

ON THE MOVE 2.0

**A Follow-Up Needs Assessment of Guys in the Sex Industry
Working in Toronto-Ottawa- Montréal-Québec**

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Winter 2020/2021

Context:

This survey is a follow-up to MAX Ottawa's *On The Move* survey conducted in Fall 2019/Winter2020,¹ and builds on those research findings. It operates within the same contextual framework: a Needs Assessment to gather information on the lived experiences and working conditions of male-identified and transmasculine workers in the commercial sex industries across Toronto, Ottawa, Montreal, and Quebec. The findings from this survey will be used by sex worker-supporting organizations to develop informed programs by and for male-identified and transmasculine sex workers. This project is a partnership between ACT (Toronto), MAX Ottawa, REZO (Montreal), and MIELS (Quebec City). For further contextual information on the background of this project, refer to the context section from the original *On The Move* report.

On The Move 2.0 serves as an addendum report and follow-up survey to MAX Ottawa's original *On The Move* survey and report. This second survey administration was initiated to gather a greater volume of data, particularly within Toronto, and address any material changes brought about by the COVID-19 pandemic. The pandemic has substantially impacted all aspects of life for Canadians across the spectrum. Life satisfaction has fallen drastically for Canadians from 2018 compared to 2020 with youth and immigrants disproportionately affected.² Mental health has been severely impacted with 44% of Ontarians reporting deteriorated mental health since March 2020.³ The pandemic has exacerbated financial precarity with 40% of Ontarians expressing financial concerns.⁴ Youth have been disproportionately affected with 24% of Canadian youth 15-29 not in employment, education or training (NEET) as of April 2020, the highest rate in 20 years,⁵ compared to a general unemployment rate of 13% at the time.⁶ Additionally, one fifth of Ontarians reported increased use of substances, specifically as a way to cope with the pandemic.⁷ Considering impact indicators across mental health, finances,

¹ Conrad, R. & Karam, K. (2020). *On The Move: A Needs Assessment of Guys in the Sex Industry Working in Quebec-Montreal-Ottawa-Toronto*. MAX Ottawa, <https://maxottawa.ca/wp-content/uploads/2020/11/MALE-SEX-WORK-DATA-REPORT-2020.pdf>.

² Helliwell, J.F., Schellenberg G., & Fonberg J. (2020). The COVID-19 pandemic and life satisfaction in Canada. *Statistics Canada*, <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00093-eng.htm>.

³ Canadian Mental Health Association & University of British Columbia (2020). New nationwide survey finds Ontarians' mental health eroding. *CMHA Waterloo Wellington*, <https://cmhaww.ca/news/new-nationwide-survey-finds-ontarians-mental-health-eroding/>.

⁴ Ibid.

⁵ Brunet, S. (2020). Impact of the COVID-19 pandemic on NEET (not in employment, education or training) indicator, March and April 2020. *Statistics Canada*, <https://www150.statcan.gc.ca/n1/pub/81-599-x/81-599-x2020001-eng.htm>.

⁶ Labour Force Survey, April 2020 (2020). *Statistics Canada*, <https://www150.statcan.gc.ca/n1/daily-quotidien/200508/dq200508a-eng.htm>.

⁷ New nationwide survey finds Ontarians' mental health eroding (n3).

substance use, and overall wellbeing, an updated data set to account for the substantial changes brought on by the COVID-19 pandemic was needed.

Survey Objective:

This series of surveys, *On The Move* and *On The Move 2.0*, is interested in surveying male-identified and transmasculine individuals working in the commercial sex industry in one or more cities within the Toronto-Ottawa-Montreal-Quebec City corridor. The aim is to identify the needs and concerns of these workers within the commercial sex sector. This survey data will be used by sex worker-supporting organizations to properly inform the development of programs by and for male-identified transmasculine sex workers.

On The Move 2.0 seeks to create a more robust data set for Toronto. As well, the second survey intends to gather more information in the context of COVID-19. With these two additional objectives in mind, we seek to identify which findings from the original survey can be corroborated, and what significant changes to community needs may have arisen over the course of the pandemic.

Study Design & Limitations:

In this survey we define sex workers as those who engage in, but not limited to, escorting, erotic dancing, stripping, adult-entertainment performance, camming, street-based sex work, erotic modelling, erotic massaging, “sugar baby” relationships, and/or the exchange of sexual services for money.

The survey consisted of 90 questions that pertain to the needs, safety, and concerns of male-identified and transmasculine sex workers through the lens of physical, mental, and financial wellbeing. Due to restraints of the COVID-19 pandemic, the survey and resultant data was solely disseminated and collected via an online survey with targeted promotion centered around Toronto-based networks. It should be noted that this narrow method of survey dissemination may have precluded responses from folks without internet access or low levels of technological literacy, and impacted survey findings.

The responses were collected throughout late 2020 and early 2021 during the COVID-19 pandemic with the intent to compensate for limitation of the initial survey. As such, this data and report accounts for new trends and shifting priorities that pertain to sex workers in the context of the COVID-19 pandemic.

In addition to the 50 respondents from the initial survey, this second survey administration garnered 55 respondents. The findings that can be extrapolated from this data set are limited, but not insignificant. These results further build on and corroborate the findings of the initial survey. The full survey and data can be accessed after the summary of key findings below.

Key Findings:

The findings from the initial survey have been largely corroborated with some additional insight:

1. **Most male sex workers start in the industry in their early twenties with a majority reporting it as their main source of income.** 62% of respondents indicated that they started sex work between the ages of 18-25 with no respondents starting sex work after the age of 35. 60%, compared to 43% in the initial survey, reported having started sex work for their main source of income. 9% of respondents, similar to 10% in the initial survey, started sex work to finance their post-secondary education.

It should be noted that 16% of respondents started sex work within the last year. As well, one in four (25%) respondents were aged 19-25, compared to 12% in the initial survey. As well, 33% of respondents, up from 25.2%, are precariously housed (i.e., shelters, homeless, without their name on the lease/contract of ownership). Given the onset of the COVID-19 pandemic within the last year, this may reflect increased financial precarity and unemployment, especially felt by younger populations. Some respondents expressed that sex work is providing income at a time when traditional avenues of employment have become scarce.

2. **Male sex workers feel like they face bias, judgement, and discrimination with traditional healthcare providers** with 55% of respondents expressing the importance of disclosing their sex work to a health care provider, but only 33% expressing having actually disclosed their sex work to a health care provider. 38% of respondents reported the main service they utilize as a result of their line of work is STBBI testing with 11% of respondents accessing this through a walk-in clinic, and 11% accessing this through a family doctor. Respondents highlighted the importance of supportive, non-judgmental, free/low-cost services that are attuned to sex worker, queer, and trans issues.

48% of respondents from the initial survey said they rely on walk-in clinics for health and wellness services related to sex work, compared to the above mentioned 11% in this second survey. As well, in the initial survey, there were no statistically significant responses regarding respondents accessing health and wellness services via a family doctor, where 11% reported accessing these services via a family doctor in the second survey. Given the context of COVID-19, this drop in reported walk-in clinic use/access may reflect the service restrictions and closures of STBBI testing clinics and services in Toronto. Respondents expressed difficulty in accessing services for numerous reasons including long wait times/waiting lists. It appears individuals may be opting for points of access for health and wellness services related to sex work that they may have previously shied away from, such as their family doctor.

- 3. Male sex workers *still* reported challenges with stigma and their ability to live a “normal life.”** 78% of respondents reported facing stigma or shame for being a sex worker with around 20% of respondents across both surveys expressing that sex work related stigma affected their mental health. The majority of respondents (42%) stated they’re most comfortable seeking support from other sex workers as opposed to friends, partners, therapists, or outreach workers. This highlights a need for peer-to-peer support programming.

Additionally, a larger contingent of respondents (62%) in the most recent survey, compared with 39%, showed interest in connecting *online* with other sex workers in their city. Expressed interest to connect with other sex workers in person decreased from 37% to 22% with respondents noting they’d be willing to connect in person when it becomes safer to do so. This clearly reflects the closure of many community spaces and the need to socially distance during the COVID-19 pandemic.

- 4. Sexual health is *still* top-of-mind for male sex workers.** 95% of respondents are aware of their HIV status and over three-quarters (76%) reported getting tested for sexually transmitted and blood-borne infections (STBBIs) at least once every three months. However, many respondents reported facing stigma where other people would say they “had AIDS and were spreading it,” or that they were “dirty” and spreading STBBIs. The data points to the contrary.

When it comes to condom compliance, almost two-thirds (61%) of respondents reported using condoms most of the time to always. Additionally, it’s estimated that in Ontario roughly 4000 people are using pre-exposure prophylaxis (PrEP) out of over 30,000 people that could potentially benefit from the drug.⁸ That is roughly a 13% rate of PrEP uptake. One in five survey respondents reported being on PrEP (20%), and 91% of respondents started PrEP due to their sex work. It should be noted that about 7% of respondents expressly mentioned the prohibitive cost of PrEP as a barrier to uptake.

These findings further corroborate that most male sex workers are on top of their sexual health much like activists have argued for decades.

- 5. Male sex workers think that the criminalization of sex work puts the community’s safety at risk.** 26% of respondents, compared to 38% in the initial survey, said that Canada’s current legislation on sex work (i.e., the criminalization of purchasing sex work)⁹ infringes on individual rights and freedom by putting those involved in the industry at risk, specifically by fostering a riskier business environment with little to no legal protections. 64% of respondents reported being arrested, threatened with arrest

⁸ Tan, D., Dashwood, T., Wilton, J., Kroch, A., Gomes, T., & Martins, D. (2019). PrEP uptake in Ontario remains far below guideline recommendations despite favourable policy changes. *28th Annual Canadian Conference on HIV/AIDS Research Poster Presentation [EPHP107]*. Saskatoon.

⁹ *Protection of Communities and Exploited Persons Act*, SC 2014, c 25.

or convicted of a crime related to sex work, and 46% of respondents reported being threatened with eviction due to sex work. Almost one in four respondents (24%) stressed that they wanted government to know that the current legal status of sex work makes sex work more dangerous by pushing it underground opening workers up to exploitation. A respondent emphasized, “whether a person is cis or not and the more marginalized you are the more you have to make decisions based off of survival and not necessarily safety.”

Further key findings include:

6. **Most male sex workers did not start using illegal substances during sex work, nor do they engage in sex work for the exchange of illegal substances contrary to stereotypes connecting sex work to substance use.** Three out of four respondents did not start using illegal drugs during sex work (71%), nor do they exchange sexual services for illegal drugs (78%). A greater number of respondents (35%), compared to 29%, said they abstain from using illegal drugs while they work. For most respondents sex work is not a causal factor for substance use.
7. **Male sex workers are experiencing a strain on mental health, and requesting better access to mental health services and supports.** Overall mental health in the second survey is markedly worse with 61% of respondents reporting mental health being fair to poor and no respondents reporting excellent mental health. The initial survey showed overall mental health more evenly stratified with 36% of respondents reporting fair to poor mental health and 22% of respondents reporting very good to excellent mental health. Greater rates of depression and anxiety were reported with 31.7% and 48%, respectively, compared to 62% and 67% in the previous survey. The greater degree of poor mental health, anxiety, and depression reported may reflect the impact of the COVID-19 pandemic mental health. Respondents expressed the need for more mental health supports with lower barriers to access.
8. **Financial stability affects the level of risk male sex workers are willing to take on with jobs and clients. Increased financial precarity and riskier jobs negatively impact the mental health of male sex workers.** 82% of the respondents, up from 50% in the initial survey, reported facing challenges with mental health *as a result of their work*. 20% of respondents reported the degree to which sex work affected their mental health was contingent on their financial stability/precarity. Respondents described taking riskier jobs/clients to cover basic living expenses. This suggests the benefits of, not only sex work-positive mental health supports, but also a universal living wage in mitigating risks associated with sex work in the current legal climate.
9. **Male sex workers strongly believe full legalization of sex work is an issue of labour rights and access to employment.** 40% of respondents said the criminalization of purchasing sexual services is an issue of access to employment and bodily autonomy. 35% of respondents emphasized that “sex work is real work,” while framing sex work as

a *consensual* service that provides a means to earn a living. Some respondents also highlighted that sex work is *accessible* for folks that are often excluded from traditional forms of labour including trans and disabled folks. With 87% of respondents, compared to 58% in the initial survey, dependent on their income from sex work to pay for basic living expenses (i.e., rent, mortgage, utilities, food), the criminalization of sex work unduly restricts access to labour that is necessary for the provision of shelter and food, which are particularly important in the context of the COVID-19 pandemic.

These findings strongly suggest that the risks associated with sex work faced by male-identified and transmasculine sex workers are largely a product of systemic factors including legality, financial security, and the job market as opposed to factors inherent or intrinsic to sex work itself.

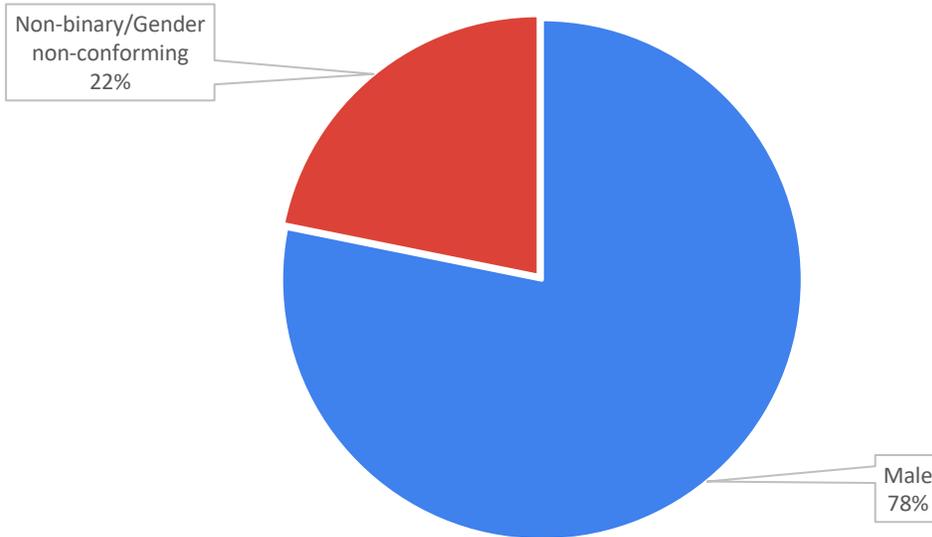
Sex work is real work and all Canadians deserve equal rights, freedoms and safety. Further steps are required for the advancement of health and safety programs and services as well as an informed evidence-based approach in the development of intervention programs for this underrepresented group.

*Cover image from Hustler White (1996). Courtesy of Toronto's own Bruce LaBruce.

