surveyed listed housing as their most immediate need.<sup>4</sup> One survey found that nearly half of transgender sex workers had experienced houselessness, while nearly 40% had been denied access to a shelter.<sup>5</sup> That study also found that "[w]hen trying to access homeless shelters, transgender people in the sex trade were twice as likely to experience mistreatment" as transgender people not engaged in sex trades.<sup>6</sup>

Some unhoused people do sex work to meet basic survival needs when they have no other options ("survival sex work"). A 2013 study found that 8% of the unhoused 18-21 year-olds in the study had engaged in survival sex work<sup>7</sup> and that "[s]helter was the number one commodity traded in return for sexual activity."<sup>8</sup> About one in five transgender people nationally have done sex work at some point,<sup>9</sup> oftentimes "to earn income or as an alternative to relying on homeless shelters and food banks" after facing high levels of poverty and discrimination.<sup>10</sup>

Many people working in the sex trades – whether by choice, circumstance, or coercion – have historically survived on the margins due to the compound effects of stigma, criminalization, racism, xenophobia and transphobia. In California, Black and Latinx transgender, gender non-conforming and cisgender street-based sex workers experience disproportionate policing, and as a result are more likely to have criminal records and to face barriers to accessing healthcare, housing, and other public benefits. Many sex workers are undocumented, survivors of interpersonal and state violence, and/or monolingual in a language other than English, resulting in increased discrimination and decreased access to resources. Individuals who are currently or were formerly in sex trades are at high risk of eviction and are sometimes forced to take on high risk aggressive and/or exploitative clients in order to obtain shelter for themselves and their families and loved ones. Additionally, nearly half of transgender sex workers reported

https://transequality.org/sites/default/files/Meaningful%20Work-Full%20Report\_FINAL\_3.pdf <sup>6</sup> Erin Fitzgerald, et al.

<sup>&</sup>lt;sup>1</sup> United States Interagency Council on Homelessness. "California Homelessness Statistics." <u>https://www.usich.gov/homelessness-statistics/ca/</u>.

<sup>&</sup>lt;sup>2</sup> United States Census Bureau. "California Remained Most Populus State but Growth Slowed Last Decade." August 2021. <u>https://www.census.gov/library/stories/state-by-state/california-population-change-between-census-decade.html</u>.

<sup>&</sup>lt;sup>3</sup> The Sex Worker Advocates Coalition. "Sex Workers Need Housing, Not Handcuffs." March 2019. <u>https://medium.com/@hipsdc/sex-workers-need-housing-not-handcuffs-7fc057d278a9</u>

<sup>&</sup>lt;sup>4</sup> The Sex Worker Advocates Coalition.

<sup>&</sup>lt;sup>5</sup> Erin Fitzgerald, Sarah Elspeth, Darby Hickey, Cherno Biko, and Harper Jean Tobin. "Meaningful Work: Transgender Experiences in the Sex Trade." December 2015.

<sup>&</sup>lt;sup>7</sup> Jayne Bigelsen and Stefanie Vuotto. "Homelessness, Survival Sex and Human Trafficking: As Experienced by the Youth of Covenant House New York." May 2013.

https://humantraffickinghotline.org/sites/default/files/Homelessness%2C%20Survival%20Sex%2C%20and%20Hum an%20Trafficking%20-%20Covenant%20House%20NY.pdf, page 6.

<sup>&</sup>lt;sup>8</sup> Ibid.

<sup>&</sup>lt;sup>9</sup> The Sex Worker Advocates Coalition.

<sup>&</sup>lt;sup>10</sup> Erin Fitzgerald, et al.

harassment in medical settings in one study.<sup>11</sup> As one scholar noted, "precariously housed sex workers' opportunities and trajectories are profoundly influenced by whether...service bureaucracies define them as...people in need of resources to reduce harm."<sup>12</sup>

One of the barriers to connecting sex workers to healthcare and other services is the high rate of houselessness and extreme poverty that people who trade sex experience, which exacerbates health disparities and stigma and results in poorer health outcomes. To make healthcare accessible and reduce health disparities, housing is needed in connection with healthcare and other comprehensive wraparound services. A 2011 study of homelessness among women engaged in street-based sex work concluded that "[h]omelessness represents a unique social and physical environment that has been shown to substantially influence distribution of health inequities, risk taking and adverse health outcomes among marginalized populations."<sup>13</sup> A 2016 housing first pilot program for sex workers found that "the project has mitigated some significant health risks" and resulted in significant healthcare-related cost savings to the government, including reduced need for services over time.<sup>14</sup> As one primary care physician noted, "[w]ithout housing, nothing I have in my black bag can substantially improve the health of my patients."<sup>15</sup>

Housing has been linked to improved health outcomes for numerous marginalized communities. For people living with HIV/AIDS, for example, stable housing has been shown to increase access to health services, attending primary care visits, and receiving ongoing care.<sup>16</sup> Clients of a housing first program for veterans experienced improvements in mental health and reductions in alcohol use.<sup>17</sup> In one study looking at a housing first program for sex workers, participants said stable housing directly improved their mental health.<sup>18</sup> In another study, housing led to a 29% decrease in hospitalization, 29% decrease in hospital days, and 24% decrease in emergency room

<sup>&</sup>lt;sup>11</sup> Erin Fitzgerald, et al.

