

Health Care

Framing examples

Potential ways to frame the above questions and other ideas to consider

- [A Guide to Choosing a Sex Worker-affirmative Therapist](#) (SWOP USA)
- [Choosing a Sex Worker-Affirmative Therapist](#) (Minnesota Sexual Health Institute)
- [Find a Sex Worker Allied Therapist](#) (Psychology Today)
- [Zepp Wellness](#) Zepp currently provides online therapy, trauma-informed yoga and energy work classes, a rent relief fund for Black trans women sex workers and an online art class.

Questions to ask healthcare providers to make sure you will receive sex worker-friendly care

In-person questions

- What is your philosophy on sex work and how have you practiced that in the past year with clients? Do you view sex work from a labor perspective?
 - *It is important to ask an open-ended question regarding this because it allows you space to not be criminalized or judged because you are asking it expansively. You should be able to get an idea of things like: are they focused on an exit strategy or meeting you where you are?*
- Have you and your staff had any sensitivity/cultural training on working with people in the sex/adult industry? How, When?
 - *There are lots of online resources for healthcare providers to receive training on the concerns and interests of sex workers. A trained healthcare provider shows a dedication to understanding those issues and providing the best care possible.*
 - *Possible resource: [zeppwellness](#), [haymarket pole collective](#)*
- What is your experience and/or training surrounding transgender/gender-expansive affirming care?
 - *Look for tell tale red flags like: do they look you in the eye? If they misgender you accidentally do they correct themselves or ask for your pronouns?*
 - *Do they misgender you over and over? Do they correct themselves and move forward quickly or do they dwell and draw attention to the mistakes?*



- *For your provider: if they assume your gender identity without asking or looking at your charts. Are you seeing people mishandle your information verbally like talking flippantly to their coworkers or stigmatizing a part of your identity or assumed identity?*
- What sex worker-affirming resources are you/your office connected to that you may be able to refer a sex worker?
 - *In the case that additional services are requested by a client, healthcare providers should have an evaluated list of other sex worker-friendly resources available. This can include such services as mental health professionals, community support, housing assistance, harm reduction organizations, etc.*
- What is the difference between human trafficking and sex work?
 - *Confusing sex work with human trafficking not only shows a lack of awareness, it also places additional stigma and anxiety on sex workers who might want to connect with services without fearing legal trouble. A sex worker-friendly healthcare provider should either know this from educating themselves or show a strong desire to learn more.*
- Is there a way to opt out of my data being shared, and what is the process for removing my records from your office's database, if desired?
 - *As a patient, your sensitive health information is protected by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). However, it is understandable that you might not feel comfortable with that information being handled by strangers.*
- If I was to experience discrimination in your office, who would I report that to?
 - *Regardless of how much a healthcare provider tries to ready themselves for discussions around sex work, honest mistakes are bound to happen. It is the responsibility of providers to address those mistakes and do better. This includes being transparent about how clients can make their concerns known.*

Cold-calling questions

- Who has access to my records? Even depersonalized data.
 - *Sometimes organizations will share demographic information with funders, the public, or their general staff. This data may not include*



personal details or separate you from the group, but it may be information you would not like shared. It's important to check.

- Is there a way to opt out of my data being shared, or remove my records?
 - *See how long the organization may keep your records even after your care is complete. Will you have access to those notes? When will they be removed from the system?*
- If there was a child in a home of someone who works in sex work/ adult industry, would you consider that cause to make a mandatory report?
 - *Your provider is likely a mandatory reporter. This means that if a child or elder is in danger or you are a danger to yourself, the provider may have to report this to a state agency. A way to get around this is to ask hypothetical/depersonalized questions like “What if someone was thinking about suicide, where could they go?” or “If there was a child in danger, what could someone do to protect them?”*

Examples of Affirming care

- Actually using the pronouns I give in the intake form
- The best places are places where we work (trans folks on staff/as advocates)
- Culturally specific
- Sex work friendly or peer led
- Accessible financially
- Location accessible
- Telehealth appointments (sometimes more expensive)
- Ready with relevant resources surrounding holistic/community care (food box/housing/etc)
- Confidentiality
- How does my data get shared
- Clarity of what is reportable and what is private
- Trans friendly
- TasP = treatment as prevention
- Coming up with specific messaging “you vs you” making sure providers are using “U=U”

Examples of non-affirming care

- Anti-sex work
- Addressing sex work as if it's the ONLY issue in our lives
- Not trans-affirming at all



- Untrained staff on issues affecting sex workers
- Sign in sheets that are public (listing everyone's names)
- Exit strategy only (trying to get you out of sex work as a solution)
- Conflating sex work and trafficking

