Survival Sex Work: Vulnerable, Violent and Hidden Lifescapes in the North East of England

Christopher Hartworth, Joanne Hartworth and Ian Convery

Introduction

This chapter looks at survival sex work and is based on research in the North East of England (along with findings from a peer-led project, Voices Heard, 2007). Survival sex is the practice of exchanging sex not only for money but also for a range of essential resources such as accommodation, drugs, food, laundry and tobacco. From our research (Hartworth 2009), we would estimate that over a thousand people are involved in survival sex work within the study area, either full-time or occasionally, both male and female (although predominantly the latter). Here we explore the lifescapes where people exist, why they came to exist there and the reasons why they remain there. Although this study is focused on the North East of England, there are similar populations living in cities across the United Kingdom who share this lifescape.

The Conceptual Framework

The concept of lifescapes has evolved within social anthropology (with much of the early work taking place in Burkina Faso) as a descriptive and analytic term used to frame how local communities interacted with their local environment (Nazarea et al. 1998; Howorth 1999). These authors defined it as the social, cultural and economic interactions that occur across the landscape. In particular, it was used to explain how the social interacts with the physical to ensure livelihoods. The concept of lifescapes has been developed and applied to other groups in different countries, most notably by Convery et al. (2008) in UK rural communities affected by the foot and mouth epidemic of 2001. Lifescapes are necessarily interactive; people and places are intimately interconnected and, as such, lifescapes provide an essentially phenomenological understanding of people–place dynamics. It also links with a substantial body of literature which explores the relationship between people and place. Convery et al. (2008) discuss these links in great detail, highlighting how, for example, lifescapes have meaning in the transformations of social space which Bourdieu (1977) refers to as the habitus and in the phenomenology of perception discussed by Merleau-Ponty (1962). It can also be found in the lifewiew literature of social archaeology (Bender 2001; Robin 2002) and the emotional landscapes literature of Gesler (1992; 1993; 1996), which empha-
ises the importance of places for maintaining physical, emotional, mental and spiritual health. In geography, the lifeworld (Buttimer 1976 and later Seamon 1979) has been used as a means of drawing together the phenomenological with the existential to bring new meaning to emerging concepts of humanistic geography (Daniels 1994).

In this research we have taken the concept of lifescapes and applied it to a particular group of sex workers in the North East of England involved in ‘survival sex’. However, as in most applications, the lifescape as a conceptual framework changes and here we are concerned less with interactions across a landscape and more with interactions across a community and individuals (although there are aspects of landscape which shape the lifescape – see Fig 12.1). However, the consistent similarity since the concept’s development in Burkina Faso is that the lifescapes relate to subsistence and varying levels of social reproduction. This is no different in our current application; we are interpreting the lifescapes of those involved in survival sex as the social, cultural and economic interactions that occur across a group of people in order to meet subsistence needs.

The Research

This chapter is based on data gathered from a qualitative knowledge mapping approach (including over 300 interviews with representatives from both statutory and non-statutory agencies that work with vulnerable groups) and builds on our earlier work into sex work and exploitation in the North East. The research used ‘snowballing techniques’ to recruit research participants. Snowball sampling is particularly effective in locating members of hard-to-reach populations where the focus of the study is on a sensitive issue (Hendricks and Blanken 1992). Data were analysed using the grounded theory constant comparison method, where each item is compared with the rest of the data to establish and refine analytical categories (Pope et al 2000). Themes emerged within individual interviews and across different interviews. Recurring themes across transcripts were taken to reflect shared understandings of the participants (Smith and Marshall 2007). The analysis presented here is based on our research in Darlington, County Durham, Northumberland and the five Tyne and Wear authorities as well as the peer-led research carried out by the Voices Heard (2007) group in Tyne and Wear. A full description and analysis of our methodology is found in Hartworth 2009.

The Survival Sex Lifescape

We are concerned here with one particular group of sex workers (‘survival sex workers’) and the lifescape they inhabit. We recognise that sex workers will inhabit different lifescapes, with corre-

---

2 In this context, vulnerable groups include the homeless, problematic drug and alcohol users, those at risk of physical and sexual abuse, children in the looked-after system, asylum seekers and other groups who live on the margins of society.