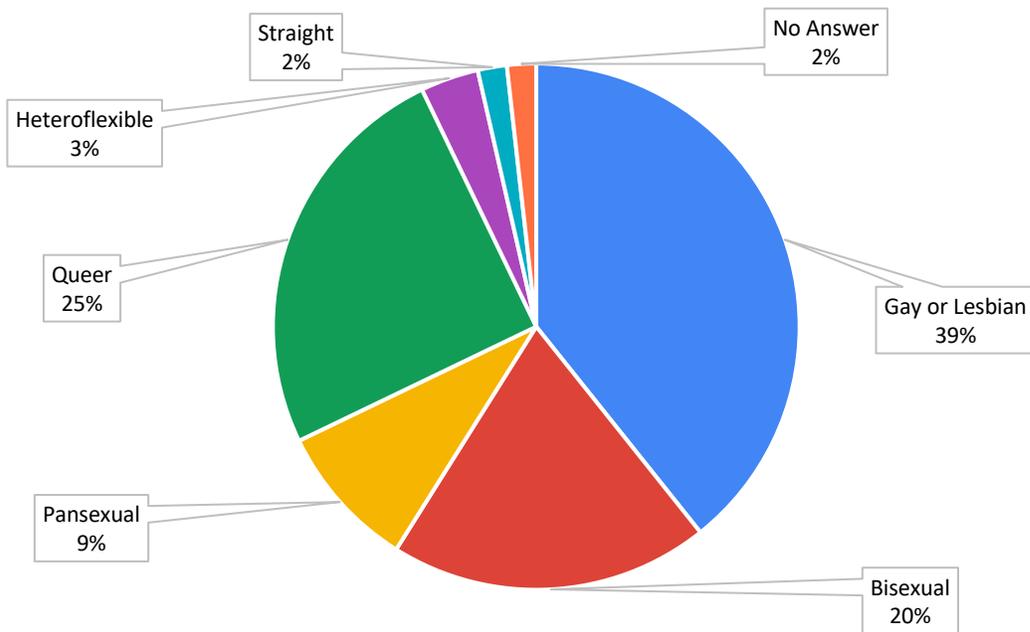
Survey Data (n=55):

DEMOGRAPHICS

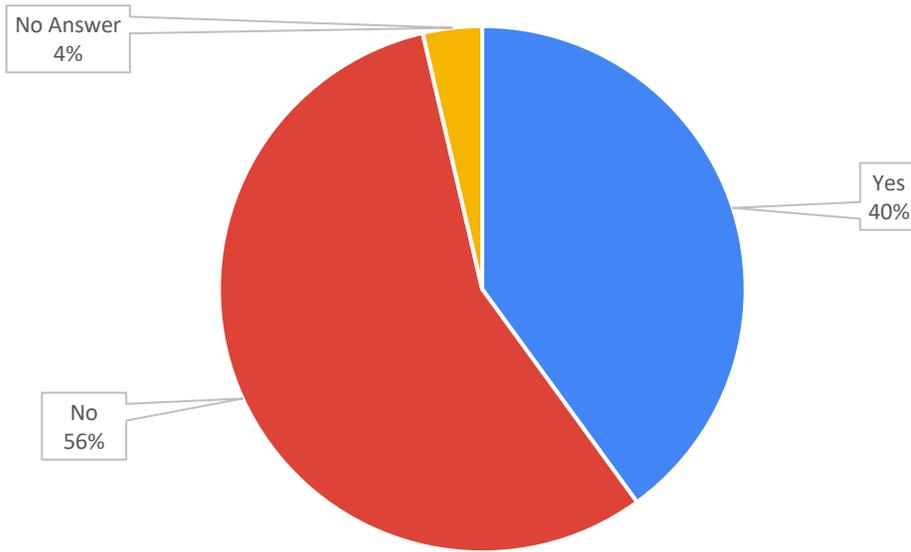
Q1: Gender



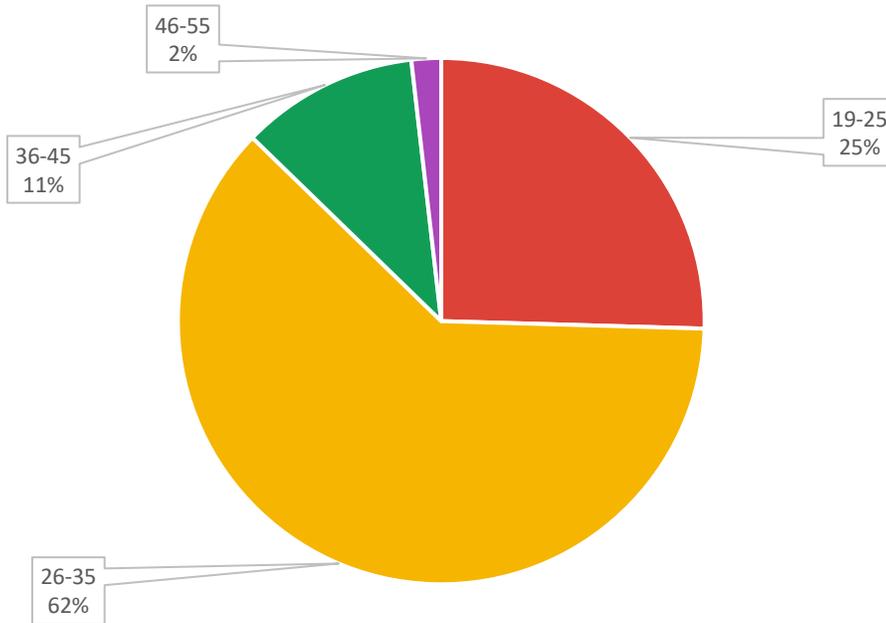
Q2: Sexual orientation



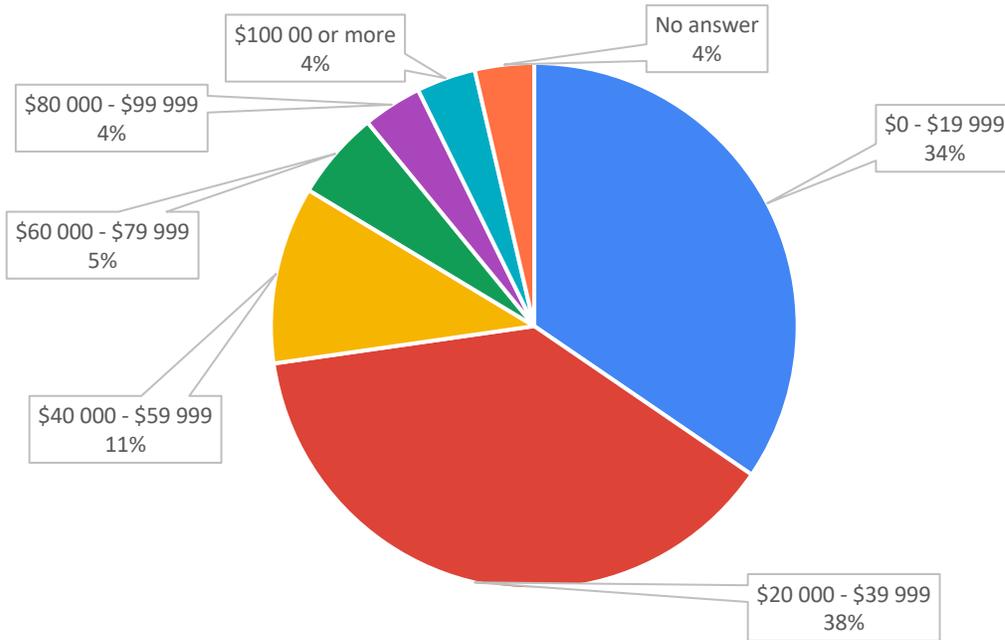
Q3: Do you identify as trans?



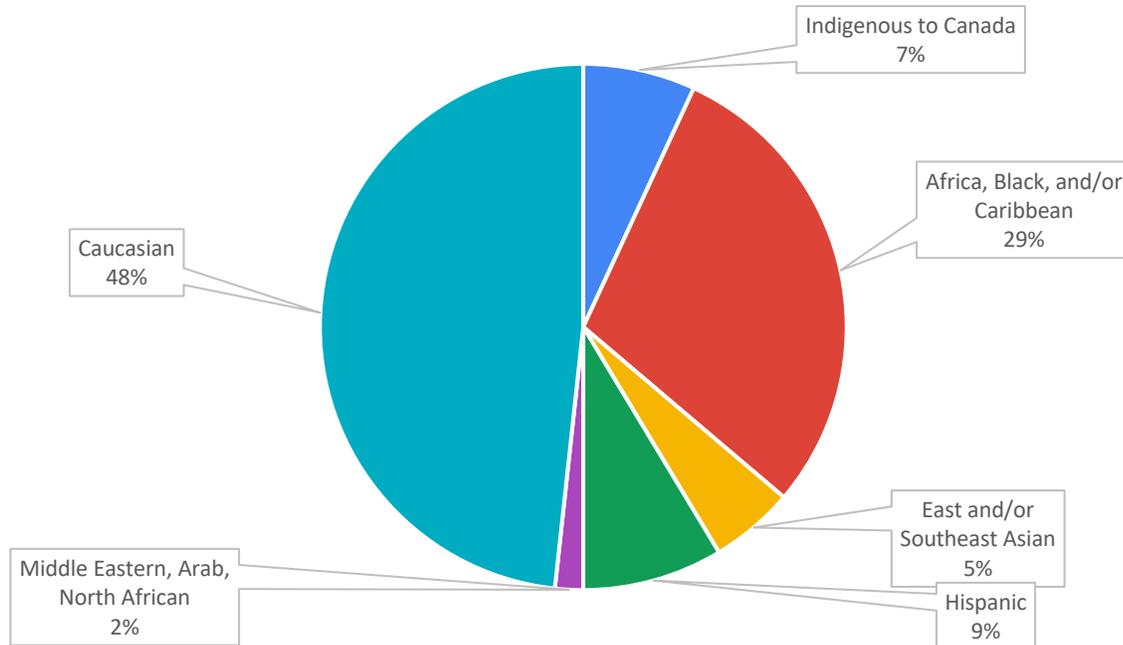
Q4: Age category



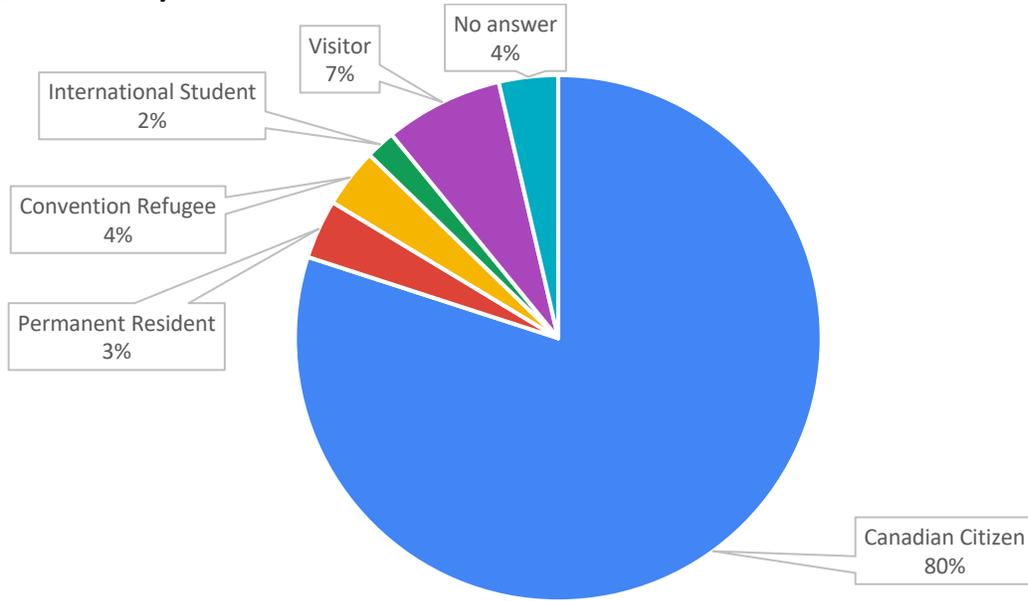
Q5: My yearly income is (Please include all forms of income including salary, pay, student loans, other form of payments):



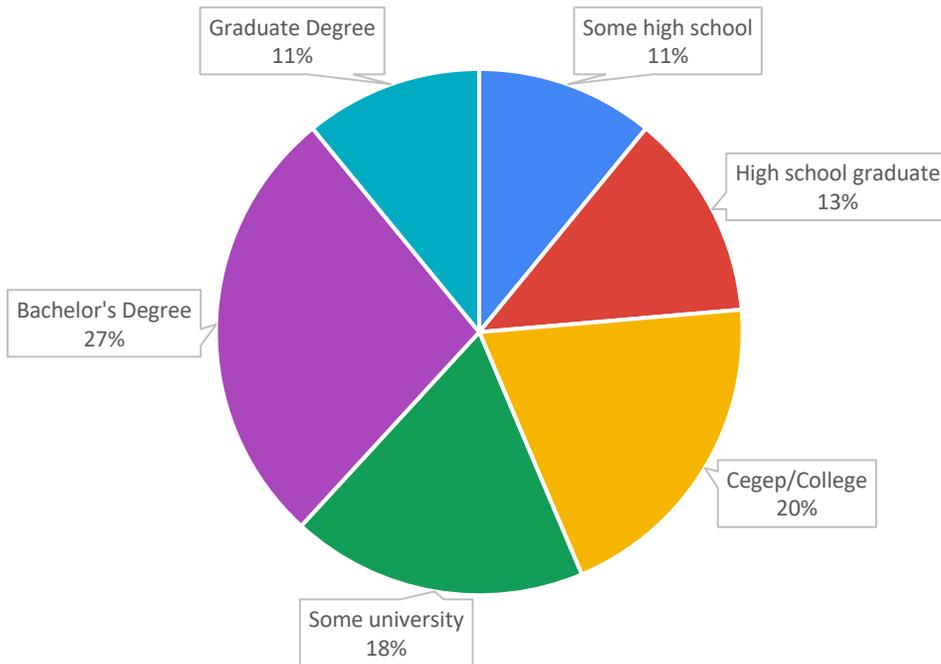
Q6: Ethnicity



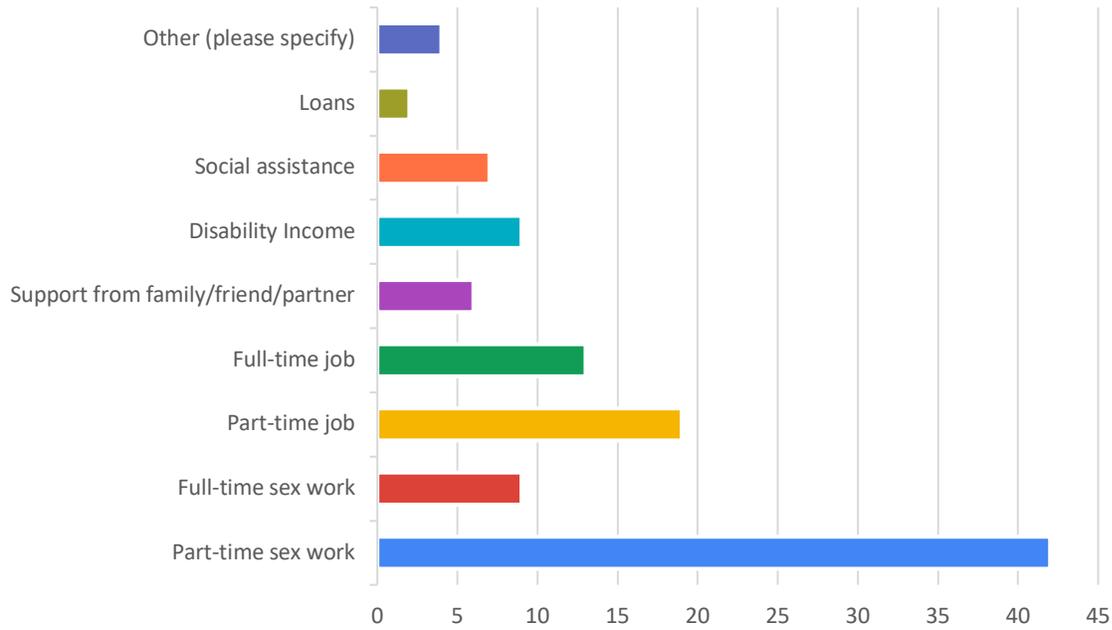
Q7: Residency Status



Q8: What is your highest level of education?