<sup>&</sup>lt;sup>12</sup> Donna Dilara Yarbrough. "Outlaw Poverty Not Prostitutes: Sex Workers' Responses to Poverty Management in San Francisco." UC San Diego. 2016. <u>https://escholarship.org/content/qt1533s9wz/qt1533s9wz.pdf?t=qs9ry1</u>, p. 92-93.

<sup>&</sup>lt;sup>13</sup> Duff, P., Deering, K., Gibson, K., Tyndall, M., & Shannon, K. (2011). Homelessness among a cohort of women in street-based sex work: the need for safer environment interventions. *BMC public health*, *11*, 643. https://doi.org/10.1186/1471-2458-11-643.

<sup>&</sup>lt;sup>14</sup> Emma Bimpson. "Basis Housing First Pilot. The story so far." September 2017. <u>https://wy-fi.org.uk/wp-content/uploads/2017/10/Appendix-2.6-Leeds-Coproduction-Innovation-Fund-Review.pdf</u>. See also The Sex Worker Advocates Coalition.

<sup>&</sup>lt;sup>15</sup> Dr. Joshua D. Bamberger. "Putting 'Housing is Health Care' into Action to Help End Chronic Homelessness." United States Interagency Council on Homelessness. August 2017. <u>https://www.usich.gov/news/putting-housing-is-health-care-into-action-to-help-end-chronic-homelessness</u>

<sup>&</sup>lt;sup>16</sup> National AIDS Housing Coalition. "Housing is Health Care." hhttp://nationalaidshousing.org/housing-and-health/#:~:text=People%20with%20HIV%2FAIDS%20who%20has%20 table%20 housing%20are%20 much,Effective%20antiretroviral%20therapy%20(HAART).

<sup>&</sup>lt;sup>17</sup> Peng, Yinan & Hahn, Robert & Finnie, Ramona & Cobb, Jamaicia & Williams, Samantha & Fielding, Jonathan & Johnson, Robert & Montgomery, Ann & Schwartz, Alex & Carles, Muntaner & Garrison, Veronica & Jean-Francois, Beda & Truman, Benedict & Fullilove, Mindy. (2020). Permanent Supportive Housing With Housing First to Reduce Homelessness and Promote Health Among Homeless Populations With Disability: A Community Guide Systematic Review. Journal of Public Health Management and Practice. 26. 404-411. 10.1097/PHH.000000000001219.

<sup>&</sup>lt;sup>18</sup> Emma Bimpson.

visits for chronically ill people experiencing houselessness.<sup>19</sup> A San Francisco study of transgender people found that a "housing-centered approach to mental healthcare can interrupt the cycle of violence and trauma."<sup>20</sup> Housing is an effective violence-prevention strategy for sex workers and transgender people,<sup>21</sup> something desperately needed after more than 50 transgender people, many sex workers, were killed nationwide last year — the deadliest year on record.

To address these issues, we encourage inclusion in this year's budget of \$147 million in one-time General Fund money to provide for a pilot program to support five to ten housing programs for unhoused and housing insecure current and former sex workers that includes connections to culturally competent services for people who trade sex. The funds would be from the 2022-23 budget but be spent over five years and would be split among programs selected for demonstrated need and regional diversity. The money would be dispersed to organizations that provide housing programs to reduce and prevent homelessness among current and former sex workers. Sex work is an issue that intersects among a variety of different communities and identities in California. Funds would be targeted to help all sex workers, especially those who are at higher risk of violence and have less access to services, including but not limited to those who are TGI, BIPOC, street-based sex workers, undocumented, disabled, LGBQ+, living with HIV, elders, formerly and currently systems-involved, formerly incarcerated, or otherwise more vulnerable to exploitation and other abuse due to their identity.

The model may vary depending on the regional need, including but not limited to interim and permanent housing and/or homelessness prevention services, including rental and utility assistance. Based on the costs and people served by one such existing housing program in the Bay Area, \$147 million over the course of five years would serve approximately 1,850 people per year, about three times as many people as would be served by the same amount of money through Project Roomkey over a five-year period.

These programs would also provide connection to comprehensive services for individuals served by the programs, including but not limited to connection to permanent housing, healthcare, legal services, professional development, and safety resources. This connection to services may be the form of on-site wraparound services, caseworkers, or a combination of the two, and would be conducted by culturally competent service providers who are sensitive to the unique needs of sex workers. Preference should be given to programs whose services would also be made available to community members not part of the housing program and which include peer-led services.

These pilot programs will serve people regardless of immigration status, and a portion of grants will be made available to programs with the skills to work with immigrant populations. These programs would not discriminate against people because of their gender identity. These programs would not require that anyone testify in court or cooperate with law enforcement in order to receive services.