3 It has been possible to investigate survival sex markets in the North East through the interest and willingness of charitable funders, including The Scarman Trust and Northern Rock Foundation. The latter, through their Safety and Justice Programme, have funded our research into sex markets in the North East as well as funding voluntary sector providers to deliver services to those involved. Without the funding of research, it is likely that the majority of the survival sex lifescapes would have remained hidden and unknown. http://www.nr-foundation.org.uk/publications_think.html
sponding differences in characteristics and control. For example, in our research in the North East, we can roughly categorise the sex market into high, middle and low sections.

- The high section includes workers attached to certain escort agencies or independent workers who charge high fees (eg around £1500 for an overnight stay).
- The middle section includes independent workers, those attached to escort agencies and those working in most brothels. People working in this section of the market can be ‘career’ sex workers, or many simply drift in and out of sex work over considerable periods of time (when they need the money).
- The low section includes problematic drug users, failed asylum seekers and those working on the streets.

The socio-spatial organisation of sex work varies greatly across these groups, and while the high and middle sections described above have received much research interest (as have on-street sex markets) and have been heavily studied (see, for example, Bellis et al 2007; Hester and Westmarland 2004; Sanders 2005; 2006), survival sex workers have received scant attention. This is largely because this group are the hardest to reach and gain access to; they rarely access statutory services, there are high levels of criminality associated with their lives, they are socially isolated, being connected only to their own social networks, and they are less spatially defined than the other groups.

The Characteristics of the Lifescape

Although those involved are not a truly homogenous group, individuals were found to share similar spaces, experiences and characteristics to the extent that it is possible to discuss them as a discrete group. Thus, as Hubbard and Sanders (2003) note, sex markets, like other spaces in the city, are created through different understandings, occupations and uses of space. Bailey et al (2010) also highlight how the spatial-cultural configuration of sex work is constituted by not only the places where sex is negotiated and transacted but also a range of other socio-cultural factors that together form a survival sex lifescape. Fig 12.1 summarises this lifescape and the following sections explore these experiences and characteristics further.

Problematic Drug Use

McKeganey (2006) notes that high proportions of sex workers are drug-dependent (see also Church et al 2001; El-Bassel et al 2001; Nadon et al 1998). Almost all survival sex workers in this study are problematic drug users and most report that drug use is the main reason for engaging in sex work. Substance misuse among this group is wide and varied, mostly being made up of poly substance use, and commonly includes alcohol, benzodiazepines, cannabis, cocaine, crack, heroin, methamphetamine and others. The main drug that must be taken regularly (mostly daily) is either crack or heroin (mostly the latter) and a high proportion (60 per cent and above) are injecting drug users. For many women with problematic drug use, sex work may be the only means by which to finance a drug habit and this often leads to the entrapment of women in sex work (Gossop et al 1994). Most survival sex workers have high drug spends, which compounds a low available income (Fig 12.2).
Over half of those women about which situations were known were problematic drug users. The nature of these exchanges varied greatly from some people with problematic drug use and chaotic lifestyles who were reported to exchange sex for drugs “while under the influence” or “a shag for a bag” to more stable drug users one of which was reported to describe herself as a “high class prostitute”. There was evidence of women being coerced into sex work by their ‘boyfriends’ or partners for money with which to buy drugs, particularly heroin, and reports of women being forced into sex work as a result of loans that they had taken out for money with which to buy drugs.

There were numerous reports of people involved in sex work or exchanges with mental health problems. For example, one woman in her 30s was reported to suffer from depression and is known to be exchanging sex for money and alcohol. She lives in a flat whose tenants are mostly problematic drinkers. She is reported to have said “they can do what they want to us”. There was another report of an escort who lived in S who was reported to be bipolar.

Sexual exchanges and sex work were identified with specific areas in X, particularly those associated with drug users. In these areas there were known to be “slum landlords”, B&Bs and low rent housing and it was reported that “there are a couple of streets … C Road, S Road, N Road”. Such areas are likely areas for the location of brothels (low rent, unscrupulous landlords, absent tenancy agreements).

Friendships are quick to develop and often seemingly strong with a heightened distribution of essential resources. One professional said “Networks are really quick to develop … you can be from out of the area, then before you know it, they’re best buds with them [resident groups of homeless or drug and alcohol users]”. A common adage amongst survival sex workers is reported to be ‘there’s nothing we won’t do for each other’. However, these strong networks, whilst almost playing the role of ensuring social reproduction within the lifescape, also serve to entrap people within it. These networks serve to connect individuals to drug use and the associated way of living.