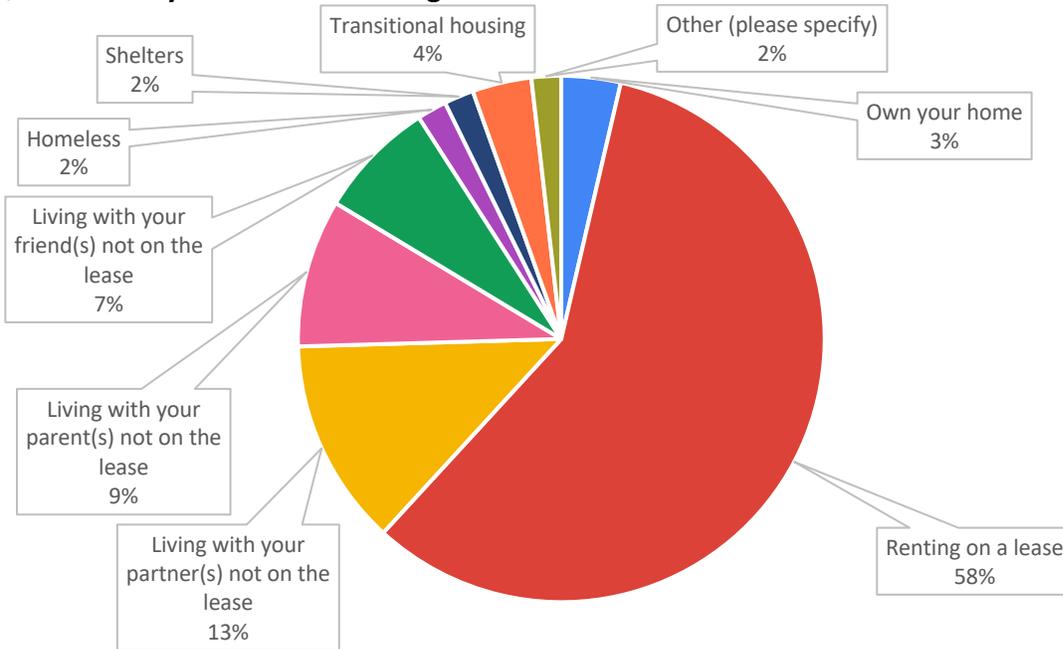


Q9: What are your sources of income? (select all that apply)



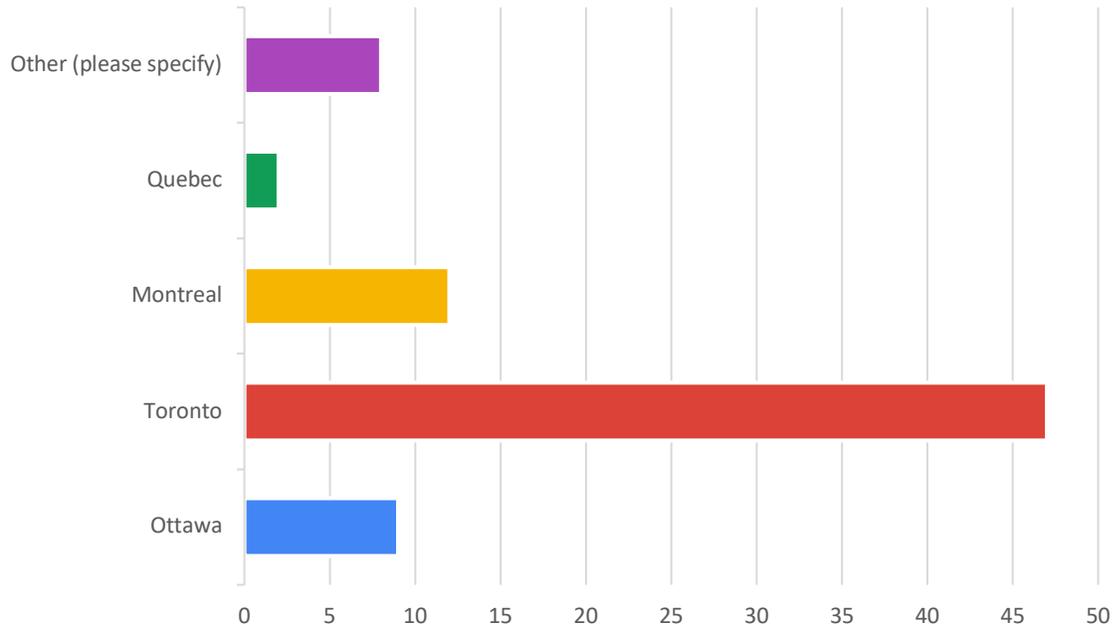
Other: Self-employed, University grants, Artist grants

Q10: What is your current housing situation?



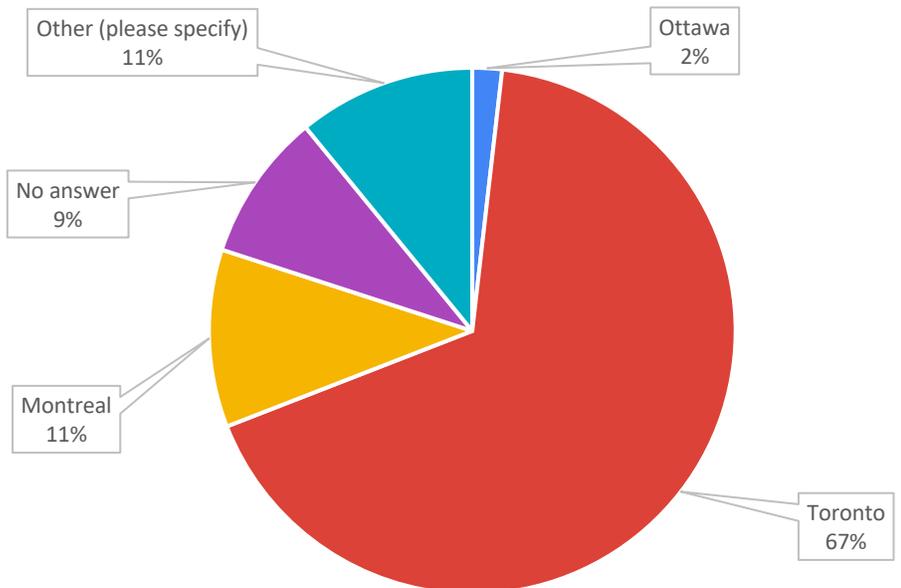
Other: Subletting

Q11 Which cities do you work in? (select all that apply)



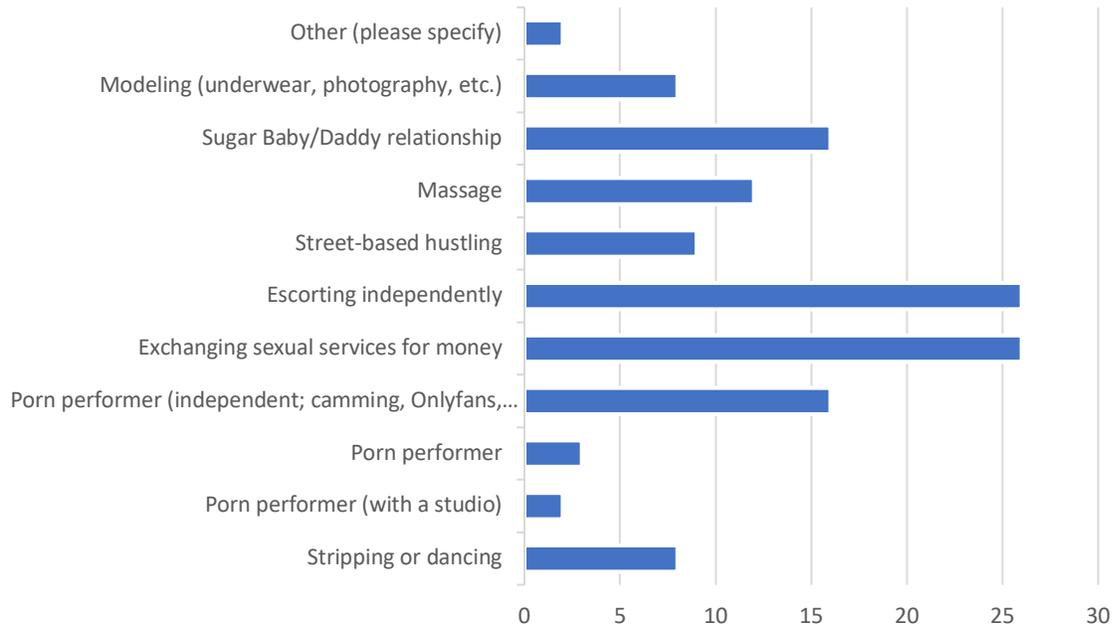
Other: GTA, Hamilton, Niagara Falls, Vancouver, Buffalo, USA

Q12: Which city do you primarily reside in?



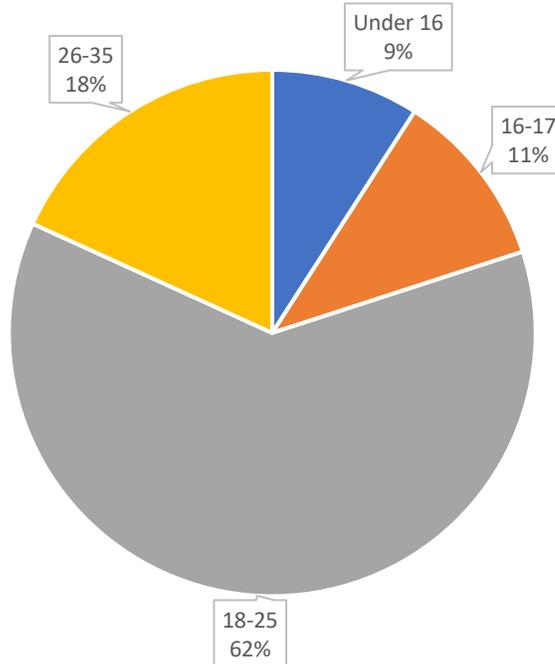
Other: Mississauga, Hamilton, Niagara Falls, Vancouver, No primary residence

Q13: Which of the following describes your engagement in sex work? (select all that apply)



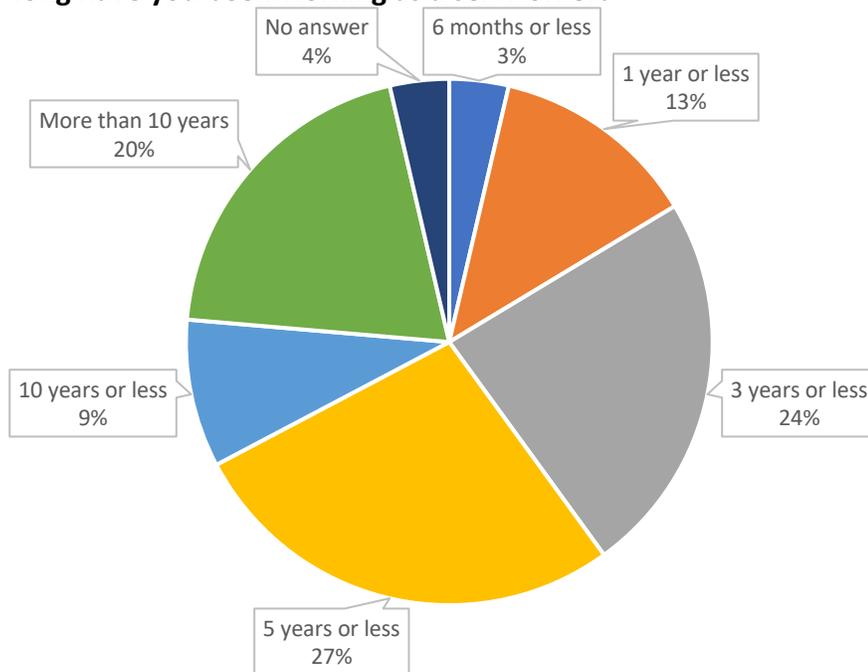
Other: Phone sex, Fin Dom, Dominatrix

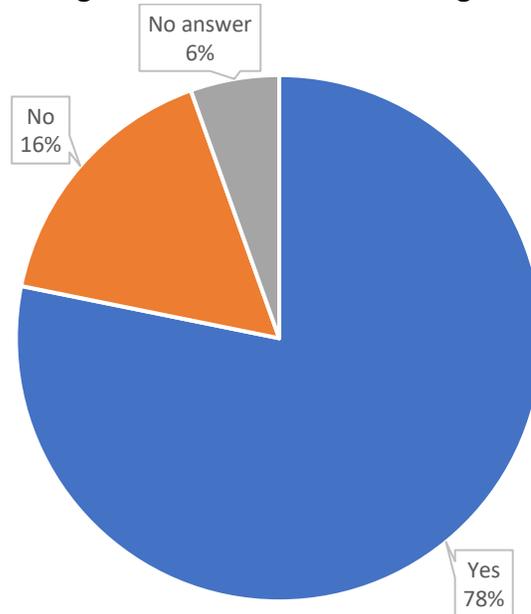
Q14: At what age did you start working as a sex worker?



Q15: What was your reason(s) to start sex work?

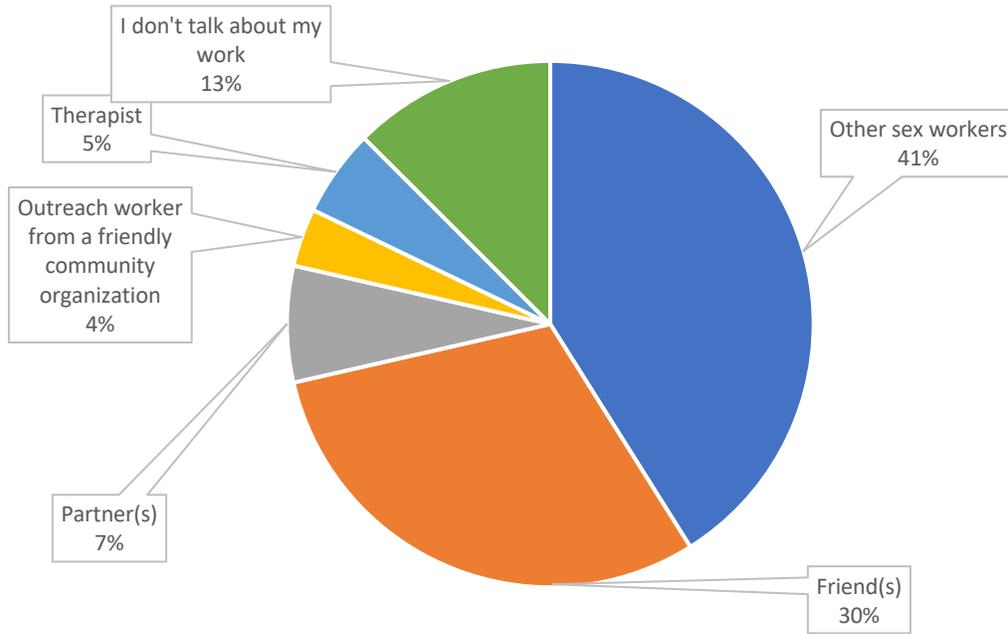
- ❖ 60% of respondents said the reason they started sex work was to make money (main income).
- ❖ 15% of respondents said the reason they started sex work was to make extra money (secondary income).
- ❖ 13% of respondents cited interest, empowerment, or enjoyment as a reason they started sex work.
- ❖ 9% of respondents said the reason they started sex work was to make money to pay for school.
- ❖ 9% of respondents cited barriers to mainstream employment as a reason they started sex work.
- ❖ 7% of respondents cited loss of employment as a reason they started sex work.
- ❖ No other statistically significant responses to report.

Q16: How long have you been working as a sex worker?

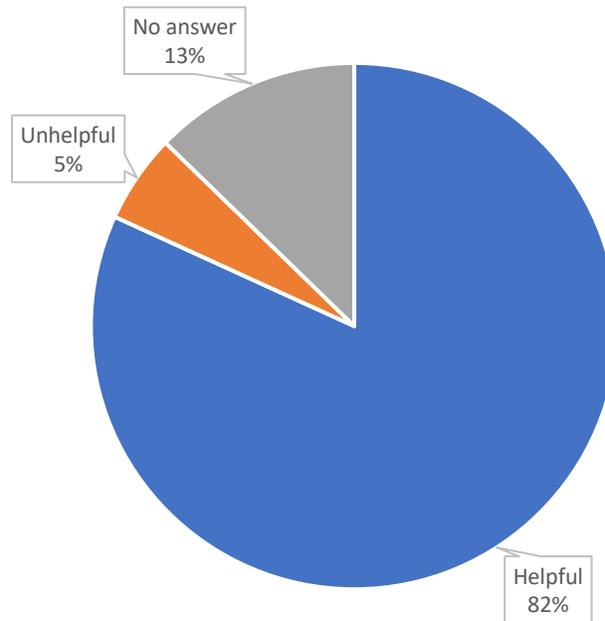
Q17: Have you ever been stigmatized or shamed for being a sex worker?**Q18: If you wish, please share an example of stigma that you have faced or currently experienced?**

- ❖ 47% of respondents mentioned facing some form of shaming or judgmental reaction when discussing their sex work.
- ❖ 9% of respondents have been told to get a “real job” or that sex work isn’t real work.
- ❖ 9% of respondents have reported losing family and friends when they disclose their sex work.
- ❖ 9% of respondents reported people thinking they have HIV/AIDS and other STBBIs.
- ❖ Some respondents also expressed facing pity and being labelled “broken” or a “lost soul”.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents have been met with physical violence and threats of blackmail from clients and members of the general public.