<sup>&</sup>lt;sup>19</sup> Sadowski, L., et al. (2009) "Effect of a Housing and Case Management Program on Emergency Department Visits and Hospitalizations Among Chronically Homeless Adults." JAMA 301 (17), 1771-1778.

<sup>&</sup>lt;sup>20</sup> Chris Hanssmann, et al.

<sup>&</sup>lt;sup>21</sup> *Ibid*.

These programs will be based on proven Housing First and harm reduction models that do not predicate assistance on desisting from sex work or the use of drugs and alcohol.<sup>22</sup> When people are housed, they can better take care of other needs, and studies show that after housing is provided, dangerous drug and alcohol use diminishes, and the conditions that lead to arrest for sex work are greatly reduced. According to the US Interagency Council on Homelessness, a "Housing First system orientation recognizes that people experiencing homelessness…need the safety and stability of a home in order to best address challenges and pursue opportunities."<sup>23</sup> Housing First models are also more cost-effective than other means of providing housing and services: "One study found an average cost savings on emergency services of \$31,545 per person housed in a Housing First program over the course of two years. Another study showed that a Housing First program could cost up to \$23,000 less per consumer per year than a shelter program."<sup>24</sup>

A portion of the money awarded to each pilot program may be used for operational costs.

Organizations eligible to receive funds through this program must be community-based organizations that have sex workers in leadership and/or a values statement or mission that affirms the rights of people engaged in sex work and/or other organizations who have a demonstrated commitment to:

- serving transgender and gender non-conforming sex workers and sex workers of color;
- work with unhoused and/or system-involved and impacted transitional aged youth;
- people who are unhoused or facing housing insecurity;
- immigrant and/or undocumented sex workers;
- provide harm reduction services to people who use substances;
- provide inclusive and affirming community-based services to transgender, gender nonconforming, intersex, LGBQ people, and people living with HIV/AIDS; and who provide community-centered sexual and reproductive health care to communities of color, including HIV/AIDS prevention and outreach.

Priority would be given to organizations lead by sex workers with lived experience with housing insecurity.

Additionally, we request \$9 million for the Department of Healthcare Services to administer and evaluate the program, including creating a regionally diverse Program Development Advisory Board consisting of 10 individuals:

- at least two of whom are current or former sex workers, at least one of whom has experience doing street-based sex work
- at least two of whom are unhoused or formerly unhoused
- at least one representative of organizations that are led by current or former sex workers

<sup>&</sup>lt;sup>22</sup> Sharon McDonald. "Why Housing First? Why Not Housing Second? Or Third?" National Alliance to End Homelessness. June 2019. <u>https://endhomelessness.org/why-housing-first-why-not-housing-second-or-third/</u>.

<sup>&</sup>lt;sup>23</sup> United States Interagency Council on Homelessness. "Deploy Housing First Systemwide." August 2018. <u>https://www.usich.gov/solutions/housing/housing-first/</u>.

<sup>&</sup>lt;sup>24</sup> National Alliance to End Homelessness. "Housing First." April 2016. https://endhomelessness.org/resource/housing-first/.

- at least one person who works in public health in related fields and have a demonstrated history of working in partnership with sex worker communities
- at least one outreach worker who works with street-based sex workers
- at least one person who has a demonstrated history of working with houselessness or housing insecure populations

We strongly encourage the inclusion of this important pilot program in this year's budget. If you have any questions regarding this request, please contact Becca Cramer-Mowder with ACLU California Action at <u>bcramer@acluca.org</u> or (916) 824-3256.

Sincerely,

**ACCESS Reproductive Justice** ACLU California Action Advocating Opportunity All Family Legal Anti Police-Terror Project **API Equality-LA** Bay Area Sex Worker Advocacy Network (BAYSWAN) **Best Practices Policy Project** Break The Binary LLC California Latinas for Reproductive Justice California Nurse-Midwives Association California Women's Law Center Center for LGBTQ Economic Advancement & Research (CLEAR) Coalition on Homelessness Coalition to Abolish Slavery & Trafficking COYOTE RI Decriminalize Sex Work Decriminalize Sex Work California Coalition **Drug Policy Alliance** Ella Baker Center for Human Rights End the Epidemics Equality California Free Speech Coalition **GLIDE** Humboldt Area Center for Harm Reduction **Initiate Justice** Legal Aid at Work Long Beach Immigrant Rights Coalition Los Angeles LGBT Center Mental Health First Positive Women's Network-USA **Reframe Health and Justice** Sex Workers Outreach Project Los Angeles Sex Workers Outreach Project Sacramento

Strippers United SWOP Behind Bars The Gubbio Project The Sunita Jain Anti-Trafficking Policy Initiative The Sex Workers Project of the Urban Justice Center The Transgender District The TransLatin@ Coalition URGE: Unite for Reproductive & Gender Equity Woodhull Freedom Foundation

CC: Assemblymember Kalra Senator Wiener