Another agency had knowledge of two cases of sexual exploitation in residential care homes in the last year. One case had been ongoing for three years and started when the girl was 14 years old. She was living in a care home and was frequently ‘disappearing’ and going missing. She would return to the home by taxi and would be in receipt of new items, such as mobile phones and money. When asked how did she afford the taxi fares home, she was reported to have said “they owe me and my dad favours”. It was known that her father had previously been sexually exploiting her with his friends and this was the reason she was taken into care.

Fig 12.1. Summary of survival sex work lifescape.
**Survival Sex Work**

**Poor and Unstable Housing**

Survival sex workers typically live in a range of poor and insecure housing tenures, often provided by ‘slum landlords’ (Hartworth 2010; McKeganey 2006), or are homeless. In the North East, the most common types of accommodation among this group were hostels and bed and breakfasts. These tenure types are used either because people have been recently released from prison or they are in receipt of emergency housing from the local authority (owing to their homelessness). Other survival sex workers will ‘sofa surf’ or stay with clients, exchanging sex for accommodation. Those involved will commonly switch from living in poor accommodation to being homeless.

**Mental Health Problems**

Most survival sex workers will experience a range of severe mental health problems as a direct result of their work. Disorders include depression, anxiety and panic, post-traumatic stress disorder and self-harming. Survival sex workers typically also have low self-confidence and self-esteem, which is attributed to their lifestyle, drug use and involvement within the sex industry. As a demonstration of this, the Voices Heard (2007) study found that most sex workers left their house only to work and to buy drugs and almost half of the respondents said that the only time they felt that they had confidence was with a client, feeling that a tentative client boosted self-esteem and confidence. Voices Heard then asked respondents what makes them happy outside of work and drug use:

in reality the general feeling was that the respondents did not spend a great amount of time doing things which made them happy, concentrating more on survival, one person said ‘I used to go into dancing competitions and I used to love it, I can’t do it anymore cause I’ve got track marks up my neck and I’m completely ashamed of myself’. Other respondents said that they could not remember a time in their lives when they had been happy with others reporting drugs as the only thing that brings them close to happiness. Three respondents cited ‘nice punters’ as something that makes them happy. (Voices Heard 2007, 72)

Involvement in the sex industry and mental health problems have been well documented (El-Bassel et al 2001; Fullilove et al 1992; McKeganey 2006; Smith and Marshall 2007), but, from our research, they are more apparent in survival sex workers because of their living conditions, social isolation and low take-up of services.

**Poor General Health**

Those involved in survival sex work typically suffer from poor general health. This includes trauma and physical pain connected with violent clients, high levels of sexually transmitted diseases (and a corresponding low uptake of sexual health services), a poor diet and a high drug intake (again with corresponding associated risks of blood-borne virus infection). Poor dental health is particularly associated with survival sex workers because of their drug use, poor oral hygiene and limited contact with dentists. Many sex workers have described carrying out dental procedures on themselves or each other; for example, one worker stated that ‘I had to pull my wisdom tooth out with pliers … my tooth had snapped in half so I went grafting got meself some coke and got my mate to take it out’ (Voices Heard 2007, 45).
Living with violence and its experience is common among survival sex workers and can take many forms, from direct violence from clients to domestic violence (Church et al 2001; May et al 1999). A selection of comments from research participants indicates such violence:

I got burnt with fags cause I let this bloke tie me up for an extra 30 quid and he basically kept me the night and tortured me, took my clothes off and kicked me in the street.

I got done in and I was really worried cause it was when my friend had just been murdered in bro’ [Middlesbrough].

I was raped while staying at a man’s house I’d already gave him sex so that I could stay there he woke me up for sex again I said no he got violent raped me and hit me.

In the Voices Heard (2007) research, a total of 57 per cent of the sex workers reported experiencing physical pain (caused by assaults from clients) and a total of 41 per cent of people reported being in a violent relationship. Such violence rarely if ever gets reported to the police.

Low income

The majority of income earned through sex work is spent on drugs (Fig 12.2). In addition to the income gained from sex work, most survival sex workers will receive state benefits, either Income Support or Jobseeker’s Allowance. This income will be supplemented through other means such
as begging or other illegal activities, including selling drugs, fraud/forgery, handling stolen goods, shoplifting, theft from property and vehicles and benefit fraud. The high amounts of daily drug spends leaves little money to spend on other essential life items and as a result of this sex is often exchanged for such items as food, laundry and tobacco (see Fig 12.3).