Q19: When you're having a hard time with work and want to talk about it, who are you most comfortable confiding in?



Q20: When having a hard time, would talking to other people in the industry be helpful or unhelpful to you? How so?



- ❖ Reasons respondents found it helpful to talk to other sex workers: talk to people with similar lived experiences, check how business is doing, networking, mentorship, moral support, and lack of judgment.
- ❖ Reasons respondents found it unhelpful to talk to other sex workers: competitive behaviour among sex workers, discretion around sex work, differing motivations to engage in sex work, not acknowledging differences in privilege, and lack of transparency.

Q21: How would you like to connect with other sex workers in your city?

- ❖ 62% of respondents said that connecting online (via an app, social media, online forum, email) would be a good way to connect with other sex workers, especially during the COVID-19 pandemic.
- ❖ 22% of respondents said connecting in-person would be a good way to connect with other sex workers. However, many recognized this would not be possible during the current COVID-19 pandemic.
- ❖ 18% of respondents said that connecting in a group setting, either online or in-person, would be a good way to connect with other sex workers.
 - Some respondents stated they preferred one-on-one settings to connect.
- ❖ 7% of respondents cited anonymity as a concern when connecting with other sex workers.
- ❖ No other statistically significant responses to report.
- ❖ A respondent expressed the desire for opportunities to connect among trans masc/fluid sex workers.
- ❖ A respondent said they wanted opportunities to connect with other sex workers that didn't only focus on street-based sex work.

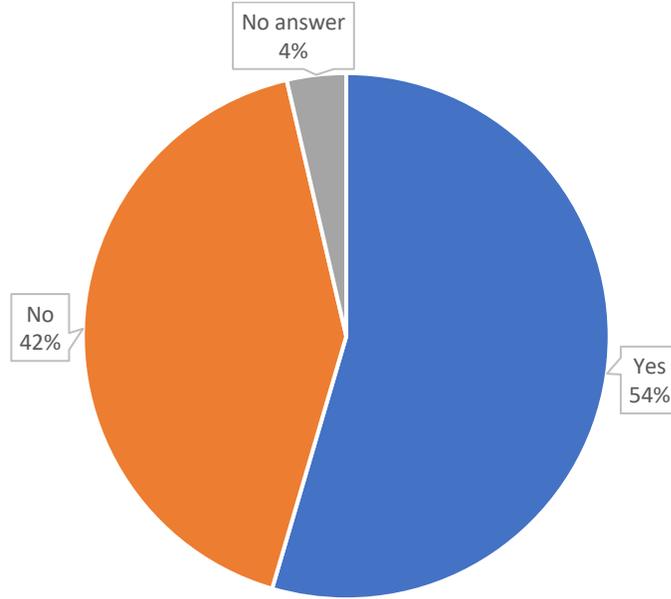
Q22: What are you most concerned about when it comes to your safety?

- ❖ 53% of respondents said that physical assault is an area of concern to them when it comes to their safety.
- ❖ 22% of respondents said that their sexual health is an area of concern to them when it comes to their safety.
- ❖ 9% of respondents said that anonymity and protection of personal information is an area of concern to them when it comes to their safety.
- ❖ 7% of respondents said that legal implications around sex work is an area of concern to them when it comes to their safety.
- ❖ No other statistically significant responses to report.
- ❖ Some other respondents cited COVID-19, transphobia, drug use, date rape, and respecting boundaries as areas of concern when it comes to safety.

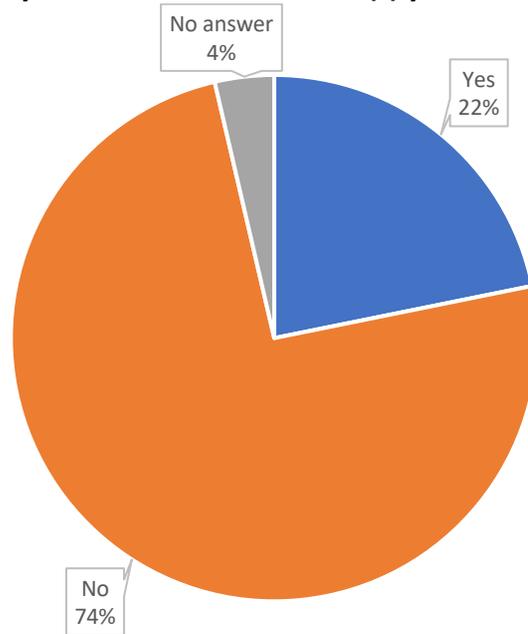
Q23: What steps do you take to ensure you're working safely?

- ❖ 36% of respondents said that they notify a friend, partner, or roommate of their whereabouts and stay in contact to ensure they're working safely.
- ❖ 25% of respondents said that they screen clients before meeting them to ensure they're working safely.
- ❖ 24% of respondents said to ensure they're working safely they use a variety of approaches to protect their sexual health including barriers, lube, IUDs, PrEP, and regular STI testing.
- ❖ 13% of respondents said that they carry a weapon to ensure they're working safely.
- ❖ 7% of respondents said they take screenshots and/or record client information for their personal records in case of an incident to ensure their safety.
- ❖ 7% of respondents said they protect their personal information (e.g. use an alias, VPN, etc.) to ensure their safety.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents mentioned staying sober while working to ensure they're working safely.

Q24: Have you ever heard of a bad date list?



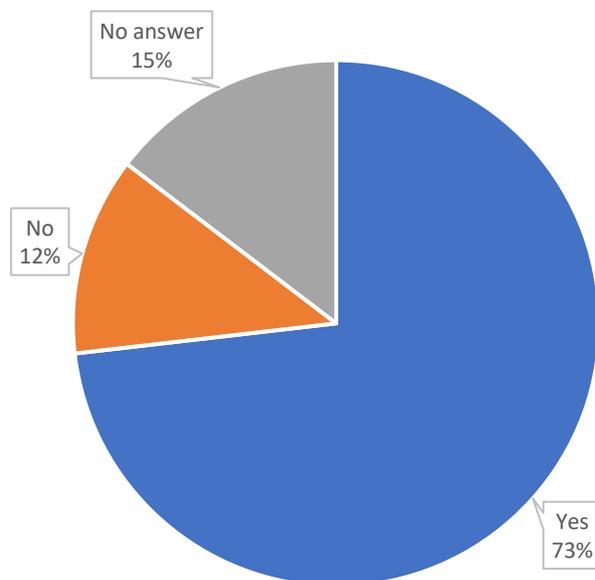
Q25: Do you know of any bad date lists in the area(s) you work?

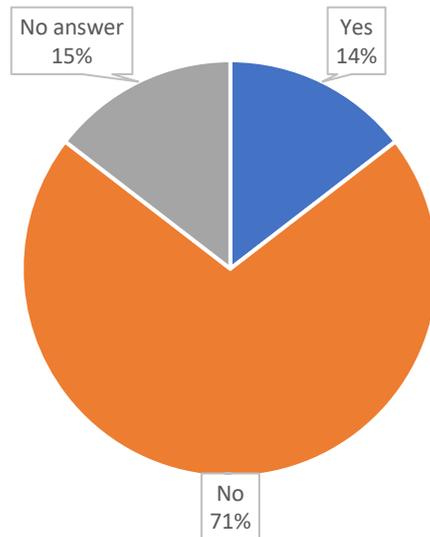


Q26: If yes, where have you obtained your bad date list from? (n=13)

Of those that said yes,

- ❖ 46% of respondents reported accessing bad date lists from community groups or organizations such as Maggie's, Indy Companion, and ASOs (AIDS Service Organizations).
- ❖ 23% of respondents reported sharing bad date information among peers via word of mouth.
- ❖ 15% of respondents reported obtaining bad date lists online (e.g., private Facebook groups, Instagram, etc.)
- ❖ No other statistically significant responses to report.
- ❖ One respondent noted that most bad date lists haven't been helpful as there is minimal client overlap between cis and trans sex workers.

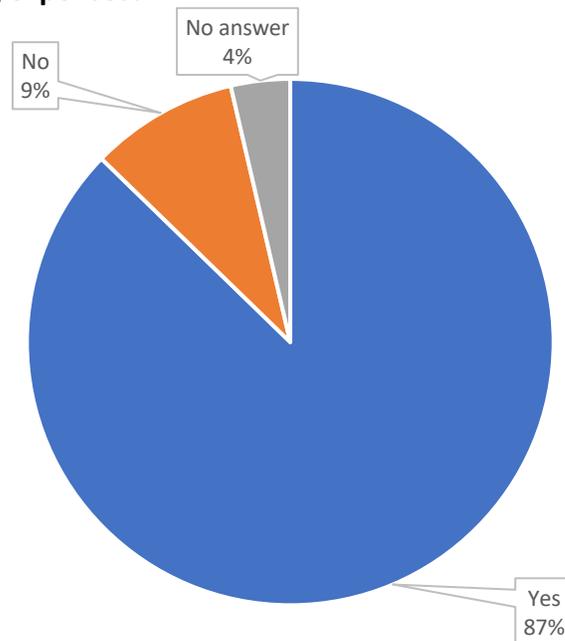
Q27: If no, would you like to have one? (n=41)

Q28: Have you referred others to a bad dates list when booking clients?**Q29: Does the criminalization of the commercial sex industry worry you or impact how you do your job? Why/why not? And if yes, how?**

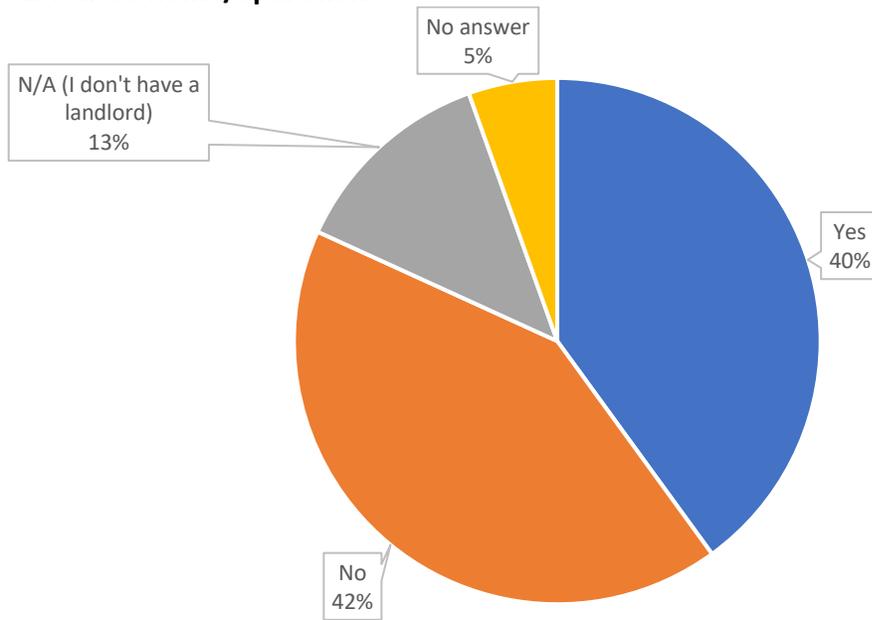
- ❖ 75% of respondents said that criminalization of the commercial sex industry does worry and/or impact them.
 - 31% of respondents said that criminalization of the commercial sex industry causes increased feelings of insecurity including financial, housing, and job security.
 - 29% of respondents said that criminalization of the commercial sex industry causes them to worry about legal implications including interactions with the police and facing criminal charges.
 - 27% of respondents said that criminalization of the commercial sex industry causes them to worry for their safety.
 - 15% of respondents said that criminalization of the commercial sex industry has negatively impacted their ability to communicate with clients and advertise their services.
 - 13% of respondents said that criminalization of the commercial sex industry fuels stigma around sex work.
 - 7% of respondents said that criminalization of the commercial sex industry contributes to feelings of isolation from friends and family.
 - Some respondents expressed that the criminalization of the commercial sex industry created a barrier to accessing health services,
- ❖ 25% of respondents said that criminalization of the commercial sex industry does not worry them.
 - Some respondents noted that online platforms such as OnlyFans and JustForFans have made them feel safer when engaging in sex work.
 - Some respondents noted that while criminalization of the commercial sex industry doesn't worry them, it does impact their work.
- ❖ No other statistically significant responses to report.

Q30: Are there changes you'd like to see regarding the legal status of sex work in Canada?

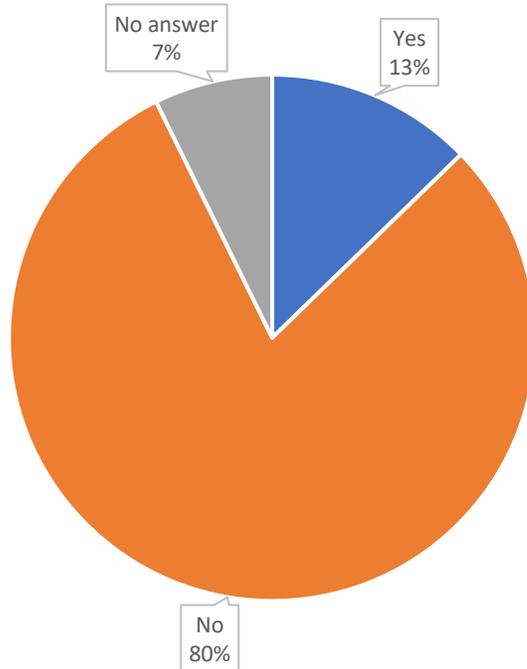
- ❖ 93% of respondents said that they wanted to see changes to the legal status of sex work.
 - 25% of respondents said that the change they'd like to see regarding the legal status of sex work in Canada is to decriminalize sex work.
 - 45% of respondents said that the change they'd like to see regarding the legal status of sex work in Canada is to legalize sex work.
 - 11% of respondents emphasized changing the legal status of soliciting sex work on the client side.
- ❖ 7% of respondents said that they didn't want to see any changes regarding the legal status of sex work.
- ❖ No other statistically significant responses to report.
- ❖ Respondents cited a variety of reasons for changes to the legal status of sex work in Canada including the recognition of sex work as real work, methods for legal recourse, labour rights, protection from discrimination, the reduction of stigma, safety, and enabling other systems and structures of support (i.e. health care).
- ❖ Some respondents expressed concerns of exploitation if sex work were to be legalized and regulated in terms of extracting profits from sex workers.

Q31: Do you use your income you make from sex work to pay for your rent-mortgage, utilities, and/or living expenses?

Q32: Have you ever been worried about being evicted by your landlord for seeing clients at your rented home/apartment?



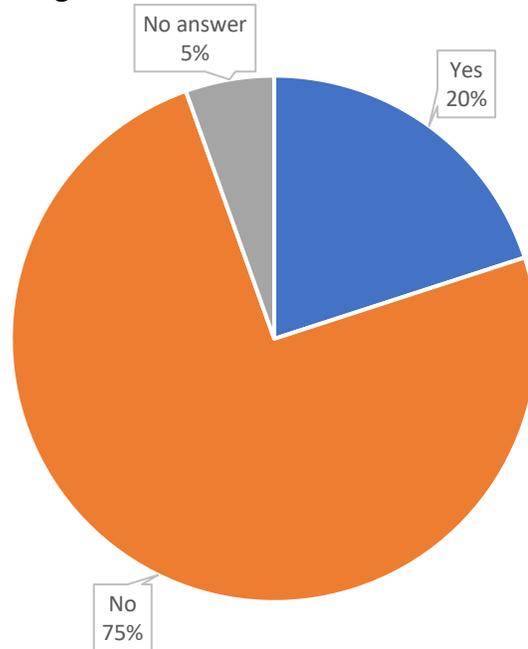
Q33: Have you ever been arrested, threatened with arrest, or convicted for a crime because of sex work?