As already stated, those involved in survival sex are at the low section of the sex market and Table 12.1 shows the average and lowest prices which are charged for sex. It is fairly apparent that the lower prices can only be used for subsistence. Because of their problematic drug use, many of those involved will exchange sex for the value of a drug deal (eg a £10 bag of heroin).

Table 12.1. Sex prices (after Voices Heard 2007)

<table>
<thead>
<tr>
<th>Description</th>
<th>Average price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full sex⁴</td>
<td>£37 (lowest £5)</td>
</tr>
<tr>
<td>Oral sex</td>
<td>£18 (lowest £3)</td>
</tr>
<tr>
<td>Hand job</td>
<td>£11 (lowest £2)</td>
</tr>
<tr>
<td>Anal sex</td>
<td>£30 (lowest £5)</td>
</tr>
<tr>
<td>Watersports</td>
<td>£32 (lowest £10)</td>
</tr>
</tbody>
</table>

⁴ Penetrative vaginal sex.
Entering the Lifescape

People enter this lifescape through a series of routes, many of which are associated with histories of abuse. McKeeganey (2006) reports from a study of street prostitution in Scotland, where for some of the women the decision to start working as a prostitute was shaped by early experiences of childhood sexual abuse. For many sex workers there is also a link to local authority care, often as a result of suffering abuse or neglect from their parents (40 per cent of those identified in the North East cohort). As Coy (2008) notes, the care system functions as a way of introducing girls to exploitative men and lifestyles.

Our research in the North East found many incidences of cases where children from the care system were involved in survival sex, as well as young adults who had been involved since a child (this concurs with national research: see, for example, Coy 2008; Davies 1998; Gibson 1995; El-Bassel et al 2001). These experiences of abuse commonly lead to risk-taking behaviour and substance misuse, another explanation given by people as to why they began survival sex work. The following two case studies illustrate some of these issues.

Case Study: Sexual Exploitation of Girl X

Girl X was 15 and living in supported accommodation in local authority ‘a’. Suspicion was initially raised when she became involved in a relationship with a 20-year-old man and started using drugs, but not paying for those drugs. She started a friendship with another girl (who was on the Child Protection Register as at risk of sexual exploitation) from local authority ‘b’. She started absconding from her supported accommodation and was known to be staying in local authority ‘b’ and involved in sexual exchanges. She was then raped by two men and, although she was taken to a paediatric unit, where she was shown to have serious internal injuries, and she made a complaint to the police, the case was not taken to court as ‘it was thought that it wouldn’t make a very good case … she wouldn’t make a very good witness’ (Hartworth 2009, 29). She then went to live at a women’s refuge in local authority ‘c’, near to three hostels. She then disclosed that she was having relationships with some residents of those hostels and once returned with bite and hand marks around her neck, although no complaint was made. She then started a friendship with a young woman at the refuge whose mother ran brothels and she disclosed soon after that she was working as a sex worker. She was moved out of the refuge and is now over 18 and pregnant and living back in local authority ‘a’.

Case Study: Sexual Exploitation of Girl Y

Girl Y is an 18-year-old female who has been sexually exploited since she was 14 years old and is now pimped by her father and brother who also live in the same B&B. She works from the B&B and advertises both on the internet and in The Sport. It was reported that ‘she doesn’t like having sex without a condom but is sometimes forced to … her father or brother negotiate a price with the customer over the phone on her behalf’ (Hartworth 2009, 31). Girl Y has a dependency on heroin and her drug intake is controlled by her father depending on how much money she has earned. At the moment she injects around six times a day and has seen up to 14 clients in one day.

Some others have entered the lifescape as an adult because of drug addiction. The Voices Heard (2007) research showed that 43 per cent of their respondents (n=37) reported drugs to be the primary reason for first becoming involved:
I went out one night as rattling me arse off, some bloke asked if I was doing business, I did it, I cried all the way through and was so desperate to get away I forgot the money, it was the drugs not really me, it's as simple as that. (Voices Heard 2007, 67)

Others become involved through homelessness, as one respondent explained: 'I met a girl when lived on streets we were desperate so when she told me she did it I started doing it too.'

It is often the case with survival sex that people begin to enter the lifescape by engaging in sex work only occasionally; these are usually problematic drug users who engaged in such work when other forms of access to money were not available. However, this frequently leads to much greater involvement in sex work and some go on to become full-time sex workers.

Locations of Survival Sex

The space in which sex work takes place is an integral part of why and how sex is sold in certain streets of cities and towns. Sanders (2004) argues that sex work locations are frequently the target of resources from public services, especially the growth of multi-agency partnerships and forums created to act upon what has historically been considered spoiled identities associated with drugs, disease, dysfunctional families and danger. As McKeganey (2006, 153) notes, sex work locations are typically described as having a 'very run down, derelict feel'.

Mcllwaine (2006) states that involvement in the sex industry creates a different set of spatial aspirations and awareness among sex workers compared with those of the wider population and Hubbard and Saunders (2003) argue that sex workers are actively engaged in adapting and moulding the space so that they can successfully sell sex. While 'spatial shaping' is doubtless true of the higher and middle sections of the sex market, it is less prevalent among survival sex workers, who are as likely to be 'shaped by' the spaces they inhabit.

Accordingly, while sexual exchanges and sex work were identified with specific areas in the North East, particularly those associated with drug users, survival sex was also found to take place in a range of other locations, including the outdoors (parks, woodland, etc), cars, hostels, B&Bs, fast-food outlets (in rooms commonly at the back of such venues) and people's houses. Street-based male and female sex work was reported to be taking place in car parks, bus interchanges, around hostels, pubs, clubs and on the streets. The on-street areas are not traditional red-light areas and, in a seeming contradiction, they are not places where clients tend to go to buy sex, but are places where sex workers know they can go if they need to sell sex. It has been pointed out by a sex worker support project manager in Newcastle that, in all of these on-street locations, 'if you didn't know what you were looking for, you wouldn't know it's there' (Hartworth 2009, 20). The off-street locations, such as B&Bs, people's houses and hostels, are equally hidden and will only be known to those who purchase and sell sex.

Social Networks

Very strong social networks exist among those involved in survival sex. Friendships are quick to develop and often seemingly strong, with a heightened distribution of essential resources. A common adage among survival sex workers is reported to be 'there's nothing we won't do for each other' and this is demonstrated by their sharing of essential resources (e.g. food and accommodation), helping another if they are financially able (e.g. with a train fare for an unexpected prison
visit) and the provision of care (after violent assault) and medical assistance (e.g. removing teeth). However, these strong networks, while almost playing the role of ensuring social reproduction within the lifescape, also serve to entrap people within it. These networks serve to connect individuals to drug use and the associated way of living and, when trying to stop drug use, these connections are almost impossible to maintain contact with. The resulting loss of social belonging and identity makes it very difficult for sex workers to leave the lifescape. Merleau-Ponty (1962, 286) describes the importance of belonging, of having a place in the world, and that without such social networks an individual is robbed of ‘individuality and freedom … I can literally no longer breathe’. Throughout our research, those few sex workers who have managed to leave the lifescape have reported that it was their social networks that made it so hard to get out. Without this social network they found it initially very difficult to negotiate the world outside of selling sex.

Discussion

The lifescape that we have presented here is one of drug use and addiction, homelessness, poor health and violence. It is a lifescape shaped by the interpretation and negotiation of ‘everyday places’. Cultural anthropologists Quinn and Holland (1987, 4) write about the ‘presupposed, taken-for-granted models of the world that are widely shared by the members of a society and play an enormous role in their understanding of that world and their behaviour in it’. Such a view, according to Reybold (2002, 539), supports both a way of knowing and a way of being. Reybold refers to this as an individual’s pragmatic epistemology, the experience of epistemology in everyday life. ‘These ways of being shape both mundane daily routines as well as profound life experiences’ and shape lifescapes.

We would argue that there is a need to better understand the value of ‘everyday places’, specifically the culturally specific dimensions of the links between well-being and place, and the significance of place in people’s everyday lives. Within the last five years and particularly within the geographies of health, such work is beginning to emerge. For example, a mixed method study of four localities in two cities in the North West of England explores the links between place, health-related social action at the individual and collective level and lay knowledge. In so doing, the study questions how shared social meanings about a place, what the authors refer to as ‘normative dimensions’, may shape the way people respond to the everyday experiences of living in a particular place (Popay et al 2003).

Minh-ha (1994, 15) writes about how ‘every movement between here and there bears with it a movement within here and within there’. Accordingly, McIlwaine (2006) notes how sex workers experience and construct urban spaces through residence and working patterns. On the one hand, they are constrained in their experiences of space. On the other, the construction of their own particular spaces reflects a high degree of resourcefulness and resistance. However, we would argue that, while spatial shaping is true of the higher and middle sections of the sex market, survival sex workers are more likely to be shaped by the spaces they inhabit.