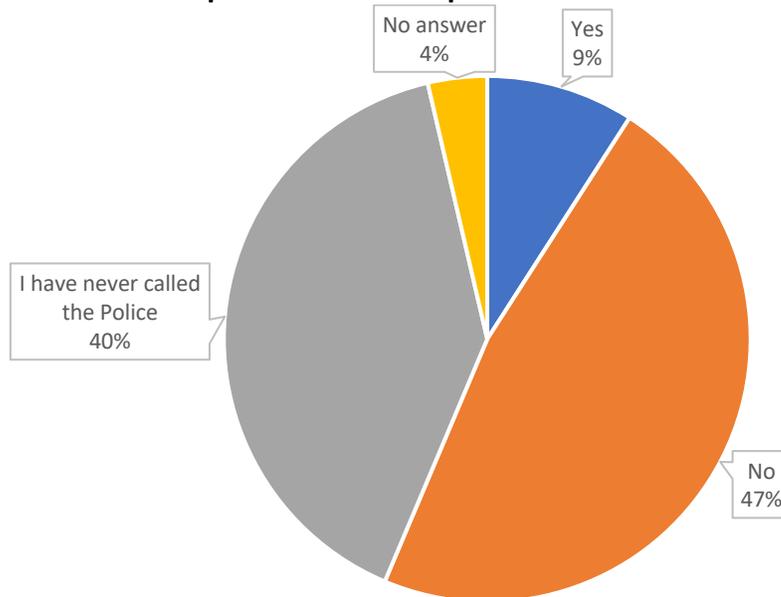
Q34: If yes, can you describe what happened? (n=7)

Of those that said yes,

- ❖ 71% of respondents reported being threatened with arrest and harassed by the police.
- ❖ 29% of respondents reported being threatened with arrest by non-police individuals (i.e., client, landlord, citizen).
- ❖ One respondents mentioned being arrested for 'street working'.
- ❖ No other statistically significant data to report.

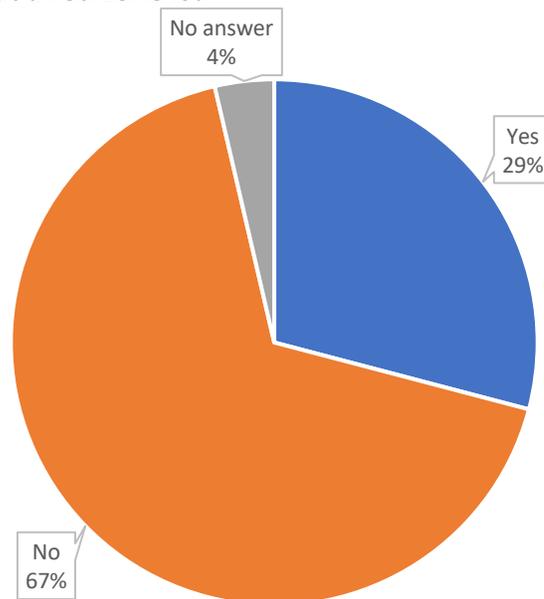
Q35: Have you ever been stigmatized or harassed by law enforcement because of past interactions for sex working?

Q36: Have you ever had to call law enforcement and because of the situation with a client and then had a bad experience with the police?



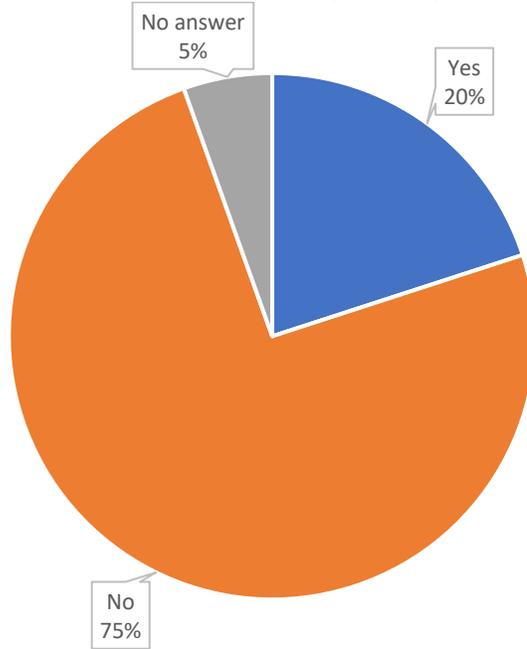
The next series of questions discusses red zones. Red zones are a set area, “that restrict where individuals out on bail can physically be.”¹⁰ These areas tend to be downtown, where many health and social supports are located. They effectively restricting movement and access.

Q37: Do you know what a red zone is?

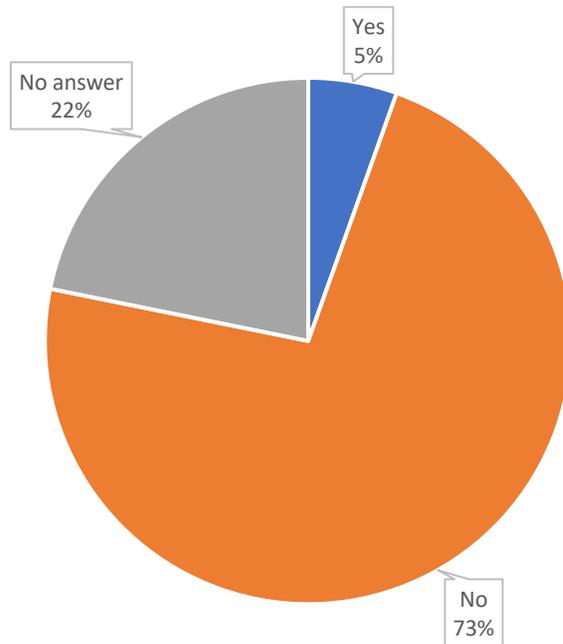


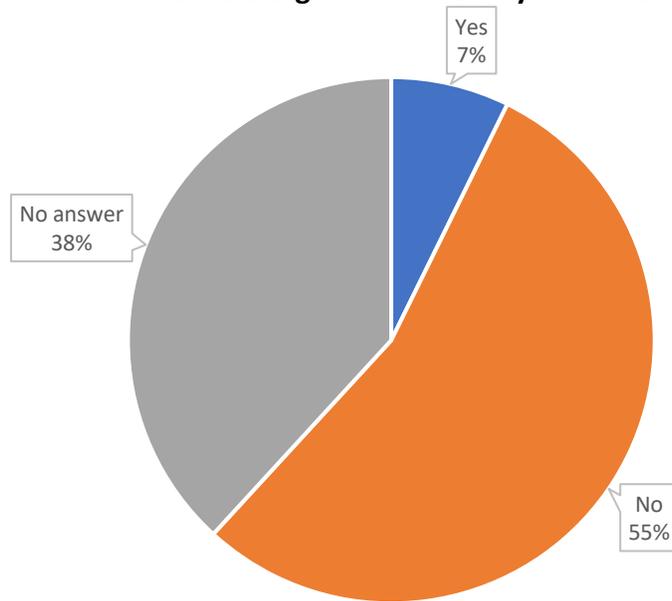
¹⁰ Larkin, D.J. Red zones set up marginalized people for failure (2017). *The Globe and Mail*, <https://www.theglobeandmail.com/opinion/red-zones-set-up-marginalized-people-for-failure/article37027696/>.

Q38: Do you know where the red zone(s) are in your city?



Q39: Have you ever been removed from a red zoned area while trying to seek aid for your health and wellness?



Q40: Are any health and wellness organizations that you utilize in a red zone area?**Q41: Which ones?**

- ❖ 25% of respondents were unsure or didn't know what a red zone is.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents noted the 519, Quorum Clinic, and counselling services as organizations they utilize in red zone areas.

Q42: The current laws in Canada criminalize the purchase of sexual services. Do you feel this respects your rights to freedom and safety as defined by our constitutional charter of rights? Explain.

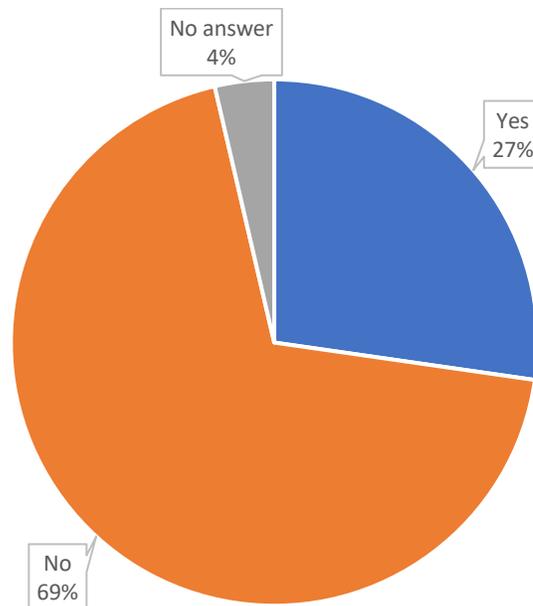
- ❖ 24% of respondents said that they feel this doesn't respect their constitutional charter rights because it limits their ability to engage in work/labour.
 - Respondents noted that sex work should be recognized as legitimate work as it is a consensual business transaction.
- ❖ 16% of respondents said that they feel this doesn't respect their constitutional charter rights because it restricts bodily autonomy.
- ❖ 13% of respondents said that they feel this doesn't respect their constitutional charter rights because it creates a riskier business environment for all parties involved.
- ❖ 13% of respondents said that they feel this doesn't respect their constitutional charter rights because they don't have proper legal protection or recourse to ensure safety.
- ❖ No other significant responses to report.
- ❖ Some respondents expressed the belief that the law in question wasn't meant to protect charter rights, but was intended to enforce economic surveillance and control.

Q43: Can you picture a future where sex work is completely decriminalized and you can freely start a business, hire security, unionize, work with other sex workers, and be able to pay your taxes? What would you do, or what would sex work look like to you if it was completely decriminalized?

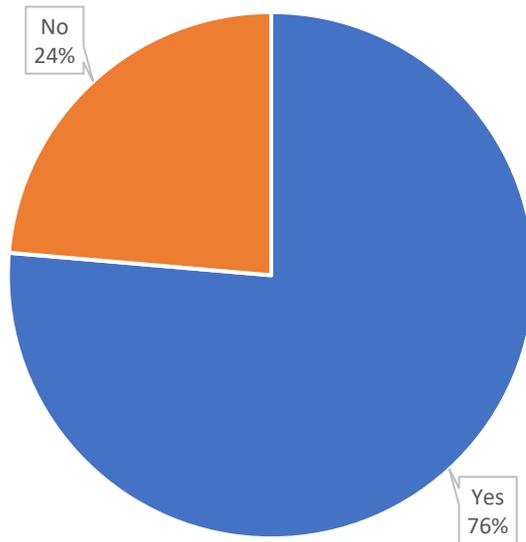
- ❖ 75% of respondents said they could picture a future where sex work was completely decriminalized.
- ❖ 22% of respondents said they couldn't picture or had difficulty picturing a future where sex work was completely decriminalized.
 - Respondents expressed distrust of sex work decriminalized under capitalism saying policies would be developed without the involvement of sex workers and wouldn't protect sex workers.
- ❖ 18% of respondents said they would open their own sex work-related business such as a brother, hotel, co-op, support organization, or house for femmes.
- ❖ 16% of respondents said that if sex work was completely decriminalized, it would be safer.
- ❖ 15% of respondents said that if sex work was completely decriminalized, there would be better access to and more resources and support.
- ❖ 13% of respondents said that if sex work was completely decriminalized, stigma would decrease.
- ❖ 7% of respondents said they would have a web-based business.
 - Some respondents expressed that websites like OnlyFans were the future of sex work.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents said a future where sex work was completely decriminalized would be less stressful, and have more transparent business practices.

Q44: What would you like the Municipally, provincially, federally, or all three levels of government to know about the work you do that they may not know?

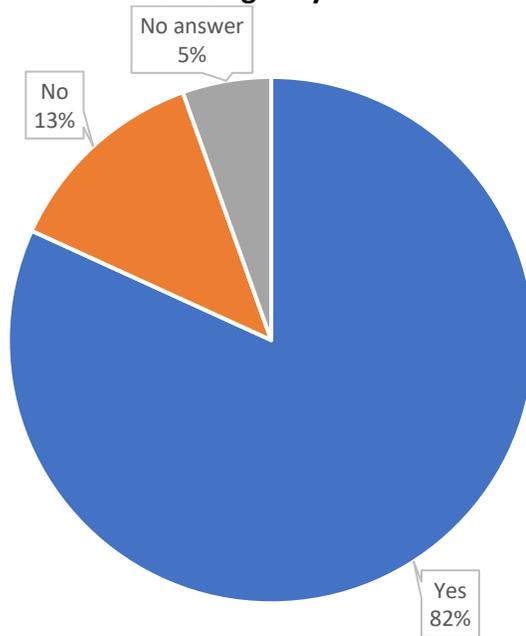
- ❖ 35% of respondents said that they would like the government to know that sex work should be respected as real work.
 - Respondents noted sex work was a means to earn a living and provide a consensual service.
- ❖ 24% of respondents said that they would like the government to know that the current legal status of sex work makes it more dangerous.
 - Respondents cited reasons including leaving sex workers open to exploitation by pushing it underground.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents wanted government to know that sex work is healing, empowering, and enjoyable.
- ❖ Some respondents stressed that sex work provides financial support where government fails to ensure citizens have a basic living income or accessible employment.

Q45: Do you use your credit card/identification to create advertisement for promoting your work?

Q46: Is data privacy something you worry about?

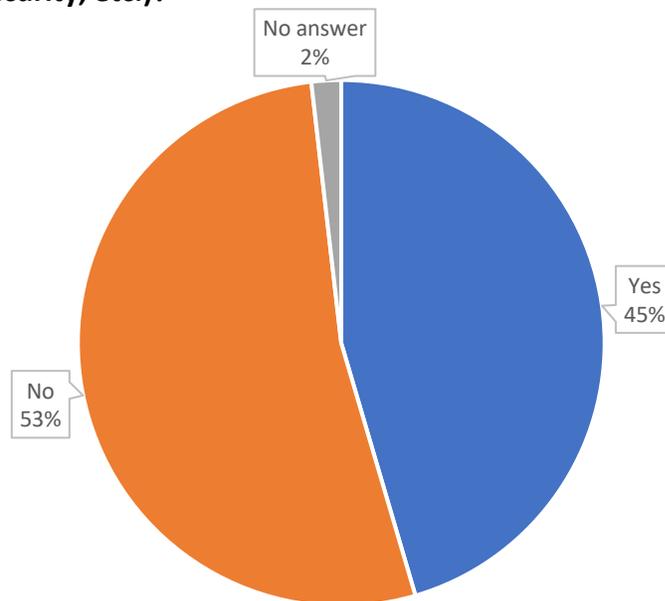


Q47: Do you use an alias when advertising for your work?

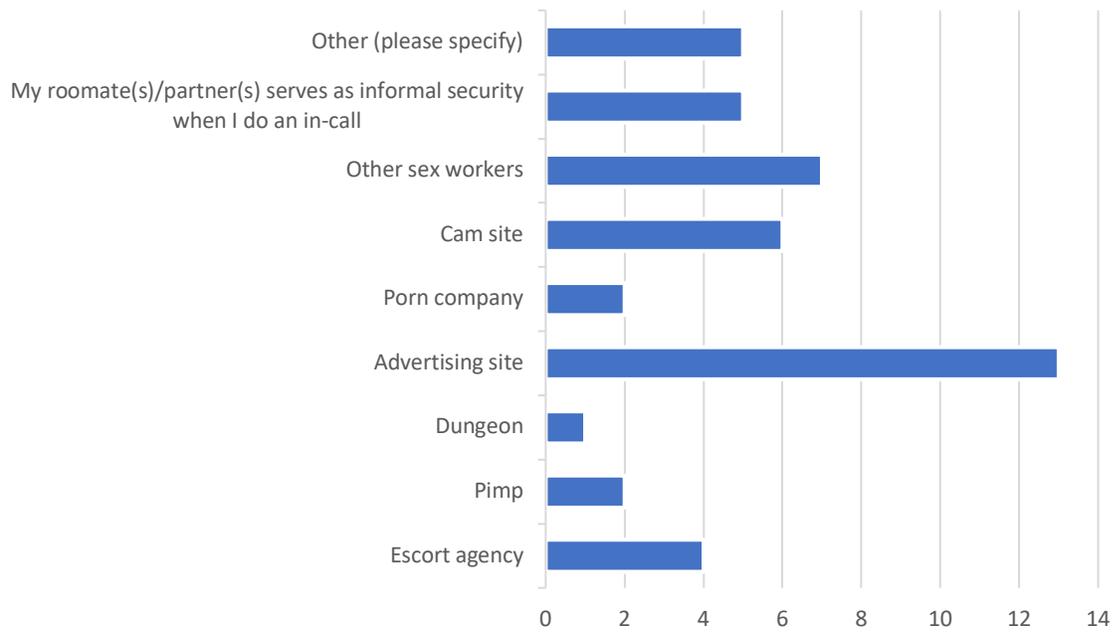


Q48: Why?