Once again in this chapter we return to the work of Doreen Massey (1994; 2002), who states that rather than thinking of places as areas with boundaries around them, they can be imagined as articulated moments in networks of social relations and understandings. In this way the sex work lifescape is negotiated, shared and reaffirmed. Teo and Huang (1996, 310) state that place is an ‘active setting which is inextricably linked to the lives and activities of its inhabitants’. Thus
place is also about situated social dynamics and is multi-dimensional, holding different meanings for different social groups. As we discussed earlier, ‘if you didn’t know what you were looking for, you wouldn’t know it’s [sex work] there’.

Earlier we wrote that the lifescapes concept links with a substantial body of literature which explores the relationship between people and place. In this chapter we have used lifescapes to try to articulate that which is the sum of a ‘way of life’. Although it guarantees subsistence to those involved, it is a bleak lifescape and one that is difficult to escape, because people are trapped by addiction with few ways or means of an exit route. Leaving the lifescape is made harder by those networks that have supported those involved and made such a bleak life possible. This is compounded by its hidden nature; the majority of people do not know that the lifescape is there and this increases people’s isolation and the difficulty of escape.

Bibliography and References


Bender, B, 2001 Landscapes on the move, *Journal of Social Archaeology* 1, 75–89


Coy, M, 2008 Young Women, Local Authority Care and Selling Sex: Findings from Research, *British Journal of Social Work* 38, 1408–24

Daniels, S, 1994 Grasping the dynamism of lifeworld (communication), *Progress in Human Geography* 18 (4), 501–6


― 1996 Lourdes: healing in a place of pilgrimage, *Health & Place* 2, 95–105
Gibson, B, 1995 Male Order: Life Stories from Boys who Sell Sex, Cassell, London
Hartworth, C, 2009 Hidden Markets – Sex Work in Northumberland and Tyne and Wear, Think 4, Northern Rock Foundation, Newcastle upon Tyne
Howarth, C, 1999 Rebuilding the local landscape, Ashgate, Aldershot
McIlwaine, C, 2006 The Negotiation of Space among Sex Workers in Cebu City, The Philippines, Singapore Journal of Tropical Geography 17, 150–64
Massey, D, 1994 Space, Place and Gender, Polity Press, Cambridge
Minh-ha, T, 1994 Other than myself/my other self, in Travellers Tales (eds G Robertson, M Mash, L Tickner, J Bird, B Curtis and T Putnam), Routledge, London, 9–26
Popay, J, Thomas, C, Williams, G, Bennett, S, Gatrell, A, and Bostock, L, 2003 A proper place to live: health inequalities, agency and the normative dimensions of space, Social Science & Medicine 57, 55–69
Pope, C, Ziebland, S, and Mays, N, 2000 Qualitative research in health care: Analysing qualitative data, British Medical Journal 320, 114–16
Quinn, N, and Holland, D, 1987 Cultural models in Language and Thought, Cambridge University Press, New York
Reybold, L E, 2002 Pragmatic epistemology: ways of knowing as ways of being, International Journal of Lifelong Education 21, 537–50
Sanders, T, 2004 The Risks of Street Prostitution: Punters, Police and Protesters, Urban Studies 41, 1703–17
— 2005 Sex Work – A Risky Business, Willan Publishing, Devon

Urban Sense of Place
— 2006 Sexing Up the Subject: Methodological Nuances in the Female Sex Industry, Sexualities 9, 449–68
Seamon, D, 1979 A geography of the lifeworld, St Martin's, New York
Smith, F M, and Marshall, L A, 2007 Barriers to Effective Drug Addiction Treatment for Women Involved in Street-level Prostitution: A Qualitative Investigation, Criminal Behaviour and Mental Health 17, 163–70
Teo, P, and Huang, S, 1996 A Sense of Place in Public Housing: A Case Study of Pasir Ris, Singapore, Habitat International 20, 307–25
Voices Heard, 2007 Hidden for Survival: Peer Research into the Lives of Sex Workers Within Newcastle, Gateshead, Sunderland, South Tyneside and North Tyneside, Tyneside Cyrenians and Counted 4, Newcastle upon Tyne and Sunderland, UK
Wilson, K, 2003 Therapeutic landscapes and First Nations peoples: an exploration of culture, health and place, Health & Place 9, 83–93