- ❖ 47% of respondents said that a reason they use an alias is for confidentiality to keep their work private from their family, friends, law enforcement, and the general public.
- ❖ 35% of respondents said that a reason they use an alias is for safety including avoiding stalkers.
- ❖ 16% of respondents said that a reason they use an alias is to separate their recognized profession and their sex work.
 - 13% of respondents expressed concern that sex work would negatively impact their recognized profession.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents said they used an alias to better express and “create a fantasy”.

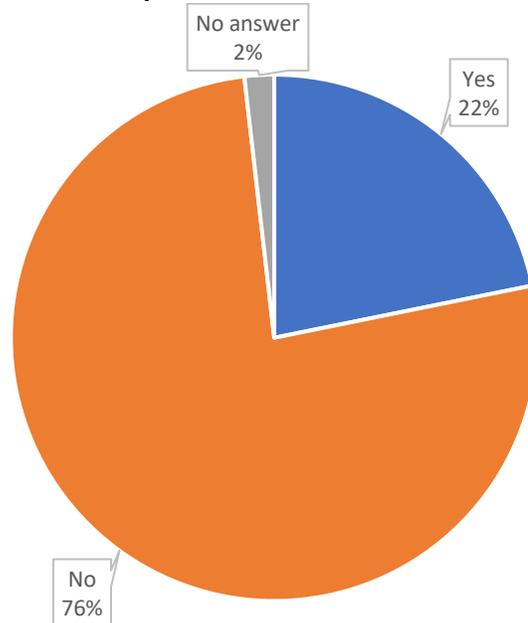
Q49: Do you work with 3rd parties (ie. an agency, pimp, dungeon, an advertising website, porn company, security, etc.)?

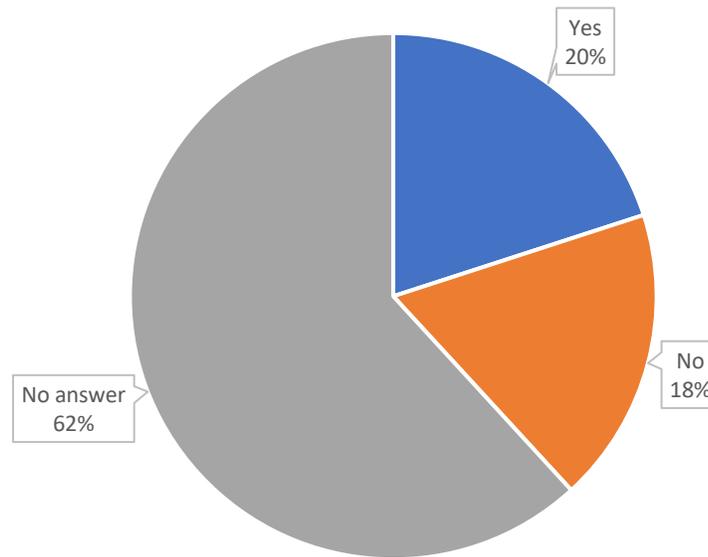
Q50: If yes, which kind? (select all that apply)



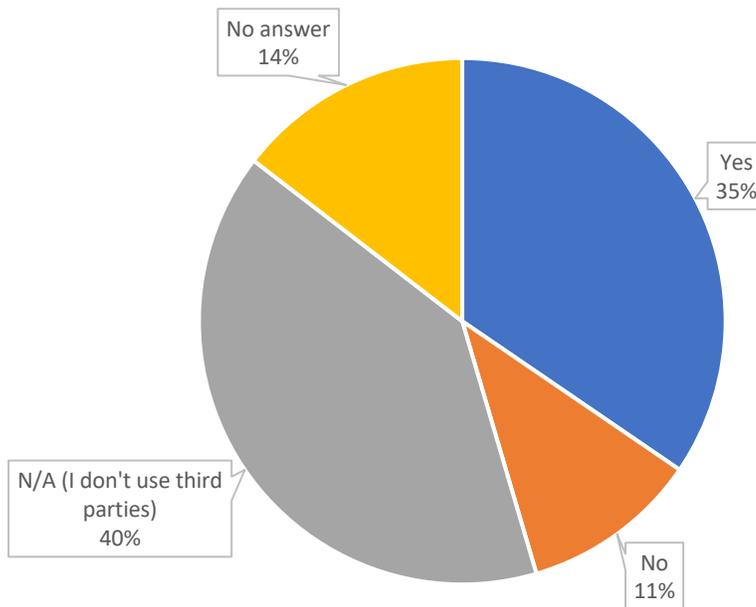
Other: Collective of independent sex workers, “Dating” apps (i.e. Grindr, Scruff), Twitter, Instagram, OnlyFans

Q51: Do you have a shared workspace with other sex workers?



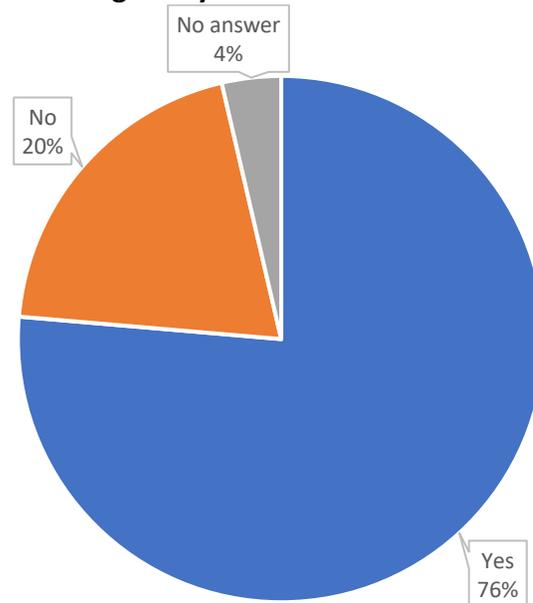
Q52: Do you find the shared workspace a safe place to work?**Q53: Can you describe your shared workspace and why you find it safe or unsafe?**

- ❖ 11% of respondents said that they find a shared workspace safe because other sex workers are present for support.
 - Respondents noted having other sex workers around for support cultivated an atmosphere of non-judgment, mitigated stigma, and promoted safety.
- ❖ 11% of respondents said that they work in a private shared space including condos, their apartment or the apartment of a friend/partner.
- ❖ 7% of respondents said that they work in commercial shared spaces (i.e., strip club, sex club, dungeon, hotel).
- ❖ No other statistically significant responses to report.
- ❖ Some respondents mentioned features of shared spaces that made them feel safe included security and staff present, pre-screening of all clients, and scheduling.
- ❖ Some respondents said they found shared spaces unsafe because they were used by many people, lacked privacy, and conflict occurred.

Q54: Are you satisfied with the people you work with?**Q55: Why / Why not?**

- ❖ 18% of respondents said that they are satisfied with the people they work with because they have a supportive relationship.
 - Respondents highlighted the basis of these working relationships to include shared experiences, respect, trust, and friendship.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents noted other reasons they're satisfied with the people they work with to include improved safety, simplified business practices and the sharing of information.
- ❖ Some respondents noted reasons they were unsatisfied with the people they work with to include "toxic competition", poor communication, and preference for independence.

Q56: Do you discuss your rates with other workers or compare your rates to others online to ensure you're getting a fair wage for your time?



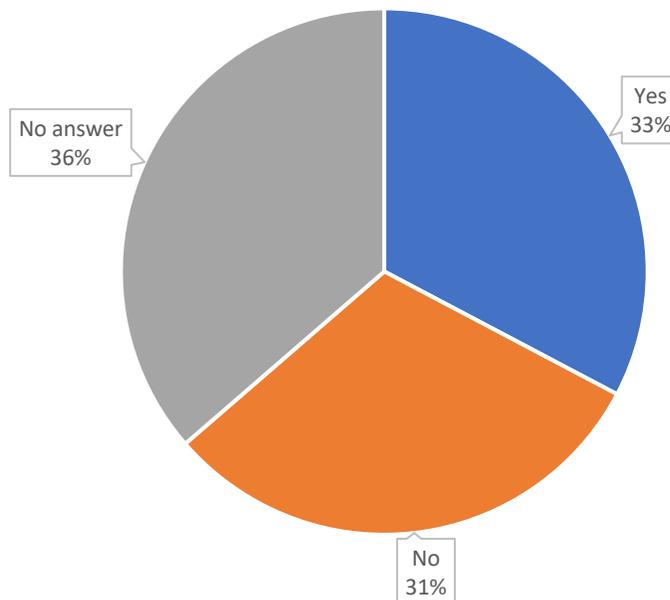
Q57: If your client(s) don't pay you the full rate you set, or refuse to pay at all, what do you do?

- ❖ 31% of respondents said if their client(s) doesn't pay them the full rate they set, or refuses to pay at all they let it go.
 - Respondents expressed letting it go and accepting lower rates due to financial insecurity and limited client base.
- ❖ 25% of respondents said that they make sure to get the money upfront.
- ❖ 20% of respondents said if their client(s) doesn't pay them the full rate they set, or refuses to pay at all, they would remove/block the clients contact info.
- ❖ 15% of respondents said that this has never happened to them.
- ❖ 15% of respondents said that if their client(s) doesn't pay them the full rate they set, or refuses to pay at all, they will threaten their client.
- ❖ No other statistically significant responses to report.
- ❖ Other respondents said if their client(s) doesn't pay them the full rate they set, or refuses to pay at all they notify other sex workers of the client, ask them to meet another time to pay the full amount, ask for alternative forms of payment, or report them to their boss/security.
- ❖ Some respondents noted that their reaction depended on if they felt safe and their relationship with the client.

Q58: When screening potential work, do you negotiate what you will and will not do, or do you have a strict limit on what you're willing to do regardless of your work's interests?

- ❖ 95% of respondents said yes.
 - 42% of respondents said that they do negotiate what you will and will not do.
 - 40% of respondents said that they have a strict limit on what they're willing to do.
- ❖ 11% of respondents noted that money is a determinant in negotiating boundaries including financial precarity.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents stressed discussing boundary negotiations to ensure safety.

Q59: If you work internationally, do you worry about security at the border?

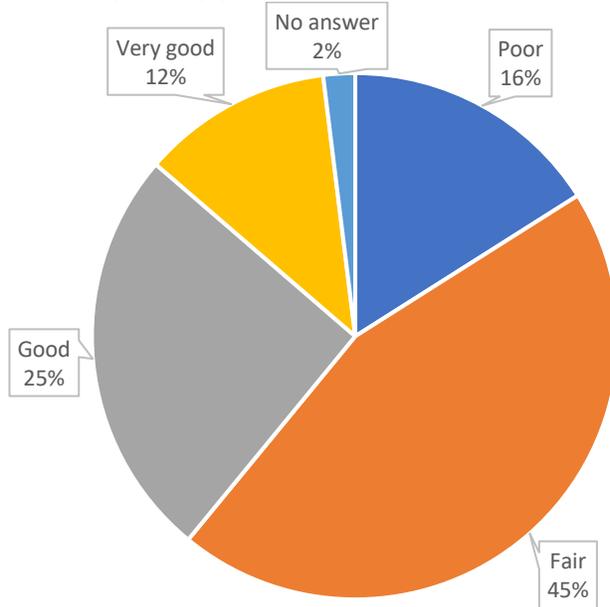


Q60: If yes, what are your worries about coming back after international work? (n=18)

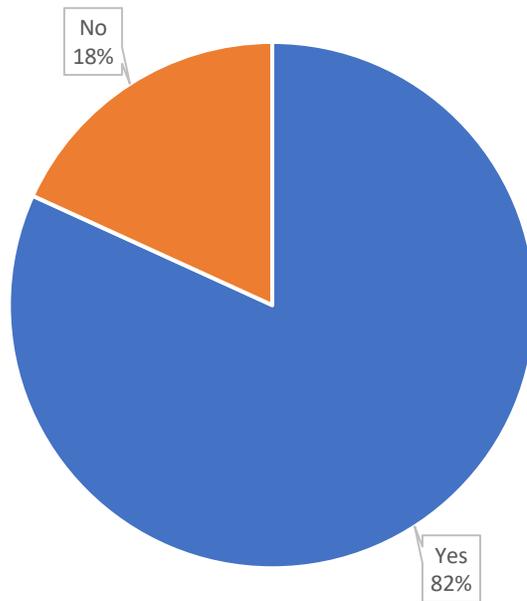
Of those that said yes,

- ❖ 22% of respondents said that their worry about coming back after international work is getting their phone searched.
- ❖ 22% of respondents said their worry about coming back after international work is being caught with excess cash.
- ❖ 17% of respondents said that their worry about coming back after international work is being subjected to travel restrictions (i.e. denied re-entry into Canada, restricted from visiting the destination country).
- ❖ 17% of respondents said that their worry about coming back after international work is getting questioned.
- ❖ 11% of respondents said that their worry about coming back after international work is jeopardizing their residency status.
- ❖ No other statistically significant responses to report.

Q61: Overall how would you say your mental health is?

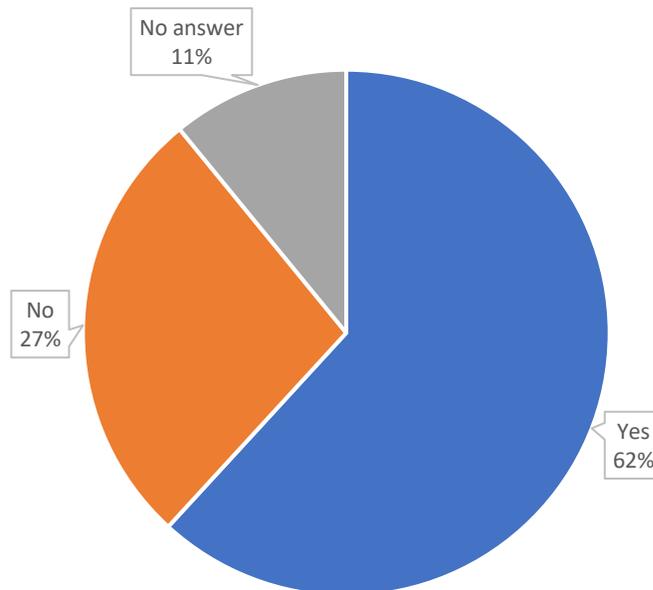


Q62: Do you think or feel your work affects your mental health?

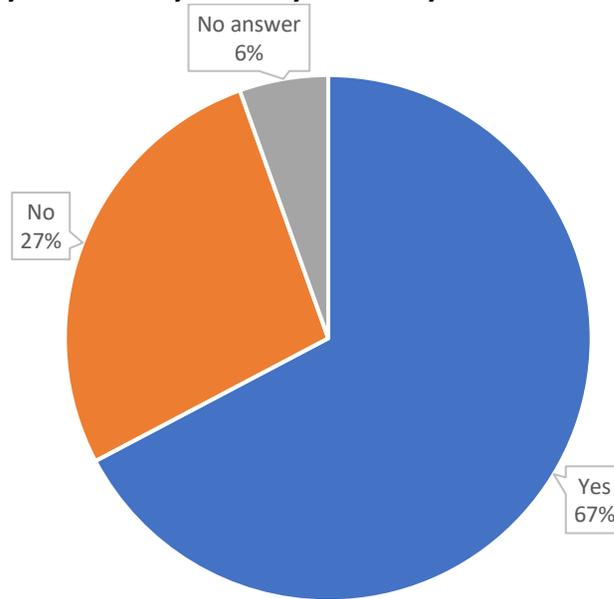


Q63: Can you describe how?

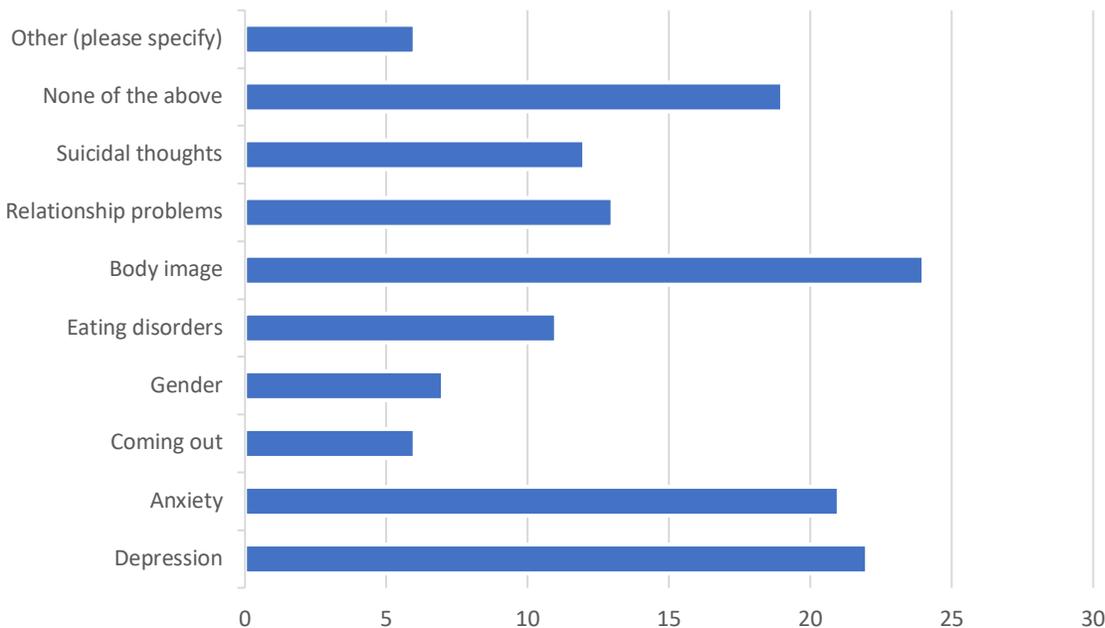
- ❖ 22% of respondents said that they feel sex work related stigma affects their mental health.
- ❖ 20% of respondents noted that the financial success/precarity of their work was a mitigating/compounding factor of their work affecting their mental health.
 - Some respondents mentioned reasons such as taking on riskier jobs/clients and being able to afford basic living expenses (i.e. bills, rent, food).
- ❖ 18% of respondents said that they feel empowered by their work.
- ❖ 18% of respondents said that their work causes stress.
- ❖ 9% of respondents said that they feel depression.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents said their work affected their mental health because of social isolation, eviction concerns, objectification, degradation, a high level of emotional labour, and exacerbating issues of body image and self-worth.

Q64: Would you say that depression affects your ability to work?**Q65: It yes, can you tell me why you think that is?**

- ❖ 31% of respondents said that depression makes them not want to work including not wanting to seek out new clients.
- ❖ 7% of respondents said that depression affects their ability to work because of a loss of libido including lowered feelings of desirability.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents said that depression affects their ability to work because they have trouble getting out of bed, it limits their ability to cope with job-related stressors, and affects the quality of their work (i.e. engagement, focus, punctuality).

Q66: Would you say that anxiety affects your ability to work?**Q67: If you said yes, why do you think that is?**

- ❖ 20% of respondents said that anxiety affects their ability to work because it makes them worry excessively.
- ❖ 18% of respondents said that anxiety affects their ability to be social.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents noted that anxiety affects their ability to work as it impedes focus, lowers libido, reduces motivation, causes avoidant behaviour, and exacerbates body dysmorphia.

Q68: Do you want help for any of the following issues? (select all that apply)

Other: Addiction, Privilege-based industry envy, Financial/privacy resources

Q69: What are some of your concerns about your sexual health when dealing with your line of work?

- ❖ 69% of respondents said that their concern about their sexual health when dealing with their line of work is contracting and spreading STBBI's (STD's, STI's).
- ❖ 16% of respondents said they weren't concerned with their sexual health.
 - Respondents cited reasons including regular access to testing and PrEP, and the nature of their work (i.e. digital, non-penetrative).
- ❖ 11% of respondents said that their concern about their sexual health when dealing with their line of work is barriers to accessing care.
 - Respondents cited barriers to care including transphobia, sex work stigma, gatekeeping, and COVID-19 related service closures.
- ❖ No other significant responses to report.
- ❖ Some respondents also expressed concerns including the prohibitive cost of PrEP, pregnancy, UTIs, yeast infections, soreness from repetitive penetration, mental health's effects on sexual health, and negotiating use of barriers.

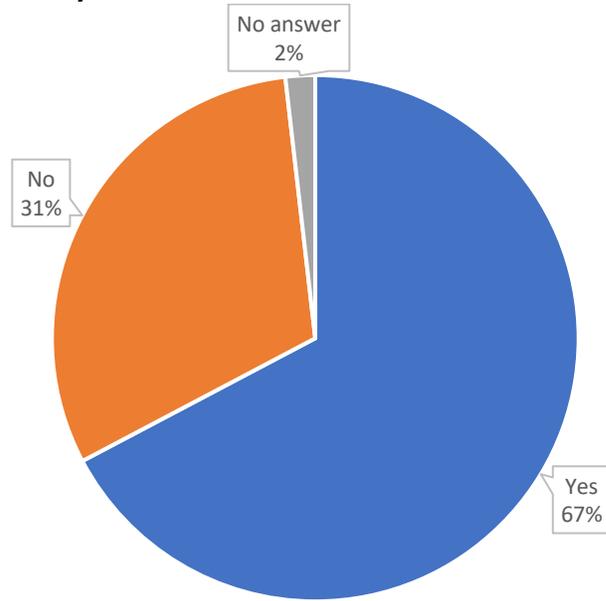
Q70: What kind of health and wellness services do you utilize as a result of your line of work?

- ❖ 38% of respondents said a health and wellness service they utilize as a result of their line of work is STBBI testing.
- ❖ 20% of respondents said a health and wellness service they utilize as a result of their line of work is mental health counselling including peer counselling.
- ❖ 11% of respondents said a health and wellness service they utilize as a result of their line of work is a family doctor.
- ❖ 11% of respondents said a health and wellness service they utilize as a result of their line of work is a walk-in clinic.
 - Respondents noted clinics they used included Hassle Free Clinic, L'Actuel, Quorum, and CLSCs (Centre Local de Services Communautaires).
- ❖ 5% of respondents said a health and wellness service they utilize as a result of their line of work is prescription drug dispensing including PrEP.
- ❖ No other statistically significant responses to report.
- ❖ Other health and wellness services utilized by respondents include massages, community organizations (e.g. the 519, Maggie's, Glad Day Community, Cactus) including ASOs (AIDS Service Organizations), free condom distribution, birth control access, COVID-19 testing, and any low-cost services.
- ❖ One respondent noted frustration with long waitlists for the Rainbow Clinic and lack of access to trans medical services.
- ❖ One respondent noted they're excited for increased access to newly approved HIV self-testing.

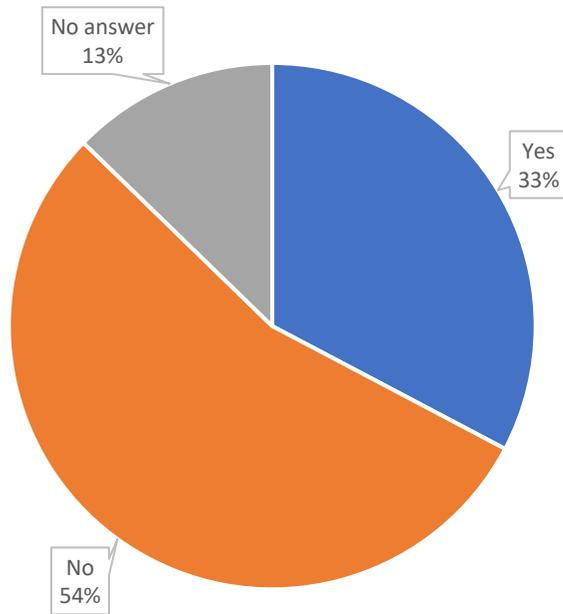
Q71: Have you found said health and wellness services to be of help? How/why?

- ❖ 67% of respondents said they found health and wellness services helpful.
 - Some respondents noted services to be helpful because they're efficient, free/low-cost, non-judgmental, friendly, supportive, healing, open late, and knowledgeable about sex work and LGBTQ+ issues.
 - Some respondents noted that helpful health and wellness services supported them in working safer with fewer interruptions due to health issues.
- ❖ 13% of respondents said they found health and wellness services unhelpful.
 - Some respondents said they found services unhelpful because they weren't sex worker friendly, sex positive, or trans-inclusive.
 - Some respondents said they found services unhelpful because they're overburdened, have limited availability, have financial barriers (i.e. no coverage or partial coverage), and no continuity of care (i.e. accessing services in multiple siloed spaces with multiple intakes).
 - Some respondents expressed frustration with a lack of advertising of services and dropped lines of communication (i.e. "ghosted" by service providers).

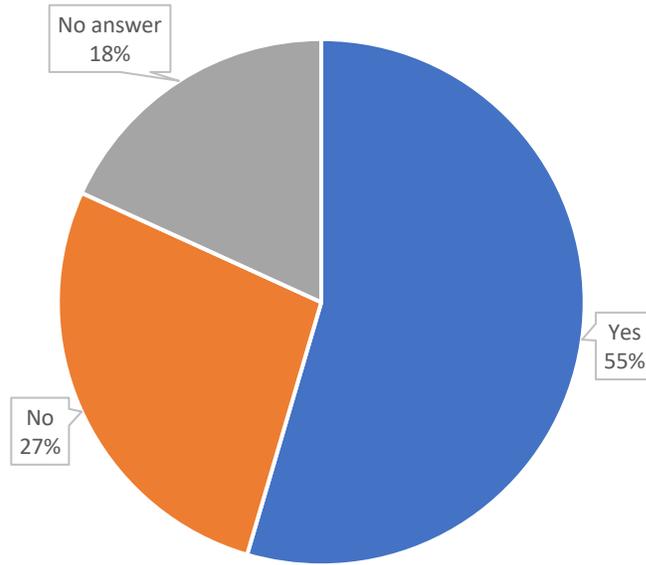
Q72: Do you have a family doctor?



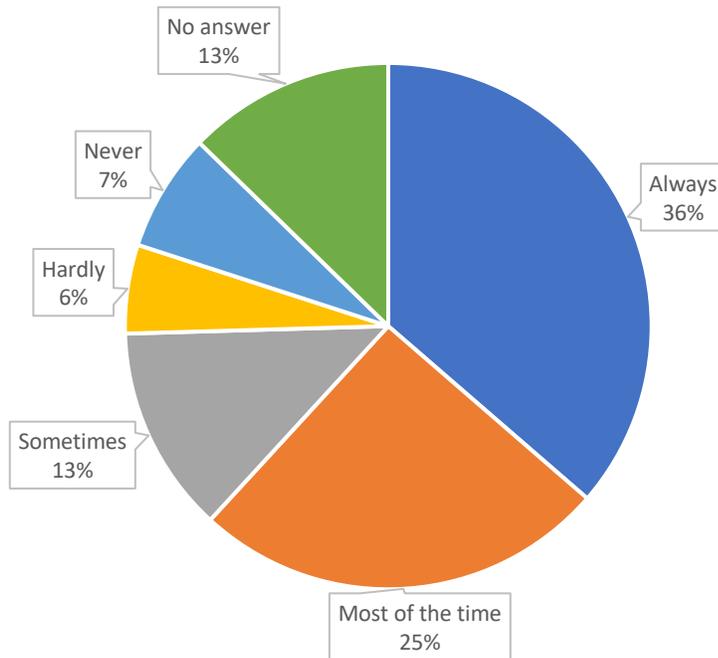
Q73: Do you disclose to your health care provider that you are a sex worker?



Q74: Is it important to you to tell your doctor that you are a sex worker?

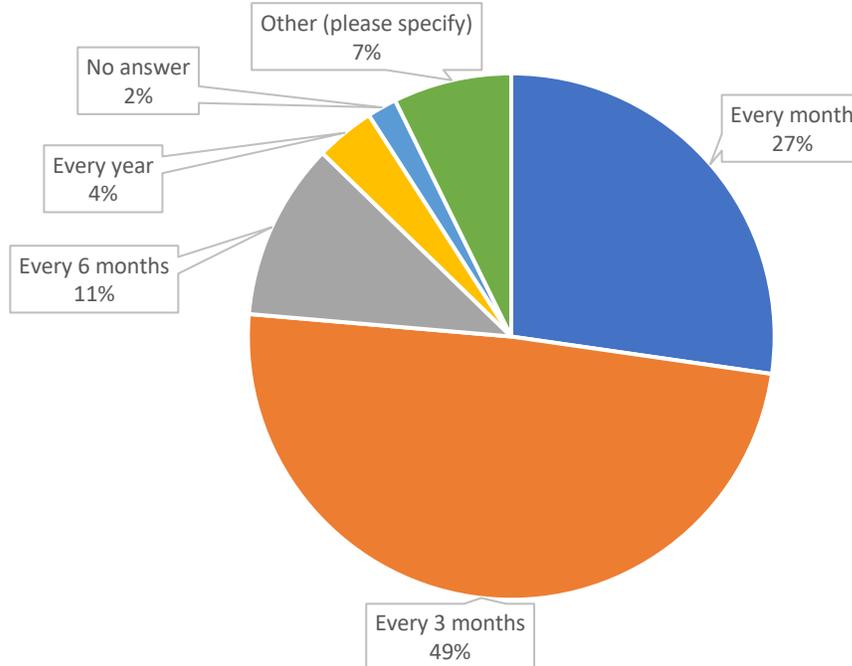


Q75: If you have intercourse with your clients as part of your work, do you use condoms?



Q76: Can you explain why?

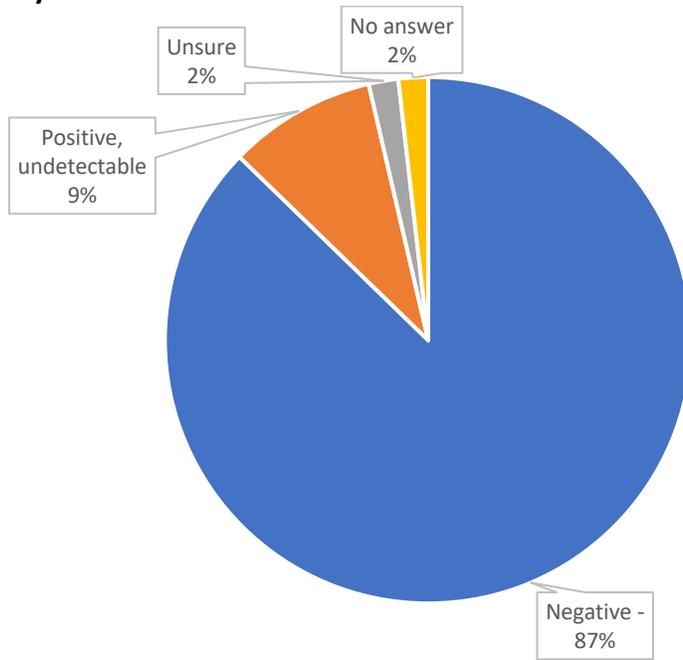
- ❖ 56% of respondents said they wear condoms with clients to prevent themselves from getting STBBI's~ (STD's, STI's) and passing them to their clients.
- ❖ 22% of respondents said they don't wear condoms with their clients because the client requested not to wear one.
 - Some respondents expressed the belief that "bareback" is preferred in the gay community.
- ❖ 7% of respondents said they used condoms to prevent pregnancy.
- ❖ 7% of respondents said they chose not to use condoms because it pays more.
- ❖ 7% of respondents said PrEP (either taken by themselves or their client) was a factor as to whether or not they use condoms.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents also said they don't use condoms because they prefer condomless sex, use other methods of risk reduction (i.e. strategic positioning), it reduces the length of session (i.e. clients "cum" faster), or they're engaging with a regular client.

Q77: How often do you get tested for sexually transmitted or blood borne infections (ie. chlamydia, Gonorrhea, syphilis, HIV)?

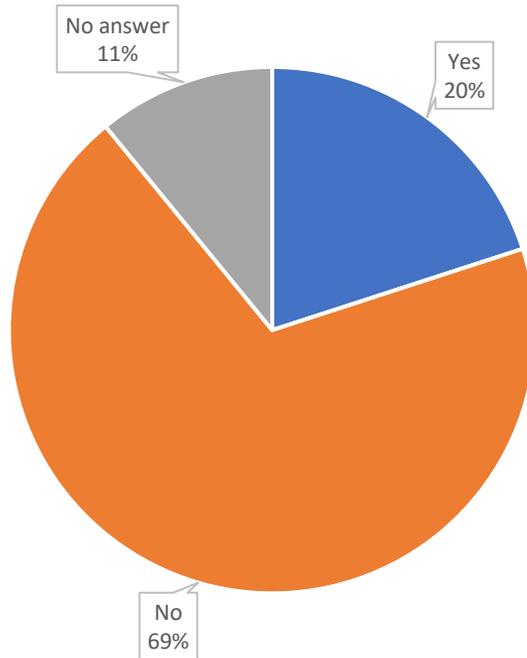
Other: Changes based on activity, during scheduled physicals, every two (2) years

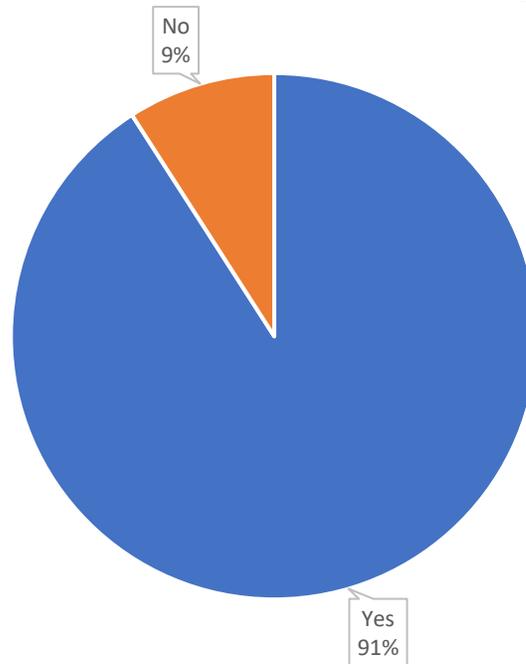
- ❖ Respondents noted a dislike of STBBI testing as a reason for less frequent testing.

Q78: What is your HIV status?



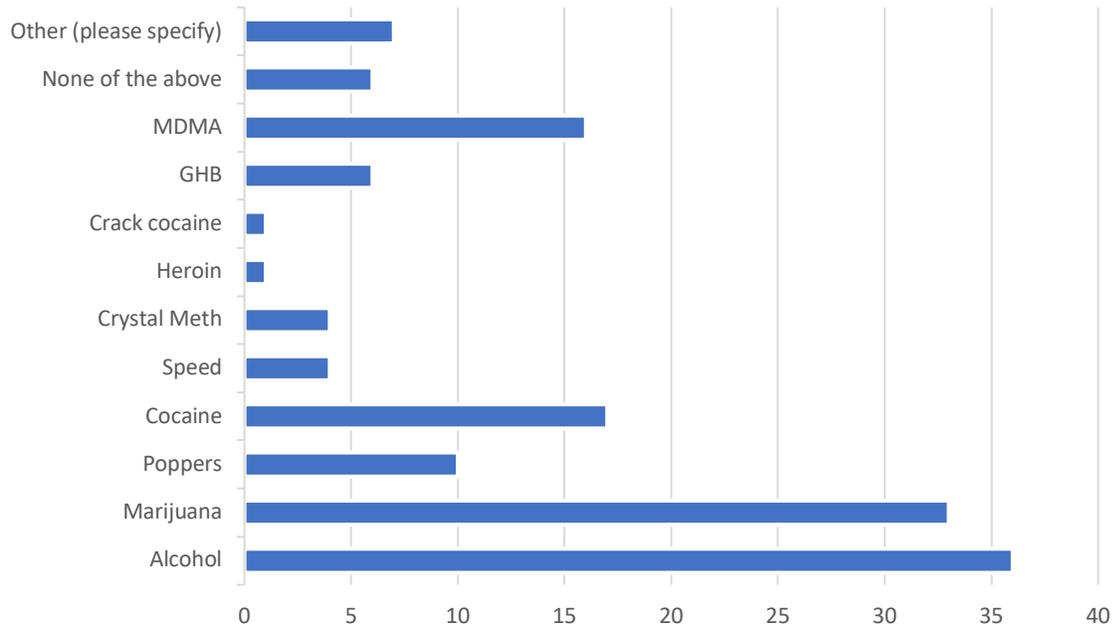
Q79: Are you taking PrEP?



Q80: If yes, was your work as a sex worker the motivation for going on PrEP? (n=11)**Q81: Can you explain why/why not?**

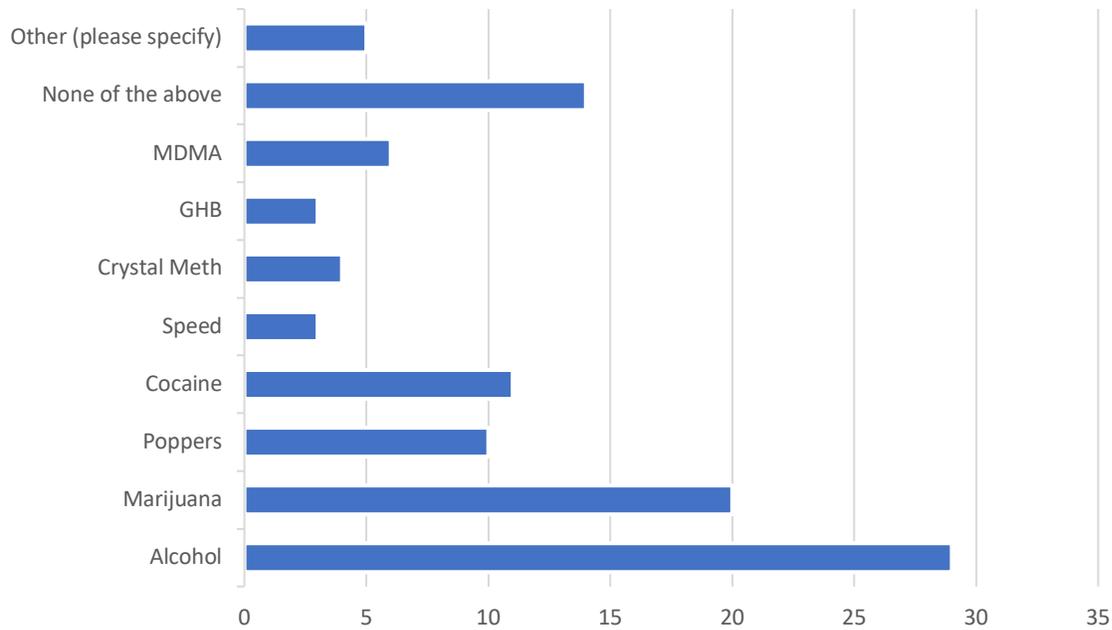
- ❖ 20% of respondents said that they are motivated to take PrEP to keep them and their clients safe.
- ❖ 9% of respondents said that their level of sexual activity is a motivating factor as to whether or not they take PrEP.
- ❖ 7% of respondents said that they aren't on PrEP due to the prohibitive cost.
- ❖ No other statistically significant data to report.
- ❖ Other reasons cited by respondents for taking PrEP include enjoying condomless sex.
- ❖ Other reasons cited by respondents for not taking PrEP include assumed low level of risk or being HIV-positive, undetectable.
- ❖ Some respondents noted that they use PrEP "on-demand", instead of a daily regimen.

Q82: Which of these drugs do you use? (select all that apply)

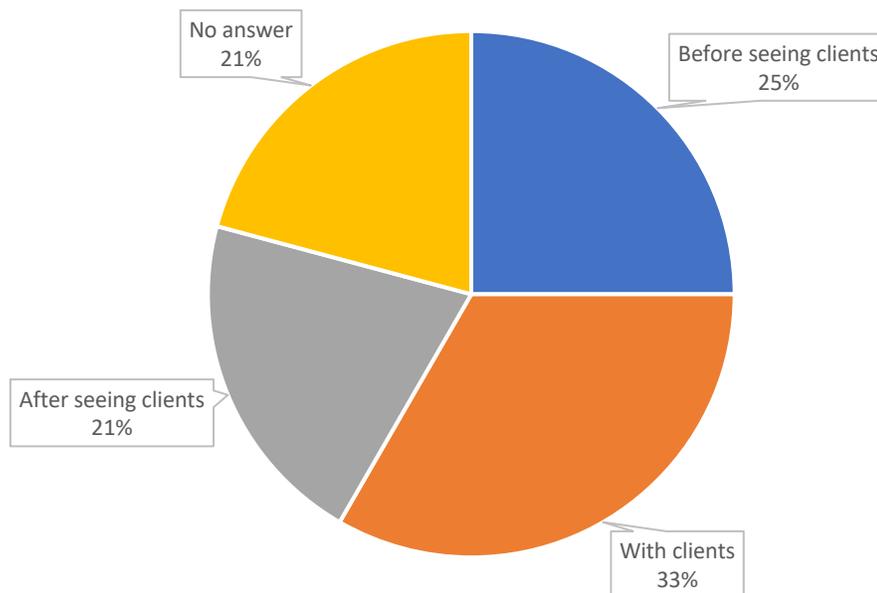


Other: Ketamine, Adderall, Xanax, LSD, Psilocybin, Sildenafil (erectile dysfunction medication)

Q83: Which of these drugs do you use while working? (select all that apply)

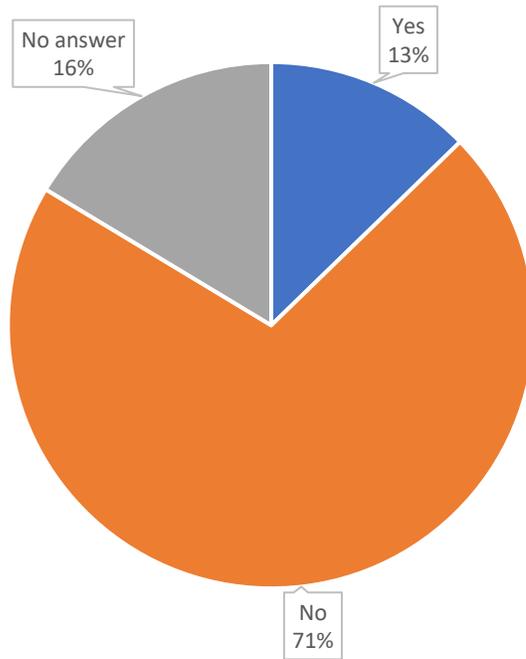


Other: Ketamine, Viagra (erectile dysfunction medication)

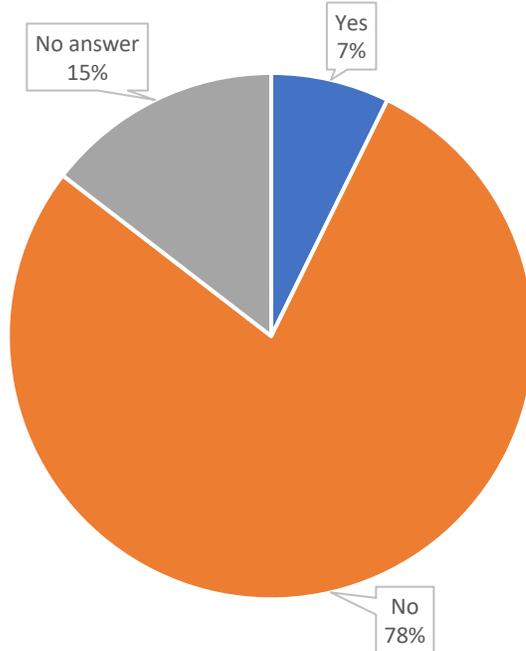
Q84: When do you use illegal drug(s)? (n=24)**Q85: Do you enjoy using illegal drug(s) while working? And why?**

- ❖ 35% of respondents said they use illegal drugs with clients.
 - Respondents cited various reasons including improved chemistry, confidence, energy, reducing stress, to escape, and for fun.
 - Some respondents noted they only use illegal drugs with regular clients they trust.
- ❖ 35% of respondents said they don't use illegal drugs with their clients.
 - Respondents cited various reasons including mitigating client risk (e.g., importance of communication and feedback with BDSM), sobriety, personal safety, and performance.
- ❖ No other statistically significant responses to report.
- ❖ Some respondents reported using drugs before and after seeing clients as well as a means to relax, decompress and recover, especially the use of cannabis.
- ❖ Some respondents emphasized only using drugs from their own supply as a safety precaution.

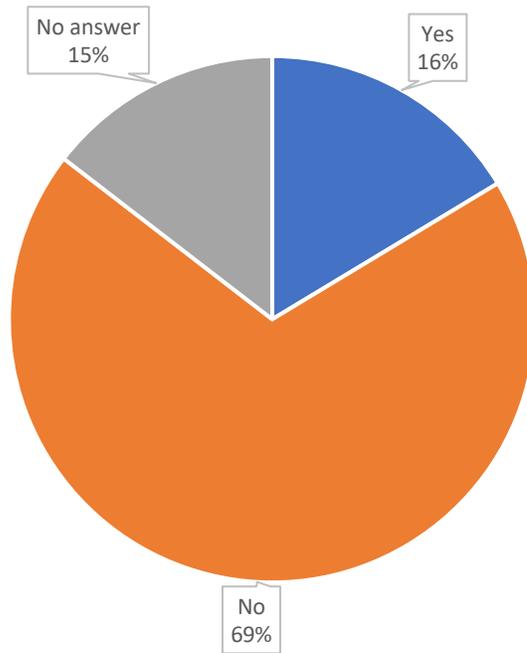
Q86: Did you start using illegal drugs during sex work?



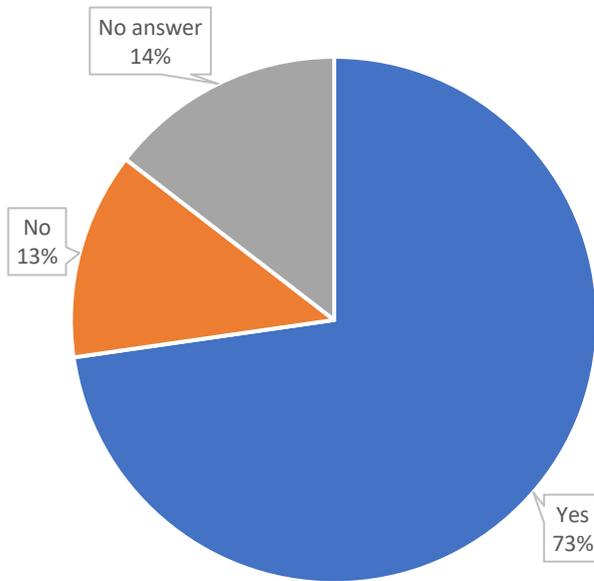
Q87: Do you exchange sexual services for illegal drugs?



Q88: Do you find that if you don't use illegal drugs, you will lose clients?



Q89: Did you find this survey asked the right questions to find the important facts and concerns needed to create a needs assessment?



Q90: If no, what are some things you would have liked to see in it?

- ❖ No statistically significant responses to report.
- ❖ Respondents expressed they would've liked to see more nuanced questions around the experiences of transmasculine and gender non-conforming folks, the continuum of drug use, cultural and ethnic identity, and economic status (i.e. survival sex work vs. "six-figure sex work").
- ❖ Respondents expressed wanting to see support services/programs around business administration for sex works (i.e. financial advice, tax clinics), digital privacy, and health